Pan-Dorset Safeguarding Children Partnership









Review date: June 2020

Continuum of Need

This document is for use by all practitioners working with children and their families across Dorset, Bournemouth, Christchurch and Poole. It may be seen as the 'threshold document' required by <u>Working Together 2018.</u>

The purpose of the document is to help identify a child's degree of need, ensure support is offered by the right agencies, at the right time and prevent their needs escalating to a higher level. It will help identify when referrals to specialist Children's Social Care services are required.

The document should be used alongside the <u>Pan-Dorset multi-agency safeguarding policy and procedures</u>.

At no time must disagreement about levels of need prevent a child being safeguarded. The <u>Escalation Policy</u> provides guidance for those concerned that a child's needs are not recognised.

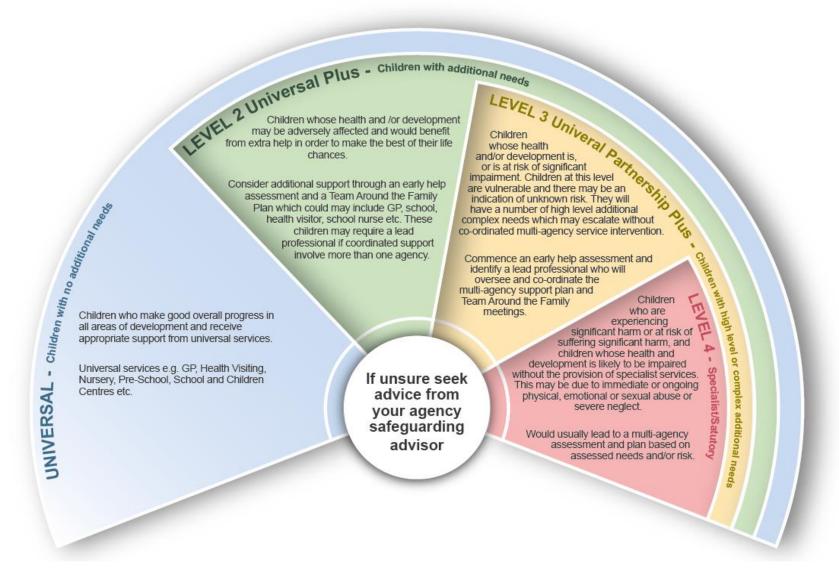
Contents:

- 1. Levels of vulnerability and need
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- 3. Indicators of need
- 4. Sources of further information

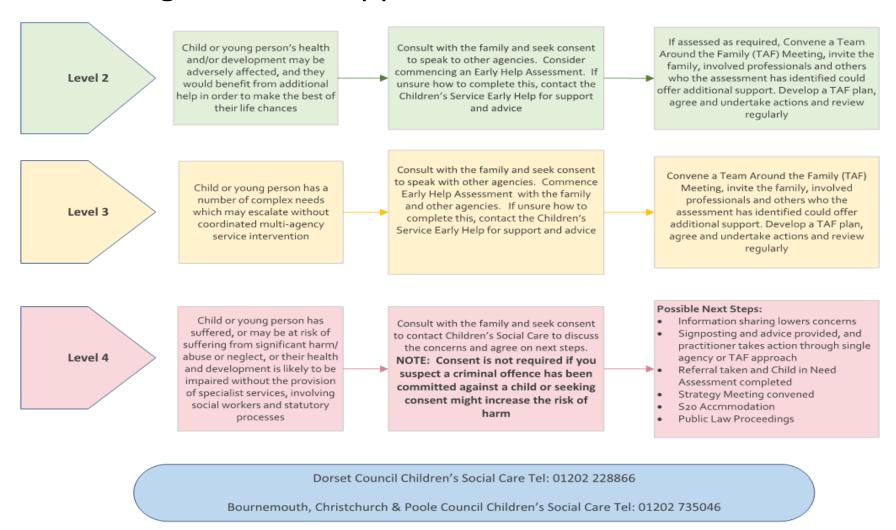
Guidance:

- This document refers to children, but includes the unborn, infants, children and young people. Agencies will be aware of child development, rather than chronological age, in applying to individuals. Principles of working with children will always involve their families and networks. They will form part of the 'Team Around the Family'.
- In the majority of cases, it should be the decision of parents/carers when to ask for help or advice, but there are occasions when practitioners may need to engage them actively to help them and prevent their difficulties from becoming more serious. If seeking consent increases the risk to the child, it can be overridden.
- Children who are disabled are entitled to a Section 17 Child in Need (CiN) assessment.
- The need identified in any assessment at Early Help or Children's Social Care level may be met from across the continuum of need, ie. at different levels of vulnerability.

Levels of Vulnerability and Need



Providing effective support to children and families



Indicators of need at different levels Note: this is an illustrative rather than comprehensive list of indicators Universal **Universal Plus Universal Partnership Plus Specialist** • Is generally physically well • Delay in reaching developmental milestones • Chronic/recurring health difficulties • Failure to thrive, likely to be due to care provided Nutritious diet • Minor concerns re diet, hygiene or clothing are not treated or are badly • Refusing medical care endangering life/development • Adequate hygiene and dress • Dental difficulties untreated/some decay managed • Seriously obese/seriously underweight Emotional and Behavioural Development, Identity, Relationships • Developmental milestones are not • Serious decay from persistent lack of dental care • Development and health • Missing some routine and non-routine health checks /immunisations up to being met due to parental care • Dangerous sexual activity and/or early teenage appointments • Concerns about developmental progress: e.g. • 'Unsafe' sexual activity date pregnancy • Developmental milestones overweight/underweight, bedwetting/soiling • Emerging mental health issues e.g. • Disclosure or suspicion of physical, sexual or emotional and motor skills appropriate • Experiments with tobacco/alcohol/ illegal drugs anxiety, depression, eating disorder abuse or neglect • Good mental health • Some difficulties with adult or peer relationships • Self-harming behaviours • Non-accidental injury and/or unexplained injury, Good quality early e.g. 'clingy', anxious or withdrawn • Age inappropriate sexualised particularly in non-mobile children **Developmental Needs** attachments • Limited engagement in play with others/has few behaviour • Disclosure of abuse/physical injury caused by a professional • Able to adapt to change or no friends • Child appears anxious, angry or • Understands others' feelings. • Vulnerable to emotional difficulties, perhaps in phobic • Acute mental health difficulties e.g. severe depression • Takes responsibility for response to life events such as parental separation • Young carer with development or risk of suicide behaviour • Finds accepting responsibility for own actions compromised through caring role • Physical/learning disability needing constant • Sexual activity is agedifficult • Ongoing, challenging behaviour at supervision appropriate • Showing early signs of anti-social school, possible risk of exclusion • Puts self or others in danger • Persistent and/or high-risk episodes of missing • Responds appropriately to behaviour/offending • Changed behaviour, reference to boundaries and constructive • Some insecurities re identity eq. low self-esteem, radicalised thoughts/ threats to act • Persistent and significant disruptive/challenging lack of confidence, sexuality, gender identity • Starting to commit offences/rebehaviour at school, home or in the community quidance • Can discriminate between • May experience bullying or be exhibiting bullying offend • Serious or persistent offending behaviour safe and unsafe contacts. behaviour Presentation (including hygiene) • Evident mental health needs. • Has positive self-image • Child/young person in behaviour and or significantly impacts on relationships • Relationships with family experienced as negative Childs • Distances self from others • Stable and affectionate appearance places self at risk of exploitation ('low warmth, high criticism') relationships with family • Lack of positive role models • Significantly poor self-• Rejection by a parent/carer, family no longer willing to • Has some difficulties sustaining relationships •Able to make and maintain image/identity care for, or have abandoned child/young person friendships • Disability limits amount of self-care possible • Few positive relationships • Child/young person is out of education or not receiving • Access to books and toys • Has some identified additional learning needs • Relationships with carers education due to parental neglect. Health, Learning, • Is provided with appropriate • Language and communication difficulties characterised by unpredictability • Serious professional concern; family declining services education and learning • Not reaching education potential • Disability prevents self-care in a • Unaccompanied refugee/asylum seeker • Enjoys and participates in • Poor punctuality/pattern of regular education significant range of tasks Privately fostered absences/fixed term exclusions • Child lacks a sense of safety and learning activities • Child displaying sexually harmful or abusive behaviour • Has experiences of success • Not always engaged in play/learning, poor often puts him/herself in danger. • Suspected risk of Female Genital Mutilation and achievement concentration • Consistently poor education • Child involved with serious, persistent, high risk • Sound links between home No access to books/toys attendance and punctuality substance misuse and education provider • Pregnancy with complications or impact of Consistently not reaching • Unborn baby impacted in utero by neglect/abuse • Planning for career/ adult life parental lifestyle educational potential • Unborn with needs met • Child reported missing from home

Universal **Universal Plus Universal Partnership Plus Specialist** • Provide for child's physical • Basic care is not provided consistently • Exposed to domestic abuse or • Persistent and high-risk parental substance misuse needs, e.g. food, drink, • Parent/carer requires advice on parenting issues chronic parental conflict within the • Parent/carer's mental health or substance misuse equipment, appropriate • Inappropriate child care arrangements and/or household or family significantly affects care of child clothing, medical and dental • Parent's mental health difficulties • Pregnant parents/carers who have been unable to care too many carers • Some exposure to dangerous situations in the or substance misuse affect care of care for previous children • Parent/carer is failing to provide safe physical care or • Protection from danger or home or community child/young person • Child has multiple carers, some of emotional support to child harm Unnecessary or frequent visits to doctor/casualty • Shows warm regard, praise • Parent/carer stresses starting to affect ability to whom may have no significant • Parents/carers involved in violent or serious crime or relationship with them. and encouragement ensure child's safety criminal offences against children Ensuring Safety, Emotional Warmth, Stimulation, Guidance and Boundaries, Stability • Ensures stable relationships • Low level parental substance misuse • Parental substance misuse impacts • Non-compliance of parents/carers with services where • Ensure the child can develop • Inconsistent responses to child/young person on ability to consistently meet child's risk of harm to child has been identified and Family a sense of right and wrong • Parents struggling to have their own emotional needs • Parents/carers own needs mean they are unable to Child/young person accesses needs met • Parents unable to set effective keep child/young person safe • A child/young person is taking on a caring role in play/activities/leisure facilities boundaries e.g. too loose/tight • Severe disability – parents who require additional as appropriate to age and relation to their parent/carer or is looking after • Parents are consistently unable to support and breaks in care to meet care needs interests younger siblings act as positive role models • Chronic and serious domestic abuse in the home • Good relationships within • No effective support from extended family. • Parents do not provide access to • Disclosure from parent of abuse to child/young person family, including when parents • Parent/carer offers inconsistent boundaries positive experiences • Suspected/evidence of fabricated or induced illness. Capacity • Child has no-one to care for him/her are separated • Lack of routine in the home • Provides limited access to new experiences or • Request for child to be accommodated. • No effective boundaries set by parents/carers leisure activities • Child beyond parental control • Parents sometimes find it difficult to positively • Contact with individual posing a suspected or known resolve conflict in their relationship Parenting risk to children • Family home used for drug taking, sex trade or other illegal activities Basic Care,

	Universal	Universal Plus	Universal Partnership Plus	Specialist
	Accommodation has basic	Family seeking asylum or are refugees	Chronic unemployment or poverty	Homeless, or imminent homelessness if not accepted
	amenities and appropriate	Periods of unemployment of parent/carer	that severely affected parents' ability	by housing department
	facilities to meet family needs	Parents/carers have limited formal education or	to meet the child's needs	Home conditions are dangerous or seriously
ontextual Factors Income and Employment Exploitation Risks	Managing budget to meet	are impacted by other disadvantage	Home conditions present a risk to	threatening to health
	individual needs	Low income or financial/debt difficulties/rent	child's safety or health	Physical accommodation places child in danger
	• Is able to access local services	arrears	• Family have physical and mental	Extreme poverty/debt impacting on ability to care for
	and amenities	Unsuitable accommodation/intentionally	health difficulties impacting on their	child
ညီ ခြင့္အ	• Family feels part of the	homeless	child	Child/young person is assessed as at risk of sexual or
	community	Not in education, employment or training post-	Community is hostile to family.	criminal exploitation, including through trafficking,
D P P		16 Some social exclusion or conflict experiences or	Child/young person experiences persistent discrimination which is	cuckooing and County Lines • Child/young person is at risk of radicalisation
		victim of crime or bullying	internalised and reflected in poor	Child/young person is known to be carrying weapons
Contextual Fincome and Empl		Child subject to persistent discrimination, e.g.	self-image	Child/young person has known involvement with
1 5 8		racial, sexual, disability	• Known to be at risk of exploitation,	gangs or organised crime group
ō ≧ 🛣		Difficulty accessing community facilities	sexual exploitation, violence,	Child/young person persistently involved with the
Q ç g		Parent/carer serving a prison sentence	criminality or radicalisation	supply of illegal substances
a iji o		Emerging behaviours which are seen as being	, , , , , , , , , , , , , , , , , , , ,	
and tegrati		anti-social or violent		
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Sources of further information:

- 1. Early Help Services:
 - Dorset Council area or Dorset Early Help
 - Poole area
 - •Bournemouth/Christchurch area
- 2. Children's Social Care (MASH Contacts)

BCP Council MASH – 01202 735046 MASH@bcpcouncil.gov.uk

Dorset Council MASH – 01202 228866 MASH@dorsetcouncil.gov.uk – for families and the general public

Dorset Council Children's Advice and Duty Service – Professional's Helpline – 01305 228558 (live from 2nd October 2019)

- Pan-Dorset MASH Inter Agency Referral Form
- 3. Child and Adolescent Mental Health Services (CAMHS)
 - Referral Guidance
 - •Referral form
- 4. Pan-Dorset Multi Agency Safeguarding Policies and Procedures

Includes: Making a Good Referral, Information Sharing Guidance and the Escalation Policy

- 5. Government Guidance
 - Working Together to Safeguard Children 2018 (Statutory Guidance)
 - •Keeping Children Safe in Education
 - •The Children Act 2004 This Act sets out the primary duties for all agencies in Sections 10 and 11