

## Buckinghamshire Safeguarding Children Board Thresholds Guidance: A Continuum of Help and Support

Version Control			
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V1.0	September 2014		Original document
V2.0	August 2015	Matilda Moss	Updated to reflect feedback from Thresholds consultation
V 2.1	October 2015	Matilda Moss	Version for publication
V 2.2	November 2015	Matilda Moss	Information relating to level 3 updated to reflect threshold for CIN.

Core principles for working with children and young people

1) Safeguarding children and young people is **everyone's responsibility**; everyone who comes into contact with children and families has a role to play.

2) Services should **intervene early** to tackle any problems as soon as they emerge. For children who need additional support.

3) The **child should be at the centre**, their needs are paramount. They must be listened to by professionals and have their voices heard.

4) Any services provided to safeguard children and young people must **be clearly** focused on outcomes for the child.

5) **Appropriate and timely information sharing** is critical to ensuring families receive the right help at the right time, reducing risk and preventing issues from escalating.

6) Services should use the **Early Help approach** set out in the Early Help Strategy to ensure a coordinated, multi-agency approach to assessing need.

7) **Partnership working and integraged service delivery** will promote the early identification of need and a coordinated response focused on securing the best outcomes for the child.

## **1** INTRODUCTION

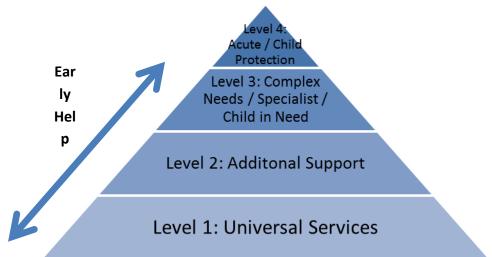
*Working together to Safeguard Children 2015*<sup>1</sup> sets out a clear expectation that local agencies will work together and collaborate to identify children<sup>2</sup> with additional needs and provide support as soon as a problem emerges. Providing help early is far more effective in promoting the welfare of children and keeping them safe, than reacting later when problems may have become more entrenched.

*Working Together 2015* also emphasises the importance of using a child-centred approach. All services which are provided must be based on a clear understanding of the needs and views of the individual child in their family and community context.

This **guidance** provides a framework to help all professionals that work with children, young people and families understand and work with thresholds effectively. It should be used alongside the following documents:

- **Thresholds document**: Sets out circumstances and key features across 4 levels of need to help professionals identify when a child and their family may need additional support to help the child reach their full potential. It also sets out the appropriate action to take to secure this support and provides examples of services across the 4 levels of need.
- Early Help Strategy: Early Help is used to describe support that is put in place at levels 1-3 of the Thresholds document. The Buckinghamshire Safeguarding Children Board (BSCB) *Early Help Strategy*, sets out how Early Help will be implemented and the expectation that agencies will use the agreed Early Help approaches and tools to facilitate a coordinated approach.

The Thresholds document and guidance introduce a continuum of help and support which is described through 4 levels of need that become increasingly targeted and specialised. By undertaking effective assessment and offering services on a continuum of help and support, professionals can be flexible and respond to different levels of need in different children and families.



<sup>&</sup>lt;sup>1</sup> Working together to Safeguard Children 2015: A guide to inter-agency working to safeguarding and promote the welfare of children

<sup>&</sup>lt;sup>2</sup> The Children Act (1989) defines a child as anyone who has not yet reached their 18<sup>th</sup> birthday.

# 2 WHAT IS A THRESHOLD?

A **threshold** is a point that is reached where support is required at level 1, 2, 3 or 4. The Thresholds document outlines circumstances and key features at each level to help professionals make a judgement about whether a threshold has been reached and decide what to do next. These circumstances and features relate to:

- The child's developmental needs
- Parenting capacity
- Family and environment

An **assessment** will provide the evidence that the level of need or threshold has been met. Some examples of assessments which might be used at each level are described within this guidance and on the Thresholds document.

Beyond the universal services provided at level 1, services that provide support within the different levels are likely to have **eligibility criteria** in order to access them. Practitioners are advised to check the eligibility criteria for specific services if this is not clear or known to them.

The Thresholds document lists a small number of the services available at each level to serve as an example. All service providers should ensure they make clear information available regarding the services they provide, including any eligibility criteria. This information should be included on the **Buckinghamshire Family Information Service** (BFIS) website which provides a directory of services that are available at different levels of need.

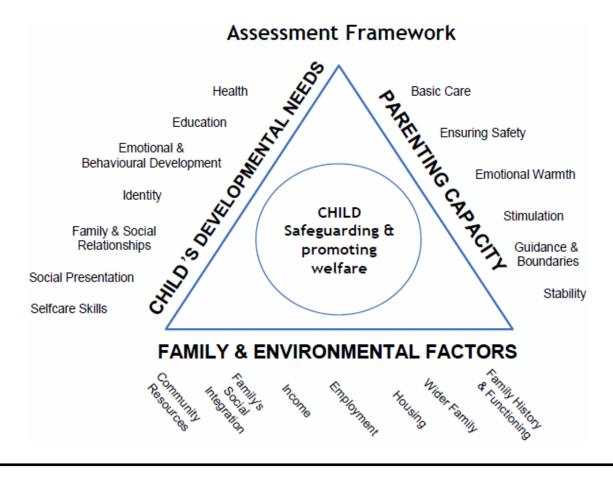
## **3 ASSESSMENT**

Effective and timely assessment enables professionals to understand the type and level of support that each individual child and their family will require. This includes pre-birth assessment where risks to unborn babies are identified.

It is important to gain an understanding of a child's situation within the context of the wider family and community in order to determine how a family may be best supported to meet their child's needs. To achieve this, agencies should work together and ensure that children and families are key partners in their assessment and plan; assessing their strengths and identifying emerging difficulties.

In undertaking assessment, agencies are expected to use the common tools for assessment set out in the BSCB Early Help Strategy to ensure a coordinated, multi-agency approach to assessing need. These are the Outcomes Star and the Graded Care Profile (for neglect). Working with these common tools will help promote coordinated, multi-agency working and joined up service delivery.

The **assessment triangle** below is a useful prompt for professionals to use when assessing children and young people. It can be used to assist practitioners across all services to gain a holistic understanding of the child by assessing circumstances and need across the 3 areas of: the child's developmental needs; parenting capacity; family and environment.



If during the assessment process a concern is identified that a child is or may be at risk of significant harm, all professionals should immediately contact First Response using the Multi-Agency Referral Form (MARF) or by calling 0845 4600 001 (0800 999 7677 out of hours). Call the Police on 999 if there is an immediate risk of harm.

## **Resilience and Protective Factors**

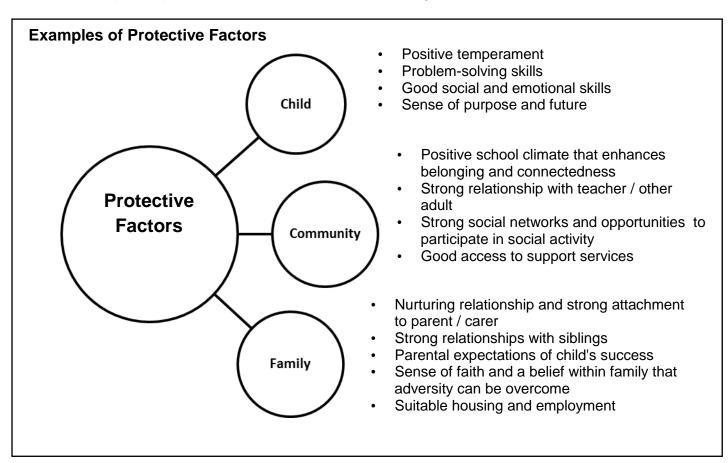
When working to identify needs and to plan interventions it is important that protective and resilience factors are considered alongside risk factors:

- **Resilience** concerns the ability to 'bounce back' or do well against the odds and will be influenced by a range of factors within individual children, such as temperament, personality, sense of self-esteem and self-worth
- **Protective factors** are those circumstances that moderate the effect of risk and vulnerability, and include positive nursery, school or community experiences and the presence of wider support such as extended family and friends

Together these factors can explain why some children do well even in the most adverse circumstances, whilst others in less stressful situations may struggle to cope.

The relationship between adverse and protective factors and the development of resilience is complex, but constitutes an important consideration when undertaking assessments and planning interventions.

Some examples of protective factors are provided in the diagram below.



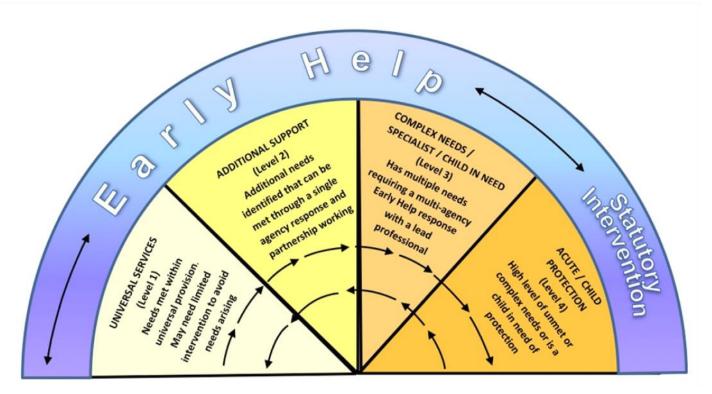
# 4 PROFESSIONAL JUDGEMENT

The Thresholds document provides examples of the circumstances and key features of a child and their environment. However, it is not exhaustive and children do not always fit neatly into specific levels. Practitioners should therefore use their professional judgement, experience and training alongside the information contained in the chart.

The presence of single or multiple combinations of factors, the age and resilience of the child and protective factors will all need to be taken into account. In particular, practitioners will need to take into account the cumulative effect of factors on the child.

If professionals need support or advice in making a judgement they should discuss this with their line manager or designated safeguarding advisor.

## 5 THE CONTINUUM OF NEED: WINDSCREEN MODEL



The windscreen model provides an alternative presentation of the 4 levels within the continuum of need. It helps show that children and their families may move in either direction along the continuum of need as their circumstances change over time. Universal services will remain involved with children and their families regardless of where they are on the continuum of support, but the additional support required may increase or decrease.

Children and young people should be able to access support at any time regardless of the level of support they need. This support should be provided in a timely manner, at the lowest level proportional to the assessed needs of the child/young person. The aim is to stabilise support and develop resilience amongst families, prevent escalation to higher levels and ideally restore support to universal services.

### Step up and step down

Given that children and their families may move up or down the continuum of need, it is important to ensure there are systems in place to enable 'stepping up' or 'stepping down' between levels of need. A robust assessment that is updated when needs change is key to ensuring an appropriate and timely response as circumstances change.

### Step down example

Step down describes the process that occurs when problems experienced by a child and family have been addressed, the objectives within the plan for the family have been met and the identified level of need has moved down on the continuum of need. Step down is a crucial facet of practice to prevent re-escalation and re-referral. It is important that professionals work together to sustain positive progress.



### Step up example

Step Up can occur across the continuum of need. Step Up describes the process of supporting children and families when additional, escalating need occurs.



## 6 Levels 1 to 4 within the Continuum of Need

#### Level 1 – Universal Services

**Description:** Children and young people whose needs are met by universal services such as schools and healthcare services, alongside the love, care and protection from parents and carers.

Children and young people in this category are making good overall progress in all areas of their development. Some limited intervention from a universal service may be needed to avoid needs arising or to meet a single identified need. The majority of children living in each local authority area will fall into this category.

**Response:** Agencies should identify what they can do first to support the child and their family through their own service.

**Assessment:** Agencies may use their own assessment processes to tailor the services they provide.

#### Level 2 - Additional Support

**Description:** Children and young people with additional needs that can be met through a single agency response or through agencies working together to provide a coordinated partnership response. The support required may only be short term, but if ignored, these issues could lead to need escalating.

**Response:** Agencies should refer to a single agency to meet identified need. Agencies can be identified through the Buckinghamshire Family Information Service website which provides details of

our Early Help offer. Towards the top end of level 2, agencies may need to work together to provide a coordinated service to support a child and their family who need support from more than one agency.

**Assessment:** Agencies should consider using our agreed Early Help assessment tools. These are the Outcomes Star and the Graded Care Profile (for neglect). An Early Help assessment will ensure that information is held centrally and is visible (with consent) to other professionals who may also have concerns. This approach is particularly helpful towards the top end of level 2 where more than one agency may be involved.

## Level 3 – Complex Needs / Specialist / Threshold for Child in Need

**Description:** Children and young people who have multiple and complex needs requiring a multiagency Early Help response with a lead professional. Level 3 also includes the threshold for a Child in Need. Although a Child in Need requires a statutory response from Children's Social Care, a statutory intervention is not necessarily required. For this reason the threshold for a Child in Need falls in level 3, but where a statutory intervention is required from Children's Social Care this would fall into level 4.

Children and young people in this category have increasing levels of un-met needs that are more significant and complex. The range, depth or significance of the problems faced by children at level 3 may begin to prevent them from achieving or maintaining a reasonable standard of health or development if they don't receive appropriate services. They are likely to require targeted and/or longer term intervention from specialist services.

**Response:** Agencies should contact First Response using the Multi-Agency Referral Form (MARF) or by calling 0845 4600 001 (or 0800 999 7677 for the out of hours Emergency Duty Team). Once contact is made, the case may be referred to Children's Social Care for a Child in Need assessment, or considered for referral to a multi-agency Early Help Panel. The Early Help Panel process helps agencies to work in a coordinated way around a child and their family. Relevant agencies will meet and agree a lead agency, who will then agree a lead family worker (LFW). The LFW will coordinate work with the family and across agencies to support their needs. They provide a central point of contact for the family and other practitioners, coordination of the plan of support and monitoring progress towards outcomes.

**Assessment:** The key tools for assessing need are the Outcomes Star, Graded Care Profile (for neglect) and a Child in Need assessment (a statutory assessment led by Children's Social Care under Section 17 of the Children Act 1989)

### Level 4 – Acute and/or Child Protection

**Definition:** Children and young people with a high level of unmet or complex needs or children who are in need of protection. Children and young people in this category are identified as having suffered or likely to be suffering significant harm or significant impairment to their health or development. Harm is defined under 4 possible categories: physical abuse, emotional abuse, sexual abuse and neglect. These children require intensive support under Section 47 of the Children Act 1989 (child protection plan).

Sometimes 'Significant Harm' will be a single, traumatic event, but more often it is an accumulation of significant events, both acute and longstanding over time, such as in situations of neglect

**Response:** Agencies should contact First Response using the Multi-Agency Referral Form (MARF) or by calling 0845 4600 001 (or 0800 999 7677 for the out of hours Emergency Duty Team). If there is a concern that a child is immediately at risk, call the Police on 999.

**Assessment:** Statutory assessment will take place under the provisions of the Children Act 1989. This will be led by Children's Social Care. Where a child is assessed to have met the threshold for statutory intervention there are various options available to ensure a child is protected from harm. This includes making the child subject to a child protection plan or taking the child into care.

Some case studies illustrating different levels are provided at appendix A.

# 7 Further Information

## **Information Sharing**

 Buckinghamshire Information Sharing Guidance for Practitioners and Managers: <u>www.bucks-</u> <u>lscb.org.uk/wpcontent/uploads/Professionals\_Protocol\_Guidance/Information\_Sharing\_Guidance\_for\_practitioners\_and\_managers.pdf - also add link to our procedure</u>

## **Escalating concerns**

 Where practitioners are unable to resolve any differing opinions about risk to children and young people, they should follow the BSCB's guidance on Escalation, Challenge and Conflict Resolution: <u>www.bucks-lscb.org.uk/wp-content/uploads/BSCB-</u> <u>Procedures/Conflict\_Resolution.pdf</u>

## Early Help

- The **BSCB Early Help Strategy** sets out how early help will be implemented and the expectation that agencies will use the agreed early help approaches and tools to facilitate a coordinated approach: ADD LINK
- Buckinghamshire Family Information Service (BFIS) website includes a full directory of services and contact details, including further details of our Early Help Offer: <a href="http://www.bucksfamilyinfo.org/kb5/buckinghamshire/fsd/home.page">www.bucksfamilyinfo.org/kb5/buckinghamshire/fsd/home.page</a>

## Allegations

 Where there are concerns or allegations about a member of staff or volunteer who works with children, the Local Authority Designated Officer (LADO) must be consulted: 01296 382070 or 01296 387820.

### Making a referral to Children's Social Care

 For information on what to expect when making a referral to Children's Social Care (via First Response) see the BSCB Individual Case Management Procedures: <u>www.buckslscb.org.uk/bscb-procedures/</u>

## **BSCB** website

 Please see the BSCB website for multi-agency safeguarding policies and procedures and for further information and guidance around a range of safeguarding issues: <u>www.buckslscb.org.uk/</u>

## 8 Glossary

The following list explains some of the key terms used within this guidance and the Thresholds document.

**Child in Need:** Under Section 17 of the Children Act 1989, a child is a Child in Need if: a) He / she is unlikely to achieve or maintain, or have the opportunity of achieving or maintaining a reasonable standard of health or development without the provision for him / her of services by a local authority;

b) His / her health or development is likely to be significantly impaired, or further impaired, without the provision of such services; or

c) He / she is a disabled child

**Children and Family Assessment – Section 17 / Section 17 assessment:** An assessment led by Children's Social Care under Section 17 of the Children Act 1989 to determine whether a child is a Child in Need.

**Graded Care Profile:** The Graded Care Profile is designed to be used with families where someone is concerned about the care of a child. It provides clear evidence based on Maslow's hierarchy of needs, grading them on 4 areas of family life: physical; safety; love; esteem. It is completed on a voluntary basis with the family, results are then collated and discussed with the family. In Buckinghamshire it is an agreed initial screening tool for neglect, across all the four levels of need. The family may then move onto involvement with an outcomes star where the family require support. After completing an Outcomes Star if the worker is concerned about possible neglect, the Graded Care Profile can be used as a more in-depth assessment. This is an open and transparent way of discussing concerns with a family in a non-judgemental way.

**Outcome Star:** The Outcome Star is Buckinghamshire's engagement, assessment, planning and distance travelled measurement tool. An Outcomes Star is used at levels 3 of the thresholds document but where appropriate can be used at level 2. It is a tool for practitioners and families to work together to understand needs and identify services required to meet those needs.

**Public Law Outline:** The Public Law Outline sets out streamlined case management procedures for dealing with public law children's cases. This includes applications for care orders, supervision orders and contact with a child whilst they are in care. The aim is to identify and focus on the key issues for the child, with the aim of making the best decisions for the child within the timetable set by the Court, and avoiding the need for unnecessary evidence or hearings.

**Section 20 (provision of accommodation):** Under Section 20 of the Children Act 1989, children may be accommodated by the local authority if they have no parent or are lost or abandoned or where their parents are not able to provide them with suitable accommodation and agree to the child being accommodated. A child who is accommodated under Section 20 becomes a Looked After Child.

**Section 31 (Care proceedings):** Care proceedings can be brought by the local authority under section 31 of the Children Act 1989 if there is concern that the child concerned is suffering or is likely to suffer significant harm attributable to the care being given to the child, or likely to be given if an Order were not made, not being what it would be reasonable to expect a parent to give, or the

child being beyond parental control. Where care proceedings are brought, the Court can make a range of orders under the Children Act 1989 including a care order, which gives parental responsibility to the local authority (making the child a Looked After Child) or a supervision order, which gives the local authority a supervisory responsibility.

**Section 47 enquiry:** Under Section 47 of the Children act 1989, if a child is taken into police protection, is the subject of an Emergency Protection Order or there are reasonable grounds to suspect that a child is suffering or is likely to suffer significant harm, a Section 47 enquiry is initiated. A section 47 enquiry involves a core assessment to enable to the local authority to decide whether they need to take any further action. The assessment usually involves the child, parents, and other agencies that have knowledge of the child. If the assessment shows that the child is at risk of significant harm, a child protection conference will be held.

**Significant Harm:** The Children Act 1989 sets out significant harm as the threshold for compulsory intervention in family life in the best interests of children. Significant harm may be physical abuse, sexual abuse, emotional abuse or neglect. Harm is defined as the ill treatment or impairment of heath and development. Under section 120 of the Adoption and Children Act 2002, this can include impairment suffered from seeing or hearing the ill treatment of another. There are no absolute criteria on which to rely when judging what constitutes significant harm. Sometimes a single violent episode may constitute significant harm, but more often it is an accumulation of significant events, both acute and longstanding, which interrupt, damage or change a child's development.

## Appendix A: Case studies illustrating different levels of need

## 1 Karen, Sharon, Ellie and Sam

Karen is a single parent aged 43, and is suffering from depression. She has told her GP that she is overwhelmed with what is happening at home and drinks a bottle of wine every night to help her sleep. She lives in a three bedroom council house.

Her daughter Sharon (13) is four months pregnant and appears to be out of control, she is on the internet until 3am daily and therefore unable to get up for school.

Karen's elder daughter Sam (17) lives at home and her partner Phil (16) had recently moved in resulting in Karen sharing a bedroom with her 10 year old daughter - Ellie.

Karen is unemployed and receives benefits and struggles financially, she has taken out several 'dodgy' loans. She obtains food from the local food bank to keep things going. Karen has tried to get help from a number of agencies but felt let down and believed that nothing could be done to improve things.

Should this be a referral? If so, to whom? Yes to Social Care (for Sharon)

### Threshold Level: 4

**Referral procedure:** Contact First Response using the MARF / call 0845 4600 001. For out of hours contact call the Emergency Duty Team on 0800 999 7677. Call Police 999 if immediate risk.

### Reason for referral:

- Child's development needs pregnancy
- Parenting capacity continuing poor supervision in the home and possible private fostering arrangement
- Family and Environment combination of substance misuse and mental health issues, extreme poverty affecting child well-being

### 2 Linda, Lauren and Andrew

Linda is mum to Lauren (14) and Andrew (10). She is divorced from dad Mick, who lives locally and supports financially but is not regularly involved with the children.

Lauren is often out on the streets late at night and often returned home by the police drunk. She says she can't talk to her mum.

Lauren has a recently diagnosed but lifelong physical disability, which she is finding hard to come to terms with and has consistently missed hospital appointments.

The police have visited her school and have found she is also at serious risk of permanent exclusion due to her poor behaviour and there is a pending court case due to truancy.

Linda has serious mental health issues and is receiving ongoing treatment from adult mental health services. She appears to have no control over Lauren or her son Andrew and is reluctant to accept

that there is a problem as she feels she should be able to manage.

**Should this be a referral? If so, to whom?** Yes – Early Help (for Lauren, assessments will pick up concerns about Andrew)

## Threshold Level: 3

**Referral procedure:** Initiate a multi-agency early help response. Contact First Response using the MARF / call 0845 4600 001.

### **Reason for referral:**

- Child's development needs Displaying some signs of emotional and behavioural disorder, missed appointments affecting developmental progress.
- Parenting capacity Mental health issues, being prosecuted for offences under the Education Act.
- Family and Environment Significant risk of CSE

### 3 Nikki

### This referral is being made by a neighbour

The neighbour reports that Nikki (22) has 2 children aged 2 and 3. There is no father living at the house. The two children attend a local nursery, the children appear well dressed and clean but Nikki herself looks ill.

The neighbour has often heard Nikki shouting at the children and has seen them playing alone in the garden.

Nikki seldom goes out other than to take the children to nursery but the neighbour reports there are several men who seem to visit the house regularly.

### Should this be a referral? If so, to whom? No

#### Threshold Level: 2

**Procedure:** Consider Early Help offer – use Buckinghamshire Family Information Service (BFIS) for information and where necessary signpost or refer to a single agency to meet identified need.

### Reason:

• Parenting capacity – poor supervision by parent, inconsistent parenting