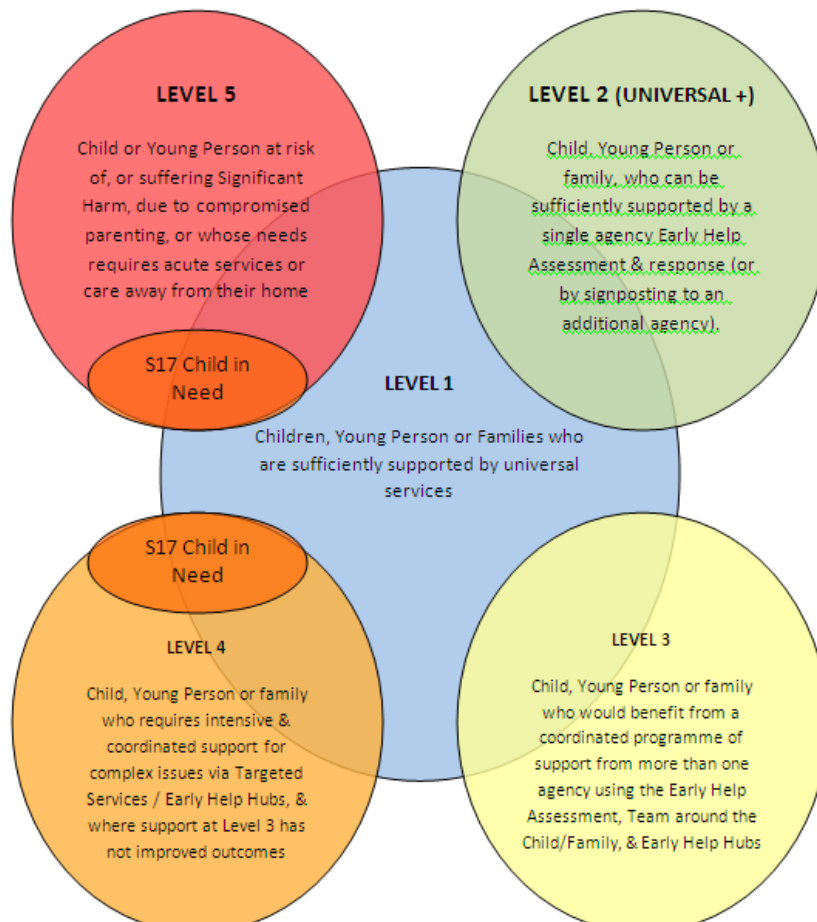


**Manchester Safeguarding Children Board - Multi-Agency Decisions Framework;
Delivering Effective Support for Children, Young People and Families
Draft – April 2016**

1.0 Introduction

- 1.1 Manchester’s refreshed Multi-Agency Need and Response Framework was launched in 2015 and was developed to assist those who work with Children, Young People and their families in Manchester.
- 1.2 The Framework seeks to assist practitioners in achieving Manchester’s vision to build a safe, happy, healthy and successful future for children and young people.
- 1.3 The Framework aims to encourage practitioners to work collaboratively with children, young people, families and partner agencies to ensure we have a sound understanding of existing strengths, competencies, past & current difficulties, so that we can respond at the right time, in the most appropriate and proportionate way.
- 1.4 It is important that our decisions framework remains a live document that reflects our learning and improvement journey. This revised “Decisions Framework” guidance has been updated as a means of reflecting Manchester’s evolvement towards the strengths based approaches in Early Help and the Signs of Safety approach in Social Care.
- 1.5 This framework has been co-produced with partners from the statutory / voluntary sectors, children, young people and families in Manchester.
- 1.6 This document provides a number of potential indicators as a means of helping practitioners to recognise the need to take action. However, no single worker holds all the information needed to achieve a comprehensive and balanced analysis; that sound evidence base can only be realised through meaningful dialogue with families and sharing information on a multi-agency basis.

MANCHESTER’S FIVE LEVELS (see diagram)



1.7 The five levels have been set out to reflect that children and families situations are rarely static, nor do families move in a structured way up and down the continuum. Traditional “tiered threshold” approaches do not take account of the complexities of children’s lives. Furthermore, it produces incentives to pass responsibility and “game the system” by artificially raising or lowering thresholds as a means of accessing service delivery threshold

1.8 Our framework supports the vision that children and young people should always have access to universal services, and for most children this will provide all the opportunities they need to reach their potential.

1.9 Early Help should start at the universal level, to enable early identification of emerging needs with a timely and effective response. Local knowledge and responsiveness in local services is often what helps families to get help early, and have consistent support. Practitioners should help in developing this strong locality based model of early help by connecting families and building networks of support, thereby promoting independence and self access to services at the earliest opportunity.

1.10 Sometimes targeted or specialist services will need to work alongside early help or respond where it has been identified that early help isn’t working. When this happens we need an early help offer which can draw down interventions at a higher level as appropriate but stay connected to universal and community services.

1.11 Universal and higher threshold services need to work closely together to ensure a joined up approach between services. The role of the Early Help hubs is to coordinate and support this approach.

1.12 A family should always stay connected to universal services. The drawing down of higher level services should be coordinated using a person centred approach which recognises the strengths of the family and enhances the community and universal offer.

2.0. Guiding Principles of the Decisions Framework

Manchester’s approach is based on the following guiding principles:

2.1 The child’s wellbeing and safety are paramount; Safeguarding and promoting the wellbeing of children and young people is everyone’s responsibility

2.2 We will be child and family centred, with a focus on jointly identified actions and outcomes

2.3 We will respond early so that children, young people and families receive the necessary support to prevent escalation into crises.

2.4 We will work collaboratively across agencies so that children, young people and their families reach their potential and achieve good outcomes.

2.5 We will aim to reduce unnecessary intrusion and duplication in families lives by the delivery of outcome based, person centred interventions using a lead professional / key worker model.

2.6. We will use the Early Help Assessment to capture a holistic, whole family picture of the strengths, worries, complicating factors and aspirations in plain language. .

2.7 In the vast majority of cases, parents and carers are best placed to care for their children with the support of universal services and extended family and this understanding will underpin our work, but good parenting is challenging, and drawing down additional support (and in fewer cases statutory intervention) is required.

2.8 We will take time to identify and build on existing strengths and support networks, connecting families to the local community offer.

2.8 Involvement of parents, carers and children (unless this poses a risk) will be a priority. We will respectfully listen to family members, and give importance to what they say. We will “do with families, not to families”.

2.9 We will listen to, and hear the voices of children and young people. This may take place without the presence of a child's parents/carers. Age-appropriate self-assessment tools have been designed to ensure the voice of the child is captured.

3.0. Indicators of the five Levels

3.1 The following "levels on a page" are designed to assist workers in establishing the decisions and responses to be made.

3.2 To support the delivery of Early Help, this document contains a broad range of indicators that may be explored during the Early Help Assessment. The presence, or absence of some of these indicators (for example employment, benefit sanctions, zero hours contracts etc) may highlight that support may be needed but most are not standalone indicators that families are failing and /or child protection issues are present (e.g. a parent who is not working may need help applying for a nursery place for his/her child and then access to advice about tax credits). Practitioners should use professional judgment when considering the range of indicators in the round.

3.3 The challenge of establishing how much support is needed can only be gathered following an evaluation of risk factors in the context of signs of strength & protective factors. Concerns regarding children are rarely "single events"; there is always a preamble and postscript, this is the nature of family life.

3.4 Conversations should not be solely fixed on the anxieties or uncertainties of the referrer. Conversations with families and practitioners working across the whole system need to be constructive, and seek to gather a whole picture of concerns *and strengths* so that we can work in collaboration to build a child / family centred plan to improve outcomes.

3.5 By working together effectively and earlier we seek to reduce the number of children and young people requiring statutory interventions and reactive specialist services.

3.6 Where there is uncertainty, or if there is a disagreement, then professionals should seek guidance from their safeguarding representative / manager in their own agency, and the matter should be **escalated until resolved** (at all levels). If the concern is about child protection than please see the Escalation Policy at manchesterscb.org

4.0 Having the Right Conversation

4.1 Manchester has heavily invested in promoting a strengths based approach to conversations supporting the delivery of effective early help.

4.2 In addition, Manchester is embarking on the Signs of Safety Methodology within social care. The SOS approach to protecting children requires investment in the "partnership" between practitioners, and the families they work with. Essentially this model promotes:

- Constructive relationships between practitioners and families members, and between professionals across the partnership
- Critical thinking and inquiry ***through effective dialogue***

4.3 The review of this framework has been undertaken to proactively align our assessment approaches so that we streamline "step up" and "step down" arrangements. Not only will this assist in embedding new approaches with our workforce, it will ultimately result in reduced impact on children and families (who have little regard for the way we arrange our services). It will simply translate as a reduction in the need for multiple and unnecessary assessments.

4.4 The strengths based Early Help Assessment has been re-developed to align with the SOS Assessment, and whilst we are not advocating a "Social Work" approach within early help, the strengths based conversations underpinning early help, does support an incremental move towards a whole system response.

4.5 Conversations across the continuum will now be centred around three core questions:

- What is working well?
- What are we worried about?
- What needs to happen?

4.6 This sound and well structured focus, undertaken with families, and in consultation with partners, will mean that our conversations will deliver the following advantages:

- Recognition of existing strengths and safety
- An understanding past and present worries in a wider context
- A joint, holistic and person centred plan of how to respond
- A response that's founded on collaboration, partnership and connectivity to community networks
- Promotion of a shared responsibility
- Recognition of the unique nature and individuality of children & their families / carers
- A reduction in the bias of individual professional and agencies decisions

Children and Whole Family Decisions Framework

		LEVEL	RESPONSE
Universal	Level 1	Children, Young Person or Families who are sufficiently supported by universal services	<p>Universal Services</p> <p>At this level, needs are met by parents, carers, communities and universal services.</p>
	Level 2	Child, Young Person or family, who can be sufficiently supported by a single agency Early Help Assessment & response (or by signposting to an additional agency).	<p>Undertake a strengths based early help conversation and record a summary within the Early Help Assessment record.</p> <p>Work with the family and plan a response, either single or multi-agency.</p> <p>The plan should be developed WITH the individual and family; the EHA should clearly articulate the child, young person and/or families voice.</p>
Early Help	Level 3	Child, Young Person or family who would benefit from a coordinated programme of support from more than one agency using the Early Help Assessment and a Team around the Child/Family meeting. Your Early Help Hub will be able to help in identifying and coordinating support.	<p>Complete an Early Help Assessment (EHA)</p> <p>At level 3, build on the strengths based conversation by holding a person centred meeting. This should involve the family; a Team Around the Family meeting. Agencies involved should work around the family in establishing what is important to them, putting the family firmly in the centre of the supporting plan and the subsequent coordination of activity.</p> <p>Connect the family to local support within their existing networks and community</p> <p>Use the parents, carers and/or young person's guide to the EHA to help to reassure families who are concerned about working together.</p> <p>If the family refuse consent you should contact an Early Help coordinator.</p> <p>If you have any safeguarding concerns ring Contact Manchester.</p>
	Level 4	Child, Young Person or family who requires intensive & coordinated support for complex issues via Targeted Services / Early Help Hubs, & where support at Level 3 has not improved outcomes	<p>An Early Help Assessment should have already been completed. Contact your Early Help Hub who will advise if a Specialist Assessment is required.</p> <p>An EHA may have previously been completed, but the outcomes have not been met by the multiagency action plan. The Child, Young Person and/or their family may require longer term intervention from statutory and specialist Services. Please contact your local Early Help Hub who will advise if a Statutory / Specialist Assessment is required, and will support in coordinating more specialist and targeted interventions if appropriate.</p>
Specialist intervention	Level 5	Child or Young Person at risk of, or suffering Significant Harm, due to compromised parenting, or whose needs requires acute services or care away from their home away from their home	<p>Statutory / Specialist Assessment</p> <p>If a child is in immediate danger then an urgent referral should be made to the police. Otherwise, urgently refer to the MASH 0161-219-2843 where practitioners can access specialist advice on safeguarding concerns. You must follow up the referral in writing in 48 hours. Visit / Signpost to the FSD / SEND local offer</p>

* Note - Level 4 is not Child in Need as defined by Sec 17 the Children Act 1989 "as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health & development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled. CIN may be assessed, in relation to SEND, as a care; or because they have committed a crime. Where an assessment takes place, it will be carried out by a social worker". There will be social workers within the EHH's who will screen & escalate cases that meet the threshold for Sec 17 assessment/ intervention.

Level 1

Children, Young Person or Family whose needs are being met, or whose needs can be met by universal services

Home Life

Housing

- Living in a clean and safe environment
- Access to transport and material goods
- Living near family and support network
- Young carers with some caring responsibility but well supported

Money

- Sufficient income to finance family needs
- Family managing their finances to ensure needs of family are met
- Appreciation of the value of money
- Access to bank account and credit.
- Regular income

Work Life

Employment

- In employment, training or undertaking voluntary work.
- Parents / YP actively seeking work or engaging with services that support them back to work.
- Parent/carer in employment or training
- Short-term unemployed (less than 1 year)
- Full-time carer

School / College Life

Education and Skills

- Attends school / college / educational provision at appropriate age and is on track achieves educational milestones
- Interacts with peers in play and learning in an appropriate manner developing positive relationships
- Family members engage with their children's education to support learning and development
- Supported to learn to develop independence
- Young person engaging well in education, employment or training post 16
- Able to speak and understand English
- Children and young people with SEND reach their potential

Social / Community Life

Behaviour / Social / Relationships

- Engages in positive law abiding behaviour in a socially acceptable manner
- Develops appropriate relationships with peers / family / community
- Develops self-confidence to address and deal with life challenges and decision making
- Children and young people who have effective support networks of family and peers
- Children's cultural needs are met
- Behaviour management is age appropriate
- Parent/Carer positive role model instilling a good code of ethics

Safety

- Safeguarded from crime and anti-social behaviour
- No exposure to domestic abuse, violence or harassment
- Aware of the law and boundaries of behaviour
- Parent/Carers set boundaries and safeguard from exposure to criminality
- Developing an understanding about risk and their own personal safety in line with age expectations
- Prescribed medication/alcohol is stored safely so children cannot access

Health and Emotional Wellbeing

Health and Wellbeing

- Meets developmental Physical, emotional and mental health milestones, & attends health and development appointments
- Healthy life style and promotes healthy choices – good mental health, appropriate sexual activity, healthy eating, physical activity, healthy weight. Safe and healthy sexual development characterised by age appropriate knowledge and behaviours
- Appropriate hygiene, appearance and self care
- Appropriate support and guidance from parent/carer
- Safe from maltreatment, neglect, emotional/sexual abuse and exploitation
- Engagement with universal services.
- Safe, secure and stable environment / network
- Attends health and development appointments
- No alcohol use during pregnancy

Drugs and Alcohol

- Child does not use alcohol, drugs, tobacco or other substances; receives age-appropriate education in universal setting (e.g. school)
- Parent does not drink/drinks at lower risk levels without impact on child(ren)/does not use illicit drugs or misuse prescribed/over the counter (OTC) medication

RESPONSE : At this level, needs are met by parents, carers, communities and universal services

Level 2

Child, Young Person or family, with additional needs that can be met by a single agency providing additional information, support and guidance or by signposting to an additional agency.

Home Life

Housing

- Poor housing, facilities in disrepair
- Not managing tenancy due to ASB, rent arrears, property condition
- Overcrowding
- Young people who need support or advice in relation to housing.
- Families seeking asylum / Asylum status unclear but no suspicion of Trafficking
- Child / Young person with caring responsibilities and Pregnant Teenager / Teenage Parent accommodated and receiving support.

Money

- Parents or carers struggling to manage their finances.
- Families affected by low income, irregular income or debt.
- Families are failing to prioritise needs of children

Work Life

Employment

- Young people disengaging from education training and employment post 16 years
- Households where no one works, adults are long-term unemployed (over 12 months) with low skills and not actively engaged in education, training or back to work programmes
- Intergenerational worklessness/lack of role models in work
- Extra stress from overworking making an impact
- Lack of access to childcare creating a barrier to employment
- Suspicions that parents are working for unknown / unregistered businesses / people

School / College Life

Education and Skills

- Children requiring additional/special educational support to meet their educational needs
- Children at risk of fixed term exclusion
- Patterns of attendance at school is causing concern
- Not making expected progress / an unexplained change in progress
- Parent/carers need support to engage in child's learning
- Child requires additional support to build positive relationships with peers and/or adults
- Requires additional support to develop independence skills
- Young people at risk of not accessing education, training or employment post 16 years

My Social / Community Life

Behaviour / Social / Relationships

- Children who have suffered loss / bereavement
- Child experiences bullying, including online but has support
- Some difficulties with peer group relationships.
- Child / Young person suffering from a lack of self confidence
- Sudden worsening of child's behaviour or bad language.
- Parents / carers with additional needs but are engaging with services
- Parents/carers struggling with child's behaviour
- Lack of support and encouragement by parent and carer

Safety

- Exposed to environments where there is domestic abuse
- Child beginning to have involvement in ASB
- Low level indicators of child or young person at risk of CSE, for example truancy, overuse of the internet, secrecy
- Parent / carer in custody
- Parents requiring additional support to provide safe & effective care
- Parental disclosure of Female Genital Mutilation but no risk to child
- Lack of awareness about risk and own personal safety in line with age related expectations
- Children left home alone (can cross all Levels of need categories depending on age of child / time left / frequency etc.)
- Parent/carers not taking adequate precautions around safe storage of medication / alcohol

My Health and Emotional Wellbeing

Health and Wellbeing

- Children not meeting some developmental milestones
- Children with well managed chronic long term illness
- Emerging unhealthy life style – poor hygiene, unhealthy diet, and inactive lifestyle / overweight and are engaging with services
- Non engagement with some services
- Missing / cancelling routine and non-routine appointments and increased attendance at ED/GP
- Low levels of stress, anxiety and depression and is receiving support
- Children who are suffering loss / bereavement / trauma
- Parents / carers with additional needs but are engaging with services
- Lack of, or excessive knowledge and/or interest of own physical development and puberty or sex
- Pregnant teenager accessing support and healthcare

Drugs and Alcohol

- Child/young person experimenting with alcohol/drugs/solvents/smoking and is actively engaged with support
- Parent/carers drinks above lower risk levels and/or uses illicit drugs/misuses prescription or OTC medicines and is actively engaging with support to understand impact on child(ren) and make positive changes

RESPONSE: Consider using the Early Help Assessment Tool as a means of identifying needs and plan a response, either as a single agency, or with the support of other agencies. Consider contacting the Safeguarding Lead within your agency for further support and guidance. Visit the Early Help Zone of the Family Service Directory (FSD). Signpost family to the FSD / SEND local offer

Level 3

Child, Young Person or family who need a coordinated programme of support from more than one agency

Home Life

Housing

- Child/Young Person or family in temporary or overcrowded housing
- Disrepair of property and landlord not engaging
- Home environment or hygiene is beginning to place the child in an unsafe environment
- Pregnant Teenager / Teenage Parent in inappropriate accommodation
- Immigration status and access to official documents not clear raising suspicions of Trafficking / Modern day slavery

Money

- Parent/carers consistently unable to meet child's basic needs due to poverty
- Lack of budgetary skills or inappropriate spending impacting on ability to meet child/young person's needs
- Rent arrears put family at risk of eviction or proceedings initiated
- Family finances further impacted by high interests loans and high repayments
- Family at risk of violence due to non-payment of unregulated loans
- Families transitioning from temporary homeless accommodation due to limited resources to set up home

Work Life

Employment

- Not engaged to find employment or go into further education
- Teen parents/carers where caring responsibilities impact on availability for work
- Lack of supportive network
- Not work ready (no bank account/ID etc.)
- Stress from unemployment or overworking having impact on other aspects of family life.
- Parents find it difficult to gain employment due to poor basic skills
- Parents unable to discuss their finances with agencies

School / College Life

Education and Skills

- Children with who meet threshold for persistent absence from school
- Child or young person underachieving significantly at school because of an underlying special educational need
- Child or young person underachieving significantly compared to age related expectations without an underlying special educational need
- Parents not responding to support provided to help them engage in child's learning
- Child lacks age appropriate independent skills
- Young people not accessing appropriate education, training or employment post 16 years and has limited or no qualifications

My Social / Community Life

Behaviour / Social / Relationships

- Evidence of inappropriate age related sexual behaviour
- Children with increasing behaviour, emotional and social difficulties
- Parent/carer is not ensuring the child has a secure, stable and affectionate relationship
- Family has poor relationship with extended family or little communication.
- Child is unable to develop positive relationships with peers and or adults and is becoming isolated as a result
- Child, young person and/or family suffering isolation
- Signs of radicalisation

Safety

- Children in families where there is evidence of domestic abuse
- Child regularly missing from home
- Increasing indicators of child / young person at risk of CSE – truancy, over use of internet, secrecy
- Child or young person living in an environment where there is prolonged mental and emotional abuse
- Children associating with offenders and regularly exposed to criminal behaviour
- Parental / sibling / self disclosure of FGM within the community
- Child is beginning to engage in inappropriate risk taking behaviour

My Health and Emotional Wellbeing

Health and Wellbeing

- Child not achieving age appropriate developmental milestones and requires additional support services
- Children / parents who have unmet complex health needs or terminal illness e.g. child with disabilities [or children with lifelong disabilities]
- Children who are consistently not brought for medical appointments / do not engage with treatment plans
- On-going concerns re hygiene, weight, appearance, and self-care
- Young Carer with un-met needs impacting on education and social community life
- Parents who have additional need which impact on their ability to meet their children's needs
- Sexual behaviour that is age inappropriate or unusual for the particular child or young person
- Pregnant teenager not engaging with appropriate support services

Drugs and Alcohol

- young person at risk from own alcohol/substance use and is not engaging with support
- Parent/carer drinks above lower risk levels and/or uses illicit drugs/misuses prescription or OTC medicines and is not engaging with support to understand impact on child(ren) and make changes
- Child is exposed to unsuitable adults/carers or left unsupervised while parent/carer is intoxicated or suffering effects

RESPONSE: An Early Help Assessment must be undertaken to identify and evidence the level of need, and to plan the holistic multi-agency response. This is done with parental consent, via a Team Around the Family Meeting (TAF) coordinated by the nominated Lead Professional. Ensure the family understand the benefits of engaging in an early help assessment. Make it clear Early Help is about being supportive. If the family still refuse consent you should contact an Early Help coordinator.

If you have any safeguarding concerns ring Contact Manchester. Visit / signpost to the FSD EH/SEND local offer

Level 4

<p>Child in Need and / or Child, Young Person or family who requires intensive & coordinated support for complex issues via Targeted Services / Early Help Hubs, &/or where support at Level 3 has not improved outcomes</p>
<p>Home Life</p> <p>Housing</p> <ul style="list-style-type: none"> • Child is living independently in unsuitable accommodation e.g. B&B, Hostel • 16 or 17 year old asked to leave the family home • Child/Young Person/Family homeless or in danger of imminent eviction • Property in significant state of disrepair and Landlord not engaging • Pregnant Teenager / Teenage Parent at risk of homelessness <p>Money</p> <ul style="list-style-type: none"> • Child/young person constantly presents with no funds for transport, food etc. • Parent/carers unable to meet their children's long term basic needs as a result of poverty/lack of budgeting skills/ other vulnerabilities • Reliant on food banks & other charitable donations to subsist • Chronic unemployment affecting adults, combined with other factors such as significant household debt and multiple impact of welfare reforms (bedroom tax, Invalidity Benefit re-assessment, household cap etc.) • Someone else appears to control family finances indicating possible Trafficking / Modern Day slavery
<p>Work Life</p> <p>Employment</p> <ul style="list-style-type: none"> • No expectations that YP will work / Lack of confidence to cope with the workplace, anxiety/agoraphobia • Needing Education Health & Care Plan to access High Needs Funding • Long term unemployment. Significant barriers to accessing employment i.e. criminal record, disabilities, mental ill health • Parents / Carer have long term worklessness (3 years plus) with very poor literacy & numeracy skills / inability to communicate in English, which has severely affected parents'/ family identity
<p>School / College Life</p> <p>Education and Skills</p> <ul style="list-style-type: none"> • Parent / carer has received support but is still struggling to support the child in terms of attendance / behaviour/ progress & emotional wellbeing • No school place available. International new arrivals/ immigrants without a school place • Child or young person underachieving significantly at school because of an underlying SEND & may need a statutory assessment of their needs • Young people refusing to access appropriate education, training or employment post 16 years and has limited or no qualifications
<p>My Social / Community Life</p> <p>Behaviour / Social / Relationships</p> <ul style="list-style-type: none"> • Chaotic and inconsistent family support networks • Child persistently neglected / socially isolated • Child or young person with severe disruptive/ challenging behaviour. • Persistent sexual texting (sexual exploitation). Cyber bullying with no protective factors • Child has no positive relationships with peers and or adults and is isolated as a result • Children previously on Child Protection Plan in the last 6 months <p>Safety</p> <ul style="list-style-type: none"> • Indicators and concerns of Forced Marriage / (Honour Based Violence (HBV) / Female Genital Mutilation(FGM) that requires further assessment and parental / sibling disclosure of FGM within the family • Child continually missing from home / Child at risk of sexual exploitation • Frequent accidental injuries as a result of inadequate supervision • Significant incidents of Domestic Abuse • Child is engaged in inappropriate risk taking behaviour which may impact on their safety and that of others
<p>My Health and Emotional Wellbeing</p> <p>Health and Wellbeing</p> <ul style="list-style-type: none"> • Children not achieving developmental milestones despite additional services and support • Children with mental health issues needing significant support • Children with complex health needs or terminal illness and needs that cannot be met by their parent / carer • Children who are persistently neglected which is impacting on a child's development • Missed/cancelled appointments which have a significant impact on the child's health • Non-compliance with treatment plans / medication regimes / treatment not sought • Parents, carers who have multiple health /social /environmental needs which significantly impact on their child's health and development • Young carers with inappropriate caring responsibilities that significantly impair their development • Concerns about risk to unborn • Children with acute disabilities and/or disabilities that cause a complex range of difficulties • Sexual behaviour that is potentially harmful to the child or young person and/or their peers • Pregnant teenager not accessing health care <p>Drugs and Alcohol</p> <ul style="list-style-type: none"> • High risk indicators that child/YP at risk from own alcohol/substance use (frequency/circumstances/ route of administration – depending on age and substance) or signs of dependence • Parent/carer unable to meet child's basic needs due to intoxication, effects the next day, impact on finances and/or housing • Parent/carer persistently does not recognise impact of own use on child's needs / consequences of continuing to use • Both parents/carers misusing
<p>RESPONSE: An Early Help Assessment may have previously been completed, but the needs have not been met by the multiagency action plan. The Child, Young Person and/or their family may require longer term intervention from statutory and specialist Services. Please contact your local Early Help Hub who will advise if a Statutory / Specialist Assessment and / or a referral to the MASH is required, and will support in coordinating more specialist and targeted interventions if appropriate. Visit / Signpost to the FSD / SEND local offer</p>
<p>Note - Level 4 is not Child in Need as defined by Sec 17 the Children Act 1989 "as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health & development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled. CIN may be assessed, in relation to SEND, as a carer, or because they have committed a crime. Where an assessment takes place, it will be carried out by a social worker". Social Workers within the EHH's will screen & escalate cases that meet the threshold for Sec 17 assessment/intervention.</p>

Level 5

Child or Young Person at risk of, or suffering Significant Harm, due to compromised parenting, or whose needs requires acute services or care away from their home

Home Life

Housing

- Unaccompanied asylum seeking children
- Unsafe home conditions present serious health risk to child
- Children who are privately fostered
- Emergency housing needs as a consequence of fleeing domestic violence / gang reprisal
- Children who have been abandoned
- Pregnant Teenager / Teenage Parent experiencing homelessness

Money

- Extreme poverty/debt impacting on ability to function normally in society
- Lack of financial means/support leading to acquisitive crime
- No recourse to public funds and no access to other means of support / Families not in receipt of benefits
- Families in crisis without the means to meet their children's basic needs in terms of food, utilities, nappies

Work Life

Employment

- Child/Young person in custody or on licence
- Child/Young person failing to gain employment due to long-term issues including chronic health, and substance misuse
- Chaotic lifestyle meaning that young people and adults can't enter into or sustain employment
- Never worked and /or unable to gain employment

School / College Life

Education and Skills

- Persistent non attendance at school despite a range of intervention eg penalty notice
- Child has been permanently excluded from school
- Parents are inappropriately or intermittently engaged with their child's education and lack awareness of their responsibilities
- Young people refusing to engage with any services

My Social / Community Life

Behaviour / Social / Relationships

- Child/YP with extreme behaviour, significant risk to themselves or others and are at risk of removal
- Online grooming
- Participate in gang activities / Children who are risk of causing significant physical or sexual harm to another child.
- Participates in extremist actions in language and behaviour
- Child is isolated and lacks self care and self worth
- Child appears guarded of questions regarding personal details once familiar relationship has been established an indicator of trafficking

Safety

- Evidence of child at risk of Forced Marriage / (Honour Based Violence (HBV)
- Evidence that FGM (Female Genital Mutilation) has taken place or of intent that child will undergo FGM
- Lack of supervision results in child suffering significant harm
- Child under 13yrs engaged in sexual activity / child has sexually transmitted disease
- Children who are sexually exploited / trafficked
- Child disclosing sexual, emotional or physical abuse
- Child / young person living in an environment where there is prolonged mental and emotional abuse
- Child involved in criminal / gang activities
- Young person is living in prison / secure accommodation
- Children subject to proceedings initiated by the local authority
- Children persistently missing from home regularly for long periods
- Children who are privately fostered who are at risk / inappropriate arrangements
- Children who are fire setting and are placing themselves and others at risk
- Domestic abuse results child / unborn at risk of significant harm
- Child is engaged in inappropriate and dangerous risk taking behaviour which impacts on their health and safety and that of others

My Health and Emotional Wellbeing

Health and Wellbeing

- Child disclosing sexual, emotional or physical abuse, or suffering persistent, chronic neglect
- Children with unexplained inconsistent injuries
- Children with significant mental health concerns
- Evidence of child at risk / experiencing fabricated and/or induced illness
- Children who have been abandoned
- Unborn babies where previous significant child protection concerns have been identified
- Parents refuse or do not access medical care resulting in significant harm to child
- Parental mental health, substance misuse, learning difficulties or physical health present significant risk of harms to their child and cannot maintain their safety (including harm to unborn child)
- Parents/carers not able to meet physical, emotional and developmental needs
- Sexual behaviour that is harmful to the child, young person and/or their peers

Drugs and Alcohol

- High risk indicators that child/YP at risk from own alcohol/substance use (frequency/circumstances/ route of administration – depending on age and substance) or signs of dependence & serious risk to safety
- Both or only parent /carer cannot maintain safety of child/YP due to their alcohol/drug misuse
- Parents chronic non-attendance, lack of engagement or recurring relapse in adult treatment services / Evidence of superficial compliance

RESPONSE: If a child is in immediate danger then an urgent referral should be made to the police. Otherwise, urgently refer to the MASH **0161-219-2843** where practitioners can access specialist advice on safeguarding concerns. You must follow up the referral in writing in 48 hours.

4.0 Further guidance on how to determine at what level a Child or Young Person is on the Needs Framework

4.1 The indicators listed within the tables are provided solely to assist in providing some information “what you might see” at each level of need. Practitioners should use their professional judgement, and may wish to consider the following when determining the need of the child, young person and their family:

- What is working well, and what is not working well for this Child/ Young Person, Family?
- Is this child's/young person's/family's being adequately supported to get things going well?
- Have I ensured that the child has had an opportunity to be observed, speak, be heard and listened to meaningfully?
- What are the relevant and complicating factors at the core of the child's/young person's/family's situation?
- Have I asked about what matters to the person? The starting point for maximising a person-centred approach is to work with the individual to define what is important to them, and to plan activities and support from there.
- Do I have a picture of the family as a whole?
- Have I used the framework prompts to make me think more clearly and understand the situation?
- Have I considered any previous history of support, service involvement, patterns and the current risk and protective factors within the family?
- Am I sure about my understanding of the information? If not, take advice in the first instance from your line manager or your agency's safeguarding advisor.
- Have I discussed my analysis of the identified needs with other professionals involved with the child to achieve a more holistic approach?
- Have I discussed my concerns with the child/young person/family and offered advice and support?
- Have I asked the parents for written consent to my involvement, my assessment and /or referral and to information sharing to help engage services quickly?
- Have I been sufficiently professionally curious?
- Have I thought about the needs of any siblings?
Have I fully considered the role of both parents /absent parents/ grandparents? **EMEMBER**
- **Put yourself in the child's place**
- **Think about what the child/young person/family experience really is**
- **If you think a family needs support, act. Never do nothing.**
- **Get involved and help make a difference.**

5.0 Transition Between Levels

5.1 It is acknowledged that children will move up and down on the continuum and the necessary response will need to flex accordingly.

5.2 Universal and Targeted Services will meet the needs of the majority of children and families. It is an expectation that where families need support, their needs should be identified and addressed through an Early Help Assessment, Team Around the Family (TAF) Meeting and a multi-agency action plan. The decision to close the plan, or escalate, or reduce the level of intervention MUST be agreed at a TAF review meeting without exception.

5.3 If the needs have not been fully met the Lead Professional will continue with the role until the plan has been closed. Where the need continues to escalate despite the plan, then the lead professional should liaise with their local Early Help Hub, who should be able to provide further support and guidance. The Plan remains with the Lead Professional until there is a formal handover to another appropriate key worker. This decision will be made in agreement with the TAF members and will be centrally documented.

5.4 Child in Need (CIN) under Section 17 of the Children Act 1989 is about the Local Authorities responsibility to provide services through early help and a statutory duty to assess children where there is a belief that they are in need.

Child in Need as defined by Sec 17 the Children Act 1989 *“as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health & development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled. CIN may be assessed, in relation to SEND, as a carer, or because they have committed a crime. Where an assessment takes place, it will be carried out by a social worker”*.

Social Workers within the Early Help Hubs will screen for cases that meet the threshold for Sec 17 assessment/intervention. The Early Help Hubs will be closely aligned with the Multi-Agency Safeguarding Hub (MASH), so that cases can be swiftly assessed and escalated / de-escalated

5.5 Level 5 Step down: In situations where the child's need for protection have been met at level 5 through a Child Protection Plan, and the plan is no longer needed, Children's Social Care will continue to lead on the intervention for as long as is deemed necessary. This will be decided at a review meeting and recorded on the Case File.

5.6 Step Down from Social work to Early Help: This will occur where a Child, young person or family that has been supported by Social Care or the Child in Need Team, and has been assessed as no longer requiring social work intervention, but would benefit from robust support from targeted services and support. The Social Worker should step down cases via the Early Help Hub who will support in allocating a new key worker and coordination of services.

5.7 In situations where the child's needs escalate and Social Care intervention is required, the statutory assessment will supersede the EHA and therefore the EHA should be closed.