

Threshold Document - Continuum of Help and Support

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1. Introduction

[Working Together to Safeguard Children \(2013\)](#) sets out a clear expectation that local agencies will work together and collaborate to identify children with additional needs and provide support as soon as a problem emerges. Providing early help is far more effective in promoting the welfare of children – and keeping them safe – than reacting later, when any problems, for example neglect, may have become more entrenched. The importance of using a child-centred approach in following the child’s journey is also emphasised. 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 document provides a framework for professionals who are working with children, young people and families; it aims to help you identify when a child may need additional support to achieve their full potential. It introduces a continuum of help and support, provides information on the levels of need and gives examples of some of the indicators that a child or young person may need additional support. By undertaking assessments 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. Along this continuum, services become increasingly targeted and specialised according to the level of need. Children’s needs are not static, and they may experience different needs – at different points on the continuum – throughout their childhood years.

This thresholds document provides the overarching framework for London. Each London Local Safeguarding Children Board (LSCB) should provide additional guidance locally to set out the process for early help assessment and the type and level of early help services to be provided. It should also clarify the threshold for making a referral to the Local Authority Children’s Social Care for assessment and statutory services under S.17, S.47, S.31 and S.20 of the Children Act 1989.

Remember – where there is an immediate need to protect a child because they are being harmed or are likely to suffer significant harm, contact the Police or Local Authority Children’s Social Care without delay.

2. Core Principles when Working with Children, Young People and Families

- Safeguarding children and young people is everyone's responsibility; everyone who comes into contact with children and families has a role to play;
- Services should intervene early to tackle any problems as soon as they emerge. For children who need additional help, every day matters;
- The child should be at the centre, their needs are paramount. They must be listened to by professionals and have their voices heard;
- Any services provided to safeguard children and young people must be clearly focused on the outcomes for the child.

Professionals should consider: **The Welfare Checklist to which courts will have regard when deciding whether to make an order in respect of a child (s.1 Children Act 1989):**

- a. The ascertainable wishes and feelings of the child concerned (considered in the light of his/her age and understanding);
- b. His/her physical, emotional and educational needs;
- c. The likely effect on him/her of any change in his/her circumstances;
- d. His/her age, sex, background and any characteristics which the court considers relevant;
- e. Any harm which s/he has suffered or is at risk of suffering;
- f. How capable each of his/her parents, and any other person in relation to whom the court considers the question to be relevant, is of meeting his/her needs.

Working Together to Safeguard Children (2013) requires each local authority area to publish a local assessment protocol which sets out clearly the arrangements for how cases will be managed once a child is referred into local authority children's social care. The assessment protocol should ensure that assessments are timely, transparent and proportionate to the needs of individual children and their families.

Effective assessment requires all those working with children, young people and families to:

- Be alert to children and their needs;
- Remember that the child's needs are paramount. Where professionals provide services to adults they must consider the adult service user in their role as a parent or carer and assess the risks to any children in their care or with whom they have contact;
- Understand their individual role in keeping children safe, and the role of others; and
- Be able to identify symptoms and triggers of abuse and neglect and share information with other professionals in a timely way.

3. The Four Levels of Needs

1. **Children with no additional needs** – these are children with no additional needs; all their health and developmental needs will be met by universal services. The majority of children living in each local authority area require support from universal services alone;
2. **Children with additional needs showing early signs of vulnerability** – these are children with additional needs, who may be vulnerable and showing early signs of abuse and/or neglect; their needs are not clear, not known or not being met. This is the threshold for a multi-agency early help assessment to begin (this is also sometimes know as a common assessment, CAF or a Family CAF);
3. **Children in need who require statutory or specialist services** – these are children who are unlikely to achieve or maintain a satisfactory level of health or development, or their health and development will be significantly impaired, without the provision of services; or children who are disabled. They may require longer term intervention from statutory and specialist services. This is the threshold for an assessment led by children’s social care under s.17 Children Act 1989;
4. **Children who are suffering or likely to suffer significant harm** – these children are suffering or are likely to suffer significant harm. They will require intensive support under s.47 Children Act 1989. This is the threshold for child protection.

.. see following page for Level 1 table

4. Level 1 – Children with No Additional Needs; Universal Services

These are children with no additional needs. All health and developmental needs can be met by universal services. Most children will achieve their full potential through the provision of universal services alone.

Example Indicators	Action and the Assessment Process	Services which might be involved with children and families at this level of need
<p>Developmental Needs</p> <p>Learning / Education Achieving Key Stages. Good attendance. Planned progression beyond statutory school age. No barriers to learning.</p> <p>Health Good physical health with age appropriate developmental milestones; including speech and language.</p> <p>Social, Emotional, Behavioural, Identity Good mental health, psychological well being. Good quality early attachments, confident in social situations.</p> <p>Family and Social Relationships Stable families where parents are able to meet the children’s needs.</p>	<p>No multi-agency assessment is required. Children will access services in the usual way.</p>	<p>Education; Children’s Centres and Early Years Settings; Health Visiting; School Nursing; G.P.; Midwifery; Youth Services; Police; Housing; Voluntary and community sector.</p> <p><i>Add details of any additional local services here.</i></p>

Self Care and Independence

Age appropriate independent living skills.

Family and Environmental Factors

Family and Social Relationships and Family Well-Being

Supportive Family Relationships.

Housing , Employment and Finance

Child fully supported financially.

Good quality stable housing.

Social and Community Resources

Good social and friendship networks exist.

Access to positive activities.

Parents and Carers

Basic Care, Safety and Protection

Parents able to provide for child's needs.

Emotional Warmth and Stability

Parents provide secure and caring parenting meeting the child's needs.

Guidance, Boundaries and Stimulation

Parents provide appropriate guidance and boundaries to help child develop appropriate boundaries.

5. Level 2 – Children with Additional Needs who are Showing Early Signs of Vulnerability

These are children with additional needs or children whose needs are not clear, not known or not being met. Professionals should intervene early, for example through an early help assessment such as a CAF (Common Assessment Framework) to identify and tackle problems as soon as they begin to appear, rather than wait for them to escalate.

Early help services can also be targeted at children, young people and families likely to experience difficulties e.g. teenage parents, children engaged in criminal or anti-social behaviour, disabled children, young carers and children with parents who have substance misuse problems / domestic abuse and violence and / or mental health problems.

For more detailed practice guidance, see the relevant chapter for the child's circumstances in [Part B of London Child Protection Procedures](#).

Example Indicators	Action and the Assessment Process	Services who might be involved with children and families at this level of need
<p>Developmental Needs</p> <p>Learning / Education Reduced access to books, toys or educational materials.</p> <p>Child has language and communication difficulties.</p> <p>School action or school action plus/special educational needs.</p> <p>Occasional non attendance at school. Few or no qualifications.</p> <p>Not in education, employment or training.</p>	<p>This is the threshold for a multi-agency early help assessment to begin (sometimes also known as a CAF).</p> <p>The purpose of the early help assessment is to identify the areas where support is needed, so that targeted, multi agency early help services can be provided in response.</p> <p>If professionals identify concerns with a child/family but are unsure how to respond, an early help assessment can help by identifying additional/unmet needs.</p>	<p>Support will be provided by Universal Services (as above) with additional input from targeted services such as:</p> <p>Health, education and children's centres;</p> <p>Educational psychology;</p> <p>Educational welfare;</p> <p>Specialist play services;</p> <p>Integrated youth support services;</p>

<p>Health Slow in meeting developmental milestones.</p> <p>Missed immunisations or health checks.</p> <p>Minor health problems which can be managed in a mainstream school.</p> <p>Children in hospital.</p> <p>Children with disabilities.</p> <p>Social, Emotional, Behavioural and Identity Asylum seeking children.</p> <p>Low-level emotional or mental health issues which require intervention.</p> <p>Early onset of offending behaviour/involvement in the criminal justice system.</p> <p>Children at risk of gang activity.</p> <p>Sexually active child or young person.</p> <p>Low level substance misuse.</p> <p>Poor self esteem.</p> <p>Self care and independence Lack of age appropriate behaviour and independent living skills.</p>	<p>At the start of the assessment a lead professional will be identified. They will be responsible for co-ordinating the early help assessment, and liaising with the family.</p> <p>Early help assessments require the consent of families. If parents and/or the child do not consent to an early help assessment, then the lead professional should make a judgment as to whether, without help, the needs of the child will escalate. If so, a referral into local authority children's social care may be necessary.</p>	<p>Voluntary and community services;</p> <p>Family support services;</p> <p>Parenting programmes;</p> <p>Youth crime prevention services;</p> <p>Drug and alcohol services.</p> <p><i>Add details of any additional local services here.</i></p>
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Family and Environmental Factors

Family and Social Relationships and Family Well-Being

Parents/carers have relationship difficulties which may affect the child, including domestic violence and abuse.

Parents who are known to misuse drugs or alcohol.

Parental mental ill health.

Children who are acting as young carers.

Parents request support to help manage their child's behaviour.

Child affected by difficult family relationships or bullying.

Housing, Employment and Finance

Families affected by low income or unemployment.

Social and Community Resources

Family require advice regarding social exclusion (e.g. hate crime).

Parents and Carers

Basic Care, Safety and Protection

Concerns about parenting capacity identified before a child is born (e.g. because of substance misuse, domestic violence and abuse, mental health issues).

Concerns regarding basic care, safety and protection.

Early signs of abuse or early patterns of neglect identified in children.

<p>Emotional Warmth and Stability Inconsistent parenting but child development not significantly impaired.</p> <p>Lack of response to concerns raised by professionals about child.</p> <p>Guidance, Boundaries and Stimulation Inconsistent care e.g. inappropriate child care arrangements or young inexperienced parents.</p>		
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6. Level 3 – Children in Need who Require Statutory or Specialist Services

These are children in need (s17 Children Act 1989) who have complex / multiple needs. To achieve all their outcomes, they will require longer term intervention from statutory and specialist services. The assessment will be carried out by a social worker from the Local Authority Children’s Services Department.

For more detailed practice guidance, see the relevant chapter for the child’s circumstances in [Part B of London Child Protection Procedures](#).

Example Indicators	Action and the Assessment Process	Services who might be involved with children and families at this level of need
<p>Developmental Needs</p> <p>Learning / Education Short term exclusions or at risk of permanent exclusion, persistent absence. Statement of special educational needs.</p> <p>Health Disability requiring special support to be maintained in mainstream setting. Physical and emotional development raising significant concerns among professionals. Chronic /recurring health problems; parents fail to seek medical treatment. Persistent missed appointments – routine and non routine.</p> <p>Social, Emotional, Behavioural and Identity Under 18 and pregnant.</p>	<p>This is the threshold for child in need assessment under s.17 Children Act 1989.</p> <p>The assessment will be carried out by a social worker from the Local Authority Children’s Services Department.</p> <p>If information gathered during the assessment process results in a social worker suspecting that a child is suffering or likely to suffer significant harm, then they will convene a multi agency strategy discussion, and may seek legal advice. The intervention will become a Level 4 Child Protection enquiry.</p>	<p>Local Authority Children’s Social Care;</p> <p>Other statutory services. E.g. SEN services and specialist health or disability services;</p> <p>CAMHS;</p> <p>Youth Justice Service;</p> <p>Targeted drug and alcohol services;</p> <p>Family support services;</p> <p>Voluntary and community services;</p> <p>Universal services as at Level 1.</p> <p><i>Add details of any additional local services here.</i></p>

Evidence of regular, frequent drug use.

Mental health issues requiring specialist intervention in the community.

Self Care and Independence

Lack of age appropriate behaviour and independent living skills, likely to impair development.

Family and Environmental Factors

Family and Social Relationships and Family Well-Being

History of domestic violence and abuse; either between parents / carers or child / young person's own relationship.

Risk of relationship breakdown between parents/ carers and the child.

Acrimonious contact arrangements following parental separation.

Children who are privately fostered, children with parents in prison, children who have had periods as a Looked After Child.

Child with attachment issues.

Children with caring responsibilities which are inappropriate and interfere directly with their education / leisure activities.

Housing, Employment and Finance

Severe overcrowding, temporary accommodation, homelessness.

Social and Community Resources

Family require support as a result of social exclusion.

Parents and Carers

Basic Care, Safety and Protection

Physical care or supervision of the child is inadequate.

Parents have a physical and/or learning disability which impacts on their capacity to meet the needs of their child.

Parents do not engage with professionals.

Allegations of periodic neglect including insufficient supervision, poor hygiene, clothing or nutrition.

Young carers undertaking intimate personal care.

Emotional Warmth and Stability

Inconsistent parenting impairing emotional or behavioural development.

Parents have substance misuse problems (drugs or alcohol) which impacts on their capacity to meet the needs of their child.

Parents have mental health problems which impact on their capacity to meet the needs of their child.

Guidance, Boundaries and Stimulation

Parents provide inconsistent boundaries or responses.

Carer uses physical chastisement or other harsh methods of discipline.

Carer indifferent to smoking, underage drinking, drug misuse and early sexual relationships.

7. Level 4 – Children who are Suffering or Likely to Suffer Significant Harm

These are children who are suffering or likely to suffer significant harm (s.47 Children Act 1989) and will require intensive support and protection under s.47 Children Act 1989. This is the threshold for multi-agency child protection enquiries led by a Local Authority Children’s Social Worker following a Strategy Discussion.

For more detailed practice guidance, see the relevant chapter for the child’s circumstances in [Part B of London Child Protection Procedures](#).

Example Indicators	Action and the Assessment Process	Services who might be involved with children and families at this level of need
<p>Developmental Needs</p> <p>Learning /Education Chronic non attendance. Permanently excluded, or no education.</p> <p>Health High level disability. Serious physical and emotional health problems. Suspicion of fabricated or induced illness.</p> <p>Social, Emotional, Behavioural and Identity Challenging behaviours resulting in serious risk to child and others. Involved in gang activity. Involved in, or at risk of, child sexual exploitation, including on line abuse.</p>	<p>Children’s social care will make enquiries under s.47 Children Act 1989 to determine whether or not the child (ren) is/are suffering, or likely to suffer significant harm.</p> <p>If these enquiries confirm that the child is suffering or likely to suffer significant harm, a child protection conference will be convened by a social worker.</p> <p>Representative of all agencies working with the family will be invited to the child protection conference, along with parents/ carers and the child/ young person (or their advocate).</p> <p>The child protection conference will decide whether to make the child the subject of a child protection plan.</p>	<p>Children’s social care; Specialist health or disability services; Youth Justice Service; CAMHS; Family support services; Voluntary and community services; Drug and alcohol services; Sexual exploitation service/ team; Universal services as at Level 1.</p> <p><i>Add details of any additional local services here.</i></p>

<p>Child at risk of trafficking.</p> <p>Unaccompanied asylum seeking child.</p> <p>Frequently goes missing from home. Under 13 and pregnant.</p> <p>Child at risk of FGM (female genital mutilation) or honour based violence.</p> <p>Self Care and Independence Severe lack of age appropriate behaviour and independent living skills likely to result in significant harm.</p> <p>Family and Environmental Factors</p> <p>Family and Social Relationships and Family Well-Being Suspicion of physical abuse, emotional abuse or sexual abuse.</p> <p>Suspicion of long term neglect for example; if a child is hungry and / or home accommodation is in a state of disrepair or the house is dirty and squalid, and / or the child experiences lots of house moves, and / or the child has ill-fitting, dirty clothes, and / or the child looks dirty and / or carer speaks about the child harshly / without warmth, and / or the carer does not provide stimulation for the child / there are few or no toys.</p> <p>Previous child/ren removed from parent's care or subject of Child Protection plan/s.</p> <p>Unborn babies where a parent has mental health issues, violence and anger issues, substance misuse or young person/Care leaver lacking positive parenting experience.</p>	<p>A child protection plan sets out clearly the action that must be taken to ensure that the child is safe from harm. Failure to progress the actions in the child protection plan may result in legal proceedings being commenced.</p>	
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High levels of domestic abuse and violence, or serious incident / several incidents of domestic violence when child is present in the house.

Parents lack the capacity to care for the child.

Children experiencing or likely to experience significant harm, who need to be looked after outside their own family.

Social and Community Resources

Child or family need immediate protection and support due to harassment and discrimination.

Parents and Carers

Basic Care, Safety and Protection

Parent lacks the capacity to meet the child's emotional, educational, social and health needs without support.

Any allegation of abuse or neglect or suspicions injury in a pre or non mobile child.

Any child 0-7 is left alone or in the company of an unsuitable person.

Guidance, Boundaries and Stimulation

Parent does not offer good role model; e.g. they are involved in anti social behaviour and are unable to restrict access to the home or child by dangerous adults known or suspected to pose a risk to children.

In addition, the following threshold criteria apply:

Child provided with accommodation by the local authority under s.20 Children Act 1989

(This can be on the initiative of the local authority with the agreement of the parents, or at the request of the parents. Any person with parental responsibility can at any time remove the child from the accommodation. (s.20 (8)))

The child is a child in need who requires accommodation as a result of:

- Having no person with parental responsibility for him/her; or
- Being lost or abandoned; or
- The person who has been caring for him/her being prevented (whether or not permanently, and for whatever reason) from providing him/her with suitable accommodation or care (s.20 (1)); or
- Having reached the age of 16, his/her welfare is likely to be seriously prejudiced if he/she is not provided with accommodation (s.20 (3)); or
- Accommodating the child would safeguard or promote his/her welfare (even though a person who has parental responsibility for him is able to provide him with accommodation), provided that that person does not object (s.20 (4)).

Before providing accommodation, the local authority shall, so far as is reasonably practicable and consistent with the child's welfare:

- Ascertain, and give due consideration to the child's wishes and feelings (having regard to his/her age and understanding) (s.20 (6)); and
- Ascertain whether the parents/person(s) with parental responsibility have given a valid consent:
 - Does the parent have the mental capacity to consent?
 - Is the consent fully informed?
 - Is it fair and proportionate for the child to be accommodated?

Note also that, in addition to the above legislation, case-law known as the 'Southwark judgment' (R (on the application of G) –v- London Borough of Southwark (2009) UKHL 26) (<http://www.publications.parliament.uk/pa/ld200809/ldjudgmt/jd090520/appg-1.htm>) imposes an obligation upon local authorities to provide accommodation and support to homeless 16- and 17-year-olds.)

Care Orders under s.31 Children Act 1989; initiation of care proceedings

- The child is suffering, or is likely to suffer, significant harm; and
- The harm, or likelihood of harm, is attributable to:
 - The care given to the child, or likely to be given to him if the order were not made, not being what it would be reasonable to expect a parent to give to him; or

- The child's being beyond parental control (s.31 (2)).
- **'Harm'** means ill-treatment or the impairment of health or development including, for example, impairment suffered from seeing or hearing the ill-treatment of another;
- **'Development'** means physical, intellectual, emotional, social or behavioural development;
- **'Health'** means physical or mental health; and
- **'Ill-treatment'** includes sexual abuse and forms of ill-treatment which are not physical (s.31 (9)).

Where the question of whether harm suffered by a child is significant turns on the child's health or development, his/her health or development shall be compared with that which could reasonably be expected of a similar child (s.31 (10)).

Note: This document was originally developed for the London Child Protection Procedures.

End