

**CWMPAWD
TEULU Y FRO**

DOD O HYD I ATEBION GYDA'N GILYDD



**VALE FAMILY
COMPASS**

FINDING SOLUTIONS TOGETHER

Vale of Glamorgan Council

Updated 2025



Threshold Guidance for Support for Children, Young People and their Families/Carers in the Vale of Glamorgan

Guidance for all professionals who work with Children, Young People and Families in the Vale of Glamorgan to provide Early Help and Targeted Support

VALE of GLAMORGAN



BRO MORGANNWG

If you are concerned that a child/young person may be at risk of, or may be suffering significant harm call us on: 0808 281 6727 (option 3) or Emergency Duty Team (Out of working hours) on: 02920 788570



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Introduction

This guidance aims to support professional assessment with regard to the provision of support for children, young people and families within the Vale of Glamorgan. This guidance covers unborn babies, children and young people and should be used alongside statutory guidance for each agency. Its aim is to assist practitioners in identifying a child's level of need and indicate what the most appropriate referral pathway is to assess and meet those needs.

It is important that all agencies understand the needs of each individual child or young person within their own context and realise that each situation is unique and specific to that child. This document should assist professional judgements in determining the next actions in meeting those needs and to help everyone to:

- Understand the child/young person in the context of their family and wider community.
- Develop ideas and solutions in partnership with children, young people and their families/carers, so that the right support is provided at the right time by the right people to prevent the need for further escalation.
- Empower families/carers to make decisions and changes to their own lives.

This guidance must always be read in conjunction with the [Wales Safeguarding Procedures](#) and [Social Services and Wellbeing \(Wales\) Act 2014](#) and associated [regulations](#) and [codes of practice](#).

Good practice in applying this with a family:

- Parenting can be challenging and asking for help is a sign of strength and responsibility and not a parental weakness.
- Work with families/carers in an open and honest way, and ensure families/carers tell their story once.
- If you are unsure about the level of concern for a family, use support and guidance from your own and partner agencies to inform your work, including supervision.
- Universal and targeted services must remain involved even if a child and family is receiving additional or specialist support so there is a joint, whole-system response to meeting outcomes and needs.
- Consider the needs and views of the whole family, including fathers, male carers, resident and non resident parents and anyone with parental responsibility.
- Consider how extended family, community resources or adult services may be able to contribute to support for families/carers.

Always remember that need is not static; the needs of a child/young person/family will change over time.



Universal & Targeted Support

Universal Services play a crucial role in supporting families by providing access to essential resources and guidance without the need for specialist or statutory interventions.

For many families, universal services meet their needs and enable them to achieve their personal outcomes and meet the needs of their child/ren without the need for statutory intervention.

Universal Services empower families to find their own solutions and navigate challenges independently. This approach not only fosters resilience and self-reliance but also ensures that families can thrive without the need for more intensive support.

Ultimately, Universal Services are designed to be accessible and inclusive, ensuring that all families have the opportunity to benefit from the support they need.

In the Vale of Glamorgan, there are a variety of Services that are universally accessible which include:

- Health Visiting
- GPs
- Schools
- Midwifery
- Single Point of Access (SPoA) for referrals to specialist Emotional Wellbeing & Mental Health services





Introduction to Vale of Glamorgan Early Help Services

Early Help is the service area name for a range of services designed to support babies, children, young people, and their families in the Vale of Glamorgan.

Services are for:

- Parents, step-parents, carers or family members looking after a child.
- Families during pregnancy.
- Babies, children, and young people aged 0-18 years (or up to the age of 25 in the case of a vulnerable young person).
- Professionals who work with babies, children, young people and their families.

Early Help services are designed to provide support for families before their needs escalate to the point that they require a safeguarding statutory intervention. This early intervention and prevention approach is provided by delivering high quality Information and Advice and Assistance.

[Click here to visit the Vale Family Compass website](#)

Children in Need of Care and Support and Child Protection:

A child assessed as being in need of Care and Support (Social Services and Wellbeing (Wales) Act 2014) is one where:

- They are unlikely to achieve, maintain or have the opportunity of achieving or maintaining a reasonable standard of health or development; or
- Their health or development is likely to be significantly impaired without the provision for them or such or;
- They are disabled.

Where any one of these criteria are met and services are provided by consensual agreement with the parent(s)/carer(s) this should be led by the Local Authority.



Children and young people who are in need of protection and require intensive support:

- Has suffered or is at risk of suffering significant harm / significant impairment to health or development.
- Children who are at risk if they remain at home. Children requiring specialist and integrated support. Allegations of physical, sexual, emotional abuse or neglect. Children who fall into this category will always need an immediate referral to Social Services and/or the Police and the Wales Safeguarding Procedures must be followed.
- Assessment: Assessing the needs of children in this category is almost always initiated by a section 47 investigation (Children Act, 1989), will be directed by a Strategy Meeting or Discussion with the Public Protection Unit of South Wales Police and may lead to the convening of an Initial Child Protection Conference or initiate legal planning.
- Service Provision: Service provision will generally take the form of a child protection plan (care, support & protection plan), or a Part 6 Care and Support Plan for a child who is looked after. Plans will be constructed and reviewed within Child Protection Conferences or Child Looked After Reviews or other statutory planning forums.





Categories of Abuse

Physical Abuse: Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or caregiver fabricates or induces illness in a child whom they are looking after. Physical chastisement is illegal in Wales. <https://www.gov.wales/ending-physical-punishment-children>.

Sexual abuse: Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Emotional Abuse

Emotional abuse is the persistent ill-treatment of a child or young person such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child/young person that they are worthless or unloved, inadequate or valued only in so far as they meet the needs of the other person. It may feature age or developmentally inappropriate expectations being imposed on a child/children/young person. It may involve causing children/young people frequently to feel frightened or in danger, for example witnessing domestic abuse within the home or being bullied, or the exploitation or corruption of children/young people. Some levels of emotional abuse are involved in all types of treatment of a child, though it may occur alone.

Neglect

Neglect is the persistent failure to meet a children's/young person's basic physical and / or psychological needs, likely to result in the serious impairment of the child's/young person's health or development. It may involve a parent or caregiver failing to provide adequate food, shelter and clothing, failing to protect a child/young person from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's/young person's basic emotional needs.

The following is a **guide only**. In particular, the examples of indicators can only **offer a sense** of the degrees of severity and combinations of indicators for individual children's/young person's needs to be understood and assessed. **The examples cannot be a substitute** for professional judgment.



Additional Safeguarding Areas to Consider

Female Genital Mutilation

The World Health Organisation (WHO) defines FGM as, all procedures (not operations) which involve partial or total removal of the external female genitalia or injury to the female genital organs whether for cultural or other non-therapeutic reasons (WHO, 1996). Professionals will need to make refer to the FGM protocol for further guidance and can obtain advice from the National FGM Centre.

Forced Marriage

The definition of Forced Marriage is where one or both people (or in cases of people with learning disabilities or reduced capacity), cannot consent to the marriage as they are pressurised, or abuse is used, to force them to do so. (GOV.uk, March 2013). This is different to an arranged marriage where there is agreement between both people to marry. Further advice can be obtained from the forced marriage unit.

Gender Based Violence

Gender-based violence is violence that is directed at an individual based on his or her biological sex or gender identity. It includes physical, sexual, verbal, emotional and psychological abuse, threats, coercion and economic or educational deprivation, whether occurring in public or private life. (Womenforwomen organisation, 21/11/2017). Gender based violence should also be considered as part of any assessments where there are concerns about forced marriage and female genital mutilation although it can occur without these issues being present.



Child Sexual Exploitation

The sexual exploitation of children and young people is a hidden form of abuse. A number of different definitions have been developed through the work of researchers and practitioners though the concepts of exploitation and exchange are central to each. Child sexual exploitation is the coercion or manipulation of children and young people into taking part in sexual activities. It is a form of sexual abuse involving an exchange of some form of payment which can include money, mobile phones and other items, drugs, alcohol, a place to stay, 'protection' or affection. The vulnerability of the young person and grooming process employed by perpetrators renders them powerless to recognise the exploitative nature of relationships and unable to give informed consent.

Modern Day Slavery and Human Trafficking

Modern Slavery is a term used within the UK and is defined in the Modern Slavery Act 2015, "These crimes include holding a person in a position of slavery, servitude forced or compulsory labour, or facilitating their travel with the intention of exploiting them soon after". Human trafficking can also be linked to cases where child sexual exploitation is present.

Harmful Sexualised Behaviours

Harmful sexualised behaviour is developmentally inappropriate sexual behaviour, which is displayed by children and young people and which may be harmful or abusive (derived from Hackett, 2014). Better futures are able to offer assistance and support when cases are managed by children's services in order to offer an intervention. Guidance can be found on the [WSP Harmful Sexualised Behaviours Practice Guide](#).

- [Follow this link for more information about: Children in Need of Care and Support](#)
- [Follow this link for more information about: Harmful Sexualised Behaviours](#)
- [Follow this link for more information about: Allegations Against Practitioners Those in Positions of Trust \(Section 5\)](#)

Criminal Exploitation

Criminal exploitation has been defined by the Home Office as follows: child criminal exploitation occurs where an individual or a group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18.



Allegations/Concerns about those in a Position of Trust:

Where there are allegations against or concerns about a practitioner or those in a position of trust, it must be reported to Children and Young People Services immediately. The reporter should be alert to where the alleged abuse has occurred / concern arisen. There is a Local Authority Designated Officer in Social Services who oversees, monitors and manages allegations against practitioners/[positions of trust]. The Local Authority will inform the referrer of whether the report/concerns meets the criteria for progressing with the process and next steps. The individual who the report is about should be informed at the earliest opportunity that an allegation / concern has been made against them. Parents / carers of the child / children involved should also be informed about the allegation, as appropriate. For further advice and guidance please see [Wales Safeguarding Procedures](#)



Unlawful Chastisement

When Section 1 of the Children Wales Act (2020) came into force, it removed the defence of reasonable punishment. From this time all physical punishment of children has been illegal in Wales, including by parents, carers and anyone acting in loco parentis in any setting in Wales. The legislation helps protect children's rights and sends a clear signal that physically punishing children is not tolerated in Wales ([see Unlawful Chastisement Guidance - C&VRSB Site](#)).

If there is reasonable cause to suspect that a child/young person is suffering or likely to suffer significant harm child protection procedures should be initiated and these child protection inquiries should always be led by a Social Worker under Section 47 of the Children Act 1989. .



The Right Help at the Right Time

ACUTE NEEDS

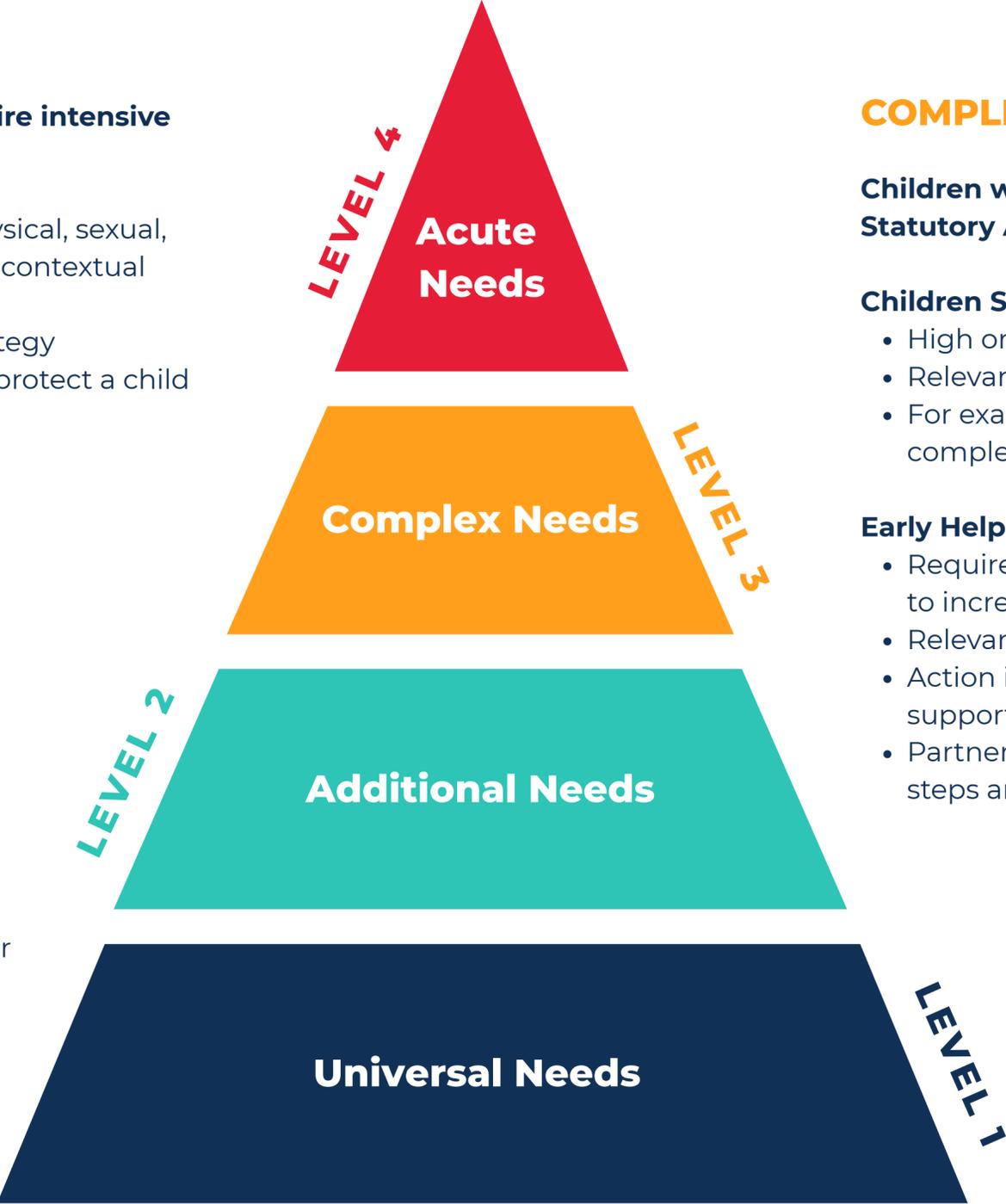
Children who are in need of protection and require intensive support

- Children at risk of significant harm (abuse – physical, sexual, emotional/psychological, financial and neglect, contextual risk, FGM etc)
- Relevant teams are informed immediately. Strategy discussion considered and immediate steps to protect a child where warranted.

ADDITIONAL NEEDS

Children and families who need help to improve their outcomes

- In need of help and support
- Relevant teams informed as soon as possible.
- Agency support taken by Early Help/Universal or Targeted Services
- Partnership are notified of the recommended next steps and agreement sought.



COMPLEX NEEDS

Children who meet the threshold for Early Help or Statutory Assessment Children's Services

Children Services

- High or Complex Risk
- Relevant teams are informed as soon as possible.
- For example, edge of care, contextual risk, children with complex disabilities, emotional well-being concerns.

Early Help

- Requires action to prevent a situation which may lead to increased vulnerability and risk.
- Relevant teams are informed as soon as possible.
- Action is taken by Early Help Services, or partnership support.
- Partnership are notified of the recommended next steps and agreement sought.

UNIVERSAL NEEDS

Children whose needs are met by universal services or a simple single-agency response

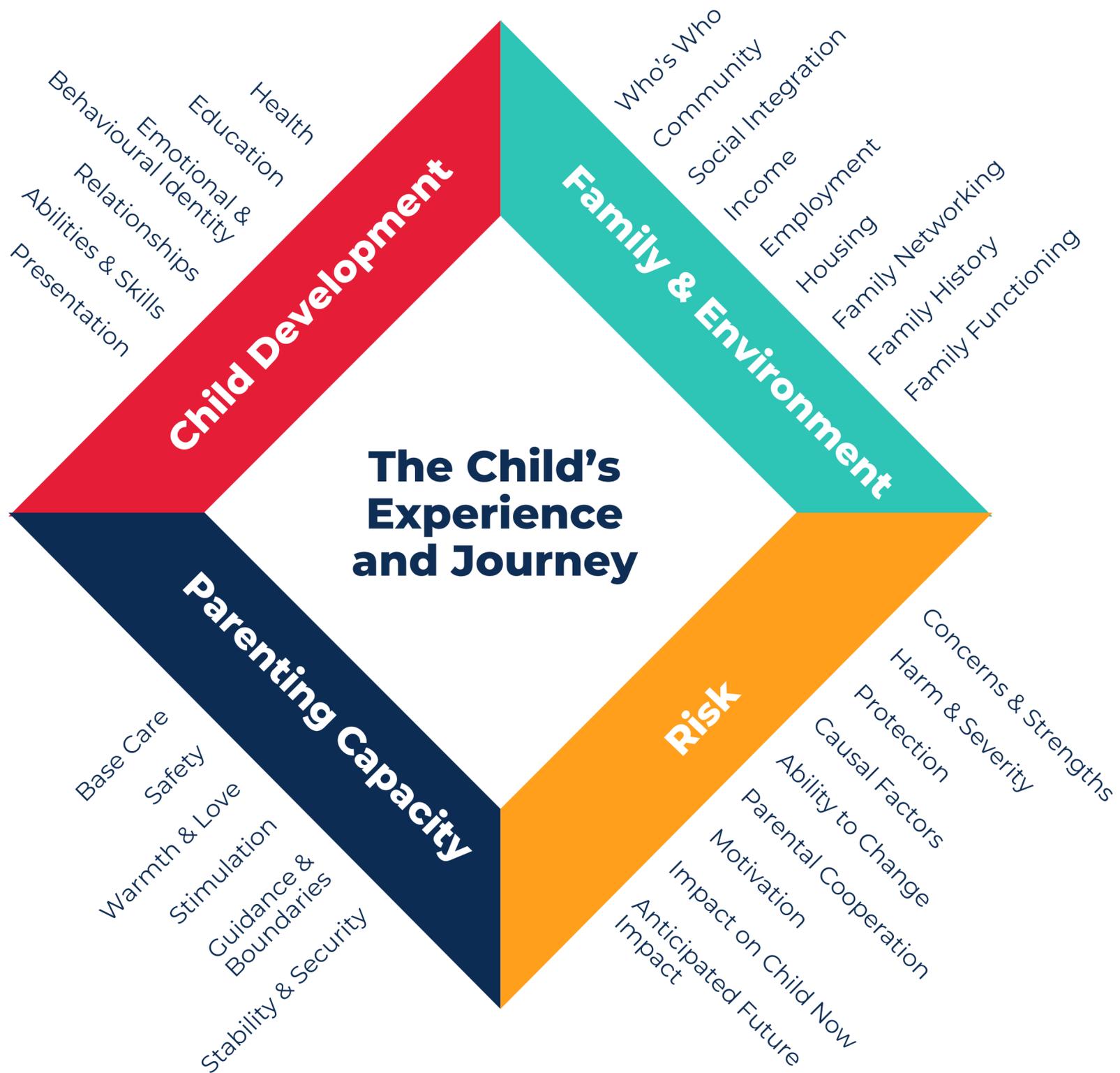
- Support needs that can be met by Universal Services or a single, targeted service.
- Signposting information provided and contact closed.

Indicators of Need

The indicators of need are designed to provide practitioners with an overarching view of the support and intervention a family might need and have been laid out in the document to enable partner agencies to develop shared terminology and understanding of areas of need, risk, and vulnerability.

There are four domains in the Assessment Diamond; the child's developmental needs, the parents' or caregivers' capacities to respond appropriately, risks levels and the wider family and environmental factors. Each domain relates to the others to inform a holistic approach. By considering all of the areas, practitioners can build a picture of the strengths as well as areas of concern to assess the child and young person's needs, remembering that children, young people and their families can be at different stages within the continuum of need for their education, health and care.

If identified outcomes are met then that may mean support is no longer needed.



**All children change and develop over time.
Parents have a responsibility to respond to the
child's/young persons needs.**

The purpose of this assessment diamond is to help you identify areas of strength and areas of developmental need, in order to assist you in determining whether this child/young person requires information, advice or assistance and/or care and support to achieve a reasonable standard of development or to prevent significant impairment of his/her health, and development.

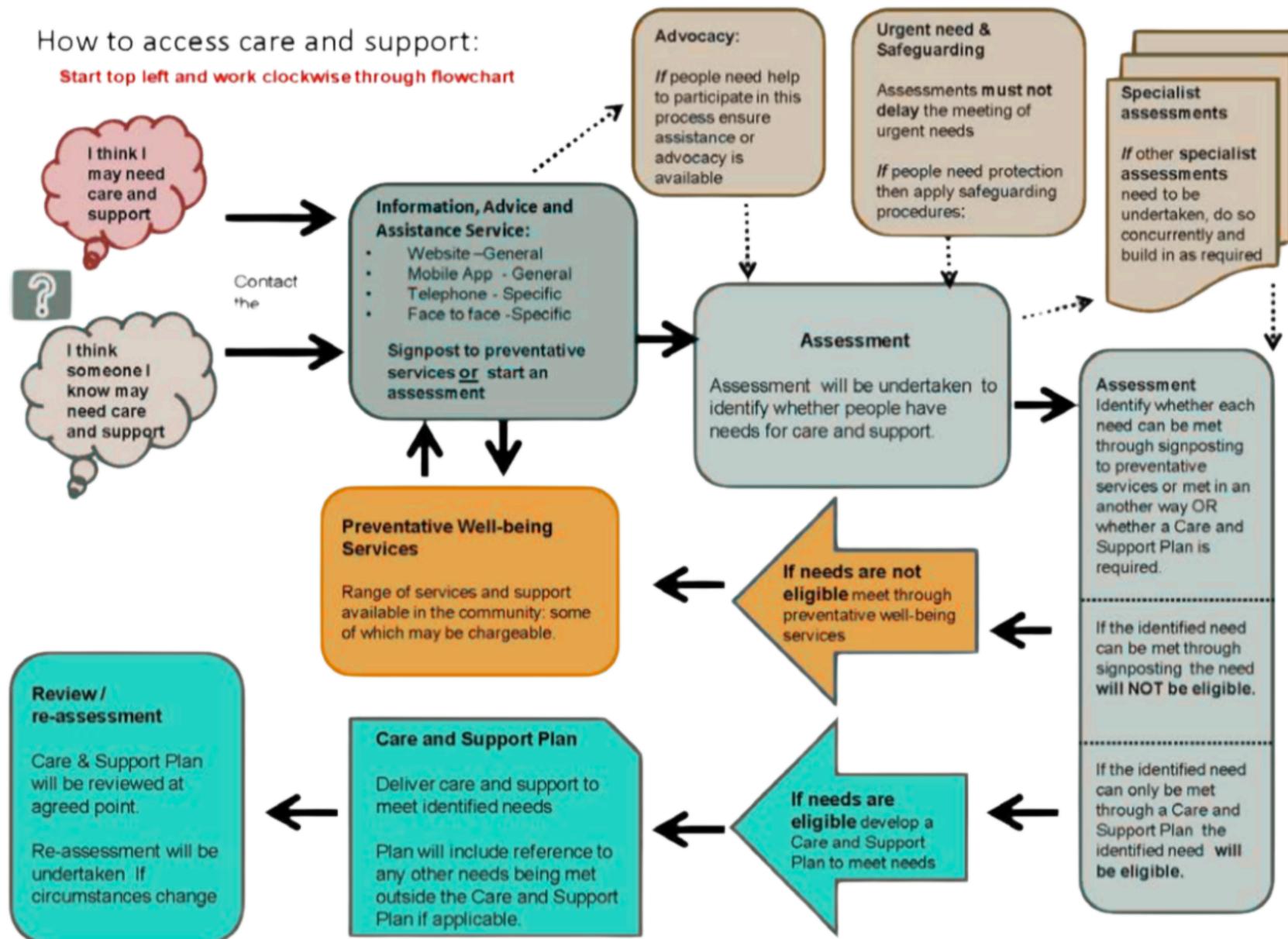
Although the previous statements may not be concerning in isolation, the combination of factors needs to be considered in a holistic assessment. It is important to consider the family's strengths as well as difficulties.

Remember that need is not static; the needs of a child / young person or their family will change over time. Where a plan is agreed, this should be reviewed regularly to analyse whether sufficient progress has been made to meet the needs and to reassess the level of risk faced by the child or young person. This will be important in situations where small improvements are made, but analysis will need to be undertaken on whether this leads to significant and sustainable improvements for the child / young person / family.

Within the Vale of Glamorgan Children and Young People Services, this threshold guidance document has been developed to help you identify and assess children and young people who are at risk of and experiencing harm. It will help you with the early identification of neglect or in coordinating support for families/carers in need of additional help.



Social Services & Wellbeing Act Flow Chart Related to the Legislation



Needs Index - Four Levels

Level 1 Universal Need: Support	Level 2 Additional Needs: Help	Level 3 Complex Needs: Help	Level 4 Acute Needs: Protect
Children whose needs are met by universal services or a simple single-agency response.	Children who are at risk of poor outcomes and need extra support from services.	Children who meet the threshold for Early Help or Statutory Assessment.	Children and who are in need of protection and require intensive support.

1) Child's Developmental Needs

(1.1) Health

Includes growth and development as well as physical, mental and emotional wellbeing. The impact of genetic factors and of any impairment needs to be considered. This involves receiving appropriate health care when ill, an adequate and nutritious diet, exercise, immunisations (where appropriate), screening and developmental reviews, dental and optical care and, for older children, appropriate advice and information on issues that have an impact on health, including sex education and substance misuse.

(1.1.1) Physical Needs

The child/young person undertakes regular physical activities and has good physical and mental health. They have access to and make use of health and advice services, including management of any long-term conditions.	The child/young person undertakes little physical activity and has some physical and/or mental health needs or disability which affects their everyday functioning, but support is sought, and these needs are largely met.	The child/young person undertakes no physical activity and there are growing concerns that the child/ young person has not accessed health and advice services, as a result, the child/young person's day to day life, social, emotional, health and/or wellbeing needs are inconsistently supported and may be negatively impacted.	There is evidence that the child/ young person has not or cannot undertake any physical activities or access health care and advice services. As a result, the child/young person's day to day life, social, emotional, mental and/or physical health is significantly impacted. Physical or mental health needs are not recognised or overlooked, which has a negative impact on the child/young person's wellbeing. There is a suspicion of Fabricated or Induced illness/ perplexing presentation – see the guidance. Children who have had illness fabricated or induced require coordinated help from a range of agencies.
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Universal Needs

Additional Needs

Complex Needs

Acute Needs

(1.1.2) Diet

The child/young person is provided with and eats a varied diet that is appropriate for their age and stage of development and is maintaining an appropriate weight.

Child/young person's special dietary requirements are met.

The child/young person is usually provided with and eats a varied diet, but can be overly selective with food which may have a negative impact on their health (including height, weight, or teeth). Child/young person's special dietary requirements are inconsistently met. Parents/carers seek appropriate advice/support if required.

The child/young person undertakes no physical activity and there are growing concerns that the child/young person has not accessed health and advice services, as a result, the child/young person's day to day life, social, emotional, health and/or wellbeing needs are inconsistently supported and may be negatively impacted.

There is evidence that the child/young person has not or cannot undertake any physical activities or access health care and advice services. As a result, the child/young person's day to day life, social, emotional, mental and/or physical health is significantly impacted. Physical or mental health needs are not recognised or overlooked, which has a negative impact on the child/young person's wellbeing. There is a suspicion of Fabricated or Induced Illness/perplexing presentation – see the guidance. Children who have had illness fabricated or induced require coordinated help from a range of agencies.

(1.1.3) Drug and Alcohol

The child/young person has no history of substance misuse or alcohol dependency.

The child/young person may be using drugs/ alcohol socially with the occasional impact on their social and mental wellbeing.

The child/young person's drug and/ or alcohol use is affecting their mental and physical health and wellbeing. The child is known to be using drugs and/or alcohol.

The child/young person's drug and/ or alcohol misuse is putting the child at such risk that specialist resources are required to reduce and resolve the impact and protect the child in the short, medium and long term.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(1.2) Education

Covers all areas of a child's cognitive development which begins from birth. Includes opportunities:

- For play and interaction with other children;
 - To have access to books;
 - To acquire a range of skills and interests;
 - To experience success and achievement.
- Involves an adult interested in educational activities, progress and achievements, who takes account of the child's starting point and any special educational needs.

(1.2.1) Cognitive Development

The child/young person possesses age-appropriate ability to understand and organise information and solve problems and makes progress in learning.

The child/young person is not consistently able to understand information and solve problems.

This impacts on development and learning and there are strategies in place to support this.

The child/young person is unable to understand and organise information and solve problems.

The child is adversely under-achieving or is making no progress with learning despite support strategies over a period of time. Progress is possible with personalised support.

The child/young person's inability to understand and organise information and solve problems is seriously impacting on all areas of their development creating risk of significant harm.

The child/young person requires a high level of specialist support

(1.2.2) Learning Opportunities

The child/young person is undertaking age-appropriate learning opportunities, employment or training.

The child/young person has inconsistent engagement in age-appropriate learning opportunities, employment or training, which could have an impact on their behaviour and/or mental health.

The young person is not in age-appropriate education, employment or training (NEET) and is unable to engage, barriers are in place preventing learning or employment opportunities and is increasingly socially isolated. There is concern that this results from or is impacting on their behaviour and/or mental health.

The child/young person does not engage with age-appropriate learning or employment opportunities, is socially isolated, and is more susceptible to risks outside the home. There is concern that this is having a significant impact on the child/young person's behaviour and/or mental health.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(1.2.3) Learning Environment

The child/young person's home environment positively supports learning opportunities.

The child/young person's home environment generally provides support to access learning opportunities, but engagement with learning is not always consistent.

The child/young person's home environment provides inconsistent and/or limited support to access learning opportunities, with little engagement with learning.

Factors within the family and/or risks outside the home prevent the child/young person from accessing age-appropriate learning opportunities.

The child/young person's home environment does not support learning opportunities. There is a significant lack of engagement with appropriate learning opportunities.

Factors within the family and/or risks outside the home make it impossible for the child/young person to access age-appropriate learning opportunities.

(1.2.4) Engagement and Achievement

Child/young person does not require any additional support and are meeting expected outcomes or seeks support appropriately when required.

Child/young person is at risk of failing to meet expected outcomes and is accessing additional support in or out of the classroom in order for them to achieve in line with their peers.

The child/young person is failing to meet expected outcomes despite interventions. They have experienced a pattern of short-term suspensions/ low attendance/periods of missing education, placing them at potential risk of exploitation and/or offending behaviour.

The child/young person may have been permanently excluded, but their educational needs are being met, such as through interventions, or attending a specialist provision.

The child/young person may be permanently excluded or not in education which puts them at greater risk of exploitation and/or offending behaviour.



Universal Needs

Additional Needs

Complex Needs

Acute Needs

(1.3) Emotional and Behavioural Development

Concerns the appropriateness of response demonstrated in feelings and actions by a child, initially to parents and care givers and, as the child grows older, to others beyond the family. Includes nature and quality of early attachments, characteristics of temperament, adaptation to change, response to stress and degree of appropriate self-control.

(1.3.1) Emotional Development

The child/young person is following an appropriate pattern of development.

Some areas of the child/young person's development are not in line with their peers and is delayed and appropriate support is being received.

The child/young person's development is delayed but appropriate support is not always being accessed.

The child/young person's development is being significantly impaired. Appropriate support not being accessed indicating an inability to engage by parents/carers.

(1.3.2) Criminal and Anti-Social Behaviour

The child/young person's activities are legal.

The child/young person has from time to time been involved in anti-social behaviour.

The child/young person is involved in anti-social behaviour and may be at risk of exploitation.

The child/young person is currently involved in persistent or serious criminal activity and/or is being exploited.

(1.3.3) Behavioural Development

The child/young person's behaviour is age-appropriate, and the child engages in age appropriate activities, e.g. tantrums which are part of normal behaviour for young children.

The child/young person's behaviour is dissimilar to that which would be expected of a child of their age or stage of development and can be difficult to manage e.g. challenging at home, settled at nursery.

The child/young person's behaviour is consistently challenging and causing significant disruption to the family's home life and child's ability to engage in learning opportunities, e.g. this could include persistent, aggressive and destructive behaviour in a range of settings and environments.

The child/young person's behaviour places them or others at risk of significant harm, e.g. assault of others or self which causes significant physical harm.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(1.3.4) Displayed Behaviour

The child/young person demonstrates acceptable behaviour and tolerance towards their peers and others. Where on occasion this is not the case, this is managed through effective parenting, good adult guidance and universal support.

The child/young person exhibits some aggressive or destructive behaviour which impacts on others and interferes with their normal development. The child/young person may be a victim of discrimination or bullying.

The child/young person is involved in harmful behaviours or exhibits persistent aggressive, bullying or destructive behaviours which impact on others and places them at risk of exclusion from mainstream services or criminality.

The child/young person's development is being significantly impaired. Appropriate support not being accessed indicating an inability to engage by parents/carers.

(1.4) Identity

Concerns the child's growing sense of self as a separate and valued person. Includes the child's view of self and abilities, self-image and self-esteem, and having a positive sense of individuality. Race, religion, age, gender, sexuality, and disability may all contribute to this. Feelings of belonging and acceptance by family, peer group and wider society, including other cultural groups.

(1.4.1) Self-Esteem and Confidence

The child/young person is supported to develop a positive belief in their self and their abilities.

The child/young person displays some low self-esteem/confidence which can make them anxious and vulnerable to negative influence by peers and/or adults.

The child/young person's negative sense of self, low confidence/ self-esteem has contributed to them experiencing anxiety and/or behaviour that is being negatively influenced by peers and/or adults placing them at risk of, for example, school non-attendance, school exclusion, exploitation by adults, and/or self-harm.

The child/young person's negative sense of self, confidence and low self-esteem results in them frequently exhibiting high anxiety and/or challenging behaviour, and/ or self-harm that places them or others at risk of significant harm.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(1.4.2) Radicalisation

The child/young person does not express any sympathy for ideologies linked to violent extremism and there are no concerns relating to radicalisation.

The child/young person expresses some sympathy for ideologies closely linked to violent extremism but is open to other views or loses interest quickly.

There is the potential to become radicalised.

The child/young person is becoming radicalised, expresses beliefs that extremist violence should be used against people who disrespect their beliefs and values.

The child/young person is radicalised, supports people travelling to conflict zones for extremist/violent purposes or with intent to join terrorist groups.

The child expresses a generalised nonspecific intent to go themselves and/or may have family connections.

(1.4.3) Identity

The child/young person has a positive sense of self and identity, which is supported by their family, peer group and the wider community.

The child/young person experiences some difficulties around their identity or views being accepted by their family, peer group or the wider community.

There is a risk that their mental health may be adversely impacted.

The child/young person is treated negatively due to their identity or views by their family, peer group or wider community. They may not feel safe to express their views.

Their mental health and wellbeing is significantly affected.

The child/young person is bullied or abused because of their identity and does not feel safe to express their views or explore support.

Their mental health and wellbeing is significantly harmed.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(1.5) Family and Social Relationships

Development of empathy and the capacity to place self in someone else's shoes. Includes a stable and affectionate relationship with parents or care givers, good relationships with siblings, increasing importance of age-appropriate friendships with peers and other significant persons in the child's life and response of family to these relationships.

(1.5.1) Friendships

The child/young person has friendships and positive social interaction with a range of peers.

The child/young person has limited friendships and limited social interaction with their peers which is impacting on their development.

The child/young person does not have access to social activities which results in social isolation, difficulties in communicating and interacting with others that their development is being impaired.

The child/young person experiences social isolation to the extent that their development is significantly impaired.

(1.5.2) Family

The child/young person has positive and consistent relationships with their parents/carers/family.

The child/young person experiences some difficulty or inconsistency in their relationships with their parents/ carers/ family.

The child/young person experiences difficulty and inconsistency in their relationships with their parents/carers/family which results in emotional/ physical harm or anxiety.

The child/young person's relationships with their parents/carers/family causes frequent domestic incidents, severe anxiety and/or significant emotional harm.

(1.5.3) Relationships

The child/young person is in a healthy and mutual relationship appropriate to their age.

There are isolated incidents of physical and or emotional abuse or violence in the child/ young person's relationship which is beginning to impact on one or both parties.

One or both children or young people is/ are in a physically, emotionally abusive or coercive and controlling relationship. The perpetrator/s show limited or no commitment to changing their behaviour and little or no understanding of the impact of their violence/ abuse on the other person.

One or both children or young people is/are a perpetrator/s of persistent and/or serious physical or sexual violence or coercive and controlling behaviour which may also be increasing in severity, frequency, or duration. This places either one or both parties at risk of significant harm.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(1.6) Social Presentation

Concerns child's growing understanding of the way in which appearance, behaviour, and any impairment are perceived by the outside world and the impression being created. This includes the availability of advice from parents or care givers about presentation in different settings and appropriateness of dress (e.g. weather appropriate); cleanliness and personal hygiene.

(1.6.1) Social Presentation

The child/young person wears clothing appropriate to the social or environmental condition and has a good level of cleanliness and personal hygiene.

The child/young person has the skills which enable them to interact effectively with a range of peers and adults, across a range of contexts, including respect and consideration for gender, culture, race, sexuality, ability or disability.

The child/young person may wear clothing inappropriate to the social or environmental conditions. They may have poor hygiene leading a risk of alienation from peers.

The child/young person usually has the skills to enable them to interact effectively with a range of peers and adults, but may have discomfort with aspects of others due to their gender, culture, race, sexuality, ability or disability.

The child/young person's appearance frequently reflects poor cleanliness, personal hygiene and/or social awareness, which results in some isolation/ alienation from peers.

The child/young person struggles to understand emotions or develop age and context appropriate responses to peers/adults and lacks social awareness which increases their vulnerability.

The child/young person lacks skills to enable them to interact effectively with a range of peers and adults and has an intolerance of others due to their gender, culture, race, sexuality, ability or disability.

The child/young person's appearance reflects poor cleanliness, personal hygiene and social awareness, which results in isolation/ alienation. As a consequence of their actions and behaviours, the child/young person struggles to maintain peer relationships and acquire social skills.

The child/young person has an inability to understand emotions and develop age and context appropriate responses and/or unable to differentially respond to adults taking into account issues such as relationship and context and holds a lack of awareness of their vulnerability which places them at risk.

The child/young person actively discriminates against others due to their gender, culture, race, sexuality, ability or disability.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(1.7) Self Care Skills

Concerns the acquisition by a child of practical, emotional and communication competencies required for increasing independence. Includes early practical skills of dressing and feeding, opportunities to gain confidence and practical skills to undertake activities away from the family and independent living skills as older children. Includes encouragement to acquire social problem-solving approaches. Special attention should be given to the impact of a child's impairment and other vulnerabilities, and on social circumstances affecting these in the development of self-care skills.

(1.7.1) Self Care Skills

Child/young person is supported to develop self-care and independent living skills appropriate to their ability, age and stage of development.

Child/young person is generally supported to develop self-care and independent living skills appropriate to their ability, age and stage of development, however this can at times be inconsistent.

Child/young person is inconsistently supported to develop self-care and independent living skills appropriate to their ability, age and stage of development, resulting in not possessing or unable to use these skills.

Child/young person has been unable to develop behaviour and independent living skills in line with their ability, age and stage of development and this is likely to result in significant self-neglect, impairment or harm.



Level 1 Universal Need: Support	Level 2 Additional Needs: Help	Level 3 Complex Needs: Help	Level 4 Acute Needs: Protect
Children whose needs are met by universal services or a simple single-agency response.	Children who are at risk of poor outcomes and need extra support from services.	Children who meet the threshold for Early Help or Statutory Assessment.	Children and who are in need of protection and require intensive support.

2) Parenting Capacity

(2.1) Basic Care

Providing for the child's physical needs, and appropriate medical and dental care. Includes provision of food, drink, warmth, shelter, clean and appropriate clothing and adequate personal hygiene.

(2.1.1) Health and Hygiene

<p>Parents/carers take an active interest in the child/young person's appearance.</p> <p>The child/young person is clean and is either given a bath/washed regularly and teeth cleaned or encouraged to do so in an age- appropriate way.</p> <p>Head lice, skin conditions (including nappy rash) and other medical needs are treated promptly and appropriately, using correct medication if required.</p>	<p>Parents/carers take some interest in the child/young person's appearance and the importance of hygiene to the child/ young person's wellbeing.</p> <p>The child/young person is reasonably clean, but the parents/carers do not bath or wash them regularly and/or consistently encouraged to wash and brush teeth in an age-appropriate way.</p> <p>Head lice and skin conditions (including nappy rash) and other medical needs are inconsistently treated, and correct medication is not always used, but parents/carers treat it if given encouragement and advice.</p>	<p>Parents/carers are unable to or do not take an interest in child/young person's appearance and do not acknowledge the importance of hygiene to the child/young person's wellbeing.</p> <p>The child/young person presents as unclean and is only occasionally bathed/washed or encouraged to wash and brush teeth in an age- appropriate way, with evidence that they do not brush their teeth on a regular basis.</p> <p>Head lice and skin conditions (including nappy rash) and other medical needs are not treated appropriately, and parents/carers are indifferent to concerns expressed by others.</p>	<p>Parents/carers are unable to or do not take an interest in child/young person's appearance resistant to acknowledge the importance of hygiene to the child/young person's wellbeing.</p> <p>The child/young person routinely presents as being dirty and is not bathed or washed or encouraged wash or brush their teeth, with evidence that they infrequently brush their teeth.</p> <p>Head lice and skin conditions (including nappy rash) and other medical needs are not treated are not treated and become chronic and parents/carers are resistant to concerns expressed by others.</p>
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Universal Needs

Additional Needs

Complex Needs

Acute Needs

(2.1.2) Nutrition

Child/young person is provided with necessary quantity and quality of food and drink, which is healthy, varied appropriate to their age and stage of development – including in the antenatal period.

Child/young person is provided with an adequate quantity of food and drink for their needs, which is of reasonable quality and adequate for their age and stage of development.

Child/young person receives insufficient quantity of food and drink and appears hungry. Food provided is of low quality, which is often not appropriate to their age and stage of development.

Child/young person does not receive an adequate quantity of food and drink and is observed to be hungry. The food provided is of a consistently low quality with a predominance of sugar, sweets, crisps and chips etc

(2.1.3) Pre-Birth

Pregnant woman and/or father/ partner seek support for any difficulties they may have which could negatively impact on the unborn baby.

Parents/carers prepare for the birth of the baby and have the appropriate clothing, equipment, and cot prior to birth.

Pregnant woman and/or father/ partner are aware of but can be inconsistent in seeking support for any difficulties they may have which could negatively impact on the unborn baby.

Parents/carers have undertaken some preparation for the birth of the baby but have not considered everything needed or sought advice on this.

Parents/carers are unaware or indifferent to the impact of their own difficulties or activities on the unborn child and do not seek support to prevent it negatively impacting on the unborn baby.

Parents/carers are unprepared for the birth of the baby and have only considered the most basic requirements.

Pregnant woman and/or father/ partner cannot or do not engage with interventions to address this.

Pregnant woman and/or father/ partner do not address difficulties and engage in activities that could hinder the development, safety and welfare, or actively seek to inflict harm on the unborn baby.

Parents/carers have very little, or nothing, prepared for the birth of the baby.

There are concerns that parents are concealing the pregnancy from professionals.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(2.1.4) Care for Baby

Parents/carers are nurturing and responsive to the baby's needs and are careful whilst handling and laying the baby down, and frequently check if baby is unattended.

Parents/carers spend time with baby, interacting, holding, and showing warmth and affection.

The parents/carer are coping well emotionally following the birth of their baby.

Parents/carers are not always consistent in their responses to the baby's needs, due to their own personal circumstances.

Parents/carers can at times be precarious in handling and are inconsistent in supervision.

The parents/carer are generally coping emotionally following the birth of their baby and seek support for their mental health and wellbeing if required.

Parents/carers cannot or do not recognise the importance of responding consistently to the needs of the baby.

Handling can be precarious, and baby is left unsupervised with potential risks (e.g. choking risk if bottle left in the mouth, left in car seat for prolonged period of time).

The parents/carer are unable to cope with their mental health and wellbeing following the birth of their baby and require support to meet the needs of themselves and their baby.

Parents/carers do not respond to the needs of the baby and only address issues when they choose to do so or when felt it to be a necessity (e.g. due to sustained crying due to hunger).

There is consistent unsafe handling, and the baby is left dangerously unsupervised.

The parents/carer have significant mental health and wellbeing needs following the birth of their baby and cannot or do not accept support to meet the needs of themselves or their baby.
There are concerns that the child's birth is not registered, and/or parents are not considering the potential health needs of the baby, or allowing access to services to support them when they are unwell.



Universal Needs

Additional Needs

Complex Needs

Acute Needs

(2.2.) Ensuring Safety

Ensuring the child is adequately protected from harm or danger. Includes protection from significant harm or danger, and from contact with unsafe adults/other children and from self-harm. Recognition of hazards and danger both in the home and elsewhere.

(2.2.1) Baby Safety: In all areas of need, the risk of harm is known to be higher for babies and infants under 2 years old

<p>Parents/carers seek and respond to safe baby care messages.</p> <p>Parents/carers have information on safe sleeping and follow the advice and guidelines.</p>	<p>Parents/carers are generally responsive and alert to safe sleep practices and baby care messages, but these can sometimes be inconsistent, especially when there is a change to routine such as family sickness or staying over at a different address.</p>	<p>Parents/carers are not responsive and alert to safe sleep practice when out of routine but are willing to engage in understanding the risk and demonstrate the intention of safe sleep practice.</p> <p>Parents/carers are not responsive to or do not follow baby care messages around, for example safe handling, coping with crying and/or feeding.</p>	<p>Parents/carers are indifferent or resistant towards safe sleeping advice and guidance and may see advice given as interference.</p> <p>Parents/carers are resistant to or do not follow baby care messages and this places the baby at risk of significant harm or injury.</p>
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(2.2.2) Supervision and Boundaries

<p>Effective supervision is provided in line with age and stage of development and parents/carers recognise the importance of appropriate supervision for the child/young person's well-being.</p> <p>Parents/carers ensure the child/ young person does not have access to inappropriate material (including online).</p>	<p>Variable supervision is provided but Parents/ carers intervene effectively where there is danger.</p> <p>Parents/carers are mostly aware of the need to monitor the child/young person to ensure they do not watch inappropriate material (including online).</p>	<p>Parents/carers provide limited supervision or boundaries, and Parents/ carers do not always respond quickly to dangers. There is limited concern about where child/ young person is, or who they are with.</p> <p>Parents/carers do not monitor the child/young person to ensure they do not access inappropriate material (including online).</p>	<p>Parents/carers are unable to or indifferent to providing supervision or boundaries, and often do not know where child/ young person is, or who they are with and are oblivious to any dangers.</p> <p>Parents/carers allow the child/young person to access inappropriate material (including online) and do not recognise the potential impact on the child/young person's wellbeing.</p>
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Universal Needs

Additional Needs

Complex Needs

Acute Needs

(2.2.3) Protection from Harm

The child/young person is not affected by crime, discrimination, or antisocial behaviour.

There are growing concerns that the child/young person may be affected by discrimination and/or low level anti-social behaviour.

When the child/young person is away from home the parents/carers do not always know where child is and have inconsistent awareness of safety issues.

Parents/carers show concern about when child/young person should be home and take proportionate action (e.g. a phone call) if not home on time.

The child/young person is affected by discrimination and/or anti-social behaviour or crime which affects the child/young person through involvement or being a victim.

The child/young person has missing episodes and is at increased risk of exploitation.

The parents/carers are unable or unwilling to keep the child/young person within a safe environment.

The child/young person is radicalised, supports people travelling to conflict zones for extremist/violent purposes or with intent to join terrorist groups.

The child expresses a generalised nonspecific intent to go themselves and/or may have family connections.

(2.2.4) Physical Injuries

The child/young person has a positive sense of self and identity, which is supported by their family, peer group and the wider community.

The child/young person has occasional minor injuries which are caused by occasional poor supervision.

The parents/carers seek out or accept advice on how to avoid accidental injury.

The child/young person has injuries, for example bruising, scalds, burns and scratches, as a result of poor supervision.

Injuries are more frequent than would be expected for a child of a similar age.

The child/young person has injuries, for example bruising, scalds, burns, bites and scratches, which are non-accidental or resulting from persistently poor Supervision. Parents/carers' explanation of the injury is inconsistent with the injury or child's account.

Explanation, origins, characteristics, and history should be explored and considered in a multi-agency strategy discussion.

Bruising in non-mobile babies and children is unusual and is highly suggestive of non-accidental injuries.

Bruising in non-mobile babies and children is unusual and is highly suggestive of non-accidental injuries. (see ACUTE NEEDS & Bruising and Injuries to Non-Mobile Children)

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(2.2.5) Alcohol and Drug Use

Members of the household do not use drugs or alcohol, or drug and alcohol use does not impact on the child/young person (including during the pre-birth period).

Drug and/or alcohol use of household members is impacting on the child/young person, but adequate provision is made to ensure the child/young person's safety (including during the pre-birth period).

Drug/alcohol use has escalated to the point where it includes binge-drinking and/or drug paraphernalia in the home, which is overshadowing the care of the child/young person and adversely impacts the child/young person (including during the pre-birth period).

Parental/member of the household drug and/or alcohol use is at a problematic level, having significant adverse impact on the child/young person (including during the pre-birth period) and/or the parents/carers cannot carry out daily parenting.

This could include blackouts, confusion, severe mood swings, drug paraphernalia not stored or disposed of safely, using drugs/alcohol when their child is present, involving the child in procuring illegal substances, and dangers of overdose.

(2.2.6) Sexual Abuse / Sexual Exploitation

The parents/carers protect their family from danger or harm. There is no evidence of sexual abuse.

There are potential risk factors within the family such as parents/carers not understanding sexual risk or being vulnerable to exploitation (including online).

There are concerns that the child/young person is exposed to inappropriate sexual behaviour (including online).

There are concerns that the child/young person is being groomed and parents/carers do not understand the risks or are not being protective.

An allegation (this could be current or historic) that the child has been sexually abused by a parents/carers/member of the extended family which requires investigation under Section 47 of the Children Act.

The family home is used for drug taking and or dealing, prostitution and illegal activities.

The child/young person is being sexually abused/exploited. A known sexual offender who is a serious risk is in contact with the family.

Parents/carers has expressed thoughts that they may sexually abuse their child/young person.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(2.2.7) Domestic Abuse

There are no incidents of violence or abuse in the family and no history or previous assaults by family members.

There are isolated incidents of physical and/or emotional abuse or violence in the family.

The harmful impact of such incidents is mitigated by other protective factors within the family.

The parents/carers is a victim of abuse assessed as low risk.

One or more adult members of the family is physically and emotionally abusive or is coercive and controlling to another adult member/s of the family, or there are concerns of child to parent violence.

The perpetrator/s show limited or no commitment to changing their behaviour and little or no understanding of the impact their violence and abuse has on the child/young person/unborn child.

The parent/carer has recently (within last 12 months) been a victim of domestic abuse and is a victim of abuse assessed as medium risk.

One or more adult members of the family is a perpetrator of persistent and/or serious physical or sexual violence or coercive and controlling behaviour which may also be increasing in severity, frequency, or duration. There are serious concerns about significant child to parent violence.

The perpetrator is emotionally harming child/young person/unborn child who are experiencing domestic abuse.

The parent/carer is a victim of domestic abuse which has taken place recently on a number of occasions and is assessed as high risk.

(2.2.8) Harmful Cultural Practices

There is no concern that the child/young person may be subject to harmful cultural practices such as female genital mutilation (FGM), honor-based violence (HBV), forced marriage and belief in spirit possession.

There are developing concerns that the child/young person is in a culture where harmful practices are known to have been performed.

There is concern that the child/young person may be at risk of becoming subject to harmful cultural practices.

There is evidence that the child/young person is subject to harmful cultural practices or is at risk of being sent outside the UK to be subject to these.

The family have beliefs about areas such as diet or receiving healthcare which is increasing the risk of serious harm to the child, or death. See [FGM guidance](#).

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(2.3) Emotional Warmth

Ensuring the child's emotional needs are met giving the child a sense of being valued, with a positive sense of own racial and cultural identity. Includes ensuring the child has secure, stable and affectionate relationships with significant adults, with appropriate sensitivity and responsiveness to the child's needs. Appropriate physical contact, comfort and cuddling sufficient to demonstrate warm regard, praise and encouragement.

(2.3.1) Emotional Needs

Parents/carers have a warm and supportive relationship with the child/young person which supports emotional, behavioural and social development of the child/ young person.

Parents/carers lack emotional warmth and/or can be critical and/ or inconsistent, which could impact the child/young person's emotional, behavioural and social development.

The family environment is volatile and unstable. For example, parents/ carers are intolerant, critical, inconsistent, harsh or rejecting and this is having an adverse effect on the child/young person's emotional, behavioural and social development, and may increase their vulnerability to risk.

Parents/carers expose the child/ young person to persistent emotional maltreatment which causes severe adverse effects on their emotional development, for example conveying to the child that they are worthless, unloved, inadequate, humiliated or valued only because they meet the needs of another person. Parents/ carers impose developmentally inappropriate expectations on the child/ young person or expose them to the ill-treatment of another.

(2.3.2) Pre-Birth Attachment

Pregnant woman and/or father/ partner are reporting warmth and love for unborn baby and are positively anticipating parenting a newborn.

Pregnant woman and/or father/ partner are reporting ambivalence towards the unborn baby and are actively seeking and responding to support and interventions to address this.

Pregnant woman and/or father/ partner are demonstrating ambivalence towards the unborn baby and despite engagement and interventions cannot or are unable to articulate/ demonstrate a bond with the unborn baby.

Pregnant woman and/or father/ partner are not able to demonstrate attachment with the unborn baby and are resistant to engaging with interventions to address this.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(2.4) Stimulation

Promoting child's learning and intellectual development through encouragement and cognitive stimulation and promoting social opportunities. Includes facilitating the child's cognitive development and potential through interaction, communication, talking and responding to the child's language and questions, encouraging and joining the child's play, and promoting educational opportunities. Enabling the child to experience success and ensuring school attendance or equivalent opportunity. Facilitating child to meet challenges of life.

(2.4.1) Stimulation and Development

The parents/carers provide effective stimulation and encouragement to develop independence, and ensure adequate safety and supervision.

The parents/carers provide inconsistent stimulation for the child/young person's age/stage of development, and this may impact on the child/young person's development.

The parents/carers provide limited stimulation to the child/young person, and this impacts on the child/young person's development.

Parents/carers needs take precedence at times over the child/young person's needs.

The parents/carers provide minimal stimulation, which is contributing to significant developmental delay in the child/young person or impeding the child/young person's development.

Parents/carers needs take precedence over the child/young person's needs.

(2.4.2) Engagement and Interaction

The parents/carers provide positive interaction and stimulation for the child/young person and encourage participation in and benefit from play and learning opportunities which support development.

Parents/carers understand the importance of play and learning for the child/young person development and wellbeing and provide play and learning opportunities but sometimes their own circumstances and other demands made on their time get in the way and they may have difficulty in prioritising the child's needs over their own.

Parents/carers do not recognise the importance of play and learning opportunities this for the child.

The child lacks key play and learning opportunities – not because of financial issues, but a lack of understanding, interest or recognition of the child's needs.

Parents/carers are unable or unwilling to recognise the importance of play and learning on child development and resistant to child's needs or advice from others about the importance of stimulation.

The child may be left unsupervised for extended periods of time while parents/carers go out locally, e.g. to socialise with friends.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(2.4.3) Promoting Opportunities

Parents/carers show an active interest in age-appropriate learning or employment opportunities.

Parents/carers are inconsistent in supporting the child to access learning or employment opportunities.

Parents/carers do not recognise the importance of supporting the child to access learning or employment opportunities.

Parents/carers are unable or unwilling to support learning or employment opportunities.

(2.5) Guidance and Boundaries

Enabling the child to regulate their own emotions and behaviour. The key parental tasks are demonstrating and modelling appropriate behaviour and control of emotions and interactions with others, and guidance which involves setting boundaries, so that the child is able to develop an internal model of moral values and conscience, and social behavior appropriate for the society within which they will grow up. The aim is to enable the child to grow into an autonomous adult, holding their own values, and able to demonstrate appropriate behaviour with others rather than having to be dependent on rules outside themselves. This includes not overprotecting children from exploratory and learning experiences. Includes social problem solving, anger management, consideration for others, and effective discipline and shaping of behaviour.



(2.5.1) Guidance Boundaries

Parents/carers set consistent age-appropriate boundaries and provide guidance, including online.

The parents/carers can struggle to set age-appropriate boundaries and has difficulties maintaining the child/young person's routine.

The parents/carers have the ability to set appropriate boundaries, including online, however the child/young person cannot always adhere to this.

The parents/carers are unable or unwilling to judge dangerous situations and/or is unable to set appropriate boundaries despite significant support.

The parents/carers have the ability to set appropriate boundaries, including online, however the child/young person is refusing to adhere to this.

The parents/carers are unable or unwilling to judge dangerous situations and/or is unable or unwilling to set appropriate boundaries.

Their child/young person is frequently exposed to dangerous situations in the home and/or community, including online.

The parents/carers have the ability to set appropriate boundaries, however the child/young person is refusing to adhere to this and placing themselves at significant risk of harm.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(2.6) Stability

Concerns the acquisition by a child of practical, emotional and communication competencies required for increasing independence. Includes early practical skills of dressing and feeding, opportunities to gain confidence and practical skills to undertake activities away from the family and independent living skills as older children. Includes encouragement to acquire social problem-solving approaches. Special attention should be given to the impact of a child's impairment and other vulnerabilities, and on social circumstances affecting these in the development of self-care skills.

(2.6.1) Accommodation

The family's accommodation is stable.

The family's accommodation is stable, but the child/ young person may have experienced frequent moves which has had some impact on the child's development.

The family have unstable accommodation, resulting in frequent moving (or the threat of this) which has had a detrimental impact on the child's development or relationships.

There are ongoing hazards within the home which have a detrimental impact on the child's health or safety.

The family have highly unstable accommodation, or experience homelessness, which has significant detrimental impact on the child's development.

The family's accommodation does not provide basic necessities such as running water, and this is creating significant risk or harm to the child.

(2.6.2) Family Stability

The child/young person has stable relationships and experiences.
They have regular contact with any family members that they wish to see.

The child/young person's relationships and experiences are not always consistent.
Parents/carers sometimes argue in front of child/ young person, but there is no threatening behaviour from either party.
They generally have contact with family members that they wish to see.

The child/young person's relationships and experiences are inconsistent, which impacts on their emotional wellbeing.
Parents/carers frequently argue aggressively in front of the child/ young person and this may at times lead to abuse and/or threatening behaviour.
They are unable to have contact with family member(s) that they wish to see.

The child/young person experiences significant instability in their home life and relationships which has a detrimental impact on their emotional wellbeing. Parents/ carers frequently argue aggressively in front of the child/ young person and this leads to frequent violent and threatening behaviour. One or more parent/carer is in prison, and this is significantly impacting on the family. Family members are being detained and at risk of deportation or the child is an unaccompanied asylum seeker.

Level 1 Universal Need: Support	Level 2 Additional Needs: Help	Level 3 Complex Needs: Help	Level 4 Acute Needs: Protect
Children whose needs are met by universal services or a simple single-agency response.	Children who are at risk of poor outcomes and need extra support from services.	Children who meet the threshold for Early Help or Statutory Assessment.	Children and who are in need of protection and require intensive support.

3) Environmental Factors

(3.1) Community Resources

Describes all facilities and services in a neighborhood, including universal services of primary health care, day care and schools, places of worship, transport, shops and leisure activities. Includes availability, accessibility and standard of resources and impact on the family, including members with disabilities.

(3.1.1) Accessing Services

The family is able to access all key services, social activities and learning opportunities.	The family is usually able to access key services, however this means that there are some missed opportunities for the child/young person, such as education or medical appointments.	The family has inconsistent access key services, meaning that there is negative impact on the child/young person.	The family is unable to access key services which causes significant impairment to the child/ young person's diet, education, social development, or emotional wellbeing.
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(3.2) Family's Social Integration

Exploration of the wider context of the local neighborhood and community and its impact on the child and parents. Includes the degree of the family's integration or isolation, their peer groups, friendship and social networks and the importance attached to them.

(3.2.1) Social Integration

The family experience positive friendships and networks locally.	The family can experience social isolation on occasions and/or there is an absence of supportive community networks.	The family is largely socially excluded and isolated to the extent that it has an adverse impact on the child/ young person.	The family is socially excluded, and the child/young person is seriously affected but the family actively resists all attempts to achieve inclusion and isolates themselves from sources of support or declines support which aims to reduce harm to the child or meet their health needs.
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Universal Needs

Additional Needs

Complex Needs

Acute Needs

(3.3) Income

Income available over a sustained period of time. Is the family in receipt of all its benefit entitlements? Sufficiency of income to meet the family's needs. The way resources available to the family are used. Are there financial difficulties which affect the child?

(3.3.2) Finance

Parents/carers use financial resources to meet the family's needs and is aware of how to access support at times of financial difficulty.

Parents/carers can struggle to budget effectively or have insufficient income and as a result the child/young person occasionally does not have adequate food, warmth, or essential clothing.

The family seek support and advice relating to financial difficulties when required.

Parents/carers do not use financial resources in the best interests of the child/young person who frequently does not have adequate food, warmth, or essential clothing, e.g., expenditure on drugs, alcohol, gambling or other addictive behaviours and/or a perpetrator of domestic abuse means that there are frequently insufficient funds to meet the child's basic needs.

Parents/carers are indifferent to support and advice relating to financial difficulties.

Parents/carers do not use financial resources in the best interests of the child/young person who consistently does not have adequate food, warmth or essential clothing and is at risk of physical or developmental harm, including death, as a consequence. The family may be at risk of homelessness.

Parents/carers are indifferent to support and advice relating to financial difficulties.

(3.4) Employment

Who is working in the household, their pattern of work and any changes? What impact does this have on the child? How is work or absence of work viewed by family members? How does it affect their relationship with the child? Includes children's experience of work and its impact on them.

(3.4.1) Employment

Parents/carers are in regular stable employment which provides financial assurance. The work undertaken does not impact upon the child/young person and education, training and employment are viewed positively as part of the family culture.

Parents/carers would like to work but are unable to find regular or stable employment, leading to financial impact or negative impact on the child/young person's emotional wellbeing. The demands of the work of parents/carers is creating some occasional instability or difficulty for the child/young person.

Parents/carers are not in work, and this is causing moderate financial or emotional difficulty for the family/child/young person. The demands of the work of parents/carers is creating regular instability or disruption for the child/young person and this may affect the care they receive.

Parents/carers are not in work, and this is causing significant financial or emotional difficulty for the family/child/person. The demands of the work of parents/carers is creating severe instability or disruption for the child/young person and this is significantly affecting the care and supervision they receive.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(3.5) Housing

Does the accommodation have basic amenities and facilities appropriate to the age and development of the child and other resident members? Is the housing accessible and suitable for the needs of family members with disabilities? Includes the interior and exterior of the accommodation and immediate surroundings. Basic amenities include water, heating, sanitation, cooking facilities, sleeping arrangements and cleanliness, hygiene and safety and their impact on the child's upbringing.

(3.5.1) Housing

The family home is clean and warm, and without hazards which could impact the safety or well-being of the child.

The accommodation has all essential amenities such as heating, washing/bathing facilities, cooking facilities, adequate beds and bedding and a toilet and is in a reasonable state of repair and decoration.

Parents/carers take appropriate action when there are defects with the property e.g. undertake repairs or contact the landlord to request repairs carried out.

The family home is not consistently clean and is not always free of hazards which could impact on the safety and wellbeing of the child.

The accommodation has some essential amenities but is in need of repair.

Parents/carers can be inconsistent in taking appropriate action when there are defects with the property.

The family's home is consistently dirty, in a state of disrepair and/or unsafe to the extent that it impacts on the child's safety and wellbeing including their ability to sustain engagement with learning opportunities.

There are inadequate amenities such as beds and bedding, a dirty toilet, lack of clean washing facilities and the environment is dirty and cluttered.

Parents/carers are indifferent or unable to recognise the impact of the home conditions on the child/young person's sense of wellbeing and often don't take appropriate action when necessary.

The family's home is in a dangerous state of disrepair such that it represents an immediate risk to the safety and wellbeing of the child and parents/carers fail to take appropriate action when there are defects with the property.

There is a lack of essential amenities such as a working toilet, washing/bathing facilities, inappropriate and dirty bed and bedding and poor facilities for the preparation of food.

Parents/carers are unable to make changes or unwilling to take advice about the impact of the home circumstances on child/young person's welfare or well-being.



Universal Needs

Additional Needs

Complex Needs

Acute Needs

(3.6) Wider Family

Who are considered to be members of the wider family by the child and the parents? This includes related and non-related persons and wider family. What is their role and importance to the child and parents and in precisely what way?

(3.6.1) Support Networks

The parents/carers, child/young person have positive relationships with their wider family and support networks.

The parents/carers, child/young person's relationship with the wider family and support network is inconsistent and can be limited.

The parents/carers, child/young person's relationship with the wider family and support network is limited, unstable and may be detrimental to the child/young person.

The parents/carers, child/young person's relationship with the wider family and/or support network has broken down and is having a detrimental impact and pose a risk of harm to the child/young person.

(3.7) Family History and Functioning

Family history includes both genetic and psycho-social factors. Family functioning is influenced by who is living in the household and how they are related to the child; significant changes in family/household composition; history of childhood experiences of parents; chronology of significant life events and their meaning to family members; nature of family functioning, including sibling relationships and its impact on the child; parental strengths and difficulties, including those of an absent parent; the relationship between separated parents.

(3.7.1) Additional Parental Needs

Parents/carers do not have physical, mental health or disabilities needs which impact the care of the child/young person.

Parents/carers have some physical, mental health or disability needs, creating an adult focus which at times may impact the child/young person.

Parents/carers physical, mental health or disability needs take precedence over the needs of the child/young person which is having a detrimental impact on their care and may place them at an increased risk of harm.

Parents/carers physical, mental health or disability is significantly affecting the care of their child/young person placing them at risk of harm.

Universal Needs

Additional Needs

Complex Needs

Acute Needs

(3.7.2) Young Carer

The child/young person does not have caring responsibilities or the child's caring role does not adversely affect their health, wellbeing and/or attainment.

The child/young person has some caring responsibilities, which can adversely affect their health, wellbeing and/or attainment.

The child/young person has regular caring responsibilities, and these have an impact upon their health, wellbeing and/or attainment, for example missing learning opportunities, loneliness and/or risk of poor mental health.

The child/young person has long term caring responsibilities which are excessive or inappropriate for the age and ability of the child.

The child/young person's health, wellbeing and/or attainment are being significantly impacted, including (but not limited to) being unable to access learning opportunities, social isolation, poor mental health and/or hygiene.

(3.7.3) Criminal Activity

There is no history of criminal or anti-social behaviour which would impact on the family.

There is suspicion or evidence of criminal, anti-social or extremist activity, or parental imprisonment within the family where intervention may be needed to reduce the impact on the child/young person.

There is a known involvement in gang or other criminal activity relating to serious or violent crime, prolific offending, or extremist/terrorist activity by a member of the family. This is impacting on the safety, health or wellbeing of the child/young person.

Evidence that an adult who is less than 12 months from their release or who is subject to license/ supervision arrangements and will have parenting responsibilities on release which indicates and poses a risk to the well-being of the child/young person.

Substantiated evidence of involvement in gang activity, organised crime or extremist groups or sexual offences against adults or children by a member of the family which indicates there is an immediate risk to the safety, health or well-being of the child/young person.



Consent Guidance

There is a need to gain consent from those who have parental responsibility when practitioners wish to seek information from practitioners in other services and share information with them and request the involvement of another agency for assessment and provision of services.

It is good practice to record in writing when parents (or other people in the household aged 16 or over) have consented to information sharing and place a copy on the record within the respective agency.

When can I request involvement of Children and Young People's Services without Parental Consent?

If the request for involvement is considered a child protection issue, seeking consent may not be appropriate. In most situations it is appropriate to seek consent. However, there are some where it is not. Concerns should not be sought if doing so would:

- Place a person at increased risk of significant harm (to a child) or serious harm (to an adult).
- Prejudice the intervention, detection or prosecution of a serious crime.
- Lead to unjustified delay in making inquiries about allegations of significant harm (to a child) or serious harm (to an adult).

Where consent is not sought, the decision and rationale should be clearly recorded.

A child protection request for involvement from a practitioner cannot be treated as anonymous. Where the parent refuses to give permission for the involvement, further advice should be sought from the Safeguarding Lead within that agency, unless doing so would cause significant delay. If having taken into consideration the parent's wishes, it is still considered that there is a need for a request for involvement:

- The reason for proceeding without consent/ parental agreement must be recorded;
- The parent's withholding of permission must form part of the verbal and written referral to Vale Family Compass;
- The parent should be contacted to inform them that, after considering their wishes, a MARF has been submitted.

This consent must be re-sought for each episode of work that a practitioner undertakes with a family (e.g if the work with a family finishes and then reopens, or for each MARF submitted). The only exception is where the need is defined as safeguarding and parents do not give their consent. In this case, the welfare of the child overrides parental wishes.

You should always talk to parents and carers, when you have a care and support request or a child protection concern, unless to do so would place a child at risk of significant harm, to let them know that you intend to share information with other agencies and make a request for involvement to Children & Young Peoples Service.



Requesting Involvement from Children and Young People Services

If you are unsure consult with your agency safeguarding lead or call 01446 725202

CHILD PROTECTION INQUIRY

Is there reasonable cause to suspect that a child is suffering or likely to suffer significant harm?

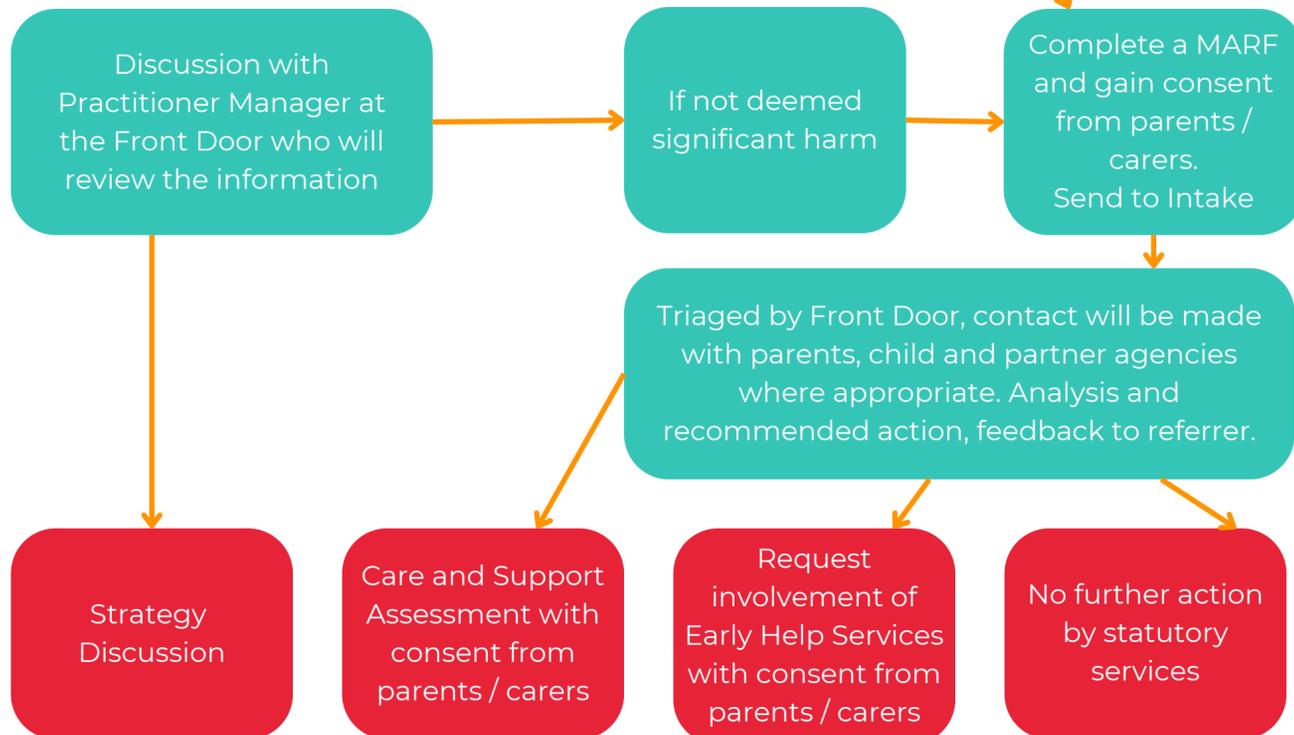
Call 0808 281 6727 or 999 if there is immediate risk to a child

Follow up MARF within one working day.

CARE & SUPPORT

If the child is unlikely to achieve, maintain or have the opportunity of achieving a reasonable standard of health or development?

Is their health or development likely to be significantly impaired without the provision of such service?

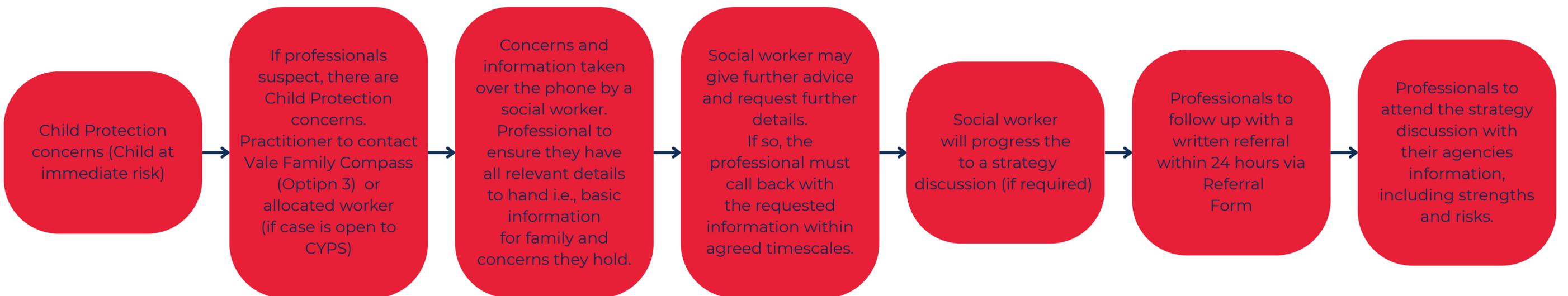
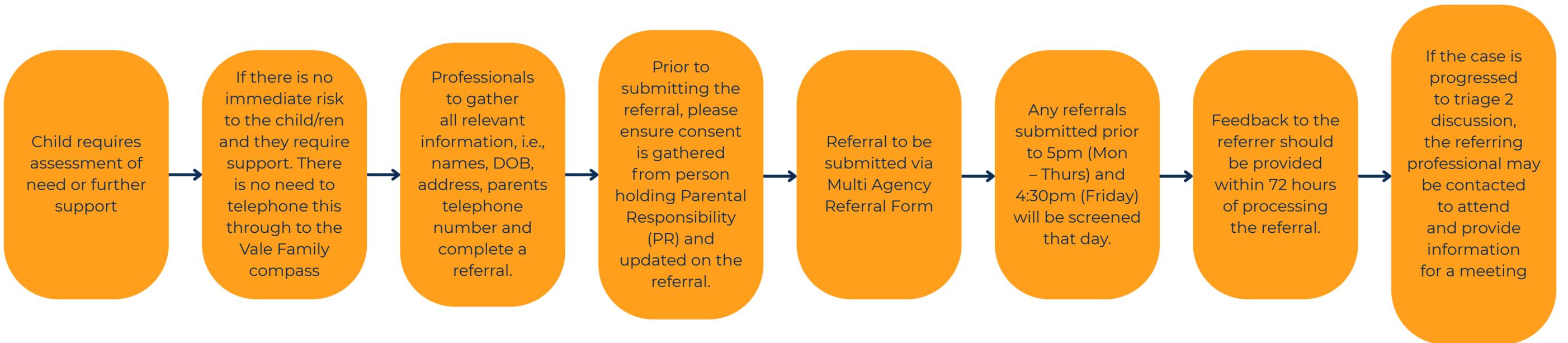


Needs Appropriate Resources

Examples of indicator need services/resources

Universal Needs	Additional Needs	Complex Needs	Acute Needs
Childcare	Independent Domestic Violence Advisor (IDVA)	Refuge/ Safe Accommodation	Probation
Family Centres	Homelessness Options	Counselling Services	Tier 4 Child & Adolescent Mental Health Services (CAMHS)
Benefits, Financial Services	Victim Support	Safeguarding Leads in School Services	A&E
Housing	Youth Services	Youth Services	Child Protection within Children and Young People Services Teams
Victim Support	Police	Police	
Citizens Advice	Families First Services	Advocacy Services	
Education	Generic Community Support Services	Young Carers	
Youth Services	Disability Services	Complex Needs Team	
Police	Advocacy Services		
Community Social Groups	Supporting People - Tenancy Support		

Universal Needs	Additional Needs	Complex Needs	Acute Needs
GPs	Flying Start	Health Visitor Flying Start	Tier 3 Services for Substance Misuse
Midwifery	Substance Misuse Services	Specialist Safeguarding Health Teams	Children Looked After Team
Health Visitors	Children and Young People Services	Specialist Safeguarding Midwife	Social Care - Children and Young Peoples Services
School Nursing	School Nursing	School Nursing	School Nursing
Community Nursing	Team Around the Family (TAF)	Team Around the Family (TAF)	Safeguarding Leads in School
Hospitals	Emotional Wellbeing & Mental Health Service	Child & Adolescent Mental Health Services (CAMHS)	
	Youth Justice and Early Support Service (YJESS)	Youth Justice and Early Support Service (YJESS)	Youth Justice and Early Support Service (YJESS)
Dentists	New Pathways/ Workways – Employment Assistance	Substance Misuse Services	Protecting Vulnerable People, Police Units



**CWMPAWD
TEULU Y FRO**

DOD O HYD I ATEBION GYDA'N GILYDD



**VALE FAMILY
COMPASS**

FINDING SOLUTIONS TOGETHER

The Vale Family Compass provides information, advice, support and assistance to children, young people and their parents, carers, and families throughout the Vale of Glamorgan



0808 281 6727

valefamilycompass.co.uk

familycompass@valeofglamorgan.gov.uk