Continuum of Need

This document is for use by all practitioners working with children and their families across Dorset. It may be seen as the 'threshold document' required by <u>Working Together 2023.</u>

The purpose of the document is to provide conversation opportunities to identify a child's degree of need and appropriate support for children and families, ensuring this support is offered by the right agencies, at the right time and to prevent their needs escalating to a higher level. It will help identify when conversations with, including referrals to specialist or statutory Children's Social Care services, are required. The document should be used alongside the <u>Dorset multi-agency safeguarding policy and procedures</u>.

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

If you have any access issues with this document, please contact QAPaudits@dorsetcouncil.gov.uk

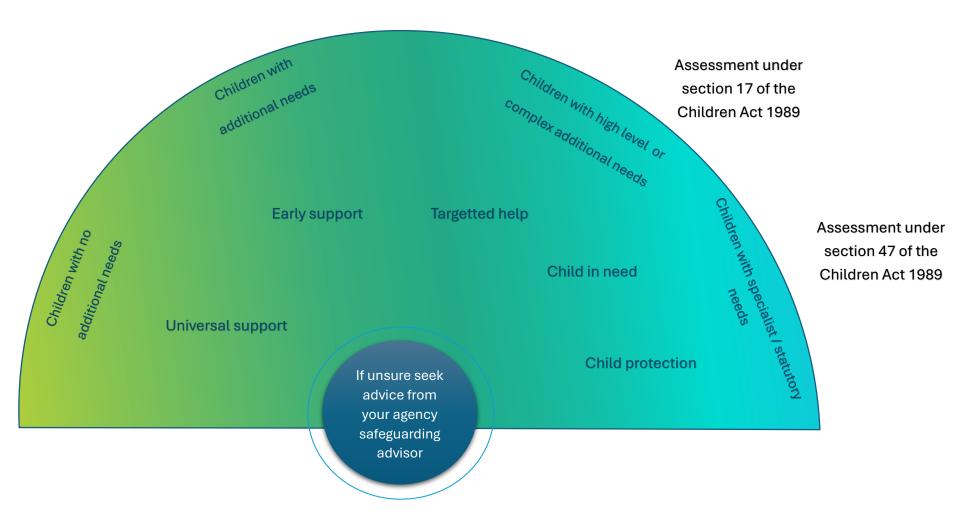
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Guidance:

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

Levels of need and vulnerability



Providing effective support to children and families

Universal Support

Children and young people are supported by their family and universal services to meet all their needs. This can include early years, education, primary health care, maternity services, public health nursing, housing, community and voluntary organisations and faith groups.

The majority of children living in Dorset are expected to require support from universal services alone to have their needs met.

Support at this level should be open access and universally available. If families require advice or support to access this, <u>Dorset Family Hubs</u> can be contacted to assist.

Early Support

One or more services provide voluntary support that is in addition to their universal offer to meet the child or young person, and their family's emerging needs. Where multiple agencies are involved, this is coordinated through a Team around the family led by a service that knows the child/young person best. This is recorded in a Whole Family plan.

Consent is required for the referral to & provision of support by individual services and for any multi-agency co-ordination of this support.

The Locality may be involved in this work either through the provision of advice and guidance to the Team Around the Family, or through the provision of services through our Family Hubs (eg. Parenting Groups; Youth Work etc). Documents and resources to support provision at this level can also be found through Dorset Families Matter.

Early Support also includes the provision of Direct Payments to support families caring for a child who has a disability through our B2SA service.

Practitioners should talk to the family and carry out an Early Support assessment. They should either provide single agency support if they can meet the needs this identifies or engage with other appropriate services to work with them. This should be co-ordinated through a Team around the family meeting and recorded in a whole family plan.

Note: Dorset Children's Services do not need to be notified where this support is taking place but the Family Support and Advice Line can be contacted on 01305 228558 for advice and guidance on this.

Dorset Family Support and Advice Line should also be contacted on 01305 228558 where assessment for direct payments is being requested.

Targeted Early Help

A multi-disciplinary Team Around the Family approach, led by a Lead Family Help Practitioner who coordinates information sharing, services and practical support to meet the child or young person's and their family's needs, where these are multiple, interconnected and may escalate without a coordinated multi-agency service intervention and direct support to the family in their home. This may also include where there are specific support needs for a family with a child with a disability.

Consent is required for the referral to & provision of support by individual services and for any multi-agency co-ordination of this support.

If you believe a family require this level of support, please gain consent from the family and then contact the Family Support and Advice Line on 01305 228558 for discussion about support and identification of a lead practitioner.

The following process charts are available to show the pathway from this point:

1.When a child is referred.vsdx

2. Family Help Pathway.vsdx

Child in Need

A child in need is defined under section 17 of the Children Act 1989 as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health and development is likely to be significantly or further impaired without the provision of services, or a child who is disabled.

To fulfil this duty, practitioners undertake assessments of the needs of individual children, giving due regard to a child's age and understanding when determining what, if any, services to provide.

Where assessment identifies support is required at this level, this will be multi-disciplinary help and protection, led and co-ordinated by a Lead Family Help Practitioner with a Child or young person & their family.

If you identify a child or young person thought to require this level of assessment or support contact the Family Support and Advice Line on 01305 228558 for discussion about support and identification of a lead practitioner.

Consent is required for the referral to & provision of support under child in need and for any multi-agency coordination of this support.

The following process charts are available to show the pathway from this point:

- 1. When a child is referred. vsdx
- 2. Family Help Pathway.vsdx

Child Protection

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Specialist CiC

Children who need protecting may include those who experience harm in their own family and those who are harmed or exploited by others, including their peers, in their community and/or online.

Suffering or being likely to suffer significant harm is the threshold for child protection enquiries and can take different forms, including sexual, physical or emotional abuse, neglect or domestic abuse (including controlling or coercive behaviour), exploitation by criminal gangs or organised crime groups, trafficking, online abuse, sexual exploitation, and the influences of extremism which could lead to radicalisation.

If you identify a child or young person you believe to have suffered or be at risk of significant harm, a safeguarding conversation should take place with the Family Advice And Support Line immediately on 01305 228558. Consent is required unless you believe seeking this would place the child or others at increased risk of significant harm. In an emergency, the agency should call 999.

The following process charts are available to show the pathway from this point:

1. When a child is referred. vsdx

Key legislation regarding Children's Services support to families

Section 10 and 11 of the Children Act (2004) sets out how local authority Children's Services and other agencies and bodies need to work together effectively to protect and promote the welfare of children in the UK, this includes through the offer of early help services to children and families.

Child in Need Section 17 of the Children Act (1989) states that a child shall be considered in need if:

- They are unlikely to achieve, maintain or have the opportunity of achieving or maintaining a reasonable standard of health or development without the provision of services by a local authority.
- Their health and development is likely to be significantly impaired, or further impaired, without the provisions of such services and/or;
- They are disabled.

Child Protection Section 47 of the Children Act 1989 states that the authority shall make necessary enquiries to enable them to decide whether they should take action to safeguard or promote the child's welfare where there is reasonable cause to suspect a child is suffering or likely to suffer significant harm.

<u>Children Looked After by the Local Authority Part III Children Act 1989</u> outlines the support for children and families provided by Local Authorities in England. Examples where a child is looked after by a Local Authority include:

- An Emergency Protection Order (Section 44 Children Act 1989) if the child is likely to suffer significant harm if not removed to Local Authority care.
- Being provided with accommodation under <u>Section 20 of the Children Act 1989</u>; duty to accommodate a child, for more than 24 hours with the agreement of the parents or of the child if s/he is aged 16 or over.
- A Care Order (Section 31 of the Children Act 1989; care and supervision orders)
- Being remanded by a criminal court to Local Authority Accommodation or Youth Detention Accommodation under <u>Chapter 3 Legal Aid Sentencing</u> and <u>Punishment of Offenders Act 2012</u>. There are national standards for children in the youth justice system which outlines the minimum expectations for all agencies to provide statutory services to children in the youth justice system <u>Standards for children in the youth justice system GOV.UK</u>

Potential Indicators of Need

- Note: This is an illustrative list of potential indicators that provide conversation opportunities to identify appropriate support for children and families
 - It is important to know that this list is not exhaustive, indicators do cross between different levels of need, as illustrated by the columns without headings.

	Universal		Early Support		Targete d Early Help	← →	Child in Need	←	Child Protectio n
Childs Developm ental Needs Health, Learning, Emotional and Behavioural Developmen t, Identity, Relationship	Is generally physically well, Nutritious diet, Adequate hygiene and dress. Development and health reviews /immunisation s up to date. Developmenta I milestones and motor skills reviewed.	Pregnancy with complications or impact of parental lifestyle Has some identified additional learning needs Has some difficulties sustaining relationships Finds accepting responsibility for own	Few positive relationships No access to books/toys Concerns about developmental progress: e.g. overweight/unde rweight bedwetting/soilin g Missing some routine and nonroutine health appointments May experience bullying or be	Disability prevents self- care in a significant range of tasks Ongoing, challenging behaviour at school, possible risk of exclusion Consistently poor education attendance and punctuality Consistently	Self- harming behaviours Relationshi ps with carers characteris ed by unpredicta bility Evident mental health needs Serious or persistent offending behaviour	Chronic/recurring health difficulties are not treated or are badly managed Serious professional concern; family declining services Child lacks a sense of safety and as a result often finds him/herself in dangerous situations Starting to commit offences/re-offend Child reported missing from home	Unsafe sexual activity Persistent and/or high-risk episodes of missing Child/youn g person is out of education or not receiving education due to parental neglect	Allegation of abuse/phy sical injury caused by a profession al Refusing medical care endangering life/development Failure to thrive, likely to be due to	Disclosure or suspicion of physical, sexual or emotional abuse or neglect Non-accidental injury and/or unexplained injury, particularly in non-mobile children Puts self or others in danger
3	Good mental Health	actions difficult	exhibiting bullying behaviour	not reaching educational potential		Developmental milestones are not	Unaccomp anied	care provided	Serious decay from persistent

	Minor			Significantl	being met due to	refugee/asy	Seriously	lack of dental
Good qu	ality concerns re	Disability limits	Emerging	y poor self-	parental care	lum seeker	obese/	care
early	diet, hygiene	amount of self-	mental health	image/iden			seriously	
relations	hips. or clothing	care possible	issues e.g.	tity	Changed behaviour,	Child	underwei	Unborn baby
	· ·		anxiety,		reference to	involved	ght	impacted in
Able to a	Dental	Lack of positive	depression,	Persistent	radicalised thoughts/	with		utero by
to chang	e difficulties	role models	eating	and	threats to act	serious,	Dangerou	neglect/abuse
Understa	untreated/so		disorder	significant		persistent,	s sexual	
others'	me decay	Not reaching		disruptive/		high risk	activity	
feelings.	Vulnerable to	education	Poor	challengin		substance	and/or	
	emotional	potential	punctuality/p	g		misuse	early	
Takes	difficulties,	a abild/	attern of	behaviour		Physical/	teenage	
responsi	bility perhaps in	a child/young person who has	regular	at school, home or in		learning disability	pregnancy	
for behav	viour. response to life events	special	education	the		needing	Suspected	
	such as	educational	absences/fixe	communit		constant	risk of	
Sexual ad	ctivity	needs (whether	d term	V		supervision	Female	
is age-	separation	or not they have	exclusions	У		30pci vision	Genital	
appropri	ate.	a statutory		Young		Presentatio	Mutilation	
	Child appears	education, health	Potential	carer with		n (including	oc.ideioii	
Respond		and care (EHC)	support need	developme		hygiene)	Child	
appropri		plan)	where a child has	nt		significantl	displaying	
to bound	laries		previously	compromis		y impacts	sexually	
and	Delay in	a child/young	returned	ed through		on	harmful or	
construc	. caciii.g	person who is	home to their	caring role		relationshi	abusive	
guidance	developmenta	disabled	family from			ps	behaviour	
	I milestones		care	Relationshi				
Can			curc	ps with		Privately	Acute	
discrimin			a child/young	family		fostered	mental	
between			person who is	experience		.	health	
and unsa			viewing	d as		Rejection	difficulties	
contacts			problematic	negative		by a	e.g.	
	communicatio n difficulties		and/or	(,low		parent/care	severe	
Has posit			inappropriate	warmth, high		r, family no longer	depressio n or risk of	
self-imag	Some		online	criticism')		willing to	suicide	
			content (for	chicisiii)		care for, or	Joicide	
Stable ar	id autitus au		example,	Age		have		
affection	lace		linked to	inappropri		abandoned		
relations	nips		violence), or	ate		and in ca		
with fam	illy and the second second		developing					

	of confidence,	inappropriate	sexualised	child/young	
Able to make	sexuality,	relationships	behaviour	person	
and maintain	gender	online			
friendships	identity				
		a child/young			
Access to	Showing early	person who is			
books and toys	signs of anti-	bereaved			
Is provided	social				
with	behaviour/offe				
	nding				
appropriate education and					
	Experiments				
learning	with				
Fuierrand	tobacco/alcoh				
Enjoys and	ol/ illegal				
participates in	drugs				
learning activities	J				
activities	Some				
Has	difficulties				
	with adult or				
experiences of success and	peer				
achievement	relationships				
achievement	e.g. 'clingy',				
Sound links	anxious or				
between home	withdrawn				
and education	***************************************				
provider	Limited				
provider	engagement				
Planning for	in play with				
career/ adult	others/has				
life	few or no				
ille	friends				
Unborn with					
needs met	Not always				
needs met	engaged in				
	play/learning,				
	poor				
	concentration				
	32.1.0011.1.01.311				

Parenting	Provide for	Inconsistent	Parent/carer	Parents	Exposed to	Severe	Child	Non-
	child's physical	responses to	stresses starting	sometimes	domestic	disability –	beyond	compliance of
Capacity &	needs, e.g.	child/young	to affect ability to	find it difficult	abuse or	parents	parental	parents/carers
	food, drink,	person	ensure child's	to positively	chronic	who	control	with services
Family	equipment,		safety	resolve	parental	require		where risk of
	appropriate	Parent/carer		conflict in	conflict	additional	Parent's	harm to child
	clothing,	offers	Unnecessary or	their	within the	support	mental	has been
Basic Care,	medical and dental care	inconsistent boundaries	frequent visits to	relationship	household	and breaks	health difficulties	identified
Ensuring	dental care	boundaries	doctor/casualty	Lack of	or family.	in care to meet care	or	Family home
Safety,	Protection	No effective	Parent/carer	routine in the	A	needs	substance	used for drug
Emotional	from danger or	support from	requires advice	home	child/youn		misuse	taking, sex
Emotional	harm	extended	on parenting		g person is	Request for	affect care	trade or other
Warmth,		family.	issues		taking on a	child to be	of child/	illegal
Stimulation,	Shows warm		Basic care is not		caring role	accommod ated	young person	activities
Guidance	regard, praise	Low level parental	consistently provided		in relation to their	ateu	person	Suspected/evi
	encouragemen	substance	provided		parent/car	Parent says	Parental	dence of
and	+	misuse	Inappropriate		er or is	someone	substance	fabricated or
Boundaries,	·		child care		looking	is/has	misuse	induced
Stability	Ensures stable	Parents	arrangements		after	harmed	impacts	illness /
Stability	relationships	struggling to	and/or too many		younger	their child	on ability	perplexing
	relationships	have their	carers=		siblings.	Dragnant	to consistent	presentation
	Ensure the	own				Pregnant parents/car	ly meet	Chronic and
	child can	emotional			Child has	ers who	child's	serious
	develop a	needs met			multiple	have been	needs	domestic
	sense of right	5			carers,	unable to		abuse in the
	and wrong	Provides			some of	care for	Contact	home.
		limited access			whom may	previous	with	
	Child/young	to new experiences or			have no significant	children	individual	Parent/carer's
	person	leisure			relationshi		posing a	mental health
	accesses	activities			p with	No	suspected	or substance
	play/activities/l eisure facilities	a carvicies			them.	effective	or known	misuse
	as appropriate					boundaries	risk to	significantly
	to age and				Parents	set by	children	affects care of
	interests				are	parents/car		child
					consistentl	ers		Persistent and
					y unable to			high-risk
					act as			Tilgii-tisk

	Good			positive		Parents/car		parental
	relationships			role		ers own		substance
	within family,			models		needs		misuse
	including when			models		mean they		11113030
	parents are			Some		are unable		
	separated			exposure		to keep		Parents/carers
				to		child/young		involved in
				dangerous		person safe		violent or
				situations				serious crime
				in the				or criminal
				home or		CL II LI		offences · ·
				communit		Child has no-one to		against children
				У		care for		Children
				Parents do		him/her		Parent/carer
				not		riiiriqrici		is failing to
				provide				provide safe
				access to				physical care
				positive				or emotional
				experience				support to
				S				child
				Parents				
				unable to				
				set				
				effective				
				boundaries				
				e.g. too loose/tight				
F 1	Accommodati	Parents/carers	Family have	Emerging	Unsuitable	Extreme	Child/you	Home
Environme	on has basic	have limited	physical and	behaviours	accommodation/inte	poverty/de	ng person	conditions are
ntal and	amenities and	formal education	mental health	which are	ntionally homeless	bt	persistentl	dangerous or
	appropriate	or are impacted	difficulties	seen as		impacting	y involved	seriously
Contextual	facilities to	by other	impacting on	being anti-	Homeless, or	on ability	with the	threatening to
Factors	meet family	disadvantage	their child	social or	imminent	to care for	supply of	health
i actors	needs	- · · · ·		violent	homelessness if not	child	illegal	
	Managina	Difficulty	Low income		accepted by housing		substance	
Community,	Managing	accessing	or financial/ debt	Child	department	Child/youn	S	
Social	budget to meet	community facilities	debt difficulties/	subject to		g person is		
Social	meet	racinacs	difficulties _i	persistent		at risk of		

Integration,	individual		rent arrears	discriminat	Chronic	radicalisati	Child/you	
Income and	needs	Not in educ		ion, e.g.	unemployment or	on	ng person	
		employmer		racial,	poverty that severely		is	
Employment	Is able to	training pos		sexual,	affected parents'	Physical	assessed	
	access local services and	Periods of	family.	disability	ability to meet the child's needs	accommod ation	as at risk of sexual	
	amenities	unemploym	nent Known to be		chila's needs	places child	or sexual	
Housing,	arrieriities	of parent/ca		Parent/car	CL:114	in danger	criminal	
Criminal and	Family feels	or parenty ca	exploitation,	er serving	Child/young person is known to be	iii dangei	exploitati	
Exploitation	part of the		sexual	a prison sentence	carrying weapons	Family	on,	
	community		exploitation,	Sentence	Carrying weapons	seeking	including	
Risks	,		violence,			asylum or	through	
ļ			criminality or			are	trafficking	
ļ			radicalisation			refugees	1	
ļ							cuckooing	
ļ			Some social				, County	
ļ			exclusion or				Lines or	
ļ			conflict				modern	
ļ			experiences				day	
ļ			or victim of crime or				slavery	
ļ			bullying				Child/you	
ŀ			Dullyllig				ng person	
ļ			Child				has	
ļ			experiences				known	
ļ			persistent				involveme	
ļ			discriminatio				nt with	
ŀ			n which is				gangs or	
ļ			internalised				organised	
ļ			and reflected				crime	
ŀ			in poor self-				group	
ŀ			image					
1								
1			Home					
			conditions present a risk					
			to child's					
1			safety or					
			health					
1			11001011					



Sources of further information:

1. How we Do things in Dorset Guidance

(link to be added)

2. Dorset Family Support And Advice Line (including children's Social Care and Family Help Hub:

Telephone number – 01305 228558 childrensadviceanddutyservice@dorsetcouncil.gov.uk

(from 03/02/2025 please use :familysupportandadviceline@dorsetcouncil.gov.uk instead of above email)

Referral via telephone consultation, no requirement to complete inter-agency referral form.

3. Child and Adolescent Mental Health Services (CAMHS)

- CAMHS Gateway CAMHS Dorset
- Referral Guidance
- Referral form
- If you are over 18, please visit the Steps2Wellbeing website where you will find information about this service and how to access it. For urgent mental health support, please call our Connection service which is open 24/7. Dorset residents or people visiting Dorset can call direct on 0800 652 0190 at local call rate or access via NHS 111 for free. More information on our Access Mental Services is available on the Dorset HealthCare website.
- As part of CAMHS Gateway, the service is available for self-referral for young people aged 16-18 years old. <u>Visit the Dorset HealthCare</u> website to complete the self-referral form. Visit the Dorset HealthCare website to complete the self-referral form.

4. Dorset Health visiting duty line

01305 361071 (West) 01929 557593 (East)

5. Dorset Family Hubs

Family Hub - Dorset Council

6. Pan-Dorset Multi-Agency Safeguarding Policies and Procedures Manual

Pan-Dorset Multi-Agency Safeguarding Policies and Procedures Manual

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

7. Government Guidance

- Working Together to Safeguard Children 2023 (Statutory Guidance)
- Keeping Children Safe in Education