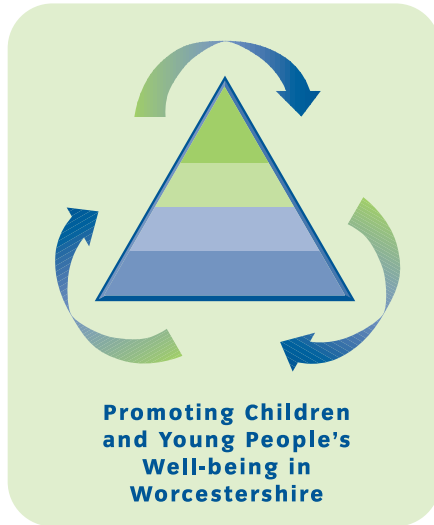


Worcestershire Safeguarding Children Board Integrated Working Programme



Thresholds Guidance for Practitioners



**WORCESTERSHIRE SAFEGUARDING
CHILDREN BOARD (WSCB)
AND INTEGRATED WORKING PROGRAMME
SAFEGUARDING CHILDREN AND YOUNG PEOPLE:
THRESHOLDS IN WORCESTERSHIRE GUIDANCE
(September 2008)**



1. Introduction

Working Together to Safeguard Children (HM Government 2006) sets out the functions of Worcestershire Safeguarding Children Board (WSCB). One of the functions is the development of policies and procedures for safeguarding and promoting the welfare of children. A specific application of this function is in setting out the thresholds for referrals to agencies, including to children's social care of children who may be in need, and the processes for robust multi-agency assessment of children in need, including those in need of protection

Having clear thresholds and processes and a common understanding of them across local partners may help to reduce the number of inappropriate referrals and improve the effectiveness of joint working, leading to improved outcomes for children and a more efficient use of resources. Services who work with children, young people and their families in Worcestershire also acknowledge the need to strengthen early intervention to address problems occurring in children's lives. By shifting the focus from dealing with the consequences of difficulties in children's lives to earlier identification of these difficulties, Worcestershire aims to help more children and young people to achieve the five outcomes within the Every Child Matters agenda as identified below.

This guidance results from a piece of joint work between Worcestershire Safeguarding Children Board and the Integrated Working Programme [CAF, Lead Professional and Information Sharing] to establish clear and agreed thresholds in relation to safeguarding and promoting the welfare of children and young people across Worcestershire.

A multi-agency working group came together to develop a framework for thresholds that builds on the existing 'whole systems' approach to meeting the needs of children and young people, where flexible and responsive services become increasingly targeted and specialist according to need.

This guidance will be subject to annual review coordinated by Worcestershire Safeguarding Children Board

2. Context

All children and young people deserve the opportunity to achieve their full potential. The five outcomes as defined in the Every Child Matters agenda (DFES 2004) key to children and young people's wellbeing are:-

- Stay safe
- Be healthy
- Enjoy and achieve
- Make a positive contribution
- Achieve economic wellbeing,

To achieve this, children need to feel loved and valued, and be supported by a network of reliable and affectionate relationships. If they are denied the opportunity and support they need to achieve these outcomes, children are at increased risk not only of an impoverished childhood, but of disadvantage and social exclusion in adulthood. Abuse and neglect pose particular problems.

2.1 A shared responsibility

Safeguarding and promoting the welfare of children – and in particular protecting them from significant harm – depends upon effective joint working between agencies and practitioners that have different roles and expertise.

Individual children, especially some of the most vulnerable children and those at most risk, will often need co-ordinated help from health, education, children's social care, at times the voluntary sector and other agencies, including youth justice services. Adult services, such as mental health or substance misuse services, when working with parents and carers should always consider the needs of any children and young people involved, in particular the possible risks of harm to the child/young person when planning the adults' ongoing treatment or discharging the adult from their care into the community.

2.2 Assessment of need

Assessment of need is based on competent professional judgement through a sound assessment of the child's needs, the parents or carers capacity to respond to those needs – including their capacity to keep children safe from significant harm – and the wider family and community circumstances. The Common Assessment Framework (CAF) is one assessment process that will support practitioners in the assessment of need supporting earlier identification of need. Children's needs will vary over time, which means that reappraisal of need is

important to ensure appropriate responses from targeted and specialist services as and when required. Entitlement to universal services remains at all levels of need.

2.3 Parenting, Families and services

Patterns of family life vary and families shape their own futures. Good parenting involves caring for children's basic needs, keeping them safe, showing warmth and love and providing stimulation needed for their development and to help them achieve their potential within a stable environment where they experience consistent guidance and boundaries.

Parenting can be challenging. Parents themselves need and deserve support. Asking for help should be seen as a sign of responsibility rather than a failing.

A wide range of services and professionals provide support to families in bringing up children. Generally it is the parent's decision when to ask for help and advice on their children's care and upbringing. However, professionals do also need to engage parents early to prevent problems or difficulties becoming worse or entrenched. This also means services need to be accessible to families and appropriate to need.

In exceptional cases there will need to be compulsory intervention in family life; for example, where this is necessary to safeguard children from significant harm. Such intervention should – provided this is consistent with the safety and welfare of the child – support families in making their own plans for the welfare and protection of their children.

3. Safeguarding Children: Thresholds in Worcestershire

Thresholds have been developed based upon a continuum of identified need and services in order to promote early identification of concerns by universal services. This approach utilises a four-tier model that takes into account the different stages of need and types of intervention, which are available to all children and their families (see page 9, The Model).

Children can move across the tiers at different times in their lives, or at different times during agencies contact with them. Support and or intervention may be provided on either a single or multi-agency basis to address the identified needs of the child. They may also receive services from across the tiers at the same time.

Within each tier of the model there are identified planning processes and a range of services that are available to the child and their family. In order to assist managers and practitioners, a matrix of possible indicators (Thresholds Framework) has been developed which highlights these issues and there are some examples/case studies of the type of situation that would be found within each of the tiers of need. The lists are not exhaustive and the table of possible indicators must not be used as a tick list. It is important to note that competent practitioner judgement is always the key and consideration must be given to the impact on the child or young person as well as other factors such as: the child's age, maturity and the co-operation /engagement of the parents/carers and wider family. Practitioners should be continually mindful of the accumulative effect of a number of concerns about a child's wellbeing, as well as the potential harm to children and young people if there is no sustained change over a period of time despite targeted support. This is echoed by Margaret Adcock in "A Child's Voice" she states

" Risk is cumulative. If there are two or more risk factors in a family where a child's care is cause for concern, the risk to the child is multiply increased compared to that of a child in the normal population. The developmental risk factors for the child and other risks arising from environmental factors and parenting capacity therefore need to be looked at carefully."

NB: If you are worried that a child may have been seriously harmed or may be at risk of significant or serious harm, you should follow WSCB procedures without delay.

Tier 1: Universal services

Most children achieve the five outcomes through the care of their families, plus the support of a range of universal services. Universal services are those provided to all families and children from health, education, and other community, voluntary, and private services such as leisure, play, housing services and early years. Children and young people identified at Tier 1 are those making good overall progress in all areas of their development.

Tier 2: Additional needs

Whilst all children require access to high quality universal services, some children and young people have additional needs that cannot be met through universal services alone. There are a variety of early intervention services available to support children and young people, including children's centres, some voluntary and community services and the development of extended services in and around schools. For further information please go to <http://worcestershire.childrensservicedirectory.org.uk>

Some children will need additional support from a service at some time in their lives without which they would be at risk of not reaching their full potential. In some cases it becomes apparent that their needs are unclear or broader than a service can address and a common assessment would help identify their needs and/or which other service may be able to help. This is when it is appropriate to undertake a common assessment, as it likely a co-ordinated approach is needed.

At Tier 2, in order to share information across agencies/services consent must always be obtained. For further guidance on information sharing please refer to Worcestershire's Promoting the Wellbeing of Children and Young People's Toolkit.

However, this does not prevent statutory responsibilities being fulfilled, e.g. the reporting of individual absence from school to appropriate service.

Tier 3: Complex needs

Children and young people at this tier are likely to have complex needs to the extent that their health, development and wellbeing will be impaired without intervention. At this level, children and young people will be supported by multi-agency planning processes e.g. Core Assessment through the Integrated Children's System, ASSET under Youth Offending Service Processes and Assessment of Special Educational Needs. Agencies that already conduct statutory assessments will embed the Common Assessment within their existing processes. The Common Assessment does not change the statutory requirements of agencies.

Tier 4: Children with critical/acute needs (including those in need of protection)

At this tier, a child's/ young person's health and development have been impaired and they have suffered or are likely to suffer significant harm and have critical/acute needs.

This may include children who are subject to a child protection plan, Looked After Children with a Special Educational Needs Statement and placed in residential special school and Children in a long-term hospital setting

In these cases there is legislation and/or best practice guidance in place which seeks to ensure these children have a named practitioner/worker to co-ordinate the delivery of multi-agency support as well as other functions that may be set out in statute. This named practitioner fulfils the function of the Lead Professional.

Child Protection

If, at any time, it is considered that the child may be suffering, or may be at risk of suffering significant harm, a referral to the Access Centre, Children’s Team (ACCT), must be made in accordance with local guidance. Where a referral is made by phone, the written referral that must follow, can be accompanied by the Common Assessment and any other assessment undertaken.

Where there is a decision to take no further action, the decision taken and the reasons for making those decisions should be fed back to the referrer in writing. It is also the responsibility of the referrer to clarify what action the Access Centre has decided upon. In these cases it may be necessary for the referrer to reconsider a Common Assessment.

If the referrer disagrees with the decision, they should discuss/refer to their line manager/ senior colleague within their own agency for discussion and negotiation and/or discuss further with the Professional Support Manager at the Access Centre. (Tel No: 01905 768054).

4. Key definitions.

Children

A child is anyone who has not yet reached his or her 18th birthday. ‘Children’ therefore means ‘children and young people’ throughout. The fact that a child has become 16 years of age is living independently or is in Further Education, or is a member of the armed forces, is in hospital, prison, or a young offender’s institution does not change their status or entitlement to services or protection under the Children Act 1989.

Safeguarding and promoting the welfare of children is defined as:

- protecting children from maltreatment;
- preventing impairment of children’s health or development;
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully.

Effective child protection is essential as part of wider work to safeguard and promote the welfare of children. However, all agencies and individuals should aim to proactively safeguard and promote the welfare of children so that the need for action to protect children from harm is reduced.

Children in need

Children who are defined as being 'in need', under S.17 of the Children Act 1989 (CA 1989), are those whose vulnerability is such that they are unlikely to reach or maintain a satisfactory level of health or development, or their health and development will be significantly impaired, without the provision of services, plus those who are disabled.

The critical factors to be taken into account in deciding whether a child is in need under the Children Act 1989 are what will happen to the child's health or development without the provision of services being provided, and the likely effect the services will have on the child's health and development.

Concept of significant harm

Some children are in need because they are suffering or likely to suffer significant harm. The CA 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention into family life in the best interests of the child, and gives local authorities a duty to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer significant harm.

There are no absolute criteria on which to rely when judging what constitutes significant harm. Consideration should be given to the severity of ill-treatment and may include the degree and the extent of physical harm, the duration and frequency of abuse and neglect, the extent of premeditation, and the presence or degree of threat, coercion, sadism, and bizarre or unusual elements. Each of these elements has been associated with more severe effects on the child, and/or relatively greater difficulty in helping the child overcome the adverse impact of maltreatment. Sometimes, a single traumatic event may constitute significant harm, e.g. a violent assault, suffocation or poisoning. More often, significant harm is a complication of significant events, both acute and longstanding, which interrupt, change or damage the child's physical and psychological development. Some children live in family and social circumstances where their health and development are neglected. For them, it is the corrosiveness of long-term emotional, physical or sexual abuse that causes impairment to the extent of constituting significant harm.

In each case it is necessary to consider any maltreatment alongside the family's strengths and supports.

References:

Department for Education and Skills (2004) Every child matters: next steps, Nottingham; DfES Publications

HM Government (2006) Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children.

www.everychildmatters.gov.uk

Children Act 1989

Promoting the Wellbeing of Children and Young People in Worcestershire toolkit (2007) including HM Government Information Sharing: Practitioners Guide (2006)

DoH Framework for Assessment for Children in Need and their Families (2000)

A Child's World: Assessing Children in Need: Jan Horwath (2001), Jessica Kingsley Publishers

Further Information

www.worcestershire.gov.uk/iwp

www.worcestershiresafeguarding.org.uk

Promoting Children & Young People's Well-being in Worcestershire

Outline of needs in each tier:

Tier 4

A child's health & development has been impaired. They have already suffered significant harm and have critical /acute needs.

Tier 3

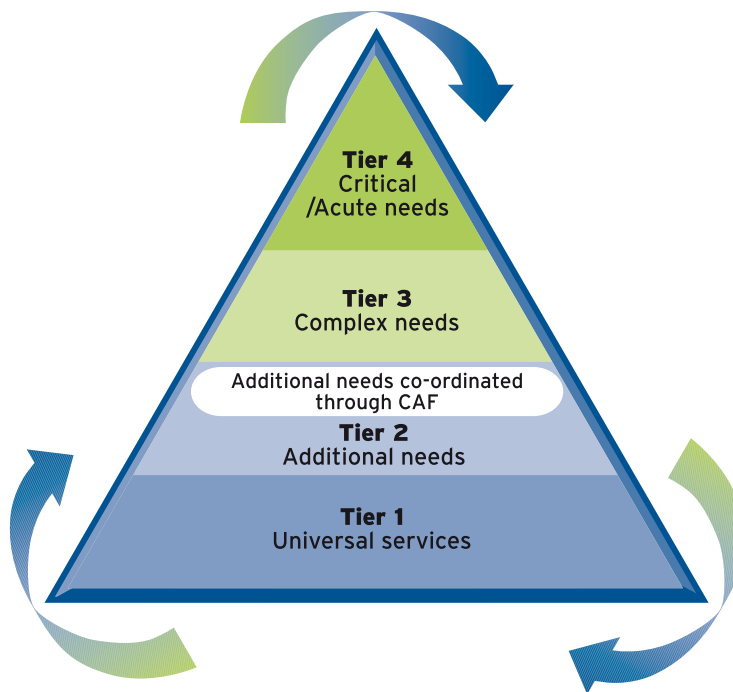
Children & young people with complex needs to the extent that their health and development will be impaired without intervention.

Tier 2

A child's health & development may be adversely affected by their circumstances. They will need additional support without which, they would be at risk of not reaching their full potential.

Tier 1

Needs can be met through universal services with no additional support



Examples of Services at each tier*:

Tier 4

e.g. Specialised residential & hospital placements, secure accommodation, child protection, looked after children.

Tier 3

e.g. Children's integrated area services, YOS, Specialist CAMHS, Aftercare 16+ Services, substance misuse teams.

Tier 2

e.g. Targeted Health Services, targeted housing support, sexual health services, counselling services, community support groups, targeted youth services, children's centres.

Tier 1

e.g. Schools, health visitors, school nurses, local community & leisure services, nursery provision, youth services.

If you are concerned that a child or young person may have suffered significant harm or may be at risk of significant harm, you must immediately follow the Inter-Agency Child Protection Procedures for Safeguarding Children.

If in doubt, consult with your line manager or area CAF Co-ordinator

CHILD'S NEEDS	TIER 1: UNIVERSAL	TIER 2: ADDITIONAL	TIER 3: COMPLEX	TIER 4: CRITICAL & ACUTE
HEALTH	<ul style="list-style-type: none"> Parents/carers access services appropriately. Child reaching developmental milestones. Routine health needs met. 	<ul style="list-style-type: none"> Child not attending health appointments, including routine immunisations and developmental checks and assessments. Slow in reaching developmental milestones. Engagement with ante and/ or postnatal care of concern. Susceptible to minor health problems. Early concerns about excessive or insufficient weight gain/ growth. 	<ul style="list-style-type: none"> Life limiting conditions. Significant chronic illness or disability. Concern about developmental milestones not being met. Late, erratic or non engagement with ante and/ or post natal services, where there may also be other factors of concern, e.g. mental health difficulties, substance misuse, health conditions. Serious concerns about weight/growth indicate child's welfare is being significantly impaired 	<ul style="list-style-type: none"> Patterns of critical health needs not being met puts child at risk of or experiencing significant harm. Illness/disability requires hospital treatment or child to be cared for away from home Evidence of neglect of child's basic needs for food, warmth and shelter impacting on child's development. Accumulating concerns in which intervention has failed to produce satisfactory and enduring change Failure to meet development milestones is causing actual or likely significant harm
		<ul style="list-style-type: none"> Experimenting with substance use. 	<ul style="list-style-type: none"> Substance misuse 	<ul style="list-style-type: none"> Chaotic substance misuse putting child/young person at serious and immediate risk requiring crisis management.
		<ul style="list-style-type: none"> Early concerns regarding unexplained injuries that may be indicative of a lack of parental/carer supervision. 	<ul style="list-style-type: none"> Concerns regarding an emerging pattern of unexplained injuries that may indicate abuse and/or neglect. 	<ul style="list-style-type: none"> Evidence or suspicion of non-accidental injury indicating actual or likely significant harm.

CHILD'S NEEDS	TIER 1: UNIVERSAL	TIER 2: ADDITIONAL	TIER 3: COMPLEX	TIER 4: CRITICAL & ACUTE
HEALTH ... continued		<ul style="list-style-type: none"> • Child needs some assistance (in additional to support of family and universal services) to cope with emotions/feelings/ reaction to distressing event 	<ul style="list-style-type: none"> • Concerns about mental health and/or self-harming behaviour. 	<ul style="list-style-type: none"> • Child with severe mental health difficulties – threat of suicide, psychotic episode, severe depression.
		<ul style="list-style-type: none"> • Sexual activity/awareness level raises early concerns for vulnerability or sexual health 	<ul style="list-style-type: none"> • Evidence of sexual activity that raises concerns about the safety of the child. • Child displaying age inappropriate sexualised behaviour. • Indications of sexual exploitation. • Early teenage pregnancy. 	<ul style="list-style-type: none"> • Evidence of sexual abuse and/or sexual exploitation. • Under 13 years engaged in sexual activity. • Adult viewing or producing sexually abusive images of children and or young people • Adult or older child who poses a sexual risk to children living in household with children
EDUCATION	<ul style="list-style-type: none"> • Regular school attendance, including home education where agreed. 	<ul style="list-style-type: none"> • Emerging pattern of unexplained absence from early years setting, school or college. Frequently late or picked up late. 	<ul style="list-style-type: none"> • Non-attendance or exclusion from school without alternative provision. • Children missing education. 	<ul style="list-style-type: none"> • High risk to self and/or others due to behaviour in educational setting.

CHILD'S NEEDS	TIER 1: UNIVERSAL	TIER 2: ADDITIONAL	TIER 3: COMPLEX	TIER 4: CRITICAL & ACUTE
EDUCATION ... continued	<ul style="list-style-type: none"> Child and young person's educational achievement is in accordance with their age, ability and aptitude. 	<ul style="list-style-type: none"> Identified learning or behaviour needs, placing him/her on School Action or School Action Plus. Not achieving key stage benchmarks. 	<ul style="list-style-type: none"> Child needs specialised in-county educational provision or additional support in mainstream provision through Statement of Special Educational Needs Child excluded from School without alternative provision 	<ul style="list-style-type: none"> Children with complex special educational needs in need of residential placements through Statement of Special Educational Needs.
EMOTIONAL & BEHAVIOURAL DEVELOPMENT	<ul style="list-style-type: none"> Good attachments. Emotionally well adjusted. Able to adapt to change and feelings and actions demonstrate appropriate responses to routine situations 	<ul style="list-style-type: none"> Emerging evidence of anxious and/or insecure attachments with parent/carers and other significant adults. Some evidence of difficulties beginning to impact on child's emotional wellbeing and/or behaviour. 	<ul style="list-style-type: none"> Evidence of anxious and/or insecure attachments with parent/carers and other significant adults impairing a child's emotional and/or behavioural development. 	<ul style="list-style-type: none"> Evidence of emotionally abusive relationships causing likely or actual significant harm. Evidence of mental health difficulties, resulting in behaviour placing themselves and/or others at risk of significant harm.

CHILD'S NEEDS	TIER 1: UNIVERSAL	TIER 2: ADDITIONAL	TIER 3: COMPLEX	TIER 4: CRITICAL & ACUTE
EMOTIONAL & BEHAVIOURAL DEVELOPMENT ... continued		<ul style="list-style-type: none"> • Some evidence of inappropriate responses and actions to routine situations. • Can find managing change difficult. • Child and young person starting to present management problems to their parents and carers, within the wider community and in their educational setting. 	<ul style="list-style-type: none"> • Finds it difficult to cope with anger, frustration and upset. • Cannot manage change. • Disruptive and challenging behaviour in community and/or educational setting, having an adverse effect on the child, family and community. 	<ul style="list-style-type: none"> • Child whose disruptive, challenging and risk taking behaviour is placing them at risk of significant harm. • Significant risk to themselves or others and evidence meets criteria for secure accommodation
		<ul style="list-style-type: none"> • Child engaging in criminal or anti-social activity that may result in entry to the criminal justice system 	<ul style="list-style-type: none"> • Child engaged in criminal activity that may result in community sentences. • Legal action to address anti social behaviour 	<ul style="list-style-type: none"> • Child in Criminal Justice system at risk of or serving custodial or intensive community sentence.

CHILD'S NEEDS	TIER 1: UNIVERSAL	TIER 2: ADDITIONAL	TIER 3: COMPLEX	TIER 4: CRITICAL & ACUTE
IDENTITY	<ul style="list-style-type: none"> • Positive sense of self. Demonstrates feelings of belonging and acceptance. 	<ul style="list-style-type: none"> • Signs of insecurity and lack of self-esteem. • Experiencing bullying, causing them to feel isolated and frightened. 	<ul style="list-style-type: none"> • Demonstrates low self-esteem in range of situations. • Experiences discrimination and/or social exclusion, with lack of protective factors, impairing welfare of the child. 	<ul style="list-style-type: none"> • Discrimination, isolation and exclusion causing severe and persistent adverse effects on a child's emotional development and/or child exposed to hazards and danger, including adults who pose a risk to children, within the home and elsewhere that places them at risk of significant harm.
FAMILY & SOCIAL RELATIONSHIPS	<ul style="list-style-type: none"> • Stable home environment. • Affectionate and warm relationships with family members. • Positive relationships with peers 	<ul style="list-style-type: none"> • Immediate family unsupported and isolated. Neighbour disputes. Insecure and unstable relationships within the family. • Lack of positive role models within family and wider community. • Impact of bereavement/ separation of family member may require additional support for a short period. • Difficulties with peer relationships. Involved with peers in challenging and/or criminal behaviour in the local community. 	<ul style="list-style-type: none"> • Parents/carers lifestyle impacting significantly on child's well-being. • High level of stress within family relationships. • Family in neighbourhood disputes, impacting on security of home and family. • Age inappropriate expectations of child's caring role and level of responsibility within family. • Child separated from parents, including private fostering arrangements. • Child previously looked after. • Previous child protection plan/concerns. • Young Carer 	<ul style="list-style-type: none"> • Parents/carers lifestyle places child at significant risk of/or suffering significant harm. • Evidence of child trafficking and/or sexual exploitation. • Unaccompanied Asylum Seeking Children • Looked After Child. • Child subject to a Child Protection Plan.

CHILD'S NEEDS	TIER 1: UNIVERSAL	TIER 2: ADDITIONAL	TIER 3: COMPLEX	TIER 4: CRITICAL & ACUTE
SOCIAL PRESENTATION	<ul style="list-style-type: none"> • Age appropriate dress for setting. • Personal hygiene attended to. 	<ul style="list-style-type: none"> • Inappropriate dress for setting and lack of parental concern. • Lack of attention to child's basic hygiene needs which could result in social isolation. 	<ul style="list-style-type: none"> • Consistently inappropriate dress that significantly impacts on the child's well-being. • Chronic lack of attention to child's basic hygiene needs that contributes to the child's welfare being significantly impaired 	<ul style="list-style-type: none"> • Parental neglect of social presentation likely to result in the serious impairment of child's health or development leading to child suffering likely or actual significant harm
SELF-CARE SKILLS	<ul style="list-style-type: none"> • Development of age appropriate practical, emotional and communication skills as required for increasing independence. 	<ul style="list-style-type: none"> • Slow to develop age appropriate self care skills indicating learning disability/difficulty • Child in need of support with self-care due to physical ill-health or disability • Lack of self-care skills resulting from neglectful parenting 	<ul style="list-style-type: none"> • Poor self-care skills contributes to child's welfare being significantly impaired • Significant disability leads to child needing long term additional support with personal care 	<ul style="list-style-type: none"> • Lack of awareness/concern by child or parent for personal safety leading to risk taking behaviour placing the child at risk of actual or likely significant harm • Child needs residential setting to meet care needs

CAPACITY OF PARENTS/CARERS	TIER 1: UNIVERSAL	TIER 2: ADDITIONAL	TIER 3: COMPLEX	TIER 4: CRITICAL & ACUTE
BASIC CARE (PROVISION FOR THE CHILD'S PHYSICAL NEEDS)	<ul style="list-style-type: none"> Provides satisfactory basic care for child. Accesses universal services. 	<ul style="list-style-type: none"> Some indications that a child's physical needs are not being fully met. Some concern that parents are not engaging with services, including services required to meet identified needs in parents and carers, e.g. mental health, community drug and alcohol services. Engagement with ante and/ or postnatal care of concern. Evidence of parental difficulties beginning to impact on care of child. Early signs that parental difficulties affect ability to ensure child's safety e.g mental ill health, learning difficulties, domestic abuse, substance misuse 	<ul style="list-style-type: none"> Parents struggling to provide adequate care which is impacting on child's wellbeing and development. Pattern of consistent lack of engagement by parents with services to meet their or child's needs, which impacts adversely on care of child/ren Late, erratic or non engagement with ante and/ or post natal services, where there may also be other factors of concern, e.g. mental health difficulties, substance misuse, health conditions. Evidence that the parental difficulties, e.g. mental health difficulties, learning disabilities domestic violence, substance misuse, are significantly impacting on their ability to provide basic care. Lack of positive engagement leading to sufficient, sustained change. 	<ul style="list-style-type: none"> Evidence that parental difficulties, including a combination of factors, means that a child's basic needs are not being met, including their need to be kept safe, placing the child at risk of or suffering significant harm. Evidence of inability to sustain change necessary to parent safely.

CAPACITY OF PARENTS/CARERS	TIER 1: UNIVERSAL	TIER 2: ADDITIONAL	TIER 3: COMPLEX	TIER 4: CRITICAL & ACUTE
ENSURING SAFETY	<ul style="list-style-type: none"> Child protected from danger or significant harm in the home and elsewhere. 		<ul style="list-style-type: none"> Exposure to unsafe situations/people in the home, family and wider community, e.g. domestic abuse, criminal activities, substance misuse. Non-school attendance leading to prosecution or parents/carers. 	<ul style="list-style-type: none"> Child exposed to hazards and danger, including adults who pose a risk to children, within the home and elsewhere that places them at risk of actual or likely significant harm.
EMOTIONAL WARMTH	<ul style="list-style-type: none"> Child's emotional needs are met and child has sense of being valued. Child receives appropriate physical comfort, praise and encouragement. 	<ul style="list-style-type: none"> Inconsistent responses to child by parent in the context of other positive relationships. Signs of parental ambivalence or tensions in relationship with child. 	<ul style="list-style-type: none"> Evidence that parental difficulties affect their capacity to consistently nurture, which is having an adverse effect on the child's development. Low warmth – high criticism household. Child scapegoated. Child viewed as problem by parent/carer. Evidence that parental expectations of child are inappropriately high and are significantly impacting on the child's welfare. 	<ul style="list-style-type: none"> Parents persistently highly inconsistent, critical and/or rejecting towards the child causing severe and persistent adverse effect on the child's emotional development leading to actual or likely significant harm.

CAPACITY OF PARENTS/CARERS	TIER 1: UNIVERSAL	TIER 2: ADDITIONAL	TIER 3: COMPLEX	TIER 4: CRITICAL & ACUTE
STIMULATION	<ul style="list-style-type: none"> Age appropriate encouragement and opportunities for cognitive and social development provided for the child. 	<ul style="list-style-type: none"> Limited opportunities provided for child to develop and lack of positive parental engagement with child's cognitive and social development. Lack of age appropriate experiences to facilitate cognitive and social development. 	<ul style="list-style-type: none"> Parental neglect is inhibiting cognitive and social development, e.g. child missing education, Child spending long periods alone significantly affecting the child's welfare. 	<ul style="list-style-type: none"> Parental neglect likely to result in the serious impairment of child's health or development indicating likely or actual significant harm.
GUIDANCE & BOUNDARIES	<ul style="list-style-type: none"> Parent/carers provide age appropriate guidance and boundaries. 	<ul style="list-style-type: none"> Parents having difficulty in maintaining consistent and appropriate boundaries, which is beginning to impact on their view and management of the child's behaviour. Parents need advice and support achieving above. Parenting Orders. 	<ul style="list-style-type: none"> Erratic and inadequate guidance and boundaries provided, impacting adversely on child's development and behaviour, causing significant impairment of the child's welfare. Child's behaviour is consistently disruptive and challenging across a range of situations. Parent does not offer a positive role model, e.g. behaving in an anti-social way or engaged in criminal activity. 	<ul style="list-style-type: none"> No effective boundaries set by parents resulting in child being exposed to age inappropriate situations and experience placing them at risk of or experiencing significant harm.

CAPACITY OF PARENTS/CARERS	TIER 1: UNIVERSAL	TIER 2: ADDITIONAL	TIER 3: COMPLEX	TIER 4: CRITICAL & ACUTE
STABILITY	<ul style="list-style-type: none"> Stable family environment, including home, relationships and finances. 	<ul style="list-style-type: none"> Less stable family environment, e.g. parental separation, insecure tenancy, poverty, and neighbour difficulties. Migrant/Asylum seeking families lacking formal and informal support and experiencing difficulties in accessing appropriate services. 	<ul style="list-style-type: none"> Inconsistent carers. Family life chaotic and unstable, with regular changes in household composition. Multiple moves, including educational placement. Child caught up in dynamics of prolonged and stressful parental separation. All leading to a child's welfare being significantly impaired Child previously looked after/experienced period of separation from main carer. 	<ul style="list-style-type: none"> Consistent lack of stable and secure family life, which significantly impacts on child's well-being and/or places the child at risk of significant harm.
	<ul style="list-style-type: none"> Child experiences consistent emotional warmth within secure attachments. 	<ul style="list-style-type: none"> Factors starting to impact on secure attachment. 	<ul style="list-style-type: none"> Child has poor attachment experiences with care givers 	