



Multi Agency Levels of Need:

Guidance to help support children, young people and families in Worcestershire

December 2024

Contents

Introduction	3
Working Together guidance states that this should include:	3
Expectations for multi-agency working.....	4
Multi agency expectations for direct practice include:	4
Making a professional judgement about what a family needs.....	5
When making decisions about children the following questions are helpful to understand:.....	5
Information sharing and consent	6
Equality and diversity.....	8
Levels of need for children and young people.....	8
Level 1 need – Universal services	8
Level 2 needs– Additional needs	9
Level 3 needs – Targeted support.....	9
Level 4 needs – Acute.....	9
Early help in Worcestershire.....	11
The early help processes in Worcestershire	12
Early Help Pathway (level 2 and 3 needs)	13
Safeguarding Children’s social care pathway	13
GET SAFE: Children at risk of or experiencing criminal exploitation.	14
Managing professional disagreements.....	14
Further reading:	14
Appendix 1 Levels of need examples.....	15
Level 1 needs: Universal services.....	15
Level 2 needs: Additional support	16
Level 3 needs: Targeted support.....	18
Level 4 needs: Statutory social work intervention	22

Introduction

Working together to safeguard children 2023 (section 117) requires the safeguarding partnership to publish a threshold document which sets out the local criteria for providing help, support and protection to children young people and their families.

Working Together guidance states that this should include:

1. The process for early help assessments and the type and level of early help and targeted early help to be provided under sections 10 and 11 of the Children Act 2004.
2. The criteria including the level of need for when a case should be referred to local authority children's social care for assessment and for statutory services under:
 - **Section 17 of the Children Act 1989** (children in need including disabled children).
 - **Section 47 of the Children Act 1989** (cause to suspect a child is suffering or likely to suffer significant harm).
 - **Section 31 of the Children Act 1989** (care and supervision orders).
 - **Section 20 of the Children Act 1989** (duty to accommodate a child)
3. Clear procedures and processes for cases relating to
 - The abuse neglect and exploitation of children
 - Children managed within the youth secure estate
 - Disabled children.

This document is intended to assist multi agency professionals to make decisions about how to respond to the needs of children, young people and their families who they are in contact with or working with. It is not intended to be a prescriptive or exhaustive or is a definitive way to open or close a gateway to a particular service or a range of services.

Every child and their family are unique and their whole family's needs, strengths, wider family and community networks should be considered when determining the right help and support at the right time. Professional decisions should be made using our professional judgement supported by information we hold, this guidance and our Worcestershire interagency child protection safeguarding procedures which can be found at: **Report it - Worcestershire Safeguarding Boards** (safeguardingworcestershire.org.uk).

Expectations for multi-agency working

Safeguarding and promoting the welfare of children and young people is everybody's responsibility, protecting them from significant harm is dependent upon effective joint working and communication between practitioners with different roles and expertise.

Strong multi agency and multidisciplinary working is vital to identify and respond to the needs of children and families. Expectations have been developed to underpin this multi-agency working in Working Together 2023. They apply to all agencies and practitioners involved in safeguarding and promoting children's welfare. Specifically, these include police, local authorities, health services, probation services, youth offending services, education providers and childcare settings, and voluntary and 3rd sector organisations.

Multi agency expectations for direct practice include:

Collaborate: practitioners working with the same child and family share information to get a complete picture of what life is like for the child. Collectively, they ensure the child's voice is at the centre and the right support is provided.

Learn: practitioners learn together by drawing on the best available evidence from their individual fields and sharing their diverse perspectives during regular shared reflection on a child's development, experiences, and outcomes.

Resource: practitioners build strong relationships across agencies and disciplines to ensure they support and protect children with whom they work.

Include: practitioners recognise the difference between, and are confident to respond to, circumstances where children experience adversity due to economic and social circumstances and acute family stress, and situations where children face harm due to parental abuse and neglect.

Mutual challenge: practitioners challenge themselves, and each other question each other's assumptions, and seek to resolve differences of opinion in a restorative and respectful way.

Many children and families do not need safeguarding at a statutory level but may need help and support to manage a particular identified need or situation or a challenge they are facing. Organisations and agencies should have in place effective ways to identify emerging problems and potential unmet needs of individual children and their families. In Worcestershire we refer to this offer of help and support as "Early Help". Early help is support put in place for children of all ages (0-18 years). Early help is not about the age of the child or young person but about **supporting that child and their family at the earliest opportunity** when we identify they have a need; so that they get the right help and support or access the right service at the right time for them. In doing this we aim to help them to create the changes they want to; or get involved with the right services to meet their needs and therefore, through this approach we can help prevent the risk of their situation getting worse or more complex and escalating. This early help approach helps the family develop their knowledge or skills, building their resilience and supporting positive outcomes for them as individuals or as a family. **It is important that children and young people receive the right service at the right time and at the earliest opportunity to prevent their needs and or vulnerability increasing.**

Practitioners who work for specialist services for adults, such as mental health or substance misuse services, should always consider the needs of any children and young people in the family. In particular the ability of parents or carers to meet the needs of children but also to safeguard and protect children and young people from harm. This should always be considered when addressing an adult's ongoing care, safety /risk or treatment programme or discharge from their care setting into the community.

Making a professional judgement about what a family needs.

Professionals who work with children and young people make judgments about their needs every day as part of their job role. They will help children and their families to access their agencies own resources as part of their everyday work. In some situations, your agencies resources will not be sufficient or appropriate and consideration will need to be given to involve other partner or voluntary agencies with the agreement of the child, young person and or their family.

In many cases this will involve engaging one other agency to provide a specific service to meet an identified need. In other cases, more than one other agency might need to be involved, but it is still a straightforward process in engaging other services to work together with the family as part of a multi-agency early help offer.

However, when a child's situation becomes increasingly complex, or professionals become more concerned about emerging risks or vulnerability, a more structured approach to early help will be required to coordinate how agencies work together, how they engage with the family and how they ensure they keep the child at the centre of their approach and outcome. When several agencies are involved, it is important to identify with the family a **lead practitioner**; ensuring:

- that as professionals everyone is communicating and sharing known information
- that the help and support is both well-co-ordinated to enable the family to engage
- but is also the right help and support to address the identified needs
- and that we can see the positive impact this is making for the child and their family.

A number of agencies provide specialist and statutory services when a child or young person is identified as having level 4 needs e.g. CAMHS (Child and Adolescent Mental Health Services) , youth justice, children's social work services. These services work in partnership with the family and other agencies to support and address that child and/ or young persons needs. For example, children on child protection plans or Looked After as defined by the Children Act 1989. The local authority has a statutory duty to that child / young person / young adult which requires the support of a number of other agencies in the co-ordination of the plan for that individual or family.

When making decisions about children the following questions are helpful to understand:

- What additional needs does the child/ young person/ young adult have?
- What is the child's voice telling me? What are they telling me?
- What is the parent / carer saying about the situation?
- What help and support do they need, and which agencies or professionals can support them with this?

- Is this something I can support them with or help them access / ask a partner agency to help them with?
- Who can work with me or help me to support this child/ young person?
- Who is already involved with a child young person or their parents/ carers?
- Is the child at risk or likely to be at risk of significant harm?
- Is the child a child in need or a child in need of protection as defined by the Children Act 1989?
- When considering information provided by family members, friends or neighbours, be sure to give it appropriate weighting within your decision making.
- Always be aware that information provided by children, young people, family members or others associated with the family may be influenced by intimidation and/or coercion from others. Don't take information at face value; maintain a professional uncertainty and always look to check, challenge, corroborate, and triangulate information provided.

Any professional who considers that a child needs multi agency help or support should always consider discussing it with their line manager/supervisor and/or safeguarding lead. Professionals may wish to discuss this with a colleague from another agency who is involved with a child or family to gather a better understanding of the child's situation before deciding on the next steps. This should generally be with the consent of the child if appropriate or parents/ carers that hold parental responsibility.

If a professional believes a child is at risk of significant harm or is experiencing significant harm, they must always be referred to children's social care without delay.

Information sharing and consent

No single practitioner can have a full picture of a child's needs and circumstances so effective sharing of information between practitioners, local organisations and agencies is essential for early identification of need, assessment, and service provision to keep children safe. Rapid reviews and child safeguarding practice reviews have highlighted that missed opportunities to record, understand the significance of, and share information in a timely manner can have severe consequences for children.

Practitioners should be proactive in **sharing information as early as possible** to help identify, assess, and respond to risks or concerns about the safety and welfare of children. This may be when problems first emerge for example persistent school absences or where a child is already known to the local authority children social care. **Sharing information about any adults with whom that child has contact, which may impact the child safety or welfare, is also critical.** Information sharing is also essential for the identification of **patterns of behaviour** for example a child at risk of going missing or has gone missing or missing from education.

The Data Protection Act 2018 and UK general data protection regulation (UK GDPR) supports the sharing of relevant information for the purposes of keeping children safe, fears about sharing information must not be allowed to stand in the way of safeguarding and promoting the welfare of children. To ensure effective safeguarding arrangements practitioners should not assume that someone else will pass on the information they think may be critical to keep a child safe. If a practitioner has concerns about a child's welfare or safety, then they should share the information with the local authorities' children social care team and/ or the police.

All practitioners should be particularly alert to the importance of sharing information when a child moves from one local authority to another, due to the risk that knowledge pertinent to keeping a child safe could be lost.

UK GDPR provides a number of bases for sharing personal information, it is not necessary to seek consent to share information for the purposes of safeguarding and promoting the welfare of a child provided that there is a lawful basis to process any personal information required. The legal basis that may be appropriate for sharing data in these circumstances could be “legal obligation” or “public task” which includes the performance of a task in the public interest or the exercise of official authority. Practitioners must have due regard to the relevant data protection principles which allow them to share personal information as provided for in the Data Protection Act 2018 and the UK GDPR.

Sharing information or referring a child, young person, and/or their family/ caregiver to another agency you need to consider the following:

1. If the family **needs help and support** you must seek the consent of the parent, and the child if the child is over 13 years old and has capacity, to share their information with another service.
2. If you believe **the child is suffering or likely to suffer significant harm** then you should share the information, but you must inform both the parents/carers and the child, if the child is over 13 years old and has capacity prior to sharing the information. Telling them whom you are sharing information with and why. It is important they know why you are concerned **unless:**
3. In **rare circumstances**, whereby the informing of a parent/carer, and /or the child/ young person before information sharing you believe will increase or pose a risk of significant harm to a child or jeopardise any potential police criminal inquiry the information sharing should be made without informing the parent or the child.

Do not delay in disclosing information to obtain consent if in doing this might put a child at risk of significant harm. In cases where there is an immediate risk of significant harm practitioners should call the police on 999 and contact the Worcestershire Family Front Door on 01905 822666 or in emergencies the out of office team (EDT) on 01905 768020 and ask to speak to a social worker. All referrals will need to be followed up in writing within 3 working days as per our local safeguarding procedures.

For more information please access: Information sharing advice for safeguarding practitioners: DfE non statutory information sharing advice for practitioners providing safeguarding services for children, young people, parents and carers (publishing.service.gov.uk)

Equality and diversity

With some families, perhaps the child or young person, or maybe a carer will need professionals to ensure their communication and information sharing process are accessible. This could happen where English is not their first language, or where they have a learning disability or sight or hearing loss for example. In these circumstances an interpreter may be required, or information provided in the easy read or an alternative format such as large prints or clear print.

Effective communication is essential in supporting children, young people and their families and it is important that children and young people are fully informed so they can engage in decisions about them, understand professionals' worries or concerns. Possible consequences of not meeting communication needs are that:

- They cannot give informed consent to something they don't fully understand
- they are disadvantaged if they can't access the information they need
- they lose trust and confidence in professionals
- they will not be able to fully engage with services or support

All agencies should have arrangements in place for providing language interpreters including British sign language, translated text and information in alternative formats. If you require further information and advice, you can contact the quality manager at the County Council on equality@worcestershire.gov.uk or your own agencies lead.

Levels of need for children and young people

Children and young people may have additional or unmet needs at any age or stage of development (0 to 18 years); their circumstances or that of their parents / carers may have changed over a period or they may have an accumulation of different factors happening which increases a child or young person's vulnerability or unmet needs. Therefore, the type of response they will require from a single or multiple agencies/ disciplines working together will change to enable them to meet those needs/ address that challenge and get the right help and support at the right time; to prevent the situation escalating or becoming more acute. This level of need guidance does not directly correlate with those applied within individual agencies or organisations for their own internal service delivery/ provision or response, as this is focused on the presenting needs of that child, young person and their family.

Level 1 need – Universal services

Represents children and young people with no identified additional needs. Their needs are met through the routine access to services such as early years, education and health services, such as the GP or hospitals. Some may also be receiving services from housing and voluntary sector organisations. Most children and young people will successfully develop and thrive at this level of need. These are known as universal services available to all children and young people. (see appendix 1 for examples)

Level 2 needs– Additional needs

Represents children with additional presenting needs which can include parenting support, emotional well-being, housing, finances, and vulnerabilities in their community known as contextual safeguarding. These extra needs can be met by a universal service providing single agency additional support and/or co working with one or more partner agency or voluntary agencies to address the identified additional needs. An offer of early help and support will build on a family's existing strengths and should be focusing on whole family working to support parents and carers respond to the child identified needs, safety and well-being with a focus on addressing and preventing an escalation of those needs and vulnerabilities. (see appendix 1 for examples).

Level 3 needs – Targeted support

Represents children and young people who have complex needs themselves and/or that of their family, which impacts upon their well-being, their needs being met, their safety and family life. This may include multiple adverse childhood experiences, risk of family breakdown, poor emotional and mental health, inadequate parenting, domestic and/ or substance misuse. They will require several agencies working together in partnership with the family in a coordinated way to help the family address their needs, make changes and improving the family functioning and outcomes for the children. (see appendix 1 for examples).

Level 4 needs – Acute

Represent children who need statutory and/ or specialists agency interventions including:

- Children with acute mental health needs
- Children young people who have committed a criminal offence
- Children in need, including those in need of protection.
- Children looked after including those privately fostered.

A child or young person's needs can change anytime, they can move between the levels of need in either direction. This reinforces the importance of effective and seamless multi agency working with them and their family and often including their wider family network. This ensures the child receives the right support at the right time and the continuity of help and support is available to them. (see appendix 1 for examples)

Children's social work services will act as lead professionals in the following:

Under section 17 of the Children Act 1989 – Children's social care will assess children, young people aged 0-18 years referred with identified level 4 needs to determine if they are in need of protection, a "child in need" or have identified needs which can be met through an early help response. If the child/ young persons identified needs are level 4 and those needs are not already being addressed by a specific specialist service e.g. CAMHS, Youth Justice etc then a social work assessment will be undertaken with the family to identify if they are a child in need under section 17 and what support and services, they need to address those needs. This includes children who are disabled, and the family's consent is required.

Section 47 of the Children Act 1989 – Children’s social care will act as the lead agency and arrange a child protection strategy discussion with police, health and education and any other services involved with the children and their family e.g. drug and alcohol services, probation etc. The focus of this professionals only meeting is to determine the risk of significant harm and / or the likelihood of significant harm in law including any criminal offences. The outcome of this will determine next steps. This may include a child protection enquiry (Section 47) or a Social Work assessment (section 17) and / or a criminal enquiry.

Section 31 of the Children Act 1989 – this relates to children and young people made subject to court orders made in care proceedings.

Care orders will grant the local authority parental responsibility shared with a parent(s) /carers and therefore we as partner agencies become responsible for the children as corporate parents. The child’s care plan is overseen through a “Looked After Children “review and all partners contribute to the care and support of the child/ young person. The local authority is the lead practitioner.

Supervision orders are also granted under section 31 of the Children Act 1989 and the same threshold of need and risk applies. This order places a duty on the local authority to “advise, assist and befriend the child”. The child’s plan is a child in need plan. The local authority is the lead professional and will co-ordinate the plan with the family and partner agencies.

Section 20 of the Children Act 1989 – This applies whereby a child or young person is accommodated by the local authority in agreement with those who hold parental responsibility, or where a young person can give informed consent e.g. homeless young person 16 years or over.

Figure 1: Levels of Need



Early help in Worcestershire

Working Together 2023 states that: “early help is support for children of all ages that improves a family’s resilience and outcome or reduces the chance of a problem getting worse. It is not an individual service, but a system of support delivered by local authorities and their partners working together and taking collective responsibility to provide the right provision in their area. Some early help is provided through universal services, such as education and health services”. (Section 118 page 44)

In Worcestershire early help describes the help and support offered to children, young people and their families **at Level 2 additional support or Level 3 targeted support needs**. Effective early help relies upon professionals identifying unmet needs for the child and their family and working with them to identify how best to help and support them.

Professionals should be alerted to the potential need for early help for a child or young person who:

- is disabled
- has special educational needs (whether or not they have a statutory education health and care plan (EHC) plan)
- Is a young carer
- Is bereaved
- Is showing signs of being drawn into antisocial or criminal behaviour, including being affected by gangs and county lines and organised crime groups and or serious violence, including knife crime.
- Is frequently missing/goes missing from care or from home
- is at risk of modern slavery, trafficking, sexual and/ or criminal exploitation.
- is at risk of being radicalised
- is viewing problematic and or/ or inappropriate online content or developing inappropriate relationships online.
- Is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse.
- is misusing drugs or alcohol themselves
- is suffering from mental ill health
- has returned home to their family from care
- is a privately fostered child
- has a parent or carer in custody
- is missing education, or persistently absent from school, or not in receipt of full time education.
- Has experienced multiple suspensions and is at risk of or has been permanently excluded.

The early help processes in Worcestershire

In Worcestershire, professionals are encouraged to use the **Worcestershire early help assessment** for children and young people in need of additional or targeted support. Some agencies have their own agency early help assessment template they can also use.

Where a child and family would benefit from coordinated support from more than one organisation or agency for example education, health and housing there should be a multi-agency Early help assessment and plan.

These early help assessments should be:

- Undertaken with the agreement of the child and their parents or carers involving the child and family as well as all the practitioners who are working with them.
- Take account of the child's wishes and feelings wherever possible which could include providing advocacy support where this is needed to enable the child or adult to share their views for example, where a child may have communication difficulties due to a disability.
- Take account of the child's age, family circumstances and extra familiar contexts and whether these factors are contributing to or preventing good outcomes e.g. peer on peer abuse, anti-social behaviour.
- Take account of the needs of all members of the family as individuals (whole family working) and consider how their needs impact on one another. Practitioners should be aware of situations where there has been a breakdown in relationships between the child and their family and engaging the whole family may not be appropriate.
- Cover both presenting needs and any underlying issues with the understanding that family's needs can change over time for example, when a child moves up to secondary school.
- Be based on facts, and explore and build on strengths
- Be clear about the action to be taken and the services to be provided
- Identify what help the child and family require to prevent needs escalating.
- Provide the basis for any future assessments if they are needed e.g. Education, health and care plan, child in need or child in need of protection.

A lead professional may be identified following consultation with the child, young person and their family, and it will be their role to coordinate the early help assessment, involve the family and bring together the agencies/services to work together to coordinate the delivery of an early help support plan which will develop the family plan.

If the child, young person, parents or carers do not consent to an early help assessment, then the lead professional will make or need to make a judgement as to whether, without help and support, the needs of the child will escalate and be adversely affected/ impacted, reviewing what is already in place for the child and young person. A discussion with your safeguarding line manager is recommended to think through ways in which help, and support can be offered via advice or signposting or is a safeguarding referral to children's social care necessary at level 4 needs.

For further information there is the Worcestershire professional's page: www.worcestershire.gov.uk/earlyhelpfamilysupport.

Early Help Pathway (level 2 and 3 needs)

Early help means providing support as soon as a problem or need appears, to wherever possible stop it from becoming more complex or escalating. This could be at any point in a child's life, from birth to the age of 18 years. Early help involves identification assessment, planning, providing services and working together to review the plan.

Step 1 – identification of need and decision on what response is needed for the child and their family. Seeking the family's consent.

Step 2 - Complete an early help assessment, focusing on the child and their family and what support they need and who can help and support them.

Step 3 – Creating the plan of help and support, this can include wider family and community support in the meeting to create the plan: Who is the lead professional for that family? what do we all think needs to happen to create the change or address the problem? how will we do this ? who else could help us achieve this ? and how will we know we have achieved it / end goal ? when will we review progress and see what's made a difference ? Sharing the plan with all involved.

Step 4 -delivering the plan, everyone has responsibility for their part in the plan, have we the right support in place, are we progressing? do we need check ins to keep the lead professional updated?

Step 5 – reviewing the plan, what's progressed, what's worked well, what do we need to differently, do we need to review again to check on progress / sustainability?

Step 6 – Submitting the outcome achieved and capturing the support given to a family can be shared securely via the Early help Community portal: **Third Party Professional Assessment** (worcschildrenfirst.org.uk)

Further professional information, training and support is available on: **Early Help guidance for families and professionals | Worcestershire County Council**

For information on resources and services and support available to families further information is available via the Virtual family hub: **Virtual Family Hub | Worcestershire County Council**

Safeguarding Children's social care pathway

If you have a safeguarding concern regarding a child or young person living in Worcestershire or consider that a child is a "child in need" with level 4 needs in line with this guidance a referral to children's social care should be made. For all professionals the process is via an online secure referral portal which can be found at: **Referral to children's social care (level 4) (worcschildrenfirst.org.uk)**

If a child is at risk of immediate harm then the police should be called on 999 and a verbal referral made to the children's social work team on 01905 822666 (Monday – Thursday 9am – 5pm and Fridays 9am – 4.30pm) or out of office hours including weekends and bank holidays in **an emergency** on 01905 768020 and ask to speak to a social worker.

All verbal referrals are required to be followed up in writing the next working day. The children's social care team will review the information received and what is already known and may seek additional information/ clarification from you to determine the level of need and the right response

and approach. They aim to make decisions on all referrals within 24 hours of the information being received. Referrers will be informed of the outcome within 3 working days in writing via the online secure referral portal.

If the identified needs require a children's social care response this will be progressed immediately. If an early help or universal response is required, then advice will be given to the referrer via the same portal.

Further advice can be found at:

www.worcestershire.gov.uk/safeguardingchildren or the Worcestershire safeguarding children partnership procedures at: <http://westmidlands.procedures.org.uk>

GET SAFE: Children at risk of or experiencing criminal exploitation.

Worcestershire's partnership, identification and response pathway to children and young people who are identified as being at risk of or experiencing child exploitation is known as "Get SAFE". This approach identifies and works with children across level 2 – 4 needs. Professionals should complete the referral to children's social care and attach the **Get safe risk assessment to this referral as an upload**. The Family Front Door will ensure this is processed and sent to the multi-agency GET SAFE team via the portal for the weekly partnership GET SAFE meeting and any immediate safeguarding concerns will be addressed the same day. The GET SAFE portal should be used for any new or updating information.

For more information: [Get Safe | Worcestershire County Council](#)

Managing professional disagreements

Disagreements over the management or response to concerns can impact negatively on positive working relationships and consequently on the ability of professionals to safeguard and promote the welfare of children. All agencies are responsible for ensuring that staff are supported and know how to appropriately escalate into agency concerns and disagreements about children or young people.

For more information please refer to the Worcestershire safeguarding children partnership escalation procedure located at: <http://westmidlands.procedures.org.uk/local-content/4gjN/escalation-policy-resolution-ofprofessional> search: disagreements.

Further reading:

Working Together to Safeguard Children 2023: [Working together to safeguard children 2023: statutory guidance \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk)

Information Sharing: [Information sharing advice for safeguarding practitioners - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

Levels of Need guidance: Revised and updated December 2024.

Appendix 1 Levels of need examples

The below tables is for professional guidance and is not an exhaustive list of presenting needs. In identifying needs and the right support at the right time this

Level 1 needs: Universal services

No additional support required beyond that which is already available to any child and young person and is provided to them by their family, education and health services including services such as police, A&E.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Health	<ul style="list-style-type: none"> ■ Meeting development milestones including speech and language. ■ Physically and psychologically well. ■ Adequate diet, hygiene, clothing. Mental health managed effectively by a child or young person or parent carer. Access health services including dental and optical care. Participating in general health and safe relationships. ■ Accessing emergency treatment when needed.
Education	<ul style="list-style-type: none"> ■ Potential presentation ■ Accessing education/ school/ college regularly ■ no barriers to learning ■ achieving key stages ■ receive government grants/ support EG free school meals. ■ Carers support development through positive interaction and play and stimulation.
Identity	<ul style="list-style-type: none"> ■ positive self-identity, sense of self and abilities. ■ demonstrates feelings of belonging and acceptance. ■ Positive relationships with peers ■ play stimulation and positive activities. Access and opportunities to hobbies and activities.
Emotional and behavioural development	<ul style="list-style-type: none"> ■ Good quality early attachments. ■ growing competence is in practical and emotional skills in line with age and development. ■ Positive routines, support, guidance and boundaries by care givers. ■ Positive behaviour management strategies in place giving consideration to the child's age, understanding and needs. ■ Positive praise and recognition by care givers. ■ Carers provide warmth, praise and encouragement. ■ Stable environment. ■ no substance misuse by child or young person, parent or care giver.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Family relationship, environment, history and functioning.	<ul style="list-style-type: none"> ■ Stable and affectionate relationships with caregivers. ■ Carers able to provide for the child's needs and protect them from danger and harm. ■ Supportive family relationships including wider family. ■ Supportive parents even when separated ■ Good relationships with siblings ■ Housing has basic amenities and appropriate facilities. ■ Parents / caregivers aspirational for their child. ■ Not living in poverty ■ Sufficient provisions/ income. ■ Play stimulation and positive activities hobbies and interests, places and spaces in the community
Social presentation	<ul style="list-style-type: none"> ■ Appropriately dressed for different settings and weather. ■ Good level of personal hygiene. ■ Positive interaction with people peers family etc. ■ Positive communication, speech and language development supported.

Level 2 needs: Additional support

Young people children and young people with emerging vulnerabilities whose needs require support.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Health	<ul style="list-style-type: none"> ■ Slow in reaching development milestones, short intervention makes improvements. ■ Identified language and communication difficulties. ■ Minor concern regarding diet/ dental /health/ hygiene and clothing. ■ Mild to moderate emotional health / mental health problems including low mood and/ or anxiety. ■ Missing health checks/ immunisations. ■ Child with a disability and requiring support services. ■ Sexually active under 16-year-olds. ■ Risk of teenage pregnancy. ■ Healthy relationship advice/ sexual health. ■ Child has additional health needs that require health input e.g. community paediatrician. ■ Pre-birth additional support required due to vulnerabilities/ health needs of mother or baby.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Education	<ul style="list-style-type: none"> ■ Occasional irregular or non-attendance, poor punctuality, including sickness. ■ Not any in education employment or training (NEET). ■ Child is identified as having additional learning needs. ■ Child at risk of exclusion and on a school Individual Support Plan plan. ■ Few opportunities for play/ socialisation/ peer relationships. ■ Identified language and communication difficulties. ■ Not achieving educational potential. ■ Struggling with reading and writing given age and development needs. ■ Parents not engaging/ supporting child with school/ parents evening/ events / communication. ■ Language and communication needs.
Identity	<ul style="list-style-type: none"> ■ Some insecurities and worries around identity. ■ Child or young person needs support around their own self of identity e.g. race, culture, sexuality, gender, religious beliefs. ■ Poor self-image/ body confidence. ■ May experiences bullying/ isolation around perceived difference or bullying of others.
Emotional and behavioural development	<ul style="list-style-type: none"> ■ Low level mental health or emotional health and wellbeing needs. ■ Involved in anti-social behaviour (low level). ■ Bereavement support / loss of parent/ carer/ sibling or significant person. ■ Peer relationships of concern/ unhealthy/ poor influence/ conflicts/ bullying including online. ■ Low parental aspirations for themselves or their child. ■ Parents struggling with parenting needing additional professional support/ guidance.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Family relationship, environment, history and functioning.	<ul style="list-style-type: none"> ■ Young carer ■ a parent serving a custodial sentence. ■ Parent / care giver having additional caring responsibilities for wider family members. ■ Struggling with managing teenager behaviours and boundaries. ■ Low level concerns about missing from home/ school. ■ Child worried about sibling rivalries / conflict at home. ■ Young and / or vulnerable parent in need of support including practical, advice and support. ■ Parents needing support around behaviour management and appropriate sanctions and responses. ■ Parent /carers isolated or lack of wider family or positive support networks. ■ Conflict in parents who parent apart. ■ Parental relationship breakdown / separation impacting on the child/ young person. ■ Emerging concerns about substance misuse. ■ Impact of mental health needs on the family. ■ Identification of impact of domestic abuse at level 2, need for help and support to adult and/child/ young person. ■ Family struggling on low income/ unemployment/ redundancy. ■ Poor / inadequate housing / home conditions. ■ Budget and financial help needed.
Social presentation	<ul style="list-style-type: none"> ■ Inappropriately dressed for weather/ occasion. ■ Poor personal hygiene. ■ Withdrawn / loss of interest in self and others. ■ Avoids interaction / loss of confidence/ self-esteem. ■ Social exclusion, not engaged with community support/ unaware of community support. ■ Vulnerability in the community (Contextual safeguarding). ■ Police involvement / call outs for low level/ nuisance activity/ offences.

Level 3 needs: Targeted support

Children, young people and their family with identified needs and vulnerability that require a multi-agency coordinated approach.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Health	<ul style="list-style-type: none"> ■ There is a significant impact on the development milestones due to family or environmental factors. ■ Some chronic/ recurring health problems or terminal illness impacting on the family. ■ Significant concerns about diet/ hygiene/ clothing impacting on the child's emotional well-being. ■ Acute, severe and enduring mental health problems including conduct and oppositional defiant disorder, compulsive/ obsessive disorder, eating disorder, suicide idealisation. ■ Engagement with anti-natal appointments. ■ Missing routine and non-routine health appointments for the child or young person impacting on them. ■ Parents not responding appropriately to child's health needs impacting upon the well-being or development of the child. ■ Child with a disability that requires multi agency support services. ■ Conception aged under 16 years. ■ Children with autism/ ADHD or going through the assessment process. ■ Concerns around healthy and safe relationships for the adult and or young person.
Education	<ul style="list-style-type: none"> ■ Persistent absence or unimproved school attendance, previous fixed term exclusions despite level 2 support. ■ Persistently not in education, employment or training (NEET) despite previous early help support at level 2 needs. ■ Permanently excluded from school or risk of permanent exclusion. ■ Education health and care plan or undertaking assessment in relation to identified needs. ■ Vulnerable learner, ■ Child with a learning disability. ■ Disabled child with care and support needs in education. ■ Contextual safeguarding concerns for the child/ young person in the education setting. ■ Poor social and communication skills impacting on learning. ■ Concerning peer relationships in education setting including, anti-social behaviour, bullying, misogynistic behaviour and or attitudes.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Identity	<ul style="list-style-type: none"> ■ Subject to discrimination and or bullying. ■ Child experiencing difficulties with their own or their families race, culture, religion, sexuality, gender. ■ Poor self image/ self worth impacted upon their day-to-day functioning, engagement and interaction with others. ■ Young person's use of social media or online activity causing concern for their vulnerability/ risks from others. ■ Risk of exploitation, identifying as in a gang, peers who are known to carry weapons.
Emotional and behavioural development	<ul style="list-style-type: none"> ■ Child is often scapegoated by parents/ family. ■ Child receives inconsistent care/ has multiple caregivers. ■ Child is rarely comforted when distressed. ■ Parents lack empathy for child. ■ Parents lack in lack of interest or support to a child/ young person. ■ difficulty coping with anger, frustration and upset. (emotional regulation). ■ Starting to go missing from home or school. ■ Offending or regular anti-social behaviour. ■ Problematic substance misuse ■ Hostile and/ or physically aggressive to other children /adults. ■ Self-harming/ risky behaviours. ■ Carrying/ using weapons to defend self and others. ■ Peer violence/ aggression.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Family relationship, environment, history and functioning.	<ul style="list-style-type: none"> ■ Young carer needing additional help and support. ■ Child experiencing difficulties with separation, bereavement and loss. ■ Young parent (under 18's or care leavers) who need additional support. ■ Child on parent aggression and violence. ■ Parental breakdown and conflict adversely affecting the child/ young person. ■ Wider family and associates negatively impacting the care of the child or young person. ■ Substance misuse not being addressed. ■ Persistent disputes and hostility between parents, domestic abuse impacting on the child. ■ Family seeking asylum/ refugee. ■ Parents require specific targeted intervention regarding boundaries, discipline and routines for their children. ■ A parent repeatedly offending, and police involvement/ involvement in criminal activity. ■ Emergency services being called to the home numerous times in a short period e.g. 12 months. ■ Parental mental health and the impact of this on the child or young person. ■ Fleeing domestic abuse/ honour-based violence/ forced marriage and needing help to settle in area. ■ Families in refugees requiring support due to complex needs/ risks. ■ Housing, temporary accommodation, risk of homelessness. ■ Gambling or other financial risks impacting on the family e.g. substance misuse. ■ Home conditions need improving for the child/ young person's safety and welfare. ■ Serious debts/ poverty impacting on the ability to care for the child finance the home, food etc. ■ Parents not able to provide adequate care without needing support from a number of agencies. ■ Parents with learning disabilities or cognitive functioning additional needs impacting on their ability to provide care without support agencies. ■ Parents or young people who are involved in criminal activity.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Social presentation	<ul style="list-style-type: none"> ■ family socially excluded ■ escalating victimisation ■ criminal activity due to drugs alcohol aggression mental health ■ concern about peer-on-peer abuse and harm ■ get safe concerns vulnerable to child criminal exploitation ■ online harm and abuse or vulnerability ■ hate crimes impacting on the family and their safety

Level 4 needs: Statutory social work intervention

Children requiring a social work assessment under section 17 of the Children Act 1989 children in need or section 47 of the Children Act 1989 safeguarding children.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Health	<ul style="list-style-type: none"> ■ there is a likelihood of significant harm to Children's Health and development. ■ Have severe chronic/ reoccurring health problems, including severe obesity and dental decay unresolved by previous early help interventions. ■ Fabricated or induced illness. ■ Female genital mutilation (FGM). ■ Concerns about diet/ hygiene/ clothing, persistent and severe and not improving following early help interventions at Level 3 need. ■ Immediate or imminent risk to a child or young person's life or the life of others due to mental health problems e.g. self-harm, suicidal idealisation or attempts, eating disorders. ■ Persistent noncompliance even though parents are aware of short- and long-term implications which are likely to cause significant harm physical and /or emotional harm. ■ Child with disabilities meeting the criteria for children's social care intervention. ■ Sexual Activity under the age of 13 years. ■ Child identified as being sexually exploited through the Get safe risk assessment.
Education	
Identity	<ul style="list-style-type: none"> ■ Severe Absence from school constituting educational neglect ■ Persistent exclusions for behaviour/cooperation in school. ■ Drug and alcohol abuse/ suspect dealing. ■ Significant development delay due to neglect/ poor parenting.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Emotional and behavioural development	<ul style="list-style-type: none"> ■ Puts self or others in danger ■ Child abuses other children e.g. physically, sexually. ■ Young people charged with a crime and go to court and/or are convicted of a crime and given a sentence. ■ Endangers own life.
Family relationship, environment, history and functioning.	<ul style="list-style-type: none"> ■ Multi agency interventions are not working, and the child is suffering or likely to suffer significant harm. ■ Children in care or care leaver ■ Family breakdown and need for edge of care/ accommodation. ■ Deceased parents and no arrangements to care for the child. ■ Privately foster children/ young people. ■ Teenage parent who is subject of a child protection plan or is a child looked after. ■ High criticism, low warmth resulted in emotional harm. ■ Domestic abuse impacting on the safety and welfare of the children. ■ Young person in a domestic abusive relationship with another young person. ■ Frequent aggression and violence. ■ Criminal activity. ■ Honour based violence/ forced marriage. ■ Person posing a risk to children (PPRC) in contact with children. ■ Special guardianship order applied for. ■ Radicalisation. ■ Parental mental health, drugs/ alcohol and domestic abuse. ■ Previous history of children removed/ adopted/ child protection plan. ■ Physical accommodation places child in danger. ■ No fixed abode or homeless including homeless young people Southwark. ■ No recourse to public funds

Area of development and needs	Potential presentation of child, young person and their family at this level.
Social presentation	<ul style="list-style-type: none"> ■ poor hygiene persistent and chronic despite advice and support at Level 3. ■ Persistent ongoing mental health needs impacting on the ability to safely and appropriately care for children. ■ Family chronically socially excluded likely to cause significant harm to the child. ■ Persistent anti-social behaviour in community by parents/carers. ■ Family have not engaged/not demonstrated significant or sustainable changes in the time scales for the child given Level 3 intervention and support. ■ Unable to protect their children and cannot prioritise the needs of the child's needs over their own. ■ Severe or long term harm has been /or is likely to be done to the child and the parents or carers are unwilling or unable to engage in work to improve the care provided. ■ Children are subject to care proceedings or on a Court order Wardship, EPO, Care, supervision order or remanded to LA care. ■ Transfer in in cases from other local authority e.g. child protection final court orders. ■ Missing from home or care. ■ Child abandoned ■ parents are abusive verbally emotionally and or mentally and or sexually towards the child. ■ Physical chastisement of child/ young person causing harm.

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