

WORKING WELL WITH CHILDREN AND FAMILIES IN LANCASHIRE

Including, Blackburn with Darwen,
Blackpool and Lancashire Local Authorities

This document contains Part One and Two of
Three parts of the guidance.



**Lancashire
Constabulary**
police and communities together



Blackpool Council

Lancashire
County
Council 

TABLE OF CONTENTS

Part One – Summary and Overview	3
Purpose	3
Introduction	4
How Families, Children and Young People are Supported in their Communities	5
Levels of Need	6
Levels of Need – At a Glance	7
Part Two – Detailed Guide to Working Well with Children and Families in Lancashire	8
<i>Our principles for working with Families, Children and Young People.</i>	<i>8</i>
Consent	10
Levels of Need –	11
Working well with families, children and young people	13
<i>When families need additional help.</i>	<i>14</i>
Level 2 – Children and Families with Needs at Universal Plus	14
Children & Families Hubs/ Multi Agency Safeguarding Hubs	15
Level 3 – Intensive Support	15
Level 4 – Specialist Support	16
The difference between Child Protection and Children in Need	14
What happens to a request for support at Level 4 (Social care)	14
Consulting with Professionals to support a family, like Education, Health and Social Care	16
Children & Families Hub consultation	19
Indicators of Possible Need	20



PART ONE – SUMMARY AND OVERVIEW

Purpose

This guide is for everyone who works with children and young people and their families in Blackburn with Darwen, Blackpool and Lancashire local authority areas. It is publicly available for anyone to access, and is particularly key for organisations including –

- Health
- The Police
- Local Authorities
- Schools
- Colleges
- Nurseries
- Voluntary and peer group organisations working with children and families
- Providers of support for children and families.

The guide is about families, children and young people, but it is relevant to staff working in a wide range of service areas such as adult mental health, community health, adult social care, housing and leisure.

The guide is made up of three parts. There is the summary document (Part One). The summary document gives an overview of the levels of need that families and children might experience through their lives in Lancashire, and broadly who should respond to these need and how. Part Two provides some more detailed information about levels of need and some examples to provide context and Part Three is different for each local authority area (Lancashire, Blackpool and Blackburn with Darwen) and talks about how services are organised and delivered in each area including contact details.

This guide talks about how we can work with families to build on their strengths and come together across agencies to put the child at the centre of our work. It is designed to ensure that we give families who are experiencing challenges the advice, information and support they need that helps them make a positive difference to their lives.

This guide does not sit in isolation. Each local authority has strategies which support areas of work that are relevant to all professionals and that are locally developed with partners, including Early Help, Exploitation and Neglect Strategies. Within organisations and across the Pan Lancashire Safeguarding Partnership there will be guides and training about how to identify, assess and support children and families who are experiencing challenge, contact details for safeguarding leads or champions.

Working Together (2018) is the document issued nationally that describes how partners need to work together to support children and families. This document has been developed in line with the Working Together Principles.



Introduction

Across Lancashire, we all believe that every child should have the opportunity to reach their full potential and that children are best supported to grow and achieve within their own families. The work of people who are alongside families when they experience challenge should be geared toward building strong foundations and developing assets and resilience so that children thrive. Equally, there will be times when, despite everyone's best efforts to support families, children need our protection to stop them from being harmed. When this is the case, local authority children's services will work with partners to provide this protection. This guide should help practitioners working with families to make sure they are using their resources to best effect, as early as possible when problems emerge and to help them get access to more help for families if it is needed.

Different local authorities across the county might use different words to describe how they work with families, children and young people, but all of the ways of working have the common belief that families are better together at their core.

By working together in our communities we will ensure that there is a range of flexible, localised services which are responsive to children's and families' needs and provide the right level of intervention at the right time by the right person. This approach will help to build purposeful relationships which help develop effective interventions and support for children, young people and their families at an earlier stage.

Professionals working across Lancashire are committed to the following values which inform the way we work with children and families:

- Being respectful and building relationships by working alongside parents, children and young people and seeking their informed consent and agreement;
- Being understanding, kind and empathetic. Recognising and working to families' strengths – especially those of parents and carers and take the time to understand their needs fully.
- Being purposeful. Focusing on preventing problems before they occur and offer flexible responsive, constructive support when and where it is required;
- Being constructive. Helping to build the resilience of parents, children, young people and communities to support each other;
- Being open and transparent with each other as well as with families. Work together across the whole system engaging well with communities and aligning our resources so we can best support families and do what needs to be done when it needs to be done;
- Being fair. Base all that we do on evidence and analysis of both what is needed and of what works and be brave enough to stop things that are wrong;
- Being honest. Being clear and consistent about the outcomes we expect, and judge what we do against them.

How Families, Children and Young People are Supported in their Communities

Universal Services seek to work with families to meet all the needs of children and young people so that they are happy, healthy and able to learn and develop securely. Universal services are provided as of right to all children, including those with additional and intensive needs. However, some children, either because of health needs, disabilities or because of less advantageous circumstances, will need extra help from universal services to be healthy, safe and to achieve their potential.

All families can access Universal Services such as –

- maternity services at birth;
- health visiting,
- funded childcare hours;
- primary education,
- school nursing
- family support delivered from Family Hubs
- secondary school,
- further education and youth services for older children.

Across Lancashire, we want to offer help and support our families who experience challenge at an early point in a voluntary way that does not leave them feeling singled out as different. This is because we want to prevent, wherever possible, situations escalating to the point that the family no longer feel, or indeed, are, fully in control. We want to ensure that children and families know about and are able to access their community assets and that they support them well. We call this “early help”. A large amount of public money is invested in a



wide range services for children and families across the county in universal services and early help. It is important that when families experience challenges practitioners work together so that we use that public money and staff resources effectively to bring about positive changes led by families and their communities. Early help may occur at any point in a child or young person's life and includes both interventions early in life as well as interventions early in the development of a problem for a family to prevent it getting worse. It includes help for adults in a family to help them support their children well and understand their needs – together we want to offer support early to help families meet challenges and reduce the impact of problems that may have already emerged.

To do this everyone needs to work together in an open and transparent way with families and their children to identify strengths and needs, to find practical and achievable solutions, and to provide the right amount of information, advice and support.

Levels of Need

In this guide we have identified four broad levels of need:

Level 1 needs - Universal

- **Most** families, children and young people will experience challenges in their lives that impact on their wellbeing. **Most** families will be able to weather these challenges (are resilient to them) either without help from services, or with advice, guidance and support from universal services, including empathy and understanding.

Level 2 needs - Universal Plus

- **Some** families, children and young people will need support from people who know them well and have established relationships with them to meet some challenges where advice and guidance has not been enough to help the family achieve change or where a child or young person needs additional support to help them to thrive.

Level 3 needs - Intensive

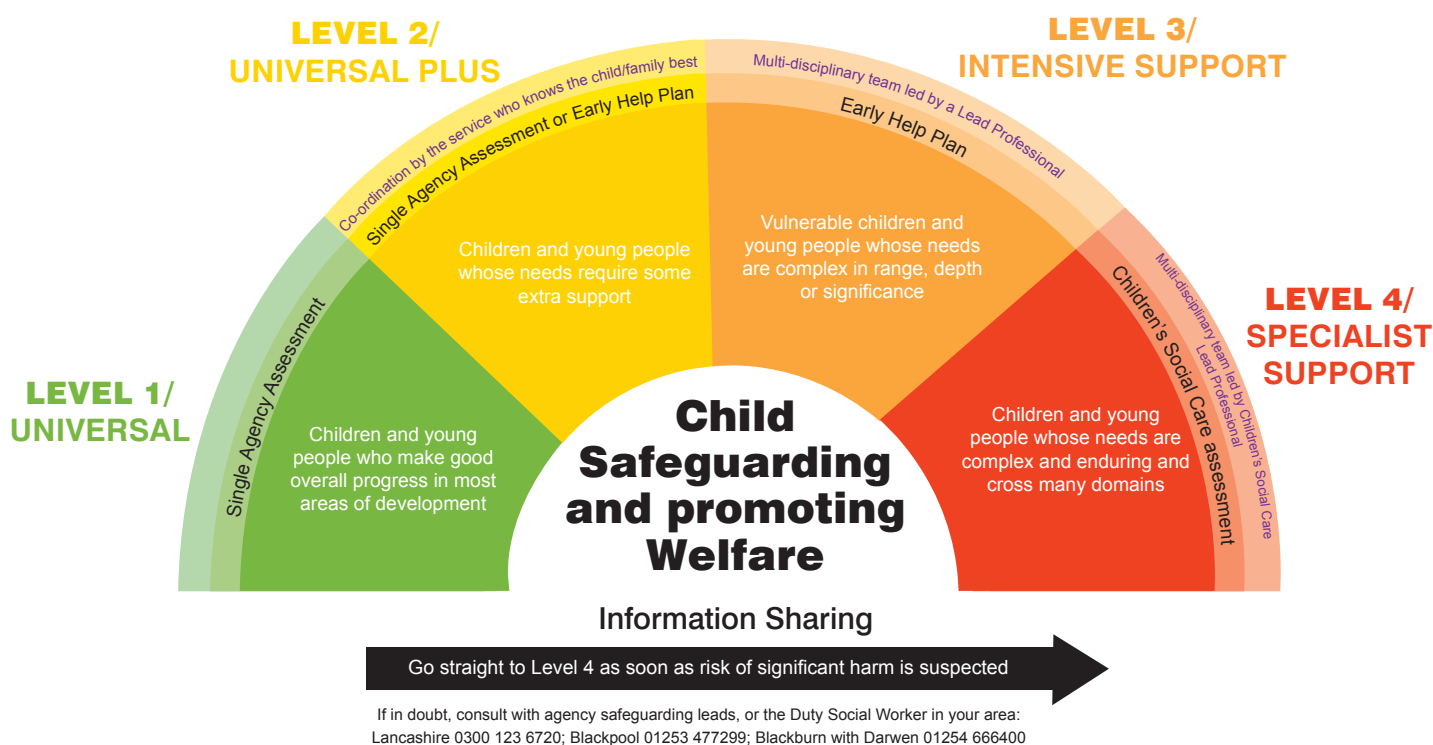
- **A small number** of families, children and young people will experience significant challenges and will need coordinated support from experts working with them to find sustainable solutions that reduce the impact of challenge on the wellbeing and development of children.

Level 4 needs - Specialist

- In **exceptional** cases families need specialist, statutory support that is designed to maintain or repair relationships and keep families together wherever possible. In some very specific circumstances the needs are so great that children need to be away from their family to ensure that they are protected from harm and in these circumstances the local authority becomes their “corporate parent”.



Levels of Need – At a Glance



see page 28 for larger version

Services for children with **universal plus** and **intensive** needs are sometimes known as **targeted services**. Targeted services bring expertise and additional attention to universal services and include valued services such as behaviour and or learning support in schools, extra support to parents in early years from family hubs or focussed help to involve young people experiencing particular challenges through youth services. They are delivered by a range of people in different organisations across health, schools, the council, police, voluntary agencies, community groups and many others.

Across Lancashire, all partners share the belief that families, children and young people with **universal plus** needs are best helped to find the right solution by those who already work with them, such as their health visitor, nursery or school. They are able to support the family by coordinating additional support with local partners as needed. When someone is supporting children and family in this way, shared assessments, an **Early Help Plan** and a **named lead** are helpful tools to gather and analyse relevant information and co-ordinate work alongside the child and family. Services who are working with, or can be engaged to work with, adults in the family should be included in this plan as it helps coordinate how everyone is working to a common aim.

Early Help Plans can be developed using existing assessment and planning processes within organisations. For example, schools may choose to use a Special Education Needs (SEN) Support Plan. Each local area can provide you with planning templates developed in their area, and you can find these in Part Three of this guide.

For children whose needs are Intensive, a coordinated multi-disciplinary approach where people from different organisations with different skills, knowledge and experience work together with a family, may be best. These approaches need careful coordination to make sure the children and the family are always at the centre of the work, and will need assessments and a Plan which identifies a named person to work closely with the child and family to ensure they receive all the support they require. Examples of intensive services are children's mental health services, children with additional needs and disabilities, and the families in need service.

By working together effectively with families and children and young people with emerging needs at the earliest opportunity and by providing coordinated multi-disciplinary/agency support and services for those with intensive needs, we seek to prevent more children and young people requiring statutory interventions and reactive specialist services.

Specialist services are where the needs of the child are so great that statutory and/or specialist intervention is required to keep them safe or to ensure their continued development. Examples of specialist services are Children's Social Care or Youth Offending Service.



PART TWO – DETAILED GUIDE TO WORKING WELL WITH CHILDREN AND FAMILIES IN LANCASHIRE

OUR PRINCIPLES FOR WORKING WITH FAMILIES, CHILDREN AND YOUNG PEOPLE.

Across Lancashire, there are two unitary authorities who have Social Care responsibilities (Blackburn with Darwen and Blackpool). All other areas of Lancashire are supported by the County Council. There is one Integrated Care System covering Lancashire and South Cumbria, and 5 Integrated Care Partnerships which support health delivery and commissioning. There is one Police Force, with 3 tactical delivery localities across Lancashire.

- In each local authority area, the way that the services are delivered and commissioned for families, children and young people work with people has a slightly different focus and can sometime use different language – this is because it is based on the differing needs and priorities in these communities. However, these ways of working are all underpinned by a common set of principles which span across the authorities and the partnership of health, police and provider services. These principles are -
- That we should work **WITH** families, not do things to them.
- That children are at the heart of what we do, and we should never lose sight of the impact
- That we should seek to support children within their family network wherever possible.
- That children and young people with additional needs and disabilities, and children and young people who are vulnerable because of their family circumstance, should be supported to have equity of aspiration and outcomes with their peers.
- That the anchors in a family's life, the school they chose for their children, the community that they choose to live in and the people around them can help to build assets, capacity and resilience for families when problems are identified early and addressed with honesty and collaborative working.



- That families should not have to tell their stories to a range of different professionals through their lives to get help. People involved in supporting families should share information and plans (with the knowledge, and when appropriate, consent of the family) to help them work effectively together.
- Across the local authority areas, we have agreed the levels of need and the broad description of how services can and should respond. As far as we are able, we have agreed common set of tools and guidance so that our partner agencies, particularly schools, health and the police who work pan- Lancashire do not need to access three different sources of information to help guide their work with families. Whilst there are variations in service delivery and ways of accessing (outlined in part three) the overall principles and values outlined in parts one and two apply across the county.
- The model illustrates how agencies should respond to the requirements of children and families across four levels of need (**Universal, Universal Plus, Intensive and Specialist**). In this model, all services and interventions seek to work openly with the family (or with young people on their own where it is age appropriate) in order to support them to identify, talk honestly about and address their needs at the lowest possible level. We agree to actively work with children and families to prevent their needs escalating to a higher level. We will only request services at a higher level after we have exhausted the resources and expertise at the earliest level of intervention.
- The Levels of Need table on pages 11 to 13 and the more detailed indicators of need set out on pages 20 to 27, together illustrate how Early Help operates across Lancashire and clarifies the threshold between each level. This guide seeks to give clear advice to all professionals and the public on the levels of need and thresholds for different responses in Lancashire.
- However, we recognise that each child and family member is an individual, and each family is unique in its make-up, so reaching decisions about levels of needs and the best intervention requires discussion, reflection and professional judgement applied in the **context** of the lived experience of the children and family.

Consent

Throughout this document, and in others that you will read, you will see reference to consent. Consent is needed from families and young people at key points in their journey – and can only be dispensed of when there is an overriding concern for the welfare of children or families and their safety. Even when this is the case, only in exceptional circumstances should families details be discussed and shared with other agencies without their knowledge.

Meaningful consent is important. It is crucial in helping families feel that they are important in the process that services are working with them and not doing things to them. It supports them to know that they can and should be in the driving seat of the support available to them. It should be informed consent – if you are planning to or need to share their information with more than one organisation, you should be specific about this. **Tell them what information you are going to share, who with and why you think it is the right thing to do.** If a family or individual refuses to give consent but you are sufficiently concerned about a child or vulnerable person and feel you need to share information anyway, you should usually explain this to the family unless you are concerned that in doing so, you are placing the child, yourself or anyone else at risk.

You **need** consent to –

- Make a referral or request for a service to another agency or arrange a multi-agency meeting
- Consult with other agencies about a family to help you to determine what support they might need where you are sharing their personal details.

You **do not need** consent to –

- Have a conversation with the Children and Families Hub Consultation line where you do not share identifiable details of the family.
- You **do not need consent** but should usually inform the family when –
- You are concerned that a child, family member or other person has come to, or is likely to come to significant harm and you need to share this with other agencies so that they can take steps to ensure their safety.



Levels of Need

Level of identified Need and way of accessing the service	Who it is for	Examples of the services and support available	Why is support provided?
Level 1 - Universal			
Open access to Provision for all families	All children and families who live in Lancashire.	Early years, education, primary health care, maternity services, housing, community health care, youth centres, leisure services. Children are supported by their family and in universal services to meet all of their needs.	To ensure that our Children and young people make good progress in most areas of development.
Level 2 - Universal Plus			
<p>One or more services provide voluntary additional support to meet the child and family needs.</p> <p>This is co-ordinated by a service that knows the child/family best.</p> <p>An Early Help Plan and coordination meeting is helpful to bring the family and involved services together to share information and agree what would be helpful. Individual agency internal routes to access additional supports or to request external services</p>	<p>Children and families with additional needs who would benefit from or who require extra help to:</p> <ul style="list-style-type: none"> • Improve education • Improve parenting and/or behaviour • Meet specific health or emotional needs of the child and/or parent • Improve their Material situation • Respond to a short-term crisis such as bereavement, parental separation 	<p>Parenting support; commissioned early help services</p> <p>School holiday and short breaks provision for disabled children;</p> <p>Extra health support for family members; behavioural support;</p> <p>Housing support;</p> <p>Additional learning support; Special Education Needs (SEN)</p> <p>Support plan; help to find education and employment;</p> <p>Emotional Wellbeing</p> <p>Mental Health Service support to schools;</p> <p>Speech and Language Therapy; family hubs;</p> <p>Targeted youth work</p> <p>Drug and alcohol services</p> <p>Services provided on a voluntary basis</p>	So that the life chances of children and families are improved by offering early life and early help additional support.



Level of identified Need and way of accessing the service	Who it is for	Examples of the services and support available	Why is support provided?
<p>Level 3 - Intensive</p> <p>A multi-disciplinary team to support the family led by a Lead Professional, shares information and co-ordinates intensive services and support to meet the child and family needs.</p> <p>An Early Help Plan/ Family Assessment is necessary to set out how the family and involved services will work together to meet the child's needs.</p> <p>Individual agency internal routes to access intensive support and/or referral to targeted support services available in area.</p>	<p>Vulnerable children and their families with multiple needs or whose needs are more complex, such as children and families who:</p> <ul style="list-style-type: none"> • Have a disability resulting in complex needs • Exhibit anti-social or challenging behaviour • Suffer neglect or poor family relationships • Have poor engagement with key services such as school and health • Are not in education or work long-term • Families involved in crime/misuse of drugs at a significant level 	<p>Youth Offending Service</p> <p>Emotional Wellbeing and Mental Health Service</p> <p>In patient and continuing health care</p> <p>Targeted Intervention Services including edge of care and services to support families in their home and community to prevent escalation of concerns.</p> <p>Health care for children with life limiting illness</p> <p>Services for children with profound and enduring disability</p> <p>Adult health services</p> <p>Substance misuse services</p>	<p>Vulnerable children and families likely to face impairment to their development and life chances will be supported by services to enable them to achieve good outcomes.</p> <p>Issues will be prevented from escalating into safeguarding concerns requiring statutory intervention.</p>

Level of identified Need and way of accessing the service	Who it is for	Examples of the services and support available	Why is support provided?
Level 4 - Specialist			
Children`s Social Care, Child Protection Care Proceedings, Youth Treatment Orders/ Custody/ Hospital in-patient Access via Request for service to Children`s Social Care using the local request for service form Statutory notifications to Youth Offending Service Statutory health assessments	Children and young people who have suffered or are likely to suffer significant harm as a result of abuse or neglect Children with significant impairment of function/learning and/or life limiting illness Children whose parents and wider family are unable to care for them Families involved in crime/misuse of drugs at a significant level Families with significant mental or physical health needs that impact in a way which may be significantly harmful to their children.	Children`s Social Care, Youth Offending Service Emotional Wellbeing and Mental Health Service In patient and continuing health care Fostering and residential care Health care for children with life limiting illness Services for children with profound and enduring disability Adult health services Substance misuse services	Because without the intervention of specialist services, sometimes in a statutory role, Children and /or family members are likely to suffer significant harm/ removal from home/ serious and lasting impairment.

Working well with families, children and young people

There are several factors that are essential to achieving good outcomes when working with families, children and young people.

- **An open, honest and transparent approach to supporting children and their families**

Parents are usually the best people to understand their child’s needs; however, parenting can be challenging. Families deserve support when they request it. Asking for help should be seen as a sign of responsibility rather than failure. Families tell us that support works well when they are respected and listened to by the people who work with them or they approach for help. In the majority of cases, it should be the decision of the parents when to ask for help or advice but there are occasions when practitioners may need to engage parents and families actively to help them to prevent problems from becoming more serious. This is more likely to be successful when practitioners show empathy and work with families to explore how problems have come about and how to make change. All practitioners need to work honestly and openly with families, acknowledge strengths, discuss any concerns with them and ensure

that they are involved in decision making. It is important they acknowledge and respect the contribution of family members in the work that they do.

- **Early, solution-focused and evidence-based interventions**

It is important that any problems are identified early, so that the child and their family receive appropriate support in a timely way to prevent the problem from escalating.

Everyone who works with families will work with them as soon as any difficulties become apparent, to help them to identify the things they want to change and the support they need. The most effective support is tailored to the family's needs and provided at the minimum level necessary to ensure the desirable outcomes are achieved, with as little intrusion into and disruption to family life as possible.

- **A joint working approach to assessment, support and intervention**

Protecting and promoting the welfare of children is the responsibility of everyone in Lancashire who works or has contact with children and their families no matter what organisation they work for.

The joint working approach ensures that children and families are understood and responded to in the round, so that they receive the right support and practical help in a co-ordinated way, when they need it. Partners and professionals who work with children and their families should, usually with informed parental consent, consult one another, share information and work together to ensure that the child and their family get the most appropriate and effective support.

- **A confident workforce with a common core of knowledge and understanding about children's needs and the skills to work with families**

Appropriate, effective and timely support for children and families cannot be achieved without the professional judgement and expertise that all practitioners working with children bring to their role. Across Lancashire agencies will engage in training and development to support confident practitioners who can work in an open, non-judgemental way with families to enable them to make choices and changes.

WHEN FAMILIES NEED ADDITIONAL HELP

Level 2 – Children and Families with Needs at Universal Plus

If a family have needs which broadly indicate that they are “universal plus” practitioners are expected to work together to meet the family, child or young person's additional needs and they may need to share information and engage with other services to do so. Practitioners should work alongside the family and secure their informed consent to share information with others. Work at level 2 should seek to help families build on the assets they have, to do work with them so that they can help themselves to improve a situation or make change, rather than do things around or to them.

Practitioners can access services at Level 2 Universal Plus, using their own agency internal guidelines or by using specific request for service forms/letters when requesting involvement of other additional need services. Parents should always sign to give consent to the request for service and to information sharing. We should also ask young people who demonstrate Gillick competency, especially those aged over 15, to give their consent.

Where the problems or needs are more complex, practitioners should consider completing an **Early Help Plan (EHP)** with the family. An **Early Help Plan** is a tool to use with the family to discuss and record the needs, strengths, goals and views that they identify, leading to a plan to support them. There are many different types of early help planning tools. An early help template can be found in part three. Alternatively, practitioners may choose to use or amend assessment and planning tools from within their own agency.

Where there is more than one service working alongside a child and family, it is helpful for the family and involved services to hold a **multi-agency family** meeting, to share information and co-ordinate an **Early Help Plan** together. Careful planning should take place to make sure that the family are fully engaged in this process and drive the plan. In whatever format, completed **Early Help Plan** remains the responsibility of the supporting agency/service to retain, in accordance with their own record keeping procedures. An **Early Help Plan** should be registered with the relevant local authority. Guidelines for registering an Early Help Plan can be found in part three. A copy of the completed **Early Help Plan** should be given to all family members that were involved, including children and young people (age and understanding permitting).

Children & Families Hubs/ Multi Agency Safeguarding Hubs

Across Lancashire, local authorities and partners deliver a central point of access that facilitate advice and guidance to support practitioners working with families. Although they will all work slightly differently in order to meet their local needs, these hubs are all designed to support practitioners and agencies to meet the needs of children, young people and families across all four levels of need and all offer a “consultation line” for professionals to discuss concerns if they need to before deciding a way forward. At levels 1, 2 & 3; information, advice and guidance is available to practitioners (and families) about services and support available as well as the opportunity to discuss the best course of action or signpost to available help.

Contact details for the Hubs across Lancashire can be found in part three.

Level 3 – Intensive Support

Prior to requesting services at level 3, **Intensive**, practitioners are expected to have worked together with the family to meet the **Universal Plus** needs of the child and their family using an **Early Help Plan** and **multi-agency meetings**.

Sometimes, despite the best efforts of professionals to work purposefully with and alongside families and children to support them to make change, concerns about outcomes for children do not improve. If, after a period of working with the family practitioners identify that a child and their family would benefit from a more intensive multidisciplinary response than they can provide or coordinate; they should discuss this with the family and update the **Early Help Plan** and complete a **request for service** form. The **Early Help Plan** and **request for service form** should be sent to the relevant local authority Hub, who will triage the request and either provide advice and guidance to practitioners about continuing to work at level 2, pass to the local Targeted Intervention team or identify an alternative level 3 service.

Intensive support should again be focussed on working with families, children and young people. Support for families should not be designed to “rescue” them from situations, but to help them to restore family life with evidence based interventions that help them to make long term, lasting change that they are in control of.

Level 4 – Specialist Support

Children’s Social Care (CSC) has a responsibility to children in need under section 17 of the Children Act 1989. That is, children whose development would be significantly impaired if services are not provided. This includes children who have a long lasting and substantial disability, which limits their ability to carry out the tasks of daily living.

For children in need, a request to Children’s Social Care is appropriate when more substantial interventions are needed: where a child’s development is being significantly impaired because of the impact of complex parental mental ill health, learning disability or substance misuse, or very challenging behaviour in the home.

A social care request is also appropriate where parents need practical support and respite at home because of a disabled child’s complex care needs. In these situations, Children’s Social Care will work with families on a voluntary basis, often in partnership with other professionals, to improve the welfare of the children and to prevent problems escalating to a point that statutory child protection intervention is needed.

The second area of Children’s Social Care responsibility is **child protection**; that is where Children’s Social Care must make enquiries under section 47 of the Children Act 1989, to determine whether a child is suffering or is likely to suffer significant harm. The Children Act 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interests of children.

There is no absolute criteria on which to rely upon when judging what constitutes **significant harm**. Consideration of the severity of ill-treatment may include the degree and the extent of physical harm, the duration and frequency of abuse and neglect, and the severity of the emotional and physical impact on the child. It is important to consider age and context – babies and young children are particularly vulnerable – and parental factors such as history of significant domestic abuse, substance misuse or mental ill-health. Significant harm could occur where there is a single event, such as a violent assault or sexual abuse. More often, significant harm is identified when there have been a number of events which have compromised the child’s physical and psychological wellbeing; for example, a child whose health and development is severely impaired through neglect.

Professionals in all agencies have a responsibility to make a request to Children’s Social Care when it is believed or suspected that the child:

- Has suffered significant harm – child protection
- Is likely to suffer significant harm – child protection
- Has significant developmental or disability needs, which are likely only to be met through provision of Children’s Social Care family support services (with agreement of the child’s parent) – children in need

When Children’s Social Care undertakes a S.47 child protection enquiry, the Pan Lancashire Safeguarding and Child Protection Procedures are followed.

The difference between Child Protection and Children in Need

Children’s Social Care engagement with children in need is on a voluntary basis. Parents, or young people who are Gillick Competent, can refuse some or all such offers of assistance. Often, families prefer a lower level of support such as that offered through their school or health centre because this is less stigmatising or intrusive.

An Early Help Plan, multi-agency meetings and Family Assessments are useful ways of engaging children in need and their families on a voluntary basis and many problems can be resolved this way.

When you are considering making a request for service to children's social care, unless there is immediate risk of significant harm, you should consult with the family and tell them that you are making a request, and why. Where there is doubt about the most appropriate service pathway to take, anyone concerned about the welfare of a child should, before they make a request, consult with their own manager and/ or designated safeguarding lead and, where they remain unsure, speak to a qualified social worker in the relevant local authorities contact hub (see Part Three for details).

Completing an Early Help Plan or Family Assessment should not delay the process if a professional is concerned that a child is, or may be, suffering significant impairment to their development or significant harm. In such cases, the professional should make a request to the relevant local authority hub using the guidance in Part Three.

If a child is considered to be at IMMEDIATE risk of significant harm professionals should always telephone the relevant hub and ask to speak to a social worker.

What happens to a request for support at Level 4 (Social care)

In the Children & Families Hubs across Lancashire Children's Social Care staff answer phone calls from members of the public and priority phone calls from professionals. Each children and families hub will work slightly differently to meet the needs of their community and details can be found in Part 3. There are common principles that all will share, for instance it is always the case that calls on open cases will be recorded on the child's electronic record and passed to the allocated worker to provide a response. Where a public or priority call indicates a child is at immediate risk of significant harm, a contact record recommending a referral and statutory assessment is created on the Children & Families electronic record system and electronically transferred to the local Assessment & Intervention Team.

Where a Contact is potentially a child in need request or a child protection referral, a social worker will gather further information from the family and relevant practitioners and decide within 24 hours on normal working days what action is necessary. Where the team decides a statutory assessment is required, the contact is electronically passed to the local Children's Social Care Assessment Team recommending a referral. Some contacts may be dealt with by advice regarding provision of additional support using an Early Help Plan, signposting or the provision of an immediate solution. Outcomes can include -

- No further action
- Advice and information given
- Recommendation to involved services to provide additional support through an Early Help Plan
- Signposted to other services
- Accepted as a referral and passed on to a social worker in the relevant local Assessment and Intervention team for an assessment
- Accepted as a referral for Targeted Intervention Services and passed to the team.

The outcome of the request will be fed back to the referrer. When a referral is received in the local Assessment team, it will usually be allocated to a social worker. There are occasions when the manager of the local Assessment Team will decide to close a referral before an assessment is undertaken. This can be because new information about the referral is received or the team knows relevant information from their previous involvement with the child and family. If a referral is closed by the Assessment Team, they will inform the referrer.

In most cases, a single assessment will be undertaken; this will include seeing the child alone (where age appropriate), meeting parents and discussing concerns and gathering current and historical information from all relevant professionals to form a judgment about needs and risks in order to develop a plan or agree further actions to support the child. The outcome may be:

- The provision of advice
- Referral to relevant provision in the community
- A child in need plan
- Step down to a targeted intervention service
- Step down to involved services to provide additional support using a Team Around the Family and Early Help Plan
- No further action
- A s47 child protection investigation

With parental consent the outcome of the referral will be fed back to the referrer and to any agencies from whom information has been sought. The single assessment usually takes 20 working days to complete and may lead to a child in need plan or, if the situation is complex, the single assessment will be extended to 45 working days to enable more detailed information from other agencies and detailed exploration into family background and dynamics and the needs of the children.

Whenever there are concerns a child has, or is likely to suffer significant harm, a section 47 child protection enquiry is undertaken. This will involve liaison with police, health and other agencies and will include a strategy discussion, preferably through a meeting, to share full information, decide and plan the actions needed. An assessment of the child's circumstances, including risks and needs, is undertaken following the strategy meeting. This may lead to a decision that:

- There are no concerns
- A voluntary child in need plan will support the child and family
- Further statutory intervention, often through an initial child protection conference.

If an initial child protection conference (ICPC) is required, this is usually within fifteen days of the strategy meeting. If the conference agrees, a child protection plan is put in place. The child protection plan will make clear to the parents what changes they have to make to ensure the child does not suffer significant harm. Should the circumstances of the child/young person not improve or where further serious incidents occur, a decision may be made to apply to the court for care proceedings. The first step in this process is usually to have a legal planning meeting and issue parents with a formal Public Law Outline (PLO) letter stating what must improve to avoid care proceedings. Once Children's Social Care and other specialist

intervention has successfully reduced the level of need for the child or young person, Universal or targeted services will be expected to continue to support the child and family through the ‘working well with families and children’ processes described earlier in this guide.

Consulting with Professionals to support a family, like Education, Health and Social Care

Consultation is the act of sharing information to obtain the perspective of another practitioner. It is not a referral to another service unless, during the consultation, it is decided that a referral would be the best course of action. Consultation helps to bring context to a set of circumstances that may be concerning to professionals. Consultation may take different forms, from a telephone call to a series of meetings between two or more practitioners. Consultation is best undertaken by speaking to each other and not just by email. Whenever consultation takes place, it is important that practitioners follow the principles of information sharing, parental consent and confidentiality.

If the consultation is internal (between practitioners in the same organisation) practitioners should ensure that they follow their own agency’s procedures for information sharing. If the consultation is external (between practitioners from different organisations) you should use the Pan Lancashire Information Sharing Framework to decide whether information should be shared. In most cases, unless the child would be at significant risk, before personally identifiable details are shared the child and their family should give consent to the consultation taking place and where appropriate, be given the opportunity to be involved.

Principles of consultation:

- Should be open to all agencies who work with children, young people and their families
- Should take place when there is a clear benefit to the child or young person and their family
- An important tool in helping agencies and practitioners work together to achieve the best possible outcomes for children and young people
- A two-way process that demonstrates an acknowledgement of different but equally valid knowledge and expertise
- Be able to explain to the family why you feel it would be helpful to consult with other agencies. Families should whenever possible be aware of, give consent to, and be involved in consultations and also be informed of outcomes and decisions taken as a result
- Information should be shared in the spirit of openness, transparency and honesty between practitioners, the child and their family; however it is important that you have due regard for the principles of confidentiality and parental consent

All consultations should be recorded by the practitioner who has initiated the consultation to ensure clarity and allow you to evidence any decisions that have been made as a result of other professionals input.

Children & Families Hub consultation

If as a professional working with children and families in Lancashire you have concerns about a child and want an opportunity to talk these through with a social worker before deciding the best course of action, please contact the Children & Families Hub for the relevant authority using the contact details in part three and ask for the Consultation line.

The Children & Families Hubs also support partners’ Early Help activity at level 2 and 3. The Consultation Line social worker can provide information, advice and guidance about having difficult conversations, Early Help Plans, multi-agency meetings and additional external services available.

All consultations with the Children & Families Hub must be recorded by the caller. This is because the Children & Families Hubs will only create records for children where a service request which meets the threshold for Level 3 or 4 services has been received AND the relevant consent criteria is met. If during a consultation it becomes clear that a child is at immediate risk of significant harm the caller will be transferred to the Priority Line and the process for accessing urgent Level 4 services will be followed. If, following a consultation, a practitioner wishes to submit a Request for Services (RFS) form, they should follow the process outlined within this document for accessing Level 3 or 4 services. At any time during the Early Help Plan or Assessment process, it is important that practitioners feel they can ask for help and advice and draw on the expertise of other practitioners. All practitioners and services, schools and settings, working with families should feel able to consult with one another in a meaningful, purposeful way at any time before deciding on a course of action or way forward.

Indicators of Possible Need

The indicators of possible need listed under each heading are an indication of the likely level of need. Only by talking to children and their family in more detail to explore the context, familial assets and the factors behind the need, will the practitioner be able to form a judgement as to the level of support needed. Holding a multi-agency meeting and completing an Early Help Plan or Family Assessment is a helpful way to share information and gain an understanding of the child and family needs. The indicators are a guide and not a pre-determined level of response

Level 1 - UNIVERSAL: Children and young people who make good overall progress in most areas of development and receive appropriate universal services, such as health care and education. They may also use leisure and play facilities, housing or voluntary sector services.

Health

- Physically well
- Nutritious diet
- Adequate hygiene & dress
- Developmental & health checks/ immunisations up to date
- Developmental milestones & motor skills appropriate
- Sexual activity age-appropriate
- Good emotional and mental health

Emotional Development

- Good quality early attachments
- Able to adapt to change
- Able to understand others' feelings

Basic care, ensuring safety and protection

- Provide for child's physical needs, e.g. food, drink, appropriate clothing, medical and dental care
- Protection from danger and significant harm.

Emotional warmth and stability

- Shows warm regard, praise and encouragement
- Ensures stable relationships

Guidance, boundaries and stimulation

- Ensure the child can develop a sense of right and wrong
- Child/young person accesses leisure facilities as appropriate to age and interests

Level 1 - continued

Behavioural Development

- Takes responsibility for behaviour
- Responds appropriately to boundaries and constructive guidance

Identity and Self-Esteem

- Can discriminate between safe and unsafe contacts

Family and Social Relationships

- Stable and affectionate relationships with family
- Is able to make and maintain friendships

Learning

- Access to books and toys
- Enjoys and participates in learning activities
- Has experiences of success and achievement
- Sound links between home and school
- Planning for career and adult life

Family functioning and well-being

- Good relationships within family, including when parents are separated

Housing, work and income

- Accommodation has basic amenities and appropriate facilities, and can meet family needs
- Managing budget to meet individual needs

Social and community including education

- They have friendships and are able to access local services and amenities
- Family feels part of the community

Level 2 – UNIVERSAL PLUS: Children and young people whose needs require some extra support. A single universal or targeted service or two services are likely to be involved; these services should work together. A Team Around the Family meeting to share information and agree an Early Help Plan to support the child and family is helpful. No need for specialist services.

Health

- Inadequate, limited or restricted diet; e.g. no breakfast, no lunch money; being under or overweight
- Missing immunisations/checks
- Child is continually slow in reaching developmental milestones
- Minor concerns re: diet, hygiene, clothing
- Dental problems untreated / decay
- Missing routine and non-routine health appointments

Identity and Self Esteem

- Some insecurities around identity expressed e.g. low self-esteem, sexuality, gender identity
- May experience bullying
- May be perpetrating bullying behaviour
- Lack of confidence is incapacitating
- Child/young person provocative in behaviour/ appearance e.g. in appropriately dressed for school

Level 2 – UNIVERSAL PLUS: Children and young people whose needs require some extra support. A single universal or targeted service or two services are likely to be involved; these services should work together. A Team Around the Family meeting to share information and agree an Early Help Plan to support the child and family is helpful. No need for specialist services.

Health

- Concerns about developmental progress: e.g. bedwetting/soiling; speech impediment
- Vulnerable to emotional problems, perhaps in response to life events such as parental separation e.g. child seems unduly anxious, angry or defiant for their age
- Experimenting with tobacco, alcohol or illegal drugs
- Frequent accidents
- Standard risk of child sexual exploitation identified using the Child Sexual Exploitation (CSE) risk and vulnerabilities assessment

Emotional Development

- Some difficulties with family relationships
- Some difficulties with peer group relationships and with adults, e.g. ‘clingy’, anxious or withdrawn
- Some evidence of inappropriate responses and actions
- Limited engagement in play with others / Has few or no friends

Behavioural Development

- Not always able to understand how own actions impact on others
- Finds accepting responsibility for own actions difficult
- Responds inappropriately to boundaries / constructive guidance
- Finds positive interaction difficult with peers in unstructured contexts
- Additional needs from Emotional Well Being and Mental Health Services
- One-off / occasional short period missing from home

Identity and Self Esteem

- Child subject to persistent discrimination, e.g. racial, sexual or due to disabilities
- Victim of crime or bullying

Family and Social Relationships

- Lack of positive role models
- Child has some difficulties sustaining relationships
- Low levels of parental conflict / infrequent incidents of domestic dispute
- Unresolved issues arising from parents’ separation, step-parenting or bereavement
- Occasional low level domestic abuse
- Children affected by parental imprisonment

Self-care skills and independence

- Disability limits amount of self-care possible
- Periods of inadequate self-care, e.g. poor hygiene
- Child is continually slow to develop age appropriate self-care skills

Learning

- Have some identified specific learning needs with targeted support and / or Special Education Needs and disabilities - Education, Health and Care Plan
- Language and communication difficulties
- Regular underachievement or not reaching education potential
- Poor punctuality / pattern of regular school absences
- Not always engaged in play / learning, e.g. poor concentration
- No access to books / toys
- Some fixed term exclusion

Level 2 – continued

Basic care, ensuring safety and protection

- Basic care is not provided consistently
- Parent/carer requires advice on parenting issues
- Some concerns around child’s physical needs being met
- Young, inexperienced parents
- Teenage pregnancy
- Inappropriate child care arrangements and/or too many carers
- Some exposure to dangerous situations in the home or community •
- Unnecessary or frequent visits to GP or unplanned care settings e.g. Emergency Department
- Parent/carer stresses starting to affect ability to ensure child’s safety

Emotional warmth and stability

- Inconsistent responses to child/young person by parent/carer
- Parents struggling to have their own emotional needs met
- Child/young person not able to develop other positive relationships
- Starting to show difficulties with attachments

Family functioning and well-being

- A child/young person is taking on a caring role in relation to their parent/carer, or is looking after younger siblings
- No effective support from extended family
- Adopted

Guidance, boundaries and stimulation

- Parent/carer offers inconsistent boundaries
- Lack of routine in the home
- Child/young person spends considerable time alone, e.g. watching television
- Child/young person is not often exposed to new experiences; has limited access to leisure activities
- Child/young person can behave in an anti-social way in the neighbourhood, e.g. petty crime

Housing, work and income

- Family seeking asylum or refugees
- Periods of unemployment of parent/carer
- Financial/debt problems
- Poor state of repair, temporary or overcrowded, or unsafe housing
- Intentionally homeless
- Serious debts/poverty impact on ability to have basic needs met
- Rent arrears put family at risk of eviction or proceedings initiated
- Not in Education, Employment or Training post-16

Social and community including education

- Some social exclusion or conflict experiences; low tolerance
- Community characterised by negativity towards children/young people
- Difficulty accessing community facilities



Level 3 - INTENSIVE: Vulnerable Children. Children and young people whose needs are more complex. This refers to the range, depth or significance of the needs. A number of these indicators would need to be present to indicate need at Level 3. More than one service is involved, using a Team Around the Family approach, Early Help Plan or Shared Family Assessment and a Lead Professional to co-ordinate multi-agency support. Family Solutions can support at this level and access is through the Children & Families Hub using a Request for Support form (RFS).

Health

- Child has some chronic/recurring health problems; not treated, or badly managed
- Regularly misses appointments for serious medical condition
- Developmental milestones are not being met due to parental care
- Regular substance misuse
- Lack of food
- ‘Unsafe’ sexual activity
- Self-harming behaviours
- Child has significant disability
- Mental health issues emerging e.g. conduct disorder; ADHD; anxiety; depression; eating disorder; self-harming
- Standard risk Child Sexual Exploitation with multiple vulnerabilities or medium risk of child sexual exploitation identified using the CSE risk and vulnerabilities assessment Emotional Development
- Sexualised behaviour
- Child appears regularly anxious, angry or phobic and demonstrates a mental health condition
- Caring responsibilities affecting development of self-behavioural Development
- Persistent disruptive/challenging behaviour at school, home or in the neighbourhood
- Starting to commit offences/re-offend
- Additional needs met by Emotional Wellbeing and Mental Health Services
- Prosecution of offences resulting in court orders, custodial sentences or Anti-Social Behaviour Orders or Youth Offending early intervention

Guidance, boundaries and stimulation

- Parents struggle/refuse to set effective boundaries e.g. too loose/tight/physical chastisement
- Child/young person behaves in anti-social way in the neighbourhood

Housing, work and income

- Chronic unemployment that has severely affected parents’ own identities
- Family unable to gain employment due to significant lack of basic skills or long-term substance misuse

Family functioning and well-being

- Family have serious physical and mental health difficulties impacting on their child
- Community are hostile to family
- Emerging involvement in gang or other activities which risks future exploitation
- Young person displays regular physical violence towards parents

Learning

- Consistently poor nursery/school attendance and punctuality
- Young child with few, if any, achievements
- Not in education (under 16)

Family and Social Relationships

- Relationships with carers characterised by unpredictability
- Misses school consistently
- Previously had periods of Local Authority accommodation
- Young person is main carer for family member Self-care skills and independence

Level 3 - continued

Health

- Repeated short incidents of missing from home (less than 3 incidents in 90 days)
Identity and Self-Esteem
- Presentation (including hygiene) significantly impacts on all relationships

Child/young person experiences persistent discrimination; internalised and reflected in poor self-image
Basic care, ensuring safety and protection

- Parent/carer is failing to provide adequate care
- Parents have found it difficult to care for previous child/young person
- Domestic abuse, coercion or control in the home
- Parent's mental health problems or substance misuse significantly affect care of child/young person
- Non-compliance of parents/carers with services
- Child/young person may be subject to neglect
- Child has no positive relationships
- Child has multiple carers; may have no significant relationship to any of them
- Child at risk of Female Genital Mutilation and other harmful traditional/cultural practices, Forced Marriage or Honour Based Abuse where a protective parent is engaging with targeted services to seek protection

Child at risk of Modern Slavery and/or Human Trafficking but parents are accessing support and services

Family and Social Relationships

- Disability prevents self-care in a significant range of tasks
- Child lacks a sense of safety and often puts him/herself in danger



Level 4 - SPECIALIST: Children and young people whose needs are complex and enduring and cross many domains. More than one service is normally involved, with a co-ordinated multi-agency approach and a Lead Professional, commonly in a non-statutory role. At times statutory intervention may be required.

Health

- Child/young person has severe/chronic health problems
- Failure to thrive/faltering growth with no identified medical cause
- Refusing medical care endangering life / development
- Seriously obese / seriously underweight
- Serious dental decay requiring removal of multiple teeth through persistent lack of dental care
- Persistent and high risk substance misuse
- Dangerous sexual activity and/or early teenage pregnancy
- Sexual abuse
- Evidence of significant harm or neglect
- Non-accidental injury
- Unexplained significant injuries
- Acute mental health problems e.g. severe depression; threat of suicide; psychotic episode
- Physical / learning disability requiring constant supervision
- Disclosure of abuse from child / young person
- Disclosure of abuse / physical injury caused by a professional
- High risk of child sexual exploitation or actual abuse known to be happening

Emotional Development

- Puts self or others in danger e.g. missing from home inappropriate relationships
- Severe emotional/behavioural challenges
- Puts self or others at risk through aggressive behaviour

Emotional warmth and stability

- Parent's own emotional experiences significantly impacting on their ability to meet child/young person's needs
- Child has no-one to care for him/her
- Requesting young child be accommodated by local authority

Guidance, boundaries and stimulation

- No effective boundaries set by parents / carers
- Multiple carers
- Child beyond parental control
- Persistent and regular incidents of missing from home (three or more incidents in 90 days)
- Missing from home for long periods of time
- Family functioning and well-being
- Significant parental / carer discord and persistent domestic violence and discord between family members
- Child / young person in need where there are child protection concerns
- Individual posing a risk to children in, or known to, household
- Family home used for drug taking, prostitution, illegal activities

Housing, work and income

- Homeless - or imminent if not accepted by housing department
- Housing dangerous or seriously threatening to health
- Physical accommodation places child in danger
- Extreme poverty / debt impacting on ability to care for child

Level 4 - continued

Emotional Development

- Behavioural Development
- Persistent disruptive/challenging at school, home or in the neighbourhood resulting in repeated school placement breakdown and/or family breakdown
- Regular and persistent offending and reoffending behaviour for serious offences resulting in custodial sentences or high risk public protection concerns
- Mental health needs resulting in high risk self-harming behaviours, suicidal ideation and in-patient admissions

Learning

- No school placement due to parental neglect
- Child/young person is out of school due to parental neglect

Other indicators

- Professional concerns – but difficulty accessing child / young person
- Unaccompanied refuge / asylum seeker Privately fostered
- Abusing other children
- Young sex offenders
- Serious or persistent offending behaviour likely to lead to custody / remand in secure unit/ prison
- Trafficked child with no family support or protection
- Forced criminality, forced labour
- Family and Social Relationships
- Relationships with family experienced as negative ('low warmth, high criticism')
- Rejection by a parent/carer; family no longer want to care for - or have abandoned –child / young person
- Periods accommodated by local authority
- Family breakdown related to child's behavioural difficulties
- Subject to physical, emotional or sexual abuse or neglect
- Younger child main carer for family member

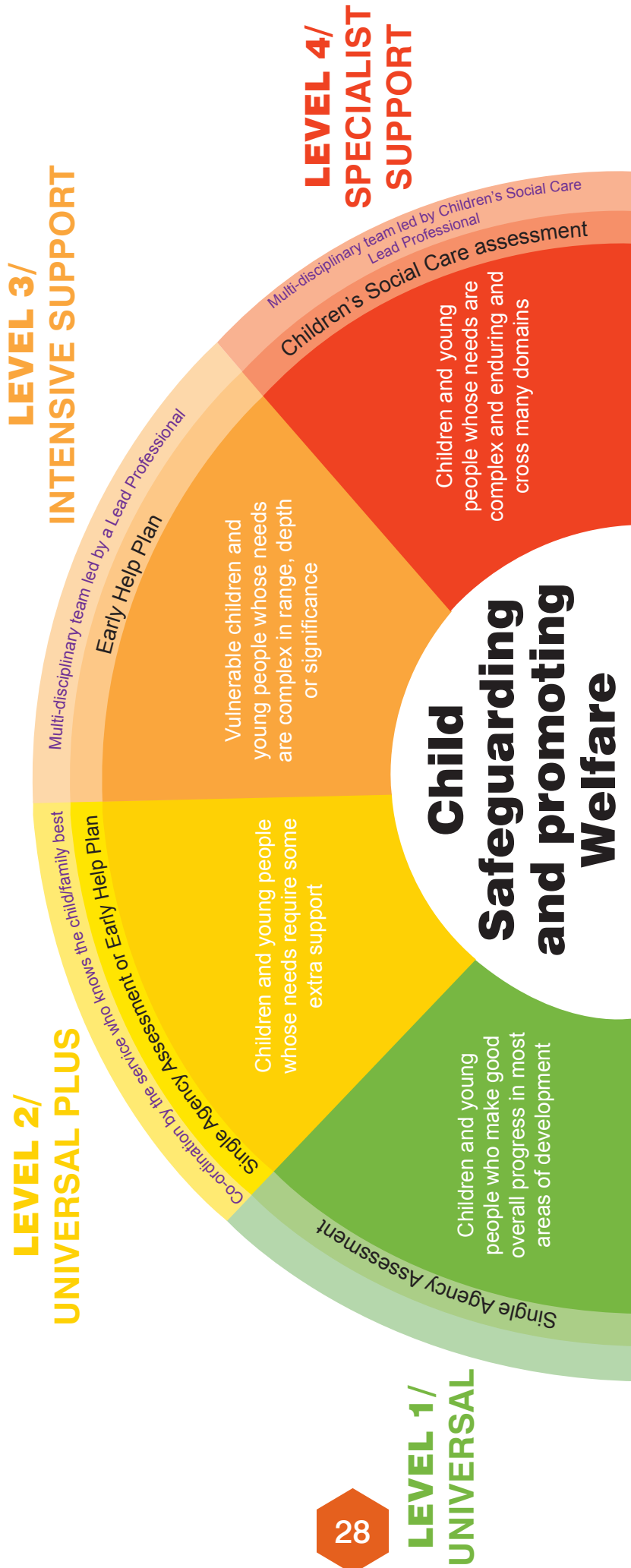
Identity and Self-Esteem

- Failed Education Supervision Order – three prosecutions for non-attendance: family refusing to engage
- Child/young person likely to put self at risk
- Evident mental health needs
- Young person exhibiting extremist views, threats, suggestions or behaviour which meets PREVENT criteria
- Young person involved / closely associating with gangs

Basic care, ensuring safety and protection

- Parent / carers mental health or substance misuse significantly affect care of child
- Parents / carers unable to care for previous children
- Instability and violence in the home continually
- Parents / carers involved in violent or serious crime, or crime against children
- Parents/carers own needs mean they are unable to keep child / young person safe
- Severe disability – child / young person relies totally on other people to meet care needs
- Chronic and serious domestic abuse involving child/young person
- Disclosure from parent of abuse to child / young person
- Suspected/evidence of fabricated or induced illness
- Young person at risk of Female Genital Mutilation and other harmful traditional/ cultural practices, Forced Marriage or Honour Based Abuse with family who lack willingness to protect
- Medium risk of Child Sexual Exploitation and parents/carers lack willingness to protect

Levels of Need – At a Glance



If in doubt, consult with agency safeguarding leads, or the Duty Social Worker in your area:
Lancashire 0300 123 6720; Blackpool 01253 477299; Blackburn with Darwen 01254 666400

NOTES

WORKING WELL WITH CHILDREN AND FAMILIES IN LANCASHIRE

**Including, Blackburn with Darwen,
Blackpool and Lancashire Local
Authorities**

This document contains Part One and Two
of Three parts of the guidance.

