Meeting the Needs of Children and Families in Lincolnshire

Threshold Guidance 2019
The model is based on the principle that services should be provided as soon as possible (The Early Help Offer), at the lowest level proportionate to the assessed needs of the child/young person. The aim is to support families and prevent things becoming more difficult so the family can continue to get support in universal services.

This model identifies levels of need and how to meet them rather than levels of service.

The use of the assessment, planning, delivery and review process ensures there is no drift in support provided and resources are available on demand to meet assessed need.

Effective and efficient use of resources across all agencies should be within a clear framework following the principles described here:

- Assessment
- Planning
- Deliver
- Review

The model considers four levels of support:

- Universal
- Early Help
- Child in Need
- Immediate Safeguarding

Practitioners need to be aware that whilst TAC or ESCO (TAC – Team Around the Child / ESCO – Early Support Care Co-ordination) is aimed at early help, early identification, intervention and/or prevention, it by no means replaces LSCB guidelines and procedures and in any case involving safeguarding of children, the LSCB guidelines and procedures must be followed.
The model underpins the provision of universal services to all. The services identified as universal are such services as schools, children centres, early education, health provision i.e. GP, hospitals - available to everyone as they are required. The provision of universal services will invariably be provided by a single agency working in isolation. It is Universal Services who are best placed to ensure children and families have access to the Early Help Offer. The needs of the child/young person are appropriately met within this framework.

Child’s Developmental Needs
- Physically well
- Developmental assessments and immunisations up to date
- Meets developmental milestones
- Accesses health services
- Attends school and success and achievements are celebrated
- Good quality early attachments
- Positive sense of self and demonstrate belonging
- Good relationships with carers/ siblings and peers
- Growing level of competencies in practical and emotional skills

Parenting capacity
- Carers provide children’s physical and emotional needs and protects from danger/harm
- Shows warmth and encouragement
- Carers provide appropriate boundaries and guidance

Family/ Environmental Factors
- Supports development through play
- Supportive wider family and community networks
This refers to children, young people and families who have been assessed as having additional needs which cannot be provided purely by universal provision. Services identified within targeted can include for example Young Carers, Special Educational Needs (SEN), Family Support and Child Health Services (CAMHS Tier 2). These needs may be met by an additional piece of support by one agency or a number working together to address the identified needs of the whole family.

Within universal services, when one agency can identify that the child and family need one additional form of support from a second agency. This can be achieved through a direct request to the second agency and a Team Around the Child (TAC) / Early Support Care Co-ordination (ESCO) is not required to coordinate services. LSCB expect that assessment via the use of a Early Help Assessment.

It must be remembered that the universal provision is part of the overall plan. When a multi-agency response is required the TAC/ESCO process needs to be initiated.

For a full TAC guide and definition please log onto www.lincolnshirechildren.net for more information regarding ESCO log onto www.lincolnshire.gov.uk/ESCO
Child’s Developmental Needs
- Concerns about diet/hygiene/clothing
- Defaulting on health appointments
- Not reaching developmental milestones
- Few opportunities for play or socialisation
- Substance use or concerns
- Mental health concerns
- Poor school attendance or exclusion
- Experience bullying
- Special educational needs
- Disengagement from education, training, employment post 16
- Child appears withdrawn
- Difficulties with peer group/adults relationships
- Some evidence of inappropriate responses and behaviours
- Finds it difficult to cope with anger, frustration and upset
- Disruptive or anti-social behaviour
- Slow to develop age appropriate self-care skills
- Disabilities
- Complex health needs
- Young Carers

Parenting capacity
- Overt parental conflict or lack of parental support/boundaries
- Pregnancy and parenthood
- Parental engagement with services is poor
- Parent is struggling to provide adequate care
- Unrealistic parental expectations
- Previously looked after by local authority
- Child previously subject of a Child Protection Plan
- Post natal depression
- Concealed pregnancy
- Perceived to be a problem by parents
- Inconsistent boundaries
- Minor to moderate mental health issues
- Parental drug and alcohol use (Non problematic)
- Child’s safety is beginning to be compromised by parental care/Anxieties related to the recent
diagnosis of Child’s disability or condition

Family/Environmental Factors
- Parents have some conflict or difficulties that can involve the children
- Has experienced loss of significant adult e.g. bereavement or separation
- Young carers
- Parent has physical or mental ill-health
- Family is socially isolated
- Poor housing
- Poverty
- Involvement in or risk of offending
- Poor access to universal services
- Poor or overwhelming Care Coordination for a Child with Disabilities
Of those children and young people who have complex needs there will be a small proportion with more acute needs. These are identified as:

- Children who are unlikely to reach or maintain a satisfactory level of mental or physical health or development, or their health and development will be significantly impaired, without the provision of services
- Children who are the subject to Care or Supervision Orders
- Looked after Children
- Children for whom adoption is the plan
- Offenders remanded into the care of the Local Authority
- Children who are privately fostered
- Children receiving in-patient mental health treatment (Will be subject to multi-agency care programme approach)

Those who require a specialist service - the specialist may be a single provision i.e. a mental health unit for eating disorders, a SEN school, but they are also likely to have multi-agency support requirement.

Once acute needs have been stabilised, the long-term plan may be managed via the TAC or C.I.N.
Significant harm
Some children are in need because they are suffering, or 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 interest of children, and gives local authorities a duty to make enquiries to decide whether they should take action to safeguard or promote Specialist 21 Meeting the Needs the welfare of a child who is suffering, or likely to suffer, significant harm. Where professionals working with a child consider/suspect that a child is suffering or likely to suffer significant harm, the situation should be discussed with the Customer Service Centre, 01522 782111.

The following list provides a guide for all children where Children's Social Care have a statutory responsibility:

- Children subject to a child protection plan
- Looked after Children
- Children with severe complex special educational needs
- Children with complex disabilities or complex health needs
- Children diagnosed with significant mental health problems
- Young offenders involved with the Youth Justice Services (Community and custodial)
- Children suspected of being subject to fabricated or induced illness.

Child’s Developmental Needs
- Disability (Permanent or substantial impairment of function)
- Life threatening conditions
- Severe health problems
- Significant emotional and behavioural difficulties
- Neglects to use self-care skills due to alternative priorities e.g. substance use
- Children whose behaviour has been sexually harmful
- Family breakdown related in some ways to the child’s behavioural difficulties
- Children who are runaways or who put themselves in danger
- Long-term neglect which significantly impacts on child’s development
- Health conditions or impairment which significantly affect everyday life functioning (chronic or acute)
- Child has severe, complex or challenging mental health problems
- Child has severe disability
- Child’s health and development needs require specialist service provision
- Unaccompanied children
- Dangerous sexual activity and/ or early teenage pregnancy
- Problematic, sever or chronic drug and alcohol misuse
- Chronic neglect impacting on the emotional well-being and attachment of child
- Impact of severe domestic violence
- Emotional neglect or severe attachment problems
- Significant, serious or numerous self harm or suicide/attempts
- Actions within school leading to exclusion or imminent permanent exclusion
- Persistent offending results in court action and potential entry into custody
- Children & Young people who require specialist services that aren’t normally provided within Lincolnshire
- Statutory legal interventions are required to safeguard the child
- Inability to develop or sustain peer relationships e.g. is aggressive or violent, a bully, a victim etc.
- Is suffering harm in relation to physical, emotional or sexual abuse or neglect
- Child is the subject of sexual exploitation
Parenting capacity
• Serious/repeated domestic abuse;
• Serious family relationship problems;
• Parenting is not safe
• Lack of parental cooperation is having detrimental impact on the child’s welfare and safety
• Previously subject to a Child Protection Plan
• Physical or learning disability/mental ill health/are seriously ill/use substances
• Children who are sexually exploited
• Children who are homeless
• Irretrievable family breakdown related in some way to the child’s behaviour and parenting capacity
• Continued exposure by parents or carers to dangerous situations in the home/community
• Irrevocable child and parent relationship breakdown
• The child is undertaking the majority of parenting responsibilities which are significantly impairing the child’s health and development
• Moderate, severe or complex mental or physical health needs or learning disability such that vital parenting roles cannot be undertaken and child is at risk of significant harm
• Concerns about parenting of a child who is or has been looked after or is at risk of becoming looked after
• Child has no parent/carer or has been abandoned
• Problematic drug or alcohol misuse by parent or within household.

Family/Environmental Factors
• Housing places child in danger
• Extreme poverty impacting on ability to care for the child
• Family chronically socially excluded
• Continued inconsistencies in parenting leading to significant attachment difficulties
• Person posing a risk to children is living in the property
• Lack of adequate food, warmth, essential clothing
• Homeless and not eligible for temporary housing
• Family or young person not entitled to benefits with no means of support
• Imminent family breakdown and risk of child becoming looked after
• Family chronically socially excluded, no supportive network
Parenting capacity
There are children where there is a need for immediate safeguarding as they may have suffered or be at risk of suffering significant harm. These children require an immediate referral to Children’s Social Care and or Lincolnshire Police for an Assessment to be completed to better understand their needs. These children are:

- Children at immediate risk of significant harm including physical, sexual, emotional harm and neglect
- Children with unexplained injuries, suspicious injuries or where there is inconsistent explanation of the injury
- Children from families experiencing a crisis likely to result in an imminent break down of care arrangements
- Where there are serious concerns regarding the risk of significant harm to an unborn baby
- Children who are remanded
- Children who are engaged in criminal activity (Refer to YOS)
- Children who allege abuse
- Vulnerable children who are left alone

Children’s Social Care is the lead agency for undertaking Section 171 and Section 472 enquiries.

1 Children Act 1989 Chapter 41, Section 17, Provision of services for children in need, their families and others.

2 Children Act 1989 Chapter 41, Section 47, Local authority’s duty to investigate,

If a child is in need of immediate medical treatment this should not be delayed by referring first to Social Care or by attempts to contact parent or guardian in advance; in some cases of suspected child abuse it would be inappropriate to alert parents. Medical advice must be sought and, where necessary, Emergency Services should be called on 999.
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