

Barnsley Thresholds for Intervention

Early Help and Beyond



BARNSLEY
Metropolitan Borough Council

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Useful telephone numbers

Front door to Children's Social Care (Screening; MASH; Assessment)	01226 772 423
Emergency Duty Team	01226 787 789
South Yorkshire Police	101/999
Community Safety and Enforcement	01226 773 555
Families Information Service	0800 0345 340
Disabled Children's Team	01226 774 050

Useful Links

Barnsley Safeguarding Children Partnership

<https://www.barnsley.gov.uk/bscp>

Families Information Service

www.barnsley.gov.uk/fsd

Barnsley Early Help Toolkit

www.barnsley.gov.uk/earlyhelp



Introduction

In Barnsley we are working to a model of intervention which reflects four tiers of need. For more comprehensive information see the Barnsley Assessment Framework. The tables in this summary provide a quick reference point for professionals, but they are not exhaustive and family circumstances will rarely fit into one particular category. Identifying neglect, which often involves bringing together a number of concerning factors for a child, can be particularly difficult, and practitioners need to focus on the experience of the child to ensure that timely decision making and intervention take place.


It is important to remember that guidance will never give all the answers, nor will it ever take the place of talking to each other – or sound professional judgement and good communication. Where a practitioner has concerns about a child's welfare and/or doubts about the most appropriate pathway to meet a child's needs, they should consult initially with their own manager and agency safeguarding leads.

Children's Social Care (CSC) can provide consultation if you have general concerns and, having consulted your own safeguarding lead, you are unsure about the action to take. **If you have concerns that a child is at risk of significant harm, you should make a request for service to CSC without delay.**

Early Help

Early Help is our approach to providing support to potentially vulnerable children, young people and families as soon as problems start to emerge, or when there is a strong likelihood that problems will emerge in the future.

Early Help may occur at any point in a child or young person's life, from childhood to adolescence, and includes both interventions early in life as well as interventions early in the development of a problem.



It is about the way we can all work together, share information, and put the child and their family at the centre. It's about providing effective support to help them solve problems and find solutions at an early stage, so we avoid needs becoming so great that specialist statutory interventions are required.

When you have agreement from the family to undertake a Early Help Assessment (EHA) you must inform the Local Authority. You will need to:

1. Complete the EHA form which can be accessed online at www.barnsley.gov.uk/early-help-toolkit or in person at your local family centre. All EHAs must include signed family consent.
2. Email the form securely to the Early Help inbox earlyhelp@barnsley.gov.uk or take it to your local family centre.
3. The Early Help service will undertake checks and upload onto our information management system. If an EHA is already underway or if there is an open case to social care you will be contacted as necessary. You will be issued with a family number once the EHA has been recorded on the information management system.

Once you have completed the EHA you should progress with any actions you have identified in a timely manner.

Information and guidance regarding the completion of an Early Help Assessment can be found by accessing the Early Help toolkit for practitioners at www.barnsley.gov.uk/early-help-toolkit



Working Together to Safeguard Children

Working Together to Safeguard Children (2018) streamlines previous guidance documents to clarify the responsibilities of professionals towards safeguarding children and strengthen the focus away from processes and onto the needs of the child.

It emphasises that:

- **the child's needs are paramount** and the needs and wishes of each child should be put first, so that every child receives the support they need before a problem escalates.
- **all professionals who come into contact with children and families** are alert to the children's needs and any risks of harm that individual abusers, or potential abusers, may pose to children.
- **all professionals share appropriate and relevant information in a timely way** and can discuss any concerns about an individual child with colleagues and Barnsley Council's Children's Social Care.

Safeguarding procedures

Barnsley Safeguarding Children Partnership child protection and related policies are available on the [Barnsley Safeguarding Children Partnership website](#).

Sharing information

Knowing when and how to share information isn't always easy - but it's vital to get it right. Children, young people and their families need to feel that their confidentiality is respected. In most cases, you will only share information about families with consent - but there may be circumstances when you will need to override this.

Seven golden rules of information sharing

1

Recognise that the General Data Protection Regulations (GDPR UK) Act is not a barrier to sharing information; they provide a framework to make sure that personal information about families is shared appropriately.

2

Explain openly and honestly to the person at the outset what information will or should be shared, why, how and with whom, and seek agreement – except where doing so puts the child or others at risk of significant harm.

3

Seek advice if you are in any doubt, without disclosing the identity of the person where possible.

4

Share with consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgement on the facts about the case. Seek advice from your line manager if you are not sure.

5

Consider safety and wellbeing; base your information sharing decisions on consideration of the safety and wellbeing of the person and others who may be affected. The child's safety and welfare must be the overriding consideration when making decisions to share information about them.

6

Ensure information shared is accurate, up-to-date, proportionate and necessary for the purpose for which you are sharing it. Share it only with those who need to know, and share it accurately and securely.

7

Always record the reason for your decision (using your agency's recognised recording system) whether it is to share or not, the information shared, for what purpose, with whom, and how it was shared.



Thresholds for intervention

Tier 1: requiring universal services – children with no additional need

The majority of children and families locally and nationally will have their needs met by accessing their local universal services. In general, children who only require universal provision are those with ‘no identified additional need’.

Tier 2: requiring early intervention – children with some additional needs

These children/young people have low level additional needs that are likely to be met via short term intervention. The exception to this is those children/young people with disabilities or complex health needs who are likely to require support on a medium or long-term basis.


They may require multi-agency intervention to prevent needs escalating or circumstances deteriorating to the detriment of the child/young person and the family. In general, children who require early intervention and preventative services are those with ‘additional needs.’

Tier 3: requiring targeted and enhanced support – children with additional, complex needs

Children requiring Tier 3 services are children with high-level additional unmet needs and those with complex needs likely to require longer term targeted intervention from statutory and/or specialist services.

At Tier 3, there is likely to be a combination of factors which will require careful information gathering and sound assessment and analysis to ensure that the services offered to children and families meet need and prevent further escalation of risk in their circumstances.

These children may be eligible for a service from Children’s Social Care and are at risk of moving to a high level of risk if they do not receive intervention. These may include children who have been assessed as ‘high risk’ in the recent past, and who continue to require additional support.



If a social worker is allocated, they will act as Lead Practitioner. As far as possible, all engagement with services will be sought on a voluntary basis; however, it is likely that some children and families at the upper end of this tier of need will be at risk of harm and statutory powers may be required to ensure families work together with services.

Tier 4: requiring acute/statutory intervention – children with complex and or acute needs

Tier 4 needs are those that can be described as acute, either in terms of urgency, complexity or the degree of risk to which a child or young person is exposed. Children requiring urgent or emergency protection, child protection plans or care proceedings; children with complex needs requiring nursing or in-patient care, including those with acute mental health/psychiatric problems all have Tier 4 needs.

For children deemed to be suffering or likely to suffer significant harm, referrals must be made following Barnsley Children's Safeguarding Partnership procedures to Children's Social Care.

It is important to remember that children/young people with disabilities or complex health needs are particularly vulnerable and the impact of neglect may be more profound upon them. They may be unable to disclose or indicate abuse.

This booklet is only intended to offer guidance to the type of need which would trigger service. There will be circumstances in which children's needs will cross tiers and for which practitioners will need to seek advice and guidance.

Practitioners should refer to safeguarding procedures and seek advice and guidance from their line managers or social care managers.



Determining the level of need or urgency

The extent of harm or significant harm is generally determined by the balance between risk and protective factors in a child's life. Generally speaking, those factors which are present where children have no additional needs are considered to be protective in nature; those where children have additional or complex needs are considered to be risk factors.

Others factors should also be taken into consideration, such as the age of the child and the context of care that the child is generally known to experience.

An assessment, whether an Early Help Assessment (EHA), or a more in-depth social care child assessment, will be the process by which the relevant factors will be identified and an analysis and judgement made about the level of risk/need for the child.

Ensuring that information used to inform the assessment is accurate, and that fact is always distinguished from opinion, is essential in determining the correct course of action for children and their families.

Everyone who works with children and their families has a responsibility to ensure that they have received training and are equipped with the level of knowledge required to be able to judge when they need to seek further information about a child's circumstances and when to seek advice and guidance from a manager or other agency.

The following tables offer a brief description of threshold indicators at the various tiers and a range of services available to children, young people and their families in Barnsley. It is not a comprehensive list. The tables are for guidance only, as the needs of a family will rarely fall neatly into one tier.

If you have safeguarding concerns about a child, in the first instance speak to your agency's safeguarding lead. Children's Social Care are available to offer consultation and advice.

If you do not agree with the decision following your request for service to Children's Social Care, you should refer to the escalation procedures on the safeguarding partnership website and make sure your concerns are escalated.



Child factors

No additional needs – Tier 1

Child is healthy and well, registered with a GP and dentist, and parents are accessing health services.

Parents are able to provide good care, meeting child's safety, physical and protection needs

Parents provide a safe and secure environment and support access to consistent and positive activities

Regular attendance at nursery or school, causing no concerns to teaching staff

Parents provide secure attachment and caring parenting; guidance and boundaries in place to help child develop appropriately

Child/ Young People feel safe in their community and have a positive peer group around them.

Action

Child and family will access universal services and have no additional need

Additional needs – Tier 2

Developmental delay

Health problems/disability which can be maintained in a mainstream school

Low level mental or emotional issues requiring intervention

Challenging behaviour that parents find difficult to manage

Poor school attendance

Failure to make progress in learning

Defaulting on health appointments

Bullying/being bullied

Lack of age appropriate self-care skills

Adverse family and/or environmental circumstances beginning to impact on child's wellbeing

Child/young person have some emerging difficulties within their peer group and/or the behaviour within the peer group is becoming disruptive/ unhealthy.

Child/young person's behaviour is challenging in the community

Young person is spending significant periods of time in areas where there are concerns for Child Exploitation 'hot spots'

An incident of online activity which increases risks of exploitation for example being under the recommended/ legal age for applications and speaking to unknown people online

Isolated incident of sharing sexual photographs/ engaging in sexual conversations online with someone when this is not age appropriate / with someone who is not known to the child

Action

Complete EHA with family
Involve relevant agencies in the TAF
Identify lead professional

Complex needs – Tier 3

Disability or health condition requiring specialist support including mental health conditions

Inadequate care; parents unable to meet child's health/safety/developmental needs

Challenging/offending behaviour attributable to lack of parenting and/or adverse environment

Child occasionally missing from home

Substance misuse parent or child, posing a risk to health

Sexual activity posing a risk to health and safety

Pupil progress is significantly below expected levels for age range

Short term exclusions, persistent non-attendance

Repeated failure to attend health appointments

Child/young person associates with others at risk of child exploitation and there are indicators of exploitation

Child/young person has unexplained access to money/items that the parents have not provided them.

Isolated incident of sharing sexual photographs/engaging in sexual conversations online with someone when this is not age appropriate / with someone who is not known to the child

Action

Seek advice from agency safeguarding lead/consider referral to social care

Consider discussing at the Early Help surgery

Acute needs – Tier 4

Prolonged neglect of child's wellbeing and developmental needs

High level of disability and/or serious physical, mental and emotional health problems

Child's behaviour and activities place self or others at imminent risk

Sexual behaviour inappropriate to age

Child discloses abuse/ neglect; injuries not consistent with explanation

Child persistently missing from home

Child is permanently excluded from school and there is a risk of family breakdown

Serious family and environmental factors impacting on child's safety and wellbeing, e.g. domestic violence, parental mental health, parental substance misuse

Child/young person is homeless

Action

Referral to Tier 3 and 4 services
Child requires specialist or statutory involvement

Follow BSCP procedures if child at risk of, or suffering, significant harm
– Refer to CSC immediately.

Parenting factors

No additional needs – Tier 1

Consistent parenting providing appropriate advice, guidance and boundaries

Supportive and positive family relationships, including separated parents

Good quality early attachments, secure and caring parenting

Support for and promoting of learning and development through education and play

Safe and secure housing and environment

Child's physical, safety, developmental and emotional needs are met

Parenting generally demonstrates praise, emotional warmth and encouragement

Action

Child and family will access universal services and have no additional need

Additional needs – Tier 2

Poor parental relationship impacting on child

Inconsistent care/difficulties in attachment

Difficulties in managing child's physical, emotional and developmental needs

Harsh parenting/lack of boundaries and guidance

Lack of ante-natal/post-natal care

Parental needs impacting on care of child; e.g. mental/physical health needs, substance misuse

Parental isolation/bereavement

Requires advice on parenting and behaviour management

Condone absence from school/lack of support and interest in child's education

Daily stresses affecting ability to ensure child's safety

Parent presents with good understanding and ability to safeguard from vulnerabilities/low level indicators of exploitation.

Action

Complete EHA with family
Involve relevant agencies in the TAF
Identify lead professional

Complex needs – Tier 3

Substance and/or alcohol misuse/
learning disabilities or poor mental
health affecting the parent's ability to
parent safely

Criminal or anti-social behaviour
affecting parenting

Inconsistent parenting impairing the
physical, emotional or behavioural
development of the child

Children with significant special needs
whose parents are unable to meet them
without support; support offered at a
lower level has not achieved the desired
outcomes

Chaotic, intolerant, critical or rejecting
parenting

Child deliberately kept out of school

Evidence of neglect of child,
inappropriate boundaries, no access to
play

Risk or relationship breakdown between
parent/carer and child

Child undertaking inappropriate caring/
parenting tasks for siblings or parents

Action

Seek advice from agency safeguarding
lead/consider referral to social care

Consider discussing at the early help
surgery

Acute needs – Tier 4

High levels of domestic violence that put
child at risk

Young child left alone

Evidence of fabricated illness

Crisis occurring where parent/carer has a
disability, illness or mental health
problem which affects their ability to
parent

Child/young person rejected from family
home

Child beyond parental control

Suspicion of physical, emotional, sexual
abuse or neglect

Unable to protect the child from
immediate harm/inability to recognise
child is being placed at risk

Parent whose criminal or anti-social
behaviour threatens the welfare of the
child

Individual in the home who is known to
pose a risk to children

Action

Referral to Tier 3 and 4 services Child
requires specialist or statutory
involvement

Follow BSCP procedures if child at risk
of, or suffering, significant harm
– Refer to CSC immediately.

Family and environmental factors

No additional needs – Tier 1

Supportive, positive family relationships, even where parents are separated

Good quality stable housing

Good social and friendship networks

Income is consistent and sufficient to meet child's needs

Access to universal services locally or parent has access to transport

Access to consistent and positive activities

Family members are generally physically and mentally well

Action

Children and family will access universal services and have no additional need

Additional needs – Tier 2

Children affected by conflict in family relationships, including parental conflict

Low income, debt or unemployment/ affecting family income and causing stress

Overcrowded, unsafe or temporary housing/ home not conducive to child's play or activities

Bereavement

Unsafe neighbourhood

Family are the victims of harassment/ bullying or crime

Poor access to universal services

Lack of wider family support

Sibling or close family member with disability or significant health problem

Social isolation

Poor hygiene in family home

Family members residing in the home are at risk of exploitation and siblings are exposed to behaviour

Community is a 'hot spot' area for exploitation and the young person has vulnerabilities to exploitation

Action

Complete EHA with family
Involve relevant agencies in the TAF
Identify lead professional

Complex needs – Tier 3

Homeless in temporary accommodation
or at risk of eviction

Inadequate or overcrowded housing
likely to significantly impair health or
development and previous intervention
has been ineffective

Family does not have sufficient income to
meet their needs

Significant parental discord

Domestic violence

Child does not have access to adequate
clothing and nutrition

Hygiene standards in family home are a
cause for concern and have not improved
following intervention

Parent socially excluded with no access
to local services or family support

Action

Seek advice from agency safeguarding
lead/consider referral to social care

Consider discussing at the Early Help
surgery

Acute needs – Tier 4

Individual who has contact with the
family and is known to pose a risk to
children

Lack of adequate food, heating and
clothing

Homeless and destitute

High levels of domestic violence that put
the child at risk

Family home used for illegal activities
including prostitution, drug taking and
selling

Children placed at risk by intoxicated
adults visiting the home

Child and family need immediate
protection due to harassment and
discrimination

Action

Referral to Tier 3 and 4 services Child
requires specialist or statutory
involvement

Follow BSCP procedures if child at risk
of, or suffering, significant harm
– Refer to CSC immediately.

The following table lists examples of Barnsley agencies available to provide services to children, young people and families within the various tiers. Although support to families should normally be offered at the lowest level to meet identified needs, there will be situations where a high level of risk/need suddenly becomes apparent and there is a need for immediate referral to a higher tier service.

No additional needs – Tier 1	Additional needs Tier 2
<p>Universal services are available to this group of families, e.g. schools, family centres, GPs and health visitors</p> <p>Access to more specialist provision may be required for time-limited or specific issues, such as access to specialist health services for specific conditions</p>	<p>All Services at Universal Level</p> <p>Family Information Service</p> <p>Targeted Youth Support</p> <p>Family Centres' family support workers</p> <p>Schools - parent support advisors</p> <p>Educational Welfare Service</p> <p>Sibling Support and Young Carers</p> <p>Substance Misuse Services</p> <p>Specialist Health Visitors</p> <p>Inclusion Services</p> <p>School Nursing Team</p> <p>Domestic Abuse Support Services</p> <p>Special Education Needs and Disabilities Support Services</p> <p>Consultation with the Contextual Safeguarding Team</p> <p>Emotional Health and Wellbeing Support Services</p> <p>Bereavement Support Services</p> <p>Return Home Interview</p> <p>Early Intervention and Prevention Workers</p>

Complex needs – Tier 3

All services at universal and targeted level

Children's Social Care

Tenant's First

Youth Justice Service

MARAC

Integrated Inclusion Service

CAMHS

Specialist Health and Disability Services

Adult Mental Health

Adult Learning Disability

Child Sexual Exploitation, Sexual Abuse
and Sexual Violence Support Services



Acute needs – Tier 4

All services as at universal, targeted
and specialist levels

Children's Social Care

South Yorkshire Police





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