

Right Services Right Time

Meeting Children's Needs

My Agency's Responsibility



birmingham safeguarding children board

May 2013

Meeting Children's Needs

Children and families are supported most effectively and efficiently when services and information sharing are planned and delivered in a co-ordinated way. The vision across Birmingham is to deliver the right service to the right child supported by flexible and responsive services.

The Children & Young People partnership in Birmingham has set Key Priorities to ensure that the needs of children and families are met at the earliest opportunity.

These Key Priorities are:

- Prevention
- Integration
- Aspiration
- Safeguarding
- Participation
- Excellence

Jane Held
Independent Chairperson
Birmingham Safeguarding
Children's Board

Children and families may experience a range of needs at different times in their lives. These are children with additional needs and they will require targeted support from across the wider Children & Young People's workforce – statutory, voluntary and private sectors.



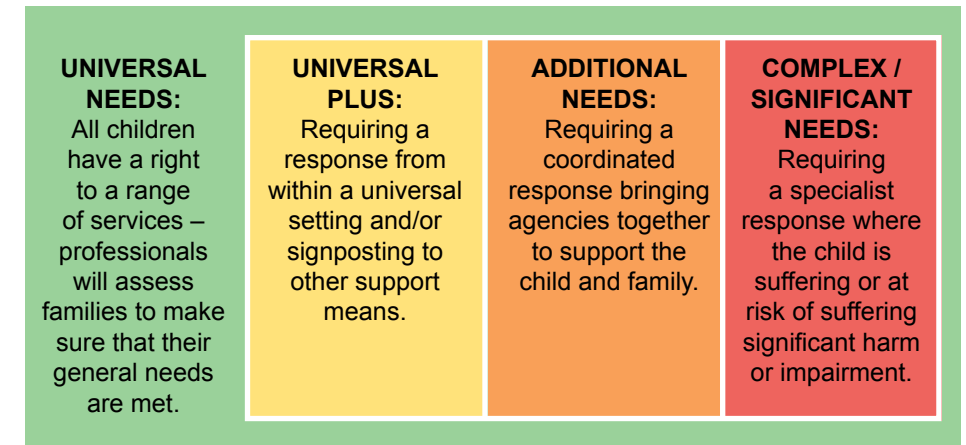
It is the intention that an 'Early Help' approach will be delivered using a common framework for assessment – offering a holistic approach that takes account of different aspects of a child and family's life in order to identify the best possible package of support.

In using this guidance it is important to note that some children and families are more resilient than others. An assessment needs to take into account any previous history, vulnerabilities, risk and protective factors and this should be considered against this children's needs model.

Some children may do well even in the most adverse circumstances while others appear to have little capacity to cope with small amounts of stress – what is important is that individual families are offered services that will respond to their needs.

This Children's Need's Model describes potential triggers of concern for children, young people and their families and should be used to inform good practice, to support 'professional conversations' between services and develop the quality and consistency of assessment. There will be circumstances that are not covered in this guide or particular issues that rely on the front line workers' and their line manager's professional judgment.

Three responses to needs have been identified for children in the city:



The use of this guide and these processes will have three main benefits:

- Identification of needs for the child, young person and family
- Service pathways aligned to need and clear access criteria across all service providers
- Ensuring the right service is delivered in a coordinated and timely fashion to achieve better outcomes for families.



Professional judgment requires workers to be aware of the difference between the level of support offered by universal and targeted agencies working together and the support offered by the specialist agencies such as the Youth Offending Service or Children's Social Care. In all cases where the safety of a child is brought in to question it must be considered carefully if the child is judged to have suffered or to be at risk of significant harm¹. This should be done by the practitioner and their line manager in the first instance.

For example a health concern that 'developmental milestones are unlikely to be met' would not in itself require a discussion with the Information Advice Support Service or a referral to the Children's Social Care 'First Response Team', rather a discussion with or between health staff; if unless the developmental delay were assessed to be attributable to inadequate parenting then this may lead to a referral to Children's Social Care.

1. www.lscbbirmingham.org.uk/child-protection-procedures/downloads/section-2.pdf

When using this guide consider:

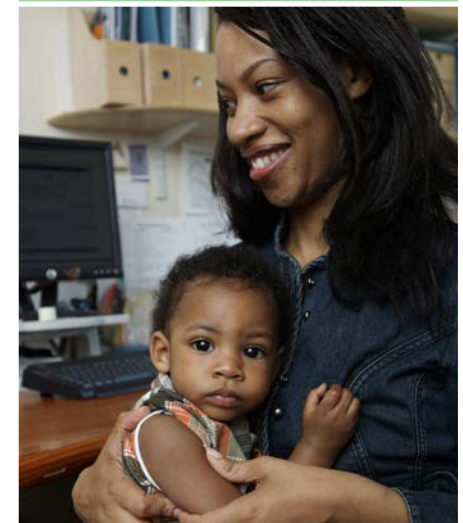
- Recognise all factors relevant to the child's needs, parenting capacity and environmental factors – see the family as a whole.
- Use it as a guide not a prescription. It should prompt you to think more clearly and interpret the situation.
- Consider any previous history, service involvements and the current risk and protective factors within the family.
- If you are unsure of how to interpret information take advice in the first instance from your line manager or your agency's safeguarding advisor.
- Discuss your analysis of the identified needs with other professionals involved with the child to achieve a more holistic approach.
- Where possible share your concerns with families as a way of expressing ideas and concerns.



Further Information:

For further information on how the 'Right Services Right time – Meeting Children's Needs' model should be applied and illustrative case studies, please refer to the virtual learning environment found online at

www.lscbbirmingham.org.uk



Requiring a response from within a universal setting and/or signposting to other support means.

Development needs of child/young person:

Health	<ul style="list-style-type: none"> • Defaulting on immunisations/development checks/health appointments • Minor concerns regarding diet/hygiene/clothing • Slow in reaching developmental milestones
Education and Learning	<ul style="list-style-type: none"> • Has some identified learning needs • Patterns of regular absences – school attendance 94-86% • Not reaching educational development potential • Low motivation/not engaged in learning
Emotional/ Behavioural development	<ul style="list-style-type: none"> • Some difficulties with peer group relationships and with some adults • Evidence of some inappropriate behaviour • Finds managing change difficult
Identity	<ul style="list-style-type: none"> • Some insecurities around identity expressed • May experience bullying around 'difference'
Family and relationships	<ul style="list-style-type: none"> • Limited support from family and friends • Some difficulty in sustaining relationships
Social Presentation	<ul style="list-style-type: none"> • Can be over friendly or withdrawn or not aware of risk • Age inappropriate clothing and appearance • Change in communication leading to a more guarded/ secretive self
Self-care skills	<ul style="list-style-type: none"> • Not always adequate self-care/hygiene • Slow to develop appropriate self-care skills

Parent and Carer Factors:

Basic Care	<ul style="list-style-type: none"> • Poor parental engagement with services • Parent requires advise on parenting issues • Physical needs not always met
Ensuring safety	<ul style="list-style-type: none"> • Some exposure to dangerous situations in home/ community • Parental stress starting to affect ability to ensure child's safety • Emotional warmth • Inconsistent responses to child by parents • Unable to develop other positive relationships
Stimulation	<ul style="list-style-type: none"> • Spends much time alone • Rarely exposed to new experiences
Guidance and boundaries	<ul style="list-style-type: none"> • Can behave in an antisocial way e.g. alcohol, smoking, minor offending behaviour • Inconsistent boundaries offered • Lack of positive role models or existence of significant others who are poor role models
Stability	<ul style="list-style-type: none"> • Key relationships with family members not always kept up • Difficulties with attachments

Family and Environment Factors:

Family history and functioning	<ul style="list-style-type: none"> • Experienced loss of significant adult • May look after younger siblings • Parent has health difficulties • Limited episodes of low risk Domestic Abuse with the potential for emotional impact on child/ren
Wider family	<ul style="list-style-type: none"> • Limited support from family/friends
Housing	<ul style="list-style-type: none"> • Poor housing • Family seeking asylum or are refugees i.e. no access to public funds
Employment	<ul style="list-style-type: none"> • Wage earner has periods of unemployment • Parents have limited formal education
Income	<ul style="list-style-type: none"> • Low income and lack of financial resources
Family's Social Integration	<ul style="list-style-type: none"> • Family new to area • Some social exclusion problems
Community resource	<ul style="list-style-type: none"> • Limited access to universal resource

Requiring a coordinated targeted response bringing agencies together to support the child and family.

Development needs of child/young person:

Health	<ul style="list-style-type: none"> • Health concerns not accepted or addressed – treatment not being sought/adhered to • Multiple health problems/disability • Consistently missing required health appointments • Over weight/under weight • Continence issues • Substance misuse inc drugs/alcohol • Developmental milestones not met
Education and Learning	<ul style="list-style-type: none"> • Learning needs continuing to impact negatively • Not achieving Key Stage benchmarks • School attendance below 85% • ≥3 fixed term exclusions or >15 days excluded in any year • Permanently excluded from school
Emotional/ Behavioural development	<ul style="list-style-type: none"> • Difficulty in coping with anger/frustration and upset • Disruptive/challenging behaviour • Emerging, concerning mental health issues e.g. low mood, self harm, emerging eating disorders etc • Cannot manage change • Unable to demonstrate empathy
Identity	<ul style="list-style-type: none"> • Subject to persistent discrimination • Very poor self-esteem • Exhibiting extremist language/behaviour/aligned to a gang
Family and relationships	<ul style="list-style-type: none"> • Lacks positive role models • Involved in conflict with and between peers/siblings • Regularly cares for family member, parent, partner
Social Presentation	<ul style="list-style-type: none"> • Provocative behaviour/appearance • Hygiene problems • Missing from home or change in behaviour/routine suggesting development of inappropriate relationship
Self-care skills	<ul style="list-style-type: none"> • Poor self-care for age • Precociously able/required to care for self

Parent and Carer Factors:

Basic Care	<ul style="list-style-type: none"> • Difficult to engage parents/carer – reject advice/support • Parent continually struggling to provide care • Parent previously looked after by the Local Authority • Professionals concerned basic care will not be provided
Ensuring safety	<ul style="list-style-type: none"> • Parents perceive safety to be a real problem • Neglect identified • Unsafe situations e.g. DV, criminal activity, drugs, alcohol
Emotional warmth	<ul style="list-style-type: none"> • Receives erratic/inconsistent poor quality care • Parental capacity affects ability to nurture • Absence of positive relationships
Stimulation	<ul style="list-style-type: none"> • Not receiving positive stimulation – lack of new activities
Guidance and boundaries	<ul style="list-style-type: none"> • Erratic/inadequate guidance • Parent is a poor role model
Stability	<ul style="list-style-type: none"> • Has multiple carers • Parent in prison • Frequent/unplanned moves causing disruption/instability

Family and Environment Factors:

Family history and functioning	<ul style="list-style-type: none"> • Persistent/significant incidents of Domestic Abuse with impact on victim and children • Acrimonious divorce/separation • Family has serious physical/mental health difficulties • Drug use or alcohol dependency by parent/carer • Bereavement or loss of family member
Wider family	<ul style="list-style-type: none"> • Poor relationship/little communication with family • Family is socially isolated • Housing / poor state of repairs • Statutory overcrowding • Vulnerable accommodation e.g. friend's house, not secure • High mobility e.g. refugee asylum seeking status
Employment	<ul style="list-style-type: none"> • Lack of basic skills hinder parents employability • Stressed due to unemployment or 'over working'
Income	<ul style="list-style-type: none"> • Debt/poverty impacts on ability to meet basic needs
Family's Social Integration	<ul style="list-style-type: none"> • Parents socially excluded • Lack of a support network
Community resource	<ul style="list-style-type: none"> • Access problems to poor quality universal/targeted resources

Requiring a specialist response, these needs may emerge after a series of, or despite of targeted interventions or be sudden and/or so serious as to require an immediate request for services. There will be concern that the child is/at risk of suffering significant harm or impairment.

Development needs of child/young person:

Health	<ul style="list-style-type: none"> Severe/chronic health problems, developmental delay or disability where treatment not being sought or adhered to Persistent substance misuse Pregnancy of a child under 13 Repeat dental extraction under general anaesthetic (or multiple dental extractions)
Education and Learning	<ul style="list-style-type: none"> No School Place/Awaiting Allocation/Persistent School refusal
Emotional/ Behavioural development	<ul style="list-style-type: none"> Moderate to severe mental health problems Significant impact of traumatic event Deterioration of mental health leading to risk to self and/or others
Identity	<ul style="list-style-type: none"> Experiences of persistent discrimination e.g. re ethnicity, sexual orientation or disability Chronically socially isolated Participates in gang activity Participates in extremist actions in language and behaviour
Family and relationships	<ul style="list-style-type: none"> Periods accommodated by Local Authority Family breakdown leaves child at risk Child is main carer for family member Subject to physical, emotional or sexual abuse or neglect
Social Presentation	<ul style="list-style-type: none"> Persistent poor and inappropriate self presentation Inappropriate relationship with an adult (not family member), frequently missing from home environment
Self-care skills	<ul style="list-style-type: none"> Neglects to use self-care skills due to development delay, learning difficulties or alternative priorities e.g. substance misuse

Parent and Carer Factors:

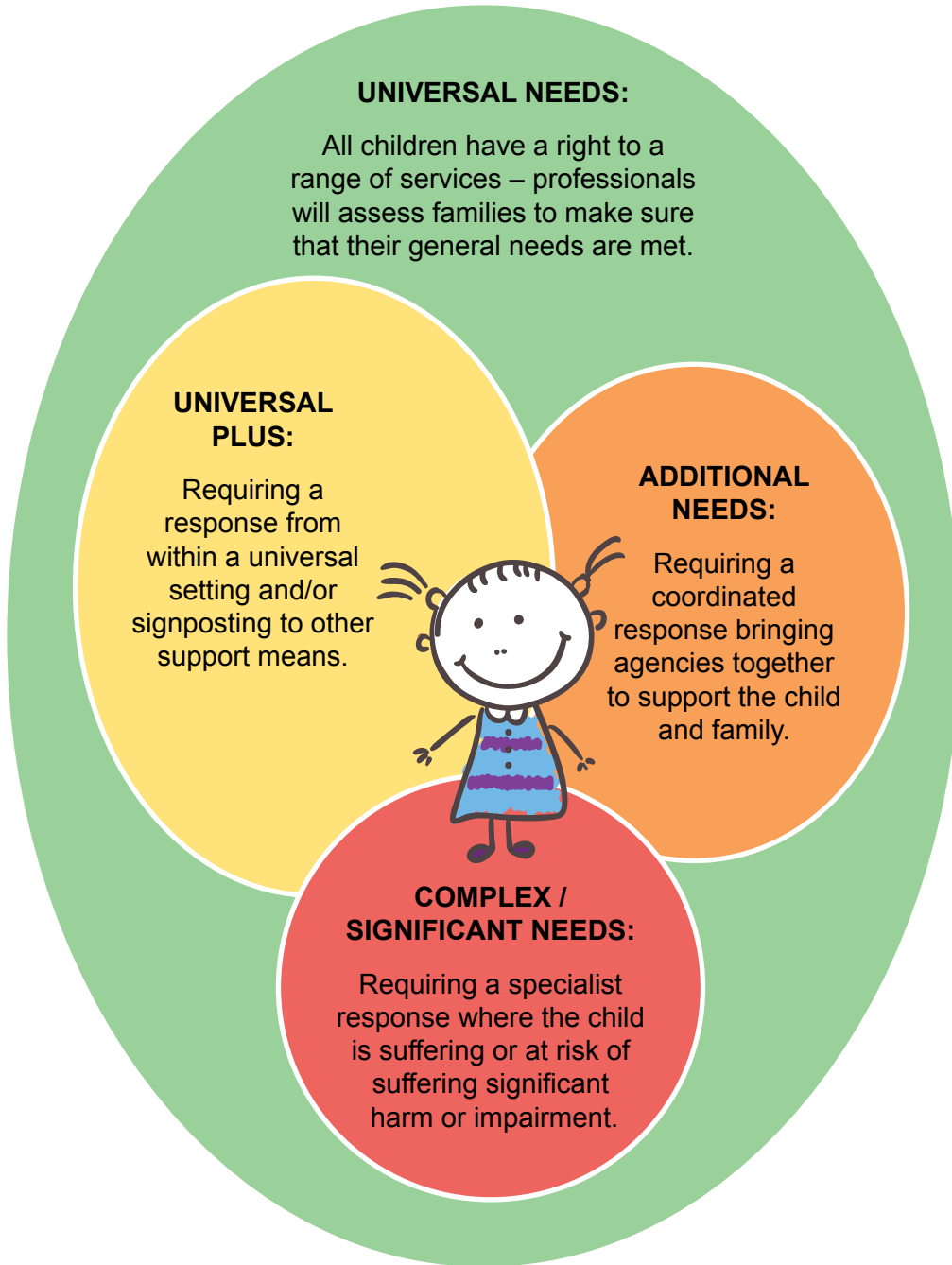
Basic Care	<ul style="list-style-type: none"> Parents consistently unable to provide 'positive enough' parenting that is adequate and safe Parent's mental health problems or substance misuse significantly affects care of child Parents unable to care for previous children Domestic violence in pregnancy
Ensuring safety	<ul style="list-style-type: none"> Persistent instability and violence in the home Parent and/or child have significant involvement in crime Parents unable to keep child safe and secure Child's behaviour poses unmanageable risk
Emotional warmth	<ul style="list-style-type: none"> Parents inconsistent, critical or apathetic attitude to child may result in significant harm
Stimulation	<ul style="list-style-type: none"> Grossly under stimulated
Guidance and boundaries	<ul style="list-style-type: none"> No effective boundaries set or adhered to Perpetrator or victim of significant anti-social behaviour
Stability	<ul style="list-style-type: none"> Beyond parental control Nobody providing appropriate care

Family and Environment Factors:

Family history and functioning	<ul style="list-style-type: none"> Significant parental discord/persistent domestic violence Poor/harmful sibling relationships Young person persistently running away or absconding Threat of forced marriage
Wider family	<ul style="list-style-type: none"> No effective support Destructive/unhelpful involvement Negative influence from family involved in drugs/crime
Housing	<ul style="list-style-type: none"> Physical accommodation places child at risk of harm Emergency housing needs as a consequence of fleeing domestic violence/gang reprisal
Employment	<ul style="list-style-type: none"> Unable to gain employment due to long-term issues e.g. chronic health, substance misuse which impairs capacity
Income	<ul style="list-style-type: none"> Extreme poverty/debt impacting on ability to care for child
Family's Social Integration	<ul style="list-style-type: none"> Family chronically socially excluded No supportive network Community Resources Poor quality services with long-term difficulties accessing target populations

CONCERNS AND NEEDS	INDICATOR	RESPONSES
<ul style="list-style-type: none"> Children and young people’s needs are being met 	<p>UNIVERSAL NEEDS</p>	<ul style="list-style-type: none"> Services accessible to all children and families in Birmingham
<ul style="list-style-type: none"> Defaulting on immunisations/ development checks/health appointments Patterns of regular absences – school attendance 94-86% Can behave in an antisocial way e.g. alcohol, smoking, minor offending behaviour Sexual Exploitation Some difficulties with peer group relationships and with some adults Finds managing change difficult Limited episodes of low risk Domestic Abuse with the potential for emotional impact on child/ren Inconsistent responses to child by parents 	<p>UNIVERSAL PLUS: Requiring a response from within a universal setting and/ or signposting to other support means</p>	<ul style="list-style-type: none"> Seek advice from the designated manager in your agency Selective use of the Family Common Assessment Framework (fCAF) or a service specific assessment to determine the family’s needs leading to a single agency action plan Agencies are responsible for determining the range of services that can be provided.
<ul style="list-style-type: none"> Health concerns not accepted or addressed – treatment not being sought/adhered to School attendance below 85% 3 or more fixed term exclusions or more than 15 days excluded in any academic year Exhibiting extremist language/ behaviour/aligned to a street gang Sexual Exploitation Concerns around deteriorating mental health – including mild to moderate anxieties and/or low mood/self harm Persistent/significant incidents of Domestic Abuse with impact on victim and children Acrimonious divorce/separation Receives erratic/inconsistent poor quality care Parental capacity affects ability to nurture 	<p>ADDITIONAL NEEDS: Requiring a coordinated response bringing agencies together to support the child and family</p>	<ul style="list-style-type: none"> Where more than one agency is involved in providing support to the family use the Family CAF (fCAF) to record the assessment Arrange a multi-agency Integrated Support plan Appoint a Lead Professional Where situations escalate and become more complicated consider a discussion with the appropriate specialist service such as Child & Adolescent Mental Health services, Youth Offending Service or Information Advice Support Service.
<ul style="list-style-type: none"> Severe / chronic health problems, developmental delay or disability where treatment not being sought or adhered to No School Place/Awaiting Allocation/Persistent School refusal Negative influence from family members involved in drugs/ crime/ Sexual Exploitation Deterioration of mental health leading to risk to self and/or others including threat of or attempted suicide Significant parental discord and persistent domestic violence Parents inconsistent, critical or apathetic attitude to child may result in significant harm Subject to physical, emotional or sexual abuse or neglect 	<p>COMPLEX / SIGNIFICANT NEEDS: Requiring a specialist response, these needs may emerge after a series of, or despite of targeted interventions or be sudden and/ or so serious as to require an immediate request for services. There will be concern that the child is suffering or at risk of suffering significant harm or impairment.</p>	<ul style="list-style-type: none"> If a child is at risk of physical, emotional or sexual abuse: for advice, support or referral to Children’s Social Care contact the Information Advice Support Service. Tel: 0121 303 9515 Email: iasscitywide@birmingham.gov.uk Where an immediate response is required because the child’s physical health is at risk of immediate harm contact Health by dialing 999 for an ambulance Where a child’s safety is at immediate risk contact the Police by dialling 999 For serious concerns around mental health contact the CAMHS Single Point of Access team Tel: 0121 333 9193 (open 9am-5pm, Monday-Friday)

Right Services Right Time – Meeting Children’s Needs



Implications for your organisation:

Contact numbers for partner agencies:



Contact details for your organisation:

www.lscbbirmingham.org.uk

Designed by Central Midlands CSU, May 2013

