

Cumbria's Local Protocol for Assessment

**A child's journey through
assessment and planning**

1. Introduction

In 2013 over 14,000 children in Cumbria were referred to our children's social care services by individuals who had concerns about their welfare. For children who need additional help, every day matters. The actions taken by professionals to meet the needs of these children as early as possible can be critical to their future. Children are best protected when professionals are clear about what is required of them individually, and how they need to work together. Professionals help best when all local agencies have carried out a thorough assessment and drawn up a plan for support. Ultimately, effective safeguarding of children can only be achieved by putting children at the centre of the system, and by every individual and agency playing their full part, working together to meet the needs of our most vulnerable children.

This protocol aims to secure the cooperative working that is essential for the effective assessment of needs and the identification of the services to be provided.

It sets out how we, Cumbria County Council and partner agencies along with parents/carers and young people, will assess, plan and manage cases when there are concerns about a child and where the threshold for a children's social care assessment (under the Children Act 1989) is met.

It also aims to explain the journey that children will take through the assessment process, providing support to them and their families on the way.

2. The Local Protocol for Assessment

What is a Local Protocol?

- 2.1 The Local Protocol is a 'handbook' that describes what the Local Authority (LA) will do when a child¹ is referred to the LA for support (in Cumbria this is CCC). It is a map that guides the child's journey through assessment and planning.
- 2.2 The main purpose of the Local Protocol for Assessment is to set out the arrangements for how cases will be managed once a referral has been received by Cumbria County Council's Children's Services.
- 2.3 The Local Protocol will also explain what help a child receives before the thresholds are met for statutory assessment, such as when children and families require Early Help.

¹ In this document a child is defined as anyone who has not reached their 18th birthday, including unborn children. 'Children' therefore means 'children and young people' throughout. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change his/her status or entitlements to services or protection. (Definition provided by Working Together 2015)

What is an assessment?

- 2.4 An assessment is a process of collecting information that allows somebody to understand what is happening to a child so the child can be helped. It is the story of the child's life, who they are, who they know and what is happening to them. Whilst it is the parents' responsibility to bring up their children, they may need assistance from time to time to do so². The assessment will normally be completed in partnership with parents and will involve a range of professionals who will contribute in order to keep the child safe and help them if they have needs, such as a disability.

Why have a Local Protocol for Assessment?

2.5 In 2015, the Department of Education published "Working Together to Safeguard Children 2015. A guide to inter-agency working to safeguard and promote the welfare of children". Working Together (WT)³, as the document is commonly called, explains what the LA and other organisations should do to safeguard and promote the welfare of children (Appendix 1). The government has asked all LA's with their partners to write and publish 'Local Protocol for Assessment'.

2.6 The Local Protocol allows children, young people, their families and everyone who works with them to understand exactly what process they can expect whilst children are being helped by the Cumbria County Council.

²Part III Children Act 1989

³Working Together to Safeguard Children – Guidance. DfE, 2015. www.education.gov.uk

Who is the Local Protocol for Assessment for?

- 2.7 The Local Protocol for Assessment is required reading for professionals or volunteers working in any of the agencies involved in the assessment process. It is also aimed at helping children and families understand the assessment process. The Local Protocol for Assessment is a requirement made of LA's in WT and will be considered by regulators and inspectors.

Who was asked to write the Local Protocol for Assessment?

- 2.8 The Local Protocol for Assessment has been developed by Cumbria County Council (CCC) with help from partner agencies, including Health, Schools, Youth Offending Service, Police, Voluntary Organisations and in consultation with a group of interested parent(s). It has been approved by Cumbria Local Safeguarding Children Board (LSCB) and will be reviewed through the LSCB Policy and Procedures sub group.

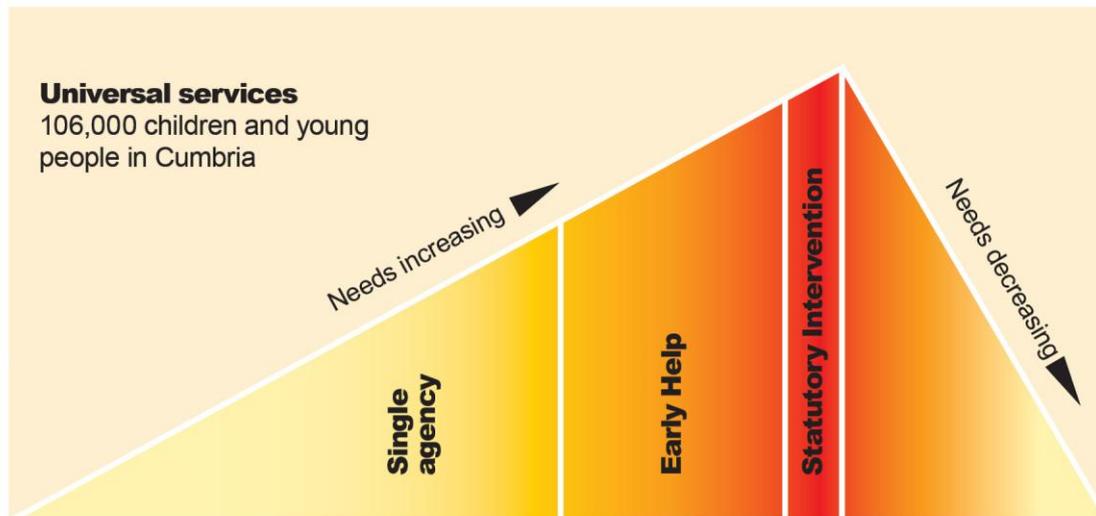
3. Context

What is a Local Protocol?

- 3.1 When being assessed every child has a different story. That story might show they have individual and differing needs and so they may need different support to help them. The Multi-agency Thresholds Guidance⁴ describes the four levels of need and support for children, young people and their families and the type of support they can expect. The guidance is fundamentally about working better together and intervening earlier with children and young people to provide services at the earliest opportunity to meet their identified needs.
- 3.2 This Local Protocol describes the statutory intervention (help) for children and young people who, when assessed, come under the 'Targeted Support' level within Cumbria's 'Wedge' Thresholds Model:-

⁴ Multi-agency Thresholds Guidance, Cumbria LSCB Procedures <http://www.cumbrialscb.com/>

The Wedge



Level of need	Level of support to meet need
Universal services	Universal services are available to all children and young people. The most easily identifiable universal services that children and families will access are primary health and education.
Single agency	This is the first level of intervention after universal services. It is a single setting/single agency response based on a dialogue with the child/family. The needs of a child or young person can be met by additional support from one agency.
Early help	A professional seeking advice and input from other agencies in order to meet a child's unmet needs. Discussion would first take place with the child/family to identify needs and agree outcomes and actions. Early Help Assessment (EHA) and plan of work would be initiated at this stage. Intervention is aimed at preventing escalation to statutory intervention. Evidence of an Early Help Assessment and intervention will help support a referral for statutory intervention if required at a later date.
Statutory Intervention	The highest level of multi-agency intervention. Statutory intervention takes place in response to complex needs, involving multi-agency specialists where the consequences of non-intervention could lead to serious harm. These children may be at risk of becoming looked after or subject to a Child Protection plan. This level also includes children with severe disabilities or complex learning difficulties. Contact with the County Safeguarding Hub is appropriate.

- 3.3 Research has given a consistent message that in cases involving harm to children, it is important to identify problems early and take rapid action to address these problems before they get worse. We also know that no single professional can have a full picture of a child's needs and circumstances.
- 3.4 If children and their families are to receive the right help, everyone who comes in to contact with them - midwives, police, health visitors, GPs, early years' professionals, teachers, youth workers, voluntary and social workers⁵ must play a role by identifying concerns, sharing information and taking prompt action.
- 3.5 Assessment and understanding families and the experiences of children within them can be complex and signs of abuse and neglect may be misleading. Professionals working in the universal services – education, health, police and early years' professionals- have a responsibility to identify the early signs of abuse and neglect, to share information and work together to provide children with the help they need.
- 3.6 Information may be included in an assessment which may have been carried out prior to a referral into children's social care, such as an Early Help Assessment, ASSET (Young Persons Assessment Profile), SEND Early Help Assessment (Special Educational Needs and Disability), Portage (disability assessment) or Young Carers assessment⁶. An assessment should be a continuous process, which has the needs of the child at the centre.
- 3.7 This protocol sets out how we will assess, plan and manage cases when there are concerns about the child and where the threshold for a children's social care assessment is met, as laid out in the Multi-agency Thresholds Guidance, called a statutory assessment under the Children Act 1989.

⁵This is not an exhaustive list and all professionals who work with children have a responsibility to be aware of their role in safeguarding.

⁶This is not an exhaustive list of assessments.

4. What is a Statutory Assessment under the Children Act 1989?

- 4.1 A statutory assessment is an assessment required by law under the Children Act 1989. Local Authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. Local Authorities undertake assessments of the needs of individual children to determine what services to provide and action to take. The full set of statutory assessments can be found in Working Together 2015 on page 17.
- 4.2 A children's social care assessment is a multi- agency assessment carried out under Section 17 of the Children Act 1989. This requires working together with children, young people and families and it will require their consent to progress. A Cumbria County Council social worker is responsible for leading the assessment and has a duty to ascertain the child's wishes and feelings and take account of them when planning the provision of service.
- 4.3 If information gathered during an assessment (which may be brief) results in the social worker suspecting that the child is suffering or is likely to suffer significant harm, then Cumbria County Council, under Section 47 of the Children Act 1989 is required to make enquiries to decide what action must be taken, with partners, to safeguard and promote the welfare of the child. There may be a need for immediate protection whilst the assessment is carried out.
- 4.4 Following an application under Section 31A of the Children Act 1989, where a child is subject of a care order, Cumbria County Council must assess the child's needs and draw up a care plan which sets out the services which will be provided to meet the child's identified needs.
- 4.5 Where a child is accommodated under Section 20 of the Children Act 1989, Cumbria County Council has a statutory responsibility to assess the child's needs and draw up a care plan which sets out the services to be provided to meet the child's needs.
- 4.6 Where a child becomes looked after, the assessment will be the baseline for work with the family while the child is away. Any needs which have been identified must be addressed before decisions are made about the child's return home.
- 4.7 An assessment by a social worker is required before the child returns home under the Care Planning, Placement and Case Review England Regulations 2010. This will provide evidence of

whether the necessary changes and improvements have been made to ensure the child's safety when they return home.

5. Multi Agency Statutory Assessment in Cumbria

5.1 A children's social care (statutory) multi-agency assessment in Cumbria is called 'A Child and Family Assessment'. A Child and Family Assessment has replaced what was previously known as an Initial Assessment and Core Assessment.

5.2 There are four key factors in an effective statutory assessment:

- Timeliness;
- Focus on need;
- Views of the child;
- Outcomes

Cumbria County Council uses these to measure the effectiveness of the Child and Family Assessment.

5.3 The timeliness of an assessment is a critical element of the quality of that assessment and the outcomes for the child. The timescale in which an assessment is completed will be determined by the needs of the individual child, the nature and level of risk of harm experienced by the child and the degree that parents and family are engaging with the process.

5.4 A judgement will be made by the social worker, in discussion with their manager on each individual case and an assessment will not exceed 45 days, as required by WT. There will be a number of check points, which will be in place to ensure the assessment is undertaken in a timely way and any immediate intervention that may be required is in place as soon as possible.

How it will work; implications for partners and parents

5.5 Within 24 hours, Cumbria Safeguarding Hub will make a decision as to whether a contact requires a statutory response and becomes a referral to Children's Services (Section 17 or Section 47). A social worker will make a decision about the type of statutory response that is required.

5.6 In urgent and very serious cases (mostly Section 47) the decision will be made immediately and will be prioritised without delay with a visit by a social worker within the same 24 hours of referral decision to assess the child's welfare.

5.7 For less urgent cases (Section 17) the child must be seen by a social worker within 10 working days of the referral decision.

5.8 For children who require immediate protection, action must be taken by the social worker, or the police or NSPCC if removal is required, as soon after the referral decision has been made (Section 44 and 46 of the Children Act 1989).

5.9 The team manager in discussion with the social worker will set the timescale at the outset of the assessment process for its completion. The maximum timeframe for the assessment to conclude, such that it is possible to reach a decision on next steps, should be no longer than 45 working days from the point of referral decision.

5.10 It is the responsibility of the social worker to make clear to the child and their family how the assessment will be carried out and shared with the child/family and relevant partners within the agreed completion date.

5.11 The social worker will evaluate the type and seriousness of risks of harm to the child; in doing so all current 'risk assessments' provided by partner agencies will be considered. The evidence base of any risk assessments should be made available to the assessing social worker by the relevant agency so this can be discussed with the family, as is appropriate in each case.

5.12 Whatever the timescale for assessment and where particular needs are identified at any stage of the assessment, the social worker will not wait until the assessment is completed before commissioning services

to support the child and their family. In some cases the needs of the child will mean that a quick assessment will be required.

- 5.13 Providing services or initiating care proceedings should not be delayed until the assessment is completed, as this can have a detrimental impact on the child's development. It is important for the child that they are able to reach their full developmental needs at the right time throughout their life.
- 5.14 For cases where child protection concerns arise, the assessment will be completed in accordance with Section 47 of the Children Act 1989. The assessment must be completed within 13 days of the last strategy discussion to enable the assessment report to be available to an Initial Child Protection Conference (ICPC). The ICPC must be held within 15 working days of the last strategy discussion.
- 5.15 The social worker will go through the assessment/ report with the child and family 2 days prior to the Initial Child Protection Conference.
- 5.16 For cases where there are no child protection concerns but where the child is believed to be a Child in Need, the assessment will be completed under Section 17 of the Children Act 1989. At the start of the assessment, the social worker will see the child, discuss with the team manager and agree with the family the length of time it will take for the assessment to be completed. Assessments will be completed within 13 days, 25 days, 35 days or 45 days depending on the nature of the need. The reason for the decision to complete the assessment in the agreed timescale will be recorded.
- 5.17 The team manager and social worker will discuss the progress of the assessment prior to the anticipated completion date. If there are valid reasons for the assessment not being completed within the agreed timeframe, this will be recorded and a revised timeframe will be set if appropriate. The reason for delay must be valid and approved by the team manager. The parents, child and other agencies involved in the assessment must be informed with a reason for the change in timeframe given.
- 5.18 Where child protection concerns become evident in the course of a S.17 assessment then the team manager will convene a multi-agency strategy discussion in accordance with the LSCB Child Protection Procedures (see Core Procedures). This is the only occasion, prior to assessment completion, when it is routine to share progress of an assessment with other professionals.

6. What makes a good assessment?

6.1 In Cumbria, the agreed method will follow the National Framework for Assessment⁷ and will be used in all statutory assessment processes, and will focus on the 4 critical elements:-

- Timeliness;
- Focus on need;
- Views of the child;
- Outcomes

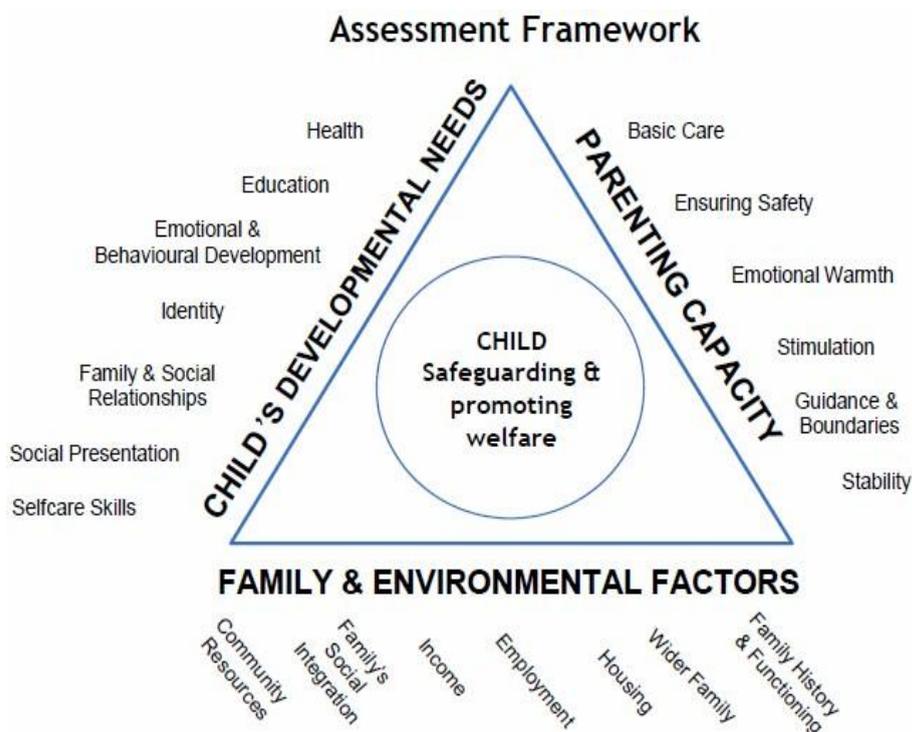
6.2 The National Assessment Framework investigates three ‘domains’ (headings for carrying out the assessment) - parenting capacity, child’s developmental needs and family and environmental factors. The findings are balanced with a judgement of the likelihood of harm and the severity of any harm on the child over a specific period of time.

⁷ National Framework for Assessment of Children in Need and their Families, DoH 2000.

<http://webarchive.nationalarchives.gov.uk/20130401151715/https://www.education.gov.uk/publications/eOrderinDownload/Framework%20for%20the%20assessment%20of%20children%20in%20need%20and%20their%20families.pdf>

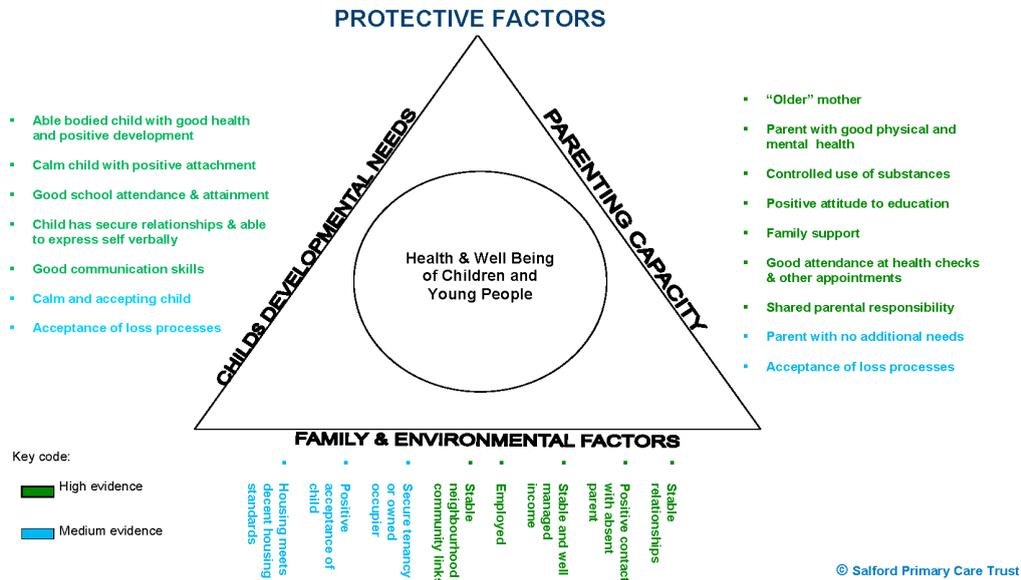
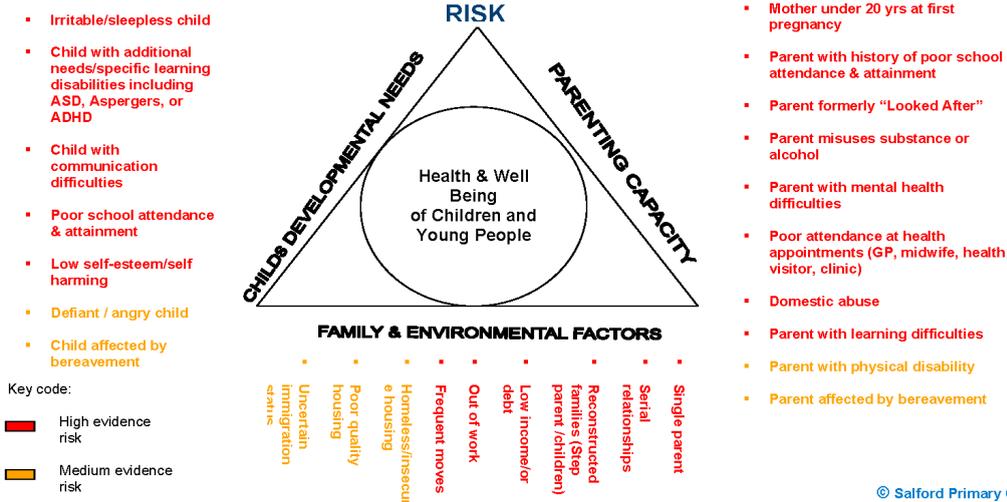
The diagrams below set out the domains of the National Assessment Framework.

National Framework for Assessment



6.3 It is important that practitioners analyse the information collected during the assessment to identify the factors that may place a child at risk of significant harm. Undertaking this analysis to determine risk is complex. Not all decisions taken in the context of risk can be guaranteed to prevent a hazard from occurring. However, planned and informed risk assessment and risk management based on research will better predict outcomes than unevaluated information collection.

6.4 The following diagrams of risk and protective factors are based on long-standing research evidence. It is important to have knowledge of the potential risk factors in the family and also to remember that these are only predictive indicators.



- 6.5 The interaction of these domains requires careful investigation during the assessment. The aim is to reach a judgement about the nature and level of needs and /or risk that the child may face within the family.

- 6.6 Assessments for some children – including those with complex needs - will involve a number of different agencies and so will require a greater co- ordination and planning with the child, their family and all professionals involved. The assessment should build on any other work already carried out by the professionals involved, such as Special Educational Needs and Disabilities, any Health, Youth Offender Services assessment.

6.7 Where a child has other assessments it is important that these are, referenced coordinated and inform the statutory assessment. A child must not become lost between the different agencies involved and their different procedures. A statutory assessment can trigger other assessments. See Section 7.

Timelines

6.8 Decision points and review points involving the child, family and relevant professionals should be used to keep the assessment on track. This is to ensure that help is given in a timely and appropriate way and that the impact of this help is analysed and evaluated in terms of the improved outcomes and welfare of the child.

- 6.9 Attention will be paid to 'drift and delay' and all parties contributing to the assessment will be responsible for timely completion. If drift or delay is having an impact on the outcomes for the child, there is accountability for all agencies to the LSCB.
- 6.10 Where there is a delay, or any other issue of concern, the LSCB Conflict Resolution process or individual agency complaint processes are available for professionals, parents and children.
- 6.11 All agencies contributing to the statutory assessment process will have a responsibility to ensure that their staff will work within the Protocol and the LSCB will provide the necessary training for staff.

<http://www.cumbrialscb.com/training/default.asp>

- 6.12 Partners and the LSCB will ensure that parents/carers and children will have access to appropriate information and materials (to include a user guide to assessment) to support them in understanding the assessment process.

Focus on need

- 6.13 It is a social worker's responsibility to analyse the information collected during the assessment process, to identify the factors that may place a child at risk of significant harm, and to ensure that the actions that have been identified are undertaken by both professionals and others who may be responsible. The assessment and analysis of risk is complex. Circumstances may change and this necessitates ongoing review of how to manage the potential risks and improve the life experiences of a child.
- 6.14 Where there is also an allegation of a crime, the police have a duty to carry out a criminal investigation.
- 6.15 Where the outcome of the assessment is for ongoing involvement with Cumbria County Council Children's Services Social Care, the social worker and their manager must agree a plan of action with the other professionals and discuss this with the child and their family. The plan should set out what services are to be delivered and what actions are to be undertaken, by whom, by when and for what purpose.
- 6.16 Where the case is to be 'stepped down' back into local agencies support of Child in Need or Early Help, the statutory assessment and plan will form the basis for this intervention.
- 6.17 Where no further involvement from any agency is required the reason for this must be clearly recorded and explained to the child and family.
- 6.18 The Referrer will be notified of the outcome of any assessment with the family's knowledge and consent.

Views of the child

- 6.19 All assessments will be informed by the child's views as well as those of family members. The child will be seen alone and the social worker is responsible for ensuring that the child's views and wishes are sought, heard and recorded and that they contribute to the assessment and planning meetings.
- 6.20 When a child is seen alone, the social worker is responsible for ensuring that the child's views and wishes are sought. The social worker must ensure that the environment the child is heard is safe and if relevant, away from potential abusers.

Outcomes

- 6.21 Interplay between an early assessment and statutory assessment should be seen as a continuum of the assessment and planning process for the child and their family. In situations where the assessment and plan have been initiated at the Early Help stage, it may be necessary to 'step up' the assessment into a statutory assessment and plan. (This is at a higher level of the 'Wedge' – see above) Conversely an assessment and plan established within the statutory assessment process may no longer be appropriate at that level and should be 'stepped down' to the lower end of the 'Wedge'. Further information about the 'stepping up' and 'stepping down' process can be found in the Multi-agency Thresholds Guidance.

6.22 The Early Help Assessment should be incorporated into the statutory assessment and should be the starting point with the family and the most appropriate lead agency when beginning a statutory assessment. The child's plans should flow from one level of support to the next.

6.23 An assessment must lead to a clearly evidenced view about what needs to happen next in order to help the child, by promoting their welfare within the context of their circumstances and environment. Plans emerge from an understanding of the child's needs and must be firmly rooted in addressing the identified needs, in a timescale that is appropriate for the child. In some cases plans will need to achieve improvements in the child's circumstances very quickly in order to reduce on-going adversity and in some cases the needs of the child will require urgent action to protect the child from unacceptable risk and severe adversity that is damaging them.

6.24 Any plan following an assessment should be clear about the following:

- What type of multi-agency plan it is e.g. 'Early Help' plan, Child in Need statutory assessment plan, Child Protection Plan, Care Plan or Leaving Care Plan;
- What are the needs that should be addressed and the likely impact on the child if their circumstances are not addressed;
- What the intended outcomes for the child are;
- What services and work will be provided in order to achieve the identified outcomes;
- Who is responsible for each aspect of the service/work to be provided;
- The period of time-linked to the identified needs of the child and timescale to reach the desired outcome;
- The expectations and responsibilities placed on family members.

6.25 The plan will be subject to regular reviews to ensure that it is achieving what is required in the timescale agreed as appropriate for the child. Child protection reviews are 3 monthly with monthly core groups. Children looked after reviews and children with disability reviews are 6 monthly. Child in need reviews occur 6 weekly. Drift is something that professionals should be wary of, particularly as other family events are likely to distract from and/or complicate the focus of the work.

7. Other Specialist Assessments

The Child and Family Assessment is informed by other specialist assessments, it may trigger another agency assessment or contribute to them:

7.1 When a Child and Family Assessment is triggered, the social worker will ensure that any other current or ongoing assessments by other agencies are identified and requested from partners. This means that all relevant information, assessments and plans, made by professionals with the child and family informs the Child and Family Assessment. Professionals who have contributed to the Child and Family Assessment will be recorded on the assessment form and their analysis of the main strengths and concerns of the current circumstances for the child and family will be explicitly taken into account throughout.

Court related assessments

7.2 If a Court has concern for the welfare of a child during the course of proceedings in a private law application then they can ask a social worker to conduct a Section 37 assessment. The information gathered during this assessment will assist in the decision making and care planning for the child.

7.3 Where a child is currently in receipt of or has received a service from Cumbria County Council Children's Services in the month, the court may ask Cumbria County Council for a Section 7 Assessment when they are considering any private law application under the Children Act 1989. Otherwise social workers from Child and Family Court Advisory Support Service (CAFCASS) may produce such reports for the court.

- 7.4 A Private Fostering Assessment must be completed when a child under the age of 16 years (18 years if the child has a disability) has been cared for by someone who is not a close relative for longer than 28 days. The statutory assessment is to ascertain the carer's suitability to care for the child/young person and must also consider the child's needs to ensure the carers are able to provide suitable day to day care of the child/young person.
- 7.5 Assessment of prospective adopters including step parent adopters are different from a statutory assessment of a child's needs, but the child's need must be considered when completing these assessments to ensure the adopters are able to care for the child and meet their needs.
- 7.6 Special Guardianship Order /Residence Order assessments of friends or family capacity to become Special Guardians or exercise parental responsibility via a Residence Order for a child. This is different from a statutory assessment of a child's needs, but the child's need must be considered during any relevant private law or public law proceedings to ensure the carers are able to care for the child and meet their needs.

Health related assessments

- 7.7 Health assessments provide valuable input and insight into the wider assessment process and should be considered for all children where a Section 47 assessment is being considered. Health assessments should be performed in a timely manner by health professionals who have the experience and capacity to undertake a comprehensive medical and developmental history and perform an appropriate physical examination. In the majority of cases this will be a Consultant Paediatrician. Sexual abuse requires a different level of experience and competence which the majority of paediatricians will not have.
- 7.8 All cases where physical abuse or neglect are considered should be discussed with the local on call Consultant Paediatrician and a timely appointment arranged for assessment. This may in some cases be a planned appointment within 24-48 hours. Urgent cases, where there are concerns about medical wellbeing, should be seen as soon as possible.
- 7.9 All cases where sexual abuse (historical or recent) is considered should be discussed with police and referred for assessment to the Sexual Assault and Forensic Examination (SAFE) Centre at Preston. Historic cases will usually receive a timed appointment within a week of referral, acute cases (recent, ie. The assault occurred within 7 days of the disclosure) should be discussed with the on call forensic physician at the SAFE centre to consider the urgency of the assessment in order that forensic samples can be obtained.
- 7.10 Any limitations of a parent or older adolescent (16 plus) to consent and contribute to a statutory assessment under the Children Act 1989 may be assessed under Mental Capacity Act or Mental Health Act by health or adult professionals.

Additional needs assessments

- 7.11 A disabled child in a family will receive a Child and Family Assessment as any other child. Any service eligibility assessment, carer assessment or special educational need assessment will be taken into consideration by the assessing social worker before concluding the analysis and agreeing with the family any future multi-agency plan.
- 7.12 Any Special Educational Needs and Disability (SEND) assessment will take into account any statutory assessment that has occurred within 3 months. Where a child is known and open to a social worker or child and family worker, then the statementing officer leading the assessment will initiate contact and receive an update of the child's progress and family circumstances as identified in the last review of any plan so that assessments of educational, social and health needs are coordinated.
- 7.13 If a young person approaching their 18th birthday has a disability which means they may receive a service when they become an adult, the assessing and reviewing social worker will use the Transition Protocol⁹ to guide further assessment of needs for services into adulthood.

⁸Transition Protocol (this is currently draft and under review – exp. April 2015)

Youth justice assessments

- 7.14 Where the Youth Offending Service is involved, the case manager will be expected to contribute to the statutory assessment; they may also have completed an Early Help Assessment. Any youth justice assessment must take account of any current Children Act 1989 S17 or S47 assessments and plans.
- 7.15 Youth Justice ASSET Assessment is a structured tool used by all Youth Offending Teams when working with young people who come into contact with the Criminal Justice System. It aims to look at the young person's offence and identify factors or circumstances which may have contributed to such behaviour. The information gathered from ASSET is used to inform court reports and help formulate plans of intervention to address needs, vulnerability and risk.
- 7.16 Under section 3 of the Legal Aid, Sentencing and Punishment of Offenders Act 2012 a child becomes looked after by Cumbria County Council when they are remanded into Local Authority Accommodation by a Criminal Court or made subject of Youth Detention Accommodation. The statutory guidance for care planning and eligibility for services therefore also apply in these circumstances.

8. Early Help Assessment

- 8.1 Children and their families who receive coordinated Early Help are less likely to develop difficulties that require intervention through a statutory assessment under the Children Act 1989. An Early Help Assessment is therefore completed with the agreement of parents so that local agencies can work with the family to identify what help the child and family might need to reduce an escalation of needs that could require statutory intervention. The Multi-agency Threshold Guidance details the process for Early Help, and describes the type and level of support that may be provided.
- 8.2 An Early Help Assessment can be undertaken by any professional who knows the child in liaison with any other agency who is or may need to be involved with the child and family. The Coordinator role can be held by the G.P., Health Visitor, School Nurse, Teacher, Teaching Assistant, Youth Worker or Voluntary Organisation's Family Support Worker⁹ and should be informed by the views of the child and family. They should know the child and act as an advocate for the child and family and coordinate the delivery of support services
- 8.3 The assessment should be undertaken with the agreement of the child and family, it requires honesty about the reason for completing the assessment as well as clarity about the presenting concerns. Should the child or family decline the offer of an assessment, the professional who identifies the concerns should discuss the case with the Early Help Team (to determine if circumstances warrant a statutory assessment by Children's Services Social Care).

<http://www.cumbrialscb.com/professionals/earlyhelp/default.asp>

8.4 The Early Help Coordinator should ensure that the circumstances of the child improve as a result of coordinating the delivery of services through a plan that focuses on the desired outcomes for the child. Where improvements do not occur, in a timescale appropriate to the child, a consultation discussion should be considered with an Early Help Officer. However, where the situation is judged to have deteriorated and the child is felt to be suffering or likely to suffer significant harm, a contact to Cumbria Safeguarding Hub should be made immediately.

8.5 The Early Help Assessment domains should include those identified in Working Together to Safeguard Children, 2015 (Chapter 1, Section 35 and will form the platform upon which the plan of support will be based. Where the provision of services under Early Help does not result in an improvement for the child and a statutory assessment is deemed appropriate, the 'early support' assessments will provide useful information upon which the statutory assessment and plan will be based.

REMEMBER:

Early Help can be put in place without contact with the Cumbria Safeguarding Cumbria Safeguarding Hub.

- Early identification of children's needs provides the best outcomes for children.
- Early identification of risk has the best impact as it allows agencies to respond quickly with the most effective interventions.

⁹Not an exhaustive list

9. Cumbria Safeguarding Hub

9.1 The Cumbria Safeguarding Hub is a co-located team of professionals from the Police, Health agencies, Children's Social Care and Youth Justice Services who deliver an integrated service to ensure that children who meet the threshold for targeted support led by a social worker are directed to the most appropriate team in a timely way.

9.2 A screening team answer all calls and read all single contact forms. They make decisions based on the Multi-agency Thresholds Guidance as to whether the concern should be managed through the Early Help process or quickly escalated to a social work team for investigation. Where this decision is not obvious information about the child will be subject to further sharing in the multi-agency Cumbria Safeguarding Hub (see Multi-agency Thresholds Guidance).

9.3 Where a child is not in need of immediate protection, the agencies will look at any relevant information they hold and take this to share at the Cumbria Safeguarding Hub. The conclusion of this multi-agency sharing of information may be:

- a decision for the child does not meet the threshold for the involvement of Children's Social Care;
- the professional making contact with Cumbria Safeguarding Hub is signposted to the service most appropriate to the needs of the child;
- the professional making contact with Cumbria Safeguarding Hub is advised to undertake an Early Help Assessment and provide services via a Team Around the Family; or
- the child's needs do meet the threshold for involvement of Children's Social Care and the contact/referral is transferred to the appropriate Children's Services team for allocation and assessment.

Cumbria Safeguarding Hub

Phone 0333 240 1727

Email Safeguarding.Hub.fax@cumbria.gov.uk

Outside office hours - The Emergency Duty Team (EDT) operates an out of hours service. The Emergency Duty Team is one social worker covering the whole county. The EDT service is an emergency only response with the social worker available to provide a response where the needs of the child indicate this.

Contacts

9.4 Contacts that suggest an immediate risk to a child / children will be taken by phone but professionals who wish to refer a child / children should follow up the contact with the Cumbria Safeguarding Cumbria Safeguarding Hub Single Contact Form which can be downloaded from the LSCB website.

<http://www.cumbrialscb.com/professionals/Cumbria Safeguarding Hub/default.asp>

10. How do I make a complaint, a comment or a compliment?

10.1 Working Together 2015 states that there needs to be a clear process for challenge by children and families through an accessible Complaints Procedure. Cumbria County Council Children's Services Complaint procedure can be found on the Cumbria County Council website.¹⁰

10.2 Cumbria County Council Children's Services have published a booklet for children and young people who receive a service from Children's Services and this can be found on the County Council website.

¹⁰Cumbria County Council, Children's Services Complaints Process

<http://www.cumbria.gov.uk/childrenservices/strategyandcommissioning/performance/comments.asp>



Appendix 1 - Local protocols for assessment

62. Local authorities, with their partners, should develop and publish local protocols for assessment. A local protocol should set out clear arrangements for how cases will be managed once a child is referred into local authority children's social care and be consistent with the requirements of this statutory guidance. The detail of each protocol will be led by the local authority in discussion with their partners and agreed with the relevant LSCB.
63. The local authority is publicly accountable for this protocol and all organisations and agencies have a responsibility to understand their local protocol.

The local protocol for assessment should:

- ensure that assessments are timely, transparent and proportionate to the needs of individual children and their families;
- set out how the needs of disabled children, young carers and children involved in the youth justice system will be addressed in the assessment process;
- clarify how agencies and professionals undertaking assessments and providing services can make contributions;
- clarify how the statutory assessments will be informed by other specialist assessments, such as the assessment for children with special educational needs (Education, Health and Care Plan) and disabled children;
- ensure that any specialist assessments are coordinated so that the child and family experience a joined up assessment process and a single planning process focused on outcomes;
- set out how shared internal review points with other professionals and the child and family will be managed throughout the assessment process;
- set out the process for assessment for children who are returned from care to live with their families;
- seek to ensure that each child and family understands the type of help offered and their own responsibilities, so as to improve the child's outcomes;
- set out the process for challenge by children and families by publishing the complaints procedures; and
- require decisions to be recorded in accordance with locally agreed procedures. Recording should include information on the child's development so that progress can be monitored to ensure their outcomes are improving. This will reduce the need for repeat assessments during care proceedings, which can be a major source of delay.

Appendix 2 - Glossary

Term	Definition
Abuse	A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults, or another child or children. (Definition provided by Working Together 2015)
Accommodation	Section 20 of the Children Act 1989 enables a local authority to provide accommodation for a child who has no person with parental responsibility for him/her, is lost or abandoned or whose parent cannot provide suitable accommodation and care.
Achieving Best Evidence Interview	An investigations interview with a child who is a witness to a crime. "Achieving Best Evidence in Criminal Proceedings: Guidance for Vulnerable or Intimidated Witnesses" was issued jointly by key government departments led by the Home Office.
Allocated case	A case that has been made the responsibility of a named social worker or other key worker until such time as the case is closed transferred or managed in such other way that the named worker no longer has responsibility for it.
Assessment	The assessment of developmental needs of a child within their family and wider environmental context to determine, if the child has needs and what services they require. The assessment may be general in nature (e.g.) Early Help, or relate to a specific developmental need (e.g.) health or education.
ASSET	A youth justice assessment tool comprising a main assessment, a serious harm risk assessment and a young person's self-assessment. It is used to assist in planning interventions and review progress and outcomes.
Care Order	A court order under s.31 of the Children Act 1989 placing a child in local authority care to protect the child from harm they are suffering or may suffer, whilst under the care of his/her parent (and/or being beyond a parent's control).
Child in Need (CIN)	Section 17 (10) of the Children Act 1989 defines a child in need as a child who, without the provision of local authority services: <ul style="list-style-type: none"> a) Who is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision of services to them by a local authority b) Whose health or development is likely to be significantly impaired, or further impaired, without the provision for them of such services; or c) They are disabled, and "family", in relation to such a child, includes any person who has parental responsibility for the child and any other person with whom they has been living.
Child protection (CP)	Part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm. (Definition provided by Working Together 2015)
Child protection enquiry	Where a local authority: <ul style="list-style-type: none"> (a) are informed that a child who lives, or is found, in their area <ul style="list-style-type: none"> (i) is the subject of a emergency protection order, or (ii) is in police protection; and (b) have reasonable cause to suspect that a child who lives, or is found, in their area is suffering, or is likely to suffer, significant harm <p>Section 47 of the Children Act 1989 gives children's social care a duty to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer, significant harm.</p>

Term	Definition
Child Sexual Exploitation (CSE)	Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.
Child and Family Assessment (C&FA)	A statutory assessment of the developmental needs of each child referred to the local authority where the evidence is s 17 applies and there is a request for services to be provided. This should be undertaken within the maximum of 45 working days of the initial referral decision, but could be very brief depending on the child's circumstances.
Disclosure and Barring Service (DBS)	<p>The Disclosure and Barring Service (DBS) helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. It replaced the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA).</p> <p>The DBS is responsible for:</p> <ul style="list-style-type: none"> • processing requests for criminal records checks • deciding whether it is appropriate for a person to be placed on or removed from a barred list • placing or removing people from the DBS children's barred list and adults' barred list for England, Wales and Northern Ireland
Duty children's social worker	Professional from the Children's Social Care team that receives and responds to all child concern referrals – in office hours.
Emergency duty team (EDT)	A social work team providing an emergency social care response for the county contactable on 03332401727 and operating between 5pm – 9am weekdays and weekends.
Early Help	This describes the process or act of providing support or services when a child or young person, of whatever age, shows signs of having difficulties. Early Help aims to ensure that individuals receive the help they need as soon as possible, thereby preventing the problem escalating and becoming more difficult to deal with. It can refer to prompt action at any point designed to address emerging difficulties
Emergency Protection Order (EPO)	A court order under Section 44 of the Children Act 1989 giving Children's Social Care and the Police the power to protect a child from harm by removing the child to suitable accommodation or preventing a child from being removed (e.g. from hospital).
Emotional Abuse	The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone. (Definition provided by Working Together 2015)

Enquiry checks	Checks made of agencies involved with a child for Section 47 child protection investigation purposes.
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Term	Definition
First line manager	The manager with responsibility for supervising the frontline professional with case or immediate responsibility for the child, adult or family.
Framework for the Assessment of Children in Need and their Families (often referred to as the Assessment Framework)	The Assessment Framework is a systematic way for professionals to assess a child's needs and whether s/he is suffering or likely to suffer significant harm, what actions must be taken and which services would best meet the needs of the child and family. All professionals should be competent to contribute to an assessment, which is usually led by children's social care under the Children Act 1989.
Gillick competence / Fraser Ruling	The competency test resided by Lord Fraser, 1985 (known as Gillick Competence), which laid down criteria for establishing whether a child, irrespective of age, had the capacity to provide valid consent to treatment (by health professionals) in specified circumstances.
Impairment of health and development	Where professionals are seeking to judge whether a child's health and development have been significantly harmed, the Children Act 1989 (s31 (10)) directs them to make a comparison with the health and development which could reasonably be expected of a similar child.
Integrated Children's System (ICS)	Case management system for case recording within Children's Social Care. Introduced in 2008, this is a government sponsored system with national criteria for local software providers to adhere to. It ensures that there is consistency of practice across all social work teams, improves transparency and accountability.
Integrated Working	Integrated working is where everyone supporting children, young people and families works together effectively to put them at the centre, meet their needs and improve their lives.
Key worker	The key worker has an important role that involves administration, information, co-ordination and the professional management of a case. Their prime responsibility is to maintain a child protection focus to the work being undertaken with families and to maintain and co-ordinate the core group, who will ensure the progress of the Child Protection Plan.
Lead professional	The practitioner who has the most on-going contact with a child at the time and who is in a position to co-ordinate the professional network to support the child
Local Safeguarding Children Board (LSCB)	Local Safeguarding Children Boards (LSCBs) are statutory bodies established in each local authority area under Section 14 of the Children Act 2004. The purpose of LSCBs is: <ul style="list-style-type: none"> a) to coordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area; and b) to ensure the effectiveness of what is done by each such person or body for those purposes.
Multi-agency Cumbria Safeguarding Hub	Multi-agency team based in Penrith who receive concerns regarding a child and make a decision regarding the best course of action.

Neglect	<p>The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:</p> <ul style="list-style-type: none">• provide adequate food, clothing and shelter (including exclusion from home or abandonment);• protect a child from physical and emotional harm or danger;• ensure adequate supervision (including the use of inadequate care-givers); or• ensure access to appropriate medical care or treatment. <p>It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. (Definition provided by Working Together 2015)</p>
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Term	Definition
Outcome	What has changed (and ideally improved) for children and young people as a result of taking action.
Parental Responsibility (PR)	All the duties, rights, powers, responsibilities and authority which by law a parent of a child has in relation to the child and their property. A Care Order confers the responsibility to a local authority but it does not remove it from the child's parents.
Prevention	Services or strategies put in place to stop something happening or to stop someone from doing something that might affect the outcomes of a child or young person
Physical Abuse	A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. (Definition provided by Working Together 2015)
Police Powers of Protection Order(Section 46), (PPO)	Section 46 of the Children Act 1989 giving the police powers to protect a child from harm by removing the child to suitable accommodation or preventing a child from being removed (e.g. from hospital).
Private Fostering	An arrangement made directly by a parent for their child to be looked after for 28 days or more by an adult who does not have parental responsibility for the child and is not a close relative/step parent.
Referral	A request for services to be provided by a local authority. A case can become current only after a referral has been made.
Regulated Activity with Children	The Safeguarding Vulnerable Groups Act 2006 (as amended by the Protection of Freedoms Act 2012) defined Regulated Activity with Children as: a) Unsupervised activities - Teaching, training or instruction, care for or supervise children, provide advice / guidance on wellbeing, drive a vehicle only for children b) Work for a Limited Range of Establishments (Specified places) – Where there is an opportunity for contact, for example schools, children's homes, childcare premises (but not work by supervised volunteers) c) Healthcare / Relevant Personal Care - for example washing or dressing; or health care by or supervised by a professional, even if done once d) Registered Child-minding and Foster-Carers
Risk to child	Description of an adult or child who has been identified (by probation services / Youth Justice Service, Police or health services, individually or via the Multi-Agency Public Protection Arrangements) as posing an on-going risk to a child (replaces the term Schedule 1 Offender).
Safeguarding and promoting the welfare of children	Defined for the purposes of this guidance as: <ul style="list-style-type: none"> • protecting children from maltreatment; • preventing impairment of children's health or development; • ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and • taking action to enable all children to have the best life chances. (Definition provided by Working Together 2015)
Section 17	Section 17 of the Children's Act 1989 imposes on every local authority a duty to safeguard and promote the welfare of children in the area who are in need.

Section 47 Enquiry	Section 47 of the Children Act requires every local authority to make enquiries about children thought to be at risk, enabling them to decide whether they need to take further action to safeguard and promote the child's welfare.
Senior Manager	Manager in any agency above first line manager. In Cumbria County Council this is also a designated job title. Senior Managers report to the Assistant Directors.

Term	Definition
Serious Case Review (SCR)	Chapter 4 of Working Together to Safeguard Children (2015) sets out the purpose and process of serious case reviews (SCRs) as defined under Regulation 5 of the Local Safeguarding Children Boards Regulations 2006. SCRs are undertaken when: (a) abuse or neglect of a child is known or suspected; and (b) either — (i) the child has died; or (ii) the child has been seriously harmed and there is cause for concern as to the way in which the authority, their Board partners or other relevant persons have worked together to safeguard the child.
Sexual Abuse	Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. (Definition provided by Working Together 2015)
Significant Harm	There are no absolute criteria on which to rely 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, the extent of premeditation, and the presence or degree of threat, coercion, sadism, and bizarre or unusual elements. Each of these elements has been associated with more severe effects on the child, and / or relatively greater difficulty in helping the child overcome the adverse impact of the maltreatment. Sometimes, a single traumatic event may constitute significant harm (e.g. a violent assault, suffocation or poisoning). More often, significant harm is a compilation of significant events, both acute and longstanding, which interrupt, change or damage the child's physical and psychological development. Some children live in family and social circumstances where their health and development are neglected. For them, it is the corrosiveness of long-term emotional, physical or sexual abuse that causes impairment to the extent of constituting significant harm. In each case, it is necessary to consider any maltreatment alongside the family's strengths and supports.
Social Worker or Child's Social Worker	Social work qualified professional with case responsibility.
Staff / staff member	Any individual/s working in a voluntary, employed, professional or unqualified capacity, including foster carers and approved adopters.
Working day	Timescales in these procedures relate to the working day i.e. from 09:00hrs to 17.00hrs on Monday to Thursday, 09:00 to 16:30 on Friday, unless otherwise expressed (e.g. 24 hours).
Working Together (WT)	Working Together to Safeguard Children (2015) is a guidance document produced by the DfE setting out how all agencies and professionals should work together to safeguard children and promote children's welfare.
Young Carers	Are children and young people who assume important caring responsibilities for parents or siblings, who are disabled, have physical or mental ill health problems, or misuse drugs or alcohol. (Definition provided by Working Together 2015)

