



Helping, Supporting and Protecting Children and Families in North East Lincolnshire

Threshold Document 2024/28 (refresh June 2026)

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Introduction and Context

Welcome to our **Helping, Supporting and Protecting Children and Families in North East Lincolnshire 2024/28** threshold document.

Children, young people and families are at the centre of all we do and we want North East Lincolnshire to be a place where our children can grow up happy and healthy, safe in their homes and communities with people that love them. We are ambitious for children's futures with a focus on learning and aspiration so they can be the best they can be.

In North East Lincolnshire, we want all children to be safe from harm and enjoy growing up in loving homes, have the best start in life and a happy, healthy, fun childhood. We want them to, start school ready to learn, do well at all levels of learning and have the skills and opportunities they need to enjoy a bright future. We want children be part of an inclusive, compassionate, and thriving community, be listened to, involved in the decisions on their future and respected.

In the context of the Children's Social Care National Framework (March 2026), we are also committed to ensuring that:

1. Children, young people and families stay together and get the help they need
2. Children and young people are safe in and outside of their homes
3. Children and young people are supported by their family network
4. Children in care and care leavers have stable, loving homes

We want children, young people, and families to be supported by a workforce that is passionate, compassionate, motivated, and proud of their work and who know, support and care for our children, families, and communities. We want our workforce to be supported by caring and knowledgeable leaders and colleagues and be supported to learn, develop, reflect on practice, and feel valued, appreciated, and respected. We will ensure the workforce have the tools and resources that they need to make a difference with everyone taking responsibility for their own learning, development and practice.

In North East Lincolnshire, relationships unite us and we put children at the heart and of centre of our work. We are ambitious and we want to be innovative and collaborative to create lasting change. There is a commitment to ensuring the right support, at the right time by the right person. We are aspirational for ourselves, as well as our children and families, and we will hold each other to account with open and honest conversations in the context of a shared vision and thresholds.

Purpose of this Threshold Document

Helping, Supporting and Protecting Children and Families in North East Lincolnshire 2024/28 sets out how services support children, young people, and families to participate, find help online and in their networks and communities, to be resilient, stay safe and independent.

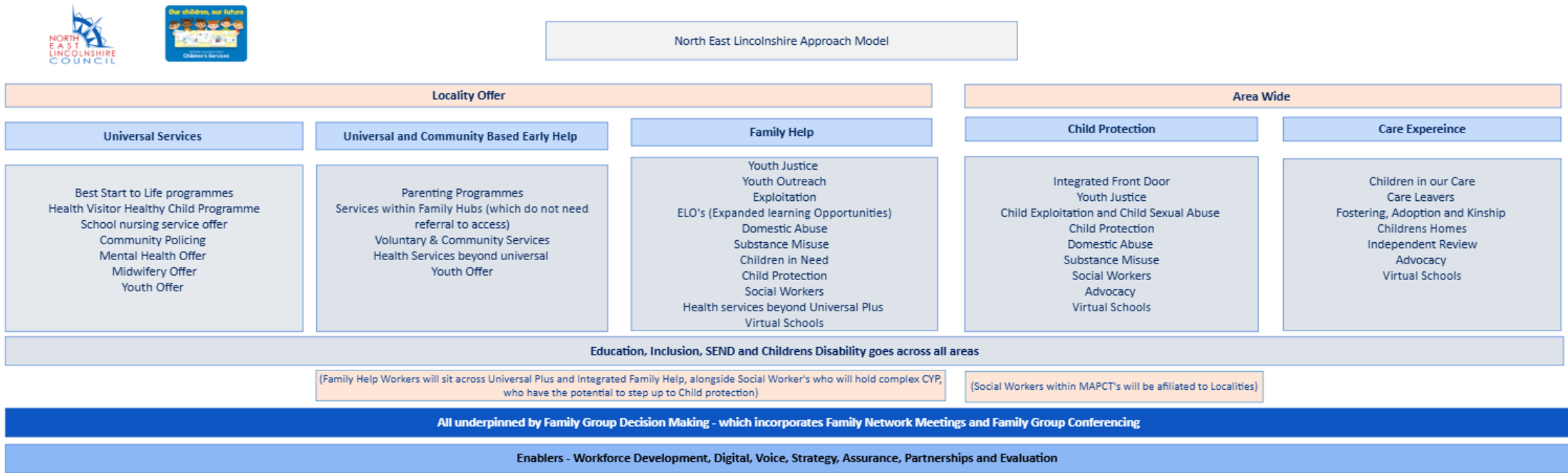
It is set in the context of our North East Lincolnshire Safeguarding Children Partnership that includes the three statutory safeguarding partner organisations – the Police, Integrated Care Board and Council - and other relevant partners.

It meets the requirements of Working Together to Safeguard Children 2026 by setting out the levels of need (thresholds) in North East Lincolnshire in the context of our system for universal services and community-based early help, family help and protection and fulfils the safeguarding partners' responsibility to publish a threshold document.

Specifically, the threshold document should set out the local criteria for action in a way that is transparent, evidence based, accessible, and easily understood. This should include:

- the process for accessing universal services and community-based early help, which may include an assessment
- the criteria, including the level of need, for when a child should be referred to Family Help, which covers non-statutory and statutory support and services provided through:
 - targeted early help under sections 10 and 11 of the Children Act 2004. This support is provided to children and families who are identified by practitioners to have multiple and/or complex needs, requiring a specialist and/or multi-disciplinary/agency response, where statutory support or intervention is not required
 - statutory support, including assessments, delivered under section 17 of the Children Act 1989 (children in need, including how this applies for disabled children)
- the criteria, including the level of need, for when a child should be referred to local authority children's social care for assessment and for statutory services under:
 - section 47 of the Children Act 1989 (reasonable cause to suspect a child is suffering or likely to suffer significant harm)
 - section 31 of the Children Act 1989 (care and supervision orders)
 - section 20 of the Children Act 1989 (duty to accommodate a child)
- clear procedures and processes relating to:
- the abuse, neglect, and exploitation of children inside and outside the home, including online
- looked after children
- children managed within the youth secure estate
- disabled children

North East Lincolnshire Approach Model:



North East Lincolnshire Levels of Need

Universal and Community-Based Early Help	Family Help	Child Protection
Within the right conditions and local offer, through taking self-responsibility, children, young people and families can access Universal and Community-Based Early Help. As part of this they can; - actively participate in and are supported by their schools and communities - access available information, amenities, settings, and services to help themselves and to raise awareness, develop skills and resilience and enable behaviour changes that will contribute to children growing up happy and healthy, safe in their homes and communities with people that love them without the need for interventions - actively engage with proactive, preventative, health promoting services and receive the benefits of early intervention and support to maximise their health, wellbeing, and resilience, as well as improving health outcomes and reducing inequalities Community-based early help is provided through universal services, such as education, health and other community-based services. Other community-based early help includes for example support through family hubs, youth services or after school clubs.	Where families have more significant needs that require more intensive help and support, agencies, organisations and individuals work together to support children and families as soon as problems emerge, which can be described as Family Help. Within specific populations, communities and area wide, children and families may need more structured family help to prevent needs from escalating, and to support them through times that may be challenging. When children's needs are such, a more structured support plan may be required to co-ordinate the Family Help needed to achieve agreed outcomes. This a system of support delivered by NELC and/or partners working together and taking collective responsibility to provide the right provision in the borough. Examples of these include parenting support, education support or support through early years provision/schools/colleges, health / mental health support, youth services, youth offending service and housing and employment services. Support can be provided in the context of statutory responsibilities for example children entitled to Section 17 Child in Need provision including those with a disability. The Family Help Lead Practitioner role can be held by a range of people, including social workers and other NELC staff.	Alongside the offer of family help, there are effective multi- agency child protection arrangements to help support and protect children and young people in need of protection. Child protection is the set of multi-agency activities and processes that follow a concern that a child is suffering or likely to suffer significant harm. Under section 47, the local authority has a duty to make enquiries and to take decisive action when needed to protect a child from abuse, neglect, and exploitation. Multi-agency child protection also engages, empowers and work in partnership with parents and carers, family networks and others in a transparent and compassionate way to care safely for their children, wherever this is possible. The Lead Child Protection Practitioner role must be held by a qualified social worker.

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For families who no longer require Family Help or child protection, family hubs offer an ongoing, local support network.		
Enablers: Views and experiences of children, young people and families are at the centre of all we do Multi agency working is prioritised and effective Leaders drive conditions for effective practice The workforce is equipped and effective Data and intelligence informs strategic planning frameworks and practice improvements		

North East Lincolnshire Unified Approach

Our ‘**Unified Approach**’ explains how we work together, with each other, and our children, young people, families and communities, to help everyone ‘**grow stronger together**’ across North East Lincolnshire

- **Relational:** We want to have strong, trusting relationships, where we are ‘human first’ and where we all support and challenge to do the right thing
- **Strengths based:** We look for the strengths in people so they can grow in confidence and make positive changes
- **Solution focussed:** We help and support people to think of their own ideas to solve problems, which helps them to become stronger and more able to cope in the future



- **Child First:** We see children as children, not just their behaviour, and we work with them in a positive way to help them feel included and not judged
- **Trauma aware:** We seek to be more aware and understand past trauma and how it affects people. We support them to overcome challenges and feel safe and ready to thrive and we are working toward everyone being more trauma informed
- The ‘**green leaves**’ refer to some of the important ways we work together across the borough to support our children, young people, families and communities

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We want:

- to have strong, positive, trusting relationships across the partnership that builds co-operation and constructive challenge
- such relationships to be at the heart of practitioners, managers and senior leaders' relationships with children, young people and families
- that everyone engages constructively to deliver effective support to children, young people and families
- to work with children, young people, parents and carers to find and amplify their strengths to effect positive change and achieve the best possible outcomes
- to help people explore their strengths and resources and drawing up a plan about what needs to be achieved to overcome concerns

Decision-making about Levels of Need

The needs of children, young people and families do not easily fit into categories. Circumstances can change quickly, or over a period of time, and needs can be dependent on the interplay and impact of risk and protective factors, parenting capacity, wider family network support and environmental factors.

Making sense of information about children, young people and families from a range of sources and a judgement about the level of need is a challenge and there is no formula for this decision making. This document seeks to provide clarity and guidance to support a consistent understanding of, and responses to, levels of need across the spectrum of services for children, but the key to 'getting it right for children' will always be an evidence-based judgement.

It may be the case that a child or young person appears to have needs largely at one level, but there is a specific risk factor that meets the criteria for a specialist assessment i.e. an acute incident and a referral to children's services is needed. In making a judgement about level of need, and how to respond to provide universal and community based early help, family help or protection there are a number of key questions that should be given consideration, whether undertaking an early help assessment or thinking about making a referral to children's services:

- What are the individual needs and views of each child and young person in the family?
- What are the individual needs and views of parents / carers, and any relevant members of the family network?
- What is working well and what support do they think is required to meet need?
- What is the evidence of impact on the child, in relation to their welfare, safety and development or harm/likely harm?
- What have you, and / or others, done to try and help?
- Have you enabled the children, young person or family to access community or other resources?
- If help hasn't worked, what other ideas and approaches could make a difference?

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Referrals for Family Help and Child Protection should be made through the Integrated Front Door on 01472 326292 (option 2, option 2). Children's Services also provide an Emergency Duty Team (EDT), which can be contacted on 01472 326292 (option 2).

Further Information

For supplementary information and connected policies, procedures and guidance or further information , please go to:

Web: [North East Lincolnshire Safeguarding Children Partnership | NELC](#)

Email: NEL.SCPEnquiries@nelincs.gov.uk

Risk Analysis Framework

Across the North East Lincolnshire Safeguarding Children Partnership the Risk Analysis Framework (RAF) provides a consistent model for the assessment, analysis and management of risk.

It focuses on two key aspects:

- what factors are there in the child's life that present a risk to their wellbeing (risk factors); and
- what factors guard against risk (protective factors)

Having determined what risk and protective factors exist, the process is then to determine the balance of those factors, particularly whether there are sufficient protective factors in place to balance out the risk factors.

The next stage is to judge what meaning the level of risk has for the child and the impact on them. This will be on a continuum from no significant risk to severe risk.

The last stage is that the worker must determine what needs to change in order to reduce risk and devise a plan to deliver that change.

When making a judgement about the level of need and determining whether to make a referral to children's services, professionals should seek guidance and approval from their supervisor / manager or safeguarding lead within their agency and follow any referral up in writing including sharing any early help assessment and plan. Where it appears that a child may be suffering, or at risk of suffering significant harm, Children's Services Integrated Front Door should be contacted on **01472 326292 (option 2, option 2)**.

Levels of Need: Universal and Community Based Early Help Overview

Children and families can seek the earliest help through universal services: a midwife, health visitor, a school nurse, at the local community hub, their GP, their school and other services, and groups available to them in their communities or online.

All services should help support children and families to find their own solutions, this may include helping them access the internet for information, advice and guidance with regard to a specific issue, signposting them to help within their community, including helping them make contact with specific services such as housing advice, debt management, support groups and of course offer direct support and encouragement to build on strengths and make positive change.

Early Help Assessment - Agencies should offer an early help assessment to children and families who have additional needs over and above those they can help within the context of their own agency's core function. This will cover the child, the family and family network and wider family and environmental factors that have an influence upon the child's life. This assessment should be child centred and undertaken in partnership with the child and family and shared with them. It should in the first instance be used to shape the type of help and enable agencies to work together at the lowest possible level to offer strengths based and solution-focused early help and prevent escalation.

It is important when conducting an early help assessment to first gain consent and that the assessment engages and embraces the child and family, involving others as part of a wider multi-agency approach and plan to promote the child's wellbeing and resilience, and prevent needs and problems from escalating and becoming harmful. When working with other agencies, information should be shared appropriately in order to ensure the welfare and safety of the child.

Within specific populations, communities, family hubs and area wide

- Most children in North East Lincolnshire have their needs met by their parents and family members where there are positive and protective factors. Within the right conditions, with the right information, advice, and guidance and through taking self-responsibility, children and families actively participate in and are supported by their communities. They can make use of available information, amenities, settings, and services that are accessible to all to help themselves to raise awareness, develop skills and resilience and enable behaviour changes that will contribute to them being safe, well, prosperous and connected (such as the GP, children's centre, school, health visitor, or local wellbeing hub)
- This support relies upon the skill and ability of the worker and their motivation to help within the context of their role to make every contact count. This can also involve the provision of advice, signposting, and guidance
- Universal Services have long(er) term involvement with children and families and play a key role in helping them throughout stages of life. Services are encouraged to help and support children and families to resolve need at this level

Levels of Need: Family Help Overview

Within specific populations, communities, family hubs and area wide

- Outside the context of early help, sometimes children and families need more structured and targeted help to prevent needs from escalating, and to support them through times that may be challenging
- Children, young people and families are entitled to equality of opportunity and through individual agencies or multi agencies / integrated working, they are helped, supported and empowered to enable behaviour changes that will contribute to them being happy and healthy, safe in their homes and communities with people that love them preventing the need for more specialist help
- One professional may be able to provide the extra help that is needed or help the family to identify where to seek the right help, and then support them through. This could include welfare rights and debt management, relate to health issues, or behaviour management strategies in the home. For instance, a school nurse or learning mentor are encouraged to offer support where they can do so and where this does not necessitate formal assessment and planning. They should help children and families resolve any difficulties
- Services should use the early help assessment and framework to work with children and families and shape their work where this helps
- Children's needs are such that a more structured support plan may be required to co-ordinate the help needed to achieve agreed outcomes. There may be concern about a number of risk factors but the threshold for statutory social care intervention is not met. These factors may include ongoing lower-level neglect, domestic abuse, adult or child mental / emotional health problems, substance misuse, adolescent vulnerabilities, anti-social and or risk-facing behaviour, and it may be difficult to engage family members to create change. Children may also be vulnerable to harm outside the home, for example exploitation, online abuse and bullying which may require a coordinated package of early help
- In such circumstances a multi-agency early help assessment should be undertaken to understand how best agencies can work together with the family to reduce the level of need. After the assessment an early help plan should be coordinated by a lead practitioner who takes responsibility for reviewing the plan

Levels of Need: Child Protection Overview

For those children and families who are more vulnerable, where early help / family help plans are not making sufficient positive difference and the child may be at risk of long-term impairment to their health and development and / or where it is suspected that the child is suffering, or likely to suffer, significant harm. This includes harm that occurs inside or outside the home, including online.

LEVELS OF NEED: DESCRIPTORS ¹

Universal

Parenting Capacity Basic Care, Safety and Protection - Carers able to identify and provide for the Child’s needs and protect from danger and harm. Emotional, Warmth and Stability - Carers able to provide warmth, love, praise, and encouragement.	Guidance, boundaries, and Stimulation: - Carers provide positive guidance and boundaries. - Supports development through opportunities for interaction and play
Family and Environmental Factors Family History and Functioning - Supportive family relationships, including when parents are separated Family Network - Supportive family network	Family’s Social Integration - Take part in community events and activities Community Resources - Able to identify and seek universal service entitlement. Extra-Familial Contexts

¹ ¹Working Together to Safeguard Children 2026 describes harm outside the home as:

Some children experience abuse and exploitation outside the home. This is often referred to as ‘extra-familial harm’. Harm can occur in a range of extra-familial contexts, including school and other educational settings, peer groups, or within community / public spaces, and/or online. Children may experience this type of harm from other children and/ or from adults. Forms of extra-familial harm include exploitation by criminal and organised crime groups and individuals (such as county lines and financial exploitation), serious violence, modern slavery and trafficking, online harm, sexual exploitation, teenage relationship abuse, and the influences of extremism which could lead to radicalisation. Children of all ages can experience extra-familial harm.

Working Together to Safeguard Children 2026 describes extra-familial contexts as:

Extra-familial contexts include a range of environments outside the family home in which harm can occur. These can include peer groups, school, and community/public spaces, including known places in the community where there are concerns about risks to children (for example, parks, housing estates, shopping centres, takeaway restaurants, or transport hubs), as well as online, including social media or gaming platforms.

Housing, Employment and Income • Housing has basic amenities and appropriate facilities. • Appropriate levels of cleanliness/ hygiene are maintained.	• Positive social, community, peer and friendship networks
Child's Developmental Needs Health • Good physical health • Adequate diet/hygiene/clothing • Developmental Reviews/Immunisations up to date • Developmental milestones met including: - Accessing health services when needed - Speech & language - Height & weight with expected parameters - Healthy lifestyle - Sexual activity appropriate for age - Good state of mental/emotional health • No substance misuse. Education and Learning • Good attendance at school/college/training • No significant barriers to learning • Achieving key stages Emotional and Behavioural Development • Growing level of competencies in practical and emotional skills • Good quality early attachments	Identity • Positive sense of self and abilities • Demonstrates feelings of belonging and acceptance • An ability to express needs Family and Social Relationships • Stable and affectionate relationships with care givers • Good relationships with siblings • Positive relationships with peers Social Presentation • Appropriate dress for different settings • Good level of personal hygiene Self-Care Skills • Age-appropriate independent self-care / living skills

Community Based Early Help

Child's Developmental Needs	
Health - Assessed development delay - Missing/late immunisations or checks - Minor concerns, about health including impact of low level mental/emotional health issues, diet, hygiene, or alcohol consumption (but not immediately hazardous) - Disability requiring low-level support. - Starting to have sex with similar age group (from 13 and over) - Childhood obesity - Sexual behaviours which cause concerns, behaviours are persistent, increasing in frequency, inequality in age, power developmental stage Education and Learning - Occasional missing from school, low risk identified - Some non-attendance, poor punctuality - At risk of fixed term exclusion or had a previous fixed term exclusion - Not in education, employment, or training - Identified language and communication difficulties. - Not reaching educational potential Self-Care Skills - Concerns about poor hygiene	Emotional and Behavioural Development - Low level emotional health issues requiring support/ monitoring - Substance misuse that is not immediately hazardous including alcohol - Demonstrating behaviour seen as anti-social - Low-level emotional and behavioural difficulties that may be linked to attachment and/or emotional development delay e.g. adopted child - Involved in bullying behaviour, or victim of bullying Identity - Some insecurities around identity - May experience bullying around 'difference'. Family and Social Relationships - Age 16+ and living away from home. - Some support from family and friends - Has some difficulties sustaining positive relationships. - Undertaking occasional caring responsibilities - Low parental aspirations Social Presentation - Can be over-friendly or withdrawn with strangers.

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• Slow to develop age-appropriate self-care skills. • Overprotected/unable to develop independence	• Personal hygiene starting to be a problem
Parenting Capacity Basic Care, Safety and Protection • Parental engagement with services may be inconsistent • Parent requires advice and help with parenting • Low-level concerns about neglect • Professionals are beginning to have some concerns about substance misuse (including alcohol) by adults within the home • Some exposure to inappropriate situations in home/community/online • Teenage parent(s) • Vulnerability to child exploitation or other risks outside the home including online • Parental involvement in criminality/ substance misuse	Emotional Warmth and Stability • Inconsistent parenting • Parental mental health not impacting upon care • Child perceived negatively by parent Guidance, Boundaries and Stimulation • May regularly have different carers • Inconsistent boundaries offered • Anti-social behaviour in family • Carers provide some stimulation • Few opportunities for new experiences
Family and Environmental Factors Family History and Functioning • Parents have relationship difficulties which may affect the child • Low level and / or infrequent domestic abuse not requiring medical treatment • Experienced loss of significant adult • May look after younger siblings • Parent has health difficulties • Previous social care involvement	Housing, Employment and Income • Families affected by low income or unemployment • Parents have limited formal education • Frequent house moves / poor housing • Family seeking asylum, accessing help Family's Social Integration • Family may be new to area • Some social exclusion in the community • Low-level victimisation by others

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Family Network - Family have a limited, no family network or the network is unsupportive Extra-Familial Contexts - Low level concern around social, community, peer and friendship networks - Vulnerabilities to harm outside the home	Community Resources Adequate universal resources but family may not access them at the right time
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Family Help (Early Help and Child In Need)

Child's Development Needs Health - Concerns around mental / emotional health / self-harm - Has some assessed or physical development delay that may be connected to neglect - Missed planned health appointment - Concerns about diet, hygiene, and clothing - Substance misuse impacts negatively on their ability to make positive informed choices (e.g. unprotected sex) - Disability requiring significant support services - Sexual behaviours which are escalating in frequency, where there is a level of risk to the health and safety of the child or others	Identity - Subject to discrimination - Significantly low self-esteem - Developing extremist views - Vulnerabilities to child sexual / criminal exploitation and/or friends with others who are vulnerable - Lacks a sense of belonging/community Family and Social Relationships - Peers also demonstrating anti-social behaviour. - Regularly cares for another family member. - Experiencing conflicts with peers/siblings. - Family relationships under severe stress
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Education and Learning • Short term exclusion or persistent missing from school, poor school attendance • At risk of permanent exclusion or previous permanent exclusion • Identified learning needs and may have Education Health and Care Plan (EHCP) • Not achieving key stage benchmarks • Limited access to books and toys • Persistently not in education, employment, or training (NEET) Emotional and Behavioural Development • Emotional health and development raising concerns (including due to self-harm) • Difficulty coping with feelings • Challenging behaviours that may be linked to early experiences, including attachment difficulties. • Early onset of sexual activity (13 –14) • Hazardous substance misuse (including alcohol) • Persistent bullying behaviour • Inappropriate sexual behaviour including online and via social media • Offending behaviour • Vulnerable to criminal and/or sexual exploitation and other types of harm outside the home	• Older siblings / family members involved in criminality • Older siblings / family members serving custodial sentence • Experienced the death of a parent or close family member • Parental mental ill health including self-harm and suicide attempts Social Presentation • Clothing regularly inadequate or unwashed • Hygiene problems • Body language and general presentation impacts on relationships Self-Care • Poor self-care skills for age – hygiene • Able to care for self
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Parenting Capacity Basic Care, Safety and Protection • Parental conflict which is or may impact on child / parent relationships • Parent is struggling to provide adequate basic care • Parental learning disability impacting on parent's ability to meet the needs of the child. • Parental substance misuse (including alcohol) impacting on parent's ability to meet the needs of the child. • Parental mental health impacting on parent's ability to meet the needs of the child • Previously subject to statutory interventions • Teenage parent(s) with little support • Child/parent previously looked after	Emotional Warmth and Stability • Child often scapegoated. • Child is rarely comforted when distressed. • Receives inconsistent care. • Has few or no other positive relationships. Guidance, boundaries, and Stimulation • Few age-appropriate toys in the house • Parent ignores disputes between siblings
Family and Environmental Factors Family History and Functioning • Low/medium level and / or frequent domestic abuse (may include controlling, coercive behaviour) not requiring medical treatment – evidence of a number of factors which may increase risk (i.e. previous history, unborn baby/young children, not engaging with or involved with services) • Acrimonious divorce/separation, ongoing conflict • Family members have physical and mental health difficulties. • Parental involvement in crime • Evidence of problematic substance misuse (including alcohol)	Housing, Employment and Income • Overcrowding, temporary accommodation, homelessness, unemployment • Poorly maintained bed/bedding, home conditions poor • Serious debts/poverty impacting on ability to care for child Family's Social Integration • Family socially excluded, or part of a risky network • Escalating victimisation

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Family Network - Family have a limited, no family network or the network is unsupportive Extra-Familial Contexts - Concern around social, community, peer and friendship networks - Vulnerabilities to extra-familial exploitation and abuse, including proximity to organised crime groups	Community Resources - Family do not engage positively with the community - Parents unable or unwilling to access universal services
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Child Protection

Child's Developmental Needs Health - Has severe/chronic health problems (including mental/emotional and/or physical health) - Persistent substance misuse (drugs and alcohol) - Unexplained or suspicious injury - Concerns that children are suffering significant physical, emotional or sexual harm - Non-organic failure to thrive - Obesity - Fabricated / Induced illness / Perplexing Presentation - Early teenage pregnancy - Concealed or denied pregnancy - At risk of female genital mutilation or breast ironing - Dental decay and no access to treatment	Family and Social Relationships - Looked after child - Is a privately fostered child - Care leaver - Family breakdown blamed in some way on child's behavioural difficulties - Is a young carer for a family member - Adoption breakdown - Forced marriage of a minor - Is at risk of honour-based abuse - Unaccompanied asylum seeker Education and Learning - No education provision
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• At risk of sexual exploitation/abuse • Sexual activity under the age of 13 • Disability requiring highest level of support • Harmful Sexual Behaviour towards others where sexual behaviours are excessive compulsive, coercive or threatening, may involve secrecy or trickery. Significant power/age imbalance • At risk of physical harm because of experiencing domestic abuse, exploitation, bullying and / or other risks outside the home Identity • Experiences persistent discrimination • Is socially isolated and lacks appropriate role models • Alienates self from others • Distorted self-image • Extremist views or behaviour • At risk due to family beliefs	• Permanently excluded from school • History of previous exclusions • Significant developmental delay due to neglect/poor parenting Social Presentation • Poor and inappropriate self-presentation Self-Care Skills • Lack of age-appropriate self-care skills • Neglects to use self-care skills due to alternative priorities, e.g. substance misuse Emotional and Behavioural Development • Demonstrating harmful behaviour such as anti-social/criminal activities • Puts self or others in danger through behaviour • Endangers own life through self-harm/substance misuse including alcohol/eating disorder/suicide attempts • Displays or experiences obsessive/compulsive behaviours which have a harmful impact on daily life. • At risk of, or experiencing sexual exploitation • At risk of, or experiencing criminal exploitation • At risk of, or experiencing harm outside the home including online • Frequently goes missing from home / care or school • Child has been reported to have significantly harmed another person • At risk of or experiencing serious youth violence including knife crime • Significant attachment problems and/or severe emotional development delay
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Parenting Capacity Basic Care, Safety and Protection • Parents unable to provide “good enough” care • Parents’ mental health problems or substance misuse significantly impact upon care of the child • Parents unable to care for previous children resulting in removal/alternative carers • Regular instability and violence in the home • Parents are involved in crime that impacts upon the care of the child • Parents unable/unwilling to keep the child safe • Extremist views or behaviour • Persistent domestic abuse including referral to Multi Agency Risk Assessment Conference, frequent aggression / violence requiring medical treatment • Have sustained non accidental injury • Forced marriage of a child • Is at risk of honour-based abuse • Fabricated/induced illness, perplexing presentation • Parental involvement in serious and organised crime	Emotional Warmth and Stability • Parents provide inconsistent, emotional warmth and are highly critical or apathetic towards child • Child is rejected or abandoned • Child is scapegoated in comparison to siblings Guidance, boundaries, and Stimulation • No effective boundaries set by parents • Regularly behaves in an anti-social way • Child beyond parental control • Subject to a parenting order which may be related to their child/young person’s criminal behaviour, antisocial behaviour, or persistent absence from school • Pro criminal family
Family and Environmental Factors Family History and Functioning • Medium/high level and / or frequent domestic abuse (may include controlling, coercive behaviour) which may have required medical treatment – evidence of a number of factors	Housing, Employment and Income • Physical accommodation places child in danger • Family home is cuckooed • No fixed abode or homeless

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which may increase risk (i.e. previous history, unborn baby/young children, not engaging with or involved with services) • Child looked after by a carer in line with Private Fostering Regulations • Harmful relationships with extended family • Parents are deceased and there is no one exercising parental responsibility • Parents are in prison and there is no one exercising parental responsibility Family Network • Family have a limited / no family network or have disengaged with this network and the family are unable / willing to re-build this support structure Extra-Familial Contexts • Significant concern around harm outside the home - social, community, peer and friendship networks, including proximity to organised crimes groups • Child has friends considered at high risk of / experiencing exploitation • Significant concern around the places and spaces where the child spends their time • Child and / or family is having contact with an adult who poses a risk of harm • Child is experiencing or at risk of child exploitation, modern day slavery and/or trafficking	• Multiple house moves • Extreme poverty/debt impacting on ability to care for child Family's Social Integration • Family socially excluded, including rejection by community Community Resources • Unwilling or unable to access community support • Restricting and refusing intervention from services
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Children's Services - Threshold Criteria for Care:

- Child has been abandoned and there are no family network options
- Parents are deceased and there are no family network options
- Parents are in prison and there are no family network options
- Parents in hospital and no family network options
- Child whose welfare and development can only be safeguarded through provision of accommodation outside of the family network
- Child is beyond parental control and there are no family network options
- Meets criteria for secure accommodation
- Child remanded to local authority accommodation/youth detention accommodation
- Unaccompanied asylum-seeking children who requires accommodation
- Eligible and relevant care leavers
- Children and young people whose adoption placement has broken down and there are no family network options