

Service: Children and Young People's Services
Title: Eligibility guidance
Manual: Children in Need
Procedure Number: CIN/009
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INTRODUCTION

All referrals to Safeguarding and Specialist Services (SASS) are referrals of Children In Need. All new referrals are taken by Social Care Direct (SCD), screened and, if deemed to meet the eligibility criteria passed to the appropriate Team Manager. All urgent safeguarding referrals will be passed to the local children in need team where the child is resident.

Unless there are urgent safeguarding concerns, all referrals to Social Care Direct should be carried out following the completion of a CAF. The decision to refer will normally be taken by the team around the child, in consultation with the child and family.

ABBREVIATIONS

CIN	Children in Need Team
SCD	Social Care Direct
SASS	Safeguarding and Specialist Services
SSID	Social Services Information Database
Durham	Durham Local Children Safeguarding Board
LSCB	
IAT	Initial Assessment Team

CHILDREN IN NEED

Safeguarding and Specialist Services undertake assessments of children, under the Children In Need Procedures, where a child's health or development is being impaired or there is a high risk of impairment without services (Section 17 Children Act 1989).

CHILDREN IN NEED OF PROTECTION

The Children Act 1989 states the Local Authority has a duty to carry out inquiries to determine what action is needed to safeguard and promote a child's welfare if they 'have reasonable cause to suspect a child who lives, or is found, in their area is suffering, or is likely to suffer significant harm'. (Section 47 Children Act 1989)

If the Initial Assessment determines that there are safeguarding concerns the assessment will be carried out under the LSCB Procedures.

MAKING A REFERRAL

Parent's permission or the child's permission where appropriate, should be sought before discussing a referral about them with other agencies, unless permission seeking may itself place a child at increased risk of significant harm. (Working Together to Safeguard Children 2006).

This discussion should normally take place once a CAF has been completed, and a review of the work carried out following the CAF has been undertaken by the Team around the Child.

Social Care Direct (telephone number **0845 50 50 10**) will advise, re direct or take a referral.

They will need as much of the following information as possible to complete the referral:-

- Referrer's details.
- Child's name, date of birth, address, telephone number, gender, ethnicity, religion and family composition.
- Child's nursery or school
- Child's GP
- A concise outline of the current situation.
- Relevant history.
- Any known/potential risks to staff.

INITIAL ASSESSMENT TEAM

The Initial Assessment Team is a countywide team.

The IAT considers the following referrals:-

- ***Risk of family breakdown**** (examples – young person beyond parental control, deteriorating parent/child relationships)
- ***Domestic abuse*** (examples –a pattern of reported incidents (**or incident**) of domestic abuse which indicates that an initial assessment should be undertaken to identify the potential impact on the child(ren) in the household, a Multi-agency risk assessment conference -MARAC- is in operation)
All referrals to MARAC where there are children in the family require an initial assessment
- ***Young carers with complex needs**** (example - young person caring for a parent where the situation is having a significant impact on his/her own health, development and well being)

- **Where there are significant concerns about the parenting capacity of a first time parent.**
- **Private fostering arrangements*** i.e. a private arrangement between the person(s) with parental responsibility and another adult who is not a close relative of the child.) (examples – young person, under the age of sixteen, living with a boyfriend/girlfriend’s family. Child staying with family friend for a period likely to exceed 28 days)
- **Concern re. Parenting Capacity because of physical, intellectual, emotional or social reasons**** (examples - parent with mental health problems causing emotional distress. Parent with alcohol/drug misuse problems impacting on child’s welfare)
- **A child scapegoated or marginalised within the family unit**** (example – child constantly being seen as ‘the problem’. Complete lack of emotional warmth)
- **Children who put themselves at risk through their behaviour** (examples - missing from home often or for long periods of time, prostitution, chronic substance misuse)**
- **Children with emotional or behavioural difficulties whose parents require support beyond what is available through universal services, or, those who persistently decline support.**** (example - a child whose behaviour may cause them to be at risk through parental over- chastisement)
- **Prolific young offenders, with complex needs, who require a multi agency assessment.**
- **Parental substance misuse – where agencies are concerned about parent/carer’s capacity to meet the needs of child without additional support [if concerned about significant harm, matter will be dealt with as a child protection inquiry by CIN team]**

Workers from the Initial Assessment Team will give appropriate advice/information or signpost to an appropriate service. Where an assessment indicates that a service is required the case will be transferred to the locality Children In Need Team.

The target for completion of initial assessments is seven working days from the date of referral.

*** The Local authority has particular duties towards this group of children.**

**** These referrals would be allocated based on assessed priority and the availability of resources**

CHILDREN IN NEED TEAMS

Children In Need teams are locality based and consider the following referrals:-

- *Children at risk of significant harm**
- *Requests for reports from the Courts (examples – S. 7 welfare report. S37 concern for welfare of child report, special guardianship reports)*
- *Requests for finance** (Please note that financial help is very limited and must be agreed by the finance panel) Families should normally access financial assistance through The Dept for Work and Pensions [Jobcentre plus]. (example – severe hardship which may cause a child to be accommodated).*
- *Transfers from other Local Authorities.
(example – child subject to a child protection plan*
- *Cases closed to a Children in Need Team within the previous 12 weeks.*
- *Joint protocol meetings for homeless 16/17 year olds [Young People's Service now covers these for South area and will be covering for East from January 2009] (examples – young person is also a parent, has complex needs that cannot be met by other agencies).*
- *Unaccompanied asylum seekers* [Young People's Service now covers these for South area and will be covering for East from January 2009]*
- *Unborn babies (examples – where previous children have been removed from parents'
Care -where siblings are subject to a child protection plan -where there are significant concerns about parenting capacity of a first time parents.*
- *Assessments for prison visits.*

CONSENT

Children in need of protection

While in general, you should seek to discuss any concerns with the family and, where possible, seek their agreement to making referrals, this should only be done where such discussion and agreement-seeking will not place a child at increased risk of significant harm or lead to interference with any potential investigation.

Gaining consent to refer is good practice, but not required, if a child is:

- *Privately fostered**– notification is a legal responsibility
- or
- *An unaccompanied asylum seeker**

Children in Need

There is an expectation that consent will be sought in all other instances as this promotes working in partnership with families, facilitates cooperation and is more likely to lead to positive outcomes for children. If a referral is made without consent, the referrer will need to clearly establish the reasons for this at the point of referral.

CHILDREN IN NEED - APPROPRIATE REFERRALS

Ensuring that children's needs are met appropriately is the responsibility of all agencies involved with them and their families. SASS provide targeted and specialist services for children and young people where there are assessed needs.

Prior to making a referral to SASS, consideration should be given to the complexity of the child's needs and the need for an assessment. Complex situations requiring co ordination of services and in depth assessment are appropriate referrals under the Children In Need Procedures.

Referrals should be specific to an individual child and not on sibling groups, unless the referrer believes each one requires an assessment.

Where there is only one specific issue the identified need may be best met within universal services such as health or education, or it may be more appropriate to refer to another agency/service e.g:-

- Self harm – Child and Adolescent Mental Health Service (CAMHS)
- Non school attendance – Education Welfare officers (EWOs)
- Isolated young parents – Children's Centres (previously Sure Start), - Parent and Toddler Groups etc.
- Contact/Residence disputes between estranged parents – Solicitors' advice.

The Local Authority also supports organisations that offer services to children and young people e.g:-

- Young Carers project – DISC/ Barnardos.
- Family Support Services.
- SHAID, DART and Moving On – homeless young people.

For information about local support groups, activities, charities etc, see Durham County Council's Community Information Database on the DCC website.

CHILDREN IN NEED OF PROTECTION REFERRALS

While, in general, it is best to discuss any concerns with the family and where possible, seek their agreement to making referrals, this should only be done where such discussion and agreement-seeking will not place a child at increased risk of significant harm, or lead to interference with any potential investigation.

Children in need of protection referrals include:-

- A child with an unexplained or suspicious injury.
- Observed injury to an immobile baby, or suspicious bruising to a mobile baby.
- A child who has alleged physical or sexual abuse.
- A child who is suffering specific incidents of emotional abuse or neglect that is harming, or likely to harm their health and/or development (including non-organic failure to thrive).
- A child physically hurt in, or witness to, a serious incident of domestic abuse (even inadvertently) or affected by a chronic history of domestic abuse.
- A child where a person deemed to be a risk to children has moved/plans to move into the household – or there is regular contact.
- An allegation suggesting connections between sexually abused children in different families, or more than one abuser.
- Induced or fabricated illness
- Serious concern about the risk of significant harm to an unborn baby.
- A young/vulnerable child left alone (if child is known to be alone the police should be contacted immediately at that time).
- A child who is the subject of parental delusions which implies risk.
- Sexual activity in children under the age of 13 (13-15 year olds if there are concerns about coercion, abuse or power imbalances etc).
- Baby born with neonatal abstinence syndrome.
- Concerns about sexual exploitation or trafficking

- Forced marriage and honour crimes
- Concerns of possible physical or emotional neglect need to be carefully considered as potential safeguarding issues. It is important to give priority to compiling a full chronology. Associated child development and attachment issues may need careful assessment. The pattern of parenting may give important information as to the type of response required. This could include the type and nature of family interactions and patterns of child rearing. Links to any other problems areas such as substance misuse and /or domestic violence could provide crucial information in determining the required response.

DISABLED CHILDREN & THEIR FAMILIES

The Disabled Children's Service provides the whole range of assessments and interventions for disabled children and their families, including all Initial assessments, Core Assessments, Section 47 enquiries and Looked After Children's services. All the above can also apply to disabled children. Referrals are made to Social Care Direct and then, if appropriate, redirected to the Disabled Children and their families service

The Disabled Children and their Families considers referrals in respect of children with:-

- *A significant and long-term physical or sensory impairment.*
- *A severe learning disability.*
- *A life threatening or life-limiting medical condition.*
- *A severe communication disorder.*

A parent/carer's assessment is part of the holistic Initial/ Core Assessment

See; Appendix 1 to CIN/019
Disabilities Threshold Grid - Appendix to CiN/020
New appendix; Parent/Carer's assessment

YOUNG PEOPLE'S SERVICE

The Young People's Service is a multi-agency service which provides the Leaving Care Service for DCC. It also provides the CiN service for young people age 16 (who have left school) and age 17

The Young People's Service covers Initial and Core Assessments for South area and will be covering for the East area from January 2009.

COMMUNITY SUPPORT TEAM

The Community Support Team provide support to young people and their families where an assessment highlights there is a risk of relationships breaking down and young people are at risk of entry into the care system.

They also undertake appropriate assessments in parts of the County following liaison with the Initial Assessment/Children In Need Teams.

RELATED DOCUMENTATION

CIN/004 Children in Need Process

ECM in Co Durham

CAF Guidance April 2008

CiN flowcharts CiN/19A, CiN/19B

Durham LSCB <http://durham-lscb.gov.uk/>

Durham Local Safeguarding Children Board 'Practice guidance for assessing neglect'.