

Derby and Derbyshire Integrated Working

Neglect & Graded Care Profile

Assessment Tool Template





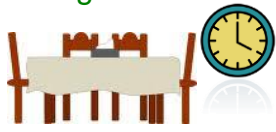
February 2017

Version Control

| Please note this joint document replaces the previously published Derby Neglect and Graded Care Profile Practice Guidance first published in 2011 and updated in 2015. | | | | | |
|---|--|-------------------|----------------------------------|---------------|---|
| Version | Author/s | Amendments | Signed off by | Date | Review Date |
| 1. | Head of Service and Team Manager, People Services, Derby City Council and Principal Practitioner Early Help, Derbyshire County Council | - | DSCB Policy and Procedures Group | February 2017 | Subject to publication of NSPCC GCP2 and local review |





Explanatory Table

A. Area of Physical Care

| Sub-areas | 1. Prioritises child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|---|--|---|---|--|--|
| 1. Nutrition  | | | | | |
| a. Quality  | Aware and thinks ahead. Provides quality food and drink. | Aware and provides reasonable quality food and drink. | Provides quality food sometimes, but not all the time. | Provides quality food occasionally if prompted. | No adequate food provided or lies about quality. |
| b. Quantity  | Plenty. | Enough. | Patchy, irregular | Small amount to mostly low, hardly any. | Mostly low or starved. |
| c. Preparation  | Well-cooked/ prepared for the child. | Prepared for the family always thinking of the child's needs. | Very little preparation and mainly for the adults, child sometimes thought about. | Hardly any preparation. If there is, child's need or tastes not thought about. | No preparation. Child lives on snacks, cereals or takeaways. |
| d. Organisation  | Meals carefully organised, seated, timing and manners. | Well organised, often seated, regular timing. | Poorly organised, no routine. | Poorly organised, no clear meal time. | Chaotic, eat when and what one can. |






Explanatory table

Area of physical care continued ...

| Sub-areas | 1. Prioritises child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|--|--|--------------------------------------|---|---|--|
| 2. Housing  | | | | | |
| a. Maintenance  | Home safely maintained, warm and clean to support the child's needs. | Well maintained home. | Home repairs satisfactory. | In disrepair but could be repaired easily. | Dangerous disrepair but could be repaired easily e.g. exposed nails, live wires. |
| b. Decoration  | Very good standard. Child's taste specially considered. | Good, child's taste considered. | In need of decoration but reasonably clean. | Unclean and ingrained dirt. | Long term ingrained dirt. Bad odour. Unclean, grubby, smells. |
| c. Facilities  | Essential and additional fixtures and fittings; good heating, shower and bath, play and learning facilities. | All essential fixtures and fittings. | Bare facilities, not all fixtures in working order to prioritise child. | Adult's needs for safety, warmth and personal needs come first. | Child dangerously exposed or essentials not provided. |
| NOTE: Discount any direct external influences like repair done by other agency but count if the carer has spent a loan or a grant on the house or had made any other personal effort towards house improvement. | | | | | |





Explanatory table

Area of physical care continued ...

| Sub-areas | 1. Prioritises child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|---|--------------------------------------|--|--|---|---|
| 3. Clothing / School wear  | | | | | |
| a. Right for the weather  | Well protected with quality clothes. | Well protected, with suitable clothes. | Adequate to variable weather protection. | Inadequate weather protection. | Dangerously exposed. |
| b. Do they fit  | Properly fitting. | Clothes fit well enough. | Clothes a little too large or too small. | Clothes clearly too large or too small. | Grossly improper fitting. |
| c. Look age 0-5  | Newish, clean, ironed. | Clean and ironed. | Repairs lacking, usually not quite clean, ironed or discoloured | Worn, somewhat dirty and crumpled. | Dirty, badly worn crumpled and, odour. |
| Look age 5+  | Newish, cleaned and ironed. | Cleaned and ironed. | Repairs lacking, usually not quite clean, ironed or discoloured. Child may do own repairs. | Same as above unless child does own washing. Even under 7 same, as above. | Child unable to help him/herself therefore same as above. |



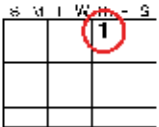

Explanatory table

Area of physical care continued ...

| Sub-areas | 1. Prioritises child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|---|--|---|---|---|---|
| 4. Hygiene  | Consider teeth cleaning, bathing, nappies changed, skin cared for. | | | | |
| Age 0 to 4  | Cleaned, bathed and hair brushed more than once a day. | Regular, almost daily. | No routine. Sometimes bathed and hair brushed/teeth not always cleaned appropriately. | Occasionally bathed but hair hardly brushed. | Hardly bathed or clean. Hair never brushed. |
| Age 5 to 7  | Some independence at above tasks but always helped and supervised. | Reminded and products provided for regularly. Watched and helped if needed. | Reminded now and again and products provided. Sometimes watched. | Reminded only now and then, minimum supervision. | Not bothered. |
| Age 7+  | Reminded, followed and helped regularly. | Reminded regularly and encouraged if lapses. | Irregularly reminded, products not provided consistently. | Left to their own initiative. Provision minimum and inconsistent. | Not bothered. |




Explanatory table

Area of physical care continued ...

| Sub-areas | 1. Prioritises child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|--|--|--|---|--|---|
| 5. Health  | For consideration: <ul style="list-style-type: none"> • Are the children registered with a GP and dentist? • Has the child got a disability? | | | | |
| a. Opinion sought  | Not only on illnesses but also other genuine health matters thought about in advance with care. | From professionals/ experienced adults on matters of genuine and immediate concern about child health. | On any illness or frequent unnecessary consultation and/ or medication. | Only when illness becomes moderately severe. Delayed consultation. | When illness becomes critical (emergencies) or even that ignored. |
| b. Follow up  | All appointments kept. Rearranges if problems. | Fails one or two appointments due to doubt about their usefulness or due to current practical arrangements. | Fails one or two appointments even if of clear benefit for reasons of personal inconvenience. | Attends only after reminders. Doubts its usefulness even if it is of clear benefit to the child. | Fails needed follow ups despite reminders. Misleading explanations for not attending. |
| c. Health checks and development  | Visits in addition to the scheduled health checks, up to date with immunisation unless genuine reservations. | Up to date with scheduled health checks and immunisation unless exceptional or practical problems. Plans in place to address this. | Doesn't take child for checks unless persuaded. Lacks organisation to take child for checks. | Does not take child for appointments but accepts if accessed at home. | Clear disregard of child's welfare. Blocks home visits. Shows no compassion of child's needs. |
| Compliance = accepting professional advice at any venue and carrying out advice given. | | | | | |



Explanatory table

B. Area of care of safety

| Sub-areas | 1. Prioritises child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|--|--|---|--|--|--|
| 1. Safety adults - in presence | | | | | |
| a. Awareness  | Good awareness of safety issues however remote the risk. | Aware of important safety issues. | Poor awareness and understanding except for immediate danger. | Does not understand safety risks. | Understands safety risks but not motivated to be bothered about them. |
| NOTE: Please refer to the item (Safety Features) and the note below it. | | | | | |
| b. Managing safety in practice | | | | | |
| Child cannot move  | Very cautious with handling and laying down. Child seldom left alone. | Cautious whilst handling and laying down. Frequent checks if child is unattended. | Handling is sometimes careless. Child sometimes left unattended when lying within the house. | Handling is rough. Child left unattended even during care chores e.g. bottle left in the mouth when feeding. | Dangerous handling, child left dangerously unattended during care chores like bath time. |
| Child is moving  | Constant attention to safety. Effective measures against any dangers when child is up and about. | Effective measures against any danger about to happen. | Measures taken against danger about to happen are inconsistent. | Ineffective measures against danger put in place, if at all. Carer does not learn from past incidents. | Carer exposes child to dangers e.g. dangerously hot iron nearby. No supervision. |

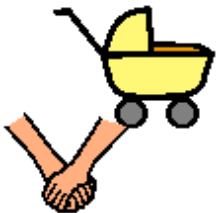
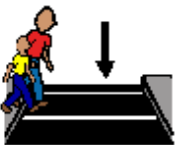
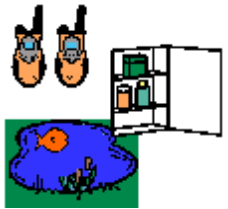
Explanatory table

Area of care of safety continued.....

| Sub-areas | 1. Prioritises child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|---|--|--|---|--|--|
| b. Managing safety in practice continued ... | | | | | |
| Age range 4-11 years  | Close supervision indoors and outdoors. | Supervision indoors. No direct supervision outdoors if known to be at a safe place. | Inconsistent supervision indoors or outdoors. Carer acts if child is in noticeable danger. | No supervision, carer intervenes after incidents. Carer does not learn from past incidents. | Carer ignores minor mishaps or the child is blamed; carer intervenes casually after major incidents e.g. no medical intervention if child is seriously hurt. |
| Senior School 11+ years  | Carer allows child out in known safe surroundings within appointed time. Checks if child goes beyond set boundaries. | Carer allows child out in unfamiliar surroundings if thought to be safe and whereabouts known. Carer gives reasonable time limits and checks if worried. | Carer not always aware of whereabouts when child outdoors. Carer believes it is safe as long as child returns at agreed time. | Carer not bothered about whereabouts of child in the daytime, but concerned about child being out late at night. | Carer not bothered despite knowledge about child being out any time day or night and possibly going to dangerous places. |


Explanatory table

Area of care of safety continued.....

| Sub-areas | 1. Prioritised Child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|---|--|--|--|---|--|
| c. Safety in and out of the home.eg crossing roads | | | | | |
| Age 0 – 4  | Child is well secured in the pram, harnesses or, when walking, hand held by carer. Walks at child's pace. | 3-4 year old allowed to walk but close by, always in vision of carer. Child's hand held if necessary e.g. in a crowd. | Infants not secured in pram. 3-4 year old expected to catch up with adult when walking. Adult only glances back now and then if left behind. | Babies not secured. 3-4 year olds left far behind when walking or dragged with irritation. | Babies unsecured, careless with pram. 3-4 year old left to wander alone. |
| 5 and above  | 5 – 10 year old crosses a road escorted by an adult. Adult and child walk close together. | 5-8 year old allowed to cross road with a 13+ child. 8-9 allowed to cross a road alone if they reliably can. | 5-7 year olds allowed to cross with an older child under 13 years old. 8-9 year old allowed to cross a road alone. | 5-7 year old allowed to cross a busy road alone because carer believes this is safe. | A child 7 years old or younger is allowed to cross a busy road alone. Carer has no concern or thought if this is safe. |
| d. Safety Features at home.  | Lots of safety features i.e. gate, guards, drug lockers, electrical safety devices, intercom to listen to the baby, safety with garden pond and pool. Carers know how to install a car seat. | Essential features: secure doors, window and any heavy furniture item. Safe gas and electrical appliances, drugs and toxic chemicals out of reach, smoke alarm fitted and working. | Not all safety features in place but carer is aware of them and working to sort them out. | No safety features. Some possible hazard due to disrepair e.g. tripping hazard due to uneven floor, unsteady heavy fixtures, unsafe appliances. | Definite hazard due to disrepair e.g. exposed electric wires and sockets, unsafe windows possibly with broken glass, dangerous chemicals, drugs or alcohol lying around. |
| Note: This item, along with other safety provisions, which are not a fixture, like a bicycle helmet, safety car seats, sports safety wear etc. can be used to score for item 'a' (Awareness of Safety). | | | | | |

Explanatory table

Area of care of safety continued.....




| 2. Supervision, in absence | 1. Priorities child | 5. Child not considered |
|---|---|---|
|  | Consider all carers for this child or children. | |
| | <p>Child is left in the care of a person that you know and who, to the best of your knowledge, is a suitable competent carer.</p> | <p>Child is left with a person you:</p> <ul style="list-style-type: none"> • Don't know very well • Have only just met • Known to be aggressive or violent • Known to use drugs and/or alcohol regularly • Known to use drugs and/or alcohol when children are present • Known to have very little experience of childcare • Known to be very disorganised |

Explanatory table

C. Area of care love and attachment



Attunement: Carer can instinctively meet child's emotional needs

Signal's: Crying, smiling, eye contact, arms held up, avoidance

| Sub-areas | 1. Prioritises child | 2. Tries to put child first | 3. Child and Carer equal | 4. Child second | 5. Child not considered |
|--|---|---|---|--|--|
| 1. Carer | | | | | |
| a. Sensitivity  | Carer and child are totally in tune with one another. Carer picks up even unobvious, small signals. | Some attunement. Carer is able to pick up obvious signals. | Some attunement. Carer not consistent in picking up obvious signals. | Very minimal attunement. Carer only picks up repeated prolonged signals. | No attunement. Carer does not pick up on any signals and appears to dislike child. |
| b. Timing of response to distress/needs  | Responds naturally at the time of signals or in anticipation of them. | Responds when able to at times of signals unless otherwise occupied by essential tasks. | Does not respond at time of signals if occupied in meeting own, non-essential needs. Will respond if not occupied or child in distress. | Responses are small and delayed even when child is distressed. | No response unless failure to do so will result in carer being criticised/blamed. |
| c. Quality of attachment/relationship  | Warm and loving. Emotional and material needs always met in full. Carer shows upset by distress of child. | Material responses met most of the time e.g. bedtime/mealtimes. Emotional responses are warm and reassuring, whatever mood the carer is in. | Emotional responses can be warm if carer is emotionally available (not absorbed by other thoughts) and in a good mood. Material responses may be met in an automatic way. | Emotional response is poor, brisk and flat. Material responses only met if child is in distress. | Ignores child's emotional/material needs to the point of disliking/blaming child. |





Explanatory table

Area of care: **Love and Attachment continued**; Stimulation and Interactions, activities completed together with communication

| Sub-areas | 1. Prioritises Child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|---|--|--|--|---|---|
| 2. Mutual Engagement | | | | | |
| a. Starting interactions  | Carer and child both comfortable in starting interactions. Carer starts this frequently. | Carer and child start interactions with the same frequency. There are positive attempts to start interaction by carer, even if child's behaviour is difficult. | Mainly child who starts interaction. Carer sometimes starts interaction but is negative if child's behaviour is difficult. | Child starts interactions most of the time. Carer rarely starts interactions. | Neither child nor carer starts interactions. Child appears to know adult will not respond or appears worried/frightened to start any interaction. |
| b. Quality  | Both child and carer get pleasure from interactions. Child/carer clearly enjoy it. | Interactions occur frequently and are enjoyed by both child/carer. | Carer is not bothered about interactions and only gets some enjoyment. Child enjoys interactions more. | Only interacts for practical purposes, no pleasure gained by carer. Indifferent to child's attempts to interact for pleasure. | Carer dislikes any form of enjoyable interaction with the child. Only interacts for practical reasons e.g. dressing/feeding. Child knows they have to amuse his/her self. |
| Caution: If child has temperamental/behavioural problems, scoring in this sub-area (mainly quality item) can be affected unjustifiably. Scoring should be done on the basis of score in area of 'carer' (C/1) alone and problem noted as comments. | | | | | |

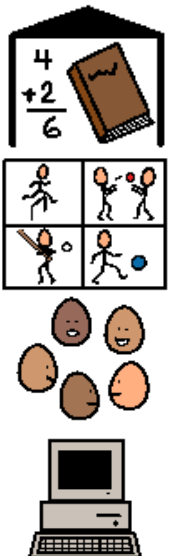
Explanatory table

D. Area of care of esteem

| Sub-areas | 1. Priorities child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|---|---|---|--|--|--|
| 1. Stimulation | | | | | |
| Age 0-2 years  | Plenty of appropriate stimulation e.g. talking, touching, looking. Plenty of equipment. | Enough and appropriate intuitive stimulation (See below), less showy toys, gadgets, outings and celebrations | Inadequate and inappropriate. Baby left alone while carer pursues own amusements; sometimes interacts with baby. | Baby left alone while adult gets on with pursuing own amusements unless strongly sought out by the baby. | Absent. Even mobility restricted e.g. confined in chair/pram for carer's convenience. Cross if baby demands attention. |
| Age 2-5 years    | <p>i. Interactive stimulation e.g. talking to, playing with, reading stories and topics. Plenty and good quality.</p> <p>ii. Toys and gadgets e.g. items of uniform, sports equipment, books. Plenty and good quality.</p> <p>iii. Outings e.g. taking the child out for recreational purposes. Frequent visits to child centred places locally and away.</p> <p>iv. Celebrations both seasonal and personal, child made to feel special.</p> | <p>i. Sufficient and of satisfactory quality.</p> <p>ii. Provides all that is necessary and tries for more, makes do if unaffordable.</p> <p>iii. Enough visits to child centred places locally e.g. parks and occasionally away e.g. LEGOLAND, zoos.</p> <p>iv. Equally keen and eager but less showy.</p> | <p>i. Variable, adequate if usually doing own thing.</p> <p>ii. Essentials only. No effort to make do if unaffordable.</p> <p>iii. Child accompanies carer wherever carer decides, usually child friendly places.</p> <p>iv. Mainly seasonal (Christmas) low key personal (birthdays).</p> | <p>i. Scarce, even if doing nothing else.</p> <p>ii. Lacking on essentials.</p> <p>iii. Child simply accompanies, holidays or locally e.g. shopping. Plays out doors in neighbourhood.</p> <p>iv. Only seasonal, low key to keep up with the rest.</p> | <p>i. Nil.</p> <p>ii. Nil, unless provided by other sources e.g. gifts or grants.</p> <p>iii. No outings for the child, may play in the street but carer goes out locally e.g. to pub with friends.</p> <p>iv. Even seasonal festivities absent or dampened.</p> |

Explanatory table




Area of care of esteem continued.....

| Sub-areas | 1. Priorities child | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|--|---|--|---|--|---|
| 1. Stimulation continued.... | | | | | |
| Age 5+ years  | i. Education: active interest in schooling and support at home. ii. Sports and leisure: well organised outside school hours e.g. swimming, clubs. iii. Friendships: encouraged and checked out iv. Provision: stylish e.g. sports gear, computers. | i. Active interest in schooling, support at home when can. ii. All affordable support. iii. Carer offers some help. iv. Well provided and tries to provide more if could. | i. Maintains schooling but little support at home even if has spare time. ii. Little effort in finding out but takes up opportunities at doorstep. iii. Accepts if a friend is from a supportive family with carer. iv. Poorly provided. | i. Little effort to maintain schooling or mainly for other reasons like free meals etc. ii. Child makes all the effort, carer not bothered. iii. Child finds own friends, no help from carer unless reported to be bullied. iv. Under provided. | i. Not bothered or can even be discouraging. ii. Not bothered even if child is doing unsafe/unhealthy activity. iii. Not bothered. iv. No provision. |

NOTE: Whichever describes the case best should be ticked as the score; in the event of a tie choose the higher score.

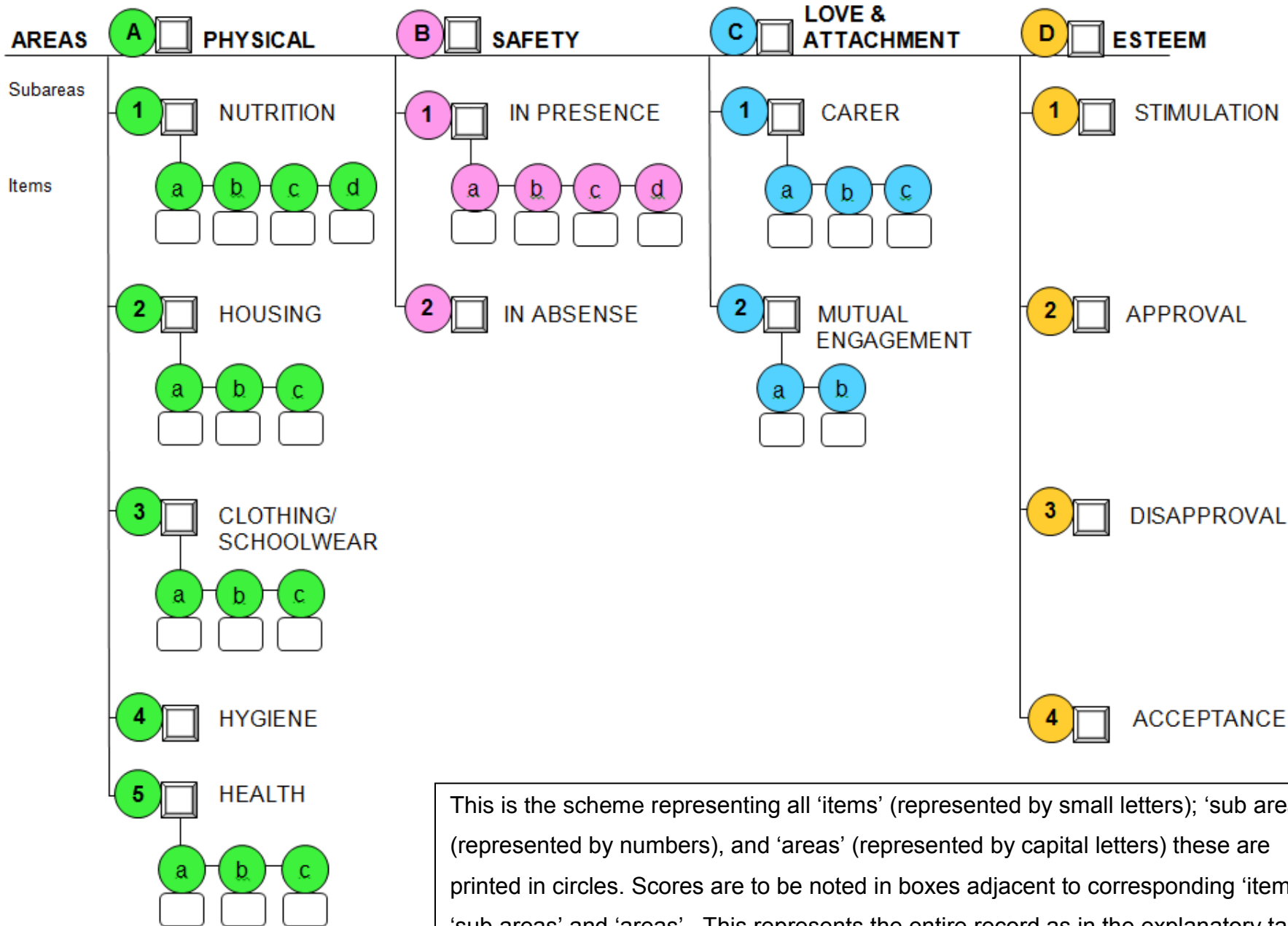
Explanatory table

Area of care of esteem continued.....

| Sub-areas | 1. Child priorities | 2. Tries to put child first | 3. Child and carer equal | 4. Child second | 5. Child not considered |
|---|--|---|--|---|---|
| 2. Approval  | Talks about the child with delight/praise without being asked. Material and generous emotional reward for any achievement. | Talks fondly about the child when prompted. Able to praise and give emotional rewards. | Agrees if other's praise child, but only able to praise and emotionally reward in an uninterested/unengaged way. | Indifferent to child's achievements. , Does not praise child or acknowledge other's praise of child. | No recognition of child's achievement. If child is praised by others, this is rejected or the child is criticised. |
| 3. Disapproval  | Mild verbal and consistent disapproval if set boundary crossed. Carer and child are quickly in tune with one another again. | Mild verbal and consistent disapproval, mild physical and mild sanctions if boundary is crossed. Relationship is quickly re-attuned. | Terse/shouts. Inconsistent boundaries or methods used. Ignores unwanted behaviour for own convenience. Mild physical and moderate sanctions. Relationship can take a while to re-attune. | Harsh shouts. Moderate physical or severe sanctions. No boundaries. Child's behaviour escalates due to what he/she is experiencing. Carer and child are not in tune with one another and the relationship is tense. | Terrorised, ridiculed, severe physical or equally cruel sanctions. Child's behaviour is unpredictable and challenging due to what he/she is experiencing. Child distrusts carer and there is no relationship. |
| 4. Acceptance  | Unconditional acceptance. Always warm and supportive regardless of child's achievements/behaviour. Carer responds appropriately to poor behaviour/lack of achievement. | Tries to be warm and supportive even when temporarily upset by lack of child's achievement or poor behaviour. Tries to respond appropriately to this. | Carer becomes annoyed about poor behaviour/failure of child's achievement. | Carer is unsupportive or rejecting if child is not achieving or behaviour is poor. | Indifferent if child is achieving or behaviour is poor but rejects child if mistakes are made or child fails. Exaggerates child's mistakes |

NOTE: If the style of parenting (over protective, permissive to foster independence, authoritarian) or type of values instilled is of concern, please make a note in the corresponding comment box on the record sheet.

Scoring Sheet



This is the scheme representing all 'items' (represented by small letters); 'sub areas' (represented by numbers), and 'areas' (represented by capital letters) these are printed in circles. Scores are to be noted in boxes adjacent to corresponding 'items', 'sub areas' and 'areas'. This represents the entire record as in the explanatory table for full reference.

Summary sheet

Name (Child): _____ Date of Birth: _____

Main Carer/s: _____

Carer/s signature/s of consent to complete a GCP: _____

Scorer's Name: _____

Scorer's Signature: _____ Date: _____

| Area | Sub-Area | Scores | | | | | Area Score | Comments |
|----------------------|----------------------------|--------|---|---|---|---|------------|----------|
| A. Physical | 1. NUTRITION | 1 | 2 | 3 | 4 | 5 | | |
| | 2. HOUSING | 1 | 2 | 3 | 4 | 5 | | |
| | 3. CLOTHING/ SCHOOLWEAR | 1 | 2 | 3 | 4 | 5 | | |
| | 4. HYGIENE | 1 | 2 | 3 | 4 | 5 | | |
| | 5. HEALTH | 1 | 2 | 3 | 4 | 5 | | |
| B. Safety | 1. IN CARER'S PRESENCE | 1 | | 5 | | | | |
| | 2. IN CARER'S ABSENCE | 1 | | 5 | | | | |
| C. Love & Attachment | 1. CARER | 1 | 2 | 3 | 4 | 5 | | |
| | 2. MUTUAL ENGAGEMENT | 1 | 2 | 3 | 4 | 5 | | |
| D. Esteem | 1. STIMULATION | 1 | 2 | 3 | 4 | 5 | | |
| | 2. APPROVAL | 1 | 2 | 3 | 4 | 5 | | |
| | 3. DISAPPROVAL | 1 | 2 | 3 | 4 | 5 | | |
| | 4. ACCEPTANCE | 1 | 2 | 3 | 4 | 5 | | |

Targeting Particular Item of Care:-

Any item with disproportionately high score can be identified by reference to the explanatory table by writing the area, sub area and item i.e. physical/nutrition/quality in the table below.

| 1 | Targeted items (area/sub area/item) | Current Score | Period for change | Target Score | Actual Score after first review |
|---|--|------------------|----------------------|-----------------|---------------------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |

I have seen the completed GCP scores for my child. Parent/ carer comments:

Signed:

Date: