Right help, right time
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Promoting children’s welfare is most effective when they receive help early and at a level according to their needs. The aim is to provide early interventions for children, young people and families that require support in order to prevent them moving towards higher levels of need, and to reduce the levels of need once these have been identified.

This guidance is for practitioners in all agencies working with children, young people and their families in Coventry. This guidance will assist professionals to identify the support that a child, young person or family might need and how best this support can be provided. It replaces all previous Threshold Guidance or Levels of Need Documents.

This guidance will never provide all the answers, nor will it ever take the place of talking to each other – or the exercise of sound professional judgement and good communication.
Children, young people and families will move between levels of need according to circumstances, so services need to be flexible to meet need as it changes.

Most children’s development needs can be met solely through universal services such as health, education, housing and the voluntary and community services sector. However, some children may need further help in order to maintain a good level of development and achieve good outcomes. This may be due to disability, disadvantaged circumstances or poor standards of parenting. These children may need targeted services and interventions from a wide range of agencies in order to meet their needs and safeguard their welfare, including intervention to keep them safe from harm.

All services are expected to meet the needs of all children, young people and families who require additional support. All agencies should make reasonable adjustments to enable them to access services, as required under the Equality Act 2010.

The continuum of need in Coventry has four levels. These should help professionals to decide what assessments and support that children, young people and families may require to meet their needs.
The Identifying Need table (Section 9) provides examples of presenting risks, needs or concerns and gives an indication of the level of need that may be most appropriate.

This should be used by professionals as a guide to support their decision making and will ensure that the child, young person or family they are worried about will get the right help and support.

Professionals should consider the need for an Early Help Assessment (Section 5) for a child or young person who is:

- Showing early signs of neglect, for example in physical presentation or behaviours.
- Disengaged from education, including poor attendance.
- Displaying behaviours which impact on their emotional and physical wellbeing such as alcohol/drug misuse or episodes of missing from home.
- At risk of Child Sexual Exploitation (CSE).
- Showing signs of engaging in anti-social or criminal behaviour.

- Living in a family where the child may be suffering adverse experiences, such as parental/carer substance misuse, mental health and/or domestic abuse.
- Has a permanent disability and has associated additional needs.
- Has special education needs.
- Disadvantaged by poor parenting.

Practitioners are encouraged to seek advice from their own manager and their agency Safeguarding Lead/Team if they are unsure about how to determine the level of need a child, young person or family may be presenting. It is also advisable to make contact with other agencies who are, or who have been involved with the family as they may have information relevant to the decision making process.
Once professionals have determined the level of need a child, young person, or family presents they are responsible for taking appropriate action. The following table shows the likely course of action dependent on the level of need and risk identified. However, this may vary depending on the individual circumstances.

More detail about the relevant assessment and referral processes is in the following pages.

<table>
<thead>
<tr>
<th>Level 1 - Universal</th>
<th>Level 2 - Early Help</th>
<th>Level 3 - Multi-agency Early Help</th>
<th>Level 4 - Statutory Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>No additional needs</td>
<td>Additional needs meaning there is a risk of poor outcomes</td>
<td>Additional needs meaning poor outcomes are likely</td>
<td>Acute needs - at risk of significant harm</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SOURCE OF HELP AND SUPPORT</th>
<th>ACTIONS</th>
</tr>
</thead>
</table>
| No additional help and support required. | • No additional assessment needed.  
• Check if children are in receipt of universal services and signpost to relevant service(s) if required. |
| Needs likely to be met through one agency acting alone. | • Early Help Assessment should be considered, but is not a requirement.  
• If an Early Help Assessment is not considered necessary, record action taken in single agency and to complete a record on Early Help Module (EHM) to show Early Help was provided with a reference number to where the case file is held.  
• For help and advice refer to Early Help Handbook (Section 5) or seek advice from your nearest Family Hub (Section 10). |
| Needs likely to require support through a co-ordinated multi-agency response. | • An Early Help Assessment is required.  
• If the child, young person or family are currently in receipt of Early Help new information should be sent to the services already involved, to update the Early Help Assessment/Plan.  
• For help and advice refer to Early Help Handbook (Section 5) or seek advice from your nearest Family Hub (Section 10). |
| Needs likely to require intervention from Children’s Social Care and/or the Police. | • If a child is in immediate danger you should contact the police and/or ambulance on 999. If there is no immediate danger a referral to Children’s Social Care should be made using the online Multi-agency Referral Form (MARF). |
What is the Early Help Assessment?

The Early Help Assessment replaces the previously used Common Assessment Framework (CAF) process in Coventry. The Early Help Assessment is used to assess the needs of the child, young person or family. It provides a framework for professionals and families to work together to improve outcomes for children.

When should an Early Help Assessment be completed?

An Early Help Assessment should be used at Level 3. Consideration should also be given to using an Early Help Assessment at Level 2. The Assessment will help to determine whether needs can be met via a single or multi-agency approach. It will also help to determine the help and support that a child, young person or family requires to meet their needs. It is important that the child and parent’s voice is captured as part of the Early Help Assessment process and that they understand and are committed to the action they need to take to improve their own outcomes.

In Coventry, multi-agency Early Help is co-ordinated through the Family Hubs. Professionals should contact the Family Hub that covers the area where the child, young person or family live to ensure all relevant agencies contribute to the assessment and any ongoing action plans.

More advice and guidance on completing Early Help assessments and using the Early Help Module for recording cases is being updated and can be found online here.

What happens once the Early Help Assessment is completed?

The completion of an Early Help Assessment should result in an Early Help Plan meeting. This meeting between the child, young person and family and professionals from all relevant agencies is required to develop an action plan that meets the needs of the child, young person or family.

The plan should then be reviewed at regular periods, normally six weeks, until the identified improved outcomes have been achieved. If at any point during the Early Help Assessment process risk is increased, professionals are concerned that the child or young person is suffering, or is likely to suffer, significant harm then a referral should be made to Children’s Social Care using the online Multi-Agency Referral Form (MARF).

A lead professional should be identified at the first Early Help Plan meeting. The lead professional ensures that agency involvement is rationalised, coordinated and communicated effectively. The lead professional should be appointed through consultation with the child or young person and their family together with the agencies involved in the plan. The lead professional can come from any agency. The person appointed to the role should be the professional most appropriate given the circumstances and the wishes of the child, young person and family. The name and contact details of the lead professional should be clearly communicated to the child, young person and family as well as all the professionals involved.

Further information about the Early Help process in Coventry is being updated and can be found online here.
If a professional considers that the level of need of a child or young person is such that they are at risk of significant harm (Level 4) then a referral to Children’s Social Care must be made, without delay.

Referrals should be made the same day as the concern is identified. The earlier in the working day a referral is made the better. This is particularly important where referrals are made by nurseries, schools and other educational establishments, so that decisions can be made whilst the child or young person is still in a safe place.

All referrals must be made using the online Multi-Agency Referral Form (MARF).

All names should be checked to ensure they are spelt correctly. All contact details should be checked to ensure they are up to date and accurate. Any supporting evidence (for example the Early Help Assessment) should be attached to the form when it is submitted.

When the MARF is submitted the referrer will receive a reference and a copy of the completed form. All referrals are considered by staff working in the Multi-agency Safeguarding Hub (MASH). Once a decision has been made about how the referral will be dealt with the referrer will receive written feedback.

If the referrer does not agree with the decision made then they should seek advice from their own manager and/or their agency Safeguarding Lead/Team. Coventry Safeguarding Children Board Escalation and Resolution of Professional Disagreements policy provides advice about how to resolve any disagreements in a timely fashion.
Early Help is a voluntary assessment process and, as such, a child, young person and their parent/carer must give consent at the start of the process, for the assessment to take place.

The child, young person and their parent/carer must understand what will happen to any information about them during the period they are receiving Early Help support. This should include how it will be stored and who will have access to it.

If a family does not agree to an Early Help Assessment, or stops engaging with a current plan, the lead professional determines if this results in a higher level of risk to the child that would require a referral to Children’s Social Care. If necessary they should speak with their respective manager or agency Safeguarding Lead/Team for advice.

Practitioners should be tenacious in their attempts to persuade parents/carers to give consent to Early Help. The purpose and benefits of the process should be explained clearly, emphasising that it is a process to determine the most appropriate type of support required for a child, young person or family.

Consent from the child, young person and their parent/carer is also required for a referral to Children’s Social Care, unless to do so would place the child at increased risk of significant harm. Where a professional decides not to seek parental permission before making a referral to children’s social care, the decision must be recorded in the child’s file with reasons, dated and signed and included on the MARF. In the event that the parent, carer or child does not consent to the referral, professionals should determine if the concerns justify making a referral without consent in any case. If necessary they should speak with their respective manager or agency Safeguarding Lead/Team for advice.

The following questions should be asked when seeking consent:

- Does the parent/carer and child/young person know that you are making the referral?
- Has the parent/carer and child/young person given consent to contact other agencies?
- Has the parent/carer and child/young person given consent for information to be shared with other partners, in order to provide them with appropriate help and support?
- How has the consent been sought and recorded?
Information sharing is essential to enable early intervention and preventative work for safeguarding and promoting welfare and for wider public protection.

A key factor identified in many serious case reviews (SCRs) has been a failure by practitioners to record information, to share it, to understand its significance and then take appropriate action. Further advice on information sharing is available online, here.

The seven golden rules of information sharing are illustrated on this poster.
### Section Nine: Identifying Need Table

<table>
<thead>
<tr>
<th><strong>Child's Developmental Need</strong></th>
<th><strong>Level 1 - Universal</strong></th>
<th><strong>Level 2 - Early Help</strong></th>
<th><strong>Level 3 - Multi-agency Early Help</strong></th>
<th><strong>Level 4 - Statutory Intervention</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>No additional needs</strong></td>
<td>Achieving milestones.</td>
<td>Slow in reaching developmental milestones, needs not consistently attended to.</td>
<td>Developmental milestones not being met due to persistent parental failure/ability.</td>
<td>Non-mobile child with injury.</td>
</tr>
<tr>
<td><strong>Family and Environmental Factors</strong></td>
<td>Access services appropriately e.g. e.g. health and education.</td>
<td>Parental learning or physical disabilities impacting on child's development or needs.</td>
<td>Parental learning or physical disabilities impacting on child's development or needs.</td>
<td>Non-organic failure to thrive.</td>
</tr>
<tr>
<td><strong>Accesses services appropriately e.g. health and education.</strong></td>
<td>Appropriate feeding, diet and nutrition resulting in age appropriate growth.</td>
<td>Parental advice needed to prevent escalation.</td>
<td>Parental Substance misuse or mental health issues impacting on child's development or needs.</td>
<td>Persistent permanent multiple disabilities.</td>
</tr>
<tr>
<td><strong>Parent ensures child is protected from danger.</strong></td>
<td>Good family relationships.</td>
<td>Parental advice needed to prevent escalation.</td>
<td>Parental Substance misuse or mental health issues impacting on child's development or needs.</td>
<td>Persistent or multiple relationships with unknown adults offending behaviour resulting in risk of significant harm.</td>
</tr>
<tr>
<td><strong>Secure tenancy.</strong></td>
<td>Accommodation has all basic required amenities.</td>
<td>Parental advice needed to prevent escalation.</td>
<td>Parental Substance misuse or mental health issues impacting on child's development or needs.</td>
<td>Frequently missing from home.</td>
</tr>
<tr>
<td><strong>Family able to manage financially using resources to meet needs.</strong></td>
<td>Family affected by low income or unemployment.</td>
<td>Parental advice needed to prevent escalation.</td>
<td>Parental Substance misuse or mental health issues impacting on child's development or needs.</td>
<td>High level emotional health issues.</td>
</tr>
<tr>
<td><strong>Access to positive activities.</strong></td>
<td>Family affected by low income or unemployment.</td>
<td>Parental advice needed to prevent escalation.</td>
<td>Parental Substance misuse or mental health issues impacting on child's development or needs.</td>
<td>Drug/alcohol misuse affecting development.</td>
</tr>
<tr>
<td><strong>Additional needs meaning there is a risk of poor outcomes</strong></td>
<td>Slow in reaching developmental milestones, needs not consistently attended to.</td>
<td>Parental advice needed to prevent escalation.</td>
<td>Parental Substance misuse or mental health issues impacting on child's development or needs.</td>
<td>Teenage pregnancy under 13 years.</td>
</tr>
<tr>
<td><strong>Level 2 - Early Help</strong></td>
<td>Unsafe use of the internet, including contact with unknown persons.</td>
<td>Poor supervision of the child.</td>
<td>Poor supervision from the parent resulting in unmet need.</td>
<td>Complex mental health issues affecting development.</td>
</tr>
<tr>
<td><strong>Developmental milestones not being met due to persistent parental failure/ability.</strong></td>
<td>Missed health checks/immunisations.</td>
<td>Some positive stimulation, new experiences.</td>
<td>Poor supervision from the parent resulting in unmet need.</td>
<td>Hygiene and presentation concerns resulting in isolation.</td>
</tr>
<tr>
<td><strong>Forming relationships with unknown adults.</strong></td>
<td>Signs of disruptive or challenging behaviour, signs of offending or anti-social behaviour.</td>
<td>Inconsistent care arrangements.</td>
<td>Poor response from the child's need from the parent.</td>
<td>Challenging behaviour resulting in serious risk of harm.</td>
</tr>
<tr>
<td><strong>Difficulty coping with anger, frustration or upset.</strong></td>
<td>Poor attachment.</td>
<td>Poor response to emerging need.</td>
<td>Signs of neglect.</td>
<td></td>
</tr>
<tr>
<td><strong>Displays challenging disruptive, offending behaviour.</strong></td>
<td>Unexplained but infrequent absences from school.</td>
<td>Concerns about attachment/interaction.</td>
<td>Domestic abuse impacting on child's development.</td>
<td></td>
</tr>
<tr>
<td><strong>Risky sexual behaviour/activity</strong></td>
<td>Low level mental health issues, self-harm without suicidal thought or intent.</td>
<td>Inconsistent parenting.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Persistent non-attendance at school.</strong></td>
<td>Minor concerns regarding self-care.</td>
<td>Risk of relationship breakdown.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Concerns regarding presentation, hygiene, basic care.</strong></td>
<td>Underage sexual activity.</td>
<td>Reported domestic abuse where impact on child is not immediately known, e.g. the child is not present.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Social exclusion.</strong></td>
<td>Parental advice needed to prevent escalation.</td>
<td>Parental advice needed to prevent escalation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Regular missed appointments affecting child's health.</strong></td>
<td>Poor response to the child's need from the parent.</td>
<td>Signs of neglect.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Developmental milestones not being met due to persistent parental failure/ability.</strong></td>
<td>Child experience of domestic abuse resulting in risk of significant harm.</td>
<td>Poor response from the child's need from the parent.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Parental advice needed to prevent escalation.</strong></td>
<td>Signs of neglect.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Child experience of domestic abuse resulting in risk of significant harm.</strong></td>
<td>Poor response from the child's need from the parent.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Parental advice needed to prevent escalation.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Significant substance/alcohol misuse.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Children’s Social Care

Coventry operates one central number for all issues relating to children’s social care and early help.

Tel: 024 7678 8555 then:

Option 1 For existing cases
Option 2 For advice from a social worker
Option 3 To make a referral
Option 4 Any other enquiry

Emergency Out of Hours Duty Team (EDT)

Coventry offers an emergency social care service between 5pm and 8.30am Monday to Thursday and between 4.30pm on a Friday and 8.30am on a Monday, each weekend. The call will be answered by an operator who will take your number and ask the social worker to call you as soon as possible.

Tel: 024 7683 2222

Family Hubs

Family Hubs provide early help and support for families, children and young people aged 0 – 19 years (up to age 24 where a young person has a disability).

Moathouse Family Hub (East 1)
Tel: 024 76785621

Bell Green Family Hub (East 2)
Tel: 024 7678 6868

Willenhall Family Hub (South 2)
Tel: 024 7678 8430

Gosford Family Hub (South 1)
Tel: 024 7678 8489

Radford Family Hub (West 1)
Tel: 024 7676 8444

Tile Hill Family Hub (West2)
Tel: 024 7678 7801

Foleshill Family Hub (Central 1)
Tel: 024 7678 5575

Hillfields Family Hub (Central 2)
Tel: 024 7678 7474

West Midlands Police

If you have reasonable cause to suspect that a child or young person is suffering, or at risk of suffering, significant harm AND may be in imminent danger, or a crime has been committed then you should contact the police.

Tel: 999

NSPCC National Helpline

Don’t wait until you’re certain if you are worried about a child. If you have any concerns or suspicions, contact the NSPCC free helpline service to speak to an NSPCC counsellor 24 hours a day, 365 days a year. They will listen to your concerns, offer advice and support and can take action on your behalf if a child is in danger.

Tel: 0808 800 5000