safeguarding children board

MULTI-AGENCY TOOLKIT



SUPPORTING FAMILIES PREVENTING NEGLECT

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This toolkit has been produced to provide an easy to use and understandable tool for practitioners to use who are working on the front line with families. It is not an assessment to be completed but to be used to support practitioners to identify all aspects of neglect within a family, it will:

- Assist all Professionals to explore the degree of neglect children and young people can suffer and understand what to look 'for' specifically to identify dangers in relation to neglect. This Toolkit is designed for all Practitioners who have contact with children, young people and their families.
- Enable Practitioners to understand how and when to take action if a child is suffering from neglect, 'assist in the recognition of the different forms neglect can take', 'identify any emerging signs of neglect' and make practitioners aware of their duty to escalate concerns; resulting in an increased likelihood of early recognition and prompt intervention in Neglect cases.
- Reduce the risk of drift and delay when responding to issues of Neglect.

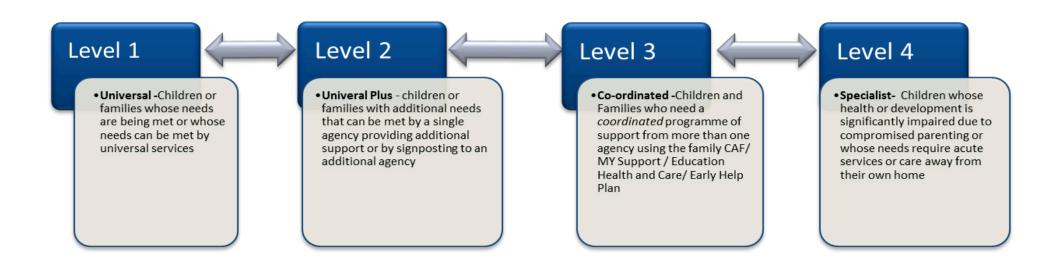
The Toolkit is a guide only and it should not replace professional judgment or be the deciding factor in decision making. Practitioners should seek advice from their line manager if they are worried or unsure how to proceed.

This toolkit should be considered alongside Wakefield's Neglect Strategy which has been developed in conjunction with Partners of the Wakefield and District Safeguarding Children Board LSCB (Local Safeguarding Children Board). This toolkit must also be read alongside the Continuum of Need document.

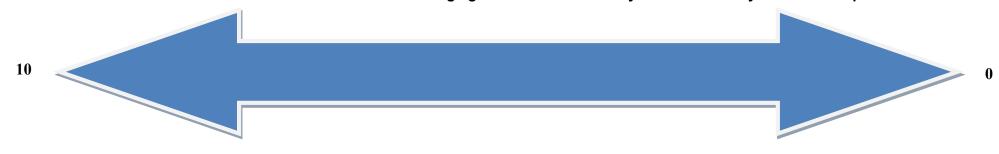
Using the Toolkit

- The Toolkit is for Practitioners to use in order to support them in identifying factors which may indicate that a child or young person is being neglected.
- The Toolkit has been written using the Signs of Safety methodology which will support the Practitioner to assess any potential harm to a child or young person and give Practitioners the appropriate Toolkit to support the identification of neglect for a child or young person.
- It is important that the focus remains on the child or young person with the voice of the child always sought and responded to, as to what they think of their care and living conditions, their health and wellbeing and their development. Signs of Safety tools such as the Three Houses can be used to seek a child's view of their world.
- The application of the Toolkit will and should often include holding an honest and respectful conversation with the Parent /Carer of the child about the worries around neglect.
- The Toolkit should be used with due care, diligence and sensitivity and should be introduced to the family as a Toolkit to ensure that the needs of the children and young people within the home are being met.
- The Toolkit should be used by Practitioners to consider what they have observed and enable reflection on their observations and assist in their decision making regarding what needs to happen but can also be used with families in their homes to assist their understanding of neglect
- The Toolkit does not need to be used in its entirety but can be used in sections or as an ongoing aid to work with a family and completion of appropriate assessment i.e. - CAF(Common Assessment Framework), Early Help Assessment, Single assessment etc.
- Toolkit users can choose to use the colour system, number system or both as they think fits, remembering that a numerical record may demonstrate improvement/decline in subsequent contacts with the family.

The Wakefield continuum of need and service provision



Scaling Question - On a scale of zero to ten; where 0 is the worry is present and the child will be hurt or harmed and 10 is everyone is confident the child will be well cared for and safe even when things get difficult in the family. Where would you rate the impact on the child?



This section will help identify with the family which areas are most worrying, what the family are doing well and where the support is required.

What are we worried about? (Note the Category of worry and the specific issues)	What is working well? (Note what changes have already been achieved and/or how situation has improved and why)	What needs to Happen? (Task agreed, who will do this and by when. Identified actions should be incorporated into relevant plans for child and family, CAF, Early help, CIN(Child in Need), CP (Child Protection))

	1. Health				
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2	
Opinion sought and professional advice followed	Appropriate health advice sought and advice followed. The child's health needs are fully met.	The child's health needs are not recognised or responded to by the parent/carers. Where concerns are raised by professionals the parent/carer's fail to respond.	The parent /carer's fail to respond to the needs of the child. The child has been unwell and there has been a delay in seeking help	The parent /carer's failure to access health services for their child; or failure to follow professional advice exposes the child to significant risk of harm.	
Health follow-up	The parent/ carer ensures that the child attends all health related appointments	The parent/carer fails to take the child to some health appointments and does not consider the outcome for the child. Parental ill health impacts on their ability to meet the child's needs. The parent/ carers prioritise their own needs above those of the child.	The child is only taken to appointments after multiple reminders. The child's health is compromised by the parent/carer's inaction. Parents offer misleading explanations raising concerns of disguised compliance.	The parent /carer's fail to take child for necessary health appointments despite reminders. The parent/carer fails to recognise and respond to the needs of the child which has a significant and adverse impact on their health and wellbeing.	
Surveillance and oversight of health matters (Immunisations are parental choice, check this decision is an informed one)	The child is up to date with all scheduled health checks. Where the parent/carer has made an informed decision to refuse one or more immunisations they have fully considered the potential	The parent/ carers fail to attend planned immunisation or scheduled health appointments with little or no consideration to the impact on the child. The parent /carer is unwilling to prioritise the needs of the child	The parent /carers fail to attend routine health checks despite regular prompting. The child's health needs remain unmet which has an adverse impact on their health and wellbeing.	The parent / carer shows clear disregard for the welfare of the child Failure to respond to the child's health needs which results in the child suffering significant harm.	
Parent and/or child Disability/chronic illness including mental health	There are no major concerns. The parent / carer is able to meet the additional needs of the child with minimal	Overall the child's medical and developmental needs are met. The parent /carer's demonstrate ambivalence to the needs of the child.	The parent / carer's regularly fail to attend health appointments and disregard professional concerns.	Failure to attend health appointments has a serious adverse impact on the child's health and development.	
	support	Some issues of non-compliance with services identified. The parent/carer does not always prioritise the needs of the child.	The child's additional health needs remain unmet which has an adverse impact on their wellbeing and development	The parent /carers failure to respond to professional concerns places the child at risk of significant harm.	

	2. Personal Hygiene and Dental Care				
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2	
0 – 4 Years	No concerns; evidence of regular baths, showers etc. Evidence of appropriate supervision of dental hygiene (supervised twice daily teeth brushing) The child is registered with a dentist and attends regularly.	There is limited evidence of the child's routine hygiene needs being met. The parent /carer provide very little supervision in relation to dental hygiene. The child is registered with a dentist but attends only as an emergency. The child suffers regular infestations of lice which are not managed effectively by the parent/carer.	The child's hygiene needs are not met adequately by the parent / carer and the child appears smelly and unkempt. The parent /carer's fail to respond to their child suffering persistent infestations of head lice. No evidence of supervision in relation to tooth brushing and some visible dental decay. Child not registered with a dentist.	The parent/carer's failure to meet the child's hygiene needs has an adverse impact on thei overall health e.g. extensive nappy rash. Evidence of severe dental decay and the child requires removal of one or more teeth due to poor oral care. Child not registered with a dentist. The child presents as extremely dirty and unkempt. The child's clothing and bedding are filthy	
5 Years +	The child has access to hygiene products and demonstrates growing independence. Parents/carers help and supervise the child appropriately.	The child has limited access to appropriate toiletries Parents /carers do not always supervise the child appropriately with day to day hygiene needs.eg. dental care, washing hands after the toilet. Overall no significant concerns	The child has no access to appropriate toiletries including, if appropriate, sanitary wear, parents/carers do not promote or understand good standards of hygiene or have realistic expectations in relation to the child's independence.	The child's hygiene needs are completely unmet and parents/ carers are unconcerned re the impact this has on the child. Parents/carers are unresponsive to prompts from professionals to ensure the children are clean.	

	3. Nutrition				
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2	
Preparation and organisation of mealtimes	Mealtimes are structured and sociable for the child Menus are organised and food well prepared. There are only some occasions where this does not happen.	Meal times are poorly organised. Parents/carers focus on their own needs for food and not on the child. Food offered is not appealing to the child. The child sometimes says that they are hungry.	Very poor level of preparation for meal times. Little or no consideration to the child's needs Child often says that they are hungry. Parent/carer does provide food but only when prompted.	Mealtimes are chaotic with no structure at all. The child is fed entirely on snacks, cereals or takeaway food. Extremely limited or no food available in the household.	
Quality	Parents/carers provide good quality nutritional food and drink including fresh fruit and vegetables	The parents /carers are able to provide a reasonable quality of food but this are inconsistent through lack of awareness or effort	Food offered to the child is of poor nutritional quality; no fruit or vegetables offered. The parent / carer does not prioritise meals for the child. The parent/carer needs to be prompted to offer a reasonable quality of food to the child.	The parent/carer is not being honest about the diet they provide to their child. The child's dietary intake is totally inadequate. The parent/carer makes no attempt to offer nutritious food to the child	
Overall quality and quantity of food and mealtime	The child is of a healthy weight and thriving.	The child is gaining weight in line with expectations. The parent/carer provides food but is often unorganised.	The child is not gaining weight in line with expectations. The child is not offered nutritious food and there are concerns about their growth and development.	There are significant concerns about the child's growth and development. The child says that they are often hungry and is not gaining weight. The child is showing signs of obesity due to being offered inappropriate food.	

	4. Learning				
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2	
Child's learning and Development 0 – 2 years	Parent/carer provides age appropriate, educational and stimulating toys Evidence of good interaction between child and parents/carers to promote development.	Child left alone while parent/carer pursues own interests, little interaction between parent/carer and child, The child has variable access to educational toys Parent/carer often on the phone and talks to baby only when prompted.	No one plays or talks to the child; there is a lack of stimulation initiated by the parent/carer. Child left to own devices whilst parent/carer pursues their own interests. Parent/carer on the mobile phone so 'unavailable' for the child.	Child's mobility is restricted e.g. confined to pram, stroller or chair. Parent/carer is irritated by any demands made by the child. No evidence of stimulation or interaction initiated with child. The child's development is impaired due to lack of stimulation by parent/carer.	
NB there is no statutory requirement for parents to access Early Years Provision. Some children aged 2 have entitlement	are aware of what is available. Where the family do not access	The family have indicated. acceptance but the child rarely attends Early Years Provision	The parent/carer is not accessing free provision or services provided due to focus on their own needs. The parent/carer has limited understanding of the benefit for the child to attend.	The parent /carer is not accessing the two year old offer and is not wanting to be "visible" to professionals. The parent/carer has a lack of insight in terms of the impact for the child's social and emotional development.	
3 – 4 years	Evidence of age appropriate stimulation and interaction between child and parent/carer.	There are variable levels of stimulation and interaction with the child. Parent or carer interacts with the child for short periods only The child is regularly left in front of the TV as a means of keeping them occupied.	The parent/ carers provide little stimulation for the child. Limited interaction between the parent/carer and the child. There are growing concerns re the child's speech and language development. The child has limited interaction with children of a similar age.	The parent/carers provide poor or no stimulation for the child. Interaction between the child and parent/carer is extremely negative. The parent/carers are dismissive and there is no evidence of warmth or care for the child.	

4. Learning con/t...

	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2
Child's learning and Development continued 5 Years plus	The child regularly attends school or nursery The child fully participates in school and parents/carers take an active interest in the child's education. The child is supported to complete educational activities at home The parents/carers provide adequate equipment and school uniform for the child.	Some concerns are noted e.g. low level school attendance and punctuality issues. Parents/carers not supporting home reading etc. The child is collected late at the end of the day or arrangements are ad hoc Low level concern regarding the child's cleanliness or lack of appropriate clothing for the weather. The child arrives at school having had no breakfast and is tired and irritable. Poor quality food is provided in the child's packed lunch Where the child is entitled to free school meals parents fail to access provision. Children in Years 5/6 make their own way home from school or escort younger siblings home which can involve crossing busy roads.	Persistent absence from school with the child attaining below 85% attendance. Lack of engagement with the school including minimal or disguised compliance between parents/carers with preventative services e.g. Parent Link Workers, EWO and the CAF process. Frequent changes of schools, Interagency information regarding the care and welfare of the child from a number of sources increases concern. The child is not reaching their full potential as a result of the inaction of the parent/carer.	Parent/carers remove the child from school with no satisfactory explanation or opt to Home Educate which is not in the best interests of the child. Chaotic house moves adversely impacting on the child/young person's education and attainment. Inter-agency information regarding the care and welfare of the child from a number of sources indicates significant concern for the child. Parent/carer shows no interest in the child/young person's education or attainment impacting on their future life chances.

		5. Safety & Basic C	are	
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2
Awareness of safety In the home	The parents/carers are fully aware of safety issues and there is evidence of appropriate measures being in place within the home to keep the child safe	Parents/carers have poor awareness of safety issues. Essential safety features are not in place in the home due to a lack of understanding e.g. baby gates, socket covers. With prompting parents/carers can keep the home clean and safe.	the home. There are identifiable hazards and the child can easily access harmful medicines	Parents /carers may no regard to the need to provide a safe home environment for the child There is evidence of wilful failure by parents/carers to improve safety in the home despite professional advice. Child are exposed to dangerous home conditions e.g. windows which are broken or have no safety catches; items which could cause harm easily accessible. Evidence of drug paraphernalia or accessible medicines left lying around or within reach.
Basic Care	A safe and appropriate level of care is provided by the parent/carer	Care provided by the parent /carer does not meet the child's basic needs.	The parent/carers handling of the child indicates concern.	The parent/carers display rough, careless and dangerous handling of th
0 – 4 years	Reasonable measures have been put in place to protect the child from any danger. Appropriate harnesses are used in the pram or stroller The child is always in the parent/carers sight when out walking with their hand held when out near roads etc.	There are a lack of effective measures in place to ensure the safety of the child e.g. fire guard not in place Parent/carers are not providing an		child The child is frequently left unsecured a pram or strollers The child is left unattended e.g. in the bath leaving them exposed to significant risk The child is left to wander outside th family home unsupervised The parent/carers pay no regard to th safety and welfare of the child.

	5. Safety & Basic Care con/t				
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2	
Basic Care 5 years plus	The parent /carers ensure appropriate supervision and reasonable safety precautions are taken. Age appropriate boundaries are in place. Parents demonstrate full understanding of home and road safety.	Minimal supervision provided by the parent/carer. Supervision of young siblings is left to older siblings. Parents/carers not always aware of the child's whereabouts and demonstrate limited insight in relation to the potential risks. The parent/ carers are over reliant on being able to contact child via a mobile phone Parental behaviours such as drug and alcohol misuse impact on the parent/carers ability to provide basic care for the child. The parent/carer is working with support services. There is evidence of domestic abuse within the household which has some impact on the parent/carers ability to fully meet the child's basic care needs.	the child sustaining low level injuries The parent/carers do not take appropriate action to minimise risks to the child within the home The parent/carer allows a young child to cross busy roads alone with no concern for their safety leaving them exposed to potentially significant risk The parent/carer shows no concern if the child stays out late at night. The child often goes missing and the parent/carer does not take swift and appropriate action- i.e. informing the police. The parent/carer has no insight in relation to the risks of Child Sexual Exploitation (CSE). Parental behaviours such as drug and alcohol misuse significantly impact on the parent/carers ability to provide basic care for the child. The parent/carer has limited engagement with support services There is clear evidence of domestic abuse within the household and the	A lack of parental supervision results in the child sustaining a number of injuries The parent/carers pay no regard to potential risks to the child within the home and refuses to accept professional advice The parent/carer consistently allows a young child to wander away from the home unsupervised There is clear evidence to suggest that the child is at risk of CSE and the parent/carers demonstrate no insight In relation to the risks. They consistently fail to report the child missing to the police Parental behaviours such as drug and alcohol misuse significantly impact on the parent/carers ability to provide basic care for the child. The parent/carer does not engage with support services There is significant evidence of domestic abuse within the household and the parent/carers is unable to meet the child's needs	

	5. Safety & Basic Care con/t					
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2		
Alternative Care Arrangements	The parent/carer only leaves the child in the care of a person deemed to be competent and mature. Where young children are left in the care of older siblings they have immediate access to additional support e.g. a neighbour or grandparent.	The parent/carer occasionally leaves the child in the care of a young person who does not have an appropriate level of maturity. The parent/carer prioritises their own needs and does not fully consider any potential risk to the child from leaving the child with an inappropriate carer.	The parent/carer regularly leaves the child in the care of an inappropriate carer. The parent/carer shows no insight in relation to risks posed to the child and is fixated on their own needs.	Young children are predominantly cared for by older siblings who have no access to additional support. The parent/carer leaves the child in the care of an adult known to be unsuitable leaving them exposed to significant risk. The parent/carer shows no regard to the risks associated with leaving their child in the custody of an inappropriate carer.		

	6. Clothing and Equipment				
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2	
Clothing and Appearance	The child has appropriate clothing for the weather including footwear Clothing may be handed down from siblings but items are in good condition and clean. The child has sufficient changes of clothes for different settings e.g. school and leisure.	The parent /carer does not prioritise the needs of the child and clothing is not always clean. The child's clothing and/or footwear is not always suitable for the weather conditions.	The child's clothing is regularly dirty and the child presents as unkempt. The child's footwear is inadequate and ill- fitting causing the child to suffer pain The parent/carer does not provide clothes appropriate for the weather conditions The parent /carer do not provide a change of clothes leaving the child to wear the same clothes day and night.	The parent/carer provides the child with clothing/footwear which is totally inadequate. The parent/carers prioritise their own needs above those of the child. The child is excluded from their peer group as a result of them being dirty and unkempt	
Provision of Equipment	The child is well provided for The child has access to equipment and clothing required for school and leisure activities e.g.PE kit, swimwear	The parent/carers provide only some of the equipment required by the child and this is not related to financial constraints The child is unable to take part in some school and leisure activities which has an impact on their wellbeing.	The parent/ carer often fails to provide equipment required for the child to attend school or leisure activities. The child's activities are significantly restricted due to them having no access to equipment which has a detrimental impact on their health and wellbeing.	The parent/ carer refuse to provide the child with equipment they require resulting in the child being totally excluded from peer group activities. The parent/carer shows no regard for the impact on the child and remains focused on their own needs. Exclusion from all activities has a significant and negative impact on the child's health and wellbeing.	

	7. Emotional Support					
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2		
Approval	The parent/carer talks fondly about their child Praise and emotional reward is offered freely and without prompt The child feels safe and secure	The parent /carer responds positively to other people's praise of their child but doesn't initiate praise spontaneously The parent /carer lack insight into the importance of emotional support for the child.	The parent/carer shows clear indifference when the child seeks their approval The child's achievements are not acknowledged by the parent/carer The parent/carers show no insight in relation to the emotional needs of the child which has a detrimental effect on their wellbeing.	The child is often ridiculed by the parent/carer leaving them feeling humiliated. The parent/carers show no emotional warmth leaving the child isolated and withdrawn. The child's achievements are never acknowledged by the parent/carer which has a detrimental impact on the child's self esteem		
Disapproval	The parent/carer is consistent in their response to a situation and sets clear boundaries for the child. Where the parent/carer applies any sanctions they are proportionate to the event which has triggered disapproval.	The child experiences inconsistent boundaries or methods of discipline by the parent/carer The parent/carer uses inappropriate techniques to demonstrate their disapproval e.g. may shout at or ignore the child. Sanctions applied are disproportionate and excessive	The parent/ carer is inconsistent in their application of sanctions. The parent/carer shouts or uses harsh words to deliberately hurt the child. The parent /carer resorts to physical violence to demonstrate their disapproval	The parent/carer uses physical violence as a first line response to their disapproval of the child. The parent/carer regularly ridicule the child and show no understanding of proportionate response Excessive sanctions are put in place to punish the child which are disproportionate to the event		
Acceptance	The parent/carers acceptance of the child is unconditional. They remain supportive even if they are temporarily upset by the child's behaviour.	The parent/carer is intolerant of failure and responds negatively if the child does not meet their expectations	The parent/carer is completely unsupportive of the child. The parent/carer has excessively high demands of the child resulting in the child feeling rejected and not 'good enough'	The parent/carer shows clear disregard to the child's achievements. The parent/carers continued rejection of the child has a significant impact on the child's emotional wellbeing		

	7. Emotional Support con/t					
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2		
Sensitivity and responsiveness to the child's emotional needs	The parent/carer understands the child's verbal and non-verbal communication and responds to their needs The parent/carer offers warmth and reassurance	The parent/carer does not respond to the child's verbal or non-verbal communication until the child cries or becomes upset When they do respond to the child they lack sensitivity. The parent or carers response is dependent on how they are feeling; they are not always able to prioritise the needs of the child	The parent/carer shows no insight into the emotional needs of the child and only responds when the child becomes very distressed. The parent/carer offers no warmth or reassurance to the child. The lack of parental response to the child's emotional needs has a detrimental impact on the child's emotional health and wellbeing.	The parent/carer demonstrates an aggressive response when the child becomes distressed The parent/carers response is dismissive and fails to meet the child's needs leaving them isolated and distressed The parent/carers respond by resorting to name calling; for example, cry baby or whinge which is humiliating for the child.		
Relationship and interaction between child and their parent/carer	The relationship between the child and parent /carer is healthy. Positive communication between the parent/carer and the child is observed If the child displays any challenging behaviour the parent/carer responds sensitively There is evidence of mutual enjoyment for both from the relationship.	Some tensions are observed in the relationship between the child and parent/carer The child is often left to initiate any interaction with the parent/carer The parent/carers response is always negative when the child's behaviour is difficult The parent/carer shows a lack of interest in any interaction with the child but once initiated there is some enjoyment evident	The relationship between the child and the parent/carer is visibly strained Any interaction with the parent/carer Is only initiated by the child, rarely the parent/carer. The parent/carer focuses on the child's physical needs and has little insight of the child's emotional health and wellbeing The parent/carer does not respond to the child attempts to derive comfort or attention from them.	The relationship between the child and parent/carer has broken down. The child appears resigned to their needs not being met The child is fearful or apprehensive to ask the parent/carer for anything they need The parent/carer is unresponsive to any attempt made by the child to gain attention from them. The child is left feeling isolated and unloved.		

	7. Emotional Support con/t				
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2	
Access to sports and Leisure	The child has a good level of access to sport and leisure activities which the parent/carer takes a proactive interest in.	The parent /carer is not proactive in finding local sports and leisure activities for the child. The parent /carer pays no regard to the child's interests in relation to leisure activities	The child accesses sports and leisure activities by themselves and seeks out their own opportunities. The parents/carers show a lack of interest in the child's activities outside the home and pay little regard to the safety of the child.	The parent/carer makes no attempt to provide access for their child to be able to do any sports or leisure activities The parent/carer provides no supervision for the child and shows no concern even if the child becomes involved in unsafe or unhealthy activities.	
Peer/friend interaction	The parent/carer supports their child to make friends. The parent/carer shows interest in their child's interactions with their friends If a child discloses concerns in relation to peers, for example bullying they are fully supported by the parent/carer.	The parent/carer provides only minimal support to their child to make friends. The parent/carer does not seek out opportunity for their child to develop friendships. If the child tells their parent/carer that they are being bullied then they are offered some support although this is not always consistent	The parent/carer has no insight into the importance of peer friendships for their child. The parent/carer prevents the child from accessing opportunities to make friends leaving them isolated from their peer group. The child is left to form their own friendships with no oversight from their parent/carer leaving the child exposed to potential risk. The parent/carer shows minimal concern if the child is reporting being bullied.	The parent/carer is totally disinterested in the child's relationships with friends and actively discourages any discussion The parent/carer does not respond to any disclosure the their child is being bullied The parent/carer shows no concern where there are indications that the child is developing unhealthy relationships. The parent/carer has no insight or fails to respond to developing risks in relation to their child, for example child sexual exploitation.	

7. Emotional Support con/t					
	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2	
Outings for recreational purposes	The child enjoys regular outings to child centred place. The parent/carer prioritises activities which are child focused.	The parent/carer provides some opportunities for recreational activities but planning is ad hoc Family outings are not always child focused	The parent/carer provides little opportunity for the child to enjoy child focused activities The parent/carer prioritises their own needs for recreational activities leaving the child to 'tag along' The parent/carer has no insight into the importance or child focused activities	The child has no opportunities to engage in recreational activities. With the family The parent/carer is unsupportive of the child engaging in recreational activities with their peer group The child is left to play in the street unsupervised by the parent/carer.	
Celebrations including family birthdays and widely recognised events for example Christmas, Eid	The parent/carers ensure that the child is fully involved in all family celebrations.	The child is excluded from some celebrations within the family home The parent/carer prioritise their own needs and do not always respond to important events in the child's life; for example the child's birthday or exam success	The parent /carers often fail to acknowledge important events in the child's life including birthdays.	There are no celebrations in the family home and the child's birthday is regularly ignored The child has no opportunity to participate in celebrations outside the home marking significant events.	

8	3. Home conditions/	Environment

Relevant Factors	Level 1 Essential Needs met 9 - 10	Level 2 Some Essential Needs Unmet 6 - 8	Level 3 Many Essential Needs Unmet 3 - 5	Level 4 Most or All Essential Needs Unmet 0 - 2
Home condition and environment	The family home is generally clean, free from clutter and well presented.	The standards of cleanliness in the home need some attention and this goes unnoticed by the parent/carer The home environment is generally disorganised The parent/carer has difficulties in prioritising work within the home The child has limited access to appropriate toys and reading materials. There is an over reliance on the TV and/or computer to provide stimulation for the child.	The house is observed to be chaotic, and dirty and the parent/carer fails to respond to advice to clean it up The parent/carer prioritises replacing non-essential items in the home, for example upgrading the TV as opposed to replacing a broken cooker or washing machine. This results in the child not being fed appropriately and with dirty clothes There is a lack of heating in the home and the child complains of feeling cold Toys available to the child are often broken	The home conditions are very poor and completely unacceptable The house is ingrained with dirt and poses a health hazard for the child The home environment is so chaotic that it poses a risk for the child. There are no cooking facilities in the home to provide a warm meal for the child. There is evidence of alcohol or drug paraphernalia which poses a significant risk to the child

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Prevalence of Smell e.g. mouldy/rotten food, urine	The parent /carer is aware of the concerns and responds positively to advice	The parent/carer is aware of smells within the home but needs prompts to address the concerns	The parent/carers are reluctant to address smells within the home even when prompted.	There is clear evidence of hoarding within the home resulting in significant issues in relation to unpleasant smells
Flooring	Floors are generally clean and clear from rubbish	Floors are occasionally dirty but the parent/carer responds promptly to advice to clean.	Floors are often dirty and covered with large amounts of rubbish. The parent/carer reluctantly responds to advice to clean but needs regular prompts .and has no self-motivation There is evidence of animal faeces being left on the floor.	Floors are noted to be filthy and the parent/carer refuses to clean. Animal faeces is often present on the floor which poses a health risks for the child There is evidence of hoarding in the family home resulting in a hazardous environment for the child
General decorative order of the home	The home is generally in good order and any decorative needs or repairs addressed promptly	The home is in need of some repair and the parent /carers require prompts to address the issues.	The home is in some need of some repair and the parent/carer fails to respond to advice. Holes are observed in the walls or doors giving rise to concerns in relation to domestic abuse which is denied by the parent/carer	The home is in desperate need of repair to a degree that the home conditions pose a physical risk to the child. The parent /carer is unconcerned in relation to the identified risk Holes are observed in walls or doors and information gathered indicates domestic abuse which poses a significant risk to the child

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Kitchen surfaces and utensils	The kitchen generally clean and tidy and surfaces free from clutter On the odd occasion pots are observed in the sink but it is evident that they have not been left for significant periods	Kitchen surfaces are often cluttered and the sink full of dirty pots left for some considerable time. The parent/carer requires regular prompts to keep the kitchen clean and has no insight in relation to the potential health risks to the child	Kitchen surfaces are rarely clean and the parent/carer does not respond to professional advice There are no clear areas at all, surfaces are full of clutter and unusable for safe food preparation The parent/carer reluctantly responds to advice to clean	Kitchen surfaces are filthy and pose a serious risk to the child's health. The parent/carer refuses to clean up the home. The state of the kitchen has a significant impact on the child receiving regular meals
Bathroom facilities	The bathroom is generally clean and in good repair	The bathroom is occasionally observed to be dirty but the parent/carer responds to advice to clean. The parent/carer is slow to initiate repairs even where there may be an impact on the child's health	The bathroom facilities are often dirty and on occasion unusable which has a significant impact on the child The parent/carer fails to respond to advice to initiate repairs	The bathroom facilities are filthy and pose a serious risk to the child's health. The parent/carer does not initiate repairs and shows no regard to any risks to the child
Beds and household, furnishings	The parent /carer makes every effort to keep the home furnishings including the child's bed in good repair	Beds and furnishings within the home are occasionally dirty but the parent/carer responds to advice and initiates cleaning. The parent/carer removes any broken furniture without prompt. There is evidence to suggest that there is insufficient furniture to meet the needs of the child; for example the child regularly shares with other family members	Beds and furnishings are in a poor state of repair and often dirty; the parent/carer is unconcerned The parent/carers show no Initiative to clean and respond negatively to professional advice The child's bed and bedcovers are observed to be filthy and the parent/carer makes no attempt to initiate change.	There is clear evidence of broken furniture around the home which may indicate some level of violence within the household. The poor state of some furniture poses a physical risk to the child The child has no bed and is left to sleep on the floor

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Garden and /or outside areas	The garden and outside areas are well maintained and provide a safe area for the child to play.	The garden area is sometimes cluttered and unsafe for the child to play. The parent/carer responds positively to advice to clear it. Some evidence of animal faeces observed which poses a potential risk to the child however parent/carers respond quickly to remove.	The garden/ outside areas are always full of rubbish including broken glass making them unsafe for the child to play. Animal faeces is regularly left and not cleaned up by the parent/carer posing a significant risk to the child's health. Parent/carers respond negatively to professional concerns	The garden/outside areas are completely unsafe for the child to play due to the amount of rubbish broken glass, and animal faeces. The parent/carers refuse to respond to professional advice leaving the child exposed to risk.
Evidence of drug paraphernalia in the house	The parents /carers take full responsibility to ensure that drug paraphernalia is not left around the house and is disposed of safely.	There are occasions where the parent/carer has been careless in their disposal of needles or other drug paraphernalia leaving the child exposed to risk The parent/carers put immediate plans in place to address future risk following professional advice	There is clear evidence that exposed needles or other drug paraphernalia is accessible to the child The parent/carers have limited insight into the risks posed to the child and need regular prompts from professionals to remove such items from children's reach.	Dirty needles and/or other drug paraphernalia is regularly accessible to the child leaving them exposed to significant risk of harm The parent/carers fail to respond to professional advice to minimise risk. The parent /carer is on a Methadone programme but do not store their drugs safely.
Rodents Infestation	There is some evidence of rodents/vermin within the property causing a potential health risk to children but the parent/carer engages with relevant services to tackle the problem	There are rodents/vermin within the property causing a health risk to children and the parents/carers require regular prompts to address the problem.	The household is regularly infested by rodents/vermin causing a significant health risk to the child. The parent/carers fail to respond to professional advice to address the problem	The parent/carers refuse to address persistent infestation by rodents/vermin leaving the child exposed to significant health risks The parents/carers fail to engage with professionals attempting to provide support for the child

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Potentially hazardous environment	The parents/carers are able to recognise any hazards and respond without prompt The parent/carers ensure all appropriate safety equipment is in place	There is evidence of some hazardous equipment such as broken sockets, exposed wires within the home environment but the parent/carers respond to prompts to rectify the problem The home has no working smoke alarm but the family responds to advice to have one fitted The parent/carers do not use safety equipment to its full potential and forget to close safety gates or use fireguards.	The home environment is often observed to be unsafe for the child and the parent/carer is reluctant to respond to professional advice to keep their child safe. The parent/carer does not initiate repairs when prompted. Fireguards and safety gates although present in the house are regularly not used by the parent/carer leaving the child exposed to risk	The home environment is unsafe for children and the parent/carers refuse to engage with professionals Clear evidence of hazardous equipment which the parent/carers refuses to address No evidence that any safety equipment is in place such as safety gates or fireguards and the parent/carers are unconcerned in relation to the potential risk to the child
Provision of basic services including water, electricity and gas	The parent /carers ensure that all basic services are available and is proactive in responding to any problems with their supply.	There is some evidence that a failure in supply is not responded to in a timely way by the parent/carers. Financial issues may disrupt service provision resulting in a potential lack of heating for the home however the parent/carers seek support to resolve the issues. and get services reinstated	There are regular disruptions to basic services and the parent/carer is unable to meet the child's basic needs The parent/carers are not open and honest with professionals about any difficulties and refuse to engage with support services	There is no water, gas or no electricity in the house and the parent/carers are unable to meet any of the child's basic needs This environment presents significant risks for the child and the parent/ carer refuses to co-operate with professionals The parent/carer takes no responsibility for their inaction

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Risk associated with pets or animals	The parent/carers are responsible pet owners and take appropriate precautions to ensure that the animals within the home pose no risk to the child	There is evidence of an aggressive dog being in the household which poses a risk to the child and leaves them feeling frightened The parent/carers take action to rehome the dog when prompted by a professional	There is a dangerous dog in the household which places the child at significant risk. The parent/carers lack insight into the potential risk and are reluctant to rehome the dog to ensure the safety of the child	The parent/carers are fully aware of the risks their dog poses to their child but refuse to take action to rehome the animal leaving the child exposed to significant risk of harm