

Social Care and Learning



**Guidance on Access to
Children's Social Care
Services and the
Multi-Agency
Needs/Risks Matrix**

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Guidance on Access to Children’s Social Care and the Multi-Agency Needs/Risk Matrix

1 Purpose

Local authorities and other agencies providing services for children have a wide range of powers and duties in respect of children living in their area. The Children’s Social Care Service performs a key role as part of the range of services for children, particularly those with the highest level of need. This document provides guidance for professionals and service users, to clarify the circumstances in which the Children’s Social Care Service will assist and safeguard children and young people and their families in Bracknell Forest and how those responsibilities will be carried out.

The purpose of this guidance is:

- To show how the criteria for access to Children’s Social Care Service are defined within a multi-agency needs/risk matrix (Appendix One), and how that process is part of how a wider multi-agency framework of services is delivered,
- To set out the principles, powers and duties that apply to the delivery of services by Children’s Social Care,
- To set out what the process of assessment and intervention from the Children’s Social Care Service will be.

It is important to note that this guidance relates to the delivery of the Children’s Social Care Service, and not to the full spectrum of services provided by the Department of Education, Children’s Services and Libraries for the support of children and young people.

2 The Needs/Risk Matrix

The attached matrix of needs and risks (See Appendix One) describes the circumstances in which children and young people are eligible for services from key partner agencies. It also seeks to support equitable access to those services, within the limited resources available.

The matrix is based on the four levels of intervention, as set out in the Children and Young People’s Plan, which sets out four levels of intervention in the Bracknell Forest Pyramid of Services to meet children’s needs:

Level No.	Service Type	Service Level
<i>Level 4</i>	<i>Crisis</i>	<i>Children and Families in Crisis needing Urgent Intervention</i>
<i>Level 3</i>	<i>Specialist</i>	<i>Children and Families needing Intensive Assistance</i>
<i>Level 2</i>	<i>Targeted</i>	<i>Vulnerable Children</i>
<i>Level 1</i>	<i>Universal</i>	<i>For all Children and Families</i>

The risk-needs matrix has been developed to inform decision making about who should provide and receive services and with what level of priority. This matrix aims to prioritise the department’s response by taking into account the level of need and risk. All the indicators shown on the matrix in blue/italics for level three and four intervention denote the circumstances in which assessment and/or involvement by Children’s Social Care is defined

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as appropriate in this policy. Other indicators included in the matrix across levels one to four indicate the circumstances in which other key partner agencies would be expected to intervene.

The examples included within this matrix are not exhaustive. Professional judgement will be needed to determine the relative priority of matters not described/ illustrated in this framework.

Needs change over time and the priority attached to any particular need depends on the extent to which it is not adequately met and the consequences of the impact of this on the child. This requires the exercise of professional judgement that takes full account of the wide range of factors that may influence outcomes.

The following principles must always be considered in applying the framework:

- 1) Intervention should always be at the lowest level appropriate so as to avoid harmful intervention (e.g. undertaking an assessment under the Common Assessment Framework may enable better inter-agency working and earlier intervention, and holding a Family Group Conference may avoid the need for a child to become looked after.)
- 2) The level of need will always be increased by
 - The presence of multiple indicators
 - Additional factors of poor parenting added to a child related indicator (e.g. a parent with alcohol misuse problems has a child who engages in self harm)
 - Recurrence of the event linked to the indicator (e.g. child left alone repeatedly)
- 3) For any Child Protection related indicator the Child Protection Procedures should also be consulted as to whether the response should be under Section 17 or 47 of the Children Act and under what timescale (See Threshold Response Table, section 7.3 in the Berkshire LSCB Procedures 2006)

3 Children's Social Care Service: Principles, Powers and Duties

The Children's Social Care Service will provide a range of services in Levels Three and Four as defined above.

3.1 Principles

The principles governing the delivery of those services are as follows:

- The welfare of children is paramount.
- A child's age, sex, health, personality, race, culture and life experiences have to be taken into account when assessing or providing help.
- Children's welfare is best promoted when the authority works in partnership with parents and other agencies.
- All assessments should take account of parents and children's views.
- Parents are entitled to help and consideration in their own right.

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- Assessments should be written in a style and language that makes them accessible to service users. The outcome of assessments should be shared openly with parents and children of an appropriate age and ability.
- There are unique advantages for children experiencing normal family life in their own birth family and every effort should be made to preserve the child's home and family links
- Services will be provided on an equitable basis and reflect the principle that those children with greatest need will receive services first.
- When a family receives services they will be provided on the basis of an agreed assessment of need and against clear and explicit aims and objectives, with progress regularly reviewed to inform decisions about future service delivery.
- The Children's Social care Service should not intrude unnecessarily in family life. The level of intervention should match the level of identified need and reflect the principle of the lowest level of involvement for the least period of time to achieve the aims and objectives
- Services will be provided which are appropriate to need, cost effective and reflect best value. The level of service provided will be influenced by the level of resources available

3.2 Powers and Duties

The key powers and duties for the Children's Social Care Service are as follows:

3.2.1 Children in Need

The Children Act placed a general duty on the Local Authority to 'safeguard and promote the welfare of children within their area who are in need and so far as is consistent with their welfare, to promote the upbringing of children by their families by providing a range and level of services appropriate to their needs'.

(Children Act 1989, Section 17(1))

A child is deemed to be in need if:

- a) He is unlikely to achieve or maintain, or have the opportunity of achieving or maintaining a reasonable standard of health and development without the provision for him of services by a local authority: or
- b) His health or development is likely to be significantly impaired or further impaired without the provision of services
- c) He is disabled

(Children Act 1989, Section 17(10))

3.2.2 Children at risk of significant harm

"Where a local authority -

- (a) are informed a child who lives or is found in their area -
is the subject of an emergency protection order
is in police protection :or

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- (b) have reasonable cause to suspect that a child who lives or is found in their area is suffering or is likely to suffer significant harm; then

The local authority shall make, or cause to make, such enquiries as considered necessary to enable them to decide whether they should take action to safeguard or promote the child's welfare".

(Children Act 1989, Section 47)

3.2.3 Children with Disabilities

Local Authorities are required to provide services for disabled children which are designed to minimise the effects of their disabilities and to give them the opportunity to lead lives that are as normal as possible.

(Children Act 1989, Schedule 2.para 6 CA 1989)

Under the Children Act, disability is defined as follows:

A child is disabled if he is blind, deaf or dumb or suffers from mental disorder of any kind and is substantially and permanently handicapped by illness, injury or congenital deformity or such disability as may be prescribed

(Children Act 1989, Section 17.11 CA 1989)

3.2.4 Accommodation of Children

Local Authorities shall provide accommodation for a child in need who appears to them to require it as a result of there being no person with parental responsibility for him, or because he is lost and abandoned, or because the person who has been caring for him is prevented from providing suitable accommodation or care.

(Children Act 1989, Section 20)

3.2.5 Care leavers

The local Authority has powers and duties under the Children Act1989 and the Children (Leaving Care) Act 2000 to prepare young people they are looking after for independence and to make available aftercare advice and assistance.

3.2.6 Homeless adolescents

Every Authority shall provide accommodation for any child in need within their area who has reached age 16 and whose welfare the authority considers is likely to be seriously prejudiced if they do not provide him with accommodation.

(Section 20(3) Children Act 1989)

A Local Authority may provide accommodation for any person who has reached the age of 16 but is under 21 in any community home which takes children who have reached the age of 16 if they consider to do so would safeguard or promote his welfare.

(Section 20 (5) Children Act 1989)

3.2.7 Adoption services

The Local authority has a duty to maintain an adoption service designed to consistently meet the needs of adopted children and their parents and former parents.

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Maintenance of Adoption Service

(1) Each local authority must continue to maintain within their area a service designed to meet the needs, in relation to adoption, of-

- (a) children who may be adopted, their parents and guardians,
- (b) persons wishing to adopt a child, and
- (c) adopted persons, their parents, natural parents and former guardians;

and for that purpose must provide the requisite facilities.

(2) Those facilities must include making, and participating in, arrangements-

- (a) for the adoption of children, and
- (b) for the provision of adoption support services.

(Adoption and Children Act 2002)

3.2.8 Assessment of Young Carers

Local authorities have a duty to consult, inform, support and protect children who find themselves in a caring role that impacts upon their own welfare, development and aspirations. Where a child or young person is providing a 'substantial amount of care on a regular basis' for a parent, family member or other adult being assessed under the National Health Service and Community Care Act, the child or young person will be entitled to an assessment of their ability to care.

(Carers (Recognition and Services) Act 1995 section 1)

Additionally, any young person over 16 who is providing care for any individual aged over 18 is entitled to an assessment under the Carers and Disabled Children Act 2000, whether or not the adult receiving care is being assessed. The young carer may then be provided with assistance in their own right.

(Carers and Disabled Children Act 2000)

4 Children's Social Care Service: Assessment

4.1 Access

The public, including children, young people and other agency professionals, have open access to request assistance from Children's Social Care. The public and other professionals may contact the department by telephone, by email, by writing or by visiting in person.

Consideration will always be given to whether presenting or identified needs could be more appropriately addressed by other agencies or other departments in the wider local authority.

4.2 Screening

The aim of screening is to gain an understanding of the needs presented by the referrer and what the appropriate service response should be. The screening process will be conducted by a duty social worker or family worker.

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A decision will then be reached about the need for further assessments. Any subsequent assessments will take place in accordance with government guidance entitled "Framework for Assessment of Children and their Families" and "Working Together" guidance

Intervention should always be at the lowest level appropriate. People who present with matters that fall outside of the service priority criteria will be offered information/advice, redirected to other relevant agencies as appropriate, or advice may be provided on the completion of an inter-agency assessment under the Common Assessment Framework.

The initial screening of enquiries will be undertaken in a manner that enables the department to capture information that will inform commissioning, service planning and ethnic monitoring.

At the conclusion of this initial screening process and within one working day a decision will be made about:

- Whether the matter falls within the department's service priority criteria
- Whether further assessment is required
- How any further assessment will be conducted
- Whether any services need to be provided prior to the conclusion of any subsequent assessment.

4.3 Initial Assessment

Initial assessment is a *'brief assessment of each child referred to social services with a request for assistance to be provided'*. (Department of Health, Assessment Framework Guidance 2000).

An initial assessment should be undertaken and completed within 7 working days. The level of need identified during the initial assessment process will be recorded, irrespective of whether a service is subsequently provided to meet the assessed need.

All decisions about the provision of service will take account of the following:

- The Child's and Carer's assessed needs
- The significance of the harm a child has suffered or is likely to suffer
- The likely consequences for the child of not providing a service
- The potential benefit resulting from the provision of services
- The level of resources available

The department will aim to provide all services in full partnership with parents and other significant individuals. In some cases, it may be necessary to provide a level of monitoring and support to families, in circumstances where cooperation and consent is severely limited. In making decisions about whether to intervene under these circumstances, the department will balance the need to take action to safeguard a child against the requirement not to interfere unnecessarily in the family.

Support to families will be provided by the least intrusive means, to resolve difficulties at an early stage, thereby reducing the risk of family breakdown.

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The provision of service will not be delayed by the need to complete an assessment. In certain circumstances, it will be entirely appropriate to provide a service in parallel with the assessment process.

The conclusion of the initial assessment should result in:

- An analysis of the needs of the child and the parent's capacity to respond appropriately to those needs within the family and community context.
- A decision about what level of priority should be given to the matter by comparison with the needs/risks matrix.
- Identification of whether services need to be provided to secure the well being of the child or young person in the short term.
- A decision about whether a core assessment is required.
- Unless no further action is required, the development of a written plan detailing the services to be provided.
- Feedback to the referrer and the service user regarding the above.

These decisions should be clearly recorded on the assessment form and counter-signed by the relevant team manager.

4.4 Core Assessment

More complex cases will be subject to a core assessment as defined in the DH Guidance Framework for Assessment of Children and their Families.

If it becomes obvious prior to the completion of the initial assessment that a core assessment is needed staff should discuss with their manager whether to complete the initial assessment before starting the core assessment.

Core assessment is an 'in-depth assessment, which addresses the central or most important aspects of the needs of a child and the capacity of his or her parents as caregivers to respond appropriately to these needs within the wider family and community context'

(Department of Health Assessment Framework Guidance 2000)

Where information indicates that a child is suffering or is at substantial risk of suffering significant harm, or needs to be looked after outside of his/her own family, a core assessment should be commenced. Core assessments may also be undertaken in other complex cases at the discretion of the line manager.

If a core assessment is deemed to be necessary it should be completed within 35 working days from the end of the initial assessment, or within 42 days in total.

The conclusion of the core assessment and subsequent updates should be presented at relevant review meetings and otherwise utilised to inform care planning. The social worker and his/her line manager should have regard to the needs/risks matrix when making decisions about the services to be provided following the completion of the core assessment.

4.5 Monitoring and Review

All services provided will be subject to review in accordance with the relevant procedure for that service, i.e., the statutory review of a looked after child, a child protection review case conference, or a child in need review. Any changes in the level of need identified at the review should be considered against the needs/risks matrix. This re-evaluation of the level of need should inform decisions about:

- The level of priority to be given to the case in the future
- The level of service to be provided
- The possible need for a core assessment or the updating of an earlier assessment.

5 Transfers between authorities

When a child or family who receives services from another council moves into the area, the department will, pending assessment, take account of the services that were previously received and the effect of any substantial changes on the service user when taking an interim decision about what to provide. If the department decides to offer a significantly different level of service to the previous council it will provide the service user with a written explanation for any proposed changes.¹

6 Complaints and Representations

Persons who are dissatisfied with decisions arising from the operation of this policy/procedure may appeal, complain or make representations in accordance with the department's normal procedures.

¹ See also – 'Protocol for the transfer of responsibility for children in need cases between unitary authorities within the Berkshire area', September 2005.

7 Appendix One: Needs/Risks Matrix for Children & Young People in Bracknell Forest

NB. The indicators which apply to Children’s Social Care are shown in blue/italics.

Priority	Be Healthy	Stay Safe	Enjoy & Achieve	Make a Positive Contribution	Economic Well Being
<p>Level 4: Children and families in crisis needing urgent intervention (CRISIS)</p> <p><i>Children with high level and complex needs who will need an immediate or ongoing children’s social care response.</i></p>	<p>Child engages in serious self harm (e.g., suicidal, anorexic, extreme substance misuse)</p> <p><i>Child is medically diagnosed as failing to thrive as a result of neglect</i></p> <p>Child requires Child & Adolescent Mental Health Services at tier 4</p>	<p><i>Child has suffered or is likely to suffer significant harm (e.g. child suffers serious non-accidental injury, severe neglect or is sexually abused)</i></p> <p><i>Child looked after in need of immediate protection (e.g. is absconding or whose placement has broken done)</i></p> <p><i>Child with high level complex needs which may result in <u>immediate</u> risk of family breakdown (e.g. child suffers severe harm and requires removal through court action)</i></p> <p><i>Section 37 report requested by family court</i></p>		<p>Young Offender who presents severe risk to others</p>	
<p>Level 3: Children and families needing intensive assistance (SPECIALIST)</p> <p><i>Children whose welfare and development will be significantly impaired without the provision of services, or where a reasonable standard of health or development is unlikely to be achieved without the provision of services</i></p>	<p><i>Child with high level complex needs or needing constant care resulting in risk of family breakdown</i></p> <p>Child is involved in serious substance abuse</p>	<p><i>Looked after children</i></p> <p><i>Child who require or are subject to a protection plan (e.g. child suffering chronic neglect, child caused fear and anxiety from high levels of domestic violence)</i></p> <p><i>Private fostering notifications and placements</i></p> <p><i>Section 7 report requested by Family Court</i></p> <p><i>Child at risk of sexual exploitation (e.g. under duress, unlawful sexual intercourse, prostitution)</i></p> <p><i>Severe parental mental illness or substance misuse</i></p> <p><i>Child frequently left alone</i></p>	<p><i>Child with significant and enduring disabilities</i></p> <p><i>Adopted child in need of support services (e.g., assistance with emotional or behavioural difficulties)</i></p> <p>Child permanently excluded from school</p> <p><i>Young Carer whose welfare is significantly impaired by their caring responsibilities</i></p>	<p>Child is designated as ‘Persistent Young Offender’.</p> <p><i>Child with some challenging behaviour that places self and others at risk</i></p> <p><i>Parents experience continuing difficulty with behavioural problems.</i></p>	<p><i>Homeless young person with additional needs</i></p> <p><i>Unaccompanied minors</i></p> <p><i>Child with disability in transition to adult social care</i></p> <p><i>Care leaver</i></p> <p><i>Families without recourse to public funds/ Family without resources to meet child’s basic material care needs.</i></p> <p><i>Children living with relatives who are in need of continuing financial support (e.g. Residence Order Allowances)</i></p>

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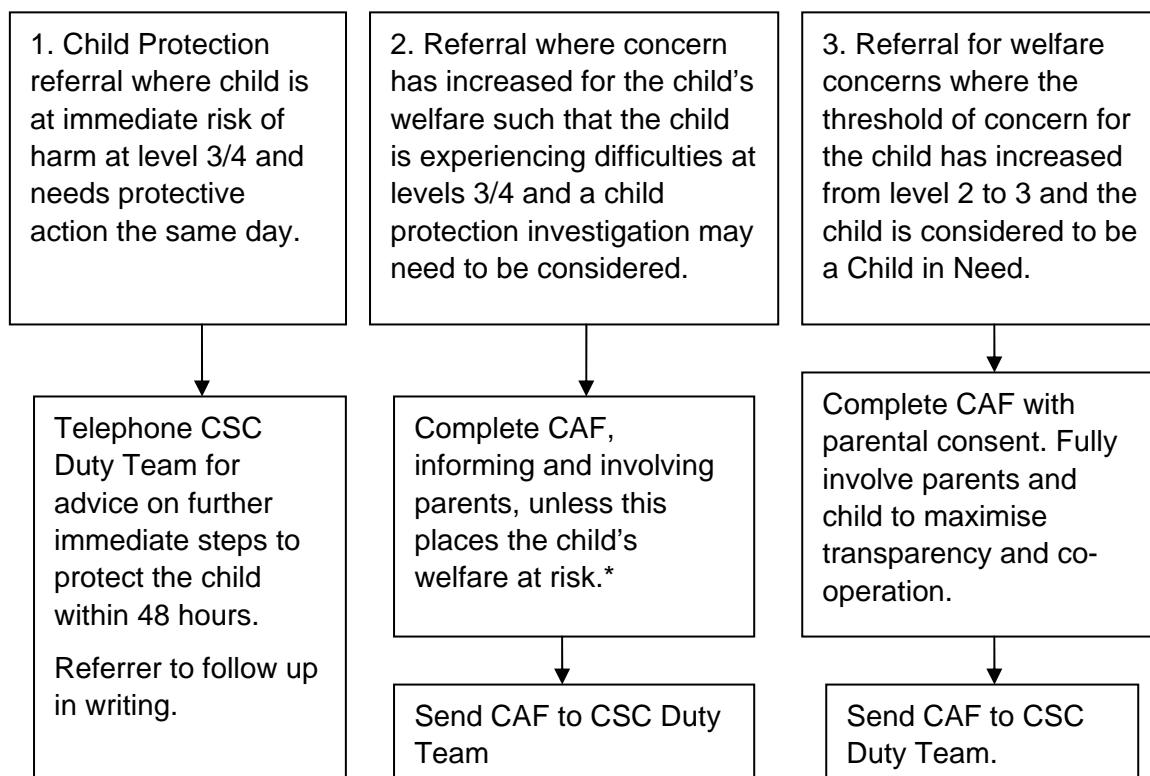
Priority	Be Healthy	Stay Safe	Enjoy & Achieve	Make a Positive Contribution	Economic Well Being
<p>Level 2: Children with Additional Needs (Vulnerable Children) (TARGETED)</p> <p><i>Children with Additional Needs</i></p> <p><i>Will be assessed under Common Assessment Framework (CAF)</i></p>	<p>Child is involved in substance abuse</p> <p>Child consistently fails medical/dental appointments and immunisations</p> <p>Child facing disability or health related problem that could affect their long term opportunities</p> <p>Young parents</p> <p>Children and families struggling with change (e.g. parental separation or bereavement)</p> <p>Children who appear withdrawn</p> <p>Child is unable to express their needs and make themselves understood</p>	<p>Home environment is unsafe.</p> <p>Child presenting disruptive behaviour at home</p> <p>Child who experiences bullying</p> <p>Child engaged in bullying behaviour</p> <p>Child living in temporary accommodation</p>	<p><i>Child with a statement of Special Educational Need</i></p> <p>Child has serious school attendance difficulties</p> <p>Child cannot concentrate or settle at school</p> <p>Child subject to fixed term exclusion from school</p> <p>Child is identified as young carer</p> <p>Child experiencing bereavement</p>	<p>Child socially isolated or unable to make friends</p> <p>Parents experience some difficulty with behavioural problems</p>	<p>Young person not in education employment or training</p> <p>Family require support as a result of racial harassment or any other hate crime</p>
<p>Level 1: All children and families (UNIVERSAL)</p> <p><i>Child has no identified Additional Needs</i></p> <p><i>Will receive universal services</i></p>	<p>Child has full immunisation and health services are accessed as required.</p>	<p>Child lives in safe environment.</p> <p>No significant parenting or behaviour problems.</p>	<p>Child is accessing mainstream education with no significant difficulties noted.</p>	<p>No offending or anti-social behaviour</p>	<p>Adequate housing and family environment</p>

NB. This framework applies to children and young people below the age of 18 years. See section 2, pages 1/2 of this policy for further explanation of this matrix. In particular, The following principles must always be considered in applying the indicators:

- Intervention should always be at the lowest level appropriate so as to avoid harmful intervention (e.g. undertaking an assessment under the Common Assessment Framework may enable better inter-agency working and earlier intervention, and holding a Family Group Conference may avoid the need for a child to become looked after.)
- The level of need will always be increased by: the presence of multiple indicators/additional factors of poor parenting added to a child related indicator (e.g. a parent with alcohol misuse problems has a child who engages in self harm) or by the recurrence of the event linked to the indicator (e.g. child left alone repeatedly)
- For any Child Protection related indicator the Child Protection Procedures should also be consulted as to whether the response should be under Section 17 or 47 of the Children Act and under what timescale. (See Threshold Response Table, section 7.3 in the Berkshire LSCB Procedures, September 2006).

Anyone wishing to make a child protection referral who is concerned that the circumstances of the case are not identified in the matrix should in any case refer the matter to the Children’s Social Care Duty and Assessment Team (01344 351 582)

8 Appendix Two: Guidance to Children’s Services Professionals on Making a Referral to Children’s Social Care (CSC). To be used in conjunction with the Multi-Agency Needs/Risks Matrix and the Common Assessment Framework (CAF) Guidance



*** NB. Where a CAF is completed without parental consent it needs to be clearly recorded that the practitioner has discussed this with the CAF Co-ordinator and has ensured that the reason for not seeking consent is recorded on the form.**

Key Principles:

- Providing a good service to the child depends on accurate information and maximum transparency.
- Referrals not requiring a same day response must be made using the CAF form. This will ensure a quicker and better informed response than a verbal referral.
- To ensure receipt by the Duty Team please always email CAF forms to Childrens.Services@Bracknell-Forest.gov.uk, not to individual mail boxes.
- Where a child is at immediate risk it is vital for the future success of any intervention that information held regarding the current involvement and concerns of all other relevant agencies is fully communicated.