

# LEVELS OF PRIORITY



## SERIOUS Priority Needs

- ❖ There is a high level of need, serious concern about the care, health or development of a child, or a child has been or is likely to suffer significant harm.
- ❖ There is serious family dysfunction, a child is beyond control, no person has or is able to exercise parental responsibility or a child has been abandoned or rejected.

The Department will start an Assessment within 24 hours in URGENT cases. Initial Assessments will be completed in 7 working days & Core Assessments completed in 42 working days of referral.

## MODERATE Priority Needs

- ❖ A reasonable standard of health and development is unlikely to be maintained without family support. A child is likely to move into the high priority category without the provision of services.
- ❖ There are identifiable factors which indicate that considerable deterioration is likely without support. This may include children who have been assessed as high priority in the recent past.

The Department will complete a Core Assessment within 35 working days of completing the Initial Assessment.

## MILD Priority Needs

- ❖ All other children, including those whose needs may not be met consistently.
- ❖ Improvements may be desirable but there are no acute risks to a child.
- ❖ The child and the carer are coping.
- ❖ Social Services help is not essential to the monitoring or maintenance of a child.

These children may not be 'in need' as defined by the Children Act 1989, as such they will not receive an initial Assessment but will be offered advice, information and redirection to other sources of support.

# AREAS OF NEED

### 1. Health

#### SERIOUS concerns:

- ❖ Babies & young children should be under the care of a responsible adult at all times.
- ❖ A child is failing to thrive & there is no medical explanation; another child in the family has died as a result of injury or faltering growth; this or another child in the family has suffered permanent health impairment as a result of injury or malnourishment.

#### MODERATE concerns:

- ❖ A child has frequently been taken to casualty/ GP, suffering from accidental injuries.
- ❖ A child is not receiving or following treatment for a recognised medical condition.
- ❖ A child has frequent periods of illness unexplained by a recognised medical condition.
- ❖ A child is not achieving normal developmental milestones.

#### MILD concerns:

- ❖ A child requires glasses or a hearing aid and is not encouraged to wear them.
- ❖ A child shows some behaviour which is not consistent with the expected level of development.

### 2. Education

#### SERIOUS concerns:

- ❖ A parent/carer rarely talks or plays with baby/child and/or leaves him/her alone for significant lengths of time.
- ❖ Younger children are frequently not collected or collected late from school.
- ❖ A child regularly truant or refuses to attend school & is involved in risk taking behaviour.
- ❖ A child is significantly underachieving in all areas at school.
- ❖ A child has been permanently excluded.

#### MODERATE concerns:

- ❖ A child is not sent to school (if of school age).
- ❖ There is no contact between the school and a child's family.
- ❖ A child has frequent unexplained absences from school & numerous unscheduled changes of school.
- ❖ A child has been excluded from nursery or school for behavioural reasons and is at risk of permanent exclusion.
- ❖ A child is excluded from, or not attending school where this leads to serious deterioration of intellectual development.

#### MILD concerns:

- ❖ A parent does not provide adequate stimulation within the home and does not encourage and support the child to attend school. Parents should take an interest in their child's achievements.
- ❖ There is a slight delay in a child achieving developmental milestones or if a child fails to attain the average level of achievement in the national curriculum.

### 3. Identity, Social Presentation & Self-Care Skills

#### SERIOUS concerns:

- ❖ A parent has rejected a child or cast him/her in the role of scapegoat.
- ❖ A child's personal hygiene and/or appearance leads them to be rejected & victimised by their peers & they are at risk of social exclusion.
- ❖ A child is inappropriately assuming parental roles and responsibilities within the home.

#### MODERATE to MILD concerns:

- ❖ A child is rarely clean or appears poorly cared for.
- ❖ Parent is highly critical of a child and shows little warmth.
- ❖ Parent finds it difficult to meet a child's needs.
- ❖ A child is expected to provide emotional support to a parent.
- ❖ A child is not encouraged to develop self-care skills.

#### MILD concerns:

- ❖ A child is occasionally unkempt or is not dressed appropriately.

### 4. Family & Social Relationship

#### SERIOUS concerns:

- ❖ A child receives no physical affection or reassurance from at least one parent/carer.
- ❖ A child is exposed to dangerous adults who pose a risk to children.
- ❖ A child shows little or no sign of attachment to parents.
- ❖ A child is unable to name one friend.
- ❖ A child exhibits signs of fearfulness and watchfulness to parent/carer or other adult.

#### MODERATE concerns:

- ❖ There is a history of violence between the adults in a household.
- ❖ Continuing or deteriorating attachment issues between parent/carer and child.
- ❖ A child has experienced several different changes of primary carer. Changes of carer continue.
- ❖ A child is not usually liked by adults or other children.
- ❖ Older children are not able to name one friend they have had for more than 6 months.

#### MILD concerns:

- ❖ A parent describes self or partner as having a poor relationship with baby/child.
- ❖ A child is rarely encouraged to meet or play with other children.
- ❖ A child has difficulty relating to other adults and children.

### 5. Emotional & Behavioural

#### SERIOUS concerns:

- ❖ A child receives physical punishment in any form or another non-accidental injury severe enough to cause bruising.
- ❖ A child has been subject to some form of 'pathological' physical abuse, eg. cigarette burns, pinching.
- ❖ There are allegations that the child has been sexually abused.

#### MODERATE concerns:

- ❖ Parents frequently smack a child.
- ❖ Parents 'blame' a child for reflex behaviour (eg. wetting).
- ❖ A child is being brought up in an atmosphere of conflict.
- ❖ Parents are not receptive to advice from professionals.
- ❖ A child's behaviour, including sexualised behaviour, is of concern to professionals and others involved with the child.

#### MILD concerns:

- ❖ There is an inconsistency in setting clear boundaries and inappropriate chastisement of the child.
- ❖ A child displays inappropriate age related behaviour.

### 6. Family & Environmental Factors

#### SERIOUS concerns:

- ❖ A child is homeless.
- ❖ The house is used as a brothel or meeting place for drug addicts.
- ❖ Syringes or other drug paraphernalia are left within the child's reach.
- ❖ The only form of lighting is through candles and there are children in the household.
- ❖ There are human faeces on the floor.

#### MODERATE concerns:

- ❖ Gas and electricity have been disconnected and there are no means of cooking.
- ❖ There are not enough beds and bedclothes.
- ❖ A small child can reach saucepans on a cooker or the flex of an electric kettle.
- ❖ Parents receive no practical, financial or emotional support from relatives or friends.
- ❖ Parents do not understand the importance of routines.
- ❖ Parents have experienced abuse and/or were accommodated by the Local Authority as children.

#### MILD concerns:

- ❖ The home is dirty but not to the extent that a child's health is endangered.
- ❖ The home is overcrowded.
- ❖ The family have had more than 2 'permanent' addresses in the last year.
- ❖ The family receives little support from relatives, neighbours or the wider community.
- ❖ Parents are deep in debt.

## STATEMENT OF PRIORITIES : ASSESSING CHILDREN IN NEED IN NEATH PORT TALBOT

### INTRODUCTION

Social Services have a duty to safeguard and promote the welfare of vulnerable children in the community. Support for 'children in need' is usually provided with the other agencies who provide services to children and families, including schools, the health services and the voluntary sector.

#### Definition of a 'Child in Need'

The legal definition of a 'Child in Need' is given in Section 17(10) of the Children Act 1989:

"For the purposes of Part III of the Act a child shall be taken 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 or development without the provision for him of services by a local authority;
- b) His health or development is likely to be significantly impaired, or further impaired, without the provision of such services; or
- c) He is disabled."

Determining whether a child is 'in need', what those needs are, and which services may be necessary to support the child and his or her family is dependent on an assessment, which will include judgements about any risks to the child and the likely degree of impairment to the child's health and development without the provision of services.

### The Neath Port Talbot County Borough Council Framework for Assessment:

These criteria relate to children and young people up to the age of 17 years, (including unborn babies), who ordinarily reside within the Neath Port Talbot County Borough Council area. The framework overleaf will be used to determine eligibility at the following stages:-

Referral and Initial Assessment

Core Assessment

Review of service provision

#### Prioritising Need:

The priority attached to an individual child's needs depends on the extent to which they are not being adequately met, and the likely consequences. Consideration will always be given to the assistance that is available from family, friends, neighbours and carers and to the responsibilities of other agencies. Needs are prioritised as high, medium or low:

#### SERIOUS PRIORITY NEED

The child's most basic need is to be safe, therefore the risk to health of serious illness, injury, exploitation or abuse, and the need for shelter, food and warmth, will be given the highest priority.

#### MODERATE PRIORITY NEED

It is in this area that prompt assessment and provision of suitable services may prevent situations breaking down. Action on medium priority needs may prevent the need for an emergency response in the future.

#### MILD PRIORITY NEED

These children may not be 'in need' as defined by the Children Act 1989 and, as such, will not receive an initial assessment. However, families will be offered advice and information and may be directed to other sources of support.

#### NOTES ON THE TABLE

Key statements on eligibility are given at the top of the table, with examples of circumstances which might indicate a specific level of priority. The table describes specific 'Areas of Need' and the high, medium and low priorities within those areas. **Circumstances requiring an urgent assessment are highlighted as shaded areas, including situations where the Child Protection Procedures will apply.**

- Any area of need which is identified as high or medium priority will trigger an assessment.
- The examples given are not exhaustive and decisions will always rely on staff exercising professional judgement.
- Professional judgements will be made by considering elements from all areas of need. Factors such as the age of the child, the history of the problems, relationships and family circumstances will all contribute to the skilful use of this priority 'tool'.
- The table considers the needs of children, their families and carers. It should be remembered that in some circumstances adults may be eligible for an assessment in their own right.
- Staff should have an awareness of the eligibility criteria for all clients groups.
- Statutory obligations outside this framework will be prioritised on a case by case basis, e.g. Section 7 or Section 37 reports, requests for client access to files, reports concerning children with special educational needs, private fostering, etc.