



Herefordshire Safeguarding
Children Partnership



Worcestershire Safeguarding
Children Partnership



Joint Herefordshire and Worcestershire Multi Agency Levels of Need:

Guidance to help support children, young people
and families in Herefordshire and Worcestershire

September 2025

Contents

Introduction	3
Expectations for multi-agency working	4
Making a professional judgement about what a family needs	5
Level 1 need – Universal services	7
Level 2 needs– Additional needs	7
Level 3 needs – Targeted support.....	7
Level 4 needs – Statutory Child Protection Intervention	7
Information sharing and consent	9
Equality and diversity	11
Social Work Models of Practice	12
Herefordshire Model of Practice: Restorative Practice	12
Worcestershire Model of Practice: Signs of Safety	12
Family Help in Herefordshire and Worcestershire	13
The family help processes in Herefordshire and Worcestershire	14
Safeguarding Children’s Social Care Pathway	15
GET SAFE: Children at risk of or experiencing criminal exploitation	16
Managing professional disagreements	16
Appendix 1 Levels of need examples	17
Level 1 needs: Universal services.....	17
Level 2 needs: Additional support	19
Level 3 needs: Targeted support.....	22
Level 4 needs: Statutory Child Protection Intervention.....	27

Introduction

Working together to safeguard children 2023 (section 117) requires the safeguarding partnership to publish a threshold document which sets out the local criteria for providing help, support and protection to children young people and their families.

Working Together guidance states that this should include:

1. The process for early help assessments and the type and level of early help and targeted early help to be provided under sections 10 and 11 of the Children Act 2004.
2. The criteria including the level of need for when a case should be referred to local authority children's social care for assessment and for statutory services under:
 - **Section 17 of the Children Act 1989** (children in need including disabled children).
 - **Section 47 of the Children Act 1989** (cause to suspect a child is suffering or likely to suffer significant harm).
 - **Section 31 of the Children Act 1989** (care and supervision orders).
 - **Section 20 of the Children Act 1989** (duty to accommodate a child)
3. Clear procedures and processes for cases relating to
 - The abuse neglect and exploitation of children
 - Children managed within the youth secure estate
 - Disabled children.

This document is intended to assist multi agency professionals to make decisions about how to respond to the needs of children, young people and their families who they are in contact with or working with. It is not intended to be a prescriptive or exhaustive or is a definitive way to open or close a gateway to a particular service or a range of services.

Every child and their family are unique and their whole family's needs, strengths, wider family and community networks should be considered when determining the right help and support at the right time. Professional decisions should be made using our professional judgement supported

by information we hold, this guidance and our local partnership interagency child protection safeguarding procedures which can be found at:

For Herefordshire:

[Children's Policies & Guidance - Herefordshire Safeguarding Boards and Partnerships](#)

For Worcestershire:

[Worcestershire Safeguarding Boards \(safeguardingworcestershire.org.uk\)](#)

Expectations for multi-agency working

Safeguarding and promoting the welfare of children and young people is everybody's responsibility, protecting them from significant harm is dependent upon effective joint working and communication between practitioners with different roles and expertise.

Strong multi agency and multidisciplinary working is vital to identify and respond to the needs of children and families. Expectations have been developed to underpin this multi-agency working in Working Together 2023. They apply to all agencies and practitioners involved in safeguarding and promoting children's welfare. Specifically, these include police, local authorities, health services, probation services, youth offending services, education providers and childcare settings, and voluntary and 3rd sector organisations.

Multi agency expectations for direct practice include:

Collaborate: practitioners working with the same child and family share information to get a complete picture of what life is like for the child. Collectively, they ensure the child's voice is at the center and the right support is provided.

Learn: practitioners learn together by drawing on the best available evidence from their individual fields and sharing their diverse perspectives during regular shared reflection on a child's development, experiences, and outcomes.

Resource: practitioners build strong relationships across agencies and disciplines to ensure they support and protect children with whom they work.

Include: practitioners recognise the difference between, and are confident to respond to, circumstances where children experience adversity due to economic and social circumstances and acute family stress, and situations where children face harm due to parental abuse and neglect.

Mutual challenge: practitioners challenge themselves, and each other question each other's assumptions, and seek to resolve differences of opinion in a restorative and respectful way.

Many children and families do not need safeguarding at a statutory level but may need help and support to manage a particular identified need or situation or a challenge they are facing. Organisations and agencies should have in place effective ways to identify emerging problems and potential unmet needs of individual children and their families. In Worcestershire we refer to this offer of help and support as "Early Help". Early help is support put in place for children of all ages (0-18 years). Early help is not about the age of the child or young person but about **supporting that child and their family at the earliest opportunity** when we identify they have a need; so that they get the right help and support or access the right service at the right time for them. In doing this we aim to help them to create the changes they want to; or get involved with the right services to meet their needs and therefore, through this approach we can help prevent the risk of their situation getting worse or more complex and escalating. This early help approach helps the family develop their knowledge or skills, building their resilience and supporting positive outcomes for them as individuals or as a family. **It is important that children and young people receive the right service at the right time and at the earliest opportunity to prevent their needs and or vulnerability increasing.**

Practitioners who work for specialist services for adults, such as mental health or substance misuse services, should always consider the needs of any children and young people in the family. In particular the ability of parents or carers to meet the needs of children but also to safeguard and protect children and young people from harm. This should always be considered when addressing an adult's ongoing care, safety /risk or treatment programme or discharge from their care setting into the community.

Making a professional judgement about what a family needs.

Professionals who work with children and young people make judgments about their needs every day as part of their job role. They will help children and their families to access their agencies own resources as part of their everyday work. In some situations, the agency's own resources will not be sufficient or appropriate and consideration will need to be given to involve other partner or voluntary agencies with the agreement of the child, young person and or their family.

In many cases this will involve engaging one other agency to provide a specific service to meet an identified need. In cases where more than one other agency needs to be involved, but it is still a straightforward process in engaging other services to work together with the child and family, this can be offered at level 1 and 2 as part of an early help offer from that lead agency.

However, when a child's situation becomes increasingly complex, or professionals become more concerned about emerging risks or vulnerability, a more structured approach to early help will be required to coordinate how agencies work together, how they engage with the family and ensure they keep the child at the centre of their approach and outcome. In these situations, it will be important to consider needs of parents and supportive wider family, who can be part of the overall support being provided to the child. This is called Think Family.

The year 2025 is seeing the implementation of the government's new welfare bill and the Families First Partnership programme. This programme seeks to introduce a more streamlined approach to early help and children in need and introduces Family Plans and the role of the Lead Practitioner.

When several agencies are involved, it is important to identify with the family a **lead practitioner**, ensuring:

- that as professionals everyone is communicating and sharing known information
- that the help and support is both well-co-ordinated to enable the family to engage
- but is also the right help and support to address the identified needs
- and that we can see the positive impact this is making for the child and their family.

In Herefordshire and Worcestershire, like all other Local Authorities, it is important to guide professionals as to what "Level of Need" a child should receive to promote their welfare or protect them from harm. This is to ensure children get "the right service at the right time" and to bring some consistency to how we respond to referrals into our services as a multi-agency group.

When making decisions about children the following questions are helpful to understand:

- What additional needs does the child/young person/young adult have?
- What is the child's voice telling me? What are they telling me?
- What is the parent / carer saying about the situation?
- What help and support do they need, and which agencies or professionals can support them with this?
- Is this something I can support them with or help them access / ask a partner agency to help them with?
- Who can work with me or help me to support this child/ young person?
- Who is already involved with a child young person or their parents/ carers?
- Is the child at risk or likely to be at risk of significant harm?
- Is the child a child in need or a child in need of protection as defined by the Children Act 1989?
- When considering information provided by family members, friends or neighbours, be sure to give it appropriate weighting within your decision making.
- Always be aware that information provided by children, young people, family members or others associated with the family may be influenced by intimidation and/or coercion from others. Don't take information at face value; maintain a professional uncertainty and always look to check, challenge, corroborate, and triangulate information provided.

Any professional who considers that a child needs multi agency help or support should always consider discussing it with their line manager/supervisor and/or safeguarding lead.

Professionals may wish to discuss this with a colleague from another agency who is involved with a child or family to gather a better understanding of the child's situation before deciding on the next steps. This should generally be with the consent of the child if appropriate or parents/ carers that hold parental responsibility.

If a professional believes a child is at risk of significant harm or is experiencing significant harm, they must always be referred to children's social care without delay.

Levels of need for children and young people

Children and young people may have additional or unmet needs at any age or stage of development (0 to 18 years); their circumstances or that of their parents / carers may have changed over a period or they may have an accumulation of different factors happening which increases a child or young person's vulnerability or unmet needs. Therefore, the type of response they will require from a single or multiple agencies/ disciplines working together will change to enable them to meet those needs/ address that challenge and get the right help and support at the right time; to prevent the situation escalating or becoming more acute. This level of need guidance does not directly correlate with those applied within individual agencies or organisations for their own internal service delivery/ provision or response, as this is focused on the presenting needs of that child, young person and their family.

Level 1 need - Universal services

Represents children and young people with no identified additional needs. Their needs are met through the routine access to services such as early years, education and health services, such as the GP or hospitals. Some may also be receiving services from housing and voluntary sector organisations. Most children and young people will successfully develop and thrive at this level of need. These are known as universal services available to all children and young people. (see appendix 1 for examples).

Level 2 needs- Additional needs

Represents children with additional presenting needs which can include parenting support, emotional well-being, housing, finances, and vulnerabilities in their community known as contextual safeguarding. These extra needs can be met by a universal service providing single agency additional support and/or co working with one or more partner agency or voluntary agencies to address the identified additional needs. An offer of early help and support will build on a family's existing strengths and should be focusing on whole family working to support parents and carers respond to the child identified needs, safety and well-being with a focus on addressing and preventing an escalation of those needs and vulnerabilities. (see appendix 1 for examples).

Level 3 needs - Targeted support

Represents children and young people who have complex needs themselves and/or that of their family, which impacts upon their well-being, their needs being met, their safety and family life. This may include multiple adverse childhood experiences, risk of family breakdown, poor emotional and mental health, inadequate parenting, domestic and/ or substance misuse. They will require several agencies working together in partnership with the family in a coordinated way to help the family address their needs, make changes and improving the family functioning and outcomes for the children. (see appendix 1 for examples).

Level 4 needs - Statutory Child Protection Intervention

Represent children who need statutory and/ or specialists agency interventions including:

- Children with acute mental health needs
- Children young people who have committed a criminal offence
- Children in need, including those in need of protection and those who are privately fostered.
- Children in care

A child or young person's needs can change anytime, they can move between the levels of need in either direction. This reinforces the importance of effective and seamless multi agency working with them and their family and often including their wider family network. This ensures the child receives the right support at the right time and the continuity of help and support is available to them.

Children's social work services will act as lead professionals in the following:

Under section 17 of the Children Act 1989 – Children's social care will assess children, young people aged 0-18 years referred with identified level 4 needs to determine if they are in need of protection, a "child in need" or have identified needs which can be met through an early help response. If the child/young persons identified needs are level 4 and those needs are not already being addressed by a specific specialist service e.g. CAMHS, Youth Justice etc then an assessment will be undertaken with the family to identify if they are a child in need under section 17 and what support and services, they need to address those needs. This includes children who are disabled, and the family's consent is required.

Section 47 of the Children Act 1989 – Children's social care will act as the lead agency and arrange a child protection strategy discussion with police, health and education and any other services involved with the children and their family e.g. drug and alcohol services, probation etc. The focus of this professionals only meeting is to determine the risk of significant harm and / or the likelihood of significant harm in law including any criminal offences. The outcome of this will determine next steps. This may include a child protection enquiry (Section 47) or a Social Work assessment (section 17) and / or a criminal enquiry.

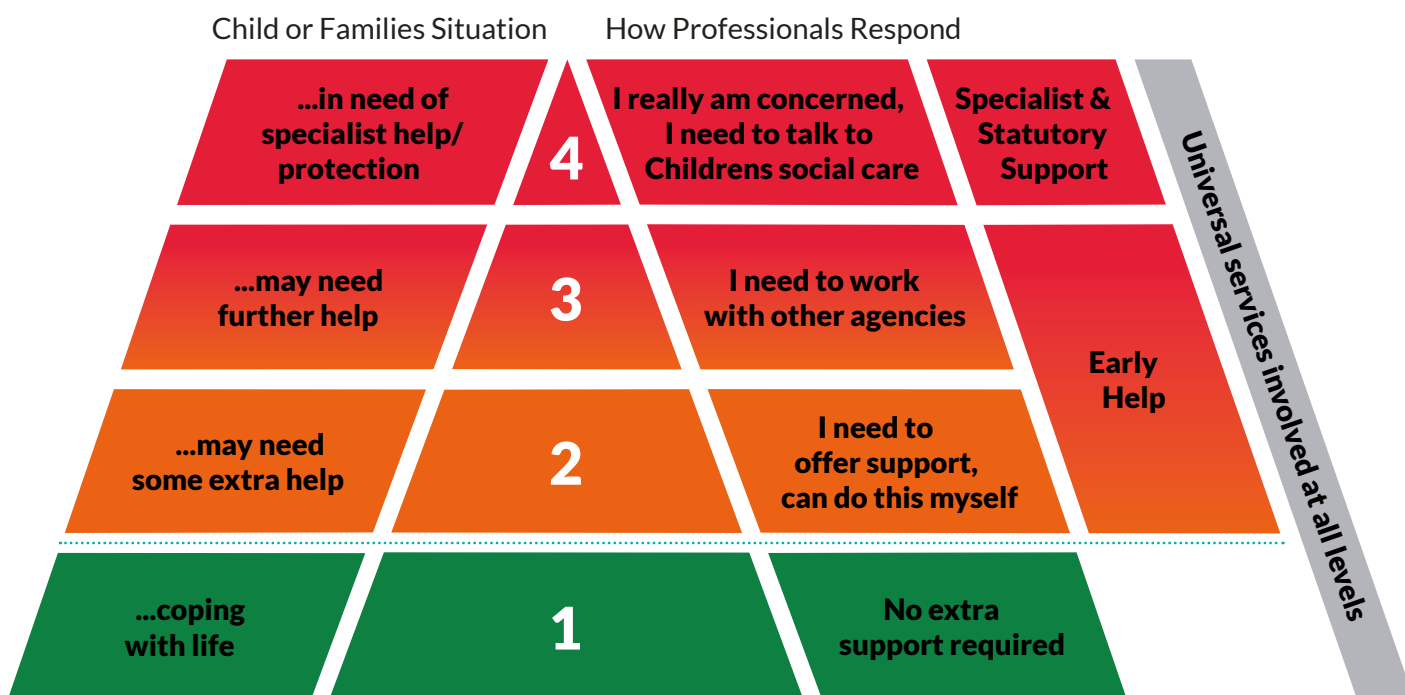
Section 31 of the Children Act 1989 – this relates to children and young people made subject to court orders made in care proceedings.

Care orders will grant the local authority parental responsibility shared with a parent(s) /carers and therefore we as partner agencies become responsible for the children as corporate parents. The child's care plan is overseen through a "Child in care" review and all partners contribute to the care and support of the child/ young person. The local authority is the lead practitioner.

Supervision orders are also granted under section 31 of the Children Act 1989 and the same threshold of need and risk applies. This order places a duty on the local authority to "advise, assist and befriend the child". The child's plan is a child in need plan. The local authority is the lead professional and will co-ordinate the plan with the family and partner agencies.

Section 20 of the Children Act 1989 – This applies whereby a child or young person is accommodated by the local authority in agreement with those who hold parental responsibility, or where a young person can give informed consent e.g. homeless young person 16 years or over.

Figure 1: Levels of Need



Information sharing and consent

No single practitioner can have a full picture of a child’s needs and circumstances so effective sharing of information between practitioners, local organisations and agencies is essential for early identification of need, assessment, and service provision to keep children safe. Rapid reviews and child safeguarding practice reviews have highlighted that missed opportunities to record, understand the significance of, and share information in a timely manner can have severe consequences for children.

Practitioners should be proactive in **sharing information as early as possible** to help identify, assess, and respond to risks or concerns about the safety and welfare of children. This may be when problems first emerge for example persistent school absences or where a child is already known to the local authority children social care. **Sharing information about any adults with whom that child has contact, which may impact the child safety or welfare, is also critical.** Information sharing is also essential for the identification of **patterns of behaviour** for example a child at risk of going missing or has gone missing or missing from education.

The Data Protection Act 2018 and UK general data protection regulation (UK GDPR) supports the sharing of relevant information for the purposes of keeping children safe, fears about sharing information must not be allowed to stand in the way of safeguarding and promoting the welfare of children. To ensure effective safeguarding arrangements practitioners should not assume that

someone else will pass on the information they think may be critical to keep a child safe. If a practitioner has concerns about a child’s welfare or safety, then they should share the information with the local authorities’ children social care team and/ or the police.

UK GDPR provides a number of bases for sharing personal information, it is not necessary to seek consent to share information for the purposes of safeguarding and promoting the welfare of a child provided that there is a lawful basis to process any personal information required. The legal basis that may be appropriate for sharing data in these circumstances could be “legal obligation” or “public task” which includes the performance of a task in the public interest or the exercise of official authority.

Practitioners must have due regard to the relevant data protection principles which allow them to share personal information as provided for in the Data Protection Act 2018 and the UK GDPR.

Sharing information or referring a child, young person, and/or their family/ caregiver to another agency you need to consider the following:

1. If the family **needs help and support** you must seek the consent of the parent, and the child if the child is over 13 years old and has capacity, to share their information with another service.
2. If you believe **the child is suffering or likely to suffer significant harm** then you should share the information, but you must inform both the parents/carers and the child, if the child is over 13 years old and has capacity prior to sharing the information. Telling them whom you are sharing information with and why. It is important they know why you are concerned **unless:**
3. In **rare circumstances**, whereby the informing of a parent/carer, and /or the child/ young person before information sharing you believe will increase or pose a risk of significant harm to a child or jeopardise any potential police criminal inquiry the information sharing should be made without informing the parent or the child.
4. **Cross Border Working Together.** All practitioners should be particularly alert to the importance of sharing information when a child moves from one local authority to another, due to the risk that knowledge pertinent to keeping a child safe could be lost.

Do not delay in disclosing information to obtain consent if in doing this might put a child at risk of significant harm.

In cases where there is an immediate risk of significant harm practitioners should call the police on 999 and or in emergencies outside of office hours, the Emergency Duty Team (EDT). All verbal referrals will need to be followed up in writing the next working day.

For Herefordshire:

Herefordshire Multi Agency Safeguarding Hub: **01432 260800**

Emergency Duty Team: **01905 768020**

For Worcestershire:

Worcestershire Family Front Door on **01905 822666**

Emergency Duty Team: on **01905 768020**.

For more information please access: Information sharing advice for safeguarding practitioners: DfE non statutory information sharing advice for practitioners providing safeguarding services for children, young people, parents and carers (publishing.service.gov.uk)

Equality and diversity

We are committed to treating all members of our communities fairly, with respect and dignity, regardless of age, gender reassignment, disability, race, ethnicity, sexual orientation, religious or political beliefs, relationships (being married or in a civil partnership), pregnancy or being on maternity leave. Practitioners working with children, young people and their families should demonstrate cultural competency by actively seeking to understand how a family's identity, culture, ethnicity and beliefs influence their lives, values and circumstances. This awareness supports respectful, inclusive, and effective practice.

With some families, perhaps the child or young person, or maybe a carer will need professionals to ensure their communication and information sharing process are accessible. This could happen where English is not their first language, or where they have a disability or sight or hearing loss for example. In these circumstances an interpreter may be required, or information provided in the easy read or an alternative format such as large prints or clear print, and/or translated into the family's first language.

Effective communication is essential in supporting children, young people and their families and it is important that children and young people are fully informed so they can engage in decisions about them, understand professionals' worries or concerns. Possible consequences of not meeting communication needs are that:

- They cannot give informed consent to something they don't fully understand
- they are disadvantaged if they can't access the information they need
- they lose trust and confidence in professionals
- they will not be able to fully engage with services or support

All agencies should have arrangements in place for providing language interpreters including British sign language, translated text and information in alternative formats. If you require further information and advice, you can contact:

For Herefordshire:

The diversity team at Herefordshire Council on diversity@herefordshire.gov.uk, or your own agency's lead.

For Worcestershire:

The quality manager at the County Council on equality@worcestershire.gov.uk or your own agency's lead.

Social Work Models of Practice

Children Social Care services will each have a model of practice underpinning the way they work with families and to assess risk. The next session outlines the model of practice in Herefordshire and Worcestershire.

Herefordshire Model of Practice: Restorative Practice

In Herefordshire, we are committed to developing collaborative working relationships with families to help us to understand the circumstances of each family, to be professionally curious and rigorous in making judgements and to maintain a clear and relentless focus on safety and protection. We want children and their families to feel listened to and to be able to take an active role in finding solutions and planning for their future.

The fundamental premise for restorative practice is that, “human beings are happier, more cooperative and productive, and more likely to make positive change in their behaviour when those in positions of authority do things WITH them rather than To or For them.” When we work with and alongside people, based on mutual respect and trust, there is strong evidence to say that outcomes for children and their families are improved.

This includes being explicit about what needs to be done to safeguard or protect a child, using a ‘high challenge’ and ‘high support’ approach, which builds on strong relationship-based practice between children, families and professionals. The aim is to achieve sustainable change and reduce the likelihood of dependency on professional services, including repeat referrals of children to safeguarding services.

Each child and family member is an individual; each family is unique in its make-up and reaching decisions about levels of need and the best intervention requires discussion, reflection and professional judgement.

Worcestershire Model of Practice: Signs of Safety

Our vision in Worcestershire is to work together with children, young people, their families and the wider community to ensure the safety and wellbeing of every child remains paramount. We use the Signs of Safety approach to create a shared way of talking about worries, strengths, and safety. This helps us and families build clear, effective plans that support positive outcomes. At the heart of our approach is relationship-based practice where honest conversations and strong partnerships with families are central.

Our interventions focus on gathering clear evidence about the potential for change, while working alongside families and their wider support networks to keep children safe. Signs of Safety provides a structured framework that balances analysis of risk, family strengths, and protective factors, helping us engage constructively even when there are different perspectives or uncertainty.

We believe families should always understand why we are involved and what the concerns are. Together, professionals and family members agree on:

- What is working well
- What the worries are
- What needs to happen next
- Who will support the child’s everyday safety

We are committed to engaging with all children and young people, making sure their voices are heard. We ask them what makes them happy, what worries them, and what changes they would like to see in their family and community. Our aim is to use a consistent and shared language across the child's journey; the child's voice drives everything we do.

Family Help in Herefordshire and Worcestershire

Working Together 2023 states that: *“early help is support for children of all ages that improves a family's resilience and outcome or reduces the chance of a problem getting worse. It is not an individual service, but a system of support delivered by local authorities and their partners working together and taking collective responsibility to provide the right provision in their area. Some early help is provided through universal services, such as education and health services”.* (Section 118 page 44)

In Herefordshire and Worcestershire, the Families First initiative puts children and their families at the center of everything we do and sets out the vision for all children and families to receive 'Family Help' at the earliest opportunity, so that they can overcome challenges, stay together and thrive. This describes the help and support offered to children, young people and their families **at Level 2 additional support or Level 3 targeted support needs**. Effective family help relies upon professionals identifying unmet needs for the child and their family and working with them to identify how best to help and support them.

Professionals should consider the need for early help for a child or young person who:

- is disabled
- has special educational needs (whether or not they have a statutory education health and care plan (EHC) plan)
- Is a young carer
- Is bereaved
- Is showing signs of being drawn into antisocial or criminal behaviour, including being affected by gangs and county lines and organised crime groups and or serious violence, including knife crime.
- Is frequently missing/goes missing from care or from home
- is at risk of modern slavery, trafficking, sexual and/ or criminal exploitation.
- is at risk of being radicalised
- is viewing problematic and or/ or inappropriate online content or developing inappropriate relationships online.
- Is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse.
- is misusing drugs or alcohol themselves
- is suffering from mental ill health
- has returned home to their family from a period in care
- privately fostered children who need early help
- has a parent or carer in custody
- is missing education, or persistently absent from school, or not in receipt of full time education.
- Has experienced multiple suspensions and is at risk of or has been permanently excluded.

The family help processes in Herefordshire and Worcestershire

In both Herefordshire and Worcestershire, professionals are encouraged to use the **Herefordshire/ Worcestershire early help assessment** for children and young people in need of additional or targeted support. At the time of writing there are separate assessment templates for each area, however under the Families First implementation these will be subject to further development through 2025/26).

Some agencies also have their own agency early help assessment template they can also use.

Where a child and family would benefit from coordinated support from more than one organisation or agency for example education, health and housing there should be a multi-agency Early help assessment and plan.

These early help assessments should be:

- Undertaken with the agreement of the child and their parents or carers involving the child and family as well as all the practitioners who are working with them.
- Take account of the child's wishes and feelings wherever possible which could include providing advocacy support where this is needed to enable the child or adult to share their views for example, where a child may have communication difficulties due to a disability.
- Take account of the child's age, family circumstances and extra familiar contexts and whether these factors are contributing to or preventing good outcomes e.g. peer on peer abuse, anti-social behaviour.
- Take account of the needs of all members of the family as individuals (whole family working) and consider how their needs impact on one another. Practitioners should be aware of situations where there has been a breakdown in relationships between the child and their family and engaging the whole family may not be appropriate.
- Cover both presenting needs and any underlying issues with the understanding that family's needs can change over time for example, when a child moves up to secondary school.
- Be based on facts, and explore and build on strengths
- Be clear about the action to be taken and the services to be provided
- Identify what help the child and family require to prevent needs escalating.
- Provide the basis for any future assessments if they are needed e.g. Education, health and care plan, child in need or child in need of protection.

A lead professional may be identified following consultation with the child, young person and their family, and it will be their role to coordinate the early help assessment, involve the family and bring together the agencies/services to work together to coordinate the delivery of an early help support plan which will develop the family plan.

If the child, young person, parents or carers do not consent to an early help assessment, then the lead professional will make or need to make a judgement as to whether, without help and support, the needs of the child will escalate and be adversely affected/ impacted, reviewing what is already in place for the child and young person. A discussion with your safeguarding line manager is recommended

to think through ways in which help, and support can be offered via advice or signposting or is a safeguarding referral to children's social care necessary at level 4 needs.

For Herefordshire:

The Children's Help and Advice Team (CHAT) in Herefordshire has been developed to promote children and their families get the right help at the right time. CHAT sits alongside the Multi-Agency Safeguarding Hub (MASH) and is responsible for contacts which come into the local authority at level 2 or below.

The Children's Help and Advice Team will proactively work with families and referrers to ensure the right support is offered to improve families' resilience and outcomes or reduce the change of a problem getting worse. It is not an individual service, but a system of support delivered by the Local Authority and their partners, working together to take collective responsibility. This will include signposting, offering advice and guidance and facilitating the completion of an Early Help Assessment, where appropriate, with those families whose needs meet level 3 or high level 2 and who give their consent.

Further information:

For Herefordshire:

See **Being a parent – Herefordshire Council** and/or contact CHAT, the Children's Help and Advice Team on (01432) 260261.

For Worcestershire:

Further professional information, training and support is available on: **Early Help guidance for families and professionals | Worcestershire County Council**

For information on resources and services and support available to families further information is available via the Virtual family hub: **Virtual Family Hub | Worcestershire County Council**

Safeguarding Children's Social Care Pathway

If you have a safeguarding concern regarding a child or young person or consider that a child is a "child in need" with level 4 needs in line with this guidance a referral to children's social care should be made.

If a child is at risk of immediate harm then the police should be called on 999 and a verbal referral made to the relevant Children's Services. All verbal referrals are required to be followed up in writing the next working day.

Herefordshire Multi-Agency Safeguarding Hub on 01432 260800 (Monday to Thursday 8:45am – 5:15pm and Fridays 8:45am – 4:45pm) or out of office hours including weekends and bank holidays in **an emergency** on 01905 768020 and ask to speak to a social worker.

Worcestershire: Referral to children's social care (level 4) (worcestershire.gov.uk) children's social work team on 01905 822666 (Monday – Thursday 9am – 5pm and Fridays 9am – 4.30pm) or out of office hours including weekends and bank holidays in **an emergency** on 01905 768020 and ask to speak to a social worker.

The children's social care team will review the information received and what is already known and may seek additional information/ clarification from you to determine the level of need and the right response and approach. They aim to make decisions on all referrals within 24 hours of the information being received. Referrers will be informed of the outcome within 3 working days in writing via the online secure referral portal.

If the identified needs require a children's social care response this will be progressed immediately. If an early help or universal response is required, then advice will be given to the referrer via the same portal.

Further advice / guidance can be found at: **<http://westmidlands.procedures.org.uk>**

GET SAFE: Children at risk of or experiencing criminal exploitation.

In both Herefordshire and Worcestershire, the partnership, identification and response pathway to children and young people who are identified as being at risk of or experiencing child exploitation is known as “Get SAFE”. This approach identifies and works with children across level 2 – 4 needs.

Professionals should complete the referral to children’s social care and attach the **Get safe risk assessment to this referral as an upload**. The receiving Children’s Service will ensure this is processed and sent to their multi-agency GET SAFE team where the local Get Safe partnership will review any immediate safeguarding concerns will be addressed the same day.

For more information:

Herefordshire: [Get Safe - Contextual Safeguarding - Herefordshire Safeguarding Boards and Partnerships](#)

Worcestershire: [Get Safe | Worcestershire County Council](#)

Managing professional disagreements

Disagreements over the management or response to concerns can impact negatively on positive working relationships and consequently on the ability of professionals to safeguard and promote the welfare of children so it is important that disagreements are resolved without delay. All agencies are responsible for ensuring that staff are supported and know how to appropriately escalate into agency concerns and disagreements about children or young people.

For Herefordshire:

For more information please refer to the Herefordshire Resolution of Professional Differences Policy that can be found at: [Professional Differences Policy - Herefordshire Safeguarding Boards and Partnerships](#).

For Worcestershire:

For more information please refer to the Worcestershire safeguarding children partnership escalation procedure located at: <http://westmidlands.procedures.org.uk/local-content/4gjN/escalation-policy-resolution-of-professional> search: disagreements.

Further reading:

Working Together to Safeguard Children 2023: [Working together to safeguard children 2023: statutory guidance \(publishing.service.gov.uk\)](#)

Information Sharing: [Information sharing advice for safeguarding practitioners - GOV.UK \(www.gov.uk\)](#)

Levels of Need guidance: Revised and updated September 2025.

Appendix 1 Levels of need examples

The below tables is for professional guidance and is not an exhaustive list of presenting needs. In identifying needs and the right support at the right time this

Level 1 needs: Universal services

No additional support required beyond that which is already available to any child and young person and is provided to them by their family, education and health services including services such as police, A&E.

Service examples at Level 1 need:

Early years, education, primary health care, maternity services, housing, community health care, children centre services Let's Play & Baby Let's Play, and leisure services. Children are supported by their family and in universal services to meet all of their needs. (For Herefordshire, see community resources on the [Talk Community Directory](#)).

Area of development and needs	Potential presentation of child, young person and their family at this level.
Health	<ul style="list-style-type: none"> ■ Meeting development milestones including speech and language. ■ Physically and psychologically well. ■ Adequate diet, hygiene, clothing. Mental health managed effectively by a child or young person or parent carer. Access health services including dental and optical care. Participating in general health and safe relationships. ■ Accessing emergency treatment when needed.
Education	<ul style="list-style-type: none"> ■ Accessing education/ school/ college regularly ■ No barriers to learning ■ Achieving key stages ■ Receive government grants/ support EG free school meals. ■ Carers support development through positive interaction and play and stimulation.
Identity	<ul style="list-style-type: none"> ■ positive self-identity, sense of self and abilities. ■ demonstrates feelings of belonging and acceptance. ■ Positive relationships with peers ■ play stimulation and positive activities. Access and opportunities to hobbies and activities..

Area of development and needs	Potential presentation of child, young person and their family at this level.
Parenting capacity, emotional and behavioural development	<ul style="list-style-type: none"> ■ Knowledgeable about the effects of crime and antisocial behaviour ■ Knowledgeable about sex and relationships and consistent use of contraception if sexually active, where the young person is of an age to consent ■ Good quality early attachments. ■ growing competence in practical and emotional skills in line with age and development. ■ Positive routines, support, guidance and boundaries by care givers. ■ Positive behaviour management strategies in place giving consideration to the child's age, understanding and needs. ■ Positive praise and recognition by care givers. ■ Carers provide warmth, praise and encouragement. ■ Stable environment. ■ No substance misuse by child or young person, parent or care giver.
Family relationship, environment, history and functioning.	<ul style="list-style-type: none"> ■ Stable and affectionate relationships with caregivers. ■ Carers able to provide for the child's needs and protect them from danger and harm. ■ Supportive family relationships including wider family. ■ Supportive parents even when separated ■ Good relationships with siblings ■ Housing has basic amenities and appropriate facilities. ■ Parents / caregivers have aspirations for their child. ■ Child has access to play stimulation and positive activities hobbies and interests, places and spaces in the community
Social presentation	<ul style="list-style-type: none"> ■ Appropriately dressed for different settings and weather. ■ Good level of personal hygiene. ■ Positive interaction with people peers family etc. ■ Positive communication, speech and language development supported.

Level 2 needs: Additional support

Young people are children and young people with emerging vulnerabilities whose needs require support.

Service examples at Level 2 need:

- Parenting programmes
- School holiday and short breaks provision for disabled children
- Extra health support for family members; behavioural support
- Housing support
- Additional learning support
- CAMHS tier 2 support to schools
- SEN support and help to find education and employment
- Speech and language therapy Children’s centre services
- Children’s Help & Advice Team (Herefordshire)
- Services provided on a voluntary basis to families (these may be offered by volunteers and/or commissioned through a voluntary organisation).

Area of development and needs	Potential presentation of child, young person and their family at this level.
Health	<ul style="list-style-type: none"> ■ Slow in reaching development milestones, short intervention makes improvements. ■ Identified language and communication difficulties. ■ Some chronic/ recurring health problems or terminal illness impacting on the family. ■ Minor concern regarding diet/ dental /health/ hygiene and clothing. ■ Mild to moderate emotional health / mental health problems including low mood and/ or anxiety. ■ Missing health checks/ immunisations. ■ Limited engagement with anti-natal appointments. ■ Child with a disability and requiring support services. ■ Risk of teenage pregnancy. ■ Child needs healthy relationship advice/ sexual health. ■ Child has additional health needs that require health input e.g. community paediatrician. ■ Pre-birth additional support required due to vulnerabilities/ health needs of mother or baby. ■ Mother has undergone FGM procedure and the risk assessment undertaken by health professionals identifies there isn’t a perceived risk of the child being subject to FGM.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Education	<ul style="list-style-type: none"> ■ Occasional irregular or non-attendance, poor punctuality, including sickness. ■ Not in any education employment or training (NEET). ■ Child is identified as having additional learning needs (SEN support). ■ Child at risk of exclusion and on a school Individual Support Plan. ■ Few opportunities for play/ socialisation/ peer relationships. ■ Identified language and communication difficulties. ■ Not achieving educational potential. ■ Struggling with reading and writing given age and development needs. ■ Parents not engaging/ supporting child with school/ parents evening/ events / communication.
Identity	<ul style="list-style-type: none"> ■ Some insecurities and worries around identity. ■ Child or young person needs support around their own self identity ■ e.g. race, culture, disability, sexual orientation, sex, gender reassignment, religious beliefs. ■ Child subject to persistent discrimination ■ Poor self-image/ body confidence. ■ Children involved in bullying/ cyber bullying / isolation around perceived difference or bullying of others.
Parenting capacity, emotional and behavioural development	<ul style="list-style-type: none"> ■ Low level mental health or emotional health and wellbeing needs. ■ Involved in anti-social behaviour (low level). ■ Bereavement support / loss of parent/ carer/ sibling or significant person. ■ Peer relationships of concern/ unhealthy/ poor influence/ conflicts/ bullying including online. ■ Emerging concerns about child being radicalised or exposed to extremism ■ Low parental aspirations for themselves or their child. ■ Parents struggling with parenting needing additional professional support/ guidance..

Area of development and needs	Potential presentation of child, young person and their family at this level.
Family relationship, environment, history and functioning.	<ul style="list-style-type: none"> ■ Young carers ■ a parent serving a custodial sentence. ■ Parent / care giver having additional caring responsibilities for wider family members. ■ Struggling with managing teenager behaviours and boundaries. ■ Low level concerns about missing from home/ school. ■ Child worried about sibling rivalries / conflict at home. ■ Young and / or vulnerable parent in need of support including practical, advice and support. ■ Parents needing support around behaviour management and appropriate sanctions and responses. ■ Parent /carers isolated or lack of wider family or positive support networks. ■ Conflict between parents who parent apart and little parental insight into effects on the child. ■ Impact of mental health needs on the family. ■ Family struggling on low income/ unemployment/ redundancy. ■ Poor / inadequate housing / home conditions. ■ Budget and financial help needed.
Social presentation	<ul style="list-style-type: none"> ■ Inappropriately dressed for weather/ occasion. ■ Poor personal hygiene. ■ Withdrawn / loss of interest in self and others. ■ Avoids interaction / loss of confidence/ self-esteem. ■ Social isolation, not engaged with community support/ unaware of community support. ■ Family is the victim of hate crime ■ Vulnerability in the community (Contextual safeguarding). ■ Police involvement / call outs for low level/ nuisance activity/ offences.

Level 3 needs: Targeted support

Children, young people and their family with identified needs and vulnerability that require a multi-agency coordinated approach.

Service examples at Level 3 need:

- Due to the complexity of needs, especially around behaviour and parenting, a shared professional and co-ordinated plan is developed with the family. The assessment and plan is led by Family Help Lead Practitioner and the service is provided ONLY with the consent of the parents/carers.
- A wide range of services might be involved in meeting the family's needs, e.g. CAMHS tier 3, adult mental health or drug/alcohol team.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Health	<ul style="list-style-type: none">■ There is a significant impact on the development milestones due to family or environmental factors.■ Significant concerns about diet/ hygiene/ clothing impacting on the child's emotional well-being.■ Acute, severe and enduring mental health problems including conduct and oppositional defiant disorder, compulsive/ obsessive disorder, eating disorder, suicide idealisation.■ Missing routine and non-routine health appointments for the child or young person impacting on them.■ Parents not responding appropriately to child's health needs impacting upon the well-being or development of the child.■ Child with a disability that requires multi agency support services.■ Sexual activity / sexual behaviour that is potentially harmful to self or others and may be at risk of sexual exploitation■ Conception aged under 16 years.■ Children with autism/ ADHD or going through the assessment process.■ Concerns around healthy and safe relationships for the child/young person and/or parent/carer (having an impact on the child) .■ Mother has undergone female genital mutilation (FGM) procedure and/ or there are other indicators that child might be at risk of FGM. (In these cases, a multi-agency response might be required, including a discussion with MASH, to ensure that information is shared to assess the risk)

Area of development and needs	Potential presentation of child, young person and their family at this level.
Education	<ul style="list-style-type: none"> ■ Short term exclusions including cumulative exclusions, child is at risk of permanent exclusion, persistent absence from school (50% or below). ■ Persistent absence or unimproved school attendance, previous fixed term exclusions despite level 2 support. ■ Persistently not in education, employment or training (NEET) despite previous early help support at level 2 needs. ■ Permanently excluded from school or risk of permanent exclusion. ■ Children who are electively home educated where there are concerns that their educational needs are not being consistently met ■ Education health and care plan or undertaking assessment in relation to identified needs. ■ Vulnerable learner, who may need extra help to access education ■ Child with a learning disability. ■ Disabled child with care and support needs in education. ■ Contextual safeguarding concerns for the child/ young person in the education setting. ■ Poor social and communication skills impacting on learning. ■ Concerning peer relationships in education setting including, anti- social behaviour, bullying, misogynistic behaviour and or attitudes.
Identity	<ul style="list-style-type: none"> ■ Subject to discrimination and or bullying. ■ Child experiencing difficulties with their own or their families race, culture, religion, sexuality, gender. ■ Poor self image/ self worth impacted upon their day-to-day functioning, engagement and interaction with others. ■ Young person's use of social media or online activity causing concern for their vulnerability/ risks from others. ■ Risk of exploitation, identifying as in a gang, peers who are known to carry weapons. ■ Child or young person is starting to offend.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Parenting capacity, emotional and behavioural development	<ul style="list-style-type: none"> ■ Child is often scapegoated by parents/ family. ■ Child receives inconsistent care/ has multiple caregivers. ■ Child is rarely comforted when distressed. ■ Parents lack empathy for child. ■ Parents lack in lack of interest or support to a child/ young person. ■ Difficulty coping with anger, frustration and upset (emotional regulation). ■ Offending or regular anti-social behaviour. ■ Problematic substance misuse ■ Hostile and/ or physically aggressive to other children /adults. ■ Self-harming/ risky behaviours. ■ Carrying/ using weapons to defend self and others. ■ Peer violence/ aggression.

Area of development and needs	Potential presentation of child, young person and their family at this level.
<p>Family relationship, environment, history and functioning.</p>	<ul style="list-style-type: none"> ■ Young carer needing additional help and support. ■ Child experiencing difficulties with separation, bereavement and loss. ■ Young parent (under 18's or care leavers) who need additional support. ■ Child on parent aggression and violence. ■ Risk of relationship breakdown leading to child possibly coming into care ■ Parental breakdown and conflict adversely affecting the child/ young person. ■ Starting to go missing from home or school. ■ Wider family and associates negatively impacting the care of the child or young person. ■ Substance misuse not being addressed. ■ Persistent disputes and hostility between parents, domestic abuse impacting on the child. ■ Family seeking asylum/ refugee and/or No Recourse to Public Funds. ■ Parents require specific targeted intervention regarding boundaries, discipline and routines for their children. ■ A parent repeatedly offending, and police involvement/ involvement in criminal activity. ■ Emergency services being called to the home numerous times in a short period e.g. 12 months. ■ Parental mental health and the impact of this on the child or young person. ■ Fleeing domestic abuse/ honour-based violence/ forced marriage and needing help to settle in area. ■ Families in refuges requiring support due to complex needs/ risks. ■ Housing, temporary accommodation, risk of homelessness. ■ Gambling or other financial risks impacting on the family e.g. substance/ alcohol misuse. ■ Home conditions need improving for the child/ young person's safety and welfare. ■ Serious debts/ poverty impacting on the ability to care for the child finance the home, food etc. ■ Parents not able to provide adequate care without needing support from a number of agencies. ■ Parents with learning disabilities or cognitive functioning additional needs impacting on their ability to provide care without support agencies. ■ Parents or young people who are involved in criminal activity.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Social presentation	<ul style="list-style-type: none"> ■ family socially excluded ■ escalating victimization of the family ■ criminal activity due to drugs alcohol aggression mental health ■ concern about peer-on-peer abuse and harm ■ get safe / contextual safeguarding concerns vulnerable to child criminal exploitation ■ online harm and abuse or vulnerability ■ hate crimes impacting on the family and their safety.

Level 4 needs: Statutory Child Protection Intervention

Children requiring a social work assessment under section 17 of the Children Act 1989 children in need or section 47 of the Children Act 1989 safeguarding children.

Service examples at Level 4 need:

- Children’s social care, youth offending service
- Criminal justice system
- Tier 3 and 4 CAMHS In-patient and continuing healthcare
- Fostering and residential care
- Health care for children with life limiting illness
- Services for children with profound and enduring disability
- Referrals have to be made to services with the power to undertake statutory non- voluntary intervention and services with specialist skills.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Health	<ul style="list-style-type: none"> ■ There is a likelihood of significant harm to Child’s Health and development due to physical, emotional, sexual abuse or neglect. ■ Have severe chronic/ reoccurring health problems, including severe obesity and dental decay unresolved by previous early help interventions. ■ Growing professional concern about potential fabricated and induced illness and there may be evidence of significant harm ■ There is information or concern that child is at risk of FGM, or has undergone FGM ■ Concerns about diet/ hygiene/ clothing, persistent and severe and not improving following early help interventions at Level 3 need. ■ Risk to a child or young person’s life or the life of others due to mental health problems e.g. self-harm, suicidal idealisation or attempts, eating disorders. (Call 999 for any immediate risk to life) ■ Limited engagement and evidence of change, even though parents are aware of short- and long-term implications which are likely to cause significant harm physical and /or emotional harm. ■ Child with disabilities meeting the criteria for children’s social care intervention. ■ Sexual Activity under the age of 13 years. ■ Child identified as being at significant risk of exploitation through the Get safe risk assessment. ■ Significant development delay due to neglect/ poor parenting.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Education	<ul style="list-style-type: none"> ■ Significant concerns that the child’s educational needs are not being met including persistently missing from education (50% or below), truanting, permanent exclusions, consistently impaired educational attainment/ progress, which are attributable to the parenting that the child is receiving and the parent has consistently not engaged with services at the early help level to address this ■ Severe Absence from school constituting educational neglect ■ Persistent exclusions for behaviour/cooperation in school. ■ Lack of stimulation leading to significant developmental delay
Identity	<ul style="list-style-type: none"> ■ At risk of harm and/or self-harm due to discrimination and or bullying. ■ Mental health significant impacted by low self image/ self worth. ■ Complex mental health issues requiring specialist interventions which are consistently not being adequately managed by the parent ■ Child emotional health and physical safety is compromised by exposure to radicalisation and extremist ideology ■ Child is engaging in cyber activity that places them at risk of harm from others and is not managed by the parent.
Parenting capacity, emotional and behavioural development	<ul style="list-style-type: none"> ■ Puts self or others in danger ■ Child abuses other children e.g. physically, sexually. ■ Young people charged with a crime and go to court and/or are convicted of a crime and given a sentence. ■ High criticism, low warmth resulting in emotional harm to the child. ■ Child abandoned ■ Attempts to engage with the family have been unsuccessful and/or not demonstrated significant or sustainable changes in the time scales for the child given Level 3 intervention and support. ■ Unable to protect their children and cannot prioritise the needs of the child over their own. ■ Severe or long term harm has been /or is likely to be done to the child and the parents or carers are unwilling or unable to engage in work to improve the care provided. ■ Parents are abusive verbally emotionally and or mentally and or sexually towards the child. ■ Physical chastisement of child/ young person causing harm.

Area of development and needs	Potential presentation of child, young person and their family at this level.
Family relationship, environment, history and functioning.	<ul style="list-style-type: none"> ■ Multi agency interventions are not working, and the child is suffering or likely to suffer significant harm. ■ Family breakdown and need for edge of care/ accommodation. ■ Deceased parents and no arrangements to care for the child. ■ Privately foster children/ young people. ■ Child is separated and/or trafficked. ■ Teenage parent who is subject of a child protection plan or is a child in care. ■ Domestic abuse impacting on the safety and welfare of the children. ■ Young person in a domestic abusive relationship with another young person. ■ Frequent aggression and violence. ■ Criminal activity. ■ Honour based violence/ forced marriage. ■ Person posing a risk to children (PPRC) in contact with children. ■ Special Guardianship Order applied for. ■ Child emotional health and physical safety is compromised by exposure to radicalisation and extremist ideology ■ Parental mental health, drugs/ alcohol and domestic abuse. ■ Previous history of children removed/ adopted/ child protection plan. ■ Physical accommodation places child in danger. ■ No fixed abode or homeless including at risk of homeless young people (Southwark judgement). ■ Drug and alcohol abuse/ suspect dealing. ■ No recourse to public funds ■ Missing from home or care
Social presentation	<ul style="list-style-type: none"> ■ Poor hygiene persistent and chronic, having a significant impact on the child's social experiences and health, despite advice and support at Level 3. ■ Persistent ongoing mental health needs impacting on the ability to safely and appropriately care for children. ■ Family chronically socially isolated likely to cause significant harm to the child. ■ Persistent anti-social behaviour in community by parents/carers. ■ Children are subject to care proceedings or on a Court order Wardship, EPO, Care, supervision order or remanded to LA care. ■ Transfer-in in cases from other local authority e.g. child protection, final court orders.



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