



Oldham Safeguarding Partnership

Oldham Refreshed Continuum of Need

Our Approach to Effective Support and Help Framework, for Children, Young People and Families in Oldham



Shared guidance to help all practitioners working with children, young people, families and carers to provide additional early help, intensive and specialist support.

Updated July 2024

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1. Introduction

Welcome to Oldham's Continuum of Need – Our Approach to Effective Support and help framework for children, young people and families in Oldham. This guidance is the responsibility of Oldham's Safeguarding Partnership as outlined in [Working Together 2023](#), this guidance replaces Oldham's Continuum of Need 2021.

In Oldham we have high ambitions for our children, young people and their families to thrive. We want them to feel safe and to care about their health, education, and employment. We want them to be confident and resilient individuals who are connected to their community; providing support so they are able to make an effective contribution as responsible citizens enjoying a life where they can meet their full potential.

Working Together 2023 also introduces a new chapter, "A Shared Responsibility" which places emphasis on *"successful outcomes for children depend on strong multi-agency partnership working across the whole system of help, support and protection including effective work from all agencies with parents, carers, and families."*

Working Together 2023 has provided renewed focus on how agencies provide help, safeguarding and protection for children and their families. There are three sections: Early help, Safeguarding and promoting the welfare of children, and Child protection.

Early help strengthens the role of education and childcare settings in supporting children and keeping them safe, including information on a child's right to education and risk factors for practitioners to consider when identifying children and families who may benefit from early help. The approach to working with families has been strengthened throughout the guidance, outlining the role of family networks, including stronger guidance on the use of family group conferences to improve family network engagement in decision making and supporting children.

Safeguarding and promoting the welfare of children clarifies a broader range of practitioners can be the lead practitioner for children and families receiving support and services under section 17 of the Children Act 1989, and the requirements on local authorities and their partners to agree and set out local governance arrangements. It clarifies the role of children's social care in supporting disabled children and their families, children at risk of, or experiencing, harm outside the home, children in mother and baby units (in prisons) and children at risk from people in prison and people supervised by the probation service.

Child protection introduces new national multi-agency child protection standards to set out actions, considerations and behaviours for improved child protection practice and outcomes for children. It clarifies the multi-agency response to all forms of abuse and exploitation from outside the home, consideration of children at risk of experiencing extra-familial harm in all children's social care assessments and includes resources to support practitioners understanding of the response to online harm.

This guidance is for anyone who has concerns about a child, including families, workers, and members of our community, focusing on working with families at the earliest possible opportunity. Practitioners can offer help and encouragement to families, to find their own

solutions and to support families when needed.

Our 'windscreen' framework has been refreshed through partnership review and collaboration. This illustrates that children can present with varying needs and that these needs can change over time, however the underlying Universal offer for all children and families remains throughout. The guidance clarifies how various levels of support can be accessed as a new level of need is reached, but recognising needs and risk may increase or reduce. It recognises that many agencies and organisations as well as parents, carers and wider family provide support to children and young people.

A collective understanding across the whole partnership in Oldham, plus our shared use of the principles and processes will result in:

- children receiving the right service for their particular need at the right time
- consistent delivery of the right support delivered in an equitable way
- compliance with statutory requirements

This document should be read alongside Oldham Safeguarding Partnership procedures which present best practice in safeguarding children. These procedures are available at: https://www.oldham.gov.uk/lscb/info/5/policies_and_procedures

2. Our Vision for Effective Support and Help for Children and Families

Our vision in Oldham as a partnership is that we seek to recognise where children and families are experiencing difficulty and work together with them at the earliest possible opportunity to support them to achieve positive change.

We recognise that the earliest possible help is likely to engage families to enable change. However, we are clear regarding our collaborative responsibility to highlight increasing risk or significant unmet need for targeted support or intervention where earliest possible help has not achieved change.

Our key partnership responsibility is to keep children safe and support families to achieve change together where necessary.

Oldham's approach to working with children and families recognises that:

- That the child or young person's voice, views and lived experience is central to designing and directing support or intervention.
- Better outcomes are secured by practitioners from different disciplines – *we will achieve more as a partnership than we can as single agencies.*
- Agencies working together provide the best possible service when working collaboratively with families.
- We will work with families and communities to build support within these networks, recognising our diverse communities.
- Early Help is everyone's responsibility.
- It is key that we build on established relationships with families to work with them in achieving change.
- We have clear defined pathways for support, which includes recognising key points of transition for children and young people.
- We learn together where we can improve our services to children and families, which includes respectful professional challenge.

In Oldham, we are committed to developing collaborative working relationships with families. This helps us to;

- Understand the circumstances of each family, to both individualise and coproduce our response.
- Be professionally curious and rigorous in our approach.
- Make evidence-based judgements to maintain a clear and relentless focus on safety and protection.
- Review and reflect on the impact of help and support offered.
- Target support and work with families to achieve change at the earliest possible point.

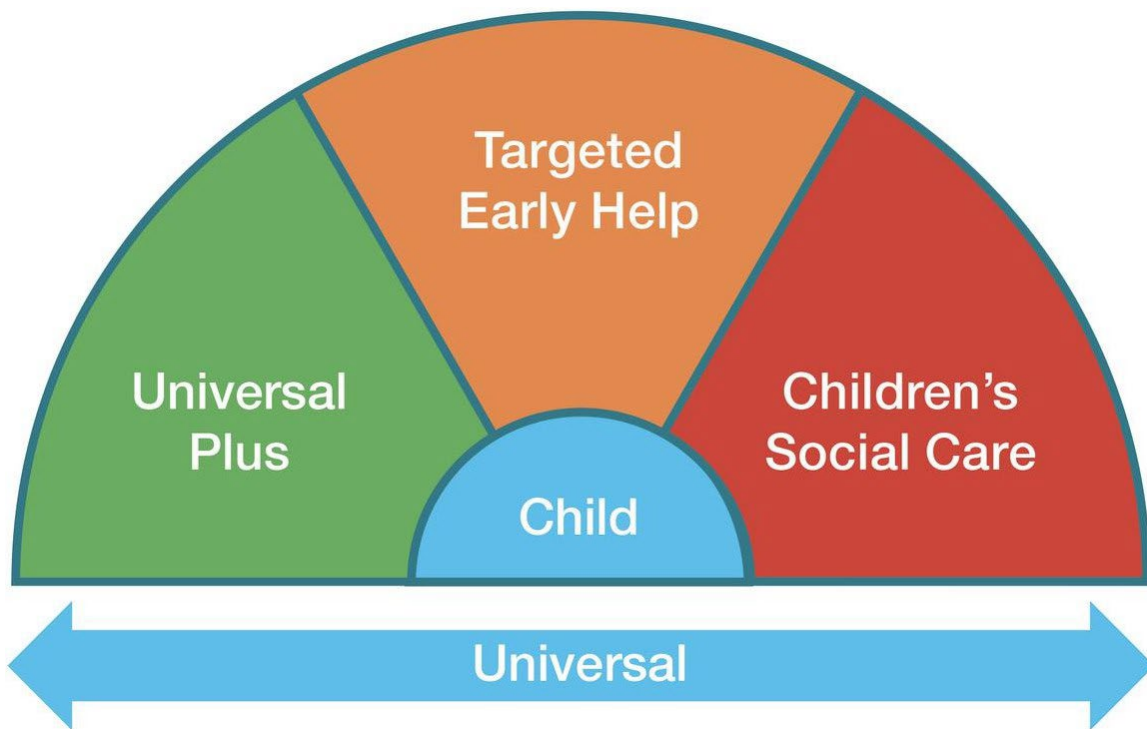
3. Continuum of Need

We are committed to integrated and multi-agency working at all levels. The levels of need show how we will respond to the requirements of children and families across **all levels of need and risk**.

Oldham Safeguarding Partnership has set out a Continuum of Need model, this ranges from children receiving “Universal” support – so considering every child, then considering those with low level needs to those whose needs are more acute requiring specialist intervention. Children’s needs can and will change and it is imperative that practitioners are able to support a smooth transition across the continuum. This ensures that we provide the right intervention and help at the lowest possible level and the earliest possible time.

The windscreen document aims to provide visual clarity to support discussions with families and professionals around levels of need and risk. This document does not replace Working Together 2023 in considering definition of section 17 or section 47 risk, however, recognises the role of early help and indicator for statutory social work intervention.

Oldham's Continuum of Need windscreen:



Universal: The needs of children are met by universal services such as schools, healthcare services, leisure and community services which are readily accessible to all, as well as the love, care and protection from parents and carers.

Universal Plus “Earliest Possible Help”: Children who may have unmet or complex needs that requires multi-agency support through an early help response involving two or more agencies. This is led by one agency and the aim is to build a plan of support around the child and family to work together to respond to needs. A Family Help Tool (FHT)

Targeted Early Help: Children who have multiple and complex unmet need requiring a targeted Early Help response with targeted intervention from Early Help services led by the local authority, where Universal Plus “Earliest Possible Help” has not enabled change to be made. These unmet needs may be complex and could be impacting on the child and family daily life.

Children's Social Care: Children with acute needs requiring statutory social work level intervention. This could be due to increasing risk or where there is actual or likely significant harm. This will require Social Care to undertake a S17 Children in Need assessment or S47 enquiries.

- **Universal – all children and young people**

The needs of children are met by universal services such as schools, healthcare services, leisure and community services which are readily accessible to all, as well as the love, care and protection from parents and carers.

Children and young people who are making good overall progress in all areas of development. These children receive appropriate universal services, such as health, care and education. They may also use leisure and play facilities, housing or voluntary sector services. These children may have a single identified need that can be adequately met by a universal service. However, if further additional needs are identified, a Family Help Tool (FHT) may be completed to develop an understanding of the family's needs. This guided conversation with a family should help to ensure early engagement.

There are a wide range of universal services available to children, young people, and their families within the borough.

A range of resources to support families can be accessed on our [Help for Families](#) webpage.

You can find information about social groups, practical support or leisure activities in the [Community Activities Directory](#) on the Oldham Action Together website.

Families who have children with disabilities can find out about help available to them on our [SEND Local Offer](#) page.

- **Universal plus “Earliest Possible Help” – working together as more than one partner agency**

“Earliest possible help” – consent based collaborative approach.

Children who may have unmet or complex needs that requires multi-agency support through an early help response involving two or more agencies.

This is led by one agency and the aim is to build a plan of support around the child and family to work together to respond to needs.

Some children and their families need help to be healthy, safe and achieve their full potential. Research indicates that the sooner a family receives support, the sooner they can improve their situation and prevent the need for longer term support or specialist intervention.

This support can cover a range of work and services working together focusing on problem solving and supporting families, commencing with a partner led Early Help assessment (Family Help Tool). This “Earliest Possible Help” within Universal Plus focusses on proactive engagement – working with families and connecting the right people at the earliest possible point. However, if this support is not effective in working with families to achieve change, a Family Help Tool (FHT) will need to be

completed with the family and referred into Duty and Advice for escalation to Targeted Early Help led by the local authority or directed to Positive Steps led support.

Early help is everyone's business, and it is expected that any worker from an agency or service can identify and respond to meet those needs, by working with others to do so. Where families need support, effective early help relies on local agencies to work together in partnership with families to identify needs, build on strengths, develop a plan to empower families and enable them to thrive.

Where early help is offered it is important that this is underpinned by a Family Help Tool and coordinated through Team Around the Family arrangements with an identified Lead Professional.

- **Targeted Early Help**

Children who have multiple and complex unmet need requiring a targeted Early Help response with targeted intervention from Early Help services led by the local authority or directed to Positive Steps led support, where Universal Plus "Earliest Possible Help" has not enabled change to be made. These unmet needs may be complex and could be impacting on the child and family daily life.

Family Workers in the Targeted Early Help team provide help to families on a range of issues. They help families to identify their own strengths and to achieve positive outcomes for themselves. Targeted support is typically for 3-6 months but is not limited to this.

This Targeted Early Help approach will retain the multi-agency working arrangements around the family but will be led by the local authority Targeted Early Help Service or Positive Steps, in ensuring a robust plan and any relevant access to specialist services connected with the assessed need for Early Help support, is in place. Where support and progress is sustained, return to partner led Universal Plus is encouraged to take place through a planned approach.

- **Children's Social Care**

A child in need is defined under section 17 of the Children Act 1989 as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health and development is likely to be significantly or further impaired without the provision of services, or a child who is disabled.

The Child/Children is in need of social work led assessment and involvement because there is a risk of significant harm to a child if support is not provided to consider the following Children's Social Care role under the Children Act 1989:

- Children considered at risk of or experiencing significant harm from neglect or from sexual, physical or emotional abuse (S47)

- Children subject to a Child Protection Plan (S47)
- Children who require support from social care under S17 (Consent required for CiN).
- Children subject to care proceedings (S31)
- Children accommodated under Section 20

Children's Social Care would be the lead agency in these circumstances; the decision will be considered within Duty and Advice as to whether this threshold is met and consideration for whether recommendation is given for strategy discussion at point of referral.

This approach will seek to build upon the multi-agency working but be led by the social worker in ensuring a robust plan and any relevant access to specialist services connected with the assessed need and/or risk.

Where assessment considers threshold for continued Children's Social Care intervention is not met, step down to any level on the Continuum of Need windscreen should be considered in line with the needs of the family.

If at any point in a child's life there is a concern that a child has experienced significant harm or if there is an immediate risk of significant harm, irrelevant of previous support or targeted early help, contact should be made to Duty and Advice.

However, if this immediate risk is not present, there is an expectation earliest possible help has been considered and progressed prior to referral through to Duty and Advice either Targeted Early Help or Children's Social Care.

The Early Help Assessment

Our [Early Help Strategy](#) sets out the vision for the multi-agency Early Help system in Oldham which is that families, particularly those with multiple and complex needs, will have access to effective and coordinated early help as soon as difficulties have been identified. This offer will be personalised, multi-agency where required, evidence-based and will adopt a whole-family approach. Early Help will support families in enabling children and young people to live safe, healthy and fulfilling lives, and help to break intergenerational cycles of risk and vulnerability. It will help address the impact of the high levels of poverty in Oldham, and the disproportionate impact of this on children and young people in some communities in Oldham. Working with families to achieve change together is central to the approach.

Universal services are best placed to identify needs and support children and families at an early stage; they know the children best and can use their positive relationships with children and families to help affect change. Support at Universal and Universal Plus level Team Around the Child or Family work can provide the consistency and continuity needed by children and families.

However, when issues are escalating and additional support is required despite the support of universal services and Team Around the Child / Family work, support can be sought from targeted Early Help Service through speaking to the Duty & Advice team in the MASH. Delivered across the five Districts, targeted Early Help can provide additional and more specialist knowledge and support, with a lead practitioner from either the Council or Positive Steps targeted early help team co-ordinating support for children and their families.

The Family Help Tool (Early Help assessment) is designed to help children and families understand the issues that are impacting on their lives; it enables practitioners to understand the work required to support children and their families. This should be completed with families at Universal Plus level and above. It is based upon a strengths-based approach and enables partners to identify issues at any stage or level of complexity and to agree a plan with the family for addressing these.

Early Help Partnership Officers within each District targeted early help team provide support for other professionals, for example in schools or Family Hubs, advising on completion of Family Help Tools, supporting problem solving and advising on the multi-agency early help offer in the district – including for example the local voluntary, community and faith sector offer. This helps to identify emerging issues at the earliest possible opportunity, preventing the need for more specialist services. They also support access to the weekly multi-agency early help panel, where partners can go to for advice about sources of support for children and families where need is escalating.

Further information about Early Help including downloadable resources such as the Family Help Tool are available on the [Early Help](#) page of the Council website.

4. Children in Specific Circumstances

4.1 Children and young people with special educational needs and disabilities (SEND)

A crucial role of children's social care is to provide help and support to disabled children and their families. When undertaking an assessment of a disabled child, practitioners should recognise the additional pressures on the family, and the distinct challenges they may have had to negotiate as a result of their child's disability (Working Together 2023).

Section 17 (11) of the Children's Act 1989 states that a child is disabled if they:

- are blind
- deaf,
- or non-verbal,
- or suffer from a 'mental disorder of any kind',
- or are 'substantially and permanently handicapped by illness, injury or congenital deformity, or such other disability as may be prescribed'

The law recognises disabled children as being in need and a statutory assessment of their needs can be requested by Children with Disabilities Service, as well as an Education, Health and Care (EHC) can be carried out by the Local Authority for children aged between 0-25 who have special educational needs to determine whether an EHC plan is needed. An EHC plan is a legal document which sets out the education, health and care needs of the child, the outcomes expected, and the provision required to achieve those outcomes. However, we would encourage earliest possible support and partnership working around this family prior to progressing a contact into Duty and Advice for assessment led by Children's Social Care.

Eligibility Criteria for Accessing a Service from the Children with Disabilities Social Care and Short Break Service.

The Children with Disabilities service is made up of two teams, a team of dedicated social workers with a professional interest and background within the specialist focus of the team. The team complete statutory assessment of need, child in need and child protection work. They also offer a social work service to disabled children that are looked after by Oldham. The social work offer is supported and complemented by a team of family intervention workers providing an enhanced early help offer focused on the assessment, implementation and review of short break provisions.

We will work relentlessly for our children with disabilities, and additional complex needs to ensure that our plans and interventions are aspirational ensuring they achieve the very best outcomes in life – that they are safe, happy and that they achieve highly. Alongside our aspirational planning we will challenge structural barriers to ensure our young people have access to all the community resources available in Oldham and that they influence decisions and contribute as highly valued members of our community.

Not all children with disabilities in Oldham will require a service from the children with additional and complex needs service. The following therefore need to be considered in determining whether a social work or family intervention work offer from the Children with additional and complex needs service is required.

A child or young person will be eligible for an assessment from the Children with Disability specific service if the following is met, aligned with the Continuum of Need windscreen model:

- A. The child experiences a disability* that impacts in a way that is complicating their ability to achieve their full potential (their progress in being safe, happy, healthy and ability to achieve). The child or young person has a substantial and long-term disability which affects their ability to carry out age appropriate day to day activities.

**The Equality Act 2010 provides a recognised definition of disability. A person has a disability if “you have a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities”*

- B. Their needs cannot be met solely within the family, wider family/friends support networks or by universal and targeted services.
- C. The child attends a specialist educational provision and will have an Education and Health Care Plan.
- D. Parents and Carers require specialist interventions and support to meet the needs of their disabled child.
- E. The level of support required to the child and family is so significant that there is a risk of family breakdown or they require a level of intervention that will prevent them escalating to statutory social work processes, and this support is linked to the needs of the disabled child.
- F. The Children with Disability service will work with a whole family including siblings.

Additionally, a disabled child may need a service from the Children with Disability social work team if:

- G. There are serious safeguarding concerns for a disabled child who has experienced or is at risk of being exposed to neglect, physical, emotional or sexual abuse.

A guide to threshold for specialist services via the Children with Additional and Complex Needs and Short Breaks Service:



4.3b_CwD_and_Short_Breaks_threshold.

Universal Services

Most families who care for a child or young person with additional and complex needs are able to function well without more specialist support and will never be known to Children’s Social Care or Early Help Services. Most children with additional and complex needs achieve outcomes through the care of their families, plus the support of a range of services that are available to all children with additional and complex needs. This includes universal services such as health, education, play, leisure and other community services. Children and young people identified at level one are making good overall progress in all areas of their development with no additional support.

Families may also find the <https://www.sendirect.org.uk/> or the [https://www.oldham.gov.uk/info/200368/children and young people with special educational needs and disabilities](https://www.oldham.gov.uk/info/200368/children-and-young-people-with-special-educational-needs-and-disabilities) of benefit and may never need to contact the local authority for support.

Targeted Early Help – Local Offer

Targeted services will need to be accessed through a referral from the early help/short breaks team or allocated social worker or for some services, families themselves can self-refer. These services are targeted solely for children and young people with additional and complex needs.

For some families, due to the challenges faced with caring for children with additional and complex needs, targeted services will be a fundamental part of their support network. Without targeted support, there will always be support needs for the child and the family. Without this, the family may not be able to offer a safe and healthy home life to the child and these services provide quality short breaks for children and young people and provide a break in care for parents.

[Children and young people with SEND \(Local Offer\) | Oldham Council](#)

[POINT \(point-send.co.uk\)](http://point-send.co.uk)

Early Help Short Break Services

Some families who have accessed targeted services outside of Children's Social Care and such services are not appropriate to need can request a Short Break Assessment via the Short Breaks Team, a dedicated team of Family Workers who assess families where there are no welfare or safeguarding issues to address. These referrals come through the MASH process where skilled Short Break Workers screen such cases and with agreement from the Short Breaks Team Managers, either send over the referral to the Short Breaks Service or recommend targeted services to the family based on individual need. A Carers Assessment is completed alongside all Short Break Assessments to determine the level of care afforded outside of the usual parenting role. Short Break packages are assessed at a maximum of 12 monthly, again dependent on individual need.

Children's Social Care - Specialist Acute needs/Statutory and/or Specialist high level intervention

These services are only accessible by a Social Worker assessment and only a small amount of families access these services. These are families who struggle with the care of their child and/or the family are facing a very difficult time that may be putting significant pressure on the family or there are major concerns about the family's skills and abilities to keep their children safe and well and without exceptional support the child could be at risk. This service manages cases of Child in Need, Child Protection and Children who are Looked After. A Carers Assessment will also be completed alongside any assessments in relation to caring tasks above and beyond those of most parents.

4.2 Young Carers

Oldham Young Carers define a young carer as ***“A child or young person who, without payment, provides help or support to a parent, sibling or other family member, who could not manage without their help. This could be due to age, physical or mental illness, addiction or disability.”***

The level of care they provide would normally be undertaken by an adult, therefore this impacts adversely on their childhood.

Under the Care Act 2014, local authorities will have a duty to consider the needs of children living in households where there is a family member with a disability or impairment that requires help or care as part of a “whole family assessment”. This assesses why a child is caring, what needs to change and what would help the family to prevent children from taking on this responsibility in the first place.

All young carers under the age of 18 have a right to an [assessment](#) regardless of who they care for, what type of care they provide or how often they provide it.

The assessment is undertaken to ensure that sufficient support is in place for both the young person and the family. Alongside family support services and/or social workers, we work together in partnership to reduce inappropriate caring roles and the impact of this. The needs of the young carers should be assessed in the whole family assessment with ongoing support. This assessment would consider the young carers work, education and leisure need.

4.3 Private Fostering

Private fostering happens when a child is being looked after by someone other than a **close relative** for 28 days or more. Private fostering is when a child **under the age of 16 (or 18 if disabled)** is cared for by someone who is not their parent or a 'close relative'. This is a private arrangement made between a parent and a carer, for 28 days or more.

Close relatives are defined as step-parents by marriage, grandparents, brothers, sisters, uncles or aunts (whether of full blood, half blood or marriage/affinity). <https://www.manchestersafeguardingpartnership.co.uk/resource/private-fostering/>

It is different to a fostering arrangement that is organised by the council and applies to any child up to the age of 16, or under 18 if the young person has a diagnosed disability.

When parents make plans for their child to be cared for like this, regardless of how the arrangement came about or how good it may be for the child, it is private fostering.

By law the Local Authority must be notified when parents make arrangements for their child to be cared for by someone other than a close relative (for example; friends, neighbours or extended family) for more than 28 days.

Professionals who identify a private fostering arrangement must contact

Duty and Advice directly on 0161 770 7777

When the Local Authority becomes aware of a privately fostered child it has a duty to assess the suitability of the arrangement and to make regular visits to the child and the private foster carer.

The Oldham Safeguarding Partnership procedure for Privately Fostered children can be found at:

[Children Living Away from Home \(trixonline.co.uk\)](http://trixonline.co.uk)

4.4 Complex and Contextual Safeguarding

Working Together 2023 has introduced supporting children at risk of, or experiencing, harm outside the home.

Some children experience abuse and exploitation outside the home. This is often referred to as "extra-familial harm". Harm can occur in a range of extra-familial contexts, including school and other educational settings, peer groups, or within community/public spaces, and/or online. Children may experience this type of harm from other children and/or from adults. Forms of extra-familial harm include exploitation by criminal and organised crime groups and individuals (such as county lines and financial exploitation), serious violence, modern slavery and trafficking, online harm, sexual exploitation, teenage relationship abuse, and the influences of extremism which could lead to radicalisation. Children of all ages can experience extra-familial harm.

In Oldham, we have taken on the agreed Greater Manchester definition of Complex Safeguarding:

“Complex Safeguarding is criminal activity (often organised), or behaviour associated with criminality, involving children and young adults (often vulnerable) where there is exploitation and/or a clear or implied safeguarding concern.”

Here, “complex” does not constitute a comment on the lives of children, adolescents and young adult who are at risk of, or currently being exploited. Instead, it was coined as a way to articulate the recognition that child protection systems and practices in their existing forms do not adequately meet the needs of individuals facing these types of harm, and that creating new ways of working together is paramount.

Complex Safeguarding addresses the direct influences on children and young people outside of the family home, specifically where there is risk of sexual and/or criminal exploitation. Oldham aim to ensure we have a solid understanding and response to different forms of exploitation of children, young people and vulnerable adults.

Contextual Safeguarding is an approach to understanding, and responding to, young people’s experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighborhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people’s experiences of extra-familial abuse can undermine parent-child relationship.

Where there are concerns that a child may be at risk of, or experiencing harm outside the home, and the child/young person is not receiving support from Children’s Social Care. A referral should be made to Duty and Advice with the partner exploitation risk tool included. This will enable Duty and Advice to identify whether an assessment is required.



Partner Exploitation
Risk Tool.docx

4.5 Radicalisation

The national programme for safeguarding individuals at risk of being drawn into terrorism or extremism leading to terrorism is known as Channel. Channel provides support for people who are vulnerable to being drawn into terrorism, and is delivered through local authority-chaired, multi-agency panels. Participation in Channel is voluntary and is not any form of criminal or civil sanction. The aim is to intervene early to safeguard people from the harm which radicalisation can cause, and to prevent their involvement in any criminal behaviour relating to terrorism or extremism. Channel addresses risks relating to all forms of terrorism, including Islamist, far right and others.

If you have a concern about terrorism and it is an **emergency**, dial **999**. If you consider anything to be suspicious or connected with terrorism, contact Greater Manchester Police on the non-emergency number **101** or the Anti-Terrorist Hotline on **0800 789 321**.

If you have a concern that a child or young person in Oldham may be at risk of

radicalisation into terrorism, you should make a Channel referral. A copy of the national referral form is available through the [Prevent and Channel](#) page on the Council website. Copies of online referrals are automatically e-mailed to both the Duty & Advice Team in MASH and Counter-Terrorism Policing North West (CTPNW). It is recommended that advice is sought from the Duty & Advice team on 0161 770 7777 before making a Channel referral.

CTPNW undertake an initial gateway check to ensure the appropriateness of referrals, and to avoid any risk of compromising ongoing counter-terrorism activity. If there are wider safeguarding concerns in addition to those relating to the risk of radicalisation, Duty & Advice staff should contact CTPNW to discuss the concerns and agree how to proceed in a way which addresses these, but does not compromise any CTPNW activity. Concerns should not be acted upon before this discussion with CTPNW has taken place.

5. How to Make a Referral

If you have concerns that a young person may be at risk from any form of harm you must make a referral to Duty and Advice:

Duty and Advice is Oldham's first point of contact for:

- Safeguarding referrals to protect children, young people or adults from harm, abuse or neglect; and
- Care and support services which help individuals or families to meet their long-term needs, access the Early Help service and mental health support, prevent or delay needs becoming more serious, lead independent lives and reduce dependence on public services

A range of organisations make up Duty and Advice including:

- Social Care for children and adults
- Greater Manchester Police
- Early Help
- Education and Early Years
- Specialist Safeguarding Health Practitioners from GMICB and NCA
- Healthy Young Minds Oldham
- Positive Steps
- *National Probation Service (through daily risk)*
- *Greater Manchester & Cheshire Community Rehabilitation Company (through daily risk)*
- *Education (through daily risk)*
- *Community Safety (through daily risk)*
- IDVA

If you have a concern that a child is suffering, or is at risk of suffering, significant harm this will be reviewed by the Integrated Early Help and Children's Social Care team within Duty and Advice. Information may be shared between the organisations within Duty and Advice to inform this assessment and to help decide what action needs to be taken.

Duty and advice operates Monday to Friday 08:40am – 5:00pm (accepting calls until 5.00pm).
The team can be contacted on 0161 770 7777.

Outside of these hours the Emergency Duty Team (EDT) acts as the first point of contact on 0161 770 6936. This guidance is for anyone who has concerns about a child, it is designed to be used as a foundation to enable the correct level of support to be provided.

If you suspect a child is at immediate risk of harm call: 999 and speak to the police.

6. Consent

All contacts which are made to Duty and Advice or where earliest possible help is commenced through Universal Plus must be made with parental consent or the child's consent, where the child is of sufficient age (13 years or older) and understanding to give it.

At Statutory Social Work level, professionals should also normally seek consent from parents or the child (if of sufficient age [13 years] and understanding) to share information. This is deemed to be best practice and it demonstrates work that is done transparently and openly.

Wherever possible, you should seek consent and be open and honest with the individual from the outset as to why, what, how and with whom, their information will be shared. You should seek consent where an individual may not expect their information to be passed on. When you gain consent to share information, it must be explicit, and freely given. There may be some circumstances where it is not appropriate to seek consent, because the individual cannot give consent, or it is not reasonable to obtain consent, or because to gain consent would put a child's or young person's safety at risk. Examples of these circumstances when consent should not be sought to share information include (but is not limited to):

- allegations of sexual abuse by parent/s
- suspicions of fabricated or induced illness
- concerns about so called 'honour' based violence, forced marriage, child trafficking or female genital mutilation

If a parent or a child (where relevant) withholds their consent for the professional to share information or to make a referral, the practitioner should consider with their Agency Safeguarding Lead whether they have grounds to override consent in order to protect the child and this needs to be clearly documented when making contact to Duty and Advice.

Where a referral is necessary in the public interest, i.e. to protect the child or to prevent crime, practitioners will have a legal basis to share information without parental consent.

Professional Judgement

Children's circumstances will not always easily fit neatly into these specific levels. Professionals will need to use their knowledge of the child and family, practice experience, professional knowledge, the information in this document and collaborative discussions with others to reach a professional view about the level of need and the type of support required. The presence of single or multiple combinations of factors, the age and resilience of the child and protective factors will all need to be considered. Practitioners will need to take into account the cumulative effect of factors on the child.

Escalation and Resolution Conversations

Where there are complicating factors that are perplexing or professional disagreements around the level of need, both agencies need to communicate effectively to resolve matters. It is important to have a healthy debate and dialogue, especially about differences of opinion, but they must not overshadow the needs of the child, which must always remain paramount.

All agencies are responsible for ensuring that their staff are supported and know how to appropriately escalate inter-agency concerns and disagreements about a child or young person's wellbeing. Practitioners should seek support from their line manager or agency safeguarding lead and implement the concerns resolution procedures.

Where differences of opinion cannot be resolved, professionals must follow the Oldham Safeguarding Partnership's [Escalation and Resolution Pathway](#).

Appendix A – Levels of Need Indicators.

Universal	Universal Plus	Targeted Early Help	Children’s Social Care
<ul style="list-style-type: none"> · Health needs met via universal services. · Emotional health and wellbeing needs being met. · Accessing health support and advice appropriately. · Good attendance at education provision—96% or above. · Achieving key stages and targets. · Home educated children accessing services with no safeguarding concerns. · Appropriate emotional responses. · Secure friendship groups. · No evidence of challenging behaviour. · Able to show empathy and adapt to change. · Age appropriate sexual behaviour. · Physical needs are met, including; food, drink, clothing, health care, shelter. · Care giver able to keep child safe and free from danger. · Secure housing. 	<ul style="list-style-type: none"> · Development delay in one or more areas. • Additional health needs. • Occasionally missing health checks/appointments or not giving recommended medication. • Persistent minor health problems. • Not registered with a GP/Dentist. • At risk of becoming persistently absent. • Is regularly late for school/occasional truancing. Lack of support from home to access education. • Needs some additional support in school. • Not reaching educational potential or reaching expected levels of attainment. • Poor self-esteem • Some concern about substance/alcohol misuse. • Development is compromised by parenting. • Low level mental health or emotional issues. · Some insecurities around identity/gender/sexuality. · Lack of positive role models. · Care not consistently provided. 	<ul style="list-style-type: none"> · Child has chronic, severe health problems or high-level disability. · Child not brought to health appointments. · Attendance at school or learning affected by health problems. · Unhealthy weight/morbid obesity and no parental engagement with weight management support. · Mental health issues emerging. · Parent recurrently seeking health support and/or treatment that the child may not need. · 75% absence or below from school · Child not in education, repeat suspensions from school and child at risk of permanent exclusion. · Missing from Home. · At risk of child sexual exploitation and/or child criminal exploitation. · Issues at home impacting on attendance or engagement in education, and parent/carer not engaging in support offered. · Difficulty managing emotions. 	<ul style="list-style-type: none"> · Child consistently failing to reach their developmental milestones. · Child not brought to health appointments and/or failure to access medical attention. · Extremely unhealthy weight/extreme obesity and poor parental engagement in weight management support. · Experiencing chronic ill health or diagnosed with a life-limiting illness. · Mental health needs resulting in high-risk self-harming behaviours, suicidal ideation and inpatient admissions. · Child receiving treatment that the child may not need. · 75% absence or below from school and not responding to or engaging in support. · Permanent exclusions from school. · Increased risk of child sexual exploitation and/or child criminal exploitation. · Children not seen/avoiding professionals.

Universal	Universal Plus	Targeted Early Help	Children's Social Care
<ul style="list-style-type: none"> · Accommodation has basic amenities/appropriate facilities. · Appropriate levels of hygiene/cleanliness are maintained. · Evidence of attachments with family and care givers. · Appropriate relationships with peers. 	<ul style="list-style-type: none"> · Parents struggled without support. · Parent or carer may be experiencing parenting difficulties due to mental/physical health issues. · Some exposure to dangerous situations in home/community. · Child is a young carer with some caring responsibilities. · Parents/carers offer inconsistent boundaries. · Low level concerns in relation to child sexual exploitation and/or child criminal exploitation. · Anti-social behaviour complaints. · Housing disrepairs, overcrowding, falling into rental arrears. 	<ul style="list-style-type: none"> · Physical and emotional development raising significant concerns. · Low level offending or anti-social behaviour. · Substance/alcohol misuse. · Significantly low self-esteem. · Parents/carers struggling to provide adequate support. Inconsistent care offered. · Domestic abuse at home. · Overcrowding, temporary accommodation, homelessness. · Guidance, boundaries and stimulation is poor. · Increased Missing from home episodes. 	<ul style="list-style-type: none"> · Home educated child not receiving education. · Physical/emotional development raising significant concerns. · High risk domestic abuse within the family home. · Multiple missing from home episodes. · Difficulty regulating emotions. · Child has suffered from any type of abuse in parents' care. · Parental learning disability, mental health or substance misuse. · Parent/carers is struggling and is unable to provide consistent care. · Parents/carers struggle to set boundaries/act as good role models. · Child/young person is beyond parental control. · Parenting impairing emotional or appropriate behavioural development. · Homeless and destitute. · Neglectful home conditions. · 16 & 17 years and homeless. · Unaccompanied Minors.