

Tameside Threshold Document

A document to support partner's decision making



August 2024



This document has been developed to help and support practitioners working in Tameside with children across all agencies and organisations, when faced with a decision about the safety and wellbeing of a child. It is a collaborative approach to support what drives our shared ambition of acting in the best interests of the child.

In Tameside we want children and young people to feel happy, safe and proud of who they are, that they belong can have fun, feel loved and are able to live their best lives.

This document sets out which type of support and intervention may be needed to support families to build on their strengths while ensuring children are protected from harm. It should be used by practitioners to aid decision making but not replace the conversations we have when faced with concerns about a child or to determine the best next steps. All practitioners should consult with their safeguarding leads for support and guidance.

Protecting children can be complex and this document should be used to support those working or volunteering with children to make decisions in respect of safeguarding.

This document sits alongside, and is complimentary to, existing Tameside Safeguarding Children Partnership (TSCP) guidance, procedures and resources which can be found at

www.tameside.gov.uk/Tameside-Safeguarding-Children-Partnership



How we work with children and families in Tameside

To support our work with children and families, we have adopted the use of restorative practice which is supported by our 5 C's approach.

Using restorative approaches is a key element of Tameside's ambition to become a child friendly borough. These approaches provide us with a range of language, behaviours and tools that strengthen relationships with children, young people and families, empowering them to share responsibility by using a solution-focused approach.



Conversation Curiosity Consideration Collaboration Courage



We will use **conversations** to build relationships with you, we will actively listen to understand what is working well and what you need help with. We will create the opportunity to have conversations with other people who support you to ensure we provide the right help at the right time. We will use language carefully, ensuring we are fair and respectful.



We will practice with respectful **curiosity** to help us understand your lived experience. We will be curious about what has happened in the past and what you would like in the future. We will encourage all people who support you to be curious, helping us to build strong relationships and trust.



Our practice will be **considerate**, respectful of diversity and difference, we will practice with care to ensure we support you to achieve the very best outcomes for you.



Our practice is **Collaborative**, we recognise that you are the expert in your own life and ensure that your voice is central to the support we provide. We write our plans with you and recognise the importance of all people supporting you working together as this will enable us to be the best we can and achieve best outcomes for you.



We will practice with **courage**, not being afraid to fail and try new things supporting you through change, modelling respectful courageous conversations. We be courageous when we ask for your feedback on our practice so we can always learn about how we can support you better.



How we work with children and families in the Tameside Borough

In Tameside we are committed to providing the right help, at the right time by the right person across all of our agencies to our children and families. The questions below underpin the conversations we need to have when we believe that children are not receiving the care and support they need, or may be at risk of harm:

- What are the strengths?

- What are the risks?

- What steps need to be taken and who is going to take them?

Restorative approaches are widely established and accepted both nationally and internationally as a highly effective way of achieving better outcomes for children, young people and their families. Given its focus on relationships, restorative practice has broad applications across the range of agencies working with people.

Restorative practices enable those who work with children and families to focus upon building relationships that create and inspire positive change. Creating change sometimes requires challenge as well as support.

Restorative practices range from formal to informal processes that enable workers, managers, children, young people and their families to communicate effectively. The processes used focus upon:

- removing barriers

- proactively promoting a sense of community

- understanding social responsibility and shared accountability

Using this approach as the basis of a conversation about a family's needs can help:

- Understand present and past concerns

- Recognise existing strengths and safety

- Be clear about what needs to happen next

- Remain curious about what you are hearing and seeing

The use of a restorative approach can often lead to families overcoming difficulties when we tailor universal or targeted services to their needs which can prevent escalation to statutory child protection services.





We know that statutory child protection services are sometimes a barrier to families opening up and we should consider what we can do differently to form trusting relationships to enable engagement alongside our consideration for if statutory services are needed. We should always adopt the use of non victim blaming language and consider adverse childhood experiences in our professional interaction as part of any assessment of a family. To support your assessment of families who might need help and support, practitioners should use these questions as a basis of evaluating their concerns. In addition, practitioners might want to think about:

- What have you seen or heard that worries you?
- What are you most worried about?
- What do you think will happen if nothing changes?
- Are things getting worse?
- Have you asked the child what they are worried about and captured this?
- Is anybody else worried about the child and have you spoken to them?

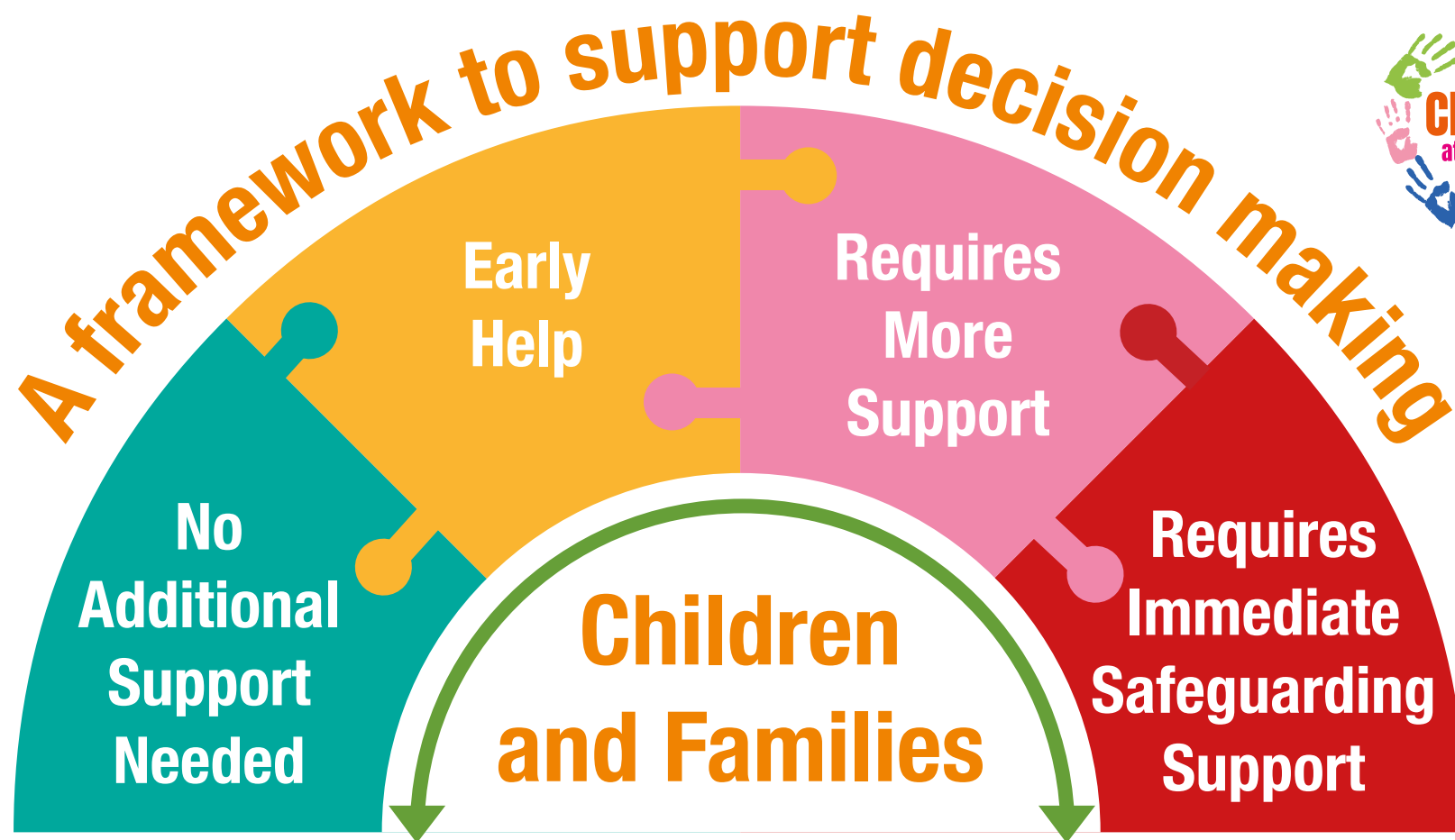
- What impact is all of this having on the child?
- Does the child or the family receive support from anywhere else? If they do, is it making things better?
- Does the child or family do anything already that makes things even a little bit better?
- What do you think needs to happen to make things better for this family?
- What services or agencies are needed to support this family?
- What support and interventions has already been offered and the difference it has made?

When you are becoming more concerned about a child, please have a conversation with your manager or safeguarding lead. When you are worried about a child and think a referral to Multi-Agency Safeguarding Hub (MASH) is required, please see:

www.tameside.gov.uk/childabuse



Thresholds to support professionals' decision making



No additional support needed

Most children reach their full potential through the care of their families and communities. Universal services are provided to all children and their families through community networks such as schools, primary healthcare, family and youth hubs, leisure services, voluntary and community groups. Some examples may include supporting a child to have:

- Good school attendance
- Ability to meet developmental milestones
- Good attachments and relationships
- Appropriate guidance and boundaries
- Carers who meet their physical and emotional needs and protect them from danger and harm
- Good physical health



Early Help

Early help provides support when a need is identified at any point in a child's life. It is not a service specific to one organisation, but rather a collaborative approach across all agencies and partners to work with children and families to prevent the need for statutory intervention. Across Tameside, every person working or volunteering with children and families, regardless of organisation, status or position, has a responsibility to support the delivery of early help and where needed, ensure a family has access to appropriate services.

Single Agency Response

Children and families who are vulnerable and in need of additional support because of a developmental need, family circumstances or environmental factors.

These children are at risk of not reaching their full potential and their life chances impaired without the provision of early help.

Family Hubs

Family Hubs provide an unprecedented level of support to children and parents/carers.

They act as a 'one stop shop' offering early support to families and young people to help overcome difficulties and build strong relationships, including Digital parenting offer, welfare rights, support with Aspiration and Well Being.

As well as being open in buildings in each of Tameside's four neighbourhood areas, with facilities also available at other community venues, they also include virtual offers and are for families with children of all ages, from 0 to 19 or up to 25 with special educational needs and disabilities (SEND), with a great Start for Life offer at their core.



Early Years	Family Assistance
- Infant feeding - Breastfeeding support - Stay and play/sensory play - Bookstart - Evidence-based early years parenting - Every Sleep, a Safe Sleep - Targeted pathways i.e. Speech, language, communication and physical. - Portage service	Services who are already working with children and families can provide help and support required as a single agency through a coordinated response, using an Early Help Assessment Framework. The use of the Early Help Assessment and Team around the Family assist in reviewing the child's lived experience to ensure issues do not escalate. Services with the community, through Family hubs and Early Years are available to support. www.tameside.gov.uk/FamilyHubs

Team around setting
Children who are on roll at school and/or early years provision and who need a coordinated response to help access early support from a team of practitioners from different services dependent on their need. The gateway to a team around the setting is through the early help assessment framework. The Team Around meetings are made up of professionals from across the local authority and partner organisations including: - Family Hub Team - Future In Mind, Primary Intervention Practitioners - Educational Improvement Teachers 0-19 Health Service (including School Nursing) For further info on the Team Around School and Team Around the Early Years, please visit www.tameside.gov.uk/Early-Help/Parent-Carer/The-team-around-approach



At the stage of Early Support children and families may have one or a range of needs which could increase in complexity, those may include:

Child Development Needs

- Worries about inappropriate diet/hygiene/clothing
- Not being taken to health appointments
- Not reaching anticipated developmental milestones
- Few opportunities for age-appropriate play or socialisation
- Substance use or concerns
- Mental health difficulties
- Worrying levels of school attendance (between 70 – 90%) and/or Fixed Term Exclusion
- Experiencing bullying
- Special educational needs
- Start of disengagement from education, training, employment post 16
- Difficulties with peer group/ adult relationships
- Some evidence of inappropriate responses and trauma behaviours
- Finds it difficult to cope with anger, frustration and upset
- Disruptive or anti-social behaviour
- Disabilities
- Complex health needs
- Young Carers
- Concerns about online behaviour / risks
- Vulnerabilities to child exploitation such as criminal and sexual exploitation
- Experienced loss of a parent, carer, family member or somebody close to them

Parenting Capacity

- Parental conflict or lack of parental support/boundaries
- Parental engagement with services is poor
- Parent is struggling or unable to provide adequate care
- Unrealistic parental expectations
- Child previously subject of a Child Protection Plan
- Post-natal depression
- Concealed/denied pregnancy
- The child being perceived to be a problem by parents
- Minor to moderate mental health difficulties
- Minor to moderate parental drug and alcohol use
- History of unsafe sleeping practices with previous children
- Family Breakdown



Family and Environmental Factors

- Parents have some conflict or difficulties that has direct impact on the children
- Has experienced loss of significant adult e.g. bereavement or separation
- Parent has physical or mental health difficulties starting to impact on the child
- Family is socially isolated
- Poor housing
- Poverty and/or financial difficulties such as debt and gambling
- Risk of offending
- Children experiencing a level of neglect
- Poor or overwhelming Care Coordination for a Child with Disabilities



Requires more support

Targeted Family Help

Some children and families will have more acute needs and require support from Tameside Children's Services.

This may include children who are unlikely to reach or maintain a satisfactory level of mental or physical health or development, or their health and development will be significantly impaired, without the provision of services. The Early Help Assessment framework is used to coordinate service to support children and families.

- Young Carers up to the age of 18 (25 years if a SEND need is identity)
- Domestic abuse support
- Short breaks for children and young people with SEND
- Solihul Evidence based parent support programmes – riding the rapids

Child in Need

These are children whose needs are more complex, based on a range of needs and depth or significance of the needs. They are at risk of social or educational exclusion. Their health, welfare, social or educational development is being impaired and life chances will be impaired without the provision of additional services.

Those are children and families who also require support from Tameside Children's Services.

In addition, all disabled children and young people are 'Children in Need' and have a right to an assessment. This will not necessarily be a full Children's Social Care assessment.



Specialist Services and Safeguarding

Some children may require an immediate referral to the Multi-Agency Safeguarding Hub (MASH) for an assessment to be completed to better understand their needs. In addition, some families who have children and young people with complex disabilities do need an immediate referral and an assessment but because of their level of needs rather than concerns in relation to safeguarding. If a criminal offence occurs practitioners should also contact the police.

These are children and families with increasingly complex needs, those children who are at risk of or are suffering significant harm. The Children Act 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interest of children and gives local authorities a duty to make enquiries.



Requires Immediate Safeguarding Support

Significant Harm	Child Development Needs
- Children at immediate risk of significant harm including physical, sexual, emotional harm and neglect - Children with unexplained injuries, suspicious injuries or where there is inconsistent explanation of the injury - Children from families experiencing a crisis likely to result in an imminent breakdown of care arrangements - Where there are serious concerns regarding the risk of significant harm to an unborn baby - Children who are remanded to Custody or who pose a risk of causing serious harm to others - Children who allege abuse - Vulnerable children who are left alone	- Disability (Permanent or substantial impairment of function) - Significant health problems - Significant emotional and behavioural difficulties - Neglects to use self-care skills due to alternative priorities e.g. substance use - Children who display significant harmful sexual behaviour - Family breakdown related in some ways to the child's behavioural difficulties - Long-term neglect which significantly impacts on child's development - Child has significant mental health difficulties - Child's health and development needs require specialist service provision - Displays frequent and/or significant violent behaviour towards parents / carers - Unaccompanied children - Problematic or chronic drug and alcohol use - Chronic neglect impacting on the emotional well-being and attachment of the child - Impact of significant domestic abuse - Significant self-harm or suicide attempts - Persistent offending resulting in court action - Is suffering harm in relation to neglect, physical, emotional or sexual abuse on or offline - Persistent and severe absence from school (<50%) which is considered educational neglect



Child is currently being supported	Contextual Worries
- Children who are the subject to Care or Supervision Orders - Children who are subject to a Child Protection Plan - Children in Care - Children who are remanded into the care of the Local Authority - Children who are privately fostered - Children receiving in-patient mental health treatment	- Children who go missing from home - Children who are already experiencing child exploitation including sexual, criminal, and county lines - Children who are already being radicalised - Children who are part of a gang / organised crime group - Children who have displayed / caused significant harm or serious violence to other children - Children who are at risk of or who have been subjected to Honour Based Abuse, including Female Genital Mutilation and Forced Marriage - Children who are being subjected to modern slavery and human trafficking - Children who are being subjected to harm online

Parenting Capacity

- Significant and/or repeated domestic abuse
- Parenting is not safe
- Lack of parental engagement is having detrimental impact on the child's welfare and safety
- Physical or learning disability/mental ill health difficulties/substance use
- Children who are homeless
- Continued exposure by parents or carers to dangerous situations in the home/community
- Irrevocable child and parent relationship breakdown
- The child is undertaking the majority of parenting responsibilities which are significantly impairing the child's health and development
- Moderate, significant, or complex mental or physical health needs or learning disability, which places the child at risk of harm
- Concerns about parenting of a child who is or has been looked after or is at risk of becoming looked after
- Child has no parent/carer or has been abandoned
- Problematic drug or alcohol misuse by parent or within household



Accessing Early Help Support and More

Early Help

If you are worried about a child and you have identified that they need early help and support, which does not meet the threshold for statutory intervention but is beyond a single agency response you may speak to your agency safeguarding lead or single point of contact as per your agency's arrangements or local Family Hub in the first instance. At times it is helpful in developing the next best steps for the child and family you are working with.

If you are a school or early years provider, speak to your Early help advisor in the first instance to consider whether a Team Around the Setting is required.

To find out what your local Family Hub is and for contact information visit www.tameside.gov.uk/FamilyHubs

MASH

There is one front door, for children and young people in Tameside, where professionals are encouraged to ring to discuss their concerns. Within MASH (Multi-Agency Safeguarding Hub) which is made up of professionals from the police, education, health and housing, who all sit together with Children's Social Care (CSC) staff.

Professionals will speak with experienced staff who can offer advice and information. If the concern reaches the threshold for CSC then a contact will be created, screened and if deemed necessary information sharing with partners will take place. This will determine that children receive the right help, support and protection at the right time. Where a child requires more support or is at immediate risk of harm you should contact the Police on 999. If you believe a situation to be urgent but there is no immediate danger, call 0161 342 4101 in the first instance to speak to the MASH team.

For further guidance on the steps you should take in making a contact with the IFD, visit www.tameside.gov.uk/childabuse

Multi-agency safeguarding children procedures are available here www.tameside.gov.uk/Tameside-Safeguarding-Children-Partnership



Designated Agency Safeguarding Leads

Every organisation has a designated safeguarding officer/lead or a safeguarding team who is responsible for taking the lead on safeguarding matters within their organisation.

The designated lead for safeguarding or single point of contact as per your agency's arrangements should be the first point of contact for all staff who need advice and guidance around safeguarding concerns.

This includes supporting colleagues within their organisation in decision-making and information sharing around concerns for a child's welfare or safety. Conversations with the designated safeguarding lead should be used to gain advice, reflection on concerns and determine next steps.



Information Sharing

It is important that we understand the rules for information sharing, but this is not always easy. Most of the time we share information about families with their agreement. However, there are occasions when we need to share information about a family without their agreement. Refusal to engage with early support services or refusal to give agreement to share information are not in isolation reasons to escalate concerns.

All practitioners have a responsibility to work alongside children and their families to engage with them and build relationships that are honest and supportive, identifying strengths while being clear about the worries. We know from families that this approach works best, and they are more likely to engage with services in which they have confidence and trust.

Agreement means that the family is fully informed about the services they are being referred to, agree with the referral being made and understand what information practitioners are passing on and why.

There are some exceptions when there is a need to protect children. For example, if having a conversation with the family would place the child, or another child, or someone else, or you the referrer, at increased risk of suffering harm you do not need agreement. You also don't need agreement if it might undermine the investigation of a serious crime. This includes making a child protection referral for a child who has made an allegation about a physical or sexual assault by a parent or carer, or where a delay in getting consent may mean the child or young person is put at further risk of harm.

Anyone concerned about information sharing should also refer to Greater Manchester Information Sharing Procedure and government guidance Information sharing advice for safeguarding practitioners greatermanchesterscp.trixonline.co.uk/contents/contents



Consideration should ALWAYS be given to consent

Under General Data Protection Regulations consent is described as:

“any freely given, specific, informed and unambiguous indication of the data subject’s wishes by which he or she, by a statement or by a clear affirmative action, signifies agreement to the processing of personal data relating to him or her”.

Valid consent rests on the following core principles.

Consent must be informed

Families should understand what information is being disclosed and why. Everyone working with children and families should be open and honest about their concerns unless this places the child or young person at further risk.

Consent must be voluntary

This can be difficult to achieve given the nature of power relations between families and professionals. A families refusal to engage with a service should taken seriously unless this places the child or young person at risk of significant harm.

Consent must be current and renegotiable

Consent must be checked regularly throughout our interactions with children and families and there should be an awareness to the family that consent can be withdrawn at any time.



Seven Golden Rules of Information Sharing:

1	Remember that the General Data Protection Regulation (GDPR) and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.
2	Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so
3	Seek advice from other practitioners if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.
4	Share with informed agreement where appropriate and, where possible, respect the wishes of those who do not agree to share confidential information. You may still share information without agreement if, in your judgement, there is good reason to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be certain of the basis upon which you are doing so. Where you have agreement, be mindful that an individual might not expect information to be shared.
5	Consider safety and well-being: Make your information sharing decision after considering the safety and well-being of the individual and others who may be affected by their actions.
6	Necessary, proportionate, relevant, adequate, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up to date, is shared in a timely fashion, and is shared securely (see principles).
7	Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.



What if you disagree with a decision and you are still worried about a child?

There may be situations where consensus about the best way forward cannot be reached between practitioners. In such circumstances you should in the first instance discuss the case with your line manager or the designated lead for safeguarding within your own organisation.

If, after this discussion, consensus cannot be reached, the issue should be progressed in line with the guidance set out in the TCSP Professional Resolutions practice guidance.

Whilst ongoing discussions are taking place between practitioners, should a child be in a situation where they are at immediate risk of harm you should contact the Police on 999. If you believe a situation to be urgent but there is no immediate danger, call 0161 342 4101 in the first instance to speak to the MASH.

Supporting Information

Safeguarding concerns can often be complex, involving different agencies and managing risk and uncertainty.

TSCP has developed a wealth of resources for practitioners, available at www.tameside.gov.uk/Tameside-Safeguarding-Children-Partnership

TSCP also has a range of training which can be accessed via www.tameside.gov.uk/tscp/training where there is a host of bookable and on-demand learning available.



