



## **EDUCATION & CHILDREN'S SERVICES**

# **GUIDANCE ON ELIGIBILITY CRITERIA FOR CHILDREN'S SOCIAL WORK SERVICES**

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## 1. INTRODUCTION

- 1.1 Local authorities and other agencies providing services for children have a wide range of powers and duties in respect of children living in their area. Aberdeen City Council's Education & Children's Services Children's Social Work service performs a key role as part of the range of services for children, particularly those (but not exclusively so) with the highest level of need.
- 1.2 This document provides guidance for professionals, to clarify the circumstances in which the Children's Social Work service will assist and safeguard children and young people and their families in Aberdeen City. These eligibility criteria will provide a statement of how the service will provide a targeted response to needs at different levels of priority. This guidance ensures that professionals understand the basis for decisions about service provision.
- 1.3 The guidance is compliant with the principles of Getting it Right for Every Child (GIRFEC) and should be considered in conjunction with the [Aberdeen GIRFEC Operational Guidance](#) as well as the multi-agency [Thresholds Materials pack](#) available to all staff. In addition there is information available to all Children's Social Work staff in the 'Go to Guide', available on The Zone, developed to support social work practice within Aberdeen City.
- 1.4 The purpose of this guidance is:
  - To show how the eligibility criteria for access to the Children's Social Work service is defined within the GIRFEC model of tiered intervention – and how that process is part of how a wider framework of services is accessed and delivered.
  - To promote inclusion by involving universal services at the earliest possible stage to ensure that all children and young people are supported when they need it.
  - To assist Children's Social Work staff to ensure that services are targeted at those with highest levels of need consistently and fairly.
- 1.5 These criteria help make it clear how the Children's Social Work service responds to new referrals.
- 1.6 Eligibility criteria cannot be applied in too rigid and bureaucratic a fashion and flexibility in their application is required in order to allow for the exercise of some degree of professional judgement. At the same time, it has to be recognised that such discretion must be applied in the context of a finite level of resources and the application of the criteria. Inevitably there will be variations in the perception of need and judgements about the appropriate service response.
- 1.7 These eligibility criteria and the threshold for services will be closely monitored and periodically reviewed in order to ensure that the desired outcomes are being achieved for all children including those with a disability.

## CHILDREN'S SOCIAL WORK STRUCTURE AND ORGANISATION

- 2.1 The Reclaiming Social Work model has been implemented in Aberdeen from 2016. It is a whole system redesign of how social work services are provided to families in need within Aberdeen City. Social workers play a really important part in helping and supporting families in need and we want to make sure that they are free to focus on this work. Significant transformational change will enable and support social workers to work more collaboratively and concentrate on social work with families who need targeted intervention.
- 2.2 To achieve this Children's Social Work services are provided through systemic social work units, supported by other teams and services. These criteria are applicable across all areas of the service.

### 2.3 Our Children's Social Work services include:

- Intake Service, including Reception Team, Joint Child Protection Team & Units at Aberdeen Maternity Hospital.
- Assessment & Intervention Units, undertaking short term work.
- Children in Need Units operating on a geographical basis aligned to ASGs
- a Children with Disabilities Unit, working with care and protection cases and a Children with Disabilities Team, working to support families care for their disabled child.
- Permanence & Care Units, working with children who are accommodated on a permanent basis.
- a Youth Team working with care experienced young people and those 16 to 18 year olds within the adult criminal justice system.

2.4 The work of the Units and Teams are also supported by the Family & Community Support Service and the Carers Service.

2.5 The Family & Community Support Service will provide an intensive support service to children and families on the 'edge of care' with flexible and responsive supports that create stability, reduce the number of children in long-term and residential care and build safer and stronger families.

2.6 The Carers Service includes both Residential Care provision and Alternative Family Care services. Alternative Family Care services in turn comprise distinct themes, Assessment and Recruitment, Temporary Foster Carers, Kinship, Supported Lodgings, Permanent Foster Carers and Adopters.

## 3. POWERS AND DUTIES (Legislative Framework)

3.1 Local authority social work operates exclusively within a legislative framework. There are multiple pieces of legislation which define the duties powers and responsibilities of the social work service. These, but not exclusively, include:

- Children (Scotland) Act 1995
- Adoption & Children (Scotland) Act 2007
- Children's Hearing (Scotland) Act 2011
- Self-Directed Support (Scotland) Act 2013
- Children & Young People (Scotland) Act 2014
- UN Convention on the Rights of the Child 1989
- Looked After Children (Scotland) Regulations 2009

3.2 These various pieces of legislation define the local authority's primary duties to children who are considered to be at risk and in need of care and protection. The recent Children and Young People (Scotland) Act 2014 enshrines the key policy aspects of Getting it Right for Every Child (GIRFEC) including the role of the Named Person (usually, either a health visitor or education staff) and the Lead Professional (usually, but not exclusively a social worker). The Act introduces into legislation for the first time, the concept of corporate parenting and extends the duties of local authorities to support care experienced young people who were looked after on their 16<sup>th</sup> birthday up to the age of 26.

## 4. PRINCIPLES

4.1 The overarching principles when applying the eligibility criteria are:

- The welfare of the child is paramount.
- The child's views should be taken into account

- That social work intervention will be in keeping with the principles of GIRFEC and will be **appropriate, proportionate** and **timely**.
- That the most vulnerable children and their families will **get the help they need when they need it**.

4.2 Children's Social Work services in Aberdeen are provided on the basis that:

- there is a clear eligibility framework for the delivery of services.
- all services are provided with a clear plan that includes clear measurable outcomes within the "Aberdeen 21" Outcomes Framework.
- the Children's Social Work Intake Services will respond consistently to requests for services by undertaking initial assessments in accordance with the principles of GIRFEC, taking account of the eligibility criteria.
- services are delivered consistently and equitably across the city and reflect the principle that those children with the greatest need have received services first.
- wherever it is safe and appropriate, children will experience the unique advantages of normal family life in their own birth family.
- within 10 working days of the time of receiving a request for a service a decision will be made about the service to be offered and this will be confirmed in writing.
- children's welfare will be best promoted through the service working in partnership with parents and other agencies. The Intake Services will offer professional advice to partner agencies which have made a request for a service where an initial eligibility assessment indicates that there is no statutory role for Children's Social Work. This includes children with a disability.
- the reasons for decisions following an initial assessment are clearly evidenced by the Social Worker supported by the Team Manager and are clearly articulated to the referrer. Any professional difference of opinion about the application of Social Work eligibility criteria should be managed through discussion with the Team Manager / Consultant Social Worker and the referrer. Through these professional discussions the role of the named person will be supported and understanding of both the scope and the limitations of this role will be strengthened.
- children and families who are not eligible for Social Work services are offered advice and information, or are signposted to the most appropriate service to meet their needs.
- there will be improved management information about the range of presenting needs and the capacity to deliver an appropriate response.
- unmet needs will be recorded for review and planning purposes.

## 5 LEVELS OF NEED FOR CHILDREN'S SOCIAL WORK SERVICES

5.1 In applying the eligibility criteria framework, the following must always be considered:

- (i) Intervention should always be at the appropriate lowest level.
- (ii) The level of need will always be increased by:
  - The presence of multiple indicators of risk.
  - Additional factors of poor parenting added to a child related indicator (eg. a parent with alcohol misuse problems has a child who engages in self harm).
  - Recurrence of the event linked to the indicator (eg. child left alone repeatedly).
- (iii) For any child protection related indicator, the National Guidance for Child Protection in Scotland 2014 will be applied with Social Work and Police as lead agency as per procedures.

- 5.2 If a child or young person's needs are assessed as being acute or specialist they will meet the eligibility criteria for assessment by a social worker.
- 5.3 In applying the framework to a child with disabilities, our assessment of their level of need will centre on the impact of the disability on the child or young person. When assessing the impact of the disability we mean that it will be permanent and substantial and significantly prevent the child or young person from taking part in daily routines, activities and education appropriate to their age without specialist support. This will mean that where the disability does not significantly prevent the child from taking part in such routines without support, they will not automatically be eligible for social work services. Further guidance on applying the framework to children with disabilities is attached at Appendix Two.
- 5.4 The Aberdeen City GIRFEC model of tiered intervention<sup>1</sup> is based on partners working together at the earliest opportunity to support a child or young person, and their family. This is expressed over three levels. For Social Work purposes these are described in four levels as shown in the diagram below.

Aberdeen GIRFEC Levels	Social Work Levels	Service Type	Service Level
Level 3	Level 4	Acute needs	Children and families in crisis needing urgent intervention
	Level 3	Specialist needs	Children and families needing intensive specialist support
Level 2	Level 2	Targeted intervention	Vulnerable children with moderate priority needs
Level 1	Level 1	Personalised support	Children who are vulnerable with low priority needs
Universal services for all children & families			

- 5.5 These different levels of need cover the range of vulnerability potentially experienced by children and their families and clearly identify the point at which social work via the Reception Team will become involved.
- 5.6 Children and families assessed as having needs below Level 2 will receive support from the health service, voluntary sector, community learning or at school and will not require a social work service.
- 5.6 Levels at which social work services will be provided, following an assessment of need, are:

**Level 2:** refers to the significant number of children and young people who at any given time may be considered vulnerable and in need of support services. This group is referred to as vulnerable children with moderate priority needs. Children and young people at this level frequently require time limited **targeted intervention**.

**Level 3:** refers to children and young people with **specialist needs**. The characteristics that indicate they will meet the threshold for social work assessment and time-limited, targeted intervention are: acute home breakdown, self-harming, very challenging behaviour or situations where harm has been averted but intensive

<sup>1</sup>: [http://www.aberdeengettingitright.org.uk/docs/Operation%20Guidance%20\(Draft\).pdf](http://www.aberdeengettingitright.org.uk/docs/Operation%20Guidance%20(Draft).pdf)

specialist support is still required. The majority of these examples relate to situations that would escalate into the acute spectrum without urgent intervention.

**Level 4:** described as **acute needs**, will have a significant impact upon a child or young person's safety and well-being. It most commonly will include: children at risk of suffering actual or likely significant harm, frequently associated with immediate concerns of physical or sexual abuse or severe neglect.

- 5.7 Eligibility for a specialist service for children/young people with disabilities will be assessed against these criteria. The assessment, which will be undertaken in partnership with the family, will make clear the nature of the disability and how it impacts upon the child's life, as well as identifying the strengths and needs of the family. The assessment may also be used, with consent, as part of a multi-agency support plan where services are required for the child/young person. Additional guidance is provided about eligibility criteria for children with disabilities at Appendix Two.
- 5.8 The matrix below (Appendix One) has been developed to inform decision making about who should provide and receive services and with what level of priority. This matrix aims to prioritise the Children's Social Work service's response by taking into account the level of need and risk.
- 5.9 The examples included within the matrix below (Appendix One) are not exhaustive. Professional judgement will be needed to determine the relative priority of matters not described/illustrated in the framework.
- 5.10 Needs change over time and the priority attached to any particular need depends on the extent to which it is not adequately met and the consequences of the impact of this upon the child. This requires the application of professional social work judgement that takes full account of the wide range of factors that may influence outcomes.

## 6. CONCLUSION

- 6.1 The production of eligibility criteria and a threshold for Children's Social Work services is a very complex task. Ultimately it may be necessary to adjust the thresholds to accommodate new legislation and government policies, changes in the availability of resources or significant changes in organisational/societal expectations both locally or nationally. Careful monitoring and periodic review are essential to ensure supportive professional responses to organisational and/or demographic change.
- 6.2 The main priority is to ensure that those children and families in the greatest need receive the services that they require. In order to achieve this, difficult decisions about limiting the availability of help to some people have to be made in order to ensure that those in the greatest need can be properly provided for.
- 6.3 The introduction of the eligibility criteria set within the context of the tiered intervention framework should ensure that services are appropriately targeted to those children who are most vulnerable, and therefore most in need and should clarify where other services' responsibilities lie in relation to those children, young people and their families.

## ELIGIBILITY CRITERIA MATRIX FOR CHILDREN IN NEED IN ABERDEEN CITY

Throughout the Matrix: Child - refers to unborn babies, babies, infants, children and young people; Parent - refers to parents and carers, including foster carers, kinship carers and prospective adopters.

**Level 4: Children and families in crisis needing urgent intervention (Acute needs)**

*An assessment will show that there is a high level of need, serious concerns about the care, health or development of a child or young person and that they are likely to suffer significant harm.*

**How children grow and develop:**
**Examples of possible indicators:**

- Child suffering actual, or at serious risk of, significant harm (ie. physical, emotional or psychological)
- Concerns for the safety or wellbeing of an unborn/new born child
- Reports of physical, sexual or emotional abuse
- Child subject to severe physical and/or emotional neglect
- Child suffers non-accidental injury and parents/carers involved
- Child being trafficked or prostituted, or at risk of sexual exploitation
- Child with severe challenging behaviour which results in serious risk to the child or others, whose parents are unable to manage and which results in a high risk of family breakdown
- Child who is experiencing acute emotional rejection by parents including unrealistic expectations, 'scapegoating' and inconsistent parenting
- Child who has acute mental health needs - Parenting capacity/deficits and impact of this
- Child is medically diagnosed as failing to thrive as a result of neglect
- Child with a high level of special needs or disability requiring constant supervision which poses high risk of family breakdown including:
  - Children and young people with severe learning disabilities;
  - Children and young people with multiple or severe disability;
  - Children and young people with severe communication disability;
  - Children and young people with global development delay;
  - Children and young people with severe sensory impairment;
  - Children and young people with complex physical disability.

## Level 4: Children and families in crisis needing urgent intervention (Acute needs)

**What children need from people who look after them:**

**(Parenting capacity deficits)**

**Examples of possible indicators:**

- Severe mental/physical illness of parent
- No one able to assume parenting responsibilities (eg. deceased, UASC)
- Substance misuse/alcohol misuse of parent with evidence of immediate risk to their child
- Parent does not meet physical or mental health needs of their child
- Parents unable to care for previous children
- Parents are failing to adequately care for their child due to either the child's or the parents' own learning disability
- Exposure to significant domestic violence and risk of significant harm identified

**The child's wider world:**

**Examples of possible indicators:**

- Child in immediate danger
- Child is abandoned
- Child has connection with a person considered to pose a risk (eg. Schedule 1 Offender, RSO)
- Home environment or hygiene places the child at immediate risk of significant harm
- Families with history of chronic abuse and neglect by parents/carers
- Child is not reported missing
- Child is socially isolated
- Child with disability where the parent/carer is unable to cope and where there are no alternative carers

**Other**

**Examples of possible indicators:**

- Allegations against carers and professionals, or those in position of trust and responsibility
- Child protection investigations pertaining to looked after children placed by other authorities
- Child exhibiting signs of distress and trauma through behaviours

**Desired Outcome:**

Children who are in need and/or vulnerable are safely maintained within their own families, or are cared for safely by their extended family, or within foster care or residential care; and/or are returned safely to their own families/communities of origin wherever possible. Where rehabilitation is not possible, permanence plans are made in accordance with the child or young person's assessed needs within agreed timescales. Children or young people have any deficits in their health and development needs addressed.

**Level 4: Children and families in crisis needing urgent intervention (Acute needs)**

**Work to be undertaken by:**

Work with children and families in acute need will be undertaken by qualified social workers. Other staff may be involved in specific pieces of work as agreed in the care plan but will be supervised by the qualified worker, consultant social worker, or team manager as appropriate.

### Level 3: Children and families needing intensive assistance (Specialist needs)

***An assessment will show that enduring multifaceted difficulties, needs and risk factors are present and resistant to change. Statutory measures, including a possible requirement for secure accommodation or a residential support provision, are likely to be required. Intensive multi-agency support is in place and subject to an ongoing Child's Plan and review process.***

***Level 3 will include families where a child or young person's reasonable standard of health and development is unlikely to be maintained without social work support. The child may move into Level 4 without the provision of services. This may include children who have been assessed as high priority in the recent past. There are identifiable factors which indicate that considerable deterioration is likely without support.***

#### How children grow and develop:

#### Examples of possible indicators:

- Child with high level complex needs resulting in risk of family breakdown
- Child with challenging behaviour that places self and others at risk
- Child who is beyond parental supervision
- Chronic non-attendance at school
- Child left without appropriate supervision and at risk of significant harm
- Child whose behaviour places them at immediate risk, including going missing
- Young carer whose welfare is significantly impaired by their caring responsibilities
- Child involved in substance misuse or offending behaviour leading to the involvement of the Courts or Children's Hearing
- Child engaged in self harming behaviour
- Child who discloses historical sexual abuse where perpetrator no longer present
- Child subjected to chronic neglect
- Teenage pregnancy and no appropriate family support
- Child with special needs or disability including:
  - Children and young people with severe learning disabilities;
  - Children and young people with multiple or severe disability;
  - Children and young people with severe communication disability;
  - Children and young people with global development delay;
  - Children and young people with severe sensory impairment;
  - Children and young people with complex physical disability.

#### What children need

#### Examples of possible indicators:

### Level 3: Children and families needing intensive assistance (Specialist needs)

<p><b>from people who look after them:</b></p> <p><b>(Parenting capacity deficits)</b></p>	<ul style="list-style-type: none"> <li>• Diminished parenting capacity through substance/alcohol misuse, mental health concerns or domestic violence</li> <li>• Inadequate supervision or physical care by parents/carers leading to risk of harm</li> <li>• Identified risk of family breakdown and child is at risk of being accommodated</li> <li>• Child previously looked after or previous request that child be looked after</li> <li>• Inability to attend to the basic needs of their child</li> <li>• Parents whose criminal and/or anti-social behaviour threatens the welfare of their child</li> <li>• Evidence of poor attachment</li> <li>• Parents are highly critical or apathetic to their child</li> </ul>
<p><b>The child's wider world:</b></p>	<p><b>Examples of possible indicators:</b></p> <ul style="list-style-type: none"> <li>• No effective support systems for family</li> <li>• Very poor housing where home environment could place child at risk of harm</li> <li>• Family is socially isolated</li> <li>• Inadequate supervision by parents/carers and at risk of harm</li> <li>• Child who has previously been looked after and who now requires throughcare / aftercare / continuing care</li> <li>• Child where there is a risk of breakdown of the relationship with parents</li> <li>• Child experiencing several carers within their family network creating inconsistency and insecurity for the child</li> </ul>
<p><b>Other:</b></p>	<p><b>Examples of possible indicators:</b></p> <ul style="list-style-type: none"> <li>• Unaccompanied minor</li> <li>• Unaccompanied asylum seeking child or young person</li> </ul>
<p><b>Desired Outcome:</b></p>	
<p>Children who are in need and/or vulnerable are safely maintained within their own families, have their health and developmental needs met by means which avoid them becoming accommodated. Reduce to lower level of need.</p>	
<p><b>Work to be undertaken by:</b></p>	
<p>Work with children and families in need of intensive assistance will be undertaken by lead professionals within a team or social work unit. Other staff including 'named persons' may be involved in specific pieces of work as agreed in the care plan but will be supervised by the lead professional where appropriate.</p>	

## Level 2: Children with moderate priority needs (Targeted intervention)

*An assessment will show that more complex difficulties and needs exist. A Child's Plan may be required to ensure multi-agency support for the family. A clear action plan will co-ordinate targeted intervention. Referrals to the Children's Hearing System may have occurred and statutory measures may be in place.*

*Level 2 will include families experiencing difficulties where improvements may be desirable but there is no acute risk at present. Although social work intervention may be helpful if available, support may also be provided through community services to which families need to be signposted. Alternatively a short term intervention could be considered. Where there are multiple factors present an initial assessment should have already been completed before request for social work assessment.*

How children grow and	Examples of possible indicators:
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## Level 2: Children with moderate priority needs (Targeted intervention)

### develop:

- Child is involved in substance misuse
- Child in a family struggling with change (eg. parental separation or bereavement)
- Child facing health related problem that could affect their long term opportunities
- Child consistently fails medical/dental appointments and immunisations
- Child engaged in bullying behaviour
- Child who experiences bullying
- Child presenting disruptive behaviour at home
- Child has regular non-attendance at school
- Child socially isolated or unable to make friends
- Child whose health/development is unlikely to be maintained without the provision of family support from a variety of service providers
- Child experiencing serious family instability and changes of primary carer
- Child where concerns about parental substance misuse have an impact on their health or development
- Child not achieving age appropriate developmental milestones
- Child cannot cope with anger, frustration or upset
- Child starting to engage in criminal behaviour
- Young carer whose caring responsibilities are adversely affecting their development
- Support to families caring for a child with special needs or disability including:
  - Children and young people with severe learning disabilities;
  - Children and young people with multiple or severe disability;
  - Children and young people with severe communication disability;
  - Children and young people with global development delay;
  - Children and young people with severe sensory impairment;
  - Children and young people with complex physical disability.

### What children need

### Examples of possible indicators:

## Level 2: Children with moderate priority needs (Targeted intervention)

**from people who look after them:  
(Parenting capacity deficits)**

- Parents experiencing some difficulty managing the behaviour of their children (eg. inability to impose appropriate boundaries)
- Families experiencing short term crisis which impacts on their child's health/development
- Parental disharmony adversely impacting on their child's wellbeing
- Some concerns about parents ability to keep their children safe
- Child engaging in anti-social behaviour

**The child's wider world:**

**Examples of possible indicators:**

- Child not in education employment or training
- Family require support as a result of racial harassment or any other hate crime
- Indications that parent/carer ambivalent about their role
- Lack of positive role models from adult carers
- Poor relations with extended family
- Family is socially isolated
- Family has inadequate housing
- Poor skills/unemployment are a family feature
- Family has serious debts and/or is living in poverty
- Wider family network engaged in offending behaviour
- Indications that tenancy/housing may be at risk

**Desired outcome:**

Through helping to address parenting difficulties, family relationships, child health and welfare issues and/or offending behaviour and by supporting practical needs, risk factors to children are removed or significantly reduced. Reduce to lower level of need.

**Work to be undertaken by:**

After initial assessment, the need for a service for children with moderate needs will be assessed by the Reception Team or Assessment and Intervention Unit dependent on assessed need. Work would then be either undertaken by a social work unit or team if assessed as necessary, or alternatively met by the 'named person within the wider universal service provision within the health service, voluntary sector and local community.

## Level 1: Children who are vulnerable with low priority needs (Personalised support from Health and Education)

**Universal services of health and education work to support children and young people and their families, intervening only to address concerns before they escalate. This will include an element of personalisation. Some children and young people may benefit from a non-statutory plan such as a Health Care Plan or Individual Education Plan (IEP)**

**Children at Level One are vulnerable but not 'in need' as defined by the Children (Scotland) Act 1995. No requirement for a core assessment but, if possible should be offered advice, information and redirection to other sources of assistance. Social work help is not essential to the well-being of the child.**

### How children grow and develop:

#### Examples of possible indicators:

- Child with some special needs who requires referral to other services (eg. health visitor, speech therapist)
- Child who show signs of behaviour which may place them at risk
- Child experiencing inconsistent standards of parenting
- Some concern about the child's diet, hygiene and presentation
- Child has missed some routine health appointments
- Child is slow in reaching milestones with no identified organic cause
- Child has poor punctuality / is late for school
- Child has intermittent school absences
- Child has poor concentration / is not achieving potential
- Child is under stimulated
- Child is smoking/using alcohol
- Child is engaging in low level anti-social behaviour
- Child's growth and development is adversely affected by poor diet
- Child's emotional wellbeing is of concern
- Child has limited peer relationships
- Child has little opportunity to meet and play with other children due to parent's isolation. May require advice on play groups, after school club etc.

### What children need

#### Examples of possible indicators:

**Level 1: Children who are vulnerable with low priority needs (Personalised support from Health and Education)**

**from people who look after them:**  
**(Parenting capacity deficits)**

- Parents request advice and guidance to manage their child's behaviour
- Parent has chronic relationship difficulties which may affect their child
- Parent requires information or advice to aid their continuing care of their child
- Parent curtailing their child's growing independence
- Parental engagement is poor
- Parents require advice on parenting
- Parents provide inconsistent boundaries

**The child's wider world:**

**Examples of possible indicators:**

- Child who has little opportunity to meet and play with other children due to parents isolation
- Family require advice and support regarding racial harassment
- Temporary housing or homeless
- Limited formal education
- Parents on low income
- Parents may be new to area
- Parents may not access universal services adequately
- There is a dispute over contact arrangements
- Parents have rent arrears
- Parents have chronic debts due to their inability to manage their finances

**Other:**

**Examples of possible indicators:**

- Re-referral of recently closed case with no new information

**Desired outcome:**

Children in need are safe within their own families and have their health and developmental needs met. Integrated assessment to be undertaken if appropriate. Named person response.

**Work to be undertaken by:**

Named person will provide advice and assistance as per GIRFEC protocols.

## Universal Services: All children and families

*Child has no identified additional needs. Will receive universal services*

**How children grow and develop:**

**Examples of possible indicators:**

- Child has full immunisation and health services are accessed as required
- There are no significant behaviour problems
- Child is accessing mainstream education with no significant difficulties noted

**What children need from people who look after them:**

**Examples of possible indicators:**

- There are no significant parenting problems

**The child's wider world:**

**Examples of possible indicators:**

- Child lives in safe environment
- There is adequate housing and family environment

**Desired outcome:**

Better informed families, children and young people able to access universal service provision and achieving optimised outcomes.

**Work to be undertaken by:**

Mainstream education and universal health services.