

# **Continuum of Need incorporating Threshold guidance**





Level 1 Universal Services	No additional needs identified or limited intervention to avoid needs arising. Children and young people whose needs are met by on-going services such as schools, GP's, Health visitors and Dentist alon carers. Children and young people in this category are making good overall progress in all areas of their development. Some be needed to avoid needs arising or to meet a single identified need. The majority of children living in each local authority a
Response:	Agencies should identify what they can do first to support the child and their family through their own service.
Assessment:	Agencies may use their own assessment processes to tailor the services they provide.

### Development of the baby or child

#### **Identity and self-esteem** Health Basic care, safety and protection Family functioning and well-being Physically well Positive sense of self and abilities Provide for child's physical needs, e.g. food, drink, appropriate clothing, medical and dental Nutritious diet Sense of belonging and acceptance by others parents are separated • care Adequate hygiene and dress Confident in social situations • Protection from danger or significant harm, in networks Developmental and health checks and Can discriminate between safe and unsafe • the home and elsewhere immunisations up to date contacts • Demonstrates appropriate awareness of safety modelling Developmental milestones and motor skills Family and social relationships appropriate **Emotional warmth and stability** not impact on the ability to parent Good height/weight • Stable and affectionate relationships with Sexual activity appropriate for age Shows warm regard, praise and encouragement carers Housing, work and income Good mental health Ensures stable relationships Good relationships with siblings and peers ٠ Not misusing substances or engaging in risk Provides consistency of emotional warmth over Developing independent and self-care skills • taking behaviours Accommodation has basic amenities and time Learning **Emotional development** Guidance, boundaries and stimulation Access to books and toys unemployment arrangements • Good quality early attachments Attends school/nursery Managing budget to meet individual needs • Able to adapt to change Encourages learning and development through Acquires a wide range of skills and interests Able to understand others' feelings interaction and play Enjoys and participates in learning activities Social and community including education • Enables child/young person to experience (appropriate to age and stage of Has experiences of success and achievement development) • Family feels part of the community success Sound links between home and school Quality of attachment with caregivers Ensure the child can develop a sense of right Good social and friendship networks exists Planning for career and adult life and wrong • **Behavioural developments** • Child / young person accesses leisure facilities children / young people as appropriate to age and interests Takes responsibility for own behaviour • Responds appropriately to boundaries and • constructive guidance wish to exploit them Interacts appropriately

Parent and carers

### **Useful contacts:**

Please visit Buckinghamshire Safeguarding Children Partnership website - buckssafeguarding.org.uk/childrenpartnership/

ngside the love, care and protection of parents and e limited intervention from a universal service may area will fall into this category.

## Family and environment elements

- Good relationships within family, including when
- Sense of wider family, friends and community,
- Parents/carers provide consistent positive role
- No physical or mental health needs or if present do
- appropriate facilities, and can meet family needs
- Parents/carers able to manage the working or

- Community is generally supportive of families with
- No concerns of exploitation or risk of online harm
- Child's positive sense of self and abilities reduces the risk that they will be targeted by peers or adults who
- No concerns of discrimination

Level 2 Additional Services		with additional needs (not just SEN), that can be met throu; ponse. The support required may only be short term, but if	
Response:	provides details to local support services and acce need to work together to provide a coordinated se	dentified need. Agencies can be identified through the Buck ess to family support and information of wider early help ap ervice to support a child and their family who need support he child/family support needs and agree next steps which n	oproaches. t from mo
Assessment:	Agencies who have carried out their own specific to this will be particularly helpful when more than or	assessment (for example the Outcome Star or Children's Ne ne agency may be involved.	eglect Too
Development of the baby or child		Parent and carers	Family
Health	Identity and self-esteem	Basic care, safety and protection	Family
<ul> <li>Inadequate diet e.g. no breakfast</li> <li>Missing immunisations/checks</li> <li>Child is susceptible to persistent minor health problems or accidents</li> <li>Slow in reaching developmental milestones</li> <li>Minor concerns re diet, hygiene, clothing</li> <li>Weight not increasing at rate expected, or obesity</li> <li>Dental care not sufficient</li> <li>Vulnerable to emotional problems, perhaps in response to life events such as parental separation e.g. child seems unduly anxious, angry or defiant</li> <li>Early sexual activity or awareness</li> <li>Experimenting with tobacco, alcohol or illegal drugs</li> <li>Frequent accidents or A &amp; E attendance or admissions to hospital</li> </ul>	<ul> <li>Some insecurities around identity expressed e.g. low self-esteem</li> <li>May experience bullying around difference</li> <li>May be perpetrating bullying behaviour</li> <li>Child can be over friendly or withdrawn with strangers</li> <li>Child/young person provocative in behaviour/appearance e.g. inappropriately dressed for school</li> </ul> <b>Family and social relationships</b> <ul> <li>Lack of positive role models</li> <li>Child has some difficulties sustaining relationships</li> <li>Unresolved issues arising from parents' separation, step parenting or bereavement</li> </ul>	<ul> <li>Basic care is not provided consistently</li> <li>Haphazard use of safety equipment e.g. fireguards</li> <li>Parent/carer engagement with services is poor</li> <li>Parent/carer requires advice on parenting issues</li> <li>Some concerns around child's physical needs being met</li> <li>Young, inexperienced parents</li> <li>Teenage pregnancy</li> <li>Inappropriate childcare arrangements and/or too many carers</li> <li>Some exposure to dangerous situations in the home or community</li> <li>Unnecessary or frequent visits to doctor/casualty</li> <li>Parent/carer stresses starting to affect ability to ensure child's safety</li> </ul>	• F t • A
- -	Self-care skills and independence	Emotional warmth and stability	• 9
<ul> <li>Emotional development</li> <li>Some difficulties with family relationships</li> <li>Some difficulties with peer group relationships and with adults, e.g. 'clingy', anxious or withdrawn</li> <li>Some evidence of inappropriate responses and actions</li> <li>Starting to show difficulties expressing empathy</li> </ul>	<ul> <li>Disability limits amount of self-care possible</li> <li>Not always adequate self-care, e.g. poor hygiene</li> <li>Child slow to develop age-appropriate self- care skills</li> <li>Learning         <ul> <li>Disability limits amount of self-care possible</li> </ul> </li> </ul>	<ul> <li>Inconsistent responses to child/young person by parent/carer</li> <li>Parents struggling to have their own emotional needs met</li> <li>Child/young person not able to develop other positive relationships</li> <li>Child/young person's key relationships with family members not kept up</li> <li>Starting to show difficulties with attachments</li> </ul>	• F • F • L • F <mark>Social a</mark>

le agency response or through agencies working , these issues could lead to escalating.

shire Family Information Service website which es. Towards the top end of level 2, agencies may ore than one agency. Schools are advised to consult ude a Request for Family Support (L2) or submission

ol Kit), should consider sharing those outcomes as

#### y and environment elements

#### y functioning and well-being

- Parents/carers have some conflicts or difficulties that can involve the child/young person
- A child or young person has experienced loss of significant adult, e.g. through bereavement or separation
- Parent/carer has physical/mental health difficulties A child/young person is taking on a caring role in relation to their parent/carer, or is looking after younger siblings
- Privately fostered
- Adopted
- Limited friends and family support
- Child looked after by many different adults
- Parent / carer has learning needs
- Physical or mental health needs

#### ing, work and income

- Poor housing
- Some problems over basic facilities
- Family seeking asylum or refugees
- Periods of unemployment of parent/carer
- Parents/carers have limited formal education Low income
- Financial/debt problems

#### l and community including education

Family new to the area or with limited contact with community members

Limited engagement in play with others Behavioural developments	<ul> <li>Have some identified learning needs that result in a school level response</li> <li>Language and communication difficulties</li> </ul>	Guidance, boundaries and stimulation	
<ul> <li>Not always able to understand how own actions impact on others</li> <li>Finds accepting responsibility for own actions difficult</li> <li>Responds inappropriately to boundaries and constructive guidance</li> <li>Finds positive interaction difficult with peers in unstructured contexts</li> </ul>	<ul> <li>Some school absence</li> <li>Poor punctuality/pattern of regular school absences         <ul> <li>Not always engaged in play/learning, e.g. poor concentration</li> <li>Not thought to be reaching his/her education</li> </ul> </li> </ul>	<ul> <li>Parent/carer offers inconsistent boundaries</li> <li>Lack of routine in the home</li> <li>Child/young person spends considerable time alone, e.g. watching television</li> <li>Child / young person is not often exposed to new experiences; has limited access to leisure activities</li> <li>Child / young person can behave in an antisocial way in the neighbourhood, e.g. petty crime</li> <li>Possible risk of online harm</li> </ul>	

**Useful contacts:** 

Please visit Buckinghamshire Safeguarding Children Partnership website – buckssafeguarding.org.uk/childrenpartnership/

- Some social exclusion or conflict experiences; low tolerance
- Community characterised by negativity towards children/young people
- Difficulty accessing community facilities
- Child has a negative sense of self and abilities and suffers with low self-esteem making them
- vulnerable to peers and adults who pay them attention and/or show them affection but do so in order to exploit them (CE).
- Some concerns of possible discrimination

Level 3 Comprehensive Support	Children and young people who have multiple and complex needs requiring a multi-agency Early Help response with a lead pro Child in Need. Although a Child in Need requires a statutory response from Children's Social Care, a statutory intervention is no threshold for a Child in Need falls in level 3, but where a statutory intervention is required from Children's Social Care this woul level Early Help involvement is still an option. Children and young people in this category have increasing levels of un-met nee range, depth or significance of the problems faced by children at level 3 may begin to prevent them from achieving or maintain development if they don't receive appropriate services. They are likely to require targeted and/or longer-term intervention from		
Response:	the MASH and a decision is made within 72 hours as to v	g the Multi-Agency Referral Form (MARF). Once contact is what service level is needed in relation to the Continuum o vill need to consult with their link support worker to discuss	f Need. If co
Assessment:		Children's Neglect Tool and a Child in Need assessment (a encies may use their own assessment tools in the first insta	
Development of the baby or child		Parent and carers	Family a
Health	Identity and self-esteem	Basic care, safety and protection	Family f
<ul> <li>Physically unwell</li> <li>Concerns re diet, hygiene, clothing</li> <li>Child has some chronic/recurring health problems; not treated, or badly managed</li> <li>Missing routine and non-routine health appointments</li> <li>Weight gain – drop in centiles</li> <li>Limited or restricted diet, e.g. no breakfast; no lunch money</li> <li>Concerns about developmental progress, e.g. overweight/underweight; bedwetting/soiling</li> <li>Developmental milestones are unlikely to be met</li> <li>Dental decay</li> </ul>	<ul> <li>Child subject to persistent discrimination, (e.g. racial, sexual or due to disabilities).</li> <li>Demonstrates significantly low selfesteem/confidence in a range of situations</li> <li>Victim of crime or bullying</li> <li>Signs of deteriorating emotional wellbeing/mental health</li> <li>May not discriminate effectively with strangers</li> <li>Clothing is regularly unwashed or unsuitable</li> <li>Presentation (including hygiene) significantly impacts on all relationships</li> <li>Child lacks confidence or is watchful or wary of carers/people</li> <li>May be aggressive in behaviour/appearance</li> </ul>	<ul> <li>Parent/carer is struggling to provide adequate care</li> <li>Parents have found it difficult to care for previous child/young person</li> <li>Inappropriate care arrangements</li> <li>Instability and domestic violence in the home</li> <li>Parent's mental health problems or substance misuse significantly affect care of child/young person</li> <li>Non-compliance of parents/carers with services</li> <li>Practitioners have serious concerns</li> <li>Experiencing unsafe situations</li> <li>Child/young person caring for siblings/parent</li> </ul>	<ul> <li>In</li> <li>Ac</li> <li>Fa</li> <li>di</li> <li>Fa</li> <li>lit</li> <li>Fa</li> <li>Pa</li> <li>Pt</li> <li>pa</li> </ul> Housing <ul> <li>Pc</li> <li>ur</li> </ul>
<ul><li>Dental decay</li><li>Smokes/ other regular substance misuse</li></ul>	Family and social relationships	<ul> <li>Child/young person perceived to be a problem by parents</li> </ul>	• Li • Ex
<ul> <li>'Unsafe' sexual activity</li> <li>Learning significantly affected by health problems</li> <li>Significant speech language</li> </ul>	<ul> <li>Relationships with carers characterised by inconsistencies</li> <li>Child has lack of positive role models</li> <li>Child appears to have undifferentiated ettechments</li> </ul>	<ul> <li>Child/young person may be subject to neglect</li> <li>Child/young person previously looked after by LA</li> <li>Emotional warmth and stability</li> </ul>	• In • Pa ui oi
<ul> <li>difficulties/delay or disordered development</li> <li>Child has significant disability</li> <li>Mental health issues emerging</li> <li>Sexual activity which cause concern and/or sexually harmful behaviour</li> </ul>	<ul> <li>attachments</li> <li>Misses school or leisure activities</li> <li>Involved in conflicts with peers/siblings</li> <li>Lack of friends/social network</li> <li>May have previously had periods of LA accommodation</li> </ul>	<ul> <li>Child receives erratic or inconsistent care</li> <li>Child has episodes of poor-quality care</li> <li>Parental/carer instability/emotional needs affects capacity to nurture</li> <li>Some relationship difficulties</li> </ul>	• Pa du • Se ba

rofessional. Level 3 also includes the threshold for a not necessarily required. For this reason, the buld fall into level 4. It should be noted that at this eeds that are more significant and complex. The nining a reasonable standard of health or rom specialist services.

case is then screened by Children's Social Care in contact needs to be made out of hours, you can call from which a decision to complete a MARF will be

assessment led by Children's Social Care under

#### and environment elements

#### y functioning and well-being

Incidents of domestic abuse between parents/carers Acrimonious divorce/separation

- Family has serious physical and mental health difficulties
- Family has poor relationship with extended family or little communication
- Family is socially isolated
- Parent / carer has Learning needs
- Physical or mental health needs which impact on parenting capacity.

#### ng, work and income

Poor state of repair, temporary or overcrowded, or unsafe

- Living in interim accommodation
- Experiencing frequent moves
- Intentionally homeless
- Parents/carers experience stress due to
- unemployment or 'overworking'; may be impacting
- on other aspects of family life e.g. marital
- relationship
- Parents/carers find it difficult to obtain employment due to poor basic skills
- Serious debts/poverty impact on ability to have
- basic needs met

Emotional development	<ul> <li>Concerns of absences from home without parental consent</li> </ul>	<ul> <li>Child has no other positive relationships</li> <li>Child has multiple carers; may have no</li> </ul>	• L
<ul> <li>Good quality early attachments e.g. conduct disorder; ADHD; anxiety;</li> </ul>	*Emerging behaviours which could suggest CSE	<ul><li>significant relationship to any of them</li><li>Child has been 'Looked After' by the LA</li></ul>	• •
depression; eating disorder; self-harming	Self-care skills and independence		
Frequent accidents	<ul> <li>Disability prevents self-care in a significant range of tasks</li> </ul>	Guidance, boundaries and stimulation	Social a
Behavioural developments	<ul> <li>Child takes little or no responsibility for self-care</li> </ul>	<ul> <li>Erratic or inadequate guidance provided</li> <li>Parents struggle/refuse to set effective</li> </ul>	• L
<ul> <li>Does not accept responsibility for own actions; finds it hard to understand how own actions impact on others or learn from consequences</li> <li>Disruptive/challenging behaviour at</li> </ul>	<ul> <li>tasks compared with peers</li> <li>Child lacks a sense of safety and often puts him/herself in danger</li> <li>Child is main carer for family member</li> </ul>	<ul> <li>boundaries e.g. too loose/tight/physical chastisement</li> <li>Child/young person behaves in anti-social way in the neighbourhood</li> <li>Parent/carer does not offer a good role model,</li> </ul>	• L • A • F s
school, home or in the neighbourhood	Learning	e.g. by behaving in an anti-social way	• (
<ul> <li>Starting to commit offences/re-offend</li> <li>Interacts negatively with peers in learning and play contexts</li> <li>Child/young person is withdrawn, isolated/unwilling to engage</li> <li>Concerns of absences from home without parental consent</li> <li>*Emerging behaviours which could suggest CSE</li> </ul>	<ul> <li>Identified learning needs that are being addressed at school level.</li> <li>Regular underachievement causing concern at school</li> <li>Poor nursery/school attendance and punctuality</li> <li>Poor home-nursery school link</li> <li>Some fixed-term exclusions</li> <li>Very limited interests/skills displayed</li> <li>Not in education (under 16)</li> <li>Not in education, employment, or training post 16</li> </ul>	<ul> <li>Child not receiving positive stimulation, with lack of new experiences or activities</li> <li>Child/young person under undue parental pressure to achieve/aspire</li> <li>Exposure to online forums increasing risk of online harm.</li> </ul>	

**Useful contacts:** 

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Low income plus adverse additional factors e.g. up to borrowing limit of Social Care Fund Rent arrears put family at risk of eviction or proceedings initiated

#### l and community including education

- Parents/carers socially excluded/isolated Lack of a support network
- Low community support for families
- Acrimonious relationships within community Poor quality access to universal and targeted
- services
- Concerns expressed by others
- Child's negative sense of self/low self-esteem
- contributes to their involvement with peers and/or adults thought to be treating them badly and/or encouraging their involvement in self-harm and/or criminal behaviour.
- Child regularly goes missing and family do not know where Child is.
- Incidents and or increase of discrimination

Level 4 Statutory / Specialist Support	suffered or likely to be suffering significant harm or abuse, sexual abuse and neglect. These children req	et or complex needs or children who are in need of p significant impairment to their health or developmer juire intensive support under Section 47 of the Childro mulation of significant events, both acute and longsta	nt. Harm is defined under 4 en Act 1989 (Child Protecti
Response:	Agencies should contact First Response using the M there is a concern that a child is immediately at risk,	ulti-Agency Referral Form (MARF) or by calling 01296 , call the Police on 999.	5 383962 (or 0800 999 767)
Assessment:		visions of the Children Act 1989. This will be led by Ch nilable to ensure a child is protected from harm. This i	
Development of the baby or child		Parent and carers	Family and environr
Health	Identity and self-esteem	Basic care, safety and protection	Family functioning a
<ul> <li>Child/young person has severe/chronic health problems</li> <li>Child/young person's weight and height both under the 0.4th centile</li> <li>Other developmental milestones unlikely to be met; failure to thrive</li> <li>Lack of food may be linked with neglect</li> <li>Refusing medical care endangering life/development</li> <li>Seriously obese</li> <li>Dental decay and no access to treatment</li> <li>Persistent and high-risk substance misuse</li> <li>Dangerous sexual activity and/or early teenage pregnancy</li> <li>Child sexual exploitation (CSE)</li> <li>Suspected imminent risk of FGM (female genital mutilation)</li> <li>Sexual abuse</li> <li>Self-harming</li> <li>Non-accidental injury</li> <li>Acute mental health problems e.g. severe depression; threat of suicide;</li> </ul>	<ul> <li>Child/young person experiences persistent discrimination; internalised and reflected in poor self-image</li> <li>Failed Education Supervision Order – 3 prosecutions for non-attendance: family refusing to engage</li> <li>Socially isolated and lacking appropriate role models</li> <li>Alienates self from others</li> <li>Bullying</li> <li>Lack of confidence is incapacitating</li> <li>Victim of crime; may fear persecution by others</li> <li>Poor and inappropriate self-presentation</li> <li>Child/young person likely to put self at risk</li> <li>Child sexual exploitation (CSE)</li> <li>Evident mental health needs</li> </ul> <b>Family and social relationships</b> <ul> <li>Repeated missing persons episodes</li> <li>Relationships with family experienced as negative ('low warmth, high criticism')</li> <li>Rejection by a parent/carer; family no longer want to care for - or have abandoned - child/young person</li> </ul>	<ul> <li>Parents/carers unable to provide 'good enough' parenting that is adequate and safe;</li> <li>Parent/carer's mental health or substance misuse significantly affect care of child</li> <li>Parents/carers unable to care for previous children</li> <li>Instability and violence in the home continually</li> <li>Parents/carers involved in crime</li> <li>Parents unable to restrict access to home by dangerous adults</li> <li>Parents/carers own needs mean they are unable to keep child/young person safe</li> <li>Chronic and serious domestic violence involving child/young person</li> <li>Unexplained injuries</li> <li>Parents not engaging with professionals</li> <li>Allegation or reasonable suspicion of serious injury, abuse or neglect.</li> <li>Unable to manage severe challenging behaviour without support –high risk of family breakdown</li> <li>Suspected/evidence of fabricated or induced illness Unable to meet child/young</li> </ul>	<ul> <li>Significant parent</li> <li>Family character difficulties</li> <li>History of rejecti</li> <li>Poor relationship</li> <li>No effective support of the support</li></ul>
<ul> <li>psychotic episode</li> <li>Physical/learning disability requiring constant supervision</li> </ul>	<ul> <li>Periods accommodated by Council</li> <li>Family breakdown related to child's behavioural difficulties</li> </ul>	<ul> <li>person's physical or emotional needs</li> <li>Disclosure from parent of abuse to child/young person</li> <li>Escalating or serious domestic violence</li> </ul>	<ul> <li>skills or long-ter</li> <li>Extreme poverty</li> <li>No expectation to the second se</li></ul>

oung people in this category are identified as having 4 possible categories: physical abuse, emotional ction Plan). Sometimes 'Significant Harm' will be a 5 in situations of neglect.

77 for the out of hours Emergency Duty Team). If

re a child is assessed to have met the threshold for subject to a Child Protection Plan or taking the child

#### ment elements

#### and well-being

ental/carer discord and persistent domestic violence erised by conflict and serious chronic relationship

- ction
- nips between siblings and wider family
- upport from extended family
- helpful involvement from extended family
- erson has been identified as a child/young person in ents/carers have refused support
- d in criminal activity; parent or sibling has received ence
- ng a risk to children in, or known to household environment
- used for drug taking, prostitution, illegal activities nysical or mental health needs that impact on acity
- has Learning needs that impact on parenting capacity

#### income

- imminent
- rous or seriously threatening to health
- nmodation places child in danger
- ployment that has severely affected parents' own
- to gain employment due to significant lack of basic erm substance misuse
- rty/debt impacting on ability to care for child
- that young person will work

- Disclosure of abuse from child/young • person
- Evidence of significant harm or • neglect
- Disclosure of abuse/physical injury • caused by a professional

#### **Emotional development**

- Puts self or others in danger e.g. missing from home
- Severe emotional/ behavioural challenges
- Unable to connect cause and effect of own actions
- Unable to display empathy
- Suffers from periods of severe depression
- Self-harming or suicide attempts

#### **Behavioural developments**

- Unable to determine boundaries, roles and responsibilities appropriately
- Cannot maintain peer relationships e.g. is aggressive, bully, bullied
- Regularly involved in anti-• social/criminal activities
- Repeated missing persons episodes •
- Prosecution of offences resulting in court orders, custodial sentences, ASBOs
- Non-compliant or poor response to • support
- Professional concerns but difficulty • accessing child/young person
- Unaccompanied refuge/asylum seeker
- Privately fostered •
- Abusing other children
- Young Sex Offenders •
- Serious or persistent offending behaviour likely to lead to custody/remand in secure unit/prison
- Subject to Family Support or Child **Protection Plan**

- Subject to physical, emotional or sexual abuse or neglect
- Child Exploitation (CE) •
- Suspected imminent risk of FGM (female genital mutilation)
- Child is main carer for family member •

#### Self-care skills and independence

- Severe disability child/young person relies totally on other people to meet care needs
- Child neglects to use self-care skills due to ٠ alternative priorities, e.g. substance misuse

#### Learning

- Puts self or others at risk through behaviour
- No, or acrimonious, home-nursery or school link
- Young child with few, if any, achievements ٠
- No school placement ٠
- Child/young person is out of school ٠
- Has no access to leisure activities
- Multiple fixed term exclusions or risk of permanent exclusion
- Consistently poor or no educational attainment progress

#### **Emotional warmth and stability**

- Parents/carers inconsistent, highly critical, rejecting or apathetic towards child
- Family life chaotic
- Child/young person beyond parental/carers' control
- Parent's own emotional experiences impacting on their ability to meet child/young person's needs
- Child has no-one to care for him/her
- Child/young person threatened with • rejection from home
- Requesting young child be accommodated

#### Guidance, boundaries and stimulation

- No effective boundaries set by parents/carers
- Multiple carers with no consistency
- Child regularly behaves in an anti-social way in the neighbourhood
- No constructive leisure
- Exposure to online forums evident to resulting in harm

#### Social and community including education

- No supportive network
- Community are hostile to family

- incidents of discrimination

Family chronically socially excluded

Child frequently goes missing and fails to account for their locations or discloses situations indicating risk of CE

Child trafficked to UK for sexual exploitation

Currently being discriminated and or on going and increasing

Areas of Concern: Other areas of concern that will need to be considered in terms of their impact and level of risk include:	<ul> <li>Behaviour</li> <li>Child exploitation</li> <li>Development</li> <li>Disability</li> <li>Domestic abuse</li> <li>Education</li> <li>Emotional well-being</li> <li>Female genital Mutilation</li> <li>Forced Marriage</li> <li>Gangs</li> <li>Honour based violence</li> <li>Housing</li> <li>Legal status</li> <li>Missing</li> <li>Neglect</li> </ul>	<ul> <li>Offending</li> <li>Online risk</li> <li>Parental mental health</li> <li>Parenting</li> <li>Perplexing presentations (fabricated illness)</li> <li>Physical abuse</li> <li>Physical Health</li> <li>Radicalisation</li> <li>Relationships (social context)</li> <li>Self-harm</li> <li>Sexual abuse</li> <li>Sexual health</li> <li>Substance misuse</li> <li>Young Carer</li> </ul>
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