Levels of Need Framework

Lambeth Safeguarding Children Partnership

The Lambeth Levels of Need Framework focuses upon the needs and risk of harm to children and families within their environment or context. It is intended to support discussion about the levels of need and the most appropriate response across the partnership. The framework is organised into two sections:

1. **Child and Family** Levels of Need (pg 3-7) - needs or risk of harm as they relate to individual or familial situations, including domestic abuse

2. **Context** (Locations & Groups) Levels of Need (pg 8-9) - needs or risk of harm within extra-familial contexts - i.e. a peer group, school or location.

Critical Questions: When using this framework, we must constantly challenge ourselves to know:

- Is the immediate safety of the child assured?

- How does the child feel, what do they want, and what is day-to-day life like for them?

- What needs to change for us to be less worried, and are changes happening quickly enough?

- Have we taken into account the child's and family's previous experiences, including possible unresolved trauma?

- What would life be like for the child in the long-term if things do not change?

- Are we putting the right interventions in place to support the change we need to see?

- What needs to happen if things do not change?

- Are professionals working together effectively to help improve things for the child and family?

4 Levels of Need

The framework on pages 3-7 defines four different levels of need to guide the most appropriate response to support a child.

1 Universal – The child has no additional needs; all their health and developmental needs will be met by universal services. This is a child who consistently receives child-focused care from their parents or carers.

2 Community Early Help – The child has emerging needs requiring early help. These needs can be met by universal services working with community services. Early Help from the community at this level is intended to enable children and young people to achieve positive outcomes, as well as preventing an escalation of needs.

3 Specialist Early Help - The child is at substantial risk of not achieving positive outcomes without support from specialist services. Needs identified in this tier are likely to mean that the child is referred to Children's Social Care under section 17 of the Children Act 1989. Support might be in the form of a Child in Need Plan, or via specialist Early Help, using a team around the family approach.

4 Specialist Protection – The child is suffering, or likely to suffer, significant harm. This is the threshold for statutory child protection. The child may have already experienced adverse effects and be suffering from poor outcomes. Needs identified in this tier are likely to mean that the child be referred to Children's Social Care under section 20, 47 or 31 of the Children Act 1989.

Meeting needs

Universal services that meet universal need include: schools, childcare providers, children's centres, health visiting, school nursing, GPs, play services, police, housing, the voluntary, faith & community sector. They can also include leisure and retail facilities, & other spaces outside the home in which young people spend their time, such as parks & high streets. Universal services should foster **positive, empowering & supportive relationships** & provide services that are **trauma-informed, culturally sensitive, & anti-racist**.

Additional needs should be identified early and met without delay to ensure the best outcomes for children. Universal services have a vital role in identifying needs early & often take a central role in providing consistent support to children or families with complex issues, while they receive more specialist services. Some of the targeted services that can support universal services include family support, special educational need services, behaviour & educational support, speech & language therapy, short breaks & voluntary & community services.

If further needs are identified, a **Community Early Help Assessment** should be completed, seeking out & working with community organisations to provide **targeted support** to a child, family, group or location. A written **early help plan** can ensure the family and all workers involved are aware of the intended outcomes, who is responsible for the actions and how success will be measured. The Lambeth Early Help Toolkit contains guidance and templates.

When children, families or contexts have more complex, multiple or a higher level of need, they may require a more **coordinated & specialised** offer of **Specialist Early Help**. A **referral** should be made to Lambeth's Integrated Referral Hub. The multi-agency team around the family, or place, will be led by a named professional.

If there is a **high risk of significant harm**, an immediate safeguarding response is needed to protect the child. **Make a referral** to Lambeth's Integrated Referral Hub without delay. **Specialist Protection** will be provided by a multi-agency team led by statutory social care services.

If there is an immediate risk of significant harm, always dial 999 straight away.

Making a referral

Please call to discuss your referral and then follow up by submitting an online Multi-agency Referral Form (MARF)

Tel: 020 7926 5555 (24 hours)
Email: helpandprotection@lambeth.gov.uk

For further information about the criteria for when a case should be referred to Children's Social Care for statutory services, please refer to pages 35 – 39 of the threshold document published by the London Safeguarding Children Partnership
www.londoncp.co.uk/files/revised_guidance_thresholds.pdf

This provides information on the criteria related to Section 47, Section 20, and Section 31 of the 1989 Children Act.

Professional judgment

Each child, family & extra-familial context will have a unique set of needs & strengths. The Levels of Need Framework is a guide & is not intended to replace professional knowledge, experience & discretion.

Professionals should be alert to the likely cumulative effect of multiple needs & consider whether the presence of numerous indicators (related to parenting, domestic abuse or within the extra-familial environment) amounts to the child's needs not being met. It is also vital to gain a clear understanding of a child's history and previous experiences to ensure interventions are appropriate. Professionals should also be mindful of the complex & dynamic nature of risks.

Escalating a referral

For information about how to escalate a concern & how to resolve professional differences, please refer to the Lambeth Safeguarding Children Partnership escalation policy:

www.lambethsaferchildren.org.uk/escalation-policy

Tier 1: A Child with Universal Needs

Health & Development	Mental Health, Wellbeing & Behaviour	Education	Social & Neighbourhood	Family & Environment	Parent & Parenting
Individual indicators: • Has had all age appropriate interventions in Healthy Child Programme • Is healthy & well, development is age appropriate & has had all relevant immunisations • Has a healthy diet & appears well nourished • Is registered with a GP & basic services such as dentist, optician • Achieving key developmental stages • Can manage own treatment for any condition & take part in everyday life *Experiences/ contexts: Familial* • Child/young person's physical needs are adequately provided for • Income is consistent & sufficient to meet basic family needs • No barriers to learning *Extra-familial* • If sexually active & age appropriate which is in line with their mental capacity to make safe decisions, the young person is engaging in consensual sex & is practicing safe sex	*Individual indicators:* • Good mental health & psychological wellbeing • Is able to employ effective techniques to manage any episodes of low mood or stress *Experiences/contexts: Familial* • Good quality attachments & familial relationships *Extra-Familial* • Good quality relationships with peers, professionals & community • Child/young person has supportive & age-appropriate friends • Child/young person has safe, healthy & age appropriate digital activity	*Individual indicators:* • Good attendance (97%+) at school/college/training • Planned progression beyond statutory school age • Meeting age-related expectations in their learning and (where applicable) EHCP/SEN support plan targets • No barriers to learning *Experiences/contexts: Familial* • Family engage appropriately with education provision *Extra-familial* • School fosters a culture of wellbeing & positive relationships • Access to quality PSHE & RSE curriculum that meets child's needs • Child/ young person knows who to talk to & experiences appropriate response to any concerns	*Individual indicators:* • Knowledgeable about the effects of crime & anti-social behaviour • Age appropriate knowledge about sex & relationships • Age appropriate independent living skills • Child/young person is exposed to a range of ideas & opportunities to give them choices about their lives • Child/young person feels safe *Experiences/context: Familial* • Family context is supportive of social development *Extra-familial* • Development stimulated through play and/or appropriate peer group interaction • Child/young person has socially acceptable, consensual & reciprocal relationships • Child/young person is aware of safe online behaviour & knows who to contact if they experience digital harm	*Individual indicators:* • Family has consistent income sufficient to meet basic needs • Family and child/ young person have access to community resources *Experiences/context: Familial* • Good family relationships • Family members are physically well & mentally stable • Family has positive relationships & appropriate support from others • Any conflict within the family is managed in a safe way which respects all individuals' rights • There are no incidents of domestic abuse in the family & no history or perpetrator behaviour by family members *Extra-familial* • Family feels accepted by the community which supports positive home & family life • Family have access to good, age appropriate facilities which support positive home/family life • Family members feel safe in the local community	Individual indicators: • Child/young person's emotional & physical needs provided for in an age appropriate way • Consistent parenting providing appropriate guidance & boundaries • Child/young person's physical needs are adequately provided for • Parenting generally demonstrates praise, emotional warmth & encouragement • Positive family relationships, including between separated parents Experiences/ context: Familial • Parents aware of extra-familial risks in the community & are confident to raise concerns • Parents are connected to other parents of their child's peers & know who to contact to ensure appropriate supervision • Parents appreciate the pressures that extra-familial harm places on a young person & engage in protective support rather than blaming them for any harm • Parents practice safe online activity within their home (i.e. parental locks)

Tier 2: A Child Requiring Community Early Help

Health & Development	Emotional Health, Wellbeing & Behaviour	Education	Social & Neighbourhood	Family & Environment	Parent & Parenting
Indicators of harm or vulnerability: • Long term conditions or chronic illness • Mild level of disability requiring additional support to be maintained in a universal setting • Poor nutritional status • Developmental delay • Non-immunised • Child/young person is delayed in speech/ expressive communication • Frequent illness/ accidents • Significantly under/ overweight • Child/young person sometimes not brought to medical appointments *Factors contributing to harm or vulnerability: Familial* • Child/young person is not appropriately supervised *Extra-familial* • If sexually active & age appropriate (in line with their mental capacity to make safe decisions), the young person is engaging in consensual sex, however is not always practicing safe sex	*Indicators of harm or vulnerability:* • Child/young person has a negative sense of self & abilities • Challenging behaviour that parents sometimes find difficult to manage • Starting to experience social isolation • Anxiety, low level depression or other difficult feelings • Relationship difficulties with family, friends or teachers • Child/young person has victim blaming views *Factors contributing to harm or vulnerability: Familial* • Parental or family separation, illness or health problems • Previous experiences of trauma that may have not been fully resolved *Extra-familial* • Low self esteem appears to make young person vulnerable to peers or adults paying them attention, potentially in order to groom or exploit them • Aware of experiences of sexual harassment within wider peer group	*Indicators of harm or vulnerability:* • Difficulty concentrating • Low motivation • Low attendance <90% • Higher than average 'behaviour incidents' recorded by school • Fixed-term exclusion • Non-attendance which is not certified by appropriate professionals • Frequently moving school without reasonable cause • Child/young person has poor pro-social relationships and may be socially isolated • Child/young person falls asleep during lessons *Factors contributing to harm or vulnerability: Familial* • Educated at home with engagement from family but child/young person not developing appropriately • Poor access to books, toys, educational materials, and/or correct uniform *Extra-familial* • Difficulties with peer relationships • Academic pressure causing high and sustained levels of anxiety affecting the child/young person's mental health	*Indicators of harm or vulnerability:* • Family and child/young person experience barriers to accessing community & economic resources • Exposed to crime and violence through living in their neighbourhood • Expresses sympathy for ideologies linked to violent extremism but is open to other views • Child/young person normalises harm • Child/young person is aware of others in wider peer group carrying weapons *Factors contributing to harm or vulnerability: Familial* • Child/young person is not always appropriately supervised in the home or community *Extra-familial* • Low self esteem appears to make young person a target for peers or adults paying them attention, potentially in order to groom or exploit them • Wider family member or friend charged with crime linked to the sale of drugs or violence	*Indicators of harm or vulnerability:* • Family live in inadequate housing • Family do not have access to adequate financial resources • Child sometimes wears weather-inappropriate clothing or appears unkempt • Child/young person often late to school *Factors contributing to harm or vulnerability: Familial* • Family routine not conducive to child's needs • Socially or physically isolated • Household members with disability or health problems • Negative adult relationships, sometimes resulting in arguments • The harmful impact of such incidents is mitigated by other protective factors within the family such as supportive grandparents who are able to provide care or support • The home is substantially cluttered • Inadequate/ overcrowded housing • A parent who is a survivor of previous abuse	*Indicators of harm or vulnerability:* • Parent misses appointments with health and education provision • Postnatal depression • Excessive anxiety regarding child/young person's health • Lack of consistent boundaries, supervision & guidance • Relationship difficulties that impinge on child/ young person • Learning difficulties that affect parenting/caring • Parent/carer does not encourage development of child/ young person's independence • Parents/carers fail to understand the physical, social and spiritual needs of child/ young person at specific ages or stages • Parents/carers do not take responsibility for issues which are beyond a child/young person's developmental maturity • Placing child/young person under excessive pressure to achieve academically • Teenage parent > 18

Health & Development	Emotional Health, Wellbeing & Behaviour	Education	Social & Neighbourhood	Family & Environment	Parent & Parenting
Indicators of harm or vulnerability: • Long term conditions or serious illness which negatively impact on quality of life • Significant drop in placement along the 'centile' range for height/weight without adequate explanation • Child/young person is significantly delayed in speech/expressive communication • Multiple attendances at A&E or acute healthcare settings • Significantly under/overweight • Child/young person not brought to multiple medical appointments *Factors contributing to harm or vulnerability: Familial* • Parents/carers not adhering to treatment plan, or delayed presentation for treatment, causing unnecessary levels of suffering • Adult female family members are survivors of female genital mutilation, or other harmful practices, like breast ironing *Extra-familial* • Young person has sexually transmitted infection or unwanted pregnancy & there are concerns of peer pressure to be sexually active • Attendance at A&E due to harm experienced in extra-familial settings	*Indicators of harm or vulnerability:* • Low self-esteem, withdrawn, anxious, angry, stressed or significantly low in mood • Non-life-threatening self-harm • Bullying or being bullied • Appears to participate in activity which causes harm to themselves or others & which suggests a limited range of behaviour choices • Relationship difficulties with family, friends or teachers • Child/young person is hyper-vigilant or is experiencing effects of trauma • Child/young person carries weapons • Child/young person experiences sexual harassment online or by peers *Factors contributing to harm or vulnerability: Familial* • Child has caring responsibilities that impact on behaviour/development *Extra-familial* • Being pressured to become gang-involved • Within wider peer group, experiences of exploitation (including sexual and criminal) or sexual assault • Exposed to violence and trauma within their peer associations	*Indicators of harm or vulnerability:* • Low attendance <85% • Significantly higher than average 'behaviour incidents' recorded by school • Multiple fixed-term exclusions • NEET or at risk of NEET • Child/young person has poor pro-social relationships, resulting in significant difficulties with peers • Showing signs of significant developmental and/or not meeting (where applicable) EHCP/SEN support plan targets *Factors contributing to harm or vulnerability: Familial* • Educated at home with engagement from family but child/young person not developing appropriately • Poor access to books, toys, educational materials, and/or correct uniform *Extra-familial* • School peers are involved in pressuring or grooming a child/ young person to become involved in criminality and/or become at risk of exploitation	*Indicators of harm or vulnerability:* • Exposed to pro-offending behaviour & attitudes in the local neighbourhood • Engaging in substance misuse • Learning disability which is exploited by others leading to risk or harm • Child/young person is displaying extremist views and behaviours • Child/young person is undertaking activities that evidence criminal or sexual exploitation • Being a victim of crime • Child/young person exposed to the selling or use of illegal substances • Child/young person feels unsafe to go into neighbourhood spaces beyond their immediate environment *Factors contributing to harm or vulnerability: Familial* • Family experiencing harassment or discrimination within community *Extra-familial* • Close friends charged or linked to drugs trade • Evidence of close friends being exploited	*Indicators of harm or vulnerability:* • Family live in unsafe housing • Family do not have access to financial resources to meet basic needs • Child/young person wears inappropriate clothing or appears unkempt • Child/young person is a young carer • There are isolated incidents of domestic abuse between adults in the home • There are incidents of child to parent violence in the home *Factors contributing to harm or vulnerability: Familial* • Family homeless or in temporary accommodation • Socially or physically isolated • Household members with disability or significant health problems • Scale 1 & 2 Domestic Violence as per Barnardo's Guidance • Home environment is not suitable for children/there are visible health and safety risks *Extra-familial* • Network around the family normalises harm	*Indicators of harm or vulnerability:* • Mental and/or physical health needs or learning difficulties that negatively affect care of the child • Colludes with or condones failure to attend school • Substance and or alcohol misuse affecting parenting • Parent/Carer in prison or on bail (for non-violent crime) • Parent/carer is begging for food/money • Parent/carer avoiding or refusing to engage with professionals where a concern has been raised *Extra-familial* • Parent considers child/young person to be to blame for extra-familial harm (i.e. sexual or criminal exploitation) • Absence of appropriate concern to implement parental safeguards in relation to their child/young person's harmful digital activity • Unable to give a picture of child/young person's peer group

What do I do next? Call 0207 926 3100
& Submit an online [Multiagency Referral Form](#)
If there's immediate risk, call 999

Tier 4: A Child Requiring Specialist Protection PART 1

Health & Development	Emotional Health, Wellbeing & Behaviour	Education	Social & Neighbourhood	Family & Environment	Parent & Parenting
Indicators of harm or vulnerability: • Significant faltering growth of unknown cause • Significant developmental delays, disability or long term condition • Complex disability that cannot be maintained in a mainstream setting or without significant additional support • Child is born with indications of maternal substance misuse • Child in infancy has lost weight without adequate explanation • Child/young person in hospital setting continuously for 3 months • Child/young person is suffering as a result of inadequate access to primary/secondary healthcare • Injuries not consistent with explanation given • Disclosure of abuse which has taken place • Child/young person is malodorous	*Indicators of harm or vulnerability:* • Complex mental health needs or learning disabilities requiring long term or specialist interventions & treatment • Severe impairment of functioning associated with mental health disorders (e.g. severe anxiety, severe OCD, Phobic, panic disorders, ADHD, ASD, Tourettes syndrome) • School refusal where mental health disorder plays a significant role • Conduct difficulties including children & young people who present a forensic risk to others • Expression of suicidal thoughts • Severe, or life threatening, mental health conditions (e.g. psychosis, risk of suicide or severe self-harm, severe depressive episode, anorexia nervosa)	*Indicators of harm or vulnerability:* • Chronic non-attendance, truanting • Permanently excluded due to behavioural or other issues • Child/young person missing from education • Child/young person avoids school in order to stay safe • No parental support for education • Professional concerns about the safety or wellbeing of a child/young person whose family has elected home education	*Indicators of harm or vulnerability:* • Family and child/young person exposed to high levels of physical violence & highly intrusive behaviours through their living environment • Family & child/young person experience high levels of social exclusion (poverty, lack of access to community resources) • Child/young person has been victim of a knife or gun related injury • Child/young person is begging/scavenging for food or money • Teenage parent under 16 • Child/young person being harmed through their own substance misuse • Child/young person who poses a risk of harm to others • Inappropriate or harmful sexual/ sexualised behaviour displayed by child/ young person • Child/young person in custody with no family support or involvement	*Indicators of harm or vulnerability:* • Child/young person living with unstable living arrangements outside of the immediate family or private fostering arrangement • Child/young person who is being looked after in private fostering arrangements • Child/young person consistently appears dirty/clothing is inappropriate for climate Adult who poses risk to child/young person is in household or in contact with family • Drug taking, prostitution, and illegal activities by a person in the child/young person's family home that significantly impacts on child • Imminent family breakdown • Homeless & destitute in a family context i.e. with parent/carers • Scale 3 & 4 Domestic Violence as per Barnardo's Guidance • Medicines or harmful products have been ingested by the child/ young person • There is insufficient/ inadequate food for the child to eat	*Familial and extra-familial factors:* • Failure to access pre/ postnatal care • Very young or vulnerable child/young person left alone • Drug or alcohol abuse seriously affecting the ability of parent/carer to function • Child/young person rejected from home • Parental inability to judge dangerous situations • Parental inability to protect child/young person from harm • Emotional neglect where earlier interventions have failed to be effective • Adult mental health significantly impacting on the care of the child or young person • Parent has serious mental health condition and child/young person is subject of parental delusion • Significant perinatal mental heath needs, of post partum psychosis • Parent/carer with significant learning disability seriously affecting ability to parent

Tier 4: A Child Requiring Specialist Protection   PART 2

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& Submit an online **Multiagency Referral Form**
If there's immediate risk, call 999

Health & Development	Emotional Health, Wellbeing & Behaviour	Education	Social & Neighbourhood	Family & Environment	Parent & Parenting
Factors contributing to harm or vulnerability: *Familial* • Serious concern regarding fabricated/ induced illness • Evidence of physical, emotional or sexual harm or neglect perpetrated by parents or adults connected to the family • Child/young person has experienced, or is at risk of experiencing, Female Genital Mutilation or other harmful practices, like breast ironing *Extra-familial* • Evidence of physical, emotional or sexual harm/exploitation or neglect perpetrated by peers or adults in the community (not connected to the family) • Disclosure of significant harm from child/young person which is caused by and/or takes place in an extra-familial context • Young person has been victim of knife or gun related injury	• Moderate to severe depression • Child/young person appears to participate in activity which causes imminent risk of harm to themselves or others and which suggest they have a limited range of behaviour choices *Factors contributing to harm or vulnerability:* *Familial* • Severe difficulties within family relationship, leading to significant impairment of functioning & wellbeing • Missing or trafficked child/young person primarily due to 'push' factors which come from the home environment *Extra-familial* • Child/young person appears to have been trafficked, including for county lines • Severe and/or complex relationship difficulties outside the home leading to significant impairment of functioning & wellbeing • Missing or trafficked child/young person primarily due to 'pull' factors outside the home	*Extra-familial* • Child/young person groomed into sexual or criminal exploitation as either victim or instigator at school/through school based networks • Child/young person exposed to physical or sexual violence at school or through school based networks	• Child/young person involved in Criminal Justice System • Child/young person insecure remand *Factors contributing to harm or vulnerability:* *Familial* • Suspected rape of a child/young person – perpetrated by a family member or someone connected to the family *Extra-familial* • Suspected rape of a child/ young person perpetrated by a family member or someone connected to the family • Child/young person being groomed into violent extremism • Child/young person being sexually exploited • Child/young person exploited for criminal purposes • Severe and/or complex relationship difficulties outside the home (i.e. peer group) leading to significant impairment of functioning and wellbeing • Child/young person involved in group sexual offence • Child/young person exposed to physical or sexual violence through peer networks	*Extra-familial* • Child/young person's sibling role models increase risk of criminal or sexual exploitation	• Any parent/carer who attempts suicide or self-harm • Parent causing significant harm to child/young person *Extra-familial* • Parent blames child/ young person for the harm they experience outside the home • Parent seems to collude with extra- familial harm, i.e. facilitating/supporting harmful peer activity through the provision of resources

Context/Location
Levels of Need Framework

	Behaviours & Indicators	Role of Adults	Systemic & Structural Factors
Tier 1 A location/ context receiving **Universal** services	• Young people, and where present, staff and or/other appropriate adults in a context report friendship groups to be supportive & age- appropriate • Young people state that they feel safe in this context • Young people report they are exposed to a range of ideas & opportunities to give them choices about their lives • Young people are aware of safeguarding responses • Young people & staff (if present) report that sexual behaviour is developmentally appropriate in context • Young people report that relationships are socially acceptable, consensual & reciprocal	• Engagement in a multi-agency approach to safeguarding • Appropriate guardianship & oversight is in place • Adults take an active & consistent approach to being community guardians & feel equipped & empowered to protect the location/ context • Young people feel confident to access multiple trusted adults who provide a protective role within the community • Schools consider safeguarding in both the school site & local neighbourhood • School has an active designated Mental Health lead	• School delivers effective PSHE and RSE • Safeguarding & referral policies (where relevant) include physical design of space & data to monitor trends • Placement decisions are made with relational, physical & psychological safety in mind • For businesses, licensing application & review process demonstrates attention to and compliance with safeguarding requirements
Tiers 2 & 3 A location/ context requiring **Community & Specialist Early Help**	• School has a high rate of fixed-term exclusions or managed moves • School has high levels of non-attendance and lateness • Young people report high levels of bullying, including online • Young people are exposed to the selling or use of illegal substances • Normalisation of criminal activity/ASB i.e. shoplifting or Public Order Offence in a group • Young people hold victim-blaming views • Location where there are multiple instances of personal theft • Location where young people are exposed to single instances of violence • Location where multiple young people congregate during missing episodes leading to harm • Location where young people are aware of others carrying weapons & feel compelled to do so themselves • Context in which there is underage & problematic alcohol consumption • Multiple young people can identify the context as one in which problematic behaviours occur &/or they feel unsafe • Peer group or context is one in which a number of young people repeatedly display problematic & harmful behaviours • Young people have experienced or displayed instances of sexually inappropriate behaviour & language, including sexual harassment • Young people & peers normalise & accept harm & inappropriate behaviour	• The behaviour displayed in the context, & the impact on young people, is primarily viewed as a behavioural/ criminal issue rather than a matter for safeguarding • Professionals have limited understanding of the level/ prevalence of risk due to inconsistent or unusable recording systems • Physical location of harmful incidents are not assessed or intervened in following incidents • Adults with responsibility only challenge individual behaviours or respond inconsistently when aware of them • Adult guardians normalise & accept harmful behaviours	• Schools respond to incidents in individualised or isolated manner • School or multi-agency professionals have limited understanding of the level/ prevalence of risk due to inconsistent or unusable recording systems • Policies & procedures which govern the context insufficiently guide the response required to address the issues • Placement decisions (i.e. custodial arrangements) place young people at risk • Context is one in which harmful incidents take place • Where relevant some design/structural elements enable safeguarding issues to go undetected, for example low lighting and overgrown bushes

Context/Location
Levels of Need Framework

	Behaviours & Indicators	Role of Adults	Procedural, Systemic and Structural Factors
Tier 4 A location/ context with **Complex & High Risk** needs	• School has a high rate of permanent exclusion over a long-term period • Instances of sexual abuse/violence within school or other context • Young people groomed into sexual or criminal exploitation as either victim or instigator at school, through school-based networks or other contexts • Non-consensual harmful sharing of sexual images • Multiple or a pattern of suicide and/or significant self-harm • Young people have been intentionally victimised by peers or adults using significant grooming, coercion or force • Peer bystanders in the context actively encourage or normalise highly problematic behaviours (i.e. victimisation, criminality) • Young people are exposed to physically violent, highly intrusive behaviours, which may at times appear sadistic in nature • Significant harm occurring due to young people avoiding the context/ school in order to stay safe • A peer group in which serious harmful sexual behaviour takes place • Peer recruitment of young people into criminal exploitation at school, in the local area or between students i.e. online • Young people commit crimes together causing them imminent or significant risk of harm • Young people involved in group sexual offences • Highly problematic normalisation of illegal substances • Context where a young person is murdered • Context in which there is underage and problematic alcohol consumption, alongside other risk factors, e.g. in the presence of adults of concern/at high risk times of day • Serious concerns about context where young people carry or are exposed to weapons e.g. knifes, guns, acid • Serious concerns about young people carrying & using drugs in this context • Location in which young people are being repeatedly coerced into criminal or sexual exploitation • Location where young people are exposed to adults who pose a risk of significant harm • Community disorder i.e. riots/uprising with implications for young people or particular locations of risk	• Staff/adults have normalised the behaviour being displayed or blamed those being harmed for what has happened • Adults with responsibility have failed to identify &/or challenge the behaviours or attitudes which put young people at risk of harm • Adults with responsibility hold victim-blaming views • Adults with responsibility are reluctant to engage with partner organisations to address the concerns in this context • Place managers have failed to identify &/or challenge the behaviours or attitudes which put young people at risk of harm • Adult bystanders in the community actively encourage or normalise the behaviour that has been displayed • There are no place managers with identified responsibility/ oversight of this context	• There is an absence of policies or procedures to guide practice responses to the context • Where safeguarding policies exist, they are not adhered to by those responsible for their implementation • There is an absence of effective behaviour policies • There is an absence of effective policies supporting emotional wellbeing, positive mental health & resilience