

Integrated Working Programme Guidance

Thresholds of Need

Chapter Five

Purpose of this chapter

This guidance has been written to support the introduction of Integrated Working in children's services.

The purpose of this chapter is to provide clarity about the levels of needs that children and young people may have.

The document set can be read as a whole or as stand-alone chapters, for example, it contains some quick guides for staff that are accomplished at filling in the CAF but just need a quick reminder. It also provides some Islington case studies that have been adapted to demonstrate the benefits of using the common assessment.

The Integrated Working Programme does not replace existing arrangements for safeguarding and child protection. If you are concerned that a child is at risk of abuse follow the local safeguarding procedures immediately.

This guidance will change to reflect the latest developments and policies. Please check that you have the latest version by visiting: <http://www.islington.gov.uk/integratedworking>.

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The CAF Needs Matrix

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Islington's CAF Needs Matrix

The CAF Needs Matrix is a set of descriptors intended to complement this guidance. Islington has four levels of need to assess both the seriousness of the need and the appropriate agencies that might work with families at each level of concern. These levels of need can be used to prioritise and develop a range of support and intervention strategies matched to a child or young person's needs and strengths.

It is unlikely that a child or young person will fit neatly in any particular level of need (1,2,3 or 4). Children's needs often change over time and may cross-different levels, i.e. high on one domain and low on another. The age of the child and protective factors that may enhance resilience also need to be taken into account.

It is important to consider the kind of outcomes we want to achieve for children / young people and then what kind of response might be needed to achieve them.

The aim of assessment through the CAF process is to determine:

- *If* a child or young person is in need
- Her/his *level* of needs
- Which needs must be met as a *priority* and
- Which is the most appropriate *service* to meet these needs

Practitioners need to consider the impact of needs and the child's resilience, which may be significant. For instance, there are some children with complex needs who may be progressing relatively well; their needs have been met through assessment and supported through intervention whereas there are some children living relatively 'straightforward' lives whose progress can sometimes be thrown completely off course by what, at first glance, might seem relatively minor or short-lived problems by comparison.

CHILD OR YOUNG PERSON'S DEVELOPMENTAL NEEDS – PHYSICAL HEALTH

including general health, physical development and speech, language and communications development

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Physically well • Adequate and nutritious diet • Adequate hygiene/clothing • Developmental checks/immunisations up to date • Regular dental and optical care • Health Appointments are kept • Developmental milestones appropriate • Appropriate height and weight • Healthy lifestyle • Sexual activity appropriate for age • Good state of mental health 	<ul style="list-style-type: none"> • Inadequate diet; e.g. no breakfast or unbalanced • Defaulting on immunisations/checks • Susceptible to persistent minor health problems or accidents, perhaps resulting in reduced attendance at school • Difficulties with gross and fine motor skills • Slow in reaching developmental milestones • Some difficulties in: social communication, language • Some difficulties in developing first words, sentences, vocabulary development, sentence construction. • Emergence of intelligible speech. • Minor concerns re diet, hygiene, clothing 	<ul style="list-style-type: none"> • Concerns about diet, hygiene, clothing • Child has some chronic/recurring health problems; not treated, or badly managed • Missing routine and non-routine health appointments • Weight gain becoming a cause of concern – below 3rd centile • Limited or restricted diet e.g. no breakfast; no lunch money • Concerns about developmental progress: e.g. overweight/underweight; enuresis • Developmental milestones are unlikely to be met • Persistent delay in quality and frequency of social interaction, language and understanding, expressive language development. 	<ul style="list-style-type: none"> • Severe/chronic health problems • Non functional hearing • Profound or severe visual impairment • Substantial and persistent difficulties in comparison with typical for age in following areas: social communication disorder, language understanding disorder, communication and expressive language, disordered speech and severe intelligibility problems – these may be specific or part of wider complex needs and development is frequently atypical rather than simply delayed • Need for augmentative / alternative communication system • Severe respiratory condition requiring oxygen daily • Needs daily medical support (e.g. tracheotomy)

CHILD OR YOUNG PERSON'S DEVELOPMENTAL NEEDS - PHYSICAL HEALTH

Including general health, physical development and speech, language and communications

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
	<ul style="list-style-type: none"> • Weight not increasing at rate expected, or obesity • Dental care not sufficient • Starting to default in health appointments • Glue ear • Mild respiratory condition (i.e. asthma) • Mild visual difficulties (e.g. squint) • Epilepsy (well controlled on oral medication) • Delay in achieving continence • Vulnerable to emotional problems, perhaps in response to life events such as parental separation e.g. seems unduly anxious, angry or defiant • Early sexual activity or awareness • Experimentation with tobacco, alcohol or illegal drugs • Acute illness or accidental injury • Frequent accidents or A and E attendance 	<ul style="list-style-type: none"> • Development of intelligible speech due to atypical development or physical reasons e.g. lack of fluency or stammering • Dental decay • Smokes / other regular substance misuse • 'Unsafe' sexual activity • Learning significantly affected by health problems • Functional hearing loss, requiring hearing aids • Visual impairment with correction • Chronic respiratory condition requiring daily medication/overnight oxygen • Epilepsy (not controlled on oral medication) • Incontinence, soiling, constipation, not responsive to treatment • Significant disability • Chronic illness requiring medication in school, specialist equipment or periods of school absence. 	<ul style="list-style-type: none"> • Epilepsy (frequent and prolonged fits despite oral medication) • Chronic illness requiring prolonged absence from school, high level nursing or therapy input • Terminal illness • Development as measured by weight and height both under the 0.4th centile • Incontinence and toileting problem requiring the use of pads • Developmental milestones unlikely to be met • Failure to thrive • Lack of food may be linked with neglect • Refusing medical care endangering life/development • Seriously obese • Significant dental decay • Persistent and high risk substance misuse • Dangerous sexual activity and/or early teenage pregnancy • Sexual exploitation • Sexual abuse • Self-harming • Non-accidental injury

CHILD OR YOUNG PERSON'S DEVELOPMENTAL NEEDS

LEARNING Including understanding, reasoning and problem solving

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Acquires a wide range of skills and interests • Full access to the mainstream curriculum without additional support • Adequate access to learning environments at an age appropriate level • Attends early years provision or school in accordance with statutory entitlement • Is supported by parents or carers to develop an interests in learning • Achieving average at Foundation and Key Stages 1-4 	<ul style="list-style-type: none"> • Ongoing difficulties with acquisition of skills within Foundation Stage • Lower levels of attainment and progress in all areas of development and learning compared to peers in Key Stages 1-4. • Mild learning or behaviour difficulties emerging • Difficulties transferring learning to new situations • Have some identified specific or general learning needs that place him/ her on 'School Action' level of the Code of Practice for SEN. • Requires Wave 1 of the National Strategy – tailored teaching in classes. 	<ul style="list-style-type: none"> • Persistent difficulties with acquisition of skills within Foundation Stage, despite additional and differentiated intervention • Learning or development continues to be delayed in Key Stages 1-4 despite additional and differentiated intervention. • Personalised Learning Plans are likely to be in place (e.g. IEPs). • Moderate learning difficulties emerging • Learning or behavioural needs are identified and may be at "School Action Plus" or have a statement of SEN. • Requires Wave 2 of the National Strategy – Wave 1 plus additional, time-limited, tailored intervention support programmes. 	<ul style="list-style-type: none"> • Significantly delayed acquisition of skills within the Foundation Stage • Severe and complex learning difficulties and child has a Statement of SEN. • Requires Wave 3 of the National Strategy – Wave 1 plus increasing individualised programmes.

CHILD OR YOUNG PERSON'S DEVELOPMENTAL NEEDS

PARTICIPATION, PROGRESS AND ASPIRATIONS

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Enjoys and participates in learning activities • Has experiences of success and achievement • Good quality links between home and school • Planned progression and aspirations beyond statutory education 	<ul style="list-style-type: none"> • Poor punctuality/pattern of regular nursery/school absences • Not always engaged in play/learning, e.g. poor concentration, low motivation & interest • Lack of basic play equipment at home • Organisational difficulties • Not thought to be reaching his/her educational potential • Home/Nursery or Home/School links not well established • Not supported to make choices about their education or able to make the use of support 	<ul style="list-style-type: none"> • Poor nursery/school attendance and punctuality • Poor home/nursery/school link • Some fixed-term exclusions • Very limited interests/skills displayed • Is not attending school (nor by agreement being home educated) • Disability has moderate impact on the ability to participate, progress and have aspirations • Limited participation of young person in education, employment or training 	<ul style="list-style-type: none"> • Has few if any achievements • Permanently excluded from early years provision or school or at risk of permanent exclusion • Is of statutory school age but has no school place • Has no access to leisure activities • Disability has a significant impact on his or her ability to participate, progress and have aspirations. • No or acrimonious home/nursery or home/school link • Is not attending education, employment, or training post 16

CHILD OR YOUNG PERSON'S DEVELOPMENTAL NEEDS

EMOTIONAL AND SOCIAL DEVELOPMENT

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Demonstrates appropriate responses in feelings and actions • Secure early attachments are formed • Able to adapt to change • Able to demonstrate empathy. • Enjoys positive relationships with peers • Reacts appropriately to different social settings • Understands own strengths and weaknesses 	<ul style="list-style-type: none"> • Some difficulties with family relationships • Some difficulties with peer group relationships • Some difficulties with adults • Some evidence of inappropriate responses and actions • Starting to show difficulties expressing empathy • Not very self - aware • Has experienced significant loss / trauma 	<ul style="list-style-type: none"> • Finds it difficult to cope with or express emotions • Significant difficulties with managing change • Is having significant difficulties dealing with experiences of loss / trauma • Family relationships are a cause for concern • Relationships with adults are poor • Poor peer relationships / difficulty sustaining relationships • Appears regularly anxious, stressed or phobic • Mental health issues emerging e.g. conduct disorder; ADHD; anxiety; depression; eating disorder; self-harming 	<ul style="list-style-type: none"> • Severe emotional/behavioural challenges • Unable to connect cause and effect of own actions. Unable to display empathy • Is socially isolated • High conflict relationships with others (peers / adults / family) • Suffers from periods of depression • Puts self or others in danger e.g. missing from home • Self-harming or suicide attempts • Acute mental health problems e.g. severe depression; threat of suicide; psychotic episode • Requires institutional care to safeguard their welfare (e.g. psychiatric in-patient).

CHILD OR YOUNG PERSON'S DEVELOPMENTAL NEEDS

BEHAVIOURAL DEVELOPMENT

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Able to take age appropriate responsibility for own behaviour • Responds appropriately to boundaries and constructive guidance • Interacts positively with peers • Able to accept consequences • Able to make reparation 	<ul style="list-style-type: none"> • Not always able to understand how own actions impact on others • Finds accepting responsibility for own actions and responses difficult • Responds inappropriately to boundaries and constructive guidance • Finds positive interaction difficult with peers • Is attracted to negative role models • Concerns about the frequency of behaviour-related incidents 	<ul style="list-style-type: none"> • Disruptive/challenging behaviour at school, home or in the neighbourhood • Suspected or diagnosed disorders which may result in difficulties in behaviour development and the development of appropriate social skills • Does not accept responsibility for own actions; finds it hard to understand how own actions impact on others or learn from consequences • Starting to commit offences / re-offend • Interacts negatively with peers • Is withdrawn, isolated / unwilling to engage • Finds it difficult to engage with support offered 	<ul style="list-style-type: none"> • Severe emotional/behavioural challenges • Unable to connect cause and effect of own actions Unable to display empathy • Is socially isolated • High conflict relationships with others (peers / adults / family) • Suffers from periods of depression • Puts self or others in danger e.g. missing from home • Self-harming or suicide attempts • Acute mental health problems e.g. severe depression; threat of suicide; psychotic episode • Requires institutional care to safeguard their welfare (e.g. psychiatric in-patient).

CHILD OR YOUNG PERSON'S DEVELOPMENTAL NEEDS

IDENTITY Including self-esteem and self-image

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Positive sense of self and abilities • Demonstrates a sense of belonging and acceptance by others • Generally positive and wants to accomplish things • Confident in social situations, but can discriminate between safe and unsafe contacts 	<ul style="list-style-type: none"> • Some insecurities around identity expressed • May experience bullying around difference • May show signs of bullying behaviour • Can be over friendly or withdrawn with strangers 	<ul style="list-style-type: none"> • Is subject to persistent discrimination, e.g. racial, sexual or due to disabilities • Demonstrates significantly low self-esteem/confidence in a range of situations • May be a victim of crime • May not discriminate effectively with strangers • Presentation significantly impacts on all relationships • Lacks confidence or is watchful or wary of carers/people • May be aggressive in behaviour/appearance • May be bullying others 	<ul style="list-style-type: none"> • Experiences persistent discrimination, e.g. on the basis of ethnicity, sexual orientation or disability; internalised and reflected in poor self-image • Socially isolated and lacking appropriate role models • Alienates self from others • Rejection or taunting from peers • Lack of confidence is incapacitating • Persistent bullying of others • Victim of crime; may fear persecution by others • Is unable to understand concepts of risk leading to risk of harm to self.

CHILD OR YOUNG PERSON'S DEVELOPMENTAL NEEDS

FAMILY AND SOCIAL RELATIONSHIPS

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Stable and affectionate relationships with caregivers • Able to socialise appropriately • Good relationships with siblings • Positive relationships with peers 	<ul style="list-style-type: none"> • Some inconsistencies in, or lack of support from, relationships with family and friends • Lack of positive role models • Has some difficulties sustaining relationships • Unresolved issues arising from parents divorce, step parenting, or loss of parent or carer • Appears not to talk in some environments (in the absence of a medical diagnosis) 	<ul style="list-style-type: none"> • Relationships with parents/carers characterised by inconsistencies • Has lack of positive role models • Appears to have undifferentiated attachments • Misses school or leisure activities • Diagnosis of selective mutism/ social phobia. • Peer group characterised by anti-social behaviour • Involved in conflicts with peers/siblings • Lack of friends/social network 	<ul style="list-style-type: none"> • Relationships with family all experienced as negative ('low warmth, high criticism') • Complete rejection by a carer, parent; family no longer want to care for - or have abandoned - child/young person • Family breakdown related in some way to child/yp's behavioural difficulties • Suffering or at risk of suffering physical, emotional or sexual abuse or neglect • Child/young person is the main carer for family member

CHILD OR YOUNG PERSON'S DEVELOPMENTAL NEEDS

SOCIAL PRESENTATION

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Appropriate dress for different settings • Good level of personal hygiene 	<ul style="list-style-type: none"> • Can be over friendly or withdrawn with strangers • Personal hygiene starting to be a problem • May be provocative in behaviour/appearance e.g. inappropriately dressed for school or not age-appropriate; make-up 	<ul style="list-style-type: none"> • Clothing is regularly unwashed or ill-fitting • Hygiene problems are leading to alienation from peers • Is persistently provocative in behaviour/appearance • Regular hygiene problems 	<ul style="list-style-type: none"> • Very poor and inappropriate self-presentation • Physical or learning difficulties significantly impact on social presentation. • Issues of substance misuse or mental ill health significantly impact on social presentation

CHILD OR YOUNG PERSON'S DEVELOPMENTAL NEEDS

SELF-CARE SKILLS AND INDEPENDENCE

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<p>Growing level of competencies in practical and emotional skills, such as feeding, dressing, developing independence and independent living skills</p>	<ul style="list-style-type: none"> • Disability limits amount of self-care possible • Difficulties with gross/fine motor skills to support self-care skills development • Not always adequate self-care, e.g. poor hygiene • Slow to develop age-appropriate self-care skills 	<ul style="list-style-type: none"> • Disability prevents self-care in a significant range of tasks • Specific co-ordination and perceptual difficulties, which impacts on functioning at expected level of development in school, play, leisure and self-care • Poor self-care for age, resulting in hygiene problems • Takes little or no responsibility for self-care tasks compared with peers • Lacks a sense of safety and often puts him/herself in danger 	<ul style="list-style-type: none"> • Complex physical difficulties that have a substantial impact on the ability to function in all aspects of daily life • Issues of substance misuse or mental ill health prevent child/young person from exercising appropriate self-care skills

PARENTS AND CARERS

BASIC CARE AND ENSURING SAFETY AND PROTECTION

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Provides for physical needs, e.g. food, drink, appropriate clothing, medical and dental care • Protects from danger or significant harm, in the home and elsewhere 	<ul style="list-style-type: none"> • Basic care is not provided consistently • Haphazard use of safety equipment e.g. fireguards • Parent/carer engagement with universal services are poor • Parent/carer requires advice on parenting issues • Emerging concerns around child's basic needs being met • Inappropriate child care arrangements and/or too many carers • May experience some exposure to dangerous situations in the home or community • Inappropriate frequent visits to doctor/hospital • Parent/carer stresses starting to affect ability to ensure safety; insufficient awareness of dangers to child/young person • Parents have experienced significant loss or trauma • Teenage parents 	<ul style="list-style-type: none"> • Parent/carer is struggling to provide adequate care • Parent has a disability, which affects their ability to parent effectively. • Parents have found it difficult to care for previous children • Inappropriate care arrangements • Instability and domestic violence in the home • Parent's mental health problems or substance misuse adversely affects care of child/young person • Non-compliance of parents/carers with services • Experiencing unsafe situations • Child/young person caring for siblings/parent 	<ul style="list-style-type: none"> • Parents/carers unable to provide 'good enough' parenting that is adequate and safe; supervision is hazardous • Refusal to consent to specific medical/health care interventions when the child's health may be at significant risk • Parent/carer's mental health problems or substance misuse significantly and persistently affect care of child/yp • Parents/carers were unable to care for previous children • Parents/carers involved in crime • Parents unable to restrict access to home by dangerous adults • Parents/carers own needs mean they are unlikely or unable to keep child/young person safe and/or promote their welfare • Chronic and serious domestic violence directly or indirectly involving child/young person • Unexplained injuries

PARENTS AND CARERS

EMOTIONAL WARMTH, STABILITY AND SOCIAL DEVELOPMENT

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Shows warm regard, praise and encouragement • Ensures that secure attachments are not disrupted • Provides consistency of emotional warmth over time 	<ul style="list-style-type: none"> • Inconsistent responses to child/young person by parent/carer • Child/young person not able to develop other positive relationships • Child/young person's important relationships with family members not promoted • Parent is experiencing difficulties in their relationship with another sibling 	<ul style="list-style-type: none"> • Provide erratic or inconsistent care • Child or Young Person has episodes of poor quality care • Parental/carer instability/emotional needs affects capacity to nurture • Parental relationships are strained affecting the child/yp • Sibling is beyond parental control • Child/young people has no other positive relationships • Child/young people has multiple carers; may have no significant relationship to any of them 	<ul style="list-style-type: none"> • Family life assessed as persistently chaotic • Parents/carers inconsistent, highly critical, rejecting or apathetic towards child/yp • Child/yp beyond parental/carers' control • Parent's own emotional experiences significantly impacting on their ability to meet child/yp's needs

PARENTS AND CARERS

GUIDANCE, BOUNDARIES AND STIMULATION

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Provides guidance so that child/young person can develop an appropriate internal model of values and conscience • Child/young person accesses leisure facilities as appropriate to age and interests • Facilitates cognitive development through interaction and play • Enables child/young person to experience success 	<ul style="list-style-type: none"> • Parent/carer offers inconsistent boundaries • Lack of routine in the home • Child/young person spends considerable time alone, e.g. watching television • Child/young person is not often exposed to new experiences; has limited access to leisure activities • Child/young person can behave in an anti-social way in the neighbourhood, e.g. petty crime • History of parenting difficulties with siblings e.g. exclusion from school, involvement in substance misuse, criminal activities. 	<ul style="list-style-type: none"> • Erratic or inadequate guidance provided • Parents are unable to provide stimulation to support effective emotional behavioural development. • Parents struggle/refuse to set effective boundaries e.g. too loose/tight • Child/young person behaves in anti-social way in the neighbourhood • Parent/carer does not offer a good role model, e.g. by behaving in an anti-social way • Parental relationships with professionals are characterised by conflict to which the child is exposed • Child/young person not receiving positive stimulation, with lack of new experiences or activities • Child/young person under undue parental pressure to achieve/aspire 	<ul style="list-style-type: none"> • Family life assessed as persistently chaotic • Parents/carers inconsistent, highly critical, rejecting or apathetic towards child/young person • Child/young person beyond parental/carers' control • Parent's own emotional experiences significantly impacting on their ability to meet child/young person's needs

PARENTS AND CARERS

STABILITY

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Ensures that secure attachments are not disrupted • Provides access to extended family network for periods of time if/when when parents or carers have to be away • Provides consistency of emotional warmth over time 	<ul style="list-style-type: none"> • Key relationships with family members not always kept up • Child or young person may have different carers • Loss of a parent 	<ul style="list-style-type: none"> • Parents are socially isolated • Child/young person has multiple carers • Sibling has been or is currently 'Looked After' by Islington Council • Child/young person has been 'Looked After' by Islington Council • Young Person age 16+ is at risk of homelessness 	<ul style="list-style-type: none"> • Child/young person is at significant risk of becoming 'Looked After' by Islington Council. • Child/young person has no-one to care for him/her • Child/young person is 'Looked After' by Islington Council

FAMILY AND ENVIRONMENTAL FACTORS

HOUSING, EMPLOYMENT AND FINANCIAL CONSIDERATIONS

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Accommodation has basic amenities and appropriate facilities to meet the family's needs • Parents and carers are able to manage employment arrangements or arrangements for ensuring provision of any benefits during periods of unemployment • Parents are able to manage the stress associated with periods of unemployment (planned or unplanned) • Resources are appropriately deployed to meet the needs of the whole family. 	<ul style="list-style-type: none"> • Family are overcrowded or living in temporary accommodation • Difficulties over specific facilities in the home (e.g. adaptations required to meet the needs of a disabled family member) • Family is seeking asylum and requires advice or information to secure housing, employment or financial stability • Parents or carers are experiencing periods of stress due to housing, employment or finance • Parents or carers require some support to manage debt and are seeking this. • Parents or carers require some support to seek employment and are seeking this 	<ul style="list-style-type: none"> • Overcrowding is having a significant adverse impact on the child's development • Tenancy is in state of disrepair and may be unsafe for a child to live in • Children are experiencing frequent moves • Parents or carers have been assessed as intentionally homeless • Stress of parents or carers due to issues of housing, employment or finance is having an adverse impact on any children in the household • Rent arrears are putting the family at risk of homelessness • Debts are beginning to impact on the parent/carer's ability to ensure the basic needs of the children are met • Parents or Carers are not seeking support to address issues of housing, employment or finance 	<ul style="list-style-type: none"> • Child/young person is at significant risk of becoming 'Looked After' by Islington Council. • Child/young person has no-one to care for him/her • Child/young person is 'Looked After' by Islington Council

FAMILY AND ENVIRONMENTAL FACTORS
FAMILY HISTORY, FUNCTIONING AND WELL-BEING

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Good relationships within family, including when parents are separated • Few significant changes in composition 	<ul style="list-style-type: none"> • Parents/carers have some conflicts or difficulties that can involve the child/young person • Emerging relationship difficulties between siblings • 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 	<ul style="list-style-type: none"> • Incidents of domestic violence between parents/carers • Acrimonious divorce/separation • Family have serious physical and mental health difficulties • Persistent relationship difficulties between siblings 	<ul style="list-style-type: none"> • Significant parental/carer discord and persistent domestic violence • Family characterised by conflict and serious chronic relationship difficulties • History of rejection • No effective support from extended family • Destructive/unhelpful involvement from extended family

FAMILY AND ENVIRONMENTAL FACTORS

WIDER FAMILY

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
<ul style="list-style-type: none"> • Sense of larger familial network and good friendships outside of the family unit • Family is integrated into the community • Good social and friendship networks exist for children as well as adults in the family 	<ul style="list-style-type: none"> • Limited support from friends and family • Child looked after by many different adults • Family may be new to the area • Emerging difficulties related to the family's relationships within the local community 	<ul style="list-style-type: none"> • Family is socially isolated • Family has poor relationship with extended family or little communication • No effective support from extended family or friends • Acrimonious relationships within the local community 	<ul style="list-style-type: none"> • Destructive/unhelpful involvement from extended family • Community are hostile to the family

Islington's Integrated Working Programme

The Integrated Working team sits within the Organisational Development Team, which is led by Maggie Buckell, Assistant Director, Health and Organisational Development.

Integrated Working Programme Management Team

Maggie Buckell: Assistant Director, Health and Organisational Development

Phil Coombs: Integrated Working Programme Manager (phil.coombs@islington.gov.uk)

James Chamberlain: Programme Development Officer (james.chamberlain@islington.gov.uk)

Integrated Working Area Champions (IWACs)

Islington has a team of Integrated Working Area Champions (IWACs) who will support practitioners with completing common assessments, arranging Team around the Child meetings and other elements of Integrated Working.

IWACs are allocated on an area basis. Each Area Children's Network has a designated IWAC. To arrange a visit from an Integrated Working Area Champion please email IWP@islington.gov.uk.

Integrated Working Programme Board

Chair: David Worlock (Assistant Director, Children's Social Care)

For more information

For more information, please visit our website or contact the programme management team on IWP@islington.gov.uk

<http://www.islington.gov.uk/integratedworking>

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