Brighton & Hove BHSCP Safeguarding Children Partnership



Brighton & Hove Family Help

The Right Support at the Right Time

September 2026

Brighton & Hove City Council

NHS Surrey and Sussex

Sussex Police

Contents

1. A Shared Family Help & Safeguarding Vision 3
Principles 3
2. Why this is not called a Threshold Document 4
3. BHSCP Relationship Based Practice Model 6
Context 7
Purpose 8
4. The Right Support at the Right Time 8
What support should a child be getting? Things for consideration: 9
Guide to the Levels and Response 10
5. Risks & Strengths 12
Professional Difference Statement: 12
6. Further Information 14

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1. A Shared Family Help & Safeguarding Vision

As Brighton and Hove Safeguarding Children Partnership (BHSCP) our vision is for a healthy city where children thrive. We strive for a better future for children and families.

Our goal is to keep children safe, for no child [1]or family to be left behind and to ensure children experience high quality, inclusive and accessible services in the city.

Nothing is more important than children's wellbeing. Every child deserves to grow up in a safe, stable, and loving home. Children who need help and protection deserve high quality and effective support. This requires individuals, agencies, and organisations to be clear about their own and each other's roles and responsibilities, and how they work together.

We aim to oversee that the agencies in the city provide the right support at the right time to families.

Our shared vision for Brighton & Hove is to be a child friendly city in which children and young people are safe from harm in their families, their communities and their neighbourhoods.

We want Brighton & Hove to be the best city for children to grow up in.

All our work is underpinned by a consistent and co-ordinated approach to safeguarding as well as being collectively committed to a child and family centred focus on improving outcomes across the city.

Children, their wellbeing, protection and the promotion of their best interests are at the heart of everything BHSCP does.

This means BHSCP advocates and scrutinises that:

a) Children and families anywhere in Brighton & Hove can expect to receive timely Family Help and Safeguarding services delivered in partnership, with a focus on the child's needs and aiming for consistently good outcomes across the city.

b) Children and families will be listened to, and their views taken seriously both when delivering Family Help, safeguarding services. Their views will be heard when collectively thinking about how we can improve those services, including those that we commission.

c) Practitioners will "Think Family" and managers and commissioners should adopt a 'whole system approach' to planning services.

Principles

BHSCP-Anti-Racist-Practice-Statement-Sept-2025
BHSCP-Poverty-Aware-Practice-Statement-2024
How we make decisions - Brighton & Hove Family Help - Right Support at the Right Time

[1] BHSCP uses the term "children" to describe anyone under 18, and children and young people with SEND up to age 25 where SEND legislation and support arrangements continue to apply. This reflects our commitment to child-centred practice and avoids language that may unintentionally adultify children.

2. Why this is not called a Threshold Document

Working Together to Safeguard Children (2026) states:

'Safeguarding partners should agree with their relevant agencies the criteria for different levels of assessment to inform which services are commissioned and delivered in their local area and ensure that the right help is given to children at the right time. This should include services for children who have suffered or are likely to suffer abuse, neglect, and exploitation whether from within or outside the home. These considerations should include how safeguarding partners and relevant agencies address the support and protection needs of children living in residential, kinship or foster care. This should also include a range of appropriate services for disabled children and be aligned with the short breaks services statement.

Safeguarding partners should publish a threshold document, which sets out the local criteria for action in a way that is transparent, evidence-based, accessible, and easily understood. This should include:

• the process for accessing universal services and community-based early help, which may include an assessment

• the criteria, including the level of need, for when a child should be referred to Family Help, which covers non-statutory and statutory support and services provided through:

- *targeted early help under sections 10 and 11 of the Children Act 2004. This support is provided to children and families who are identified by practitioners to have multiple and/or complex needs, requiring a specialist and/or multi-disciplinary/agency response, where statutory support or intervention is not required*
- *statutory support, including assessments, delivered under section 17 of the Children Act 1989 (children in need, including how this applies for disabled children)*

• the criteria, including the level of need, for when a child should be referred to local authority children's social care for assessment and for statutory services under:

- *section 47 of the Children Act 1989 (reasonable cause to suspect a child is suffering or likely to suffer significant harm)*
- *section 31 of the Children Act 1989 (care and supervision orders)*
- *section 20 of the Children Act 1989 (duty to accommodate a child)*

• clear procedures and processes relating to:

- *the abuse, neglect, and exploitation of children inside and outside the home, including online*
- *looked after children*
- *children managed within the youth secure estate*
- *disabled children*[2]

BHSCP recognises this statutory need however believes language is important in describing how we deliver services to children. The ethos and aim is always, the right support at the right time.

Therefore, we do not call our Family Help Document a 'threshold' as we believe this is too prescriptive of when a child or family's needs meet a criterion of a Family Help assessment under Section 17 of the Children's Act. We aim to scaffold support across our Family Help

[2] Working Together to Safeguard Children 2026

services, including Social Work oversight, to provide continuity for families from the professional network around them.

Where safeguarding situations are complex and require a clear Social Work assessment or need to be considered under Section 47 of the Children's Act a Social Work assessment will always take place. The close working of Family Help services, Health, Police and Social Work is essential and is covered through the Family Help Strategy.

Family Help - Relationship-based Model of Practice and Vision

BHSCP believes that continual assessment supported by our Relationship-Based Model of Practice is the best way of identifying and responding to the needs of children and young people. A rigid check list and threshold approach is mechanistic and identifies weaknesses. It doesn't take into consideration the complexity of individual situations and can overlook strengths.
When a child's needs cannot be met by Universal Services alone, quality professional relationships strengthen and improve decision making and joint working to provide the right help at the right time for families.

This is better than the use of predetermined thresholds to define service responses as:

- Thresholds cannot take account of the complexities of individual children's lives.
- They give a false sense of certainty based on limited rule-based assessments.
- They are based on unrealistic models of decision-making.
- They can produce incentives to pass on responsibility by raising or lowering thresholds or tailoring referrals.

Our integrated multi agency Front Door For Families is the gateway for Family Help services. This ensures a single point of access to support that shares relevant knowledge and analysis of a child or family's needs. The right support at the right time.

BHSCP have not named our Family Help document a threshold document, rather an agreed Relationship Based Practice approach to ensure that the right help is provided at the right time.

The BHSCP monitors and will continue to monitor this approach to ensure that responses are timely and appropriate. It is also scrutinised through Ofsted inspection processes such as ILACS and JTAI.





3. BHSCP Relationship Based Practice Model

Family Help - Relationship-based Model of Practice and Vision

When working with families in Brighton & Hove the BHSCP promote **Relationship-Based Practice** as our Model of Practice and the way we provide Family Help. This informs all aspects of practice and assessing, implementing and evaluating what we do. Therefore, all our work, including Family Help, is underpinned with the following BHSCP Practice Principles:

- **Always working WITH** - creating a context of high support and high challenge with children, young people and families and each other.
- **Relationship-based** - assuming that engagement and best outcomes are achieved through trusting and respectful relationships with each other, taking responsibility for creating and maintaining effective relationships at all levels.
- **Family Focused** - putting the family at the heart of everything we do; recognising and enabling the networks and skills within the family; and wherever possible empowering families to determine the direction of care and intervention.
- **Timely Support**- engaging families in appropriate and effective support immediately when an issue is identified and maintaining a persistent offer to engage in support.
- **One family, one lead worker, one plan** - wherever possible working to reduce numbers of practitioners involved with a single family and defining one lead practitioner to co-ordinate a single comprehensive family plan. Where agencies are also involved with the adults in the family, a **'Think Family'** approach should be adopted.
- **Systemic, formulation driven and evidenced based** - all plans consider the whole system around a family, information is effectively analysed, and plans are created using the best available evidence.
- **Transparent** - children, young people and families are as fully informed as possible and are always involved in and understand decisions that concern themselves and their families.

- **Strength focussed** - all interactions, interventions and plans are seeking, affirming and utilising existing knowledge, skills and abilities; and adopt an evidence-based approach to assessing needs and managing risk.
- **Recognising that engagement with education is a protective factor** - seeking to maximise attendance, attainment and achievement.
- **Accountability, evaluation and sustainability** - always working to continually understand a situation, improve plans and find ways to enable independence and reduce reliability on services.

In Brighton & Hove the **Relationship-Based Practice Model** in providing family help thrives upon staff from across all agencies sharing in the core values, knowledge, skills and abilities to engage well with children and families by building relationships which are based upon the strengths within a family. Support needs to be focussed on solutions and has to be able to motivate to achieve positive change by being aware of risk and protective factors.

Context

Working Together to Safeguard Children 2026[3]**,** places a statutory responsibility on all partner agencies to focus on children, young people and families as the very centre of what we do and work together to identify children who need timely help to reach their developmental milestones, experience emotional well-being and to be safe in their home, school and community.

- There is national evidence that helping families as early as possible and providing the right support at the right time can stop problems getting worse and help families lead happier and healthier lives. Early Family Help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years. Effective early Family Help relies upon local organisations and agencies working together to:

1. Identify children and families who would benefit from Family Help
2. Undertake an assessment of the need for Family Help
3. Provide targeted family help services to address the assessed needs of a child and their family which focuses on activity to improve the outcomes for the child

- For families with multiple problems an integrated "whole family" approach that recognises and deals with their interconnected problems is most effective. Whole family working means transforming services from a number of unconnected professionals with their own assessments and measures to integrated, family-focussed, outcome-based working. Whole family working improves outcomes for families and means that the right support is delivered to children and their families to keep them safe and well at the right time. Whole family working means:

1. A single assessment and family outcomes plan that takes account of the experiences, needs and voices of every family member.
2. Have one lead worker for the family, recognised as such by the family and other professionals. The lead worker coordinates the family outcomes plan and the work of other involved professionals.

[3] Working together to safeguard children 2026

Purpose

"We all want all our children and families to do well. We support families through the challenging times and work alongside them to build their capacity to cope with life's difficulties in order to thrive."

'Safeguarding children and young people is everyone's responsibility; everyone who comes into contact with children and families has a role to play'

The purpose of this document is to provide guidance to practitioners as to how help should be offered in the first instance, with a focus on families and children being encouraged to find their own solutions, within the context of our work.

Practitioners should make every contact count, and they should know when and how to formally assess and plan for children, when they should access further help and support from other partners and when to consider specialist services and escalation of support.

The BHSCP ask that all services and agencies sign up to the principles and common purpose outlined in this document. We will know we are making a difference if children and families are enabled to build upon their strengths, find solutions to their needs and access the universal support available to all children and their families.

Agencies and services need to be alert to certain additional vulnerabilities that may increase the need for a whole family approach.



4. The Right Support at the Right Time

The three levels of need are summarised below. The organisational model of Universal, Family Help and Child Protection has been developed to illustrate how all children and families will continue to access Universal and Family Help services, even when in need of Child Protection support to address acute and chronic needs.

It is important to note that this document aims to ensure our response to families and children is needs led and not service driven. The levels of need are aligned to 'Indicators' described later in this document.

The BHSCP believes that the needs of children and their families do not always easily fit into a category or a tick box. A child's circumstances can change quickly, and over time, and a child may move across the levels of need dependent on a number of different variables that are present at any one time.

Making a judgement about level of need is not an exact science. This document seeks to provide a degree of clarity and guidance to support a consistent understanding by professionals from across services and serves to let parents, carers and children know what to expect. The key to identifying a child and family's level of need must always be an evidence-based judgment. We are also clear that it is vital to consider what professional network and relationships are important for the family. It maybe that we need to scaffold existing professional networks to strengthen the support already in place rather than a simplistic threshold decision of moving into another service or assessment. This is about being primarily led by the needs of the child.

An assessment provides the evidence that the level of need for the child is understood. Brighton & Hove Family Help and Social Work services uses a Strengthening Families model of assessment under the Relationship-Based Model of Practice.

Effective and timely assessment enables practitioners and families alike, to understand the type of support that each child and their family needs.

Our aim is to provide support and to develop resilience amongst our families and children proportionate to the assessed needs. An assessment that is updated when needs change is key to ensuring an appropriate and timely response as circumstances change.

There may be circumstances where an indicator for Social Work assessment is present but due to the presence of protective factors, such as a willingness to engage in support, it may be most appropriate for the child to receive services through Family Help from practitioners where relationships are already established. This can be scaffolded with Social Work support.

What support should a child be getting? Things for consideration

- What are the individual needs and views of each child in the family?
- What is the evidence of impact on the child, in relation to their health and development or harm/likely harm?
- What are the risks to the child if things don't change?
- What is the likelihood of this happening and what would be the level of severity?
- What have you and/or others done to try to help?

When making judgments about level of need and determining whether contact should be made with the Front Door For Families, professionals should seek guidance and support from their supervisor or agency lead for safeguarding.

Contact with the Front Door For Families should be via on-line form Refer a child or family to Front Door for Families (brighton-hove.gov.uk) and articulates the concerns and provides information to support a referral being made.

Where there is evidence of harm identified and likely significant harm, the Front Door For Families should be contacted

If you need assistance in an emergency outside office hours, at the weekend or on a Bank Holiday, contact the emergency services. The Social Work **Out of Hours Emergency Duty Service is also available on 01273 335905.**

Guide to the Levels and Response

Level 1: Universal Services

Description and Response: Most children in Brighton & Hove have their needs met by their parents and family members, where they are protected and growing up healthy. Children and families can access services and early support through universal services; a Midwife, Health Visitor, School Nurse, Best Start Family Hubs, GP, and Schools are all available within the local community and a lot of support is available online.
All children and families may need extra support and guidance at some point in their lives. Services are aimed at supporting children and families to find their own solutions to need and services are likely to signpost them to help within their local community.

Assessment: At this level services may use their own processes to help tailor provision.

Level 2: Family Help

Description & Response: Children and families can sometimes need more structured and focused help, sometimes through one practitioner or agency in order to prevent needs from escalating. The practitioner or agency may be able to provide the help that is needed or support the family to identify where they can access the right help. For example, access to benefits, debt advice, health issues or parenting strategies etc.

Children and families may also require a more structured plan of support in order to co-ordinate help needed, in order that agreed outcomes can be reached. It might be that support from a single agency is not sufficient to meet needs. The type and the number of challenges faced by a child or family might be preventing them from achieving and maintaining a reasonable standard of health or development but the concerns about the risk factors does not at this point need a child protection intervention.

Definition: Children in Need are defined '…under the CA 1989 as a child who is unlikely to achieve or maintain a satisfactory level of health or development, without provision of services; or a disabled child'. In these cases, consideration should be made for a lead practitioner to complete a Strengthening Families Assessment under s.17 of the Children Act 1989 lead practitioners can be social work qualified or differently qualified practitioners. For example, when established professional relationships are in place that can meet the needs of the child. Working together to safeguard children 2026 and Stable Homes, Built on Love - GOV.UK (www.gov.uk) are clear that it is important to consider change in how services for Children in Need are provided.

Assessment: In cases where a child's health and development are being significantly impaired a social worker would complete a Strengthening Families Assessment under **s.17 of the Children Act 1989**; assessments are multi-agency. This level of support may require a proportionate assessment and planning process, but services should use the Family Help guidance and assessment to help them understand if support is working to reduce need. In more complex circumstances a Family Help Strengthening Families Assessment should be undertaken to understand need and to co-ordinate work across agencies to best address this need. The assessment should trigger a Family Help Plan that is co-ordinated by a lead

professional who takes responsibility in getting the professional group together to review with the family. In situations where Neglect is a feature the NSPCC Graded Care Profile 2 should be used to help understand and analyse this and the impact on children. This Graded Care Profile 2 is designed to follow the family so should be shared between services to aid understanding and the need for support. The BHSCP has training on Neglect and the NSPCC Graded Care Profile 2 available for all those working with children. In level 2 an assessment and will be led by lead practitioner; this can be a social worker or differently qualified practitioner.

Level 3: Specialist Services to address Acute & Chronic Need

Description: A small minority of children and families will need specialist help and support that is led by children's social work or another specialist service (e.g. Tier 3 CAMHS) for those who are most vulnerable, where Family Help Plans have been tried but not able to make sufficient, tangible difference and children are at risk of long-term impairment to their health and development and where they are at risk of significant harm or have suffered significant harm.

Definition: Child Protection. Significant Harm is the key that justifies intervention into family life and forces all agencies to consider what is in the best interests of the children. Physical Abuse, Sexual Abuse, Emotional Abuse and Neglect are categories of significant harm. Sometimes significant harm is a single traumatic event but more often it is an accumulation of significant events both acute and longstanding over time e.g. neglect. This can include Child Sexual Exploitation and Child Criminal Exploitation. All professionals working with children have a role to play in addressing significant harm through cumulative action and contextual safeguarding as often action taken to prevent needs arising in the first place can have a significant impact upon a child's overall outcomes in the long term.

Response:
Where there is reasonable cause to suspect that a child is suffering or likely to suffer significant harm the local authority shall make enquiries as considered necessary to decide further action to safeguard or promote a child's welfare. Agencies are required in both circumstances to contact the Front Door for Families where a pathway decision will be made.

Assessment: If a decision is made that confirms suspicion of, or actual significant harm a Strengthening Families Assessment will be initiated. A strategy meeting with Police, Health and Education and any other agency required may also be held to consider what needs to happen next to address risk and harm and will consider the need for **Section 47 (CA 1989)** enquiries to be made. The Section 47 enquiry and assessment will always be completed by a social worker and must consider the need for an **Initial Child Protection Conference** to be convened.

Concerns about the abuse of a child may be the precipitating reasons for contact to be made to the Front Door for Families or may also arise during the course of completing any assessment with a family. In all circumstances local authority children's social care must initiate enquiries to ascertain what is happening to the child and whether protection is required. On the basis of those enquiries a dynamic risk assessment must be maintained to consider the need for immediate protection, whilst assessments are undertaken, giving regard to children's wishes and feelings.

Public Law Outline (PLO): The Public Law Outline sets out clear procedures for the management of cases that may require the intervention of the Courts in dealing with children's cases. The aim of the PLO is to identify and focus on the key issues and seek to prevent delay in addressing issues for the child and to avoid the need for unnecessary evidence or hearings. Under the PLO those with Parental Responsibility are entitled to limited free legal advice, upon receipt of a letter from the children's social work service.

Section.20 (CA, 1989): Some children may require accommodation because there is no one with parental responsibility for them or because they have been left on their own or abandoned. The Children Act 1989 places a duty to accommodate such children in need. In these cases, a social work assessment will determine whether accommodating the child is in their best interests. S.20 accommodation agreements are made with the consent of those who hold Parental Responsibility for the child.

Section 31A (CA, 1989): It may be necessary, if harm is assessed to be sufficient, or a parent's capacity is called into question, to take legal action to ensure a child's safety, for e.g. an Emergency Protection Order (EPO – lasts for 7 days) or for an Interim Care Order (CO) or Supervision Order (SO – which last until the Court decides). A social worker may only remove a child from the care of someone with Parental Responsibility through a Court Order or by prior agreement (see s.20 above).

Police Protection (PP): Police protection is an emergency power which enables any police officer to protect a child who is reasonably believed to be at risk of significant harm. The Children Act 1989 section 46 empowers a police officer to remove a child to suitable accommodation or prevent the removal of a child from a hospital or other place in which that child is being accommodated. When these powers are exercised, the child is considered to be in police protection. Police protection does not give the police parental responsibility and does not, for example, give the police the ability to consent on behalf of the child to a forensic medical examination. No child may be kept in police protection for more than 72 hours.

Decisions relating to police protection are the responsibility of the police but, where possible, should include discussions with children's social care or any other agencies as appropriate (e.g. medical staff). A referral to children's social care must be made when a child has been taken into police protection.





5. Risks & Strengths

Professional Difference Statement:

It is acknowledged that when working in the arena of safeguarding, it is inevitable that from time to time there will be professional differences. This is a positive activity and a sign of good professional practice and effective multi-agency working. Practitioners, irrespective of their seniority are encouraged to say if they feel that decisions, practice or actions do not effectively ensure the safety or well-being of the child/children.

It is common for practitioners from different disciplines or agencies to have different concepts of the notion of risk and strengths. This means that risk assessments and strength-based plans to address risks are stronger if we work together to complete them. As a system we embrace opinions from differing professional viewpoints.

It is impossible to remove all risk from a child's life. However, using a consistent framework to inform the process of assessing, understanding and mitigating risk is essential to balancing the needs of children and their families within the wider context of their communities.

The interactive Family Help framework is a web-based document to guide you through understanding and mitigating risk. You will see that the same issues occur for children across the three levels of need. It is often the cumulative and worsening situation that will increase a child's chances of escalating through the levels of need. This framework has been developed in consultation with safeguarding partners. It seeks to help develop a consistent understanding across the partnership to recognise the different risks that exist in a child's life. It is important to discuss who is best placed to provide the support for the child and consider the Relationship-Based Practice principles.

The framework is for use by all practitioners to provide guidance for the assessment, analysis and management of risk reduction. At all levels practitioners undertaking assessment, need to consider the child's developmental needs, their parent or carer's ability and capacity to meet those needs and the contextual factors that are supporting or preventing progress from being made.

At all times practitioners must use the framework and set it in the context of their knowledge of the family and the child and consider: What are the factors that might increase risk of future harm? What are the factors that may diminish risk of harm? Which of these factors is likely to be most significant for the child? What are the strengths in the family and wider support network? What is the likely outcome for the child? What needs to change to reduce the level of risk to increase protection? Who is best placed to have a relationship with the child and family to enable change?

Increasingly, we are seeing that risks posed to children outside of the family unit, referred to as extra-familial harm, requires a Contextual Safeguarding approach. Parents, carers or guardians can often be doing all they can to safeguard their child however risks posed by peers, social media, organised criminal networks, perpetrators of exploitation can continue to increase risk despite their best efforts. Therefore, it is important to acknowledge these different risks and to work with parents as partners in a safeguarding context. Our established Adolescent Risk and Vulnerability Meeting is a multi-agency risk management process to consider these risks for children.

Pan Sussex, we have Policies and Procedures to guide all professionals.

It is essential that as the BHSCP we operate through an anti-discriminatory lens at all times and these principles inform how we assess strengths and risks within families.[4] We also strive to be poverty aware in our approach to families and practice.

[4] BHSCP-Anti-Racist-Practice-Statement-Sept-2025

6. Further Information

Home - BHSCP
Family Help - Relationship-based Model of Practice and Vision
BHSCP-Anti-Racist-Practice-Statement-2022
BHSCP-Poverty-Aware-Practice-Statement-2024
How we make decisions - Brighton & Hove Family Help - Right Support at the Right Time
Refer a child or family to Front Door for Families (brighton-hove.gov.uk)
Welcome to your Pan Sussex Child Protection and Safeguarding Procedures Manual | Sussex Child Protection and Safeguarding Procedures Manual
Working together to safeguard children - GOV.UK (www.gov.uk)
Children's social care: national framework - GOV.UK (www.gov.uk)
Children's social care: stable homes, built on love - GOV.UK (www.gov.uk)
LADO, Safer Recruitment and Managing Staff - BHSCP
Brighton & Hove mental health services for young people :: Sussex Partnership NHS Foundation Trust (sussexcamhs.nhs.uk)
Brighton & Hove Family Help Right Support at the Right Time – Interactive Online Framework



