**APPENDIX 1:**

**NEGLECT THRESHOLD MATRIX**

**1. PARENTING CAPACITY**

|  |  |  |  |
| --- | --- | --- | --- |
| **PHYSICAL CARE** | | | |
| **Universal** | **EHA** | **Child in Need** | **Child Protection** |
| Physical needs are  provided for – e.g. food, drink, appropriate clothing, medical and dental care | Basic physical care needs are not provided  consistently | Inconsistent availability of food in the house and no regular mealtimes/ routines | Empty cupboards,  decaying food, children go unfed |
|  | Parent/s struggling  without the provision of support/ resources | Sporadic loss of heating and lighting | Regular absence of heating/lighting, house is cold and unlit |
|  | Young, inexperienced  parents with inadequate support from family/ friends | Inappropriate weaning, prop fed with bottle | Unweaned child regularly given solids and dangerous food items |
|  |  | Child sometimes presents in school as hungry | Child often in school reporting no breakfast |
|  |  | Inconsistent application of essential medication | Critical medication not given |
|  |  | Child regularly presents as cold and pale | Child presents as anaemic without medical assessment. |
|  |  | Child dressed in poorly fitting clothes, wrong  size shoes | Child constantly inadequately clothed for the weather conditions |
|  |  | Child has poor hygiene, sometimes smells and has untreated sores/ injuries take time to  heal | Child often has persistent untreated head lice, infected injuries, and has a very strong smell of urine, damp or body odour. |
|  |  | Child presents in school with significant illness but no explanation from parents | Child sent to school with acute illness |
|  |  | Child often arrives late for school  and is last to be collected | Poor school attendance |
|  |  | Child has poorly maintained dental health | Child has untreated severe tooth decay |
|  |  | Evidence that parent/carer is prioritising own needs over needs of the child | Child not taken for essential medical appointment or investigations that may have a long term effect on health |

|  |  |  |  |
| --- | --- | --- | --- |
| **SAFE CARE** | | | |
| **Universal** | **EHA** | **Child in Need** | **Child Protection** |
| Parent/s protect from  danger and harm at home and  elsewhere | Inconsistent supervision, parents  unaware of child/  young person’s whereabouts | Parent inconsistently allows child to play at great  risk of physical injury e.g. in the road, on  walls/ high level activities | Child sustains injuries whilst playing dangerously, falls  off play equipment, is  knocked down by cars |
|  | Safety equipment, e.g. fireguards and stair gates, not used  consistently | Child under 10 years sometimes left alone either at home or in the  street without appropriate  supervision | No active supervision, left  to own devices, seeks company of much older  children. Found wandering in the street or around  shops |
|  | Lack of awareness of  dangers and risks to  child/ young person | Child has access to dangerous equipment,  fire, hot objects, drugs  etc | Child sustains scalds, ingests harmful drugs/chemicals,  in possession of knives and other dangerous  objects |
|  | Inappropriate child  care arrangements –  e.g. carers too  young/inexperienced,  too many different  carers | Child has a number of recent  admissions to Accident & Emergency due to lack of supervision  from parents/carers | Child has multiple admissions to  Accident & Emergency and  parents ignore advice |
|  | Parent/s offer  inconsistent  boundaries  Child has inappropriate levels of sexual knowledge | Child left in care of young children | Child left with inappropriate  carers e.g. who are under the influence of drugs and  alcohol. Child is injured whilst being cared for by carers due to lack of  supervision |

| **EMOTIONAL CARE** | | | |
| --- | --- | --- | --- |
| **Universal** | **EHA** | **Child in Need** | **Child Protection** |
| Parent/s show warmth, praise and encouragement | Parent’s emotional  response inconsistent | Child often made the scapegoat | Child is family scapegoat |
|  | Parent/s have unmet  emotional needs | Child not given praise | Child singled out for  punishment |
|  | Child unable to develop emotional relationships with parents | Child given inconsistent  physical contact and  reassurance | Child rarely comforted/ reassured physically |
|  | Parent occupied  with sibling/s with higher level needs,  e.g. disabilities, and needs additional  support | Few age appropriate  toys in the house | Absence of age appropriate toys |
|  | Child spends  considerable amount of time alone, and has  limited access to  leisure facilities | Child spends long, regular periods in their bedroom | Child spends all their time in their bedroom |
|  | Child/ young person’s key relationships with family members not always maintained | Parent sometimes ignores child, child displays attention seeking  behaviour | Parent goes out of their way to ignore verbal/non verbal signals from the child. |
|  | Complex family  dynamics result in  ongoing levels of instability | Child is rarely comforted  when distressed | Parent always ignores child’s distress and becomes angry |
|  |  | Parent often indifferent to child’s presence | Parent ignores child’s presence |
|  |  | Parent rarely referees  disputes between siblings | Parent encourages sibling conflicts and fails to prevent  injuries |

**2. ENVIRONMENTAL**

|  |  |  |  |
| --- | --- | --- | --- |
| **Universal** | **EHA** | **Child in Need** | **Child Protection** |
| Housing has basic  amenities and  appropriate facilities, and appropriate levels  of cleanliness/hygiene  are maintained | Housing is poor or not  adequate for family’s  needs | Poorly maintained  bed/bedding | No beds/bedding or inadequate sleeping  arrangements |
|  | Parent/s struggling to maintain standards of  hygiene/repair in the  house | Threat of eviction and  sporadic periods of  homelessness | Unable to maintain  accommodation, accommodated by  friends/neighbours |
|  | Parents accruing rent  arrears which may  jeopardise tenancy if  action is not taken | Poorly maintained  washing/toilet facilities,  unhygienic conditions | Blocked toilets, broken bathing and washing  facilities |
|  |  | Keeping of pets which pose a threat to young  children | Pets, dogs etc bite children and soil the floors etc |
|  |  | Accommodation requires repair - broken  windows, doors, bare electrical cables, intermittent heating/ lighting etc, house sparsely furnished | House unsecured, numerous serious health & safety hazards for children/ adults, no heating/lighting,  no curtains, furniture etc |

**3. CHILD DEVELOPMENT/HEALTH**

|  |  |  |  |
| --- | --- | --- | --- |
| **Universal** | **EHA** | **Child in Need** | **Child Protection** |
| Child/ young person in good health and developing appropriately for age. | Child/ young person not reaching developmental milestones | Child not encouraged to reach developmental milestones | No attempts made to encourage/assist child to reach developmental milestones |
|  | Child has persistent minor health problems resulting in poor school attendance | Child left in pram/car seat for inappropriate periods of time | Child left for extended periods of time in pram/car seat |
|  | Inconsistent attendance at key health appointments | Infrequent attendance at key health appointments | Failure to attend key health appointments |
|  | Dental care not sufficient – poor attendance for checks/treatment  Child inconsistently wears prescribed glasses or other eye sight correctional aids or hearing devices | Fails to consistently follow critical medication regimes  Hearing and visual aids not always used | Critical medication not administered  Child prevented from wearing prescribed glasses or other correctional aids/hearing devices |
|  | Inappropriate response to minor injuries | Minor injuries left untreated | Failure to seek medical attention for serious injuries e.g. scalds, head injuries |

**Indicators of Neglect**

|  |  |  |
| --- | --- | --- |
| **Physical** | **Development** | **Behaviour** |
| Failure to thrive  Recurrent and persistent minor  infections  Frequent attendances at the Accident and Emergency department or admissions to hospital  Unexplained bruising  Severe nappy rash  Short stature - where there is not an underlying medical reason Including genetic factors  Unkempt and dirty | General delay – more explanation needed  Language delayed – more explanation needed  Attention span limited  Socio – emotional immaturity  Learning difficulties  Lack of self esteem  Poor coping skills | Attachment disorders, anxious, avoidant  Lack of social responsiveness  Overactive  Aggressive and impulsive  Seeks physical contact from strangers  Disordered or few relationships  Self stimulating or self injurious behaviour or both  Unusual patterns of defecation or urination or both |