

Level 1 - Children accessing universal services, having needs met via universal provision via single agency intervention.

Level 2 - Children with emerging need which can be met through partnership working via Early Help Assessment and Planning.

Level 3- Has multiple needs which require a multi-agency and coordinated response with support from targeted services. Intervention occurs under Early Help assessment, planning and review.

Level 4- High level of unmet/complex need requiring statutory intervention under either Section 17 or Section 47 of the Children Act 1989.

Child/ren & families with additional needs. Single Practitioner targeted support – Child/ren under 7yrs/ or with special needs increases risks. The younger the child/ren the higher the risk to their safety. Consider protective factors.

Child/ren & families with additional needs. EHA completed –Lead professional-integrated support Child/ren under 7yrs/or with special needs -at higher risk of emotional/ physical harm – limited self-protection strategies -can raise threshold to level 3b. Consider protective factors.

Targeted family support and other services (including health services) may use Early Help Assessment and Team Around the Family process to address need at this level but should consider escalation to Children’s Social Care for Child in Need (s17) assessment/support or Child Protection (s47) enquires should new or mounting evidence suggest that the threshold of significant harm is reached. Child/ren aged under 7yrs/ or child/ren with special needs can raise threshold to level 4

Child in need of Protection – Children’s Services consider if Section 47 enquiry and core assessment intervention are required. Child/ren may be at risk of being ‘looked after’.

Evidence of Domestic Violence	Y	S
1 - 3 minor incidents of physical violence which were short in duration.		
Victim did not seek medical treatment.		
Intense verbal abuse.		

Evidence of Domestic Violence	Y	S
History of minor/moderate incidents of physical violence-short duration.		
Victim received minor injuries - medical attention not sought.		
Evidence of intimidation/bullying behaviour - pushing/ finger poking/ shoving/to victim but not towards child/ren - Destruction of property.		
Intense verbal abuse-consistent use of derogatory language.		
Risk of isolation - Abuser attempts to control victims’ activities, movements & contact with others.		

Evidence of Domestic Violence	Y	S
Incident(s) of serious and/or persistent physical violence in family. Increasing in severity/frequency and/or duration - History of previous assaults.		
Victim and/or children indicate that they are frightened of abuser - put in fear by looks, actions, gestures and destruction of property (emotional & psychological abuse). Recent separation - repeated separation/reconciliation/ongoing couple conflict.		
Stalking/harassment of mother/children - Increased risk of isolation.		
Abuse through the use of texting/social networking sites.		
Abuser breaching bail conditions/civil protective orders / non-contact orders.		
Victim required medical treatment but not sought/or explanation for injuries implausible.		
Recurring or frequent requests for police intervention.		
Incident(s) of violence occur in presence of child/ren - consider duration of exposure.		
Threats of harm to mother/and or children.		
Excessive jealousy/possessiveness of abuser - domineering in relationship.		
Financial control maintained by abuser.		
Abuser has history of domestic violence in previous relationships.		

Evidence of Domestic Violence	Y	S
Repeated serious and/or severe physical violence - life threatening violence. Attention to the frequency, duration and severity of violent behaviour children exposed to.		
Use/assault with weapons.		
Abuser’s violation of protective and/or child contact orders.		
Criminal history of abuser, gangland connections, generalised aggression, history of anti-social behaviour, aggression towards previous partners/family members, military service/training.		
Intense stalking/harassment behaviour of abuser - Increased risk of isolation.		
Recurring or frequent requests for police intervention.		
Victim requires treatment for injuries sustained - Medical attention required but not sought or injuries explanation is implausible.		
Threats to kill or seriously injure victim and/or children.		
Victim is very frightened of abuser - believes intent of threats - Retaliatory violence a concern.		
Victim is intensively controlled/may present as submissive - worn down by abuse.		
Victim is pregnant/victim is abused in post natal period/recently separated with new baby raises risk level.		
Confirmed emotional/psychological/abuse of mother.		
Sexual assault/suspected sexual abuse of victim.		
Incidences of violence witnessed & occurred in presence of children - distressed/aftermath of incident. Child/ren have directly intervened in incidences.		
Child/ren summon help/discloses-immediate heightened risk to this child of being ‘punished’ / adverse reaction from abuser and /or mother-assess adult’s reaction to child’s disclosure.Child/ren may disclose another form of abuse to draw attention to the situation.		
Child/ren have been physically assaulted/abused.		
Confirmed emotional abuse of child/ren.		
Suspected/confirmed sexual abuse of child/ren.		
Abuser is a perpetrator of child abuse but may not have been prosecuted. Known to MAPPA.		
Victim has been identified by DASH-MARAC process as high risk.		

Risk factors/ Potential vulnerabilities	Y	S
Child/ren were not drawn into incidents.		
Control by abuser is not intense.		

Risk factors/Potential vulnerabilities	Y	S
Child/ren were present in the home during an incident but did not directly witness.		
Potential likelihood of emotional abuse of children.		
BME (Black, Minority, Ethnic) Issues: See Blue Box.		
Disability issues within family - positive support networks.		
Mental health issues - not prolonged or serious Abuser or victim seeking appropriate help.		
Age of abuser and/or Victim both have supportive resources and are not isolated.		

Risk factors/Potential vulnerabilities	Y	S
Mental health issues - abuser and/or victim-raises concern.		
Substance abuse by abuser and/or victim-raises concern.		
Abuser’s and/or victim’s infidelity is a source of conflict/anger		
Strong likelihood of emotional abuse of child/ren - may display behavioural problems.		
Child/ren unable to activate safety strategies due to fear or intense control of abuser.		
Lack of safe significant other as a positive support to child.		
Child contact issues - domestic violence occurring at contact.		
Older children /Adolescent - increased risk of intervening in abuse and emerging concerns re self harm.		
Abuser suspected of using physical abuse towards child/ren.		
Abuser shows lack of insight/empathy into how his behaviour effects children/victim.		
Abuser’s minimisation of abuse-lack of remorse/guilt.		
Abuser is Boyfriend/Father figure. Family unit has step-siblings.		
Abuser’s abuse of pets/animals/used to intimidate.		
Emerging concerns about emotional stability of abuser’s relationship with child/ren/ limited parenting capacity & lack of protective abilities.		
Emerging concerns about emotional stability of child/mother relationship (parenting capacity and protective concerns).		
Emerging concerns of neglect of child/ren’s emotional and physical needs-missed health appointments/poor living conditions.		
Abuser’s use of avoidance/resistance to engage in services increases risk level to children.		
Victim fears statutory services - avoidance & resistance to engage increases risk to children.		
Family/Relatives/neighbours reports concerns re victim/children.		
Victim has experienced domestic violence in previous relationships.		

Risk factors/Potential vulnerabilities	Y	S
Mental health issues - abuser and/or victim - raises significant concern.		
Substance abuse by abuser and/or victim - raises significant concern.		
Abuser’s and/or victim’s infidelity is a source of conflict/anger -Victim’s infidelity gives rise to risk of severe reactive violent response from abusive partner-extreme jealousy/ possessiveness.		
Concerns of neglect of child/ren’s emotional and physical needs/poor living conditions.		
Substantial risk of repeated serious domestic violence.		
Threats or attempts to abduct children.		
Children exhibit sexualised behaviour and/or sexually harmful behaviour.		
Adolescent - increased risk of intervening in abuse and self harm-emerging concerns re mental health issues.		
Child/ren in family has previous care history.		
Physical abuse of child/ren by abuser and/or victim.		
Victim uses physical abuse on children as an alternative to harsher physical abuse by abuser.		
Recent suicidal or homicidal ideation/intent by abuser.		
Victim suicidal/attempted suicide/self harming - especially BME victims.		
Victim minimising risks to children/remains in abusive relationship, protection orders not sought, or activated.		
Victim/child has poor general health.		
Abuser shows lack of empathy/insight into how his abusive behaviour is affecting child/ victim.		
Abuser’s minimisation of abuse-lack of remorse/guilt.		

Protective factors	Y	S
Child/mother relationship is nurturing, protective and stable.		
Significant other in child’s life - positive and nurturing relationship.		
Presence of child/ren was a restraint for the abuser.		
Abuser accepts responsibility for abuse and violence.		
Abuser indicates genuine remorse and is willing to seek support for abusive behaviour.		
Victim has positive support from family/ friends & community.		
Victim appears emotionally strong (not worn-down by the abuse).		
Victim sought appropriate support and/or is willing to accept help from other agencies.		

Protective factors	Y	S
Child/mother relationship is nurturing, protective & stable.		
In spite of abuse, victim was not prevented from seeing to the needs of her child/ren.		
Significant other in child’s life - positive and nurturing relationship.		
Older child/ren use coping/ protective strategies.		
Victim attempted to use protective strategies with older child/ren.		
Victim is prepared to take advice on safety issues.		
Victim has insight into the risks to her child/ren posed by the abuse.		
Victim has positive support from family/friends and community.		
Abuser willing to engage in services to address his abusive behaviour.		

Protective factors	Y	S
Older child/ren use protective strategies.		
Victim will seek positive support from significant other.		
Victim - attempts to use protective strategies but abuser’s violence & control is intense.		
Victim will engage with supportive services and seek safety advice - but abuser’s control interferes with her level of commitment to safety.		
Limited protective factors are present - serious level of violence and psychological abuse of victim, emotional abuse of child/ren and Domestic Violence risk factors predict recidivism.		
Use of kinship placements as a protective factor - be alert to domestic violence having occurred or occurring in extended families.		

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BME (Black, Minority, Ethnic) Issues: Across all scales

Ask yourself the following questions:
 If this parent...
 1 Cannot speak, read or write English
 2 Fears that the 'State' is authoritarian
 3 Lacks strong social networks
 4 Lives in temporary housing
 5 Is living below the poverty line
 6 Has a child who is of a different appearance and culture to them
 7 Is living in a close-knit community in Wigan
 8 Has a perspective on parenting practices underpinned by culture or faith which are not in line with UK law & cultural norms
 9 Recognises his/her faith or community leader as all powerful
 10 Puts a very high value on preserving family honour and, if this young person...
 11 Is compromised in relation to his/her community
 12 Has strong allegiance to a group or gang

If you need further information, please refer to the BME checklist, downloadable from the LSCB website.

BME (Black, Minority, Ethnic) Issues: See Blue Box.	Y	S
Adult learning difficulties-abuser and/or victim-raises concern.		
Disability issues within family - isolation.		
Age disparities of Abuser/Victim - under 25 with limited support with personal vulnerabilities.		
History of childhood abuse/disruptive childhood experiences - abuser and/or victim.		
Collusion issues present in extended families/friends - not supportive for victim/children.		

Barnardo’s Domestic Violence Risk Identification Matrix
 Assessing the risks to children from male to female domestic violence.

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 www.barnardos.org.uk