#### GRADED CARE PROFILE



Child's Name	Date of Birth	Age	
Agency	Date completed	Client Number	

#### Using the Graded Care Profile

The Graded Care Profile is an assessment tool, which can be used to assist in the assessment of neglect. The tools will identify strengths and difficulties across a number of child development areas. It is likely to be triggered by concerns about the care the child is receiving. Whilst it may be focussed on assessing difficulties, the Graded Care Profile also identifies strengths. Focusing on strengths assists the assessor to appreciate the potential that exists within the family for change and improvement. This potential will inform decisions about possible support or interventions to meet areas of need.

The Graded Care Profile has been adopted by the Children's Safeguarding Partnership Board in Cambridgeshire where neglect is an area of concern for a child's welfare. The 'tools' can be used across the Effective Support for Children and Families Continuum of Need and by professionals from various agencies.

#### How to use the Graded Care Profile:

- Work through the four areas, ticking the description that best describes the care that the child receives
- Use the Scoring Grid at the end of each area section to record a baseline score for each item
- Use the Scoring Grid to record an 'overall score' for each sub-area (see Summary Guidance)
- Use the Scoring Grid to record any areas that you consider should be flagged for attention/intervention.
- Use the Scoring Grid to record relevant comments/ evidence in relation to strengths and difficulties.
- Transfer the sub-area scores to the Summary Score sheets
- Use the 'Areas flagged for intervention' sheet to identify the needs assessed and action/ interventions indicated.
- Record your decisions and further actions on the final sheet.
- Needs and interventions can then be incorporated into the care planning processes of the relevant agency or inserted into the Early Help form.
- Guidance notes are available to support the use of this tool.

A

## Area of Physical Care



Sub-areas Most/all Essential All Needs Met **Essential Needs** Some Essential Many Essential Needs Unmet Met Needs Unmet Needs Unmet 1) Nutrition Provides poor quality Consistently Does not consider A. Quality Quality of food Provides reasonable food or an unhealthy the health or quality provides good quality and healthy varies quality and healthy diet through lack of of diet. When food and drink but food and drink awareness or effort. prompted, very little not always Improves when improvement. consistently prompted. Enough food nearly Enough food most of Sometimes not enough Not enough/too B. Quantity Enough food all of food or inappropriate much food most of all the time the time the time feeding the time. Always carefully Well prepared and Prepared mainly to Often little Hardly ever any C. Preparation prepared or cooked usually taking meet the parent's preparation. Child preparation. The account of the needs. The child's child's needs and for the child. lives on child's needs needs sometimes tastes are not snacks/cereals/junk accommodated. accommodated or the food and is expected child inappropriately to prepare their own prepares their own food. meal.

D. Organisation



Meals organised and well timed. Family sitting together to eat food. Babies' food well prepared and eye contact during feed...

Well organised, family often eating together, regular timing of meals. Some understanding of baby's needs during feeding

Organised sometimes irregular timing

Not well organised, no clear meal times.

Chaotic, eat when and whatever food is there

A

## Area of Physical Care



Sub-areas

I All Needs Met Essential Needs
Met

Some Essential Needs Unmet Many Essential
Needs Unmet

Most/ all Essential Needs Unmet

2) Housing

#### A. Maintenance



Well maintained
Additional features
that benefit the
child. e.g. insulation,
double glazing,
draught proofing and
house safe for
children

Reasonably well maintained and some additional features. Efforts made to benefit the child only lacking if issues such as money interfere

No additional features but well maintained.

In disrepair. Some repairs could be carried out by the parents

Dangerous disrepair (exposed nails, live wires) and some repairs could be carried out by the parent/carer

B. Decoration

(relates to house generally and child's bedroom) Good, clean showing evidence of care.
Child's bedroom has age appropriate decor

Showing evidence of being kept clean and with some evidence of child's development age and choice.

In need of some decoration but kept reasonably clean.



In urgent need of decoration. Grubby very untidy and cluttered.

In very urgent need of decoration. Very chaotic and dirty and/or an unpleasant smell.

C. Facilities



All essential facilities in good working order and there is play and learning space.

Essential facilities. Effort to maximise benefit for the child. Very sparse. Little effort to maximise benefit to the child.

Very bare. Adult needs are met first and child needs met if anything is left. Bathing facilities very poor Child dangerously exposed or not provided for e.g. lack of heating, electricity. Lack of working facilities

**NOTE**: Discount any direct external influences like repair done by other agency but count if the carer has spent a loan or a grant on the house or had made any other personal effort towards house improvement.

A Area of P	hysical Care		Nathan Nathan								
Sub-areas	1 All Needs Met	<b>2</b> Essential Needs Met	3 Some Essential Needs Unmet	<b>4</b> Many Essential Needs Unmet	5 Most/ all Essential Needs Unmet						
3) Clothing											
A. Insulation e.g. harm, warm clothing	Well protected with appropriate garments.	Mostly well protected	Adequate to variable weather protection.	Inadequate weather protection.	Dangerously inadequate. Child is exposed to bad weather.						
B. Fitting	Clothing fits very well	Most items of clothing fit well.	Sometimes inadequate fit but seen as important	Often inadequate fit.	Completely inadequate fit.						
C. Appearance	Clothes always very clean and well cared for. How child looks is important to pare	Usually clean and cared for.	Not always clean or cared for.	Appears worn, sometimes dirty and crumpled.	Appears to be dirty, badly worn and crumpled/and or unpleasant odour.						

A Area of Pl	hysical Care		Nutrition Nutrition							
Sub-areas	1 All Needs Met	2 Essential Needs Met	3 Some Essential Needs Unmet	4 Many Essential Needs Unmet	5 Most/ all Essential Needs Unmet					
4) Hygiene										
Child aged 0 - 4	Always appears clean and bathed and hair is clean and clearly cared for daily.	Usually ,appears clean, bathed and hair usually clean and brushed .	Presentation is varied. and/or babies are usually clean. Older toddlers less so.	Often but not always appears dirty and hair and nails seem uncared for	Always appears with dirty skin, hair and nails seen Rarely bathed, clean or hair cared for.					
Child Aged 5 - 7	Some independence with keeping clean and bathing but always helped and supervised.	Usually reminded to keep clean and bathe. Supervised and helped if needed.	Sometimes but not always reminded to keep clean and bathe Not always routinely monitored.	Reminded only now and then with minimum supervision.	No concerns or interest shown about keeping personal hygiene.					
Child Aged 7 +	Reminded, helped and monitored.	Reminded regularly and followed up if not done.	Sometimes reminded.	Usually left to their own initiative.	No concerns shown about personal hygiene.					

# A

## Area of Physical Care



Sub-areas

All Needs Met

Essential Needs Met

Some Essential Needs Unmet Many Essential Needs Unmet Most/ all Essential Needs Unmet

5) Health

A. Opinion sought and professional advice given

Appropriate opinion sought not only on illnesses but also other genuine health matters. All advice followed

Opinion sought on issues of genuine and immediate concern about child health. Advice followed.

Opinion sought on illness of any severity. Advice usually but not always followed. Help initially sought but delayed even when illness becomes quite serious. Help sought but delayed or ignored even when illness becomes critical or an emergency. Advice may be not followed.

B. Follow Up



All appointments kept. Re-arranged promptly if there is a problem. Fails one in two appointments because they doubt their importance or have other pressing practical priorities.

Fails one in two appointments even if they are important because it's inconvenient for the parent.

Attends third time after reminder.
Contests the importance even if it' is of benefit to the child.

Fails a needed follow up a third time despite reminders.
Misleading or doubtful explanations.

C. Keeping on top of health needs



Visits in addition to the standard checks. Up to date with immunisations unless valid reservations. Up to date with standard checks and immunisation unless parent refuses for no obvious reason.

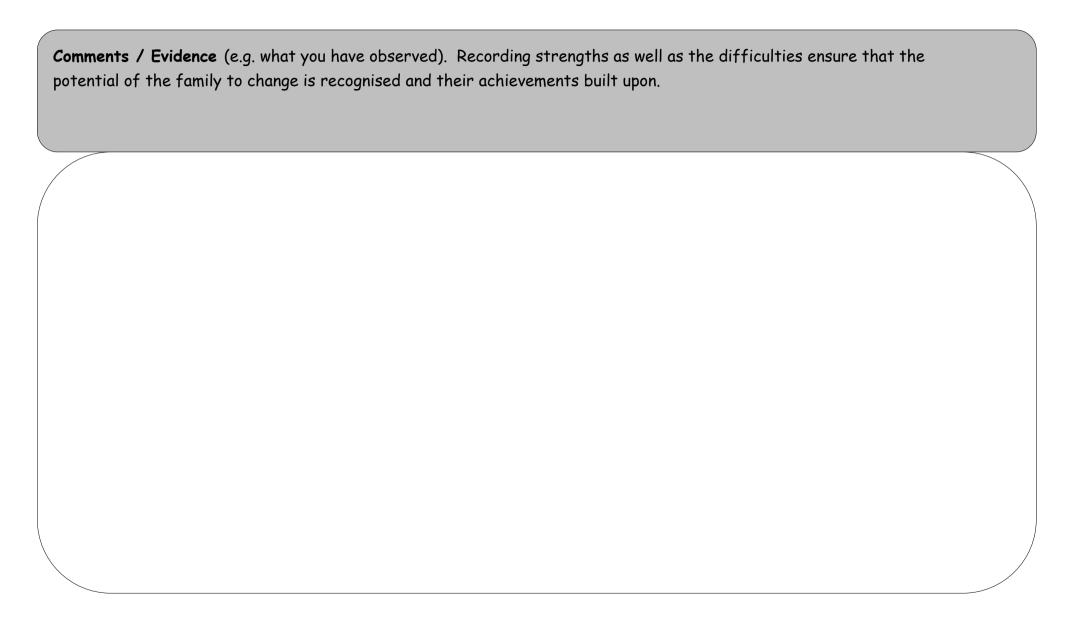
Omissions for reasons of adult's personal convenience but takes up if persuaded.

Omissions because of carelessness, accepts service if it is provided at home.

Clear disregard of child's welfare. Parent does not engage with or frustrates home visits

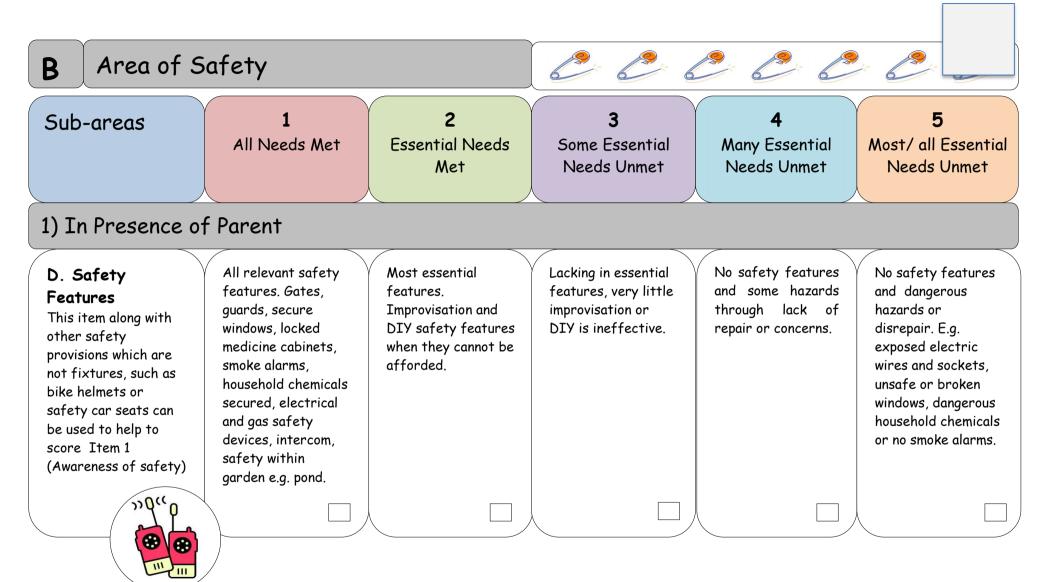
A Area of 1	Physical Care		NUTHT	NUTHITION NUTHITION						
Sub-areas	1 All Needs Met	2 Essential Needs Met	3 Some Essential Needs Unmet	4 Many Essential Needs Unmet	<b>5</b> Most/ all Essentia Needs Unmet					
5) Health  D. Disability / chronic illness (3 months after diagnosis)	Compliance with treatment and advice is excellent. Any issues due to differences of opinion. Very good affection shown.	Compliance is good. Any issues relate to practicality or finance. Good affection shown.	Compliance is sometimes lacking for no apparent reasons. Inconsistent affection shown.	Compliance is frequently lacking and trivial reasons offered as excuses. Little affection shown.	Serious compliance failure. Medication not given. Inexplicable deterioration. Any affection appears contrived.					

ord Sheet		1	2	3	4	5	Flagged for Attention	Overall Scor
A1 Nutrition	A Nutrition Quality							
A1 Null IIIOII	B Nutrition Quantity							
	C Nutrition Preparation							
	D Nutrition Organisation							
A2 Housing	A Housing Maintenance							
	B Housing Décor							
	C Housing Facilities							
A3 Clothina	A Clothing Insulation							
A3 Clothing	B Clothing Fitting							
	C Clothing Appearance							
A3 Clothing  A4 Hygiene  A5 Health	A Child Hygiene							
AE I In alah	A Health opinion sought							
A5 Health	B Health Follow Up			Ì		Ì		
	C Health Surveillance and oversight of health matters							
	D Disability / chronic illness (3 months after diagnosis)							



B Area of S	Safety				
Sub-areas	1 All Needs Met	2 Essential Needs Met	3 Some Essential Needs Unmet	4 Many Essential Needs Unmet	5 Most/ all Essential Needs Unmet
1) In Presence o	of Parent				
A. General awareness of Safety	Very aware of appropriate safety and risk issue boundaries in plac	Aware of important safety and risk issues. Some boundaries in place	Poor awareness of safety and risk except for immediate danger.	Rarely notices safety or risk issues	Unconcerned about safety or risks.
B. Awareness of risks and hazards at pre-mobility age	Always cautious with handling and laying down child. Baby seldom left unattended.	Cautious whilst handling and laying down child. Frequent checks if unattended.	Handling of child is uncertain. Frequently unattended when in the house.	Handling of child is uncertain. Unattended during care chores e.g. feeding bottle left in mouth	Dangerous handling. e.g. left dangerously unattended whilst feeding or bathing.
B. Awareness of risks and hazards when babies become mobile	Constant alertness and effective measures against any dangers.	Alert and effective measures against any danger.	Action taken to prevent danger are of limited use.	If action is taken it is ineffective. Short term improvement after mishaps soon lapses.	Inadvertently exposes to serious dangers. E.g. hot iron/drinks left nearby.
B. Practice at Infant School	Close supervision indoors and outdoors.	Supervision indoors. No direct supervision outdoors if known to be at a safe place.	Little supervision in or out of doors. Intervenes only if in considerable danger.	No supervision. Intervenes after mishaps which soon lapses.	Minor mishaps ignored or the child is blamed. Intervenes casually even after major mishaps and lapses.

#### B Area of Safety 2 Sub-areas Essential Needs Some Essential Most/all Essential All Needs Met Many Essential Needs Unmet Needs Unmet Needs Unmet Met 1) In Presence of Parent Allows out in known Unconcerned about **B** Practice Allows out in Not always aware of Unconcerned safe surroundings whereabouts daytime outings but despite knowledge unfamiliar Junior and Senior with agreed time surroundings if felt outdoors. Believing concerned about of dangers School limits and checks. it is safe as long as late nights in case outdoors, E.a. to be safe. Sets reasonable time the child returns on of child younger railways, ponds, unsafe building, or limits and checks. than 13 time staying away until late evenina Well secured in the 3 to 4 year old Babies not secured Babies, toddlers Infants not secured C. Traffic in pushchair. 3 to 4 pushchair or pram allowed to walk, but in pram. 3 to unsecured careless Age 0-4 4 year old expected year old child left or walks at child's close by parent. with pram or pace with hand Always in sight, to keep up with far behind when pushchair, 3 to 4 hand held firmly if adult when walking. year old child left walking. firmly held. necessary e.g. Occasional glance to wander crowds or by roads. back if left behind. unsupervised. C. Traffic 5 to 10 year old 5-8 year old allowed 5-7 year old allowed 5-7 year old At age 7 child escorted by adult to cross road with a allowed to cross a to cross with a child crosses a busy road Age 5 and above 13+ child, 8-9 year alone without any when crossing a who is under 13. 8-9 busy road alone busy road. Walk old allowed to cross vear old allowed to because they are concerns regarding closely together. alone if they are believed to be safe. safety. cross alone. safe to do so.



Cambridgeshire Graded Care Profile July 2019 - Kindly reproduced from Norfolk LSCB Area of Safety B Sub-areas All Needs Met **Essential Needs** Most/all Essential Some Essential Many Essential Needs Unmet Needs Unmet Needs Unmet Met 2) Safety in Absence of Parent Child is left in care Child aged is left When out playing When out playing a When out playing a of a competent and for a short time leaves a young 0-7 year old is left 0-7 year old is left with a young person child/baby with with an 8-10 year alone or with a safe adult. Never in the sole care of a over 13 who is child aged 10-13 or old or person not slightly older child a person not known known to be i.e. 8 or less, or with young person under familiar, competent 16. with no significant to be competent. an unsuitable young competent. problems. The person or adult. above applies to babies only in urgent situations.

Cambridgeshire Graded Care Profile July 2019 – Kindly reproduced from Norfolk LSCB

Sco	oring Grid		1	2	3	4	5	Flagged for Attention	Overall Score
	B1 In	A Awareness							
	Presence of	B Practice							
4	Parents	C Traffic							
0 4		D Safety Features							
Area	B2 Safety in Absence of Parents								

potential of the family to change is recognised and their achievement	rs built upon.

#### PARPAR PARPAR Area of Responsiveness Sub-areas **Essential Needs** Most/all Essential All Needs Met Some Essential Many Essential Needs Unmet Needs Unmet Needs Unmet Met 1) Carer Anticipates or picks Understands distinct Not sensitive Insensitive Needs Insensitive to even A. Sensitivity up very subtle signals enough. Signals have repeated or verbal or clear repeated and both verbal or nonverbal expressions to be intense to be prolonged and prolonged intense nonverbal expressions including emotions or noticed e.g. child intense signals to be signals or is even including emotions or mood. crying. noticed e.g. averse to signals. mood. screaming. Responses well timed Responses mostly Not timely if Responses delayed No responses unless B. Timing of with signals or even timely except when distracted. Timely if even when child is in there is a clear response anticipates those occupied by they are not distress mishap. signals. essential chores. otherwise occupied or if the child is distressed. Practical responses Emotional response Unpleasant/punitive Warm emotional and Fmotional and C. Appropriate is brisk, flat and even if child in practical responses e.g. treats are practical responses responsiveness to warm if in good appropriate to the lacking but functional distress. Acts the child emotional responses mood Otherwise Annoyance if child signal. after a serious are warm and flat. in moderate mishap mainly to reassuring. distress but avoid criticism. attentive if in Any warmth or severe distress. remorse is deceptive.

C Area of F	Responsiveness		PAOPAO	PAOPAG	PAOPAO
Sub-areas	1 All Needs Met	<b>2</b> Essential Needs Met	3 Some Essential Needs Unmet	<b>4</b> Many Essential Needs Unmet	5 Most/ all Essential Needs Unmet
2) Mutual Engag	gement				
A. Overtures - two way communication	Two way with parent usually going first and engaging child.	Equally positive by both. Parent responds even if the child is defiant.	Approaches mainly by child and, sometimes by the carer. Negative response if the child's behaviour is defiant.	Mainly by the child. Seldom by the carer.	Child appears resigned or apprehensive and does not make approaches.
B. Quality	Both engage and enjoy it. Frequent pleasure shown.	Both engage and enjoy it. Pleasure is usually shown.	Sometimes engaged and pleasure shown. The child gets most enjoyment and the carer passively joins in and occasionally gets enjoyment.	Engagement mainly practical. Indifferent when child attempts to engage. Child can derive some pleasure e.g. attempts to sits on knees, tries to show	Dislikes approaches by the child. Child is resigned or plays on its own. Carer engages only if told to do so.
				toys.	

**CAUTION:** If child has temperamental/behavioural problems, scoring in this sub-area (mainly quality item) can be affected unjustifiably. Scoring should be done on the basis of score in area C/1 (Carer) and problem noted as comments.

Cambridgeshire Graded Care Profile July 2019 – Kindly reproduced from Norfolk LSCB

S	corin	coring Grid				3	4	5	Flagged for Attention	Overall Score
	SS	C1 Carer	A Sensitivity							
4	9		B Timing of response							
ea o	sive		C Appropriate responsiveness to the child							
Are	Spon	2 Mutual	A Overtures two way communication							
	0)	ingagement	B Quality							

Comments / Evidence (e.g. what you have observed). Recording st potential of the family to change is recognised and their achievement		

D Area of E	steem		<b>美国教育</b>	<b>光</b>	""
Sub-areas	1 All Needs Met	2 Essential Needs Met	3 Some Essential Needs Unmet	4 Many Essential Needs Unmet	5 Most/ all Essential Needs Unmet
1) Stimulation					
Age 2 - 5 years iii Outings taking the child out for recreational purposes	Frequent visits to child centred places both locally and further away.	Enough visits to child centred places locally (e.g. parks) and occasionally further away.	Child accompanies carer going where carer decides but usually in child friendly places.	Child accompanies carer e.g. local shopping. Plays outside and outings to keep up with others.	No outings for the child. May play in the street if carer goes out locally
Age 2 - 5 years iv Celebrations seasonal and personal.	Notable, happy, fun and appropriate.	Very good but may be limited e.g. by finances.	Mainly seasonal and low key personal e.g. birthdays.	Only seasonal. Low key to keep up with other people.	Even seasonal festivities absent or dampened.
Age 5+ years Education	Active interest in school which is supported at home.	Active interest in school. Support at home when carer is free of essential tasks.	Some interest in school. but little support at home, even if carer has spare time.	Little interest and poor support in school. Interest for other reasons e.g. free meals.	Disinterested or even discouraging.
Age 5+ years ii Sports and leisure	Well organised outside school hours e.g. clubs and swimming.	All support that is affordable.	Not active in finding activities, but will use local facilities.	Child finds activities for themselves Parent/carer is indifferent.	Disinterested even if the child is involved in other unsafe or unhealthy activities.

D Area of E	Esteem		· · · · · · · · · · · · · · · · · · ·								
Sub-areas	1 All Needs Met	2 Essential Needs Met	3 Some Essential Needs Unmet	4 Many Essential Needs Unmet	<b>5</b> Most/ all Essential Needs Unmet						
1) Stimulation											
Age 5+ years iii Peer/friend interaction	Assisted and new friends checked.	Some assistance and new friends checked.	Supports if a child is from a family who are friendly with carer.	Child finds own friends. No help from carer unless serious problems e.g. bullying.	Disinterested, indifferent or even discouraged.						
Age 5+ years iv Provision equipment	Fully provided e.g. sports gear or computer.	Well provided and tries to provide more.	Some limited provision.	Poor provision.	No provision made and even discouraged.						
2) Approval											
	Talks about the child with pleasure and praises without prompting.  Appropriate emotional and practical rewards for achievement.	Talks fondly about the child when asked. Generous praise and emotional reward, less practical reward e.g. financial constraints.	Agrees with other people's praise of the child. Gives low key praise and some emotional rewards.	Uninterested if the child is praised by others. Indifferent to the child's achievement which is only briefly acknowledged.	Undermines if the child is praised. Achievements are not acknowledged. Reprimanded or mocking is the only response.						

D Area of E	steem		满满满满满满							
Sub-areas	1 All Needs Met	2 Essential Needs Met	3 Some Essential Needs Unmet	4 Many Essential Needs Unmet	<b>5</b> Most/ all Essentia Needs Unmet					
3) Disapproval										
COL B	Mild and consistent verbal disapproval if a set limit is crossed.	Consistent verbal and low level physical and other sanctions if any set limits are crossed.	Inconsistent boundaries or methods. Shouts or ignores child. Low level physical and moderate other sanctions.	Inconsistent. Shouts/harsh verbal or moderate physical, or severe other sanctions.	Terrorised. Ridiculed, severe physical or cruel and spiteful other sanctions.					
4) Acceptance										
	Unconditional acceptance. Always warm and supportive even if child is failing.	Unconditional acceptance, even if temporarily upset by child's behaviour. However, always warm and supportive.	Annoyance at child's failure.	Unsupportive or rejecting if the child is failing.	Indifferent if child is achieving and rejects or belittles if the child makes mistakes or fails.					

	Scor	ring Grid		1	2	3	4	5	Flagged for Attention	Overall Score
	teem	D1 Stimulation	A Age 0 - 2 years							
4			B Age 5 + years							
rea of		D2 Approval	D2							
Ar	Es	D3 Disapproval	D3							
		D4 Acceptance	D4							

Comments / Evidence (e.g. what you have observed). Recording strengths as well as the difficulties ensure that the potential of the family to change is recognised and their achievements built upon.

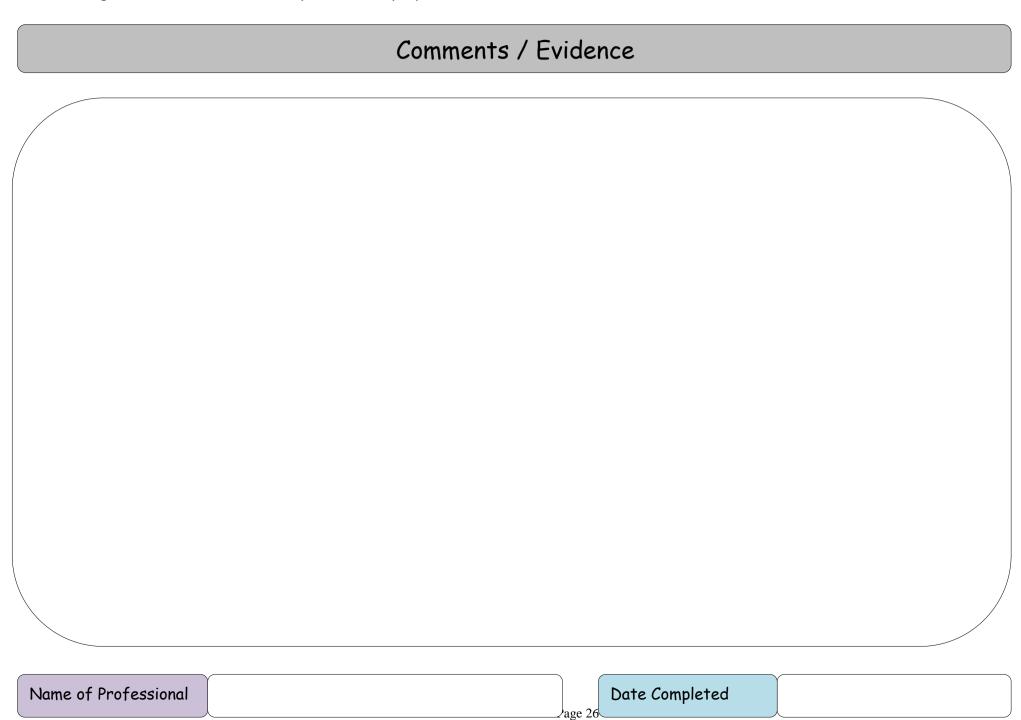
# Graded Care Profile (GCP) - Summary Sheet

Area	Sub-Area	Sub-Area Score
A	1. Nutrition	
Physical	2. Housing	
	3. Clothing	
	4. Hygiene	
	5. Health	
В	1. In Carer's Presence	
Safety	2. In Carer's Absence	
C	1. Carer	
Responsivenes	2. Mutual Engagement	
D	1. Stimulation	
Esteem	2. Approval	
	3. Disapproval	
	4. Acceptance	

# Areas flagged for attention - Physical, Safety, Responsiveness, Esteem

Area, sub area and score E.g. Physical: Housing: Maintenance: Score	Description and child's need  E.g. Description: Dangerous disrepair (exposed live wires).  Child's Need: Child needs to be kept safe from electric shocks	Action required  E.g. 1. Parent to buy some electric masking tape and wrap around exposed wire/broken socket until the landlord repairs. 2. Parent and worker to notify the landlord of the danger and request immediate repair
,		

Decisions										
Where this ha	your decisions after completing the Graded Care Profile. Areas identified at level 4 and 5 may be indicative of neglect rm is considered 'significant', Child Protection Procedures must be followed. discussed with your manager.									
	Concerns about neglect in this case have not been substantiated.									
	Some concerns about nealect in this case have been substantiated, but I do not consider that this child is suffering significant harm.									
	Concerns about neglect in this case have been substantiated and I am concerned that this child is suffering significant	harm.								
Further A	Action arising from this assessment									
manager and/a	Care Profile you may have recorded items 'flagged for attention'. These flagged items may indicate the need for discustry further discussions within a multi-agency setting to confirm actions, decisions and interventions. Many agencies will be and interventions to meet the needs of children.	•								
On-going work.	Choose one or more of the following options:									
⇒ This agence	y [or named agency] will undertake on-going work with this family.									
$\Rightarrow$ Agency to	undertake on-going work with this family with the support, advice and guidance of other agencies.									
$\Rightarrow$ This is not	appropriate for this agency and a referral will be made to a more appropriate agency.									
⇒ Referral t	⇒ Referral to Children's Social Care due to Child Protection concerns									
$\Rightarrow$ No furthe	r action									
Consent										
_	formation or referral to another agency the consent of the child/parent is usually required. Please confirm whether the as been obtained.	e consent of the								
$\Rightarrow$ I have obt	ained consent to share information/refer to another agency.									
⇒ I do not have consent to share information/refer with another agency but have Child Protection concerns and obtaining consent may harm the child.										



#### Assessing Progress

Child: Date

Physical						Safety			Love				Esteem		
	Nutritio n	Housing	Clothing	Hygiene	Health	Carer Present	Carer Absent		Carer	Mutual		Stimulatio n	Approva I	Disapprov al	Acceptan ce
1															
2															
3															
4															
5															

Black Line = Assessment Red Line: Progress after weeks

EXAMPLE: Date



Black Line = Assessment Red Line: Progress after weeks