

Rotherham Safeguarding Children Partnership (RSCP) (RESHHAPED) Neglect Screening Tool Guidance

Purpose of the Screening Tool:

Central to the RSCP Neglect Strategy 2024-2027 is the intent to identify neglect and intervene at the earliest opportunity. In order for this to be successful and supportive to practitioners, a straightforward and understandable tool is required. This tool, endorsed by the NSPCC, will enable all partners working with or alongside children, to identify specific areas of concern and to collaborate in order to target intervention and support where warranted. The RESHHAPED Tool identifies the areas of parenting which may be visible to staff working with children. It is not exhaustive but should provide a helpful guide.

R	Routines and Boundaries
E	Environment
S	Safety
H	Health
H	Hygiene
A	Attachment
P	Parenting
E	Education
D	Diet

Using the tool:

This tool is designed to help quickly identify areas of concern which may indicate that a child or young person is being neglected. Only complete sections that you are able to **evidence** with **clear objective language**. You **must also state Action / Next Steps**.

Key to this process is how professionals can feel confident in talking through any concerns with the family. Whilst this is understandably challenging, we know that the longer children suffer neglect, the more negatively impactful that it is. It is hoped that the tool will support these conversations, in pointing out where things are going well, alongside the need for changes. The RSCP has training in this area accessible [here](#).

It will not be necessary in the majority of cases to refer on to statutory services. The tool should be used to inform next steps and consider how the family can be supported by your organisation and partners to address identified needs. If you are scoring a majority of 3s or above, you should discuss your findings with your Manager or Safeguarding Lead, referring to the [RSCP Threshold Guidance](#).

For all families who do not already have a Lead Practitioner, agencies should engage the family with support via the Family Assessment of Need (FAN). The FAN will help to better understand needs when issues or concerns begin to emerge for a child and family and ensure that there is a clear plan of support in place to address those needs. Support for Lead Practitioners is available from the Integrated Working Leads based in Early Help.

The process outlined in the attached flow chart illustrates the actions that can be taken as a response to those concerns. This screening tool and flow chart does not replace established child protection procedures as set out in the RSCP multi-agency guidance. Professionals should be alert to the fact that concerns which start out as neglect may indicate other child protection concerns. This tool seeks to help professionals to clarify their thinking and intervention where they are worried that a child may be being neglected.

“Every pair of child and young person’s shoes should be filled with someone who is happy and safe, if we do not act to protect and ensure the safety of children in Rotherham, we will have empty shoes.”

“put yourself in my shoes” Credit to SYP/Kath Coulter



When completing this screening tool, please use the evidence section to record your observations, analysis and the factors that you have considered. Where possible please provide the frequency and any specific incidents that have worried you. The tool should be used to help you to share your concerns with the family, possibly completing together, and to draw up a shared plan. **Please note that this is a multi-agency tool, however, agencies are only expected to complete sections where the information is available to them, for example, Housing may not have information in respect of a child's health.**

Neglect occurs at every socioeconomic level, across ethnic and cultural lines, within all religions and at all levels of education. It is important for you to know and understand the family's religion, culture and community and the impact this may have on the care given to the child and to avoid judgements that are not appropriate.

- For families with more than one child, a tool should be completed for each sibling as their experiences are likely to be different.
- Always consider the child's voice and views, noting what they say or how their behaviour may evidence concern
- Where relevant, consider the relevance of the child and family's history and any reoccurrence of neglectful behaviour
- Acknowledge and take into account any known medical conditions or disabilities for the child or their family
- Consider the parent's role in meeting the child's needs in relation to developmental and age-appropriate factors
- Use plain English, avoid acronyms , abbreviations and specialist jargon
- Areas that do not apply may be strengths/protective factors, but also consider whether there are friends or other family members that increase the child's resilience, a family network meeting may support this

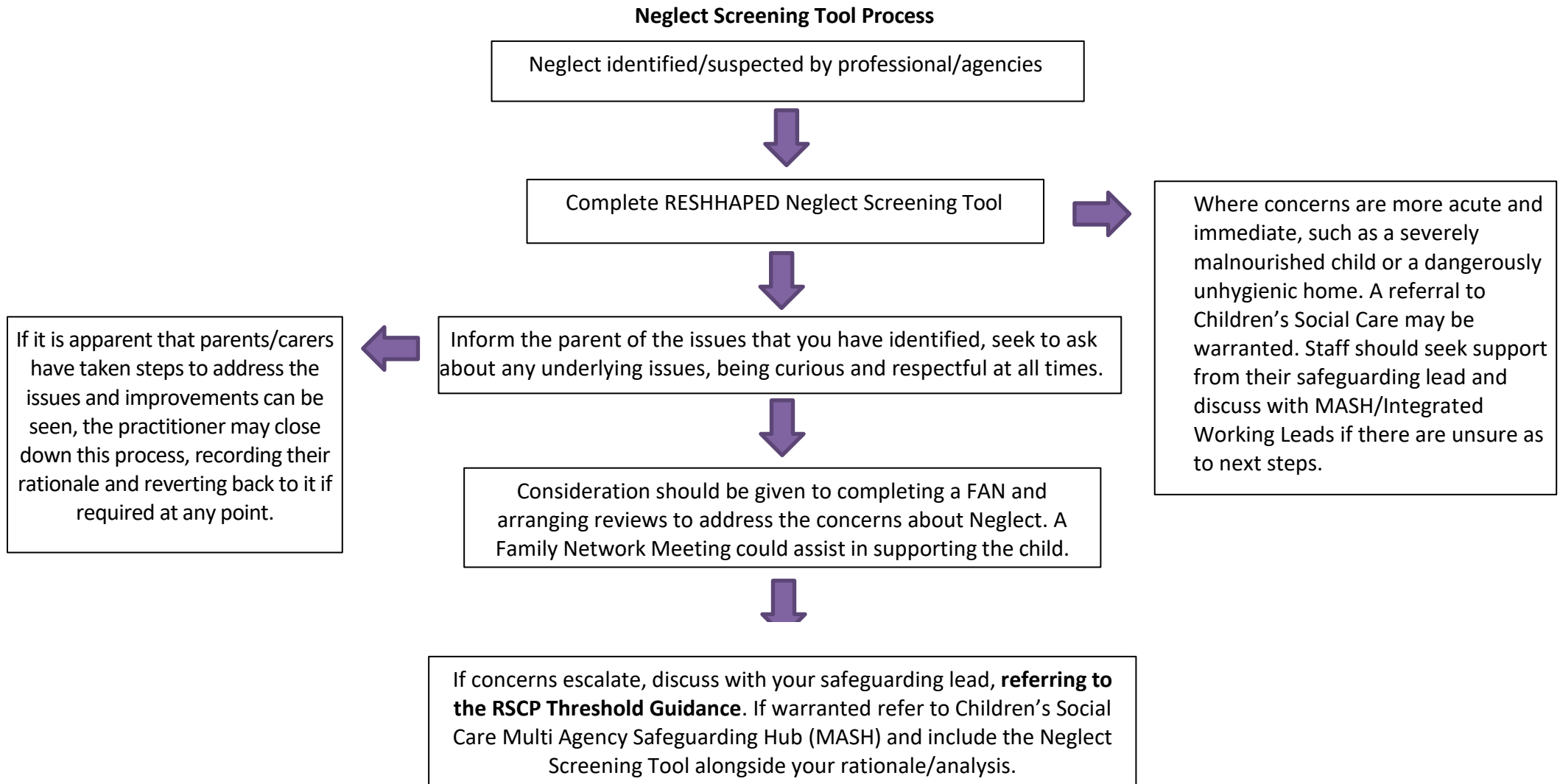
Definition of Neglect:

Neglect involves the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health and development. Neglect may occur during pregnancy as a result of, for example, maternal substance misuse. Once the child is born, neglect may involve failure to:

- Provide adequate food, clothing or shelter (including exclusion from home or abandonment);
- Protect from physical and emotional harm or danger;
- Meet or respond to basic emotional needs;
- Ensure adequate supervision including the use of adequate care-takers;
- Ensure access to appropriate medical care or treatment.

([Working Together guidance](#), DfE 2024)

Flowchart





RESHAPED TOOL

Practitioner's name : _____ Date: __/__/____

Organisation: _____ Child's name: _____ D.O.B: __/__/____

		1 (evident all of the time)	2 (evident)	3 (evident most of the time)	4 (Not evident most of the time)	5 (not / never evident)
R	Routines and Boundaries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Evidence:				
E	Environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Evidence:				
S	Safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Evidence:				
H	Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Evidence:				
H	Hygiene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Evidence:				
A	Attachment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Evidence:				
P	Parenting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Evidence:				
E	Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Evidence:				
D	Diet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Evidence:				

Action / Next Steps:

RESHAPED TOOL AIDE MEMOIRE

This is the Aide Memoire to be used when completing the RESHHAPE screening tool to identify child neglect at the earliest stages, within an education setting. These gradings emulate the Graded Care profile 2 assessment tool, licensed under the NSPCC, but are less detailed.

The level of care is graded according to a descriptive scale. It ranges from 1 to 5, with 1 being the best and 5 being the worst. The GCP2 tool (NSPCC) quantifies this as follows:

1

Always met

All the child's needs are always met, and the parent goes the extra mile. The child is always first.

2

Met

All essential needs are always met. The child is priority

3

Met most of the time

Most of the time the essential needs of the child are met. The child and the carer are at par.

4

Not met most of the time

Most of the time the essential needs of the child are not met. Child is considered second.

5

Never met

The child's essential needs are not met. May be due to intentional disregard. The child is last or not considered.

Our RESHAPED screening tool uses the word 'evidenced' in place of the word 'met' as this is a local document, not licensed by the NSPCC.

Routines and Boundaries	1 (evident all of the time)	2 (evident)	3 (evident most of the time)	4 (Not evident most of the time)	5 (not / never evident)
	<ul style="list-style-type: none"> The parent/carer speaks about the child with great joy and spontaneously offers praise, providing generous emotional rewards for any achievements. Unconditional acceptance means that a parent or carer remains warm and supportive, regardless of whether the child is struggling academically or exhibiting behavioural issues. 	<ul style="list-style-type: none"> The parent/carer speaks warmly about the child and offers spontaneous praise/encouragement. Unconditional acceptance of any failures or difficulties, with the parent or carer providing appropriate criticism/advice when necessary. 	<ul style="list-style-type: none"> The parent/carer usually agrees with others' praise of the child but offers limited praise themselves. Most of the time, the parent is understanding of the child's difficulties, but occasionally, they may respond inconsistently or show signs of annoyance 	<ul style="list-style-type: none"> The parent/carer rarely praises their child's achievements and is generally indifferent to others' praise. Most of the time, the parent or carer doesn't accept the child when they fail, but they do accept them when they succeed. They might even reject the child if their needs are too high. 	<ul style="list-style-type: none"> The parent/carer is always averse to others praising the child, indifferent or dismissive of the child's achievements, and may even ridicule them. The parent or carer criticises the child for mistakes and ignores their achievements.
Environment	1 (evident all of the time)	2 (evident)	3 (evident most of the time)	4 (Not evident most of the time)	5 (not / never evident)
	<ul style="list-style-type: none"> Child arrives at school rested and ready to learn with all equipment, homework completed and tries hard in the classroom. 	<ul style="list-style-type: none"> Child arrives at school ready to learn with all equipment, homework completed and engaged with learning 	<ul style="list-style-type: none"> Child arrives at school with some equipment, ready to learn but less engaged in the classroom 	<ul style="list-style-type: none"> Child may be late for school, weary, a little untidy, trying to learn and engage with peers in the classroom 	<ul style="list-style-type: none"> Child arrives late, tired and untidy, without equipment and struggles to stay on task with learning, unable to engage with peers, and stays isolated.

Safety	1 (evident all of the time)	2 (evident)	3 (evident most of the time)	4 (Not evident most of the time)	5 (not / never evident)
	<ul style="list-style-type: none"> Child walks close to an adult when crossing if age appropriate. All safety measures are in place, electronic updates, close monitoring by parent/carer. Child left with a suitable, familiar adult. 	<ul style="list-style-type: none"> Child crosses with a senior school child, walking close together. All safety measures in place, monitored by parent/carer (no electronic updates). Child left with a suitable adult or older sibling/young person/or suitable arrangements made 	<ul style="list-style-type: none"> Child crosses with another child, possibly watched by a parent. Older primary/secondary school child may cross alone. Some safety measures in place, inconsistent monitoring by parent/carer. Suitable arrangements are usually made, with effort to ensure suitability. 	<ul style="list-style-type: none"> Child crosses alone, with parent believing they can/should do it. Casual approach to online safety, potentially risky/lack of monitoring. Often unsuitable arrangements, with little effort to ensure suitability 	<ul style="list-style-type: none"> Child crosses/walks alone without any parental concern or thought. Careless disregard for online safety despite understanding the dangers. No effort to check suitability, disregards concerns, or leaves child alone
Health	1 (evident all of the time)	2 (evident)	3 (evident most of the time)	4 (Not evident most of the time)	5 (not / never evident)
	<ul style="list-style-type: none"> The parent/carer seeks and acts upon appropriate medical advice when the child is ill and pursues preventative health advice. 	<ul style="list-style-type: none"> The parent/carer seeks suitable medical advice when the child is ill and follows health advice well. 	<ul style="list-style-type: none"> Most of the time, the parent/carer seeks appropriate medical advice when the child is ill. 	<ul style="list-style-type: none"> There are frequent inappropriate or delayed medical consultations. 	<ul style="list-style-type: none"> The parent/carer only seeks help or advice when the child is critically ill or not at all.
Hygiene	1 (evident all of the time)	2 (evident)	3 (evident most of the time)	4 (Not evident most of the time)	5 (not / never evident)
	<ul style="list-style-type: none"> The child is consistently bathed/has a bath, groomed, and exceptionally clean. 	<ul style="list-style-type: none"> The child is bathed/has a bath regularly and remains clean. 	<ul style="list-style-type: none"> The child is usually washed/has a wash but can sometimes be dirty. 	<ul style="list-style-type: none"> The child is mostly unwashed, dirty, and/or smelly. 	<ul style="list-style-type: none"> The child is rarely bathed or washed or encouraged to do so and is consistently dirty and smelly.

Attachment	1 (evident all of the time)	2 (evident)	3 (evident most of the time)	4 (Not evident most of the time)	5 (not / never evident)
	<ul style="list-style-type: none"> Both the parent/carer and child enjoy their time together, with the parent making extra efforts to ensure the child's happiness. 	<ul style="list-style-type: none"> The parent/carer and child both enjoy their interactions equally. 	<ul style="list-style-type: none"> The parent/carer and child usually enjoy their interactions, though sometimes the parent seems less enthusiastic. 	<ul style="list-style-type: none"> Most interactions are functional with little enjoyment for either the parent/carer or the child. Sometimes, the parent can seem indifferent. 	<ul style="list-style-type: none"> The parent/carer and child have poor interactions. The parent/carer may be emotionally cold or aversive, and the child often plays alone or is isolated. Neither finds pleasure in their interactions.
Parenting	1 (evident all of the time)	2 (evident)	3 (evident most of the time)	4 (Not evident most of the time)	5 (not / never evident)
	<ul style="list-style-type: none"> The child is excellently protected from all weather conditions. Their clothing fits perfectly and is meticulously cared for, cleaned, and ironed. 	<ul style="list-style-type: none"> The child has weather- protective clothing that fits well. The clothes are clean and well cared for. 	<ul style="list-style-type: none"> The child is usually dressed appropriately for the weather. Most of the time, the clothes fit well, but sometimes they don't. The clothing is generally well cared for, though occasionally not clean. The child may say that they are uncomfortable. 	<ul style="list-style-type: none"> The child's clothing frequently fails to provide adequate protection against various weather conditions. The garments often do not fit properly and are typically dirty, crumpled, and poorly maintained. 	<ul style="list-style-type: none"> The child lacks appropriate clothing, leaving them dangerously exposed to the elements. The garments consistently fit very poorly. The child's clothes are dirty, worn out, crumpled, and in a state of disrepair. The child may stand out from their peers.

Education	1 (evident all of the time)	2 (evident)	3 (evident most of the time)	4 (Not evident most of the time)	5 (not / never evident)
	<ul style="list-style-type: none"> The parent/carer is very engaged in the child's education, participating in school activities and supporting learning both at school and at home. 	<ul style="list-style-type: none"> The parent/carer shows interest in the child's education, providing support at home and in 	<ul style="list-style-type: none"> The parent/carer generally maintains the essential aspects of the child's education. 	<ul style="list-style-type: none"> The parent/carer often does not support the key elements of the child's education, leading to ineffective progress. 	<ul style="list-style-type: none"> The parent/carer provides no educational support and may even hinder the child's educational progress.
Diet	1 (evident all of the time)	2 (evident)	3 (evident most of the time)	4 (Not evident most of the time)	5 (not / never evident)
	<ul style="list-style-type: none"> The child is always provided with food and drink appropriate to their stage of development. There is a routine for meals and parents/carers eat with the children. Any special dietary requirements are always met. Parents/carers are enthusiastic about ensuring their child has a balanced diet. 	<ul style="list-style-type: none"> The child is consistently provided with appropriate food for their stage of development Any special dietary requirements are met consistently. Parents/carers understand the importance of a balanced diet. 	<ul style="list-style-type: none"> The child is often provided with food that is appropriate for their stage of development. Any special dietary requirements are met inconsistently. Parents/carers understand the importance of an appropriate diet but may not provide this consistently. 	<ul style="list-style-type: none"> The child sometimes presents as hungry. The child is provided with food/or can only access food that may not be appropriate for their stage of development. The child is sometimes expected to prepare their own meals or source ingredients. Any special dietary requirements are rarely met. 	<ul style="list-style-type: none"> The child frequently presents as hungry. The child is provided with food that is consistently inappropriate for their developmental stage. There is a lack of routine in meals, or the child is often expected to prepare and provide for their own meals. Any special dietary requirements are never met. Parents/carers are resistant to advice about a balanced diet.

				<ul style="list-style-type: none">• Parents/carers are indifferent to or do not understand, the importance of a balanced diet.	
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