HILLINGDON SAFEGUARDING PARTNERSHIP 7-MINUTE BRIEFING **GRADED CARE PROFILE 2**

7.When can the GCP2 tool be used?

Providing children and families with timely early support is the most effective way to safeguard children. Targetted early help can prevent children from suffering harm and enables parents to make changes before a difficulty becomes embedded.

GCP2 can be used by trained practitioners at any level of intervention from early help services through to statutory child protection plans. Where there are concerns about neglect the tool should always be used.

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6. What is happening, not why it is happening

GCP2 allows practitioners to understand what is happening for a child. It does not explain why, professional judgement should always be applied in any assessment of a child. 5. Interpretation This includes consideration of the impact of any parental issues and Analysis of the GCP2 is responding to any immediate risks identified.

1. Graded Care Profile and Neglect

Recognising and responding to neglect is one of the key priorities of Hillingdon Safeguarding Partnership. The use of the NSPCC Graded Care Profile 2 Assessment has been embedded within Children's Social Care for a number of years and is now being expanded to support wider multiagency use of the tool to assess neglect.

2. What is GCP2?

GCP2 is an evidence-based. and research informed tool developed by the NSPCC. It supports practitioners to measure the quality of care provided to an individual child, and focusses on the child's lived experiences.

Use of the tool supports practitioners to 'grade' aspects of family life using a scale of one to five. One is that the child's needs are always met, five is that they are never met.

GCP2 can help to inform decisions around threshold, set a benchmark and identify areas for focussed intervention.

3. GCP2 in Practice

The GCP2 Assessment is divided into 4 main areas of care; Physical, Safety, Emotional and Developmental Care. Trained practioners grade the quality of the care that the child is receiving in each area objectively using observation, self report from the child, or reliable 4. Areas of Care evidence from other sources, for example health records Assessment is time

limited and should

take place during a

period of stability.

A) Physical Care includes consideration of nutrition, housing clothing, hygiene and health

- B) Safety is considered in parent's presence, and when they are absent
- C) Emotional Care includes the responsiveness and sensitivity of the parent and consideration of the quality of the relationship between the parent and child.
- D) Developmental Care includes considering how the child's need for age appropriate stimulation, approval, discipline and boundaries, and nurture are met





informed by wider

contextual information and may inform a hypothesis. Each Area is scored individually. As a whole the profile can be scored as:

- Uniformly good or satisfactory (all 1 or 2)
- Uneven (variation across 1-5) need to decide how to improve those areas that score highly
 - Uneven (variation across 3-5) This denotes clear safeguarding concerns
 - Uniformly unsatisfactory (all 4 or 5) this may require an immediate safeguarding response