**Weight:**

**BMI (centile):**

**BMI Trend (consider attaching charts):**

**School/Nursery:**

**Name of Child:**

**DOB:**

**NHS No:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **YES** | **NO** | **COMMENTS** |
| Is the child currently engaged with Children’s Social Care? (eg Early Help, FSP, S17/47, Looked After Child) |[ ] [ ]   |
| Are other services involved? (eg CAMHS) |[ ] [ ]   |
| Has the child been reviewed by a paediatrician/known to CEW team? |[ ] [ ]   |
| Is the child severely obese? (BMI >99.6th centile) |[ ] [ ]   |
| Does the child have a weight management plan? |[ ] [ ]   |
| Has any progress been made towards the plan? |[ ] [ ]   |
| Does the child and/or parent have known neurodevelopmental/learning difficulties? |[ ] [ ]   |
| Are there concerns about school attendance? |[ ] [ ]   |
| Have ACEs been considered? |[ ] [ ]   |
| Are there other child safeguarding concerns? |[ ] [ ]   |

|  |  |  |
| --- | --- | --- |
| **PHYSICAL AND CO-MORBIDITY FACTORS**  | **EMOTIONAL/ MENTAL HEALTH FACTORS** | **PARENTAL, FAMILY & HOME FACTORS** |
| [ ]  Sleep deprivation/fatigue[ ]  Sleep apnoea[ ]  Continence issues[ ]  Joint pain/mobility problems[ ]  Type 2 diabetes[ ]  Asthma[ ]  Raised BP or cholesterol[ ]  Diagnosed health conditions[ ]  Genetic condition[ ]  Eating disorder[ ]  Other ……………………………………….. | [ ]  Worry/anxiety[ ]  Depression/self-harm[ ]  Low self-esteem[ ]  Unkempt appearance[ ]  Socially isolated[ ]  Anger/frustration[ ]  Concerns about bullying[ ]  Trigger e.g. separation of parents/bereavement[ ]  Comfort eating/using food to regulate emotions[ ]  Other ………………………………………..  | [ ]  Little to no routines or boundaries at home, including sleep and/or mealtimes[ ]  Parents unaware of what the child is eating[ ]  The child makes their own food choices[ ]  Parents do not see that child is obese[ ]  Family identity linked to obesity/intergenerational  weight issues[ ]  Parents/others family in the home are obese[ ]  Parents/carers poor mental health[ ]  Home educated[ ]  Other ……………………………………… |

|  |  |  |  |
| --- | --- | --- | --- |
| **SAFEGUARDING TRIGGER POINTS** | **YES** | **NO** | **COMMENTS** |
| Do the child and parents understand the concerns around the child’s weight? |[ ] [ ]   |
| Are the parents/carers or child willing to engage? (eg non-attendance, intermittent engagement, unwilling to make changes, refusing or ignoring professional advice, unwilling to set/ maintain boundaries) |[ ] [ ]   |
| Do parents/carers lack capacity to engage? (Parents unable to provide for health needs of child, unable to attend appointments, unable to make changes to lifestyle, weight continues to increase rapidly) |[ ] [ ]   |
| Is there disguised compliance? (Appear to follow advice but not making changes, using medical diagnoses to justify inability to make change, distracting from harm being experienced, aggressive/ confrontational) |[ ] [ ]   |
| Parents/carers play one professional off against another? |[ ] [ ]   |

**Please use the scale below to highlight the impact that obesity is having on the child’s health (developmentally, emotionally, physically and physiologically)**

0

1

10

9

2

8

5

7

6

4

3

May become breathless, poor self-esteem and body image, emerging impact on emotional health

Impacting development, struggles to play with friends, easily breathless and tired

Weight/ lifestyle is having little or no impact on health

Multiple comorbidities and evidence of significant harm to physical and/or emotional health

One comorbidity, multiple health risks developing, quality of life reduced

|  |  |  |
| --- | --- | --- |
| **WHAT ARE WE WORRIED ABOUT** | **WHAT IS WORKING WELL** | **WHAT NEEDS TO HAPPEN** |
|  |  |  |

 Have we heard the child’s voice? ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

 “*I want to be able to play with my friends and keep up with them and not be out of breath”, “I want to be able to run around and climb trees”, “I don’t want to be so tired after being active”*

**ADDITIONAL INFORMATION AND/OR TIMELINE**

**If this tool forms part of a CADS Referral:**

Has the referral been discussed with parents/carers? Yes [ ]  No [ ]

*(This should be done unless it is thought that it would increase the risk of significant harm)*

Are the parents likely to be receptive to support? Yes [ ]  No [ ]

Name of Referrer:

Organisation/Agency:

**Obesity Safeguarding Tool User Guide**

**Introduction and Context of Obesity Safeguarding Tool**

* The aim of this tool is to enable practitioners to complete a holistic assessment of a child where obesity is highlighted as a concern
* It focusses on how obesity affects the child’s health and well-being and can help to determine if there are safeguarding concerns within the context of the child’s health
* The tool can be completed with the family or within a safeguarding or case supervision context

**Obesity in the Context of Safeguarding**

* Obesity needs to be considered within the context of the family and their current situation. Obesity in children is not usually a safeguarding concern, however, professionals working with obese children should be mindful of the possible role of abuse or neglect in contributing to obesity
* Failure to reduce a child's weight alone is not necessarily a child protection concern. However, if a child’s weight is continuing to increase and parents are unable and/ or unwilling to make changes, then this may present as a safeguarding concern (Viner, 2010) and Child in Need support or Child Protection investigation can be sought under Section 17 or Section 47 of the Children’s Act as appropriate
* Obesity in children may be present as one aspect of broader concerns about neglect, an indicator and response to abuse or neglect, or a presenting factor of safeguarding concerns and neglect

**Growth charts**

Please consider attaching height, weight and BMI growth charts

***Acknowledgements***

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