





Engage RAG Referral System

- Engage receives more referrals than we can accept.
- To assist and support us in deciding which young people we work with and to what intensity we use a RAG system. This way every young person referred to us are prioritised according to their needs.
- We will gather information from young people, their families and from professionals that will enable us to assess each individual's situation.
- Gathering this information will also help our Youth Workers know more about the issues and concerns impacting on the young person. Once information is gathered the Engage team will know which referral is a priority and why.
- RED Young people with a lot of RED issues will be the priority they and their families are probably having the most difficulties and are likely to be deemed very vulnerable. RED referrals will be seen very quickly by the Engage Youth Workers. Our interventions could also be long term.
- AMBER these young people are also vulnerable and have issues and problems that
 can cause them and their family's significant difficulties. AMBER referrals will be seen
 quickly by the Engage Youth Workers. Our interventions will probably be medium term.
- GREEN these young people and their families generally have support from other
 organisations and can cope with many of the difficulties that arise. These families ask
 for help and have some knowledge of where to find support. GREEN young people
 and their families may not be seen by us or if we do intervene it will be on a short-term
 focused piece of intervention. They may have to wait for our support.



ENGAGE Youth & Families RAG Referral Criteria: RED

Family/ Guardianship/ Carer

Issues/ Concerns

- Domestic violence or domestic abuse situation.
- □ Family hard to engage with/does not ask for help.
- □ Family in serious debt / financial hardship.
- □ Parental significant drug/alcohol issues.
- □ Parents with significant MH issues.
- □ Family and/or child homelessness.
- Parent in prison/significant criminal history.
- □ Recent Family Bereavement.
- □ Recent parental separation.
- □ Child in care.
- □ Refugee/Asylum Seeker.
- □ Has gone missing in recent past.
- Family against identity issues.

CSE (Child Sexual Exploitation)

Sexualised Behaviour

- □ Significant recent Child Sexual Exploitation risk
- Teenage pregnancy.
- □ In an abusive relationship.
- Persistent unprotected sexual activity.
- Allegations of rape/sexual misconduct.
- Persistent usage of pornographic images.

CCE (Child Criminal Exploitation)/ Economic Exploitation

Criminal Behaviour

- □ Under bail conditions.
- □ Significant Police involvement.
- □ Recent Gang involvement.
- □ Recent Violent behaviour.
- □ Recent prosecution for knife/weapon crime.
- □ Drug dealing/runner.
- □ Significant recent Child Economic Exploitation Risk.

Mental/ Emotional Health

- □ No access to, or denied access to CAMHS.
- Significant Mental Health Difficulties.
- Undiagnosed mental health issues.
- Complete lack of self-control, inability to self-regulate own emotions.
- □ Attempted Suicide.
- □ Recent significant self-Harm.
- Struggling with issues of sexuality.

Education

- □ Complete breakdown of education.
- □ Refusing to attend educational provision.
- Medically too unwell to attend education.
- □ No EHCP assessments (if appropriate).

Child Health Issues

- □ Recent Significant illegal drug and alcohol usage.
- Regularly engages in class A drug use.
- Morbidly obese for age.
- Poor sleeping patterns.
- Inactive lifestyle.
- life-limiting health issues.





ENGAGE Youth & Families RAG Referral Criteria: AMBER

Family/ Guardianship/ Carer

Issues/ Concerns

- Young Carer.
- Family struggling to cope with issues but engages well.
- □ Parents who are anxious/reluctant to engage in services.
- □ Family receives limited support from other agencies.
- Past history of domestic violence.Some drug/alcohol misuse.
- □ Past history of prison/criminal history.
- History of going missing.
- Inability to understand and support identity issues.

CSE (Child Sexual **Exploitation**)

Sexualised Behaviour

- □ History of Child Sexual Exploitation/Economic exploitation.
- Risk taking sexual behaviours.
 Lack of sex/relationship education.
- □ Persistent inappropriate sexualised language.

CCE (Child Criminal Exploitation)/ **Economic Exploitation**

Criminal Behaviour

- □ With Youth Offending Service.
- History of offending with risk of reoffending.
 Past involvement in gang related criminal activity.
- Past violent behaviour.
- Past experience of knife carry.
- Past events of drug dealing/running.

Mental/ **Emotional** Health

- Currently being assessed for access to CAMHS.
- Mental health difficulties but these are getting treated / managed well.
- □ Able to manage self and regulate emotions with some support.
- History of Self Harm.
- Has current suicidal thoughts.
- Lack of support with identity issues.

Education

- □ In School and receives support to keep them there.
- Receiving support in alternative educational provision.
- Currently undergoing EHCP assessment.

Child Health Issues

- Overuse of alcohol.
- □ Cannabis misuse by young person.
- Experimenting with illegal drugs.
- Smoking tobacco.
- Physically unhealthy.





ENGAGE Youth & Families RAG Referral Criteria: GREEN

Family/ Guardianship/ Carer

Issues/ Concerns

- □ Family copes well with issues and asks for help when they need it.

 Family receives significant support from
- other agencies.

CSE (Child **Sexual Exploitation**)

Sexualised Behaviour

- □ Not sexually active.
- Not in a relationship.
- □ In a sexual relationship but safe sex practiced.
- □ Authorities are aware and working on these issues.

CCE (Child Criminal Exploitation)/ **Economic Exploitation**

Criminal Behaviour

- Makes poor choices and decisions but has guidance and advice.
- □ Authorities are aware and working on these issues.

Mental/ **Emotional** Health

- □ Currently accessing CAMHS, mental health practitioners, relate, school counsellor etc.
- □ Authorities are aware and working on these issues.

Education

- Settled into education and with good attendance.
- □ Has an EHCP and relevant plans are working.

Child Health Issues

- Currently accessing CAMHS, mental health practitioners, relate, school counsellor etc.
- □ Currently undertaking a physical health plan.
- Authorities are aware and working on these issues.





A huge thank you from ENGAGE to The National Lottery Community Fund.

The opportunities through your funding have enabled young people and their families to receive the support they have needed and provided a range of positive experiences that have helped them to grow, thrive and build a connection to their local communities.

With special thanks to the National Lottery players for their support, without them projects such as ENGAGE could not happen.







Engage is our Youth & Family Support Project.

Engage offers vulnerable young people (11-18 years) and their families living in Melton Mowbray practical help, advice, support, and activities that build family strength, resilience, and independence.

Funded by The Big Lottery, Engage is a collaborative project with Above & Beyond CIC and Melton Learning Hub.

You can refer a young person/family to our service that needs our support. You can also make a self-referral for your child and family unit.

Please contact Andrew Lake at andrew@aboveandbeyondcic.org for more information or call 07496 152 247.





https://www.aboveandbeyondcic.org/engage





ENGAGE Youth & Families RAG Referral Criteria

	RED	AMBER	GREEN
Family/Guardianship/Carer Issues/Concerns	 Domestic violence or domestic abuse situation. Family hard to engage with/does not ask for help. Family in serious debt / financial hardship. Parental significant drug/alcohol issues. Parents with significant MH issues. Family and/or child homelessness. Parent in prison/significant criminal history. Recent Family Bereavement. Recent parental separation. Child in care. Refugee/Asylum Seeker. Has gone missing in recent past. 	 □ Young Carer. □ Family struggling to cope with issues but engages well. □ Parents who are anxious/reluctant to engage in services. □ Family receives limited support from other agencies. □ Past history of domestic violence. □ Some drug/alcohol misuse. □ Past history of prison/criminal history. □ History of going missing. 	 □ Family copes well with issues and asks for help when they need it. □ Family receives significant support from other agencies.
CSE (Child Sexual Exploitation) Sexualised Behaviour	 Significant recent Child Sexual Exploitation risk Teenage pregnancy. In an abusive relationship. Persistent unprotected sexual activity. Allegations of rape/sexual misconduct. Persistent usage of pornographic images. 	 □ History of Child Sexual Exploitation/Economic exploitation. □ Risk taking sexual behaviours. □ Lack of sex/relationship education. □ Persistent inappropriate sexualised language. 	 □ Not sexually active. □ Not in a relationship. □ In a sexual relationship but safe sex practiced. □ Authorities are aware and working on these issues.
CCE (Child Criminal Exploitation)/ Economic Exploitation Criminal Behaviour	 Under bail conditions. Significant Police involvement. Recent Gang involvement. Recent Violent behaviour. Recent prosecution for knife/weapon crime. Drug dealing/runner. Significant recent Child Economic Exploitation Risk. 	 □ With Youth Offending Service. □ History of offending with risk of reoffending. □ Past involvement in gang related criminal activity. □ Past violent behaviour. □ Past experience of knife carry. □ Past events of drug dealing/running. 	 □ Makes poor choices and decisions but has guidance and advice. □ Authorities are aware and working on these issues.
Mental/Emotional Health	 No access to, or denied access to CAMHS. Significant Mental Health Difficulties. Undiagnosed mental health issues. Complete lack of self-control, inability to self-regulate own emotions. Attempted Suicide. Recent significant self-Harm. 	 Currently being assessed for access to CAMHS. Mental health difficulties but these are getting treated / managed well. Able to manage self and regulate emotions with some support. History of Self Harm. Has current suicidal thoughts. 	 Currently accessing CAMHS, mental health practitioners, relate, school counsellor etc. Authorities are aware and working on these issues.
Education	 Complete breakdown of education. Refusing to attend educational provision. Medically too unwell to attend education. No EHCP assessments (if appropriate). 	 □ In School and receives support to keep them there. □ Receiving support in alternative educational provision. □ Currently undergoing EHCP assessment. 	 □ Settled into education and with good attendance. □ Has an EHCP and relevant plans are working.
Child Health Issues	 □ Recent Significant illegal drug and alcohol usage. □ Regularly engages in class A drug use. □ Morbidly obese for age. □ Poor sleeping patterns. □ Inactive lifestyle. □ life-limiting health issues. 	 Overuse of alcohol. Cannabis misuse by young person. Experimenting with illegal drugs. Smoking tobacco. Physically unhealthy. 	 Currently accessing CAMHS, mental health practitioners, relate, school counsellor etc. Currently undertaking a physical health plan. Authorities are aware and working on these issues.

