|  |  |
| --- | --- |
| This form has been completed in relation to: *(tick below)* ***Please ensure that this form is accurately dated*** | **Date:**  |
|  |
| [ ]  | **Level 4 – Safeguarding Referral** - Please ensure all immediate or significant safeguarding concerns are telephoned to the MASH on 01803 208100 and then followed by this form. If you require an immediate safeguarding response you will need to telephone the Police on 999. Non urgent referrals do not require a telephone call and should just be sent to the Mash email address with full details recorded on this form which should be clearly dated.  |
| [ ]  | **Level 4 - Children with Disabilities Team Support –** please ensure you have reviewed the Torbay Children with Disabilities Eligibility Criteria and attached the document to this referral form.  |
|  | **Level 2/3 – Request for Early Help** – An Early Help Assessment must be completed for any Level 2/3 concerns. This can be found at [Hub - Torbay Safeguarding Children Partnership](http://torbaysafeguarding.org.uk/professionals/hub/) It is no longer necessary to complete a Mash referral in addition to this.  |

Please ensure you have sought appropriate advice from your Designated Safeguarding Lead prior to submitting a referral unless there are immediate or significant safeguarding concerns. Please provide details of your discussion and confirm the date that this took place:

|  |
| --- |
|  |

|  |
| --- |
| Details of the child / young person and any other people living in the family home including parents/ carers. Please also share the details of any other person whose details you feel are relevant to the child and/ or the concerns.  |
| First name | Last name | Date of birth | Address | Contact number  | Gender | Relationship to child | Ethnicity | Education provider |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

|  |
| --- |
| Referrer details: |
| Name |  |
| Job title/relationship to child |  |
| Agency name and address |  |
| Email address |  |
| Telephone number |  |

|  |
| --- |
| Supporting agencies: Input as many as you feel necessary |
| Agency | Contact person | Contact details |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Parental Consent** |
| Gaining parental consent at the earliest opportunity allows us to respond to safeguarding concerns quickly to build better relationships particularly if immediate safeguarding concerns have not been identified. As the referrer, it is your responsibility to speak to the parents or carers about your concerns and secure their consent to refer their child/ children into Torbay Children’s Services. It is important that you give consideration to Article 8 of the European Convention of Human Rights – ‘Right to respect for private and family life’ and ensure that any referral is proportionate and necessary, particularly if you are referring without consent. We need you to seek consent from parents or carers when making a referral where this does not put the child at risk of harm (Working together 2018). If you are unable to gain consent it is helpful for us to understand why this has not been possible so we can clearly record the reasons. |
| [ ]  I have spoken to the child’s parents/carers and they have given me consent to make this referral [ ]  I have spoken to the child’s parents/carers and they are aware I am making this referral but have not given me consent.[ ]  I have not spoken to the child’s parents/carers and I have provided an explanation below as to why this has not been possible |
| The reason I have not spoken to the child’s parents/carers: |
| To support restorative ways of working we expect the referrer to have an open and honest conversation about the concerns you have with the child/young person where you feel that this is proportionate and appropriate to do so. As a guide we would suggest that it would be appropriate to seek consent from the child/young person where they are aged 12 or above and have the capacity to understand what they are consenting to before making a referral unless this puts the child at risk of harm. If you are unable to obtain consent you must explain why this is not possible. |
|  [ ]  I have spoken to the child/young person and they have given me consent to make this referral [ ]  I have spoken to the child/young person and they are aware I am making this referral but have not given me consent [ ]  I have not spoken to the child/young person and I have provided an explanation below as to why this has not been possible |
| The reason I have not spoken to the child/young person: |
| In order to ensure that the family are provided with the most effective available support it may be appropriate to share some personal information about the family between agencies / community groups. This information may include details about the child/ren, parents/ carers and other significant family members. The type of information shared might include: Any previous family involvement with Children’s Services, Police, Courts and Probation Services; aspects relating to employment, anti-social behaviour, violence in the home, substance misuse, educational attendance and behaviour and health issues. This information may also be shared with the Ministry for Housing Communities and Local Government under the national Troubled Families Programme.It is important that families are made aware of this and it should be discussed with a family when seeking consent to make the referral.  In some circumstances, information can be shared between agencies without consent, for example where sharing information might prevent a crime or safeguard the welfare of a child or young person or a vulnerable adult.  Even in these circumstances, it is normal practice to obtain consent where possible.If you or the family have concerns about information being shared with particular agencies or individuals please give further information below: |
|  |
| **What are you worried about and why?** What have you seen/heard that makes you believe the child is at risk? Be specific, use examples and evidence including how long you have had these concerns? Is this information first hand and are these concerns shared by others? What changes would you need to see in the family to assure that the risk of harm has reduced? |
|  |
| **Have you used any assessment tools to evidence your concerns?**  |
| Have you considered whether the child/ young person could be at risk of Exploitation?[ ]  Yes [ ]  No [ ]  Not applicable If yes, please state whether you have completed the Exploitation Toolkit and please add any evidence as an attachment to this referral. [Missing CSE - Torbay Safeguarding Children Partnership](http://www.torbaysafeguarding.org.uk/professionals/missing-cse/)Date toolkit completed: Outcome/ grading of toolkit:  |
| Have you considered whether this child/ young person is experiencing neglect? [ ]  Yes [ ]  No [ ]  Not applicable If yes, please state whether you have completed the Graded Care Profile 2 Neglect Tool and please add any evidence as an attachment to this referral. [Graded Care Profile 2 - Torbay Safeguarding Children Partnership](http://www.torbaysafeguarding.org.uk/the-partnership/graded-care-profile-2/)Date Graded Care profile 2 completed: Outcome/ Grading:  |
| Is domestic abuse a worry for this family? [ ]  Yes [ ]  No [ ]  Not applicable If yes, have you completed a DASH risk assessment? (You may also have completed a DARAC assessment if you are working with the family) Please add any evidence as an attachment to this referral. [MARAC - Are you OK?](https://www.areyouok.co.uk/im-a-professional/marac/)Date Risk Assessment completed: Outcome/ Grading:  |
| Is Harmful Sexual Behaviour a worry for the child/ young person? [ ]  Yes [ ]  No [ ]  Not applicable If yes, have you referred to the AIM Project Checklist? You can access the checklists through completing a short session on ilearn: [Course: AIM Project - Accessing the Checklists (learningpool.com)](https://torbay.learningpool.com/course/view.php?id=1099)Date checklist used:Outcome of checklist: Do the child/ children’s parents/ carers hold any roles or a professional position where they are in a position of trust or are responsible for the care of /or come in to contact with children or vulnerable adults? [ ]  Yes [ ]  No [ ]  Not applicable If yes, has the Local Authority Designated Officer (LADO) been informed? [About the LADO - Torbay Council](https://www.torbay.gov.uk/children-and-families/services-and-support/sars/lado/)Date of LADO discussion/ referral: Outcome of discussion/ referral:  |
| **What is going well for the family/ What are the family strengths?** What reassures you that the child can be made safe and what do you see the parent/carer doing that helps you believe that the risk is reducing? For example, consider routines, activities the family do together, what would the family feel are positives or as going well, who supports the family, an understanding of relationships. |
|  |
| **Impacting or additional factors:** Is there anything that makes you feel unsure about your judgement or that you don’t know enough detail about? Are there things affecting the parent that is making it harder or more difficult to deal with the situation? For example; learning disabilities/mental health concerns/changes to family dynamics/risk of homelessness. |
|  |
| **Observations/behaviours of child/young person (if aged between 0-5 years):**Consider for example, interaction with parents and others, child’s development, physical appearance. |
|  |
| **Overview of your agency’s involvement:** Include factors relevant to your support/service: reason for your involvement, what work you have planned with family, what work have you achieved, what has stopped/hindered progress, what has worked so far, how long do you plan to be involved and what work still needs to be undertaken etc. |
|  |
| **Voice and views of the child/young person:** For example, is there anything they are worried about? What would they say is going well/ not so well? Who is important to them? Is there anything they would like to change? |
|  |
| **Voice and view of parent(s)/carer(s):** What is their view on the concerns you have raised? Are there any differences of opinions? What would they say is going well/ not so well for them as a family? |
|  |
| **Any other relevant information that would help the MASH best understand the needs of the family:** Are the family experiencing any particular difficulties or additional stress - housing and money issues? Adult behaviour and relationship difficulties? Crime and anti-social behaviour or neighbourhood issues? Difficulties in accessing education and learning? Are there any worries about children’s behaviour and relationships, child/young person’s health and parent/carer wellbeing? |
|  |
| **Have you discussed with the family whether they would benefit from a Family Group Conference and gained consent for the family to be contacted by the FGC team for an initial discussion about what the service can offer? (You can access info on Family Group Conferences here**  [Family Group Conferences - Torbay Council](https://www.torbay.gov.uk/children-and-families/services-and-support/fgc/) )**A parent/ carer consents to being contacted by a member of the FGC Team:**[ ]  Yes [ ]  No [ ]  Not applicable  |

|  |
| --- |
| **Interim Action Plan: What support will you be providing to the child/ family before receiving a response from Children’s Services?** |
| Action | Outcome | By Who? | By When? |
| *e.g. Ensure the children have daily check ins.*  | *To provide immediate support to the child by a familiar adult.* | *School DSL (include name)*  | *Daily* |
|  |  |  |  |

Please return the completed referral form to Torbay Multi-Agency Safeguarding Hub via secure email to mash@torbay.gov.uk

Please be aware that Torbay MASH is only open to receive new referrals between the hours of 9.00am and 4.30pm Monday – Thursday and 9.00am and 3.45pm on a Friday. If your referral was sent outside of these times this will remain unread until the next working day, and no action will be taken in respect of the concerns you have raised until the office is next open. If the concerns you are raising need a response outside of the MASH opening hours then you should make contact with the Out of Hours Duty Team by telephone on **0300 456 4876** for significant safeguarding concerns. You can also ring the police direct on **999** in any situation requiring an emergency response.