

Multi-Agency Referral and Assessment Form Guidance

Introduction

The revised multi- agency referral and assessment form (MARF) has been introduced with the agreement of the MSCB and takes account of recent developments and national initiatives such as the Common Assessment Framework (CAF), the Integrated Children's System (ICS) , and feedback from practitioners.

The referral and assessment form constitutes part of Manchester's recently introduced Multi- Agency Case Planning Process for Children with Additional Needs, and the MSCB Safeguarding Procedures. It is compliant with the recommendations made by Lord Laming's Inquiry into the death of Victoria Climbié.

The guidance also uses the term request for support as well as referral. This acknowledges that the term referral sometimes has a "dump and go" connotation. We are encouraging a culture of shared responsibility, which recognizes that although the need for support increases as the child moves up the continuum of need, universal services are key providers of this support.

Consultation

It is recognised that practitioners are sometimes unsure whether a referral/request for support is required, particularly to Children's Services Social Care. If you are not sure if a referral/request for support from Children's Services Social Care(CSSC) is required, please seek advice. Consultation is available from your agency advisor and also from the social workers in the assessment teams based in North, Central and South. Consultation will facilitate a shared understanding of the child's needs and how best to meet them, and minimise misunderstandings. All consultations will be recorded.

The Multi- Agency Referral and Assessment Form

The multi- agency referral and assessment form is the process by which referrals/requests for support and advice are made between agencies. The form has been designed to share accurate high quality information about a child, and their needs, and to assist the referrer to provide information about the child/ren concerned using the following three domains taken from the Framework for Assessment (DoH 2000) and the Common Assessment Framework:

- Child's Developmental Needs
- Parenting Capacity
- Family and Environmental Factors

The aim of the interagency referral form is to provide accurate, up to date and high quality information including:

- Accurate and up to date factual information about the child and their family
- Assessment information and observations of the child and their family circumstances
- A multi agency approach to assessments based upon a common language that is used by all agencies to ensure that there is consistency by all agencies undertaking assessments with children and families
- Details of any plans made and actions taken prior to the referral/request for support

This will inform shared judgements and decision making about how best to meet the child's needs.

The information provided will help determine the urgency and nature of any action required, particularly the need for statutory intervention. The Priority Guidance Rating (PGR) will no longer be used in order to enable practitioners to focus on the child's needs and reach mutual agreement as to how they can best be met.

The multi-agency referral and assessment form is to be used when practitioners make a referral/request for support to Children's Services Social Care. it meets **Lord Laming's recommendation 21 - 'When a professional makes a referral to Children's Services Social Care(social services) concerning the well-being of a child, the fact of that referral must be confirmed in writing by the referrer within 48 hours'. In Manchester, the expectation is that the referrer will confirm in writing within 24 hours.**

If you are not sure if a referral/request for support from Children's Services Social Care(CSSC) is required, please seek advice. Consultation is available from your agency advisor and also from the social workers in the assessment teams based in North, Central and South. Consultation will facilitate a shared understanding of the child's needs and how best to meet them, and minimise misunderstandings. All consultations will be recorded.

Guidance for completing the Multi-Agency Referral and Assessment Form

The multi-agency referral and assessment form requires the referrer to complete (to the best of their knowledge) information known about a child/ren and their family. If a common assessment has been completed, this can be attached and

referred to in the referral form in the assessment sections to avoid the need to repeat and duplicate information.

The following assists with the completion of the form.

Referral From:

State your professional title/designation, first name and your surname.

Agency:

State the organisation you work for e.g. Education or Health

Address

State the address of your place of work

To:

Clearly write the name of the service/ person/district/designated person or office you are sending the multi-agency referral form to e.g. Duty social worker or Jane Hill - Health Visitor

Agency:

State the agency you are referring to/ requesting support from e.g. Children's Services Social Care/ Health/Education/Early Years & Play

Date of Referral:

It is essential that the date a referral is made is clearly stated on the form.

Time of Referral

It is essential that the time a referral is made is clearly stated on the form. This ensures that the referral is **compliant with Laming Recommendation 12.**

Is the Child Aware of the Referral?

Simply tick in the box 'Yes' or 'No'. It is important to note that in most circumstances informing a child or young person that you are going to make a referral/request for support and for what reason is good practice. However, you need to use your professional judgment, as there are other circumstances when it is not appropriate e.g. the child/young person's age and level of understanding, or if to do so would place the child at risk of significant harm.

Are the Parents/Carers Aware of the Referral?

Simply tick in the box 'Yes' or 'No'. You should inform the parent/s or carer that you intend to make a referral (unless to do so would place a child/ren at risk). It is critical to develop a co-operative working relationship from the outset (wherever possible), so that parents and caregivers feel respected and informed, that professionals are being open and honest with them and they in turn are confident about providing vital information about their child, themselves and their circumstances.

Have They Given Permission for the Referral?

Simply tick in the box 'Yes' or 'No'. It is good practice to seek permission from the parent/carer to make a referral. Unless there are exceptional circumstances as outlined in MSCB procedures, it is expected that parent/cares will have given

permission. Working in partnership with the parent/ carer by explaining the purpose and reason for the referral is likely to encourage a better working relationship with parent/carers. If you have ticked no, give reasons why e.g. it is an emergency and parent/carers are not able to be contacted, or it meets MSCB criteria. If in doubt, please seek advice.

Reason for Referral/request for Support

Briefly outline the reason for the referral/request for support, being specific about what support is needed for the child/ren and family and why ,and about the nature of any concern for the child's welfare, including the need for protection.

Child's Name and ID

It is not necessary to fill in the ID section unless to give the child's agency ID number /reference is considered helpful.

State clearly the correct spelling of the child/ren's full name and any other name that the child is known by.

DOB & Age and Expected Date of Delivery

State the full date of birth of the child/ren and the age at the time of the referral. State if the child is unborn and the expected date of delivery.

Address, postcode tel.

State clearly the full home address of the child including the postcode and phone number. If the child is residing at more than one address or is residing away from their home address please include all the details under the section current address(if different from above). **NB** an alternative home address may indicate that the child is privately fostered. If enquiries confirm this, a referral to Children's Services Social Care is required. If in doubt seek advice.

Ethnicity

State clearly, to the best of your knowledge, the ethnicity of the child. This information may assist the person/agency you are referring to, by identifying services that meet the child's ethnic background.

Language

It is essential to identify the child's first language. This information will ensure that the person/agency you are referring to is aware of any language needs when engaging and communicating with the child/ren.

It would be helpful to include any other communication needs in this section.

Disability

Please tick yes or no if the child is disabled – give more details of the disability in the assessment section (child' s developmental needs)

Is an Interpreter needed?

Laming Recommendation 12 states that when communication with a child is necessary for the purpose of safeguarding and promoting the child's welfare, and the first language of that child is not English, an interpreter **must** be used. If the child's first language is not English and an interpreter is not needed, please state clearly the reason why.

Details of other children who live in the household

Please give details of other children in the households and if they are subject to referral/request for support too.

Name of Child's Main Carer & Relationship to the Child:

State the name of the person/s who is the main carer for the child/ren and **if known** state whether the carer has parental responsibility. Record the nature of the relationship to the child i.e. mother, father, grandparent, aunt etc.

If the address is different to the child's home address this may indicate a private fostering arrangement. If enquiries confirm this a referral to Children's Services Social Care is required. If in doubt, seek advice.

If the parent is not the main carer and resides at a different address, please give information about the parents here but make it clear if they are not the main carer.

The form asks for details of the key agencies involved with the child and family.

Lord Laming Recommendation 12 states that front line staff which come into regular contact with children must include the child's school and other basic information such as nursery.

GP & Telephone Number

If the child's General Practitioner is known please state clearly, the full name and phone number any other details about the GP, if known.

Child's Health Visitor,

Nursery/ School

The form also allows for other agencies to be listed. Information sharing good practice asks us to ensure that agencies consent/know that information they hold may be shared. Details of agencies involved allows for easier sharing of information and therefore more effective provision of service/support

Assessment Section

The information you share in this section is essential for the receiver of the referral/request for support. It will provide a valuable picture of the child/ren's current and future development needs, will assist with identifying support and with the planning of appropriate services.

If you have completed a common assessment, you can attach it to the referral/request for support and state please see common assessment in the following headings.

Child/ren's Development Needs

Please provide a brief account of the child/ren's Health issues e.g. Immunisations where appropriate and developmental checks, dental and optical

care, any illnesses, disabilities or hospitalization, Education issues e.g. cognitive development, interaction with other children/adults and attendance at school, observations about the child/ren's behaviour and social presentation, and any other information relevant to the child's developmental needs. It is important that you highlight what the strengths are of the child and family and what is working well for the child and family, as well as any needs/deficits.

Parent/Carer's Parenting Capacity

The information you share in this section is essential for the receiver of the referral/request for support. It will provide a valuable picture of your observations / knowledge about the parents/carer parenting of the child/ren. The information you provide will assist with identifying support to the child and family and with the planning of appropriate services. Please provide a brief account to the best of your knowledge on the parents ability to provide basic care e.g. shelter, clean and appropriate clothing and adequate personal hygiene, protection from significant harm or danger, emotional warmth towards the child, encouragement and praise, a sufficiently stable environment with a secure attachment to the primary carer(s)'s. Indicate the nature of any parental difficulties and how they impact upon their care of the child. It is important that you also highlight what the strengths are, and what is working well for the child and family, as well as any needs/deficits

Context (Family & Environmental Factors)

The information you share in this section is essential for the receiver of the referral/request for support. It will provide a valuable picture of your observations and knowledge about the child's family situation, circumstances and their environment. Please provide information to the best of your knowledge about any members of the child's wider family who have a significant relationship with the child, any significant changes within the family like a separation between parents and what the sibling relationship is like (if appropriate). Are you aware of any housing issues that are having an impact on the child? Are there any issues such as employment and income that are having an impact on the child? Are the parents and child experiencing any difficulties in their local neighbourhood or community or are they an isolated family within the community. It is important that you highlight what the strengths are, and what is working well for the child and family.

Child/ren's view of needs

Children have strong opinions about their needs and ways in which they can be met and are able to express their views and feelings if professionals create the right atmosphere for them to do so. There are always issues such as language difficulties, developmental level, disability, gender, culture and age that need consideration, therefore it is important to establish the most appropriate method of communication. This is to be encouraged by all professionals who come into contact with vulnerable children. It will ensure that the child has been given every opportunity to express their views.

Parent/Carer's View of Needs

Parents should be encouraged to express their own views about their child's needs. They should be informed about the referral (unless to do so would place a child/ren at risk) and asked what they understand will assist in supporting the child.

Action Taken

i) Action Taken:

What support have you already provided from your service to address the concerns or needs of the child? Has a common assessment been undertaken and a plan for the child agreed and implemented? What was the outcome? What has worked/not worked, is there a lead professional ?

ii) Action Requested Required:

The information provided here and above will help determine the urgency and nature of any action required, particularly the need for statutory intervention. What further support is needed to meet the child's needs? Is the child's primary need for protection and is urgent statutory intervention now required?

If you are faxing the referral form, please write in clear capital letters the name of the child/ren at the top of each page of the referral form in case the sheets become separated from each other. If possible please type the form.

Feedback will be provided within one working day.

All referrals to Children's Services Social Care have to go through the Contact Centre. (Consultation can be accessed directly via the District Social work Teams).

Telephone number: 0161 255 8250

Minicom number: 0161 272 8770

Fax number: 0161 255 8266