How to Refer to Children’s Social Care for a Statutory Assessment[[1]](#endnote-1)

**CONTACT/ REFERRAL – what ‘good’ contact/referral looks like?**

1. **Steps to be taken by the referring agency prior to making a referral to children’s social care:**
* Any safeguarding or child protection concerns should be discussed initially with the professional’s line manager or designated safeguarding/ child protection officer the organisation. The conversation should consider the London Borough of Tower Hamlets Safeguarding Children’s Board Threshold Document.
* If a referral to statutory children’s social care service is warranted, the professional can either contact the Tower Hamlets dedicated MASH child protection advice line to discuss this further, to alert the team to potential emergency, or to email the referral to the MASH Contact/ Referral inbox.
* Prior to making a referral, the referring professional needs to discuss the concerns referred with the child’s/ children’s parents, gain their response and establish whether the parents of the child give consent to information sharing. If parental consent is not sought prior to referring to the MASH, the professional needs to record a clear rationale as to why this was not done

<http://www.londonscb.gov.uk/files/2010/mash/mash_info_sharing_guidance_final_version_opt.pdf>

1. **Consent**

The MASH is a consent based model. Each professional should aim to have a dialog and be honest with the parent(s) about the concerns and the steps they intend to take– such approach is more likely to achieve a better engagement by the parent(s) and outcomes for children. The Signs of Safety methodology adopted in Tower Hamlets provides a good basis for an open and ‘work as a team’ approach with children and families.

There will be times when the MASH receives enquiries for which consent has either been refused or not sought. This would include anonymous enquiries as well as cases where the practitioner has, for whatever reason, failed to obtain consent. In such instances, the respective professional needs to balance what might happen if information is shared with other professionals and what might happen if they don’t.

**Consent should not be sought if it can be evidenced that in doing so would:**

* place a person (the individual, family member, worker or a third party) at increased risk of significant harm (if a child) or serious harm (if an adult)
* prejudice the prevention, detection or prosecution of a serious crime – this is likely to cover most criminal offences relating to children
* lead to an unjustified delay in making enquiries about allegations of significant harm (to a child) or serious harm (to an adult)
* When a decision to share without consent is made, the decision must be recorded along with the justification for it.

There are 3 ways of making a referral to Childrens’ Social Care (CSC). If your agency has already been working with the child you are likely to have produced a Common Assessment Framework (CAF) document. The CAF can be used to refer your concerns to CSC. Alternatively if your agency has been using the Signs of Safety (SOS) methodology in working with children and families, you can refer to CSC using the SOS mapping tool to identify concerns. Finally you can use the revised Inter Agency Referral Form (IAF) to send us your concerns about a child. The rest of this note will focus on how to refer using the IAF.

If you believe a referral is needed, you should call Tower Hamlets MASH [020-73645601, or 5606, 3859, 2972] to discuss with a duty screening worker. If you’re calling from a school, you should call the Child Protection Advice Line (0207364 3444) to discuss further. If lines are busy you should email the concerns, marking them as Child Protection Referral, to the IPST email inbox [IPST@towerhamlets.gov.uk].

It is of crucial importance that CSC has a clear documented record of the concerns you are reporting since this contact from your agency may be the first step in a statutory process that progresses to a Child Protection Inquiry, and a Child Protection Conference or may require the intervention of the Family Court to safeguard the welfare of a child. It will also be important to distinguish in your referral between facts – those matters that you know directly to be correct usually with some corroboration or confirmation from other sources- and opinion – issues that you believe to be correct but which may be challenged or contested by others.

The MASH screening worker will support you to gather and prioritise as much information as you have, using the series of questions, set out in the IAR. You may not have all the information requested on the IAR but it will reduce any delay we face in trying to clarify key details (especially biographical information) if you can provide as much of the basic details on the family as possible.

The revised IAR now includes some questions to assist you in clarifying your immediate concerns. You will note that following the biographical details section, we have retained the general statement that we ask you to make on the reasons for your referral. The IAF then asks you to respond to a series of questions, using the Signs of Safety methodology, designed to focus on your principal concerns. Our expectation is that these questions will assist you to focus you on the core issues and while, generally speaking, we welcome as much information as possible, we ask that you make every effort to focus the concerns in clear, concise language. The MASH screener will offer you guidance throughout the process. At the end of this exercise, we will ask you to rate your concerns in terms of child safety and welfare. This will provide a very helpful benchmark for our response to the referral.

All non- urgent referrals should be sent to CSC using the IAF and sent to the email address above.

**Associated Guidance and Links**

MASH London Information Sharing Guidance:

<http://www.londonscb.gov.uk/files/2010/mash/mash_info_sharing_guidance_final_version_opt.pdf>

Tower Hamlets LSCB

<http://www.childrenandfamiliestrust.co.uk/the-lscb/>

1. Practice Guide for good referrals – LBTH 2016 [↑](#endnote-ref-1)