

North West Template: Referral

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| Referral email header: Key matching headlines: age, gender, and location. |  |
| Body of email Disabilities or additional needs, key risks, home type (including solo or specific carer requirements) and whether part of sibling group |  |
| Include information for specialist providers to help screen for example, sexually harmful behaviours. Pasting this information into the header and body of the email, helps providers to prioritise and screen quickly. |

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| Part 1 Local Authority information   |
| Placing Local Authority  |  |
| Commissioner name  |  |
| Commissioner email address |  |
| Commissioner telephone number |  |
| Social Worker name Optional - please note commissioners must be copied into correspondence with social workers. Discussion aims to clarify needs of child and not to confirm the commissioning of a home. |  |
| Social Worker email address |  |
| Social Worker telephone number |  |
| Emergency duty team contact |  |
| Independent Reviewing Officer name and contact  |  |
| Date of authorisation to start search  |  |

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| Part 2: Home information  |
| Type of homeFostering standard, fostering enhanced, family foster home (parent and child), residential, residential with education, semi-independent; group living, semi-independent; solo with floating support, family assessment home, short breaks details (less than 75 nights), other. |  |
| Is a solo home required?Please note this significantly limits the number of potential options, think carefully about any matching considerations which could increase the chance of being offered a suitable home.  |  |
| Date home is required.This is important to providers for the prioritisation of searches. |  |
| Is there flexibility on the start date?This is important to providers for the prioritisation of searches |  |
| Anticipated length of placement If unknown please give minimum indication of short (including emergency and bridging homes), medium, long term. |  |
| Reason for current home searchAdd as much context as possible, for example, if a home has ended, what was the reason |  |
| What has worked well in the current home?  |  |
| Are the current carers available to speak to and support transition? |  |
| What needs to change in the new home? |  |
| What difference and positive impacts are we hoping the care giver can provide to the child? |  |
| Previous home historyProvide overview including start/end date and home type and reason for ending |  |
| Sibling groups |
| Is the referral linked to a sibling group? Each child to have own individual referral form. |  |
| Is the request for a child and their brothers and/or sisters together?  |  |
| If yes, can any of the children share a bedroom? |  |
| Would a home with different carers, or homes in proximity be considered? |  |
| If siblings live separately, please share the distance to travel for any agreed family time |  |
| Location  |
| Preferred geographical locations Include areas the child has links to and what those links are. |  |
| Are there any areas which will not be considered? If yes, please provide reason |  |
| Will an out of area home be considered? |  |

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| Part 3: Child information |
| Child's unique reference number |  |
| First name / initials Optional – consider GDPR, whilst one piece of information may not identify an individual, in a referral, collectively all the information could make the child identifiable, the template must be anonymous). |  |
| Legal Status  Subject of a care order (s.31 Children Act); voluntarily accommodated (s.20) remanded (s. 21). If care proceedings underway, what is the projected timescale for proceedings to complete? |  |
| Is the child new into care?  |  |
| What is the main reason the child came into care? |  |
| If the plan is for the child to return to family what support is planned or underway to enable this? |  |
| In relation to the child’s characteristics below please state the response and what this means in the context of matching and their care and support needs. If this information is unknown, please state if this is undisclosed by child or not obtained.  |
| Child’s age (year and months or expected delivery date)Do not use the child's date of birth as this is identifying information. |  |
| How would the child describe their gender? |  |
| Is the child Trans A different gender to that they were assigned at birth. |  |
| How would the child describe their sexual orientation?For children over 13 years of age and at their discretion. Important to always include the option of ‘don’t know’.  |  |
| Child’s religion For example, a requirement to visit places of worship, prayer space in the home, dietary or clothing requirements, key celebrations.  |  |
| Child’s nationality  |  |
| Child’s ethnicity |  |
| Child’s main language and any other languages spoken  |  |
| Does the child have any other communication needs?For example, sign language, Makaton, nonverbal, pictorial support. |  |
| Child’s immigration/citizenship statusFor example, if an unaccompanied asylum-seeking child, what ongoing support will they need? |  |
| Is a cultural match required? |  |
| Does the child have a disability? Note opportunity for further information including specific educational neds in Part 6.  |  |
| Matching  |
| What are the matching priorities?For example, specific gendered staffing, solo/2:1 staffing/education on site, therapy, explaining why e.g., 2:1 is required, for community support or to provide behavioural support.  |  |
| Are there any restrictions on who they should be placed with? |  |
| Any learning from previous homes regarding matching considerations? |  |

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| Part 4: Voice of the child  |
| Is the child aware of a new home search?Please share their knowledge and views of the search.  |  |
| About me: The things I like to do, what I am good at, my greatest achievements, food I like, hobbies and interests I want to keep doing.  |  |
| My home: What I would like in my next home and carers, if I like pets, if I would like to live with other children, how I would like to be welcomed into my new home. |  |
| My care and support: The things I can do for myself, the things I need you to help with, the things I am unable to do for myself. If I am going to transition in education or working towards developing the skills and experience to live independently. |  |
| My friends and family: The friends and family who are important to me and when and how I like to spend time with them. |  |
| My identity: The things that make me an individual and things a new home and carers will need to know about who I am, my preferences, interests, my culture and beliefs. |  |
| My education: How I feel about school, what I like and dislike about the school, the routine and the things I learn including the things I need help with.  |  |
| My health: What a home and carers need to know about my physical and mental health, how to support me to be as healthy as I can. If I have a disability how does this impact on my day-to-day life, both strengths and areas for support.  |  |
| My behaviours: What are thing things I may have done in the past or at risk of doing in the future which makes the people around me worry? What do I understand about the impact of those behaviours and anything I am working on to change.  |  |
| Has the child experienced discrimination of any kind?Relating to protected characteristics such as gender, race, disability, religion, sexuality and what is required to support them in relation to this.  |  |
| View about the home move from parent/guardian Where possible |  |

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| Part 5: Social and family time Consider how the home and carers can help children to maintain connections with people they love and with their family.  |
| Describe the family composition and who does the child see for family time?Siblings, family, carers, friends. Detail who they see, where they see them and for how long. How will new carers need to to support these arrangements and are there any risks associated with seeing friends and family? |  |
| Is there anything carers need to know regarding the child’s experiences of social and family time?  |  |
| Who are current key agencies/advocates/independent visitors working with the child and providing a support network? For example, what are they doing and how can a home support a child to maintain the positive relationships in their wider network?  |  |
| Any other relevant information relating to social and family time? |  |

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| Part 6: Care and support needs |
| Education / training / employment |
| What type of education provision does the child currently attend? Describe a typical school (or alternative) day or week. |  |
| What is important for a new carer and home to know?How does the child feel about education, current school location, year, upcoming transitions, attendance issues including exclusion? |  |
| Are there any additional educational support needs? For example, does the child have a learning difficulty or disability, do they have an EHCP or personal education plan (PEP), are there any additional support needs, is there any joint funding from health partners. |  |
| Have you sought the views of any education professionals to inform this referral? For example, class teacher, virtual head.  |  |
| If a child is not in education, what will be the interim arrangements? |  |
| For young people, are they in training or employment? If yes, what support do they need to maintain this. If no, what support do they currently receive or need from the home and other agencies for this to change?  |  |

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| Health  |
| Current **universal health services**. Including current GP and dental practice, up to date immunisation and vaccinations and any concerns or barriers to engaging with community health services.  |  |
| Current **undiagnosed health concerns.** Including current specialist referrals and assessments underway.  |  |
| Current **physical health** conditions.Any associated medication or therapy required, how the home can support in relation to this, and the child manages medication, appointments etc.  |  |
| Current **mental health** conditions.Including self-harm, eating disorders, threats or attempts on their life. Any associated risks related to emotions, dysregulation, or unconfirmed disorders? Any associated medication or therapy required. How the child manages medication, appointments etc. |  |
| Are there any barriers or facilitators to engagement for attending health service appointments or compliance with medication that the home provider needs to be aware of? |  |
| If the child / young person has any **disabilities.**Please summarise how they impact on them and what requirements will be on the home to meet those needs: do they need help with personal care, have specific communication needs, specific sensory needs, mobility needs, aids and adaptations. Will carers need any special skills or training regarding the child’s disability or health needs? If yes, please detail who will provide this and when. |  |
| Are there any other areas related to the child’s health needs and support? Does the child have any specific dietary requirements? Are there any concerns or evidence in relation to allergies? Does the child soil or wet day or night? |  |

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| Identity, Self-Care & Independence  |
| Describe self-care the child can do for themselves, independently, what do they need some support and what are they unable to do. Are there any hygiene or self-neglect issues? |  |
| Does the child have a Pathway Plan? If no, when will this begin? If yes, what is the child’s awareness and engagement of the plan. For example, is the child’s independence skills in line with the current plan, requires support to progress the plan, exceeding the plan. |  |
| Is there anything the child would really like to do but have not had the opportunity to do? How could a carer support the child to achieve their dreams? Any other needs / activities / advocacy to be met by local services outside of the child’s home? |  |
| Who are current key agencies/advocates/independent visitors working with the child and providing a support network.What are they doing; what hours of support and frequency? |  |

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| Part 7: Risk management  |
| What are we worried about?  | Is this a past or current, future danger. Provide dates to illustrate relevance.  | What is working well? Strengths and positive strategies to mitigate risk. | What needs to happen? Safety goal, support services and next steps. |
| **Health based risks** |
| Does the child smoke? |  |  |  |
| Does the child drink alcohol? |  |  |  |
| Does the child use drugs? |  |  |  |
| Does the child harm themselves? Self-harm, including suicide attempts or attempts. |  |  |  |
| Does the child have a diagnosed, or undergoing assessment for an eating disorder? |  |  |  |
| Is the child sexually active? If yes, does the child have adequate support and guidance around sexual health and positive relationships? |  |  |  |
| Is the child pregnant? |  |  |  |
| Is there a risk the child may have been/could be subject to female genital mutilation? |  |  |  |
| **Exploitation risks**  |
| Does the child go missing from their current home? If yes, where do they go and who with? Include relevant information from the Local Authority missing from home co-ordinator. |  |  |  |
| Is the child being, or at risk of being, sexually exploited? |  |  |  |
| Is the child being, or at risk of being, criminally exploited? |  |  |  |
| Does the child see themselves as having a gang affiliation? |  |  |  |
| Are there any concerns about radicalisation or extreme views? |  |  |  |
| Is the child vulnerable to any other type of exploitation? For example, by older adults or other children. |  |  |  |
| Behavioural risks |
| Is the child currently supported by the youth justice team, any criminal convictions, ongoing investigation, tag, curfew or bail conditions? Provide relevant dates and context, including any current police involvement that the Host Local Authority Police force should be made aware of. |  |  |  |
| Does the child damage their current or previous home environment? |  |  |  |
| Has the child harmed, threatened to harm or made statements to scare others?Include physical or verbal aggression or bullying towards other children or young people, or adults. |  |  |  |
| Is the child a risk to or has caused actual harm to animals? |  |  |  |
| Does the child demonstrate inappropriate sexualised behaviour? |  |  |  |
| Relational risks  |
| Has the child been the subject of bullying? |  |  |  |
| Does the child have difficulty in interacting with their peer group or adults? |  |  |  |
| What would be the expectations of the home in terms of internet/phone/social media use? |  |  |  |
| Does the child use social networks inappropriately/make unknown online relationships? |  |  |  |
| Has the child made any disclosures in current home about their current or past care?  |  |  |  |
| Are there any other significant single or significant historical risks their carers/support staff need to know about? |  |  |  |
| In view of the risks detailed above please detail if and how those risks impact upon each other, are they interlinked, a set of triggers and actions across the risks which provide more context to how the home and carers can support the child. |  |

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| Part 8: OutcomesPlease note this section may not be completed until the placement plan has been agreed. Think about what the home should deliver to create good outcomes and what are the indicators of progress. |
| What would a successful home look and feel like to the child now and in the future?  |  |
| Summarise the outcomes you want the home to prioritise in the following areas; |  |
| Social and family timeFor example, to increase the number positive, healthy peer relationships within the child’s social network |  |
| Education For example, to increase attendance at school and be supported from a caring adult to achieve at least 80% attendance. |  |
| Health For example, to evidence a healthy and age-appropriate attitude to substances within three months of the placement start date. |  |
| Identity, self-care and independence For example, evidence how you have supported the child to do something towards their own aspirations or the impact of supporting the young person to develop good self-care or for young people, an independent living skill they have learned.  |  |
| Any other area outcomes requiring focus.  |  |
| Reporting  |
| Detail what format the progress report will take?For example, a local authority template, a provider template, the regional Placements North West template.  |  |
| Detail how often the home provider needs to report on the progress of these outcomes. |  |
| Detail who the progress reports need to be shared with.  |  |