



# Child Protection Policy

Reviewed/Updated	Date
Updated	September 2020
Review	September 2021

# **Kircubbin Integrated Primary School**

## **Child Protection Policy**

The following policy has been drawn up and agreed upon by the teaching staff and has the approval of the Board of Governors of the above school.

### **Introduction**

The Department of Education has issued detailed guidance with all aspects of Child Protection. This policy and our procedures have been developed in line guidance from:

- ◆ DENI circular 1997/4.
- ◆ Pastoral Care in Schools-Child Protection: Code of Conduct for Staff (1999/10)
- ◆ DE Circular 2003/13 Welfare and Protection of Pupils.

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### **CHILD PROTECTION ETHOS -**

We in Kircubbin Integrated Primary have a responsibility for the safeguarding and child protection of the children in our care and we will carry out this duty by providing a caring, supportive and safe environment, where each child is valued for his or her unique talents and abilities, and in which all our young people can learn and develop to their full potential. All staff, teaching and non-teaching should be alert to the signs of possible abuse and should know the procedures to be followed. This policy sets out guidance on the action, which is required where abuse or harm to a child is suspected and outlines referral procedures within our school.

### **KEY PRINCIPLES OF SAFEGUARDING AND CHILD PROTECTION**

The general principles, which underpin our work, are those set out in the UN Convention on the Rights of the Child and are enshrined in the Children (Northern Ireland) Order 1995, "Co-operating to safeguard children and young people in Northern Ireland" (DHSSPSNI, 2017), the Department of Education (Northern Ireland) guidance "Safeguarding and Child Protection in Schools" Circular 2017/04 (amended September 2019) and the SBNI Core Child Protection Policy and Procedures (2017).

The following principles form the basis of our Child Protection Policy:

- The child or young person's welfare is paramount;
- The voice of the child or young person should be heard;
- Parents are supported to exercise parental responsibility and families helped stay together;

- Partnership;
- Prevention;
- Responses should be proportionate to the circumstances;
- Protection; and
- Evidence based and informed decision making.

## **OTHER RELATED POLICIES**

The school has a duty to ensure that safeguarding permeates all activities and functions. The child protection policy therefore complements and supports a range of other school policies including:

- Anti-Bullying
- Attendance
- Positive Behaviour
- Code of Conduct
- Complaints
- GDPR
- Educational Visits
- E-Safety
- First Aid and Administration of Medicines
- Health and Safety
- Intimate Care
- Relationships and Sexuality Education
- Special Educational Needs
- Use of Mobile Phones/Cameras

**These policies are available to parents and any parent wishing to have a copy should contact the School office or visit the school website at [www.kircubbinips.com](http://www.kircubbinips.com).**

### **School Safeguarding Team**

The following are members of the school's Safeguarding Team:

- ◆ Designated Teacher for Child Protection, Mrs Sharon Smyth
- ◆ Deputy Designated Teacher for Child Protection, Mrs Cheryl McManus
- ◆ Deputy Designated Teacher for Child Protection, Mr Adam Ferguson (VP)
- ◆ Principal, Mr R. Irvine
- ◆ Chairperson of the B.O.G, Mrs Julie Stuart
- ◆ Designated Governor for Child Protection, Mr John Hughes
- ◆ Mrs Laura Doherty, Teacher Governor

### **Child Abuse**

Child abuse occurs in families from all social classes and cultures and in communities, agencies and organisations. Abusers come from all walks of life and all occupations and professions. Child abuse can manifest in a number of ways and can involve a combination of the forms of abuse.

The abuse may take a number of forms including:

### **Neglect**

Neglect is the failure to provide a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter that is likely to result in the serious impairment of a child's health or development. Children who are neglected often also suffer from other types of abuse.

### **Physical Abuse**

Physical abuse is deliberately physically hurting a child. It might take a variety of different forms, including hitting, biting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocation a child.

### **Emotional Abuse**

The actual or likely persistent or significant emotional maltreatment of a child. It can have severe and persistent adverse effects on a child's emotional development. Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. Emotional abuse may involve bullying-including online bullying through social networks, online games or mobile phones-by a child's peers.

### **Sexual Abuse**

Sexual abuse occurs when others use and exploit children sexually for their own gratification or gain or the gratification of others. Sexual abuse may involve physical contact, including assault by penetration or non-penetrative acts. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse.

### **Grooming**

Grooming of a child or young person is always abusive and/or exploitative. It often involves perpetrator(s) gaining the trust of the child or young person or, in some cases, the trust of the family, friends or community, and/or making an emotional connection with the victim in order to facilitate abuse before the abuse begins. This may involve providing money, gifts, drugs and/or alcohol or more basic needs such as food, accommodation or clothing to develop the child's/young person(s) loyalty to and dependence upon the person(s) doing the grooming. The person(s) carrying out the abuse may differ from those involved in grooming which led to it, although this is not always the case.

### **Child Sexual Exploitation (CSE)**

Child Sexual Exploitation is a form of sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants and/or (b) for the financial advantage or increased status of perpetrator or facilitator. The

victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always include physical contact; it can also occur through the use of technology.

### **Domestic Violence**

Any incident that is 'threatening, controlling, coercive behaviour, violence or abuse (psychological, virtual, physical, verbal, sexual, financial or emotional) inflicted on anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability) by a current or former intimate partner or family member'.

### **'Co-operating to Protect Children' (Children N.I. Order 1995 Volume 6)**

#### **Signs of Abuse**

##### **Neglect**

- ◆ Travel to school
- ◆ Lack of provision of food in school
- ◆ Lack of supervision.
- ◆ No interest in education
- ◆ Hunger and tiredness
- ◆ Poor personal hygiene
- ◆ Unkempt state
- ◆ Emaciation
- ◆ Few friends
- ◆ Withdrawn or aggressive
- ◆ Health problems
- ◆ Difficulties in school work
- ◆ Inappropriately dressed.

##### **Physical Abuse**

- ◆ Bruising (self harm)
- ◆ Burns
- ◆ Bites
- ◆ Broken bones
- ◆ Sprains
- ◆ Dislocations
- ◆ Scalds
- ◆ Cuts
- ◆ Fear (excessive, shrinking away)
- ◆ Reluctance to undress/change (PE, etc)
- ◆ Poorly clothed/covering up
- ◆ Behaviour change (dramatic)/performance change
- ◆ Aggression/others
- ◆ Withdrawal
- ◆ Weight loss/gain
- ◆ Alert/third party reports
- ◆ 'Under the influence' of illegal substances/unauthorised

### **Emotional Abuse**

- ◆ Quiet
- ◆ Withdrawn
- ◆ Low self esteem
- ◆ Unable to make friends
- ◆ Poor concentration/sleepy
- ◆ Can't accept praise
- ◆ Need to control environment – by behaviour (negative reaction)
- ◆ Inappropriate learned responses
- ◆ Attention demanding
- ◆ Imaginary friend
- ◆ Lack of interest in everything
- ◆ Impulsive stealing
- ◆ Wanting to stay in school
- ◆ Over-reaction
- ◆ Overly attached to teacher, over sensitivity/praise/criticism
- ◆ Don't like physical contact
- ◆ Sudden speech disorders
- ◆ Drug/solvent abuse
- ◆ Deprived of lover, positive attention, appropriate relationships, stimulation.
- ◆ Exposed to criticism, negativity, blame and denied their human rights.

### **Sexual Abuse**

- ◆ Inappropriate drawings
- ◆ Issues getting changes
- ◆ Language- inappropriate, sexually explicit
- ◆ Play inappropriate-sculpting genital features with dough play
- ◆ Fear of the dark
- ◆ Posture and sexualised gestures
- ◆ Obsessive washing
- ◆ Frequent ailments or marks and bruising
- ◆ Tired and withdrawn
- ◆ Low self esteem
- ◆ Difficulty concentration on school work
- ◆ Avoids physical contact
- ◆ May have lots of money
- ◆ Few friends of own age.

### **Child Sexual Exploitation**

- ◆ Acquisition of money, clothes, mobile phones etc without plausible explanation.
- ◆ Truancy/leaving school without permission
- ◆ Persistently going missing or returning late.
- ◆ Receiving lots of texts/phone calls prior to leaving
- ◆ Change in mood- agitated/stressed
- ◆ Appearing distraught/dishevelled or under the influence of substances

- ◆ Inappropriate sexualised behaviour for age.
- ◆ Physical symptoms e.g. bruising; bite marks
- ◆ Collected from school by unknown adults or taxis
- ◆ New peer groups.
- ◆ Significantly older boyfriend or girlfriend
- ◆ Increasing secretiveness around behaviours
- ◆ Low self-esteem
- ◆ Change in personal hygiene (greater attention or loss)
- ◆ Self-harm and other expressions of despair
- ◆ Evidence or suspicion of substance abuse.

### **Domestic Violence**

- ◆ Feelings of fear, shame anger etc.
- ◆ Underachieving (or overachieving) in school
- ◆ Difficulties sleeping and nightmares
- ◆ Distracted behaviour
- ◆ Outbursts of temper and aggression
- ◆ Regressive behaviour such as thumb sucking, bed wetting etc
- ◆ Reluctance to eat
- ◆ Complaints of tummy pain or pain in other parts of their body
- ◆ Low self-esteem and confidence
- ◆ Reluctance to engage in social activities, or
- ◆ Self-harm.

### **Purpose of Procedures**

In our school we are aware of the sensitive and difficult nature of the whole area of child abuse. Our procedures for dealing with suspected child abuse is therefore designed to –

1. Offer the greatest possible amount of protection to vulnerable children
2. Encourage staff to exercise their professional responsibilities towards children within an effective and legally secure framework.

However, all school staff must recognise that, in order to protect children from abuse, neglect and exploitation, a proper balance must be struck between protecting children and respecting the rights and needs of parents and families.

### **Procedures for reporting suspecting child abuse**

#### **The Designated Teacher/Deputy Designated Teacher**

The Board considers that the ultimate responsibility lies with the Board of Governors and the Principal.

The Designated Teacher for Child Protection is Mrs Smyth. In her absence, the Deputy Designated Teacher, Mrs McManus will assume responsibility for Child Protection matters and in the case of absence of both, the Vice Principal.

The Designated Teacher has responsibility for:

- ◆ The induction and training of all school staff including support staff.
- ◆ Being available to discuss safeguarding or child protection concerns of any member of staff.
- ◆ Responsibility for record keeping of all child protection concerns.
- ◆ Maintaining a current awareness of early intervention supports and other local services e.g. Family Support Hubs
- ◆ Liaison with EA Designated Officers for Child Protection
- ◆ Keeping the school Principal informed.
- ◆ Lead responsibility for the development of the school's child protection policy.
- ◆ Promotion of a safeguarding and Child Protection ethos in the school.
- ◆ Compiling written reports to the Board of Governors regarding child protection.

The Deputy Designated Teacher has responsibility to:

- ◆ Work co-operatively with the Designated Teacher in fulfilling his/her responsibilities.
- ◆ Work in partnership with the Designated Teacher so that he/she develops sufficient knowledge and experience to undertake the duties of the Designated Teacher when required.

**Procedures for Reporting Abuse**

If a child makes a disclosure to a teacher or other member of staff which gives rise to concerns about possible abuse, or if a member of staff has concerns about a child, the member of staff must act promptly.

He/she should not investigate, (this is a matter for the Social Services), but should report these concerns immediately to the designated teacher (Mrs Smyth) and discuss the matter with her. The designated teacher will discuss the matter with the Principal and plan a course of action. A detailed written account should be recorded at all steps – Incident Form, **Appendix A**. All written information will be treated as confidential and kept in a locked filing cabinet in the designated teacher's classroom.

The Principal, in consultation with the designated teacher, will decide whether, in the best interests of the child, the matter needs to be referred to the Social Services. If there are concerns that the child may be at risk, the school is obliged to make a referral. Unless there are concerns that a parent may be the possible abuser, the parent will be informed immediately.

If it comes to the attention of school staff that domestic violence is or may be a factor for a child this must be passed to the designated teacher who has an obligation to make a referral to social services.

The Designated Teacher may seek clarification or advice and consult with the Board's Designated Officer or appropriate social worker before a formal referral is made. Provided that no child is identified by name, the case and its circumstances may be discussed with complete confidentiality and with the full understanding that Social Services cannot be involved until a formal referral is made.

**(See Figure 1)**

If a complaint is about possible child abuse is made against a member of staff, the Principal (or designated teacher, if he/she is not available) must be informed immediately. The above procedures will apply. Where the matter is referred to Social Services, the member of staff will be removed from duties involving direct contact with pupils, and may be suspended from duty as a precautionary measure, pending investigation by Social Services. The Chairman of the Board of Governors will be informed immediately.

**(See Figure 2)**

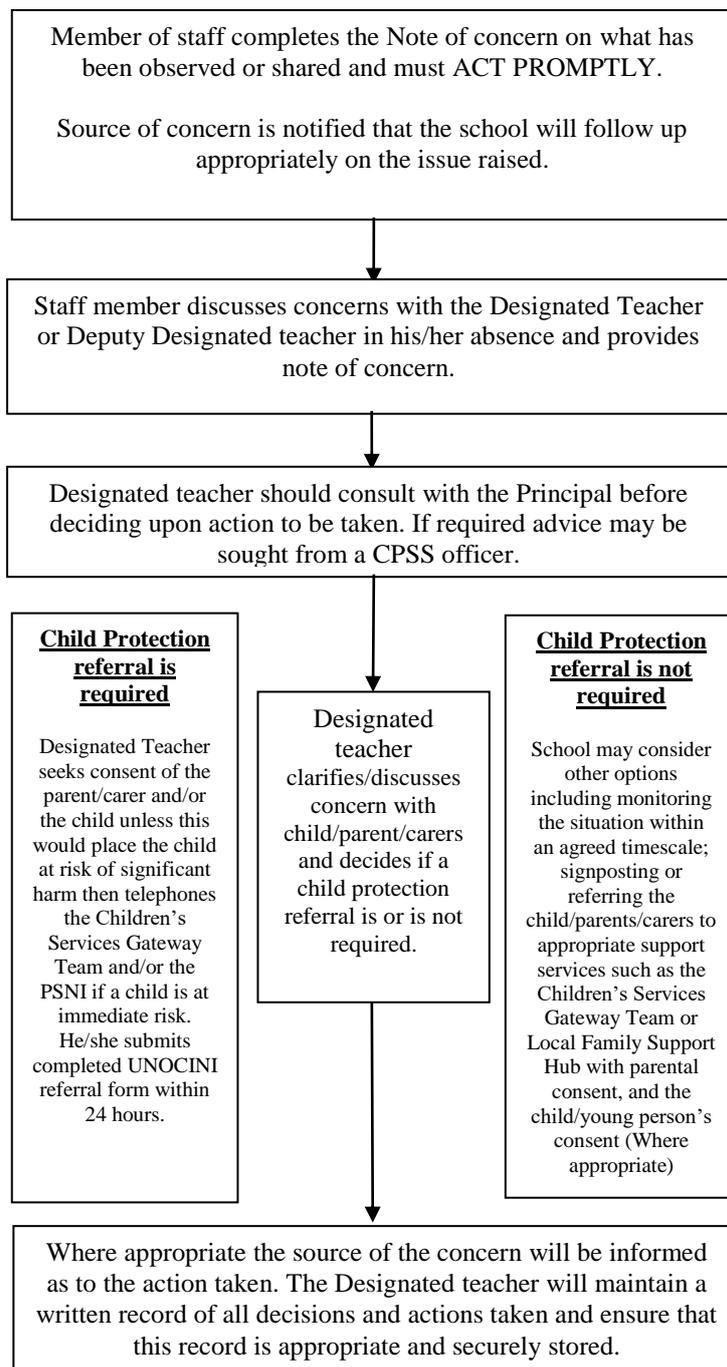
If a parent wishes to make a complaint concerning their own child's safety they can talk to the class teacher. If still concerned, they should speak to the Designated Child Protection Teacher. Further concerns should then be taken to the Principal and thereafter to the Chairman of the Board of Governors. At any time the parent can talk to the Social Worker or Police.

**(See Figure 3)**

All notifications, in writing, (to Social Services) using the UNOCINI form (See- **Appendix B**, copies held in policy file) and supplemented if necessary by a letter/report. A copy of the referral will also be forwarded to the Board's Designated Officer. This will be done in an envelope marked 'CONFIDENTIAL – CHILD PROTECTION'.

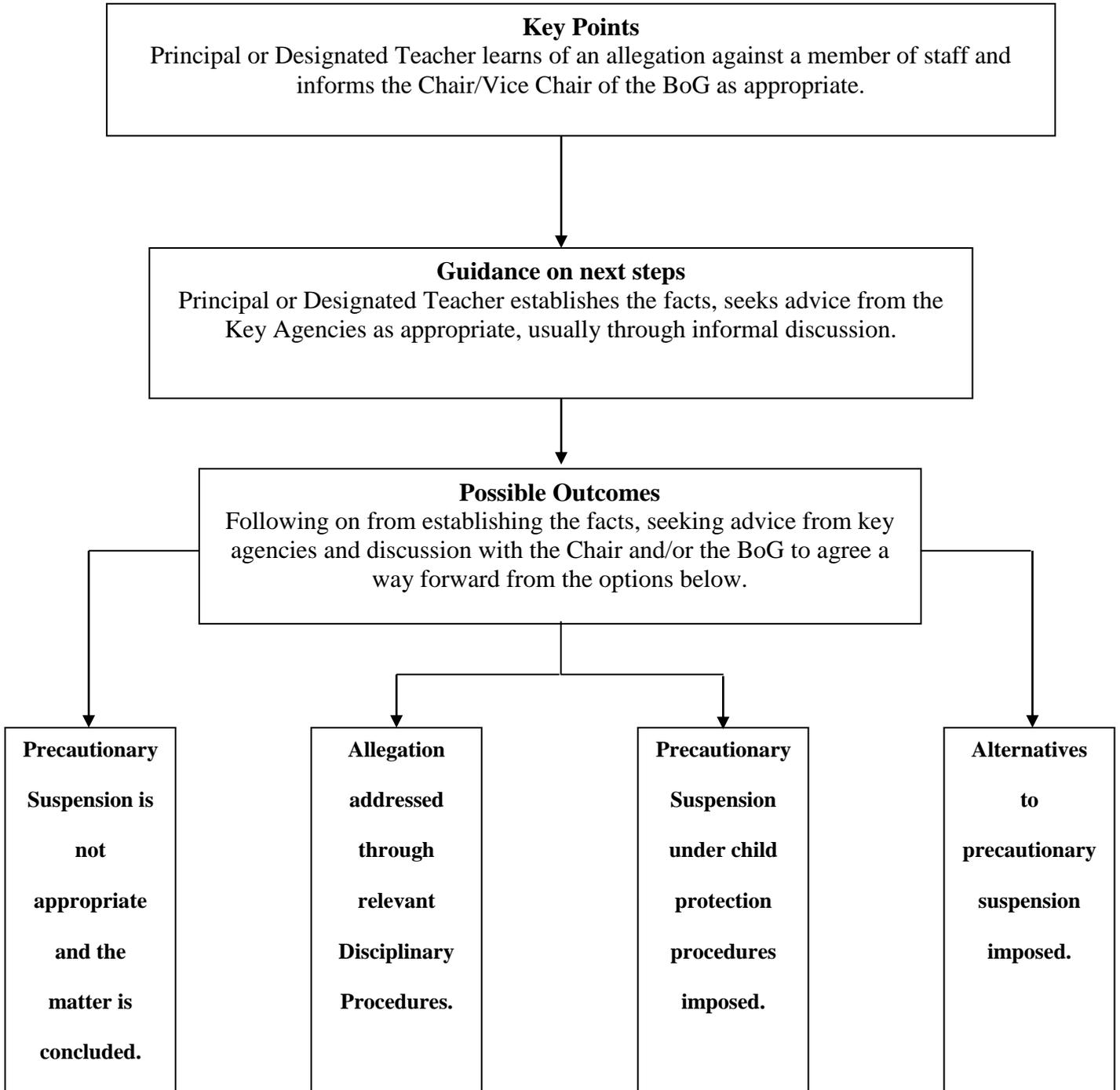
**Figure 1**

**Procedure where the school has concerns, or has been given information, about possible abuse by someone other than a member of staff**



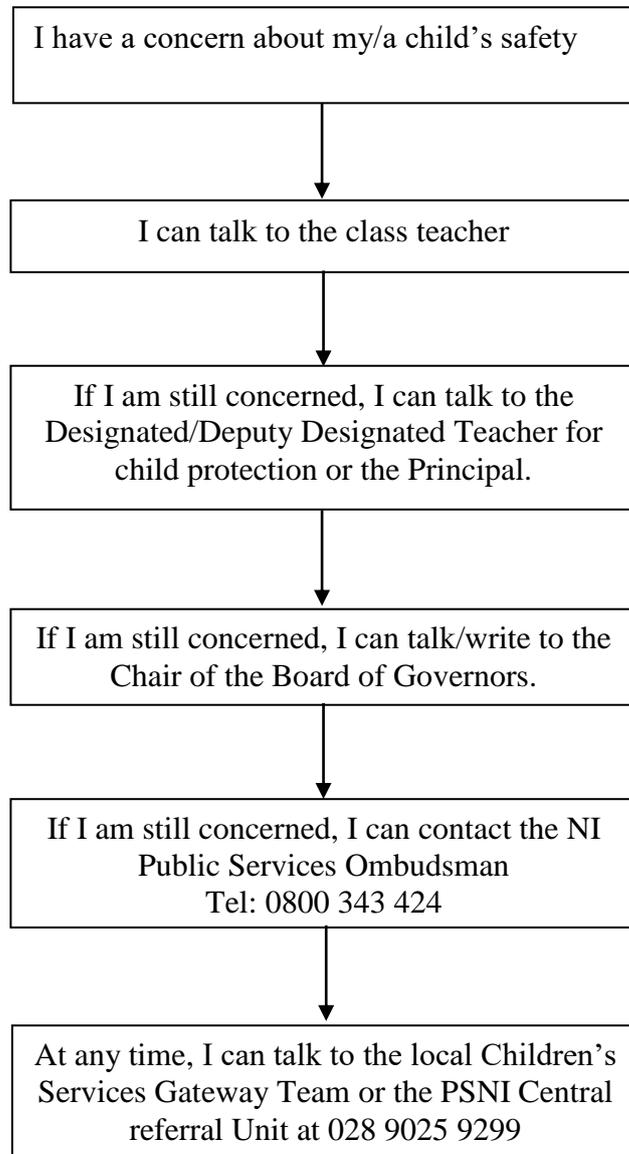
**Figure 2**

**Procedure for dealing with allegations of Abuse Against a Member of staff.**



**Figure 3**

**If a parent has a potential Child Protection concern:**



## **Role of Social Services and other Agencies**

Social Services have a statutory duty to investigate any case where they receive information suggesting that a child or young person may be in need of care, protection or control unless satisfied that such enquiries are unnecessary. Their objective is to ensure the safety and welfare of the child. They have a lead role in co-ordinating the work of all the agencies and professionals concerned with the child's family. A joint protocol has been established between the Social Services and the Police for investigation purposes. This will involve the police investigating situations where a crime may have been committed.

When there is a suspicion that a child has been abused, Social Services may convene a multi-disciplinary Case Conference which may involve the Principal or Designated Teacher.

The objectives of a Case Conference are to:

- ◆ Share and exchange relevant information on a confidential basis
- ◆ Determine the nature and degree of abuse or risk of abuse and whether to place the child's name on the Child Protection Register.
- ◆ Devise a Child Protection plan which identifies the contribution that individual agencies and professionals will make.
- ◆ Identify a case co-ordinator (normally from the Social Services Department) and to arrange for the review of the plan on at least six monthly basis.

Decision of Case Conference will be forwarded to the principal and these will be stored separately and securely.

Social Services will send information in writing to the school about any child whose name has been included on the Child Protection Register, including whether the child is in the care of Social Services and what information has been made known to the parents about allegations or suspicions of abuse. Social Services will ask the school authorities to pay particular attention to such children in respect of their attendance record, emotional and social development and any other cause for further concern. A social worker will liaise with the principal and/or other education staff about the child's progress. When a child's name is removed from the Child Protection Register schools will be informed in writing by Social Services. Records will be destroyed when the child's name is removed from the Child Protections Register.

If the child transfers to another school, the Social Services Co-ordinator will be informed, and the receiving school advised that the child's name is on the Child Protection Register. All Child protection records held by the school will be destroyed, including case conference records. (The receiving school should approach the Social Services directly for information).

## **The Curriculum**

In our school we are aware of the sensitive and difficult nature of child abuse. The statutory personal development curriculum requires schools to give specific attention to pupils' emotional wellbeing, health and safety, relationships and the development of a moral thinking and value system. The curriculum also offers a medium to explore sensitive issues with children and young people in an age-appropriate way which helps them to develop appropriate protective behaviours.

At primary level, RSE is covered within the 'Personal Development and Mutual Understanding' (PDMU) area of learning. The programme ensures progression throughout the school and is appropriate to age and ability.

## **Induction of New Staff**

On appointment, all staff will be made aware of our Child Protection Procedures.

## **In-Service Training and Support**

Our Designated Teacher, Mrs Smyth, will attend appropriate in-service training on child abuse on an annual basis. This policy will be kept under review and updated in accordance with the changing needs of the school. Our Deputy Designated Teacher is Mrs McManus.

## **Liability for Staff**

Any teacher or other member of staff will be made aware of the School's Code of contact. Any staff member who complies with Board procedures in making a report of suspected child abuse is acting within the course of his/her employment and in such circumstances, where he/she has acted in good faith, will receive the full support of the Board and will not be legally or financially liable.

## **Vetting of all staff paid/unpaid**

On appointment, all staff will be vetted using PSNI and following SEELB regulations. Volunteers will also be vetted in line with DE circular 2012/19.

## **Substitute Teacher**

Our school will employ only substitute teacher registered on the Northern Ireland Substitute Teacher Register ([www.nistr.org.uk](http://www.nistr.org.uk)) DE 2006/7

## **Board of Governors**

At present, 2 of our Board of Governors have been trained in Child Protection and are aware of the 2006/8 DE guidance on selection of new school staff. Any selection panel must include one of these trained governors.

## **Role of Social Services and other Agencies**

Social Services have a statutory duty to investigate any case where they receive information suggesting that a child or young person may be in need of care, protection or control unless satisfied that such enquiries are unnecessary. Their objective is to ensure the safety and welfare of the child. They have a lead role in co-ordinating the work of all the agencies and professionals concerned with the child's family. A joint protocol has been established between the Social Services and the Police for investigation purposes. This will involve the police investigating situations where a crime may have been committed.

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Reviewed and updated: 15<sup>th</sup> September 2020

## **Monitoring and Review**

This policy will be monitored regularly by the Senior Leadership Team and the issues arising reported by the Principal to the Governors. The policy will be reviewed by the Principal and the Board of Governors.

Signed: \_\_\_\_\_ Principal

Signed: \_\_\_\_\_  
Chair of Board of Governors

Date: \_\_\_\_\_

## Disclosure Form (Confidential)



Name: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Year and Teacher: \_\_\_\_\_

Present at disclosure :

\_\_\_\_\_

Details of incident :

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Action taken :

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Signed : \_\_\_\_\_

DT/DDT Signed : \_\_\_\_\_

Date: \_\_\_\_\_

**Appendix B**

**UNOCINI**  
**Understanding the Needs of Children in Northern Ireland**  
**R1 REFERRAL**

Section 1: Child or Young Person's Details		
<b>Surname:</b>	<b>ID No.</b>	<b>Soscare</b>
<b>Forename:</b>		
<b>Known As:</b>	<b>HCN:</b>	
<b>Address:</b>	<b>Previous Address:</b>	
<b>Postcode:</b>		
<b>Telephone No:</b>	<b>Previous Postcode:</b>	
<b>Mobile No:</b>	<b>Locality:</b>	1=BT – Belfast Central
<b>Date of Birth:</b>	<b>Gender</b>	Male
<b>GP Name:</b>	<b>GP Tel No:</b>	
<b>GP Address:</b>	<b>GP Email Address:</b>	
<b>GP Postcode:</b>		

<b>School Name:</b>		<b>School Tel No:</b>	
<b>School Address:</b>		<b>School Postcode:</b>	
<b>Does the Child have a Disability? Yes</b>	<b>If Yes, What Disability: (&amp; source of diagnosis)</b>	<b>Other Special Needs:</b>	
<b>Nationality:</b>	1=Austrian	<b>Ethnic Origin:</b>	B=Bangladeshi
<b>Religion:</b>	1=Church of Ireland	<b>Country of Origin:</b>	AAFG=AFGHANISTAN
<b>Language Spoken:</b>	1=Albanian	<b>Communication Support:</b>	Yes
<b>Interpreter</b> <input type="checkbox"/>	<b>Signer</b> <input type="checkbox"/>	<b>Document Translator</b> <input type="checkbox"/>	

#### Section 2a: Referrer's Details

<b>Name of Referrer:</b>	<b>Designation:</b>
<b>Address:</b>	<b>Date of Referral:</b> 11/05/2015
<b>Postcode:</b>	<b>Contact Details:</b>

#### Section 2b: Reason for Referral

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#### Section 2c: Immediate Actions

<b>Are Immediate /Actions necessary to safeguard the child(ren) or young person(s)</b>	Yes
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#### Section 3a: Primary Carers & Other Household Members (Incl. non-family members)

	Member 1	Member 2	Member 3	Member 4
<b>Last Name:</b>				
<b>Alternative Last Name:</b>				
<b>First Name:</b>				
<b>Telephone No:</b>				
<b>Mobile No:</b>				

<b>Date of Birth:</b>				
<b>Relationship to Child/ YP:</b>				
<b>Language Spoken:</b>	1=Albanian	2=Arabic	3=Bengali	4=British Sign Language
<b>Nationality:</b>	1=Austrian	2=Belgian	3=British	4=Bulgarian
<b>Communication Support:</b>	<input type="checkbox"/> Interpreter <input type="checkbox"/> Signer <input type="checkbox"/> Doc. Trans <input type="checkbox"/> Details	<input type="checkbox"/> Interpreter <input type="checkbox"/> Signer <input type="checkbox"/> Doc. Trans <input type="checkbox"/> Details	<input type="checkbox"/> Interpreter <input type="checkbox"/> Signer <input type="checkbox"/> Doc. Trans <input type="checkbox"/> Details	<input type="checkbox"/> Interpreter <input type="checkbox"/> Signer <input type="checkbox"/> Doc. Trans <input type="checkbox"/> Details

**Section 3b: Significant Others (Incl. family members who are not members of the child(ren) or young person(s) household)**

	<b>Other 1</b>	<b>Other 2</b>	<b>Other 3</b>	<b>Other 4</b>
<b>Last Name:</b>				
<b>Alternative Last Name:</b>				
<b>First Name:</b>				
<b>Address:</b>				
<b>Postcode:</b>				
<b>Mobile No:</b>				
<b>Date of Birth:</b>				
<b>Relationship to Child/ YP:</b>				
<b>Language Spoken:</b>	1=Albanian	2=Arabic	3=Bengali	4=British Sign Language
<b>Nationality:</b>	1=Austrian	2=Belgian	3=British	4=Bulgarian
<b>Communication Support:</b>	<input type="checkbox"/> Interpreter <input type="checkbox"/> Signer <input type="checkbox"/> Doc. Trans <input type="checkbox"/> Details	<input type="checkbox"/> Interpreter <input type="checkbox"/> Signer <input type="checkbox"/> Doc. Trans <input type="checkbox"/> Details	<input type="checkbox"/> Interpreter <input type="checkbox"/> Signer <input type="checkbox"/> Doc. Trans <input type="checkbox"/> Details	<input type="checkbox"/> Interpreter <input type="checkbox"/> Signer <input type="checkbox"/> Doc. Trans <input type="checkbox"/> Details

**Section 4a: Summary of Referrer's Previous Involvement**

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Section 4b: Referral Consent	
Child(ren) / Young Person(s)	
Are all the children in the family aware the referral is being made?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do all the children in the family consent to the Referral being made?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If NO, please explain	
Parent/ Carer	
Are Parents/ Carers of all the children/ young people are Referral has been made?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they consent to the Referral being made?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If NO, please explain	

Section 5: Additional Information: Agencies Currently Working with Child or Young Person
<b>Agency and Contact Details</b>
<b>Health Professional:</b> <b>Name:</b> <b>Role:</b> <b>Tel No:</b> <b>Email:</b>
<b>Health Professional:</b> <b>Name:</b> <b>Role:</b> <b>Tel No:</b> <b>Email:</b>
<b>Health Professional:</b> <b>Name:</b> <b>Role:</b> <b>Tel No:</b> <b>Email:</b>

**Health Professional:**

**Name:**

**Role:**

**Tel No:**

**Email:**