

Making a referral to Middlesbrough Council's Multi-Agency Children's Hub: A Guide for Professionals



What is this for?

This guide is to support you in making a referral to Middlesbrough Council's Multi Agency Children's Hub (MACH).

The MACH is where you can access support for both Early Help and Children's Social Care services. We will use the information in your referral to identify the right service for the child you are worried about.

This document provides advice and guidance about the best ways to record your worries on the referral form so that we can clearly understand the level of risk to the child, and the important people in the child's life. This will help our social workers in their decision making so that we can get the right help in place for the child at the earliest opportunity.

To make a referral please click on the relevant link below:

[Early Help Referral Form: https://www.teescpp.org.uk/safeguarding-procedures/2-early-help/](https://www.teescpp.org.uk/safeguarding-procedures/2-early-help/)

[Safer Referral Form: https://www.teescpp.org.uk/contact/middlesbrough](https://www.teescpp.org.uk/contact/middlesbrough)

5 steps to consider when completing your referral:

1. Use clear language that everyone can understand

In the future, the child who is the subject of your referral may want to understand more about why they had involvement with children's services and they might request a copy of the documents in their file. If they read your referral would they understand what you are worried about?

2. Capture the voice of everyone involved, especially the child

When you describe what people have told you, this might be your colleagues, the family, or the child, use their exact words where you can rather than summarising this and giving it your own interpretation. Make this clear by stating who told you what and putting their words in speech marks.

3. Don't use acronyms

We all use them but outside of our profession or organisation most people don't have a clue what they mean. The same acronym could mean something totally different to a police officer, a social worker and a teacher. This can be confusing so please don't use acronyms in your referral. This guide is to support you in making a referral to Middlesbrough Council's Multi Agency Children's Hub (MACH).

5 steps to consider when completing your referral

Continued...

4. Avoid professional jargon

There are words and phrases that are specific to our profession or organisation and it's easy to forget that others don't understand what these mean. Professional language doesn't explain what you are worried about and if we use this in our conversations with families it's likely to create a barrier to good communication. Try and use language you would use if you were explaining your concerns to the child.

5. Avoid professional terminology

We are all familiar with terms like 'neglect' and 'domestic abuse' but what do they actually mean? These terms are just broad labels and they don't tell us much about what has happened or the severity of your worries. One person's interpretation of the term neglect is likely to be different to someone else's, depending on their previous experiences.

If you don't describe exactly what you have seen and heard, that has led to you to determine that the child is being neglected, the social worker picking up the referral could significantly under or overestimate the severity of risk, especially if we can't get hold of you to ask follow up questions.

Note: It is a culture shift to change the language that we use and how we describe things. Social workers will slip up on this as well. You are welcome to challenge us if you think we are not adhering to these principles. Please ask us to clarify if you are not clear about anything we say.

What are you worried about? (Describing your concerns)

Be clear where possible and explain:

- who you are worried about;
- what they have done to make you have a worry;
- how long you have been worried and how often you have had these worries;
- describe how severe these worries have been and the known impact on the child or children to date.

When you are explaining what you are worried about please describe this in detail. Write what you have seen and heard. Here are a couple of examples:

Option 1:

We are concerned that the children are being neglected.

Option 2:

The children have told us that there hasn't been any food in the house for the past 3 days because their mum and dad have spent all of the money on "mucky beer" and "white stuff". The children have said that they have been so hungry they have been looking in bins for food.

Why is option 2 better?

It is a more detailed statement which will better inform our assessment. When we visit the home the parents might have just been shopping and the children might have just eaten. The parents might have told the children not to tell the social worker that sometimes there isn't food in the house. If so, we won't be able to capture this in the same way that you, the referrer, can and this information will be really important to evidence harm in a Court Report.

What are you worried about? (Describing your concerns)

Example 2:

Option 1:

We are worried Emma is at risk of CSE.

Option 2:

Emma is often picked up from school by a group of older young people in a car, mum reports she doesn't know these new friends of Emma's. Emma has become very secretive about where she goes and who she is with. Emma showed her support worker a brand new iPhone that she was really pleased about and said she had a job after school.

Why is option 2

better?

It is a more detailed statement which will better inform our assessment. When we talk with Emma it will help us to better prepare the questions we are going to ask her, making them more relevant and specific to the situation.

If you are describing events or behaviour that you didn't witness first hand, make sure you explain who observed this:

- Who heard/observed this first hand?
- If possible use their exact words.
- Provide their full name and contact details

What are you worried about?

(Describing your concerns)

What is the impact on the child?

- What have you seen/ heard/ been told about the impact of the worries on the child?
- Distinguish between what you think is the impact on the child and what you have observed.
- If you say something like “James was really upset” explain what this looked like. Was he crying, screaming, quieter than usual? What did James say or do to make you think he was upset?
- When describing what James told you, use his exact words in speech marks. We want to capture the voice of the child wherever possible.

Has this happened before?

- Is this the first time the reason for your referral has happened? If not, when was the first time this happened, what was the worst incident, when was the last time that you were aware of?
- If you have checked your records and there is no indication that this has happened before please mention this in your referral.

What are you worried about?

(Describing your concerns)

Anything else?

- Within the 'What are we worried about' section of the referral record who or what is making the problem harder to deal with, for example:
- Physical or mental health of someone in the household.
- Someone having communication difficulties because of a hearing impairment or not speaking English as a first language and this is making it difficult to explain what is happening.
- Problematic relationships with extended family, friends and community.

What is working well?

What is going well in the day to day care of the child, who does this and what are they doing?

- This will help us to understand the actions that have been taken to keep the child safe when harm has been present and the good things that are already happening in the child's life.
- This is all useful information that we can build on with the family to create a good plan to keep the child safe.
- Please include information in your referral about the strengths and safety in the child's life. Strengths are the good things people are doing to try and help the worries and the people who are doing them, for example:
 - Sometimes Mum's sister Kate is with her when she drops James off at school. This happens about once a week and when she is there he always arrives on time and his clothes look clean and smart. James often speaks about his Auntie Kate and he always smiles when he talks about her.
 - Grandad has been supporting the family with everything that has been going on during this difficult time.

What is working well?

Strengths Continued:

- Every Thursday James goes to his friend Ben's house after school and has his tea there, he has mentioned this a few times on a Thursday and really looks forward to playing with Ben. Ben's Mum Rebecca picks them both up from school."
- Emma seems to have built a good relationship with the pastoral support worker, she seeks her out in school regularly and will talk to her about some of her worries about school and friends. Emma has kept one of her best friends throughout these recent changes.

Safety is the people who are keeping the child safe when the bad things are happening.

- When Mum started to get angry, Dad took the children round to their Gran's house so that they weren't frightened or hurt.
- Dad has been going to see the doctor to get some help with his depression. He has been getting Ben to school on time more often since he has started taking medication.
- Emma has phoned her best friend's mum in the past to pick her up when she was out with these new friends but wanted to come home earlier than they did.

What is working well?

Note:

If anyone is mentioned in the 'What's Working Well' section please list them in the 'family network and other important people' part of your referral, even if you don't know their full name. We will explore this further if the referral progresses to early help or social care. It is important that we identify people who can help keep the child safe and support the family, both as part of a safety plan to address the worries and to continue doing this when children's services are no longer involved. It does not always have to be a family member it can be a friend or neighbour too.

What needs to happen next?

- Tell us what you would need to see for you to feel that the child is safe.
- What are the next steps that your agency are doing to try and support the family going forward?
- What is it that you need to see for you not to have a worry?
- What does the child and/or their family think needs to happen next or what needs to change?

