How to complete the Bridge Partnership *worried about a child* referral form

A guide for professionals
In Step 1 input the details of the child that you are making the referral about.

In Step 2 provide as much information about family members or other people living in the home as possible.

Please give as much information as possible to aid the Bridge Partnership to identify the correct child and family.

In Step 3 provide details about who you are.

Use the options in the drop-down menu titled “Source” to identify which agency you work for.

If you are a professional making a referral you cannot remain anonymous.

Please provide a working email address. An email will be sent to this email address with (i) an automatic confirmation your referral as been received, and (ii) the outcome of your referral once screening has been completed.
Step 4 is where you will input the information which explains why you are making the referral and what service you are asking for.

You will be reminded that in most cases you should have made attempts to consult with the parents/carers before making the referral.

If you are unsure if you should consult with parents/carers before making the referral, speak to your safeguarding lead or ring Bridge on **0161 603 4500**.

If you are making a referral for an **Early Help service**, this can only be accepted if parents have consented to the referral.

Please record the parent’s/carer’s response to the referral, or why you have not consulted with them.
Use the drop-down menus titled “Primary presenting issue” and “Presenting Issues” to select a category which indicates the nature of the concern. This will assist the Bridge to prioritise the response to the referral.

If there are multiple concerns which mean several categories may be applicable, use your judgement to select which is the most significant concern.

If you are making a referral for an Early Help service, please pick this option in both drop-down menus.

Your knowledge of the child and family may be limited due to the nature of your role and/or how you have interacted with them.

As a result you may not have any information which relates to some of the prompts given.

You should always be able to state what the worry is.

If you don’t have any information which is relevant in another section of the form (for example, information about the wider family) this is ok, but please state this clearly.

What are we worried about?

• List the concerns that you have identified and the impact on the child/family.
• Be clear what is happening now, what has happened in the past, and what you are worried might happen in future.
• Be clear what child/family member each concern relates to.
• If there are risks but you have taken action to try to manage them, tell us what you have done.

Be as descriptive as possible. For example, if you are raising concerns around poor home conditions, explain exactly what this looks like.
What is going well for this family and what resources/services are already in place?

- Please consider: presentation, health, education (attainment or attendance), engagement by parent, etc.
- What support is already in place from you, other professionals, family, or within the community?
- What family/friend/community support is available that could be put in place to try to address some of the worries?

“Complicating factors” are things which are not the main reason you are worried, but which might be making it more difficult for the family to address the worries and care for the children.

For example:
- A mother has disclosed to you she is being subjected to emotional abuse by her partner. This is your “worry”.
- You also think she may have additional learning needs which makes it hard for her to understand information given to her about the impact seeing the abuse has on her child. This is a “complicating factor”.

You should normally be able to identify something that is going well for the child/ren and family.

For example:
- A father attends school regularly and is verbally abusive and threatening to staff because he thinks they treat his son unfairly. The son is seeing this behaviour.
- Grandmother sometimes attends with father and is able to de-escalate father’s behaviour when she does.
Salford has an Early Help Strategy. You are reminded to think about whether before making a referral it would be appropriate to complete an Early Help Assessment (EHA) and/or initiate a Team Around the Family (TAF) meeting.

You can use the embedded link to learn about EHAs and TAFs.

If you are making a referral for Early Help, please tell us what you think the family need.

You can use the embedded link to see what services Early Help can offer.

What needs to change to make things better/safer for the child/ren?

• List changes to the situation of child/ren and family that you think are needed.
• What support do you think would be helpful for the child/ren and family in reducing the concerns?

Please tell us if there are any risks professionals need to be aware of when dealing with the situation.

For example:
• Suspected drug paraphernalia in the home, such as use of needles.
• Aggressive dogs in the home.