# Standards and Guidance for Multi- Agency Referrals to Multi- Agency Safeguarding Hub (MASH) Children’s Social Care

This guidance will support you to make good quality referrals to Children’s Social Care via the Multi- Agency Safeguarding Hub (MASH).

Before making a referral to the MASH:

1. Discuss your concerns with the child/family, unless doing so would place a child at risk of harm.
2. Consult the Herefordshire [Right Help, Right Time Guidance](https://westmidlands.procedures.org.uk/local-content/2gjN/thresholds-guidance/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent).
3. Consider discussing your concerns with the Designated Safeguarding Lead in your agency.
4. Advise the family that you intend to make a referral to Children’s Social Care, unless advising them of the referral would place a child at risk of harm.

Advice and guidance will always be provided to practitioners by the Multi Agency Safeguarding Hub

by calling 01432 260800 or secure Email [ReferralsCYPD@herefordshire.gov.uk](mailto:ReferralsCYPD@herefordshire.gov.uk)

If you believe that a child/young person is at risk of significant harm always make an immediate referral to MASH or if there is an immediate risk of death or serious injury call West Mercia Police on 999. The Emergency Duty Team for MASH telephone number is (01905) 768020 (\*out of hours number for when MASH are unavailable)

This guidance and associated support documents can be found on the following pages of the [Herefordshire Child Protection Procedures website](https://westmidlands.procedures.org.uk/local-content/zgjN/multi-agency-referral-reporting-concerns-marf/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent).

This guidance includes the following sections to support you in each stage of the referral process:

**Contents**

[1. Before you make a referral 2](#_Toc151720758)

[2. Completing the Multi Agency referral form 4](#_Toc151720759)

[3. Agreement Statements (including Information Sharing) 5](#_Toc151720760)

[4. Details of the Child/ren 5](#_Toc151720761)

[5. Parent / carer, children and others living in the household and Other relevant family/people NOT living in the household: 6](#_Toc151720762)

[6. Reason for Referral 6](#_Toc151720763)

[7. Risk to staff 6](#_Toc151720764)

[8. Your details 6](#_Toc151720765)

[9. Other information attached 7](#_Toc151720766)

[10. Concerns after a referral has been made 7](#_Toc151720767)

[11. Sending in your referral securely 7](#_Toc151720768)

[12. What to expect after a referral has been made 7](#_Toc151720769)

1. Before you make a referral

* Discuss your concerns with the child/family (unless doing so would place a child at risk of harm) and seek to identify what support may help/support them.
* Consider if an [Early Help Assessment](https://www.herefordshire.gov.uk/support-schools-settings/behaviour-support/3) may be appropriate to help/support the child/family
* Consult the [Herefordshire Right Help, Right Time Guidance](https://westmidlands.procedures.org.uk/local-content/2gjN/thresholds-guidance/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent) to inform your judgement and the appropriate service level response
* Consult the [MASH Information Sharing Guidance](https://westmidlands.procedures.org.uk/local-content/zgjN/multi-agency-referral-reporting-concerns-marf/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent) for more information about consent and information sharing.
* Consider discussing your concerns with the Designated Safeguarding Lead in your agency. If your judgment is that the threshold is met for a referral to Children’s Social Care advise the family that you intend to make a referral to Children’s Social Care, unless informing them would place a child at risk of harm
* The General Data Protection Regulation (GDPR) and Data Protection Act 2018 do not prevent, or limit, the sharing of information for the purposes of keeping children and young people safe. There are no barriers to sharing information where there is a safeguarding concern and a child is believed to be at risk of significant harm.
* Fears about sharing information **cannot** be allowed to stand in the way of the need to safeguard and promote the welfare of children at risk of abuse or neglect. No practitioner should assume that someone else will pass on information which may be critical to keeping a child safe.
* All practitioners should be confident of the processing conditions, which allow them to store, and share, the information that they need to carry out their safeguarding role
* Information that is relevant to safeguarding will often be data which is considered ‘special category personal data’ meaning it is sensitive and personal. Where practitioners need to share special category personal data, they should be aware that the Data Protection Act 2018 includes ‘safeguarding of children and individuals at risk’ as a condition that allows practitioners to share information without consent.
* Relevant information can be shared legally without consent from a parent/carer if a practitioner is unable to, cannot be reasonably expected to gain consent from the individual, or if to gain consent could place the child at risk. Relevant personal information can be shared lawfully if it is to keep a child or individual at risk safe from neglect or physical, emotional or mental harm, if it is protecting their physical, mental, or emotional well-being, if it is necessary for compliance with a legal obligation, or if it is necessary for the performance of a task in the public interest.
* Consider if you need to point out in the referral if any other individuals may be at risk of harm, such as a family member making a confidential disclosure who may be put at risk if it is discovered that they made this disclosure.
* If you believe that a child/young person is at risk of significant harm, always make an immediate referral to Children’s Social Care. If there is an immediate danger of death or serious harm, call West Mercia Police 999.

*Safeguarding Advisory Note:*

The central piece of legislation guiding Children’s Social Care is the 1989 Children Act. The key element of it for this guide is its focus on a ‘Child in need’ and a ‘Child in need of protection’.

**Section 17** of the Act places a general duty on all local authorities to ‘safeguard and promote the welfare of children within their area who are in need.’ Basically, a ‘child in need’ is a child who without additional support from the local authority will fail to thrive.

The Children Act 1989 introduced the concept of **significant harm** as the threshold that justifies compulsory intervention into family life in the best interests of the child, and gives local authorities a duty to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer significant harm.

Significant harm is often a complication of significant events, both acute and longstanding, which interrupt, change or damage the child’s physical and psychological development. Some children live in family and social circumstances where their health and development are neglected. For them, it is the corrosiveness of long-term emotional, physical or sexual abuse that causes impairment to the extent of constituting significant harm. In each case, it is necessary to consider any maltreatment alongside the family’s strengths and supports.

The Act sets out the following definitions:

‘*Harm*’ means ill treatment or the impairment of health or development including, for example, impairment suffered from seeing or hearing the ill-treatment of another;

‘*Development*’ means physical, intellectual, emotional, social or behavioural development; ‘Health’ means physical or mental health; and

‘*Ill-treatment*’ includes sexual abuse and forms of ill-treatment which are not physical.

Whether the question of harm suffered by a child is significant revolves on the child’s health and development, and his health or development shall be compared with that which could reasonably be expected of a similar child.

1. Completing the Multi Agency referral form

**PLEASE TYPE OR PRINT THE FORM**. Please complete the form as clearly and fully as possible. Do not delay the referral if you do not have all the information required in a situation where a delay may place the child at risk of harm.

1. Agreement Statements (including Information Sharing)

***Have you had a discussion with the child/family and informed that you are making this referral?* Tick ‘Yes’ or ‘No’**

**What is meant by ‘inform’?** Unless doing so puts the child or other individuals at risk, tell the child or family that you will be making a referral. This should be communicated in a way that will be fully understood by the child or family and understanding should be checked by the referrer.

It is good practice to inform the parent/s or carer that you intend to make a referral (unless to do so would place a child/ren or others at risk of harm). It is critical to develop a co-operative working relationship from the outset (wherever possible) so that parents can feel respected and informed and that professionals are being open and honest with them; and they in turn are confident about providing vital information about their child and family circumstances. HOWEVER, do NOT inform parents if you have reason to believe this would put the child or others at risk of harm (i.e. the parent may the perpetrator of abuse or harm).

In most circumstances, informing a child/young person that you are going to make a referral and for what reason, is good practice. However, you need to use your professional judgement about whether this would place the child at risk of harm.

If you have not discussed the referral with the child/family, you must state the reasons why. Note if you have not informed the family or child that you are going to make a safeguarding referral, you should still make that referral if you have concerns about the safety of a child. Relevant personal information can be shared lawfully if it is to keep a child or individual at risk safe from neglect or physical, emotional or mental harm, if it is protecting their physical, mental or emotional wellbeing, if it is necessary for compliance with a legal obligation, or if it is necessary for the performance of ta task in the public interest.

See the [MASH Information Sharing Guidance](https://westmidlands.procedures.org.uk/local-content/zgjN/multi-agency-referral-reporting-concerns-marf/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent) for further guidance on information sharing and consent.

1. Details of the Child/ren

*Child/ren Name:* State clearly the correct spelling of the child/rens full name and any other name that the child is known by, or has been known by. If you are making a referral about more than one child in a family unit please list all the children’s names here with the child you have most contact with listed first. Include further details for only the child you have listed first. Please relist the other children in the Family Composition section with their data of birth and relation to the main child (i.e. sibling).

*Gender*: Please state identification of gender – or Unknown if unborn child.

*DOB / Expected Date of Delivery*: State the full date of birth of the child/ren at the time of the referral. State if the child is not yet born and state the expected date of delivery.

*Religion:* Please state, if known**.**

*Ethnicity:* State clearly, to the best of your knowledge, the ethnicity of the child. This information may assist to identify services that meet the child’s ethnic background**.**

*Language spoken:* It is essential to identify the language of the child and parents. This information will ensure that Children’s Social Care is aware of any language needs when engaging and communicating with the family.

*Address, Postcode, Contact Phone Number for Carer/Parent:* State clearly the full home address of the child including the postcode and phone number. If the child is residing at more than one address or is residing away from their home address, please include all the details under the section current address (if different from above).

*School/preschool:* Please complete if known. Include nursery or childminder etc. for younger children.

*GP details:* Please complete if known.

*NHS number:* Health professionals to complete.

*Unique Pupil Number (UPN):* Schools and colleges to complete.

*Is an Interpreter or signer needed?* Laming Recommendation 12 states that when communication with a child is necessary for the purpose of safeguarding and promoting the child’s welfare and the first language of that child is not English, an interpreter must be used. If the child’s first language is not English and an interpreter is not needed, please state clearly the reason why.

*Does the child have a disability?* Please tick yes or no if the child is disabled – give a brief description of the disability here and then include more details of the disability including any Statement of Special Educational Needs in the assessment section (child’s development needs) below

1. Parent / carer, children and others living in the household and Other relevant family/people NOT living in the household:

Please give details of all other children in the household and state if these children are also subject to referral. Please state all other adults in the household e.g. relatives, lodgers or family friends and also include details of any partners (to main carer) who may have contact with the family, and their relationship to the child. Please also include any significant adults who do not live at the same address as the child being referred. Indicate the person/s with parental responsibility.

1. Reason for Referral

Please refer to the Right Help, Right Time Document in completing this section, and communicate your specific concerns as to how the child’s health and development are being adversely affected by the issues that are causing you concern. Include your professional judgement, backed up by an explanation of the evidence. See further guidance on the MARF form.

1. Risk to staff

Please give details of any likely risks that might be faced by staff if they contact the family either by telephone or face to face. This can include risks such as hostile family members or aggressive dogs. This can be included in “Any other relevant information.”

1. Your details

State your name, work contact details, the organisation you work for and the role you undertake within that organisation. If you are completing the form in hard copy, please ensure that you sign and date the form. Please include your telephone number and email address. It is helpful, if you work for an organisation that has multiple teams/ departments that you clearly state in which department you work.

If you have previously made a telephone referral and are now providing confirmation of that referral, please indicate on the form.

1. Other information attached

Please submit any supporting information. For example: Completed Early Help Assessment, Child Neglect Screening Tool, Graded Care Profile 2 form, Child Exploitation (Get Safe) Risk Assessment, Domestic Abuse Risk Assessment, body map, school attendance, etc.

1. Concerns after a referral has been made

Following your referral, if new concerns or information emerges about the child, contact the MASH to share new information or make a new MARF referral.

If you are concerned about another agency’s decision or action related to a child or young person, including drift and delays in response, and you believe that the child is still at risk of harm, follow the [Escalation Policy; Resolution of Professional Disagreements.](https://westmidlands.procedures.org.uk/local-content/4gjN/escalation-policy-resolution-of-professional-disagreements/?b=Herefordshire%20%20%20%20%20%20%20%20%20%20Manage%20Cookie%20Consent%20%20We%20use%20some%20necessary%20cookies%20to%20make%20this%20website%20work.We%27d%20like%20to%20set%20additional%20cookies%20to%20understand%20how%20you%20use%20the%20site,%20remember%20your%20settings%20and%20improve%20the%20website.See%20our%20full%20cookie%20policy%20for%20more%20information%20which%20includes%20a%20list%20of%20all%20of%20the%20cookies%20we%20use.%20%20%20%20%20%20Accept%20additional%20cookies%20%20%20%20Reject%20additional%20cookies%20%20%20%20%20%20%20%20Cookie%20Policy%20%20%20%20Manage%20Consent) A child’s safety comes first – (please note this applies where there is a concern involving any agency)

1. Sending in your referral securely

If you have completed the Multi Agency Referral Form (MARF) electronically please email the form from a secure email address to: [ReferralCYPD@herefordshire.gov.uk](mailto:ReferralCYPD@herefordshire.gov.uk). If you have hand written the form, scan the form and send securely via email as above.

If your agency has access to Anycomms+ (a secure files transfer system hosted by Herefordshire Council) send the file to the service listed as: Children’s safeguarding & family support

For further guidance please telephone MASH by calling 01432 260800. Agencies must take extra care in ensuring information about children is sent as securely as possible to the Multi Agency Safeguarding Hub (MASH). It is important to note however that the child’s needs are paramount and a referral should not be delayed if a secure process cannot be followed.

1. What to expect after a referral has been made

Your referral will be reviewed by a manager in the MASH who will make an initial decision on whether the concerns meet the thresholds for child safeguarding, and next steps. This decision is made within 72 hours of the referral, although most decisions are made much sooner. If the referral does not meet the threshold for further involvement of the MASH or children social care, it might be that Early Help support can be offered.

After you make a referral, you will receive an outcome letter from the MASH, which explains the decision that has been made and next steps.

Document Classification

|  |  |
| --- | --- |
| Author Name & Role | Herefordshire Safeguarding Children Partnership |
| Date Created | Dec 2017 (original) |
| Date Issued |  |
| Description | Standards and Guidance about completing a multi-agency referral form |
| File Name | Standards & Guidance for Completing a MARF |
| Format | Word |
| FOI/EIR Disclosure |  |
| Geographical Coverage | Herefordshire |
| Group Access | Public |
| Language | English |
| Master Location | West Midlands Safeguarding Children Procedures |
| Publisher | Herefordshire Safeguarding Children Partnership |
| Rights Copyright | Copyright of HSCP |
| Security Classification | Public |
| Subject | Safeguarding Children Guidance |
| Type | Guidance |

Consultation Log

|  |  |
| --- | --- |
| Date sent for Consultation | 27/07/2023 |
| Consultees | MASH Groups |
|  |  |
|  |  |

Approval Log

|  |  |
| --- | --- |
| To be agreed by | MASH Group |
| To be approved by | MASH Group |
| To be reviewed by | MASH Group |
| Review date: | **May 2025** |
|  |  |

Version Log

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Version | Date | Description of change | Reason for Change | Pages |
| V 0.1 | December 2017 |  |  |  |
| V1.1 | August 2018 | Change to Info sharing/ consent. Changes to MARF, included GCP2 | To update following changes to MARF referral Form and info sharing |  |
| V1.2 | November 2018 | Changes to info sharing | GDPR compliance |  |
| V1.3 | March 2019 | Added extra info re accompanying forms such as  EHA, CSE Tool etc. | As across |  |
| V1.4 | June 2019 | Added AnyComms contact details | Schools a sked for info to be added |  |
| V1.5 | November 2019 | Added section ‘Concerns after a referral has been made |  |  |
| V1.6 | 31 January 2020 | New email address added for MASH | Gcsx email address closed |  |
| V1.7 | March 2020 | Logo and name SCYPiHP changed |  |  |
| V1.8 | October 2023 | Update to document to marry up with revised MARF/SOP/RHRT | Revisions made to MARF/RHRT and creation of new SOP |  |