

Appendix A: Case Notification Form

CONFIDENTIAL WHEN COMPLETED

This referral form is used to notify Stockport Safeguarding Children Partnership that there may be a case in need of some form of Partnership response. This could be a **Rapid Review, A Local Practice Learning Review or a Case Escalation.**

A Rapid Review will be appropriate where the case meets notifiable incident criteria and you believe that the 3 Statutory Partners need to assess the case for a Child Safeguarding Practice Review and report this to the National Panel for consideration of a national review.

A Local Practice Learning Review is for cases that are not notifiable incidents but where professionals feel there may be learning about how we can improve our local multi-agency working through some form of multi-agency learning process or event. This may also be cases where you believe the practice has been very good and may show case effective multi-agency working.

Case Escalation is for cases that there has been professional disagreement about the response and the professionals involved, and their managers, have been unable to find a resolution. Therefore, the three statutory partners and potentially the independent Chair may need review decision making and undertake mediation.

Professionals should discuss the case with their agency designated safeguarding lead or the Stockport Safeguarding Children's Partnership manager to determine which learning and support process is required before submitting the form. This will support the partnership team in determining the most appropriate response pathway.

This referral template consists of the following colour coded section:

Section 1: Referral	To be completed by referring agency
Section 2: Outcome and Recommendations	To be completed by the Practice Review Virtual Panel and SSCP Partnership Manager

There is further guidance at the end of the form in "Tips for Referrers"

Forms should be returned via email to: lsb@stockport.gov.uk

SECTION 1: REFERRAL DETAILS

1.1 Referrer Information

Date of Referral to SSCP	
Date of event prompting referral	
Referring agency	
Name of referrer	
Job title	
Contact details (telephone and email)	
Who has the referral been discussed with (include managers details and any external agency discussions)	
Your agencies nominated lead for the potential review process	Name:
	Role:
	Contact email / number:

1.2 Reason for notification *(please tick ✓ the box that applies for the pathway you are seeking)*

A	Referring a Notifiable Incident that requires a Rapid Review Screening panel to determine if it is a Serious Child Safeguarding case	<input type="checkbox"/>
<p>Please note a Serious Child Safeguarding Case is defined by the Working Together 2018 as:</p> <p>10. <i>Serious child safeguarding cases are those in which:</i></p> <ul style="list-style-type: none"> • <i>abuse or neglect of a child is known or suspected and</i> • <i>the child has died or been <u>seriously harmed</u></i> <p>11. <i>Serious harm includes (but is not limited to) serious and/or long-term impairment of a child's mental health or intellectual, emotional, social or behavioural development. It should also cover impairment of physical health. This is not an exhaustive list. When making decisions, judgment should be exercised in cases where impairment is likely to be long-term, even if this is not immediately certain. Even if a child recovers, including from a one-off incident, serious harm may still have occurred.</i></p> <p>This includes cases of abuse or neglect leading to serious harm both within and outside of the local area.</p> <p>Notifiable Incidents also include any Looked After Child even if abuse or neglect is not known or suspected. Areas can also have regard to incidents within institutional regulated settings such as child minders, children's homes secure homes and adoption support agencies.</p>		

Local Authorities have a duty to notify these cases to the Secretary of state and Ofsted via the National Panel.

Cases meeting the threshold for a Rapid Review screening that is reportable to the National Panel should be those that are distinct from usual Child Protection cases in terms of issues in relation to multi-agency working and the harm experienced. Reviews use the concept of serious harm to encourage professionals to differentiate between cases of significant harm that are child protection and those that are so serious they require the addition of a multi-agency review process.

B Referring a case for consideration of a local practice review

These are cases that do not meet the notifiable incident criteria but are felt to hold valuable lessons for practice. For example, these may be cases that have uncommon complex issues where professionals may have struggled to effectively manage risk or work collaboratively to address concerns. This could be cases of criminal exploitation or Female Genital Mutilation.

The purpose of referring these cases is to create a learning opportunity for the professionals involved to reflect on what worked well, what caused some concerns and identify what could be done to improve experiences and outcomes moving forward.

Similarly, this referral could be to share a good practice case where professionals were able to effectively collaborate and coordinate practice to the benefit of the child / young person or family. In these instances you may be seeking to show case a method of working that celebrates effective partnership.

C Escalating a dispute case for Partnership Review

Professionals should be able to challenge each other in order for practice to be effective. However, there are occasions where challenge and disagreements can become detrimental to multi-agency working and impede effective outcomes for the child and/or young person.

In these cases professionals have, in conjunction with their line managers, been unable to reach a consensus on how best to work together. This may relate to the threshold a case should be managed at or the interventions required or the specific response of an agency.

Before the partnership can become involved professionals must have attempted to discuss and resolve the dispute amongst themselves. If no way forward has been found and a decision urgently needs to be reviewed and challenged then professionals can escalate the matter to the SSCP Partnership Manager. The case will then be discussed by the statutory partners and reviewed with the Independent Chair for a final determination.

1.3 CHILD DETAILS

Name of child	
Date of Birth	
Age	
Gender	
Disability	
Name of GP, if known	

1.4 Interested Parties: Personal i.e. parents, siblings etc.				
Relationship to child	Name	Date of Birth	Address	Informed of referral? Y/N

Please identify how the parent/ carer and/ or child and young person may be involved in any learning process taken forward. If there are reasons you believe they may not be able to participate please state the rationale. If they are already aware of the potential process, please state how they would like to be part of the potential case review:

1.4A Interested Parties: Professionals i.e. agencies involved in supporting the child or family			
Agency	Name of professional /key-worker	Contact Details (email or phone)	Nature of involvement and/or intervention

1.5 SUMMARY OF EVENTS AND IMPACT ON THE CHILD

Characteristics of Case <i>(please tick any that apply)</i>					
Domestic abuse	<input type="checkbox"/>	Alcohol abuse	<input type="checkbox"/>	Drug abuse	<input type="checkbox"/>
Parental mental health	<input type="checkbox"/>	Fabricated illness	<input type="checkbox"/>	Shaken baby syndrome	<input type="checkbox"/>
CSE / Sexual abuse	<input type="checkbox"/>	Parent in care / care leaver	<input type="checkbox"/>	Missing	<input type="checkbox"/>
Child of teenage parent	<input type="checkbox"/>	Gun and Gangs	<input type="checkbox"/>	Serious illness	<input type="checkbox"/>
Emotional abuse	<input type="checkbox"/>	Recent neglect	<input type="checkbox"/>	Long standing neglect	<input type="checkbox"/>
Physical abuse	<input type="checkbox"/>	Self-Harm / Suicide	<input type="checkbox"/>	Accidental Injury	<input type="checkbox"/>
Other features (please specify)					

ABOUT THE INCIDENT
 Brief description of the event triggering the referral, including key dates. Why is this case being referred at this time? Including details of any immediate action taken to ensure child/siblings safety:

WHY YOU ARE MAKING THIS REFERRAL: YOUR VIEWS

Please explain why you think this meets the criteria for the process you selected above in section 1.2, use the prompts below to structure your explanation.

What worked well:

What didn't work well:

What do you think are some of the key issues and what you think needs looking at in the review:

SECTION 2: TO BE COMPLETED BY THE SSCP Virtual Panel

Names and organisation of Panel Members making decision:

SMBC: **GMP:** **CCG:** **Other:**

2.1 Referral Decision of Virtual Panel (tick v one)

Meets threshold for Rapid Review	Meets threshold for a case practice review, but not a Rapid Review	Meets criteria for Escalation	Does not require SSCP response (i.e. alternative process more appropriate SAR / DHR)	Queries back to referrer before decision can be made

2.2 Rationale for the Decision

Please refer to Virtual Panel Guidance (Appendix 3)

Please indicate why the panel has determined the chosen pathway for this case.

In cases where a Rapid Review is selected please note how the Serious Harm criteria has been determined

Selected Pathway	
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Rationale	
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