

Pathways

V12



Pathways

Key Information to be
obtained from caller

Guidelines for Open Cases

Additional Contacts on
Non-Open Cases

Guidelines for Signposting
to Services



Pathways

Abuse and Neglect

Concerns about Parents

Adoption/SGO/Private
Fostering

Exploitation

Children with Disabilities

Housing and Finance

Missing Children/Young
People

Notifications/Other Local
Authorities

Unborn
Children/Relinquished
Babies

Child Mental
Health/Challenging
Behaviour/Drug and Alcohol

Court Order

Unaccompanied Minors

Abuse and Neglect



Physical Abuse and
Chastisement

Emotional Abuse and
Neglect

Female Genital
Mutilation/Honour Based
Abuse/Forced Marriage

Sexual Abuse

Domestic Abuse

Allegation or disclosure that a child or young person is being hit or injured by family member/carer/partner - questions to clarify the concerns:

- Where, who hit or injured the child –family or stranger?
- Is there a current injury? If not when did alleged incident take place?
- What has the child said about how the injury occurred? (age appropriate)
- Has child expressed any anxiety/worry?
- Where is the child now?

Note this includes shaken baby.

Physical Abuse and Chastisement



Physical Injury caused by adult

Death of Child

Injury caused by Peer

Injuries caused by animals

Medication Concerns

Allegation or disclosure that a child or young person is being hit or injured by family member/carer/partner - questions to clarify the concerns:

- Where, who hit or injured the child –family or stranger?
 - Is there a current injury? If not when did alleged incident take place?
 - What has the child said about how the injury occurred? (age appropriate)
 - Has child expressed any anxiety/worry?
 - Where is the child now?
- Note this includes shaken baby.**

Physical Injury caused by adult



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	Parent threatening to physically harm child of any age or alleged physical chastisement	An allegation or disclosure that a child has been hit by a parent or carer. No historical or current injuries. Assault of a child by adult friend or extended family member Injury OR an assault allegedly caused by an adult working with children		Any bruising or mark to a non-mobile (due to age or disability) child Child has suspicious injury (bruise or mark)(injury does not fit explanation given) Injuries caused by parental restraint (Intentional injury by carer / parent)	

Allegation or disclosure that a child or young person is being hit or injured by family member/carer/partner - questions to clarify the concerns:

- Where, who hit or injured the child –family or stranger?
 - Is there a current injury? If not when did alleged incident take place?
 - What has the child said about how the injury occurred? (age appropriate)
 - Has child expressed any anxiety/worry?
 - Where is the child now?
- Note this includes shaken baby.**

Death of Child



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
Death of a child where cause is natural or accidental or child takes their own life if not known and no social care history No role for CSC		Death of a child where cause is natural or accidental if a closed case but there has been previous Children's Services involvement <i>Notification of meeting to review MASH would attend</i>		Sudden Unexpected Death of a child where non-accidental or neglectful cause is suspected <i>Notification of meeting to review Assessment Team would attend</i>	

Allegation or disclosure that a child or young person is being hit or injured by family member/carer/partner - questions to clarify the concerns:

Injury caused by Peer



- Where, who hit or injured the child –family or stranger?
 - Is there a current injury? If not when did alleged incident take place?
 - What has the child said about how the injury occurred? (age appropriate)
 - Has child expressed any anxiety/worry?
 - Where is the child now?
- Note this includes shaken baby.**

Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	Injuries caused by peers through a fight/sibling disagreement	Serious injuries caused by peers/siblings requiring medical treatment		(Serious injury, parents not protective)	

Allegation or disclosure that a child or young person is being hit or injured by family member/carer/partner - questions to clarify the concerns:

- Where, who hit or injured the child –family or stranger?
 - Is there a current injury? If not when did alleged incident take place?
 - What has the child said about how the injury occurred? (age appropriate)
 - Has child expressed any anxiety/worry?
 - Where is the child now?
- Note this includes shaken baby.**

Injuries caused by animals



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
Injuries caused by animal no other concerns are apparent CSC to advise caller to contact the police and seek medical attention		Avoidable injury caused by animal other concerns are apparent such as neglect			

Allegation or disclosure that a child or young person is being hit or injured by family member/carer/partner - questions to clarify the concerns:

Medication Concerns



- Where, who hit or injured the child –family or stranger?
 - Is there a current injury? If not when did alleged incident take place?
 - What has the child said about how the injury occurred? (age appropriate)
 - Has child expressed any anxiety/worry?
 - Where is the child now?
- Note this includes shaken baby.**

Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	Lack of understanding not serious/life threatening	Failure to follow medical advice re. medication		Professional concerns that parent has deliberately over medicated their child or omitted to medicate their child Allegation of fabricated or induced illness where the perpetrator reports a fabricated clinical story to professionals	

Female Genital
Mutilation/Honour Based
Abuse/Forced Marriage



Forced Marriage

Female Genital Mutilation
“cutting”

Honour Based Abuse

Forced Marriage



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
		Child young person allegedly at risk of Forced Marriage		Evidence that child/ young person is at imminent risk of Forced Marriage	

Female Genital Mutilation
“cutting”



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
				<p>Child where there is a concern that FGM has taken place</p> <p>Professional concern that child or UBB is likely to suffer FGM and evidence that mother has suffered FGM</p>	

Honour Based Abuse



<p>Universal Services</p>	<p>Early Help</p>	<p>MASH</p>	<p>Assessment Team s17 child in need or 0-25 children with disabilities</p>	<p>Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours</p>	<p>TYSS Peterborough</p>
		<p>Child or young person allegedly at risk of Honour Based Abuse.</p>		<p>Evidence that child or young person is at imminent risk of Honour Based Abuse</p>	

Domestic Abuse



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
<p>Parents/ Children seeking information about domestic abuse services inc Refuge accommodation</p>	<p>Child demonstrating aggression towards adults</p> <p>Report from neighbour that couple are often arguing with their children present</p> <p>Police report verbal DA with no social care history</p>	<p>Young person is a perpetrator of domestic abuse to parent CCC</p> <p>Young person is a victim of domestic abuse by peer CCC</p> <p>Physical DA incident, children not present, no previous history</p> <p>Parent/Carer DA with child/children present</p> <p>Children presenting as violent in school and disclosed regular domestic abuse at home</p> <p>Police Physical DA with Social Care history.</p> <p>Cases that are not open and meet MARAC threshold to come to MASH</p>	<p>Previous substantive history of DA that has required previous intervention by Social Care</p> <p>Abusive relationship resumed</p> <p>Parent/Carer physical DA with child/children present</p>	<p>Partner murders partner</p> <p>Immediate risk of injury to a child</p> <p>(Children present during serious incident)</p> <p>Guns / Weapons in household.</p>	<p>Young person is a perpetrator of domestic abuse to parent</p> <p>Young person is a victim of domestic abuse by peer</p> <p>Children presenting as violent in school and disclosed regular domestic abuse at home</p>

Sexual Abuse



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	<p>A child 14+ who has been a victim of indecent images by a non-family member, of the same age not part of an organised group (CSE)</p> <p>Young Person in possession of indecent images</p>	<p>A child under 14 who has been a victim of indecent images by non-family member</p> <p>Child under 14 having sexual intercourse with another child of a similar age</p> <p>Anonymous or professional report that child has been sexually abused by family or friend</p> <p>Anonymous or professional concerns re CSE or grooming by a non-family member of a child</p> <p>Anonymous or professional concerns indicating possible sexual abuse</p> <p>Concerns a child who has been sexually abused by a stranger non family/ non professional</p> <p>Young person displays inappropriate sexualised behaviour which requires further investigation CCC</p>	<p>Evidence of child sexual exploitation/ grooming CCC</p> <p>Young person at risk of being coerced or is being coerced into sexual activity due to gang involvement CCC</p>	<p>Parent in possession of indecent images</p> <p>Sexual activity between siblings</p> <p>Child disclosed clear sexual abuse</p> <p>Child found in premises used for prostitution</p> <p>Child sexually abused by another child</p> <p>Child who has sexually abused another child</p> <p>Medical evidence received indicating sexual abuse</p>	<p>Young person displays inappropriate sexualised behaviour which requires further investigation</p> <p>Young person at risk of being coerced or is being coerced into sexual activity due to gang involvement</p>

Emotional Abuse and
Neglect



Neglect

Emotional Abuse

Perplexing Presentation
including fabricated and
induced illness

Neglect



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	<p>Caller with emerging concerns of neglect where the family have requested help and there is no significant social care history</p> <p>Professional with general concerns about child's development</p> <p>Professional concerns about a child or children being home educated</p> <p>Missed or late for medical appointment and general concerns</p>	<p>Call re significant concerns and a history of concerns that suggest that the child may neglected i.e. unfed, dirty, playing unsupervised on the street when too young or out too late</p> <p>Missed medical appointments that can cause harm to the child's health</p>	<p>Child under 5 'failing to thrive or not meeting developmental milestones and this is not attributable to disability/illness</p> <p>Professional has clear evidence of specific concerns that indicate a child is at risk/suffering from neglect</p>	<p>Police have taken action using police protection powers e.g. Parent / carer has been arrested. Neglectful home environment.</p> <p>Child aged under 5 home alone</p> <p>Child aged under 11 left alone or inappropriately (due to age and/or vulnerability) with siblings in circumstances which places them at significant risk of injury or neglect</p>	<p>Single child aged 13 and over no previous concerns</p>

Emotional Abuse



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	Professional has non-specific expression of concerns about child's wellbeing	<p>Dispute resulting in parents making allegation against each other</p> <p>Professional has observed parent impacting negatively on child's emotional wellbeing</p> <p>Non-Professional caller with concerns that child is suffering emotional abuse.</p>	Professional with significant concerns that child is suffering emotional abuse that is impacting on their emotional wellbeing i.e. child being repeatedly taunted by parent, child being seriously caught up in on-going parental dispute, on-going humiliation/scapegoating by parent/carer and / or there is significant history		Single child aged 13 with significant concerns that child is suffering emotional abuse that is impacting on their emotional wellbeing

Perplexing Presentation including fabricated and induced illness



<p>Universal Services</p>	<p>Early Help</p>	<p>MASH</p>	<p>Assessment Team s17 child in need or 0-25 children with disabilities</p>	<p>Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours</p>	<p>TYSS Peterborough</p>
			<p>If there are professional concerns about parental behaviour which may indicate fabricated or induced illness</p>	<p>If clear medical evidence presented that a parent or carer is deliberately harming a child</p>	

Exploitation



If a risk assessment has been completed by a professional and the outcome is emerging, send to Early Help. If the outcome is moderate, send to MASH and if the outcome is significant, send to Assessment Teams.

Child who may be sexually exploited

Concern about radicalisation (PREVENT)

Concerns about an organisation or an individual

Child who may have been criminally exploited

Child who may have been trafficked

Child who may have been trafficked



If a risk assessment has been completed by a professional and the outcome is emerging, send to Early Help. If the outcome is moderate, send to MASH and if the outcome is significant, send to Assessment Teams.

Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
		Concern that a child may have been trafficked		Clear evidence that child has been trafficked	

Child who may be sexually exploited



If a risk assessment has been completed by a professional and the outcome is emerging, send to Early Help. If the outcome is moderate, send to MASH and if the outcome is significant, send to Assessment Teams.

Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
		Concerns around a number of young people being sexually exploited			

Concerns about an organisation or an individual



If a risk assessment has been completed by a professional and the outcome is emerging, send to Early Help. If the outcome is moderate, send to MASH and if the outcome is significant, send to Assessment Teams.

Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
If no specific child is mentioned, signpost to the Police					

Concern about radicalisation (PREVENT)



If a risk assessment has been completed by a professional and the outcome is emerging, send to Early Help. If the outcome is moderate, send to MASH and if the outcome is significant, send to Assessment Teams.

Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
		Pass to MASH			

Child who may have been criminally exploited



If a risk assessment has been completed by a professional and the outcome is emerging, send to Early Help. If the outcome is moderate, send to MASH and if the outcome is significant, send to Assessment Teams.

Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	Emerging concerns re child being involved in drug activity		Evidence that the child is involved in criminal/gang activity	Evidence of drug use/drug debts and links to county lines	

Missing Children/Young People



In all cases of missing an email/alert should be sent to MET Hub

Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
		Unknown child or young person or closed case			

Child Mental
Health/Challenging
Behaviour/Drug and Alcohol



Parental concerns about
child's mental health but no
significant harm

Threats to take own life

Child is self-harming (non
life threatening)

Challenging behaviour due
to diagnosis such as
ASD/ADHD

Challenging Behaviour

Children Drug and Alcohol

Threats to take own life



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	Child/young person making threats to take their own life	<p>Notification of a child/young person having made attempts to take their own life under the age of 18 if known.</p> <p>Notification of a child / young person having taking their own life under the age of 18 not known</p>			Child/young person over 13 making threats to take their own life in PCC

Challenging behaviour due to diagnosis such as ASD/ADHD



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	Parent or carer requesting support		Parent not able to cope and wants child accommodated	Parent has lost control and injured child	Beyond parental control

Parental concerns about child's mental health but no significant harm



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	Parent or carer requesting support				

Child is self-harming (non life threatening)



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	Parent or carer requesting support				Child/young person over 13 is self-harming PCC

Challenging Behaviour



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
Caller requests self-help resources – use website	Caller requests support to manage challenging behaviour	Non-Professional reports functioning of the family is significantly impacted by the child's behaviour or the management of the child's behaviour	Professional reports functioning of the family is significantly impacted by the child's behaviour or the management of the child's behaviour	Caller reporting actual injury to child/sibling due to challenging behaviour	Teenager 13+ with challenging behaviour –edge of care

Children Drug and Alcohol



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
Caller requests self-help resources – use website	<p>In CCC, caller raises concerns about child or young person’s drug or alcohol use</p> <p>In PCC, straight through to Change, Grow, Live (CGL) via local offer website</p>	Child or young person has taken alcohol or drugs, other concerns are raised.	Significant overdose/alcohol use resulting in hospitalisation	Significant overdose/alcohol use with unexplained injuries or possible evidence of exploitation resulting in hospitalisation	

Concerns about Parents
 - Parental/Physical Illness or Physical Disability, Parental Learning Difficulties/Disabilities/Mental Health/Drug and Alcohol



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	<p>Parents health – Physical illness, physical disability, parental learning difficulties/disabilities/mental health/drug and alcohol – impacting on family</p> <p>Parents need support following discharge from hospital</p> <p>Child is a young carer</p>	<p>Impact of parental needs on child is not clear</p>	<p>Previous history of involvement no immediate risk</p> <p>Parental health prevents parent caring for child and impact is significant CCC</p> <p>Concerns re alternative care arrangements in the family</p>	<p>Parent's health – Physical illness, physical disability, parenting learning difficulties disabilities/mental health/drug and alcohol harming child's development/health/safety e.g. Children exposed to parent attempt to take their own life</p>	<p>Parental health prevents parent caring for child and impact is significant</p>

Key questions to ask when receiving a contact for a Disabled Child.

Standard questions (e.g. Referrer details, GP details, Family breakdown, parental consent and awareness of what a Single Assessment entails / timescales.)

Does the child have a **diagnosed** disability (Yes/No) –

What is their diagnosed disability? (Please ask which medical professional diagnosed the child's disability and when.) –

Does the child have a **learning** disability (which is different to a learning 'difficulty') –

Is there CONTINUING HEALTH CARE involvement? -

Does the child have an EHCP? (Please ask what their level of functioning is / P Scales) -

Is the child a pupil of an Area Special School (Meadowgate, Granta, Castle, Spring Common, Samuel Pepys, Highfields)? -

Does the child receive DLA and, if so, at what rate -

Sibling Issues: Where there are disabled and non-disabled children within the household, the key question is the **reason** why Social Care are being asked to get involved. If the disabled child is the **only** child requiring attention the contact would be passed to the Disability Social Care Service. However, if the reason for involvement is predominantly family functioning / parenting which would affect **all** of the children within the family, the contact would be passed to an assessment team, with the specialist disability service providing support in relation to the disabled child under an "involved worker" role.

Children with Disabilities



Children with Disability

Children with a CETR (Care,
Education, Treatment
Review)

Children with Disability



Use questions to decide whether child meets criteria for disability service

Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
Information request about available services – refer to local offer		<p>Suspicion or concern of abuse of a disabled child (not an open case)</p> <p>If the child is being neglected (child not being washed, fed, stimulated, spoken to or is left alone in same position and is not mobile/able to change their position)</p>	Request for assessment/ support for a disabled child unless criteria met for 0-25 service in PCC /CWD service in CCC	<p>Evidence of immediate risk of harm and child meets criteria met for 0-25 service in PCC pass to 0-25 inbox</p> <p>Evidence of immediate risk of harm and child meets criteria met for 0-25 service in PCC pass to Assessment Team CCC</p>	

Children with a CETR (Care, Education, Treatment Review)



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
			Where a referral comes to the Customer Service Centre where the child is subject to a CETR (or a date for a CETR is planned) and the family are not currently open to CIN or CP, all referrals should be sent directly to the social work disability service for allocation		

Notifications/Other Local Authorities



Child Protection Transfer In Process

Deportation Notification

HMP Notification

Information Requests

Request for checks under S17/S47 by other Authority

Notification of Missing Family by other Local Authority

Child Protection Transfer In
Process



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough Family Safeguarding Team PCC
In CCC send SOC1233 (form) to referring authority for completion			In CCC completed SOC1233 (form) received In PCC send through to Assessment Team		Transfer in request goes through to Family Safeguarding Team

HMP Notification



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
		<p>Notification of release of prisoner if there are child/ren and unclear in terms of CP risk</p> <p>Notification of release from prison/change of address of someone who poses a risk to children and there are children living at the address.</p> <p>Formal request for contact between a prisoner and a related child from a prison or probation.</p>			

Request for checks under S17/S47 by other Authority



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
If not known record and close.		If found to be living in Cambridgeshire/ Peterborough, send to MASH			

Deportation Notification



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
If no previous history, return information request with covering letter.			If previous history, send to Assessment Team		

Information Requests



	Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
Requests for information from members of the public	Signpost to relevant support services using relevant websites					
Info Requests (OFSTED, CAFCASS etc)	If adult not known Customer Service reply to Ofsted indicating Adult not known.		Complex information requests where there is previous social care history			

Notification of Missing Family by other Local Authority



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
If not known record and close.		If found to be living in Cambridgeshire If found to be living in Peterborough			

Court Order



Private Proceedings

Special Guardianship Order
(SGO)

Private Proceedings



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
			Section 7 report Section 37 report		

Special Guardianship Order
(SGO)



<p>Universal Services</p>	<p>Early Help</p>	<p>MASH</p>	<p>Assessment Team s17 child in need or 0-25 children with disabilities</p>	<p>Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours</p>	<p>TYSS Peterborough</p>
			<p>If there is a court direction to complete an SGO report in relation to a child who lives in Cambridgeshire/ Peterborough</p> <p>Referral to Kinship Assessment Team in the Fostering Service Cambridgeshire</p>		

Adoption/SGO/Private
Fostering



Post Adoption Support

SGO Support

Private Fostering

Post Adoption Support



<p>Universal Services</p>	<p>Early Help</p>	<p>MASH</p>	<p>Assessment Team s17 child in need or 0-25 children with disabilities</p>	<p>Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours</p>	<p>TYSS Peterborough</p>
		<p>Request to view pre-adoption files e.g. CAFCASS or another LA – previous team recorded under the birth record</p>	<p>CCC – send adoption support requests to Assessment Teams</p>		<p>PCC – send adoption support requests direct to TACT</p>

SGO Support



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
PCC - Family who have an SGO made in another LA request support within first 3 years of order being made goes back to their original LA			SGO support requested send to Assessment Team		PCC - Family where child has been placed by PCC request SGO support Family who have an SGO made in another LA request support within first 3 years of order being made

Private Fostering



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
			CCC - Notification from private foster carer for safeguarding checks and s17 assessment to be completed		<p>Notification from private foster carer for safeguarding checks to be completed go to TACT in PCC</p> <p>Notification from language Schools go straight through to Specialist Fostering Team CCC</p>

Housing and Finance



Homelessness and Housing

Finance and Asylum

Homelessness and Housing



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
	<p>Family with children homeless, Council offering emergency accommodation or in process of completing a homeless assessment</p> <p>Notification of Possession Proceedings</p> <p>Requesting support with repairs refer to Housing or landlord – Housing / Landlord</p> <p>28 day notification of eviction</p> <p>Notification of Arrears or Anti-Social Behaviour that put tenants at risk</p> <p>56 day notification of eviction, send standard letter with advice and guidance (56 day notification is a “Notice of Intent”. This is to give notice of a like “Intentionally Homeless” decision)</p>		<p>CCC -Potential homelessness 16/17 year old in CCC goes to Assessment Team</p> <p>CCC- Homeless 16 or 17 year old – Southwark assessment in CCC</p> <p>CCC -Homeless pregnant 16/17 year-old or who has child – Southwark assessment for young people and assessment for unborn/child</p> <p>PCC - Homeless 16/17 y/o with a baby</p> <p>Family with children and will be homeless within the next 7 days and ineligible for District Council support</p> <p>Homeless with no recourse to public funds</p>		<p>Potential homelessness 16/17 year</p> <p>Homeless 16 or 17 year old – Southwark assessment</p> <p>Homeless pregnant 16/17 year-old Southwark assessment for yp (TYSS would refer UBB to Assessment Team if there are concerns)</p>

Finance and Asylum



<p>Universal Services</p>	<p>Early Help</p>	<p>MASH</p>	<p>Assessment Team s17 child in need or 0-25 children with disabilities</p>	<p>Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours</p>	<p>TYSS Peterborough</p>
	<p>Parents who are in financial difficulties and have not yet approached benefits agency or charitable organisations, information re food banks to be provided</p>		<p>Families with no recourse to public funds and are destitute/street homeless or homelessness is imminent</p>		

Unborn and Relinquished
Babies



Unborn Children

Relinquished Babies

Unborn Children



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding	TYSS Peterborough
	<p>A parent is under 18 with no concerns due to good family support</p>	<p>A parent is under 18, previously looked after or a care leaver and is pregnant</p> <p>Unborn child of parent who has had a child removed/adopted previously but are currently caring for other children with no current Children's Services involvement</p> <p>Notification of concealed pregnancy</p>	<p>Previous child/children have been removed from parental care or voluntarily accommodated</p> <p>A parent under 18 who has had previous social care assessment and there are current concerns re safety and risk in the family home</p> <p>A parent has a moderate to significant learning difficulty/significant physical disability or illness which results in concerns about parental ability</p> <p>A parent has a mental health diagnosis – and concerns have been raised about the parents ability to meet the basic needs of the baby due to their mental health difficulties</p> <p>A parent is aged 16 or under where there are parenting capacity concerns</p> <p>Child, once born will have contact with someone who may present a risk to children</p> <p>Information regarding history of suspicious child death of the family i.e. unborn baby where previous sibling died under unclear circumstances</p> <p>On-going drug use/alcohol use during pregnancy</p> <p>A parent is under 18 and there are concerns about sexual exploitation</p> <p>Either parent is not permitted contact with a previous child and one of the parents is pregnant</p>	<p>Strategy Discussion required within timescale of 4 hours</p> <p>Imminent birth of baby with significant parental risk factors</p>	

Relinquished Babies



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
			Pass to Assessment Team		

Unaccompanied Minors



Universal Services	Early Help	MASH	Assessment Team s17 child in need or 0-25 children with disabilities	Assessment Team s47 safeguarding Strategy Discussion required within timescale of 4 hours	TYSS Peterborough
			Unaccompanied minors in PCC go to Assessment Team and in CCC go straight through to Unaccompanied Care Team		

Key Information to be
obtained from caller



Things to remember when taking the referral by phone:

- Name, position, address & telephone number of the caller (office number & mobile if possible, especially if the caller is from a school and it is after school hours)
- Members of the public can remain anonymous if they choose to (but please explain that although we will not disclose their details, depending on the nature of the referral being made sometimes it may be possible for the referred family to guess who the referral has been made by, and we need to make them aware of this). All anonymous safeguarding enquiries will come into MASH.
- Name, DOB & address of child (also capture school, ethnicity, language etc if known and appropriate)
- Parents names, DOB, address(es) & phone number(s) (and capture ethnicity, language etc if known and appropriate)
- Details of any other children/ siblings in the property
- ‘What are your concerns about the child?’ – capture full details, including dates of incidents, what has happened, implements used, quote things said etc.
- Are parents / carers aware that a referral is being made? Have they given their consent ?

Guidelines for Open Cases



Telephone Contact

Written Contact

CETR

Contact on sibling of open
child

MARAC

Complaints

Telephone Contact



If a telephone contact comes through on an open case CSC will try to connect the caller to the relevant case worker/team. If this is not possible they will provide the caller with number.

If not able to contact the team, then:

PCC - CSC will put a case note on LL and send to social worker and Team Manager

CCC - CSC will put a comms log on ONE and email team that there has been a contact.

CSC are not expected to record the content of the call.

Written Contact



If a written referral is received on an open case CSC will complete the following:

PCC - CSC will put a case note on LL and email to relevant worker and Team Manager

CCC - CSC will put a comms log on One, upload the attachment and email team there has been a contact

CETR



Where a referral comes to the Customer Service Centre where the child is subject to a CETR and the family are already open to a social worker under CIN or CP – referral details to be shared directly with the social worker

Contact on sibling of open
child



All contacts should be sent through to the relevant
Assessment Team

MARAC



PCC - CSC will put a case note on LL and send to social worker and Team Manager

CCC - CSC will put a comms log on ONE and email team that there has been a contact.

Complaints



If a complaint is reported for a Cambridgeshire case it should go through to Childrens Services Feedback childrens.servicesfeedback@cambridgeshire.gov.uk or telephone 01223 714765/01223 699664

If a complaint is reported for a Peterborough case it should go through to Children's Social Care Complaints Mailbox childrensocialcarecomplaints@peterborough.gov.uk or telephone 01733 296331

Additional Contacts on Non-Open Cases



Additional contacts are treated as new contacts and passed to the relevant service as dictated by the pathways.

The expectation is that the teams will engage with each other directly where needed.

Guidelines for Signposting to Services



Cambridgeshire

The Cambridgeshire local offer includes a wide range of information about support services for children and young people who have special educational needs and /or disabilities.

This can be accessed through the council website at:

<https://www.cambridgeshire.gov.uk/residents/children-and-families/local-offer/>

Peterborough

The Peterborough local offer includes a wide range of information about support services for children and young people who have special educational needs and /or disabilities. This can be accessed through the council website at

<https://www.peterborough.gov.uk/residents/special-educational-needs/local-offer/>

The Family Information Service has knowledge of services able to offer support to children and their families including information about Childrens Centres, activities for children and young people, information on local voluntary sector services as well as details of childcare support available in the city. They can be contacted on 01733 864 446.

Peterborough Council for Voluntary Services can provide details of the very wide range of small and large community sector organisations across the city. They can be contacted on 01733 311 016