SELF-REFERRAL FORM

Data Protection Act

In accordance with our responsibility under Data Protection legislation, you should be aware that the personal information that you are giving, will be held in line with our policy and procedures and may be passed to other agencies and services where necessary, to ensure that the best possible support is provided and/or when there is a legal duty to provide other organisations with such information.

It is of paramount importance that all children are afforded unconditional protection; therefore should any safeguarding or child protection concerns arise these will be shared with the relevant Local Authority Duty and Assessment Teams or in immediate need the police. The concerns will be discussed with the family where appropriate.

The information I have provided in this form is true to the best of my knowledge. I understand that if any information is subsequently found to be inaccurate, or if essential information has not been shared with the SWEET Project, the support may be withdrawn- I understand that my allocated worker will be a student social worker currently undertaking professional training, and will be supervised by a qualified social worker, who is registered with the Health and Care Professions Council. I acknowledge and agree to information being shared with the project.

Signature of parent

Date

Parental consent must be obtained by the referrer before any interventions will be actioned

Full names and details of all adults in the family

Name	Address and Tel No	DOB	Ethnicity	Relationship to child	Parent responsibly Yes or No	Disability Yes or No

Full names and details of all children in the family:

Name	Address and Tel No if different from above	DOB	Ethnicity	M/F	School/Nursery	Disability Yes or No

	Yes/No	Name of Local Authority	Name of Social Worker
Is your family currently known to the Local Authority			
Are there any Court Orders in place			
Is your family known to the police – please provide information and if are any orders in place			
Is there a FCAF in place and who is the lead practitioner			

Agencies involved with the family

Agency	Contact Information	Agency	Contact Information
Health		CAHMS	
Adult Mental Health		Housing	
Police		Probation	
Fire Service		IFST	
Youth Offending		SENAS	
Substance Misuse		Children Centre	
Big Community		Midwife	
Pregnancy Outreach Workers		Local Church	
Domestic Abuse Organisation		Other	

Services required- please tick appropriate areas of interventions

Basic Parenting Skills	
Guidance and Boundaries	
Routines	
Direct work with Children	
Transition Work	
Attendance at School	
Behavioural Issues	
ADHD/Autism Support Group	
Parenting Group	
Other	

Risk assessment and management of information
Project staff will be conducting the initial assessment via a home visit and thereafter are often working alone. Please supply any relevant information or documents relating to the family, their behaviour, the locality, neighbourhood disputes, specific triggers etc of which staff should be aware and take account of when arranging home visits. Are there any dogs present in the household? Or any other animals that may present a risk?

Other relevant information to support referral:

Please complete and return to:
The Sweet Project
Unit 3 Ardath Road
Kings Norton
Birmingham B38 9PL
Tel: 0121 458 2270 Email: officemanager@sweetproject.co.uk