

ESSEX COUNTY COUNCIL

# How to complete a 'good' Request for Support

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A guide for professionals

## Request for Support

Are you \*

Professional

Professional type

School

Professional

Name	Position	Agency	Address	Contact number	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Agencies involved with the child/ren / young person

Agency	Name	Phone number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Once you have selected you are a professional a drop down box will appear to identify your professional type. If your profession / service is not available then please select other and provide all information below.

**Please provide contact details so information can be clarified and further information obtained where necessary in order to enable effective processing of the request for support.**

## Request for Support - Consent and information sharing

Do the parent(s)/ carer(s) / Young Person (16 Years Plus) give consent to sharing of information? \*

Yes

No

Are the child(ren)/ young person(s) aware?

Yes

No

Are the parent(s)/ carer(s) aware?

Yes

No

Yes – You will be asked to provide details of who has provided consent and how this was provided (written / Verbal).

No – You will be asked to provide a reason. **Please note that unless there is a risk of significant harm you will need to obtain consent and you will be unable to proceed with the request without this.**

If you have already called an urgent referral in and are following it up in writing with this request for support please select '@written confirmation of verbal safeguarding referral'

# Request for Support - Family/ household details

Details of Subject Children

Do you know the child/ren's / Young Person (16 Years Plus) details? \*

Yes

No

Child/rens Main address (including postcode and telephone numbers)

Current address if different, e.g. staying with a relative (including telephone numbers)

Yes –Please provide details including name, date of birth, gender, ethnicity, religion and disability.

No –Please provide as much identifying information as possible this could include; a physical description, age, ethnicity, geographical area, address, child's school, description of parents etc.

**Please provide as much information as possible to aid social care to identify the correct child and family and enable effective processing of your request for support.**

Family / household members

Name	Date of birth or expected date of delivery	Gender	Parental Responsibility	Ethnicity	Religion	Relationship to child/ young person
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Other significant people not living in the household

Name	Date of birth or expected date of delivery	Gender	Parental Responsibility	Ethnicity	Religion	Relationship to child/ young person
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Communication needs (including language)  
This should address the communication needs of all the people who are named above.

Legal status/ immigration status  
This should address the legal status/ immigration status of all immigration status of all the people named above

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

# Request for Support

What are you worried about?  
Is there actual harm? – what action is causing the harm; What is the factual information and evidence base specific to your concern; What are the future dangers for this child (ren)/family should this concern not be addressed? What are the complicating factors for this child(ren) and/or family that makes the concern more difficult to deal with?

What is going well for this family and what resources/ services are already in place?  
What existing support is in place for this child(ren)/ family that has been tested and proven to alleviate the concern; Are there resources (e.g. family/ friends/ community) being accessed or services that are being provided to address the concern? What are the views of the child(ren)? family?

What needs to change to make things better/ safer for this child/ren?  
Please list the changes and outcomes you think are needed. What changes do the family think they need to make? What do they think would help them? What do you think would help to decrease the concern and risk to this family/child/ren? How can Family Operations help the family to make the changes you have identified?

Are there any safety issues/ hazards to be aware of?

## What are we worried about?

- List the concerns that you have identified and the impact on the child / family.
- Be clear what child / family member each concern relates to
- Are you aware of any support that has been provided to the family by yourself, other family or professionals?
- What do you think may happen if the concerns are not addressed?
- What are the views of the child/ren and the family about the concerns?

**Be as descriptive as possible, for example if you are raising concerns around poor home conditions explain exactly what this looks like.**

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

- List changes to the child/ren and family situation you think are needed
- What support do you think would be helpful for the child/ren and family in decreasing the concerns?
- What are the child/rens and families views about what needs to change and the support they feel they may need.

## 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 for the child/ren and the family from you, other professionals, family or within the community?
- What family/ friend/community support is available that could be implemented to alleviate some of the concerns.
- What are the views of the child/ren and family about what is going well?

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

Please list the changes and outcomes you think are needed. What changes do the family think they need to make? What do they think would help them? What do you think would help to decrease the concern and risk to this family/child/ren? How can Family Operations help the family to make the changes you have identified?

Are there any safety issues/ hazards to be aware of?

- Yes
- No
- Unknown

Would you like an email confirmation that your request for support has been received? \*

Please note – This will not be a copy of the form itself

- Yes
- No

[Previous](#) [Finish](#)

If you want confirmation that your request has been received please tick 'yes' and you will then be asked to provide an email address.

Once you have pressed finished you will see a summary of the information you have provided and once reviewed you need to press complete and this will submit the document. You will then be given the opportunity to save or print the form you have completed.