**Request for Family Support Services in Bristol Children’s Centres.**

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| **Covid -19 Temporary important notice:** |
| At East Bristol Childrens Centre we are still accepting new referrals and working alongside families to best support them during the COVID-19 period. |
| Please fill in the referral form below; |
| Please provide as much information and detail as possible, be clear and specific of the support you are requesting for the family and give the reasons why. |
| At the current time we can only accept referrals electronically please send them to eastbristol.childrenscentres@bristol-schools.uk  |

The Children’s Centres Family Support Service is voluntary. You are requesting our help to support specific areas you might highlight on this form. This is for a home visiting service which maybe short (Under six weeks) or a longer piece of work.

We want to build a good relationship with you which is open and trusting. Our work needs to be clear and planning it with you is important so that both of us know the actions we will do to achieve your goals.

**Identifying details:**

|  |  |  |
| --- | --- | --- |
| Name of person being referred: | Phone number: | Address: |
| Name of child/children:  | Date of birth or EDD:  | Relationship to child: |

**What are we worried about?**

**What’s Working Well?**

**What additional support is needed from the Family Support Service for the family?**

**Please note any other agencies working with family and their contact details.**

**Are there any potential risks when making a home visit?**

**For referring agency**

(PVI settings & Childminders do not need to answer this)

* What has your service offered already?
* Has a CNN/Family worker been involved if not what is the reason they are unable to take on this work?

Name of Professional

 Contact Tel No:

Address of Professional

Date form completed

**The parent/carer will be expected to complete a Children’s Centre registration form, in partnership with Children’s Centre staff, when they start to use Children’s Centre services.**

**I have had the reasons for information sharing explained to me and I understand those reasons. I agree to the sharing of information agreed between the services involved, I have parental responsibility.**

Parent/Carer Signature Date