



**Mont Nicolle School**  
**Child Protection Policy**

At Mont Nicolle School we are fully aware and committed to the on-going protection and safety of our pupils, staff and wider community in accordance with Education Department guidance. Our school is committed to providing a secure environment for pupils, where children feel safe and are kept safe. All adults in our school recognise that safeguarding is everyone’s responsibility irrespective of the role they undertake or whether their role has direct contact or responsibility for children or not.

This Policy exists alongside the school’s Safeguarding Policy. As a school we closely follow the guidance and policy of the Education Department, namely the Child Protection Policy (2013), and the wider legislative framework, including advice and recommendations from the Safeguarding Partnership Board.

A copy of the Jersey Education Department’s Policy is kept in the staffroom policy file and in the Headteacher’s office. Copies of both this summary and the full policy are available to parents on request.

All staff working at Mont Nicolle have a duty to share information about children that cause concern to ensure the safety and well-being of all our pupils. The following offer summary guidance for staff and parents.

**The Safeguarding Team at Mont Nicolle:**

<b>Designated Safeguarding and Child Protection Lead:</b> <b>Headteacher, Mrs. Lisa Paul</b>	
<b>Deputy Designated Safeguarding Lead</b> <b>Mrs. Lisa Evans</b>	
<b>SENCo: Mrs Carol Godfray</b>	
Digital Safeguarding: Miss R Harrison	Health and Safety: Mr. M Dottore
Early Help: Mrs Lisa Paul/Mrs C Godfray	Wellbeing Facilitator: Mrs. Carol Godfray
Records Management: Mrs. Jenny Stannard	First Aid: Mrs. Mandy Hussey
<b>Education Department Designated Safeguarding Lead:</b> <b>Shirley Dimaro- 449477 or s.dimaro@gov.je</b>	

**Identifying Children at Risk of Serious Harm**

Teachers and other adults in school are well placed to observe any physical, emotional or behavioural signs, which indicate that a child may be suffering significant harm.

The relationships between staff, pupils, parents and the public which foster respect, confidence and trust can lead to disclosures of abuse, and/or school staff being alerted to concerns.

- Harm means ill-treatment or impairment of health and development, including, for example, impairment suffered from seeing or hearing the ill-treatment of another;
- Development means physical, intellectual, emotional, social or behavioural development;
- Health includes physical and mental health;
- Ill-treatment includes sexual abuse and other forms of ill-treatment which are not physical.
- Abuse and Neglect are forms of maltreatment. Somebody may abuse or neglect a child by inflicting harm or failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them, or, more rarely, by a stranger. They may be abused by an adult or adults, another child, children or young people.

There are four categories of abuse; physical abuse, emotional abuse, sexual abuse and neglect.

### **Recognising abuse**

To ensure that our pupils are protected from harm, we need to understand what types of behaviour constitute abuse and neglect.

Abuse and neglect are forms of maltreatment. Somebody may abuse or neglect a child by inflicting harm, for example by hitting them, or by failing to act to prevent harm, for example by leaving a small child home alone, or leaving knives or matches within reach of an unattended toddler. Abuse may be committed by adult men or women and by other children and young people.

#### Four categories of abuse:

Physical Abuse: Physical abuse is a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. (This used to be called Munchausen's Syndrome by Proxy, but is now more usually referred to as fabricated or induced illness).

Emotional Abuse: Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-

treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual Abuse: Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect: Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers); or
- ensure access to appropriate medical care or treatment.
- It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. (Definitions taken from Keeping Children Safe in Education 2016.)

### **Children who may be particularly vulnerable**

Some children may have an increased risk of abuse. It is important to understand that this increase in risk is due more to societal attitudes and assumptions or child protection procedures that fail to acknowledge children's diverse circumstances, rather than the individual child's personality, impairment or circumstances. Many factors can contribute to an increase in risk, including prejudice and discrimination, isolation, social exclusion, communication issues and a reluctance on the part of some adults to accept that abuse can occur.

To ensure that all of our pupils receive equal protection, we will give special consideration to children who are:

- disabled or have special educational needs
- young carers
- affected by parental substance misuse, domestic violence or parental mental health needs
- asylum seekers
- living away from home
- vulnerable to being bullied, or engaging in bullying

- living in temporary accommodation
- live transient lifestyles
- living in chaotic and unsupportive home situations
- vulnerable to discrimination and maltreatment on the grounds of race, ethnicity, religion, disability or sexuality
- at risk of sexual exploitation
- do not have English as a first language

This list provides examples of additionally vulnerable groups and is not exhaustive.

### **Domestic Abuse**

Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people in a relationship. But it isn't just physical violence – domestic abuse includes any emotional, physical, sexual, financial or psychological abuse. It can happen in any relationship, and even after the relationship has ended. Both men and women can be abused or abusers.

Witnessing domestic abuse is really distressing and scary for a child, and causes serious harm. Children living in a home where domestic abuse is happening are at risk of other types of abuse too. Children can experience domestic abuse or violence in lots of different ways. They might:

- see the abuse
- hear it from another room
- see a parent's injuries or distress afterwards
- be hurt by being nearby or trying to stop the abuse.

Domestic abuse can happen in any relationship, and it affects young people too. They may not realise that what's happening is abuse. Even if they do, they might not tell anyone about it because they're scared of what will happen, or ashamed about what people will think.

### **Child Sexual Exploitation**

Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming. However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse. The school includes the risks of sexual exploitation in the PSHE and SRE curriculum. A common feature of sexual exploitation is that the child often doesn't recognise the coercive nature of the relationship and doesn't see themselves as a victim. The child may initially resent what they perceive as interference by staff, but staff must act on their concerns, as they

would for any other type of abuse. All staff are made aware of the indicators of sexual exploitation and all concerns are reported immediately to the Designated Safeguarding Lead.

### **Taking Action to ensure children are safe at school and at home:**

#### Safeguarding information for all staff.

It is not the responsibility of the school staff to investigate welfare concerns or determine the truth of any disclosure or allegation. All staff; however, have a duty to recognise concerns and maintain an open mind.

Accordingly, all concerns regarding the welfare of pupils will be recorded and discussed with the designated safeguarding lead with responsibility for safeguarding (or the deputy designated safeguarding lead in the absence of the designated person) prior to any discussion with parents.

Staff must immediately report:

- Any suspicion that a child is injured, marked, or bruised in a way which is not readily attributable to the normal knocks or scrapes received in play
- Any explanation given which appears inconsistent or suspicious
- Any behaviours which give rise to suspicions that a child may have suffered harm
- Any concerns that a child may be suffering from inadequate care, ill treatment, or emotional maltreatment
- Any concerns that a child is presenting signs or symptoms of abuse or neglect
- Any significant changes in a child's presentation, including non-attendance
- Any hint or disclosure of abuse about or by a child / young person
- Any concerns regarding person(s) who may pose a risk to children (e.g. living in a household with children present)
- Information which indicates that the child is living with someone who does not have parental responsibility for them (private fostering).

There will be occasions when staff may suspect that a pupil may be at risk, but have no 'real' evidence. The pupil's behaviour may have changed, their artwork could be bizarre, they may write stories or poetry that reveal confusion or distress, or physical but inconclusive signs may have been noticed.

In these circumstances, staff will try to give the pupil the opportunity to talk. The signs they have noticed may be due to a variety of factors, for example, a parent has moved out, a pet has died, a grandparent is very ill or an accident has occurred.

It is fine for staff to ask the pupil if they are OK or if they can help in any way. Staff should use a Blue form to record these early concerns.

If the pupil does begin to reveal that they are being harmed, staff should follow the advice below.

Concerns which do not meet the threshold for child protection intervention will be managed through the Early Help process.

### **Responding to Disclosure/Concerns**

Disclosures or information may be received from pupils, parents or other members of the public. The school recognises that those who disclose such information may do so with difficulty, having chosen carefully to whom they will speak.

Accordingly all staff will handle disclosures with sensitivity. Such information cannot remain confidential and staff will immediately communicate what they have been told to the designated person and make a contemporaneous record.

#### **Principles for All Staff:**

Staff will not investigate but will, wherever possible, listen, record and pass on information to the designated safeguarding lead in order that s/he can make an informed decision of what to do next. Staff will:

- Listen to and take seriously any disclosure or information that a child may be at risk of harm
- Clarify the information
- Make a written record of what the child has said
- Accurately record the date, time, your name and details of the concern.
- Be objective and factual with a verbatim reporting of what the child has said / done;
- Do not make assumptions;
- Opinions are fine but record the information on which you base this opinion;
- State the source of the information; hearsay is fine if you record it as hearsay;
- State whether you shared the information with the parent.
- Try to keep questions to a minimum and of an 'open' nature e.g. 'Can you tell me what happened?' rather than 'Did x hit you?'
- Use TED questions (Tell me about...Explain what you mean by...Describe what I would have seen if I was there)
- Try not to show signs of shock, horror or surprise
- Not express feelings or judgements regarding any person alleged to have harmed the child
- Explain sensitively to the person that they have a responsibility to refer the information to the designated safeguarding officer
- Reassure and support the person as far as possible
- Explain that only those who 'need to know' will be told
- Explain what will happen next and that the person will be involved as appropriate Action by the Designated Safeguarding Officer (or the Deputy Designated Safeguarding Officer in their absence)

Key points for staff to remember for taking action are:

- in an emergency take the action necessary to help the child, if necessary call 999 or 612612, or call MASH directly, 449213.
- report your concern immediately to the DSO, definitely by the end of the day and add to SIMs
- do not start your own investigation
- share information on a need-to-know basis only – do not discuss the issue with colleagues, friends or family
- seek support for yourself if you are distressed.

Following any information raising concern, the designated safeguarding officer will:

- Consider the child's wishes and feelings, but not promise confidentiality
- Consider any urgent medical needs of the child
- Consult with a member of the MASH Team if they are uncertain whether or not a referral is required
- Inform parents that a referral is being made to MASH. The only exception to this is when we believe that discussing the referral with parents would place the child at further risk. This is a matter for MASH to decide.
- Make an immediate MASH enquiry verbally or on an enquiry form to the Jersey MASH Team if there has been a disclosure and/or allegation of abuse or there are clear grounds for concerns about the child's safety and well-being
- Review Action when a child has suffered or is likely to suffer harm and consider Early Help.
- If you decide not to make a referral at this stage, retain the information in written notes on the child's school file (in school office)
- Consider if it would be appropriate to undertake an Early Help Assessment and/or make a referral for other services.
- All information and actions taken, including the reasons for any decisions made, will be fully documented.

### **Making an Enquiry to MASH**

For ease of reference please see below the email address to be used by all schools when sending enquiries to MASH

[\*\*EnquiriesMASH@Jeron.je\*\*](mailto:EnquiriesMASH@Jeron.je)

The subject line must state;

#### **MASH Enquiry Form**

(this is not case sensitive but must have the spaces)

Following MASH if a referral to Social Care has been made, the designated safeguarding lead or other appropriate member of staff will:

- Maintain contact with the allocated Social Worker
- Contribute to the Strategy Discussion and Strategy Meeting

- Provide a report for, attend and contribute to any Initial Child Protection Conference
- Share the content of this report with the parent, prior to the meeting
- Attend Core Group Meetings for any child subject to a Child Protection Plan or Child in Need Meeting for any child subject to a Child in Need Plan
- Where a child on a Child Protection Plan moves from the school or goes missing, immediately inform the key worker in Social Care or the Education Welfare Officer.

The designated safeguarding lead or other appropriate member of staff will:

- Contact the Education Department's Designated Safeguarding Officer if they consider that the social care response has not led to the child being adequately safeguarded and follow this up in writing.
- Contact the Education Department's Designated Safeguarding Officer if they consider that the child is not being adequately safeguarded by the child protection plan and follow this up in writing
- We will provide a secure, caring, supportive and protective relationship for the child
- We recognise that the child's welfare is paramount. Good child protection practice and a good outcome for the child relies on a positive, open and honest working partnership with parents
- Whilst we may, on occasion, need to make referrals without consultation with parents, we will make every effort to maintain a positive working relationship with them whilst fulfilling our duties to protect any child
- Children will be given a proper explanation (appropriate to age & understanding) of what action is being taken on their behalf and why
- We will endeavour always to preserve the privacy, dignity and right to confidentiality of the child and parents.
- The Designated Safeguarding Lead will determine which members of staff "need to know" personal information and what they "need to know" for the purpose of supporting and protecting the child

### **Early Help**

Early Help is everyone's business and practitioners working in universal and targeted services need to be aware of their role in delivering Early Help so that Children and Families receive the right help, at the right time, by the right people, for the right reasons, where they can access it best.

School Practitioners need to assess need using the Early Help Assessment Form and ensure that assessed need is recorded. Assessments carried out with the family provide a better analysis and plans can be developed with families to help them achieve better outcomes. Practitioners need to use the process of assessment as a way of engaging with other practitioners who may already be working with the child and their family, or to bring on board new practitioners who would be able to provide support and advice to the family. This work should be coordinated via team around the family meeting, chaired by the lead profession.

Any member of staff, or indeed the public, can make a MASH enquiry.

Volunteers, students or temporary staff working in school should also follow this guidance, but if in doubt, should immediately speak to the DSO or Headteacher.

### **Allegations regarding person(s) working in or on behalf of the school (including volunteers)**

When an allegation is made against a member of staff, set procedures must be followed in accordance with the Education Department's policy. It is rare for a child to make an entirely false or malicious allegation, although misunderstandings and misinterpretations of events do happen.

A child may also make an allegation against an innocent party because they are too afraid to name the real perpetrator. Even so, we must accept that some professionals do pose a serious risk to pupils and we must act on every allegation.

Staff who are the subject of an allegation have the right to have their case dealt with fairly, quickly and consistently and to be kept informed of its progress.

Allegations concerning staff who no longer work at the school, or historical allegations will be reported to the police.

Where an allegation is made against any person working in or on behalf of the school that he or she has:

- behaved in a way that has harmed a child or may have harmed a child;
- possibly committed a criminal offence against or related to a child; or
- behaved towards a child or children in a way that indicates he or she would pose a risk of harm if they work regularly or closely with children.

We will apply the same principles as in the rest of this document, as well as always follow the procedures outlined in the above-mentioned document. This includes allegations against staff in their personal lives. Whilst we acknowledge such allegations, (as all others), may be false, malicious or misplaced, we also acknowledge they may be founded. It is, therefore, essential that all allegations are investigated properly, in line with agreed procedures and outcomes recorded.

#### **Initial Response to an allegation or concern:**

Initial Action by person receiving or identifying an allegation or concern:

- Treat the matter seriously and keep an open mind.
- Make a written record of the information, including the time, date and place of incident/s, persons present and what was said and sign and date this.
- Immediately report the matter to the most senior person in the organization.

Initial Action by the Designated Safeguarding Manager (The DSM will normally be the Head Teacher).

- Obtain written details of the concern or allegation, but do not investigate or interview child, adult or witnesses
- Contact the Education Department's Safeguarding Lead within 1 working day
- Discuss with the DfE's Safeguarding lead next steps
- Conduct a disciplinary investigation, if an allegation indicates the need for this
- Contribute to the child protection process by attending professional strategy meetings
- Ensure clear and comprehensive records regarding the allegation, and action taken and outcome are retained on the staff member's personnel file
- Consider along with Human Resources and the DfE's Safeguarding Lead whether a referral to the DBS should be made.

### **Children who harm others:**

Our school recognises that the harm caused to children by the harmful and bullying behaviour of other children can be significant. Children who harm others should be held responsible for their harmful behaviour and the school staff alerted to the fact that they are likely to pose a risk to other children in the school, home and community.

Where this harm involves sexual abuse, serious physical or serious emotional abuse, the safeguarding procedures set out in this policy will be applied. This school recognises that children who harm others are likely to have considerable needs themselves and may have experienced or be experiencing significant harm themselves.

### **Whistleblowing**

This guidance is written for staff working with children and young people in education settings including maintained schools. Staff must acknowledge their individual responsibility to bring matters of concern to the attention of senior management and/or relevant agencies. Although this can be difficult this is particularly important where the welfare of children may be at risk. You may be the first to recognise that something is wrong but may not feel able to express your concerns out of a feeling that this would be disloyal to colleagues or you may fear harassment or victimisation. These feelings, however natural, must never result in a child or young person continuing to be unnecessarily at risk.

Remember it is often the most vulnerable children or young person who is targeted. These children need someone like you to safeguard their welfare. Don't think what if I'm wrong - think what if I'm right?

Each individual has a responsibility for raising concerns about unacceptable practice or behaviour

- To prevent the problem worsening or widening
- To protect or reduce risks to others
- To prevent becoming implicated yourself

What stops people from whistle blowing

- Fear of starting a chain of events which spirals out of control
- Disrupting the work or project

- Fear of getting it wrong
- Fear of repercussions or damaging careers
- Fear of not being believed

How to raise a concern:

- You should voice your concerns, suspicions or uneasiness as soon as you feel you can. The earlier a concern is expressed the easier and sooner action can be taken
- Try to pinpoint exactly what practice is concerning you and why
- Approach your immediate manager, Designated Teacher for Child Protection, or Head teacher
- If your concern is about your immediate manager/Head teacher, speak to the Education Department’s Safeguarding Officer
- Make sure you get a satisfactory response - don't let matters rest
- Ideally, you should put your concerns in writing, outlining the background and history, giving names, dates and places wherever you can
- A member of staff is not expected to prove the truth of an allegation, but will need to demonstrate sufficient grounds for the concern.

**Staff Training**

Newly qualified teachers receive child protection training as part of their induction year.

This Child Protection Policy and our procedures are reviewed yearly. We have regular updated Child Protection training, with all staff trained to at least Level 1.

The DSO is trained to Level 3.

A record of who has attended training is kept on Virtual College admin.

**Monitoring and Review**

Author	Lisa Paul
Date Created	September 2016
Reviewed:	January 2021



**PRINT name of person raising concern:**

**Signature:**

**Received by:**

**Signature:**

**In order for this concern to be acknowledged, this form must be countersigned in your presence**

**Date**

Further guidance can be found in the Safeguarding and Child Protection Policy Guidelines. If a MASH referral is required, please contact 519000

**Appendix 2: Chronology Form**

**Education Department**

**Safeguarding Children: Record and Chronology**

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Details of the Child or Young Person for whom there are concerns			
<b>Name</b>			
<b>Date of Birth</b>			
<b>School</b>		<b>Unique Pupil Number (UPN)</b>	

Relevant and / or significant information relating to the child or young person for whom you have concerns		
<b>Date</b>	<b>Print name</b>	<b>Significant Events / Relevant or Additional Provisions in Place / Referrals e.g. meetings, MASH updates, <i>Record any actions to meet safeguarding needs</i></b>

*Insert new rows as required*

Details of Concern(s)
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Concern 1			
<b><i>Date and nature of safeguarding concern: e.g. physical/emotional presentation, change of evident behaviour, information received:</i></b>			
<b>Date:</b>	<b>Time:</b>	<b>Name of person reporting concern;</b>	

		<i>Example - child, class teacher, lunchtimesupervisor, music teacher, parent</i>	
<b>Give details of concern - example: discussion with parent, consultation with DSO or MASH and outcomes:</b>			
<i>Voice of the Child – example: Did the child say anything and if so, what did they say?</i>			
<b>Name:</b>		<b>Designation</b>	

<b>Concern 2</b>			
<b>Date and nature of safeguarding concern: e.g. physical/emotional presentation, change of evident behaviour, information received</b>			
<b>Date</b>	<b>Time</b>	<b>Name of person reporting concern:</b> <i>Example - child, class teacher, lunch timesupervisor, music teacher, parent</i>	
<b>Give details of concern - example: discussion with parent, consultation with DSO or MASH and outcomes:</b>			
<i>Voice of the Child – example: Did the child say anything and if so, what did they say?</i>			
<b>Actions taken</b>		<b>Outcomes</b>	
<b>Name:</b>		<b>Designation:</b>	

**Appendix 3: Escalation form**  
**Education Department**

**Referral Safeguarding Concern Form for  
 Designated Safeguarding Officer (DSO)**

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<b>About the person raising the concern</b>	
<b>Date of Initial Concern</b>	
<b>Name and designation of person raising the concern</b>	
<b>School/College contact details</b>	

<b>About the child or young person for whom you have concerns</b>			
<b>Name of Child/Young Person for whom there are concerns</b>		<b>UPN</b> <b>Unique</b> <b>Pupil</b> <b>Number</b>	
<b>Name of Child/Young Person's Parent/ Carer or Other?</b>  <i>Please specify</i>			
<b>Contact details for adult with parental</b>			

responsibility (PR)

**Is the Child/Young Person aware that you are escalating a concern?**

Yes  No

**Is the next of kin aware that you are escalating a concern?**

Yes  No

**Is the Child Looked After?**

Yes  No

**Does the Child have a CP Plan?**

Yes  No

**Have you completed and sent a MASH Enquiry Form?**

**Yes**

**No**

**If YES, you DO NOT need to complete the next section, but attach your MASH Enquiry Form with this referral**

**What is your concern?**

*Please note that the boxes will expand automatically to accommodate the length of your statement*

**Which other agencies are involved and what is their role?**

**In your opinion, does your concern meet Children's Multi-Agency Safeguarding thresholds?**

**Yes**       **No**

**Add here any specific information that may be relevant**

**Have you contacted the Designated Safeguarding Officer at the ED to discuss your concern**

**Yes**       **Date of Contact:**

**TO BE COMPLETED BY: Designated Safeguarding, Education Department**

**Outcomes**

- |  |                                     |                          |
|--|-------------------------------------|--------------------------|
| <b>1. MASH Enquiry</b>                           | <b>Yes</b>                          | <input type="checkbox"/> |
| <b>2. MASH Rejected</b>                          | <b>Yes</b>                          | <input type="checkbox"/> |
| <b>3. MASH Referral to CIRT</b>                  | <b>Yes</b>                          | <input type="checkbox"/> |
| <b>4. Referral Early Help</b>                    | <b>Yes</b>                          | <input type="checkbox"/> |
| <b>5. MASH Referral Child in Need</b>            | <b>Yes</b>                          | <input type="checkbox"/> |
| <b>6. Referred Health Visitor / School Nurse</b> | <b>Yes</b>                          | <input type="checkbox"/> |
| <b>7. Referral to other agency</b>               | <input type="checkbox"/> <b>Yes</b> |                          |
| <b>8. Other</b>                                  |                                     | <input type="checkbox"/> |

**File Notes:**



