

**HIGHLAND INTER-AGENCY REFERRAL DISCUSSION (IRD) PROTOCOL**

The Inter-Agency Referral Discussion (IRD) process is to be used in the following situations of concern:

* where it is suspected that a child or young person has suffered, is suffering or is likely to suffer harm or abuse
* where an accumulation of concerns in relation to the child indicate risk of harm or abuse

The Inter-Agency Referral Discussion (IRD) process commences with an initial referral discussion and is the first stage of a multi agency response to Child Protection concerns. The process commences following a child concern referral to Health and Social Care or Police.

The Inter-Agency Referral Discussion (IRD) must involve agency decision makers from key agencies and should include Social Work, Health and Police. Other professionals such as Education may also be invited, depending on the circumstances and age of the child.

The purpose of the Inter-Agency Referral Discussion (IRD) is to enable all relevant information to be shared and analysed to ensure that any Child Protection investigations are based on a reasoned, informed and considered plan. This process should lead to a child focused course of action being agreed between relevant parties.

**RESPONDING TO CHILD PROTECTION REFERRALS**

**MULTI AGENCY GUIDANCE**

**Preparation**

**Initial information gathering**

**Date/Time/Place of disclosure for raising of concern**

**Are you clear about the circumstances and parties involved?**

**Current situation of the child i.e. are safety measures in place?**

**Consider whether a crime has or is likely to have been committed**

**Consider whether the child has been a witness to an offence**

**Does the situation require an immediate response to protect the child?**

**if so, contact Police or Social Work without delay**

**Concern identified**

Receiving agency completes initial information gathering

Receiving agency refers to Social Work, Police and Health without delay

**Without Delay**

Police Officer or Social Worker or NHS Child Protection Advisor completes initial checks and discusses with line manager

All agencies begins further research

**SAFEGUARDING OF THE CHILD AND RISK ASSESSMENT MUST BE UNDERTAKEN**

**IS THE CHILD AT RISK OF IMMEDIATE SIGNIFICANT HARM**

NO

YES

Police / Social Work / Health (CPA) initial discussion to agree if an IRD is required

Does the child have a wellbeing need?

NO IRD

YES

NO

No Further Action Required feedback to referrer, parents and partner agencies

**YES IRD**

Follow Highland Practice Model processes

**Ensure** Safety Measures in Place, **Clarify** circumstances and parties involved, **Confirm** a crime has or is likely to have been committed

**Within 1 Hour**

**HOLD IRD**

**ACTIONS:**

* **PROVIDE BACKGROUND / RESEARCH INFO**
* **CONSIDER ADDITIONAL SUPPORT NEEDS**
* **CONSIDER SAFETY PLANNING**
* **INVESTIGATION AGREEMENT– JOINT OR SINGLE AGENCY**
* **AGREE JII**
* **AGREE MEDICAL NEEDS**
* **CONSIDER ANY OTHER SOURCES FOR RESEARCH INFORMATION**

IRD 7 Day Review instigated by Police (IRD Detective Sergeant)

If no decision made at 7 Day Review for CPPM to take place IRD Review will be pended until date is agreed or a decision is taken for no CPPM. Where there is a decision for a CPPM, this should be held as soon as possible and no later than **21 days** from the notification of concern being received

Social Work confirm any follow up undertaken with the child/family and whether a Child Protection Planning Meeting (CPPM) is being called

**CLOSE IRD**

ALL agencies involved in IRD confirm Actions complete

**RESEARCH CHECKS IN PREPARATION FOR INTER-AGENCY REFERRAL DISCUSSION**

**INITIAL CHECKS BY CHILDREN’S SOCIAL WORK**

* Carefirst database with reference to adult(s) as well as children’s services
* Legal status history
* Child Protection Register - Registration history plus registration history if the child has been on another local authority CPR
* Looked after child and placement history
* Child Protection and looked after child history for siblings, step siblings and half siblings
* Allocated worker
* Child’s personal network
* Professional network
* Agency checks - Police, Health and Education

**EDUCATION**

* Check PPR for Child Protection and MAAPM history
* Risk factors
* Protective factors
* Communication issues/requirements
* Disability
* Risk taking behaviour
* Family circumstances - risks and supports
* Health issues
* Circumstances of other significant family members ie siblings
* Evidence in re,action to the current enquiry which becomes relevant

**POLICE SCOTLAND - for CHILD/PARENTS and SIGNIFICANT OTHERS**

* PNC
* CHS
* VPD
* Criminal Intelligence
* Incident Logging
* Legacy files
* STORM

**HEALTH**

* Check child health records
* Check GP records
* Discuss GP information with GP practice
* Contact specialist CP team - notify paediatrician of time of IRD
* Consider any disabilities and how these impact on the child
* Consider protective factors
* Consider risk factors