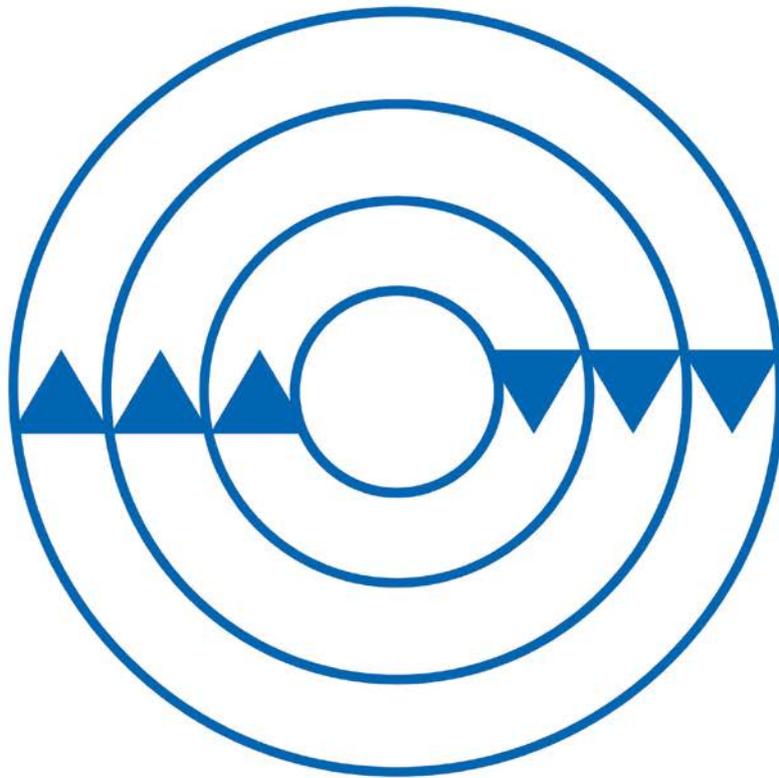


process

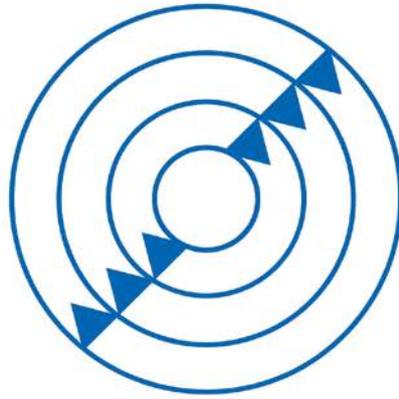
CHAPTER

**2**



# **step 1**

## **receive referral**



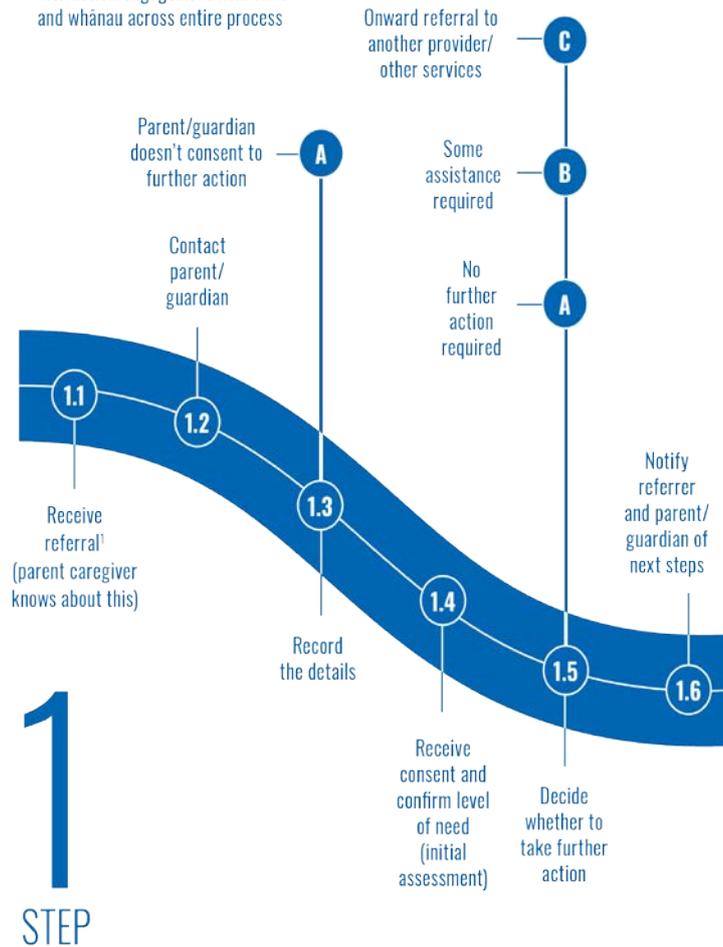
# STEP 1. RECEIVE REFERRAL AND COMPLETE INITIAL ASSESSMENT

Step one explains what to do when you receive a referral and how to make an initial assessment.

The referral and initial assessment is designed to make sure that children who have been identified as being at risk get early access to appropriate services.

**Note**

- Record all relevant information at each stage of the process
- Interaction/engagement with child and whānau across entire process



**Key points:**

- Participation is voluntary.
- Parent/guardian consent should be obtained before you act on the referral.
- Consent can be withdrawn at any time.
- The only exception to needing consent is where you take action under your Child Protection Policy as per the Vulnerable Children Act 2014.
- You will complete an immediate safety check using the information provided by the referrer within 24 hours of receiving the referral.



## REFERRALS

Referrals to the Social Workers in Schools (SWiS) service are formal requests for professional social worker services to assist primary or intermediate-school-aged children with specific concerns that are affecting their ability to learn.

To gain referrals, service providers and schools/kura need to work together to promote the SWiS service. Promotion information should include:

- who can make a referral
- how to make a referral
- how to access a referral form
- when a referral should be made
- the type and level of information needed
- information about issues of consent and confidentiality.

Referrals can come from:

- a child
- a child's parent/guardian or family/whānau
- school/kura principal, teacher or support staff
- individuals or organisations in the school/kura community with an interest in the well-being of the child (for example, health service workers, community groups, or cultural groups).

Referrals will be made for all sorts of reasons. Every case is different, but the following situations might suggest a referral is necessary:

- Family/whānau circumstances are considered to place the child at risk.
- Child's basic needs are not being met.
- Family/Whānau issues and crises.
- Poor school/kura attendance (truancy or ill health)
- Behaviour that is affecting the child's learning and/or the learning of others.
- Poor social skills (disruptive, withdrawn, bullying or being bullied, and/or communication and/or relationship difficulties).
- Poor school/kura performance that has not been diagnosed as being a specific learning need.
- Sudden changes in school/kura performance, behaviour, mood, or grief.

Referrals won't always be made directly to the social worker. When the school/kura receives a referral, it will be passed on to a social worker at the earliest opportunity. If the social worker is not available the school/kura will have a system in place for advising the service provider that ensures the child is protected.



## THE PROCESS

### Receive the referral

Referrals can be made by phone, fax, letter, or email, in person, or on a referral form.

With voice contacts (by phone or in person) you need to be sure that the person wants to make a referral. If they do, you will record the information on a referral form. The referral form does not need to be signed by the referrer.

A referral should ideally contain all of the following information:

- name and age of child
- date of birth
- gender
- address
- name/s of parent/caregiver
- contact details for parent(s)/caregiver
- school/kura, including year group and class
- date of the referral
- the reasons for making the referral in as much detail as possible (how is the child being affected?)
- length of time concerns have been held
- whether an urgent response is necessary (are there concerns for the immediate safety or well-being of the child?)
- details of any previous action, including Individual Education Plan if they have one. If there is limited information, you may need to go back to the referrer or the school/kura. You will assess the referral information you receive for risk within 24 hours of receipt. This is to establish if there are any pressing safety issues or risks that need addressing, and if there are any immediate priorities for the child and their family/whānau.

### Contact with parent/guardian & obtaining signed consent

Making contact with the parent/guardian is a crucial step. This is when you will ask for their consent to be involved with the service.

In most cases, the school/kura will have been in touch with the parent/guardian to discuss the issues that led to the referral and to explain what the SWiS service can offer.

Even if the school/kura has made contact with family/whānau, you need to be sure they understand:

- what the SWiS service offers and how it works
- what your role as a social worker is
- the reason for the referral
- that you must have their consent to be involved with the service



- how information is shared
- expectations regarding confidentiality
- the complaints procedure
- the process moving forward.

Any information provided by the family/whānau should be recorded.

It is important that the parent/guardian understands that consent is for the entire process, and will allow you, the social worker to gather information from agencies, including schools/kura both past and present that have been involved with the child.

Advise the parent/guardian that they may withdraw consent at any time.

If the family/whānau declines consent this should be recorded. Explain at this meeting that it is possible for the parent/guardian to reconsider the SWiS service at any time. It may be appropriate to offer to refer the family/whānau to another agency.

## Safety concerns

Participation in the SWiS service is voluntary. With the exception of an Oranga Tamariki or Police notification, no action can be taken if the family/whānau does not consent to taking part in the service.

This means, in most cases, that parent/guardian consent should be obtained before making contact with a child.

In cases where you, the social worker, believe it is necessary to contact a child without gaining consent, you should first consider:

- the nature and urgency of the situation
- the safety of the child
- the family's/whānau right to know
- the guiding principle that SWiS will work in partnership with family/whānau.

If the safety of the child is at risk, a report of concern should be made to Oranga Tamariki or the Police under An Interagency Guide: Working Together Me Mutu tā Tātou Tūkino Tamariki.

You should always seek support/advice from your manager about making a report of concern as well as consulting with the school/kura principal.

If a report of concern is made, it must be recorded.



### Collect and record the information for initial assessment

You are now collecting information that will enable you to make your initial assessment of this situation. This should be completed within 72 hours of receiving the referral. The initial assessment should answer three questions:

#### 1. How is the child being affected?

Some of the ways the child is being affected might be:

- inability to concentrate or learn at school
- poor social skills
- suffering from or being at risk of health problems
- subject to or at risk of physical, sexual, or emotional abuse or neglect.

#### 2. Are there concerns for the immediate safety or well-being of the child?

If the assessment indicates abuse or neglect, a notification must be made to Oranga Tamariki or the Police.

Other immediate needs may include:

- housing – if the family is homeless or living in conditions that cause or exacerbate health problems
- health – where the child or a family member has a health problem that will worsen without intervention
- family finances/resources – inadequate food and clothing for the child.

3. Is further action required, by whom and how urgently? You may talk to the referrer, parent/guardian, teachers, or health workers. All the information you collect should be recorded as part of the initial assessment.

Some of the information you can gather to help you to make a decision includes:

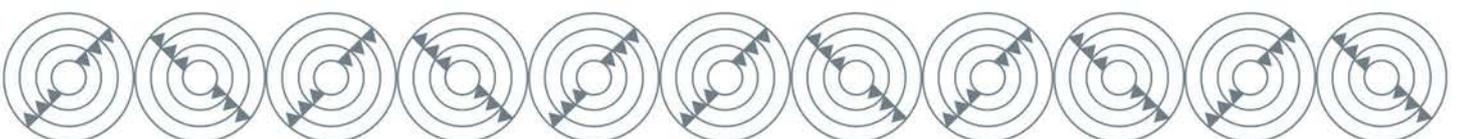
- frequency of incident
- the child's behaviour
- who is affected
- educational issues (e.g. learning difficulties, stand-down, or suspension)
- health issues
- home life/situation.

### Decide whether to take further action

Reflect on all the information you have collected including your responses to questions one, two and three and consider what needs to happen next.

### No further action

You may decide to take no further action. It may be that there is no cause for concern, action has already been taken, or the parent/guardian chose not to accept the offer of services. Close the case and record it.

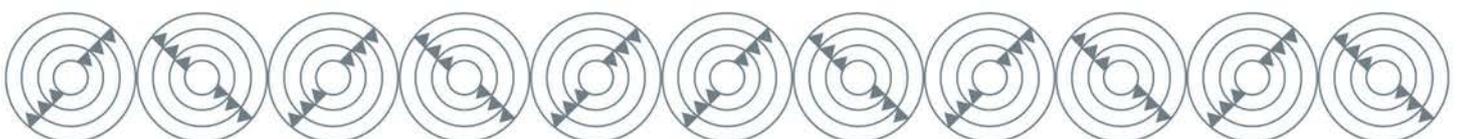


## APPENDIX 1

This table shows the key players and their responsibilities for this step of the process.

KEY PLAYERS	RESPONSIBILITIES
Social worker	<ul style="list-style-type: none"> <li>• Receive referrals and record.</li> <li>• Complete immediate safety check within 24 hours.</li> <li>• Contact referrer at the earliest opportunity after receiving a referral.</li> <li>• Contact parent/guardian to advise them of receiving a referral and gain consent within 72 hours of receiving the referral.</li> <li>• Meet the child.</li> <li>• Gather information about the referral from relevant sources.</li> <li>• Complete initial assessment.</li> <li>• Decide what response is necessary.</li> <li>• Assess level of need to determine response time.</li> <li>• Advise referrer if referral accepted or declined.</li> </ul>
Provider	<ul style="list-style-type: none"> <li>• Respond to referrals in social worker's absence.</li> <li>• Discuss case load and referrals with the social worker.</li> </ul>
SWiS supervisor	<ul style="list-style-type: none"> <li>• Provide the social worker with professional social work supervision.</li> <li>• Discuss case load and referrals with the social worker.</li> <li>• Provide assistance with matters of concern for child safety.</li> </ul>
School/kura	<ul style="list-style-type: none"> <li>• Wherever possible, inform parent/guardian that a referral is being made.</li> <li>• Pass referrals to the social worker as soon as possible or, in their absence, the provider.</li> </ul>
Parent/guardian	<ul style="list-style-type: none"> <li>• Consents to participate in the service or declines.</li> </ul>
Referrer	<ul style="list-style-type: none"> <li>• Provide accurate information about the reason for the referral.</li> <li>• Provide appropriate referrals to the SWiS service.</li> </ul>

Note: the process will be different if you take action under your Child Protection Policy as per the Vulnerable Children's Act 2014 and/or make a notification to Oranga Tamariki or the Police.



## APPENDIX 2

This table shows the key documents for this step of the process.

DOCUMENT	WHAT IS IT FOR?	WHO CAN VIEW THE DOCUMENT
Referral	To alert the social worker to a potential problem.	<ul style="list-style-type: none"> <li>• Child</li> <li>• Social worker</li> <li>• Provider</li> <li>• Parent/guardian</li> <li>• SWiS supervisor</li> <li>• Social Services Accreditation Assessor</li> </ul>
Initial assessment	To provide an initial assessment of the issues that may need to be addressed.	<ul style="list-style-type: none"> <li>• Child</li> <li>• Social worker</li> <li>• Parent/guardian</li> <li>• SWiS supervisor</li> <li>• Provider</li> </ul>
Personal file	To record the details of the case.	<ul style="list-style-type: none"> <li>• Child</li> <li>• Social worker</li> <li>• Parent/guardian</li> <li>• Provider</li> <li>• Professional supervisor</li> <li>• Social Services Accreditation Assessor</li> </ul>
Onward referral	To initiate other services that may be necessary for the child's wellbeing.	<ul style="list-style-type: none"> <li>• Child</li> <li>• Social worker</li> <li>• Parent/guardian</li> <li>• SWiS supervisor</li> <li>• Provider</li> </ul>

