



TAYSIDE MULTI AGENCY CONCERN FOR UNBORN BABY REFERRAL FORM

This form can be completed by any practitioner and managers working in the public, private and third sectors across Tayside concerned for an Unborn Baby.

Prior to submission

- Call your local Social Work Duty Team or in Dundee MASH to discuss referral: contact details can be found at the end of this Referral Form.

SECTION 1 - CORE DETAILS <i>Please complete what you can: if not known please state "Not Known"</i>			
NOTIFIED BY:			
Name and job title:			
Agency/Dept:			
Contact Details:	Address Tel. No.	E-mail address	
Contact person for feedback or further enquiry (if different from above):	Address Tel. No.	E-mail address	
Line Manager / Designated CPO	Tel. No.		
Full Name(s) of prospective parent(s)	Address & Tel. No.	DOB	
Full name(s) of any other child(ren) in the household <i>Information not known</i> <input type="checkbox"/>			
Name	DOB	Gender (M/F)	
Name of any PARENT who does not reside with the unborn child <i>Information not known</i> <input type="checkbox"/>	Address & telephone number	DOB	Has Parental Rights & Responsibilities
			Please select.
			Please select.
Full names of significant adults in the household <i>Information not known</i> <input type="checkbox"/>	DOB	Gender (M/F)	Relationship to the child

Describe any discussions and/or actions that have already taken place regarding this concern	
Are there any additional support needs for the family, e.g. interpreter?	
Information Sharing	
Have you made the prospective mother aware that information may be shared?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you made the prospective partner/family member aware that information may be shared?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If No - please provide your rationale below:	

CONTACT DETAILS FOR SOCIAL WORK			
Local Authority Area	Office hours	Out of office hours	Email contact details
Dundee: Children & Young People Service Based at Seymour House MASH	01382 307940	01382 307964	mash.admin@dundeecity.gov.uk
Angus: Children, Young People and Justice Investigation Team	01241 467333	01382 307964	investigationsteam@angus.gov.uk
Perth & Kinross: Child Protection & Duty Team	01738 476768	01738 476768	CFSMASG@pkc.gov.uk
<i>Emails must be sent through a secure email account.</i>			
<i>Please Note:</i> <i>An outcome from an Unborn Baby Referral will be returned to the referrer within one month, however if after making a referral, the referrer has not received an outcome; the referrer is accountable for contacting their local children's services social work team to request an update.</i>			

FOR RECEIVING AGENCY PURPOSES ONLY:	
Notification received on:	Date:
Outcome of referral fed back to Referrer:	Date: By Whom: