Non-MERLINS (see also attached flowchart)

Step 1: A referral is received into the MASH screening team. It can be a self referral, a multi-agency referral, a referral from another local authority, an anonymous referral or a MERLIN (see separate process for MERLINs). It can be submitted in person, by fax, email, letter or over the `phone.

Step 2: The Referral & Initial Screening Officer handling the referral first of all checks the protocol ICS and eCaf systems to see whether the child or family is already known to children's services. If there is already an open case on protocol ICS, the information is passed onto the relevant case worker and a phone call is made to both the case worker and their manager to alert them.

Step 3: Where there is not an open case or details on the child/family are contained on eCaf, the Referral &Initial Screening Officer will create a new case record and gather any other relevant information that is held on either protocol ICS or eCaf.

Step 4: The MASH Team Manager or Practice manager will then consider whether the case should continue through the MASH. The MASH Team Manager or Practice Manager reads every contact and decides on action.

In order to make that decision, the initial MASH criteria will be applied (see attached guidance 2). Referrals going through the MASH will be RAG rated to indicate how quickly they need to be turned around. (see attached guidance 3)

(As part of this, the practice manager will consult with the police sergeant based within the MASH to see if a crime has been committed. If one has, this will be recorded by the sergeant and a police investigation started.)

Step 5: Each MASH case is assigned to a social worker with an agreed target timescale. The social worker handling the case then asks colleagues in the multi- agency teams in the MASH to check the child/family details against their databases and to collate any information they may have about the child referred. The information is collated within the timescales set through the RAG rating and returned to the social worker. The social worker will review and analyse the information received from partner agencies within the MASH and will write a summary of that information on a MASH record on protocol ICS. The social worker recommends what further action should be taken.

The screening manager reviews the MASH record and then makes a decision at this stage as to the most appropriate action to take in relation to that referral.

Step 6: Cases are either closed with NFA or referred to CPAT, EI&FS, CAF, Information & Advice or for a Single Agency response. Relevant information will then be passed on to the agencies who 'need to know' that information when interacting with that child. The Referral Screening Officer also contacts the referrer to advise them as to what has happened with the referral.

MERLINs (see also attached flow chart)

Step 1: Where it has come to the police's attention that a child is in circumstances that are adversely impacting upon their welfare or safety, a pre-assessment checklist (PAC) report will be placed by the reporting police officer on to the MPS system MERLIN.

Step 2a: Police officers based in the MASH will review these PACs to see if there is a need to inform children's services that the child has come to police attention. They will also check with social care colleagues in the MASH to see whether the child or family is already known to children's services. If there is already an open case, the PAC will be passed to the

screening team who will send it to the relevant case worker and a phone call is made to both the case worker and their manager to alert them.

Step 2b: Where there is not an open case, police officers will conduct further research about what other relevant information the MPS has relating to the welfare of the child. At this point the police will use their threshold information to recommend whether the case will be put through the MASH process and assign it a RAG status. They will send the initial PAC and subsequent research via secure email to the MASH referral co-ordinator. (Will have RAG rated it?)

Step 3: Upon receiving this information, the MASH referral co-ordinator will create a new case record on protocol ICS and see what other information is held on both protocol ICS and eCaf that is relevant to this referral

Step 4: The MASH Team Manager or Practice manager will then consider whether the case should continue through the MASH.

In order to make that decision, the initial MASH criteria will be applied (see attached guidance 2) and those referrals going through the MASH will be RAG rated to indicate how quickly they need to be turned around. (see attached guidance 3)

Step 5: Each MASH case is assigned to a social worker with an agreed target timescale. The social worker handling the case then asks colleagues in the multi- agency teams in the MASH to check the child/family details against their databases and to collate any information they may have about the child referred. The information is collated within the timescales set through the RAG rating and returned to the social worker. The social worker will review and analyse the information received from partner agencies within the MASH and will write a summary of that information on a MASH record on protocol ICS. The social worker recommends what further action should be taken.

The screening manager reviews the MASH record and then makes a decision at this stage as to the most appropriate action to take in relation to that referral.

Step 6: Cases are either closed with NFA or referred to CPAT, EI&FS, CAF, Information & Advice or for a Single Agency response. Relevant information will then be passed on to the agencies who 'need to know' that information when interacting with that child. The Referral Screening Officer also contacts the referrer to advise them as to what has happened with the referral.

- ALL NSPCC / anonymous referrals
- All children whose identity is unknown
- Children / YP who may have been trafficked
- Children / YP at risk of sexual or other exploitation
- Transient families
- All referrals where DV is an issue (where there are children in the family under 5 years old or unborn) and additional information is needed to determine the threshold
- Repeat missing persons
- Adults who pose a risk to children
- Cases being placed in the hospital maternity tray
- Heavy end parental substance misuse
- Referrals about a child found begging whereby additional information is needed to determine the threshold
- Minor concerns about a child on a repeat basis
- Children involved in gangs
- Female Genital Mutilation (FGM)
- All other referrals deemed appropriate by MASH Managers
- Channel Referrals

High Risk - RED.

Immediate and serious safeguarding concern requiring Action Information package completed within 4 hours Police and Children Social Care teams told immediately with research to follow

Immediate and serious safeguarding concern requiring action to ensure the safety of the child and possible necessity to secure and preserve physical evidence that might otherwise be lost.

- Information received a child is suspected to have been physically assaulted/harmed within the last 48 hours and is either still with or likely to go back to the suspected abuser within 24 hours. OR
- Information to suggest that the child will be at risk of physical assault if allowed to return to the primary carer/suspect OR
- Information to suggest that a child is likely to seriously harm themselves OR
- Information that a child has or is likely to suffer significant harm and is likely to be imminently removed from the UK OR
- Report of serious sexual offences which have occurred within previous five days

Medium risk - AMBER.

Significant concerns no immediate urgent action. But sec47 investigationis likely. Mash product within 24 hours.

Information received that a child is likely to be suffering serious neglect which may have included physical and sexual abuse in the past. The nature of the harm would be categorised as significant but there is no information at this time to suggest that the child is at imminent threat of further serious assault or serious sexual abuse.

Low risk - GREEN.

Concerns about a child's well being, may be a child in need under Sec 17. However there is no information at this stage to suggest an investigation under Sec 47 would be required. MASH product within 3 days OR immediate referral to Practise manager for decision.

- Information received that a child may be suffering neglect, emotional abuse (domestic Incident) OR
- Has particular/complex needs relating to their physical/emotional welfare that are not being addressed by their parent/carer OR
- May include a child demonstrating particular behaviours which are inconsistent with normal expected behaviour for a child of similar developmental age.