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| **Family name:**  | **Children’s Age/s:**  |
| **Azeus ID:**  | **Primary Language:** |
| **Social worker/ Families First Practitioner’s name:**  | **Interpreter Required: Y/N** |
| **Your Practice Lead’s name:**  | **Team:**  | **For Whom:** |

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| **What NewDAy intervention support would you like?**

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| **NewDAy can offer you any of the following:** | **Tick your preference**  |
| 1. Direct work with children and young people (NewDAy deliver 3 sessions with children 121).
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| 1. Direct work with users of domestic violence/abuse (NewDAy delivers 3 sessions or we can co-work with the lead practitioner).
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| 1. Direct work with primary carer and children, when other carer is absent (NewDAy delivers 3 sessions).
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| 1. Group work for fathers (NewDAy facilitates Caring Dads groups, 17 week programme).
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| 1. Therapeutic work with both parents (NewDAy delivers with parents, plus carries out direct work with children. SW must attend first meeting (IFM) with parents and agree co-working arrangement).

*Please note we can only offer this for CIN/CP cases. This is a long term invention, up to 6 months.*  |  |
| Agreed with practice lead: (tick to confirm) |
| 1. NewDAy Education Offer (can go with any of the above or as standalone service, where there are particular education concerns i.e. attendance, attainment, progress, punctuality.)
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| **Do the family tick the following criteria: (highlight applicable)** |
| **Case type?** Families First / Child in Need / Child Protection |
| **Domestic abuse prominent factor?** Yes / No |
| **You have spoken with the person(s) you would like to access this intervention. They are willing to meet with NewDAy and understand this is a domestic abuse service?** Yes / No |
| **They consent to us undertaking any enquiries with partner agencies?** Yes / No |

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| **Worries:**Provide a synopsis of what you are worried about. What are your concerns, what are the risks for this family? What is the impact on the family? |
| **Synopsis:**Tell us about;The referral. What happened? Be as specific as you can. (*What is the nature of the domestic violence/abuse?, when, who referred, were police involved, who called them?, injuries, weapons, were the children present during the incident?****,*** *how long has this case been open to social care/ families first? Etc.*)Please describe the last incident of domestic violence /abuse? |
| **Tell us more about:**Parent(s) mental health concerns (are these supported by a professional assessment?)Parent(s) alcohol or substance misuse (do you have any concerns?)Any previous convictions/ injunctions (Non-molestation orders, bail conditions, known to MARAC). Is there any court action pending (family or criminal)? Use of weapons (what weapons? When?)Children’s educational concerns (attendance, attainment, S.E. well-being, behaviour, etc.)? |
| **Documents:**

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| **Do you have these documents:** | Is this uploaded on Azeus? | Date it was completed? |
| Single assessment  |  |  |
| CIN/ CP/ FF plan |  |  |
| Chronology |  |  |

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| **Feedback to referrer with rationale: (NewDAy to complete)** |