

**CONFIDENTIAL**

**CHILDREN’S SERVICES**

**NEED TO KNOW PRO FORMA**

**When completed, please send to Head of Safeguarding and Need to Know Inbox,** [**NeedToKnow@westsussex.gov.uk**](mailto:NeedToKnow@westsussex.gov.uk)

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| **To:** |  |  | |
|  | **Executive Director of Children, Young People and Learning** | |  |
| **CC:** | Assistant Director for Children’s Services & Early Help | |  |
|  | Assistant Director for Safeguarding, Quality and Performance Services | |  |
|  | Assistant Director for Education and SEND | |  |
|  | Assistance Director of Corporate Parenting | |  |
|  | Head of Safeguarding | |  |
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|  | **Where agreed by Head of Safeguarding:** | |  |
|  | Head of Children’s Commissioning | |  |
|  | Head of Human Resources (when appropriate) | |  |
|  | Head of Communications and Marketing | |  |

**Please note that this form will be returned if it has not been completed correctly and as detailed in the Need to Know Procedure.**

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| **Details of the Group Manager completing Need to Know:** | |
| **Name:** |  |
| **Location:** |  |
| **Contact Details:** |  |
| **Date Need to Know Form Completed:** |  |

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| **Subject of Need to Know:** | |
| **Full Name:** |  |
| **Date of Birth:** |  |
| **Mosaic ID:** |  |
| **Address:** |  |
| **Alias:** |  |
| **Role (if staff member):** |  |
| **If there are any other relevant children (i.e. siblings or other children in placement) please detail their names and Mosaic ID’s here:** |  |

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| Please indicate if this is a Need to Know: |  | Choose an item. | Please indicate the child’s status: | Choose an item. |
| Category of Concern resulting in Need to Know: |  | Choose an item. | Date of Incident: |  |
| If your notification relates to a missing child subject to a child protection plan (including unborn(s) please refer to tri.x. Does a National Alert need to be considered? |  | Choose an item. | Media Interest | Choose an item. |
|  | Has the CP Chair been alerted? | Choose an item. |
|  | Has the IRO been alerted? | Choose an item. |

**Brief Summary of Reason of Need to Know:** *(Provide brief details as to why you are completing an alert on this case, e.g. a child has died in suspicious circumstances/family failing to comply with the CP Plans/* *a child missing from care/subject to a CP Plan/highly vulnerable, missing for over 24 hours. What is the concern in relation to the child/young person/family? Include chronology where possible).*

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| **Case Summary** |

**Assessment of Risk:** *(Where appropriate, e.g. unexpected death of a child, consider also the safeguarding plans of siblings). How is the concern being managed and addressed, and by whom? Within what timescale?* **Outline actions taken to address risk that includes a risk management plan and an identified contingency plan for EDT. You may also consider the need for a Placement Plan, updated Safe Care Plan, early Core Group or CLA Review, Strategy Discussion etc.**

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| Has legal advice been sought? | Choose an item. | Has a media strategy been developed? | Choose an item. | Have EDT been informed? | Choose an item. |

**Future Action:** (For example, the next stages in a child protection or LADO investigation, forthcoming court appearances, action to be taken if a missing child returns, business continuity plans in relation to premises issues etc.)

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**Next Update:** (When is this expected and for what reason.)

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| **1st Update:** (If this is a Final Update please complete Final Update) | |
| Name: |  |
| Team: |  |
| Contact Details: |  |
| Date Need to Know Form completed: |  |
| Development: | *(Include all changes since the initial ‘Need to Know’ previous update, including manager comment, lines to take and future action as appropriate.)* |
| 2nd Update Due: |  |

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| **2nd Update:** (If this is a Final Update please complete Final Update) | |
| Name: |  |
| Team: |  |
| Contact Details: |  |
| Date Need to Know Form completed: |  |
| Development: |  |
| 3rd Update Due: |  |

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| **3rd Update:** (If this is a Final Update please complete Final Update) | |
| Name: |  |
| Team: |  |
| Contact Details: |  |
| Date Need to Know Form completed: |  |
| Development: | *(Include all changes since the initial ‘Need to Know’ previous update, including manager comment, lines to take and future action as appropriate.)* |
| Final Update Due: |  |

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| **Final Update:** | |
| Name: |  |
| Team: |  |
| Contact Details: |  |
| Date Need to Know Form completed: |  |
| Development: | *(Include all changes since the initial ‘Need to Know’ previous update, including manager comment, lines to take and future action as appropriate.)* |
| 3rd Update Due: |  |

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| **Response from Safeguarding and Quality Assurance** (This to be returned to the notifying person and uploaded on to the child’s Mosaic file by the allocated worker) |
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