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**CONFIDENTIAL**

**NORTHAMPSHIRE CHILDREN’S TRUST**

 **NEED TO KNOW PRO FORMA**

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| **To:**  |  | Northamptonshire Children’s Trust Chief ExecutiveNorthamptonshire Children’s Trust Director of Children Social Care |
|  |  |  |
| **Cc:** | Deputy Director of Children’s Services (Council) | [ ]  |
|  | Director of Finance and Resources | [ ]  |
|  | Assistant Director for Safeguarding | [ ]  |
|  | Assistant Director for Corporate Parenting | [ ]  |
|  | Assistant Director for Quality and Resources | [ ]  |
|  | Assistant Director for Early Help | [ ]  |
|  | Strategic Manager Safeguarding and Quality Assurance Service | [ ]  |
|  | Media Relations Specialists | [ ]  |
|  | N2KNotifications | [ ]  |
|  |  |  |
| **By agreement** | Head of HR and Organisational Development (if the matter relates to staff member/s or there are HR implications) | [ ]  |
|  | Other (specify e.g. Independent Scrutineer / LLR Chair etc.) | [ ]  |

**Please note that this form will be returned if it has not been completed correctly and as detailed in the Need To Know** [**procedure**](https://proceduresonline.com/trixcms1/media/3010/need-to-know-procedure_may-2019.docx)

|  |  |
| --- | --- |
| **1st Update** |  |
| **2nd Update** |  |
| **3rd Update** |  |
| **Further Update** |  |
| **Final Update/NFA** |  |

|  |  |
| --- | --- |
| **From:** **(Name and job title)** |  |
| **Location** |  |
| **Contact Details** |  |
| **Date of Need to Know** |  |

**Subject of Need to Know:** *[Full Name, Carefirst ID No. Date of Birth, Ethnicity/Nationality, Address, Alias, Role (if staff member)]*

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| **Full name:****Alias:****Carefirst ID No.:****Date of Birth:****Ethnicity/Nationality:****Address:****Job Role (if staff member):** |

**Rationale for this Need to Know:** Please provide a brief summary and state which one of the circumstances listed in sections 2.2 of the Need to Know Procedure this Need to Know briefing relates to;

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**Notification to the National Panel:** The National Panel has been notified as the incident meets one of the following criteria (please select);

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| **DOES NOT MEET THRESHOLD FOR NATIONAL PANEL NOTIFICATION** | [ ]  |
| A child has died (including cases of suspected suicide), and abuse or neglect is known or suspected | [ ]  |
| A child has been seriously harmed and abuse or neglect is known or suspected\* | [ ]  |
| A looked after child has died (including cases where abuse or neglect is not known or suspected) or a child in a regulated setting or service has died (included cases where abuse or neglect is not known or suspected) | [ ]  |
| An allegation of abuse has been made against a member of staff working in a children’s home  | [ ]  |
| Concerns about the conduct of staff (professional practice, conduct or in breach of NCC policy)  | [ ]  |
| A child protection (S47) investigation that involves a child living in a children’s home has started or concluded  | [ ]  |
| Concerns a child living in a children’s home may be involved (or suspected of being involved) in CSE | [ ]  |
| Any case where a Rapid Review is being considered | [ ]  |
| Any incident in a children’s home that is considered ‘serious’ (may or may not require police involvement) | [ ]  |

**\*** *Serious harm includes (but is not limited to) serious* ***and/or*** *long-term impairment of a child’s mental health or intellectual, emotional, social or behavioural development. It should also cover impairment of physical health. This is not an exhaustive list. When making decisions, judgment should be exercised in cases where impairment is likely to be long-term, even if this is not immediately certain. Even if a child recovers, including from a one-off incident, serious harm may still have occurred.*

**Background:** *[Include for example the nature of the department’s involvement, names and roles of staff involved, legal status of the child, place of residence, child protection plan status, previous related incidents, name and address of parents/guardians, siblings names and details as above, name of daycare or educational provision etc.]*

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**Current situation:** *[Include for example current situation of the child or member of staff and the risk this poses; other agencies involved, including any disability etc.]*

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**Strategic Manager comment:** *[Include Risk Assessment and actions to mitigate the risk; statutory, corporate and departmental procedures being followed etc. Manager to indicate if Statutory notifications is required (National Panel, HSE etc.) and managerial overview. Note if any link to complex abuse investigations or linked to other cases in NCC*

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| Signature |

**Lines to take:** *[Suggest a statement for elected members or lines to take in relation to media interest]*

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**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:**

|  |  |
| --- | --- |
| **From:** **(Name and job title)** |  |
| **Location** |  |
| **Contact Details** |  |
| **Date 1st Update completed** |  |

**Developments:** *[Include all changes since the initial ‘need to know’ previous update, including manager comment, lines to take and future action as appropriate]*

|  |
| --- |
| Strategic Manager |

**2nd Update:** *[date if appropriate]*

|  |  |
| --- | --- |
| **From:** **(Name and job title)** |  |
| **Location** |  |
| **Contact Details** |  |
| **Date 2nd Update completed** |  |

**Developments:** *[Include all changes since the initial ‘need to know’ previous update, including manager comment, lines to take and future action as appropriate.]*

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**3rd Update:**

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| --- | --- |
| **From:** **(Name and job title)** |  |
| **Location** |  |
| **Contact Details** |  |
| **Date 3rd Update completed** |  |

**Developments:** *[Include all changes since the initial ‘need to know’ previous update, including manager comment, lines to take and future action as appropriate.]*

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**Further Update:** *[Date and name of person updating need to know]*

|  |  |
| --- | --- |
| **From:** **(Name and job title)** |  |
| **Location** |  |
| **Contact Details** |  |
| **Date Update completed:** |  |

**Developments:** *[Include all changes since the initial ‘need to know’ previous update, including manager comment, lines to take and future action as appropriate.]*

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| --- | --- |
| **Signed By:**  |  |
| **Designation:** |  |
| **Date:** |  |

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| --- | --- |
| **Manager Signature:**  |  |

|  |  |
| --- | --- |
| **Designation:**  |  |

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| --- | --- |
| **Date:**  |  |

**Final Update:** *[Date and name of person updating need to know]*

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| --- | --- |
| **From:** **(Name and job title)** |  |
| **Location:** |  |
| **Contact Details** |  |
| **Date Final Update Completed** |  |

**Developments:** *[Include all changes since the initial ‘need to know’ or previous update, including manager comment, lines to take and future action as appropriate.]*

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| **Signed By:**  |  |

|  |  |
| --- | --- |
| **Designation:**  |  |

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| --- | --- |
| **Date:**  |  |

**This Need To Know pro-forma should be authorised by a Strategic Manager. If the relevant Strategic Manager is unavailable this pro-forma must be authorised by another Strategic Manager.**