

**Referral form-PREVENT**

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| PREVENT Advice/referral form for professionals please tick: ( ) advice ( ) referral | | | |
| Date of contact: |  | | |
| Professional Name,  full postal address and telephone number |  | | |
| Full Name of person being referred/discussed |  | | |
| Address |  | | |
| Telephone number |  | Mobile |  |
| Date of Birth: | \_\_\_/\_\_\_\_/\_\_\_\_\_\_ (consider a referral to children’s social care if under the age of 18 and relevent) | | |
| Sex: | Male Female | | |
| Ethnicity of the person being referred/discussed: |  | | |
| Religion of the person being referred/discussed: |  |  |  |
| Family members, Dates of birth and addresses if known: (who is in the immediate family i.e. siblings, parents/carers) | (You **must** include the details of persons with parental responsibility if the person being referred is under the age of 18) | | |
| Is the person aware of the contact with the PREVENT team? If under the age of 18 are parents/guardians aware of the referral/contact? Comments/Views regarding this (if consent has not been sought then why not?)s: |  | Who else have you referred your concerns to? |  |
| Professionals involved and telephone numbers and role: |  | | |
| Concerns/reasons for referral or contact | *(please provide as much detail as possible for example, travel plans, concerns regarding planned activities and attach a separate sheet if required)*  ***Please note: if there is an immediate risk then you need to contact the police on 999. Do not wait for the Channel panel in these circumstances.*** | | |

Please return this document via email to the PREVENT COORDINATORS. (details below)

Prevent Education Officer

Assia Hussain

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07967 837 822

Prevent Community Engagement Officer

Adnan Ahmed

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07866 844 718



**Supplementary guidance to referral form.**

It is important that the referral form contains as much accurate detail as possible.

Please ensure that basic information such as the name, age and date of birth of the person being referred is correct.

In emergency situations, Please ensure that you contact the police. DO not wait for a response from the PREVENT coordinator where there is an immediate concern for welfare or safety.

Where a young person or child under the age of 18 is being referred, you must have a conversation with the PREVENT coordinator and the discussion will include whether a referral to Children’s Social Care is appropriate.

If you identify support needs for the person being referred/the persons family, then do not wait for Channel Panel for these needs to be considered i.e. if there are parenting issues or if there are drug and alcohol issues. Please discuss these with the PREVENT coordinator.

The CHANNEL process is entirely voluntary and therefore once a person enters the Channel process they will be made aware of the referral. Please follow your own agency guidelines around consent and encourage, where possible, people to engage with the Channel Process. IF you have not got consent at the point of referral, then please advise why in the referral so that this can be considered.

Please try to include as many details as possible such as any planned travel, details of why you are concerned, any evidence to support your concerns and how long you have had these concerns for. If you referral is about a child or young person, please include any details about whether you have discussed concerns with parents/carers and what their views are of the concerns. If you have any concerns then please discuss the referral with your agency Safeguarding lead in the first instance and with the PREVENT Coordinator.

***Remember: if you have concerns around the immediate welfare of any persons then please make sure that you contact the Police on 999.***