



Birmingham Child Contact Centre

REFERRAL FORM

Please Return to:- Referrals@birmccc.org.uk

In case of difficulty with this document, please call 07447 752900

Please note that the Contact Centre is at:

Edgbaston Community Centre, 40 Woodview Drive, Birmingham B15 2HU

Wherever possible this form needs to be seen and completed by both parties' solicitors and any other professionals involved.

Contact cannot begin until this form has been completed and accepted by the Centre Co-ordinator.

It is essential to include the contact details of both parents, in case of emergencies. All personal information is treated in strict confidence.

Date received

Risk assessment

Start date given

Start date actual

RP interview, Vol:

CP interview, Vol:

Date finished

1. Referrer

Name:		Profession:	
Address		Post Code:	
Telephone	Email		

2. Child(ren)

Name(s)	Birth Date	Boy = B, Girl = G

3. Adult with whom the child(ren) reside

Name:		Birth Date: / /	
Ethnic Origin Code (See last page):			
Relationship to child(ren)			
Address:			
Postcode:		Telephone:	
Solicitor's name		Name of practice	
Address:		Postcode:	
Tele:	Email:		

4. Adult requesting contact

Name:		Birth Date: / /	
Ethnic Origin Code (See last page):			
Relationship to child(ren):			
Does this person have legal parental responsibility? (Please circle)		Yes	No
Date when they last met the child(ren)			
Date when they last lived with the child(ren)			
Address			
Postcode:		Telephone:	
Solicitor's name:			
Name of practice:			
Address:			
		Postcode:	
Telephone:		Email:	

5. Court Orders etc.

Is there a court order relating to the contact?		Yes	No
If Yes', Please either send a copy or indicate when it was made and what it specified			
What other court orders have been made which would affect the safety and well-being of the child(ren) and when?			
Is there an allocated CAFCASS Officer? (please circle)		Yes	No
If 'Yes' please give details: Name:			
Address of CAFCASS office:			
Postcode:		Telephone:	
Has it been decided or agreed that the child can be taken out of the Centre during contact? (please circle)		Yes	No
When is the next court hearing (if any)?			

6. Arrival at the Child Contact Centre

Date of first contact	<u>Frequency of contact:</u> Weekly? Fortnightly? Other?	<u>Time of contact</u> 12.00pm - 2.00 pm 2.00 pm - 4.00 pm	Are the parents willing to meet?
Will the adult with whom the child(ren) reside, be bringing and collecting them from the Centre? Please circle YES NO If "NO" Name of person		Other people allowed to participate in contact at the Centre: Name(s) Relation to Child	

7. Information Relating to Safety of the Child. (The application will not be considered until these Risk Assessment questions have been answered.)

a. Are there or have there been any allegations of abuse or neglect of a child made in this family? (please circle). Yes No
If 'Yes', please give details of any allegations, undertakings, injunctions or convictions relating to violence or other inappropriate behaviour involving either party, their respective families or the children.

b. Is this family known to Children's Services? (please circle) Yes No
If 'Yes', details must be given

c. Has any person who will be involved in the contact ever been convicted of any offence against a child? **If 'Yes', give details** Yes No

d. Has there been or is there likely to be a risk of abduction? Yes No

e. Please give details of any requirements listed in a court order relating to the behaviour of either parent (e.g. hair strand tests or anger management courses.)

f. Are you aware of any reason why this family may require additional support Yes No
 If 'Yes', please give details

8. Health & Medical Requirements

- | | | |
|---|-----|----|
| a. Do any of the children have any illness, allergy, disability, special needs or medical requirements? If 'Yes', please give details | Yes | No |
| b. Do any of the adults involved suffer from long-term physical/mental illness or a disability? If 'Yes', please give details | Yes | No |

9. Additional information

- | | | |
|--|-----|----|
| a. What language is spoken at home? | | |
| b. Is an interpreter required? (please circle) | Yes | No |
| If 'Yes', please give details of the interpreter to be used (include name and organisation) | | |
| | | |
| Where possible, BCCC tries to recruit volunteers who can speak other languages. Where this is not possible, family members or acquaintances may be used, but they must be approved by both Resident and Contact parties. | | |
| c. We like the parents to make a pre-visit. The Contact Centre can arrange this if we have the parents' telephone numbers | Yes | No |
| d. Has this family ever used another Child Contact Centre? | Yes | No |
| If 'Yes', please state the Centre | | |
| e. Additional background information (Please use a separate sheet if necessary). | | |

- The contents of this Form have been agreed by either parents or their representatives.
- I have explained the rules of the Child Contact Centre to my client and given them a copy of the Centre's "Welcome Leaflet"
- I have also given a copy of the "Welcome Leaflet" to the other parent's representative.

Signed

Date

Birmingham Child Contact Centre would appreciate your assistance in completing the information below; it is beneficial to our applications for funds that help keep our fees, **free of charge**.

Ethnic origin codes.

Please choose one option that best describes your ethnic group or background

White

1. English / Welsh / Scottish / Northern Irish / British
2. Irish
3. Gypsy or Irish Traveller
4. Any other White background, please describe

Mixed / Multiple ethnic groups

5. White and Black Caribbean
6. White and Black African
7. White and Asian
8. Any other Mixed / Multiple ethnic background, please describe

Asian / Asian British

9. Indian
10. Pakistani
11. Bangladeshi
12. Chinese
13. Any other Asian background, please describe

Black / African / Caribbean / Black British

14. African
15. Caribbean
16. Any other Black / African / Caribbean background, please describe

Other ethnic group

17. Arab
18. Any other ethnic group, please describe

Reproduced from the National Office of Statistics guidelines
<http://www.ons.gov.uk/ons/guide-method/measuring-equality/equality/ethnic-nat-identity-religion/ethnic-group/index.html#1>