

Children's Centre Registration & Referral Form - November 2017

Family details			
Children's centre cluster:		GP/Medical centre:	
Family address:		Health Visitor:	
Postcode			

Main carer:			
Title		Email address	
First name		Date of birth	
Middle name		Ethnicity	
Surname		Additional needs	
Country of birth		Home phone	
Relationship to child		Mobile phone	
Languages	Spoken		<input type="checkbox"/> Basic <input type="checkbox"/> Conversational <input type="checkbox"/> Fluent <input type="checkbox"/> Interpreter required
	Read		
	Written		
<input type="checkbox"/> Pregnant - due date: <input type="checkbox"/> Asylum seeker <input type="checkbox"/> EU migrant <input type="checkbox"/> Refugee <input type="checkbox"/> Traveller			
Non-smoker: <input type="checkbox"/> Smoke free home <input type="checkbox"/> Exposure to cigarette smoke <input type="checkbox"/> Smoker: <input type="checkbox"/> Smoke free home <input type="checkbox"/> Exposure to cigarette smoke <input type="checkbox"/>			

Child 1 (please use legal names):					
First name		Country of birth		Current school	
Middle name		Ethnicity		Additional needs	
Surname		Date of birth			
NHS number		Home language			

Child 2 (please use legal names):					
First name		Country of birth		Current school	
Middle name		Ethnicity		Additional needs	
Surname		Date of birth			
NHS number		Home language			

Child 3 (please use legal names):					
First name		Country of birth		Current school	
Middle name		Ethnicity		Additional needs	
Surname		Date of birth			
NHS number		Home language			

Second carer:			
Title		Email address	
First name		Date of birth	
Middle name		Ethnicity	
Surname		Additional needs	
Country of birth		Mobile phone	
Relationship to child			

Languages	Spoken	English	<input type="checkbox"/> Basic <input type="checkbox"/> Conversational <input type="checkbox"/> Fluent <input type="checkbox"/> Interpreter required
	Read		
	Written		
<input type="checkbox"/> Pregnant - due date: <input type="checkbox"/> Asylum seeker <input type="checkbox"/> EU migrant <input type="checkbox"/> Refugee <input type="checkbox"/> Traveller			
Non-smoker: <input type="checkbox"/> Smoke free home <input type="checkbox"/> Exposure to cigarette smoke <input type="checkbox"/> Smoker: <input type="checkbox"/> Smoke free home <input type="checkbox"/> Exposure to cigarette smoke <input type="checkbox"/>			

Data Sharing Consent (please tick as appropriate):

I agree for the information I have provided above to be entered onto Bradford Council's children's centre database in order to keep me informed about services for families which may be of interest

Please tick as appropriate

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I agree for Bradford children's centres to record any work or contact with myself and my family on Bradford Council's children's centre database. This information will be used by children's centres and the Council to for improving health, care and services through research and planning.

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I agree for information from my record and my families records to be shared with Bradford Teaching Hospitals NHS Foundation Trust for improving health, care and Services through research and planning.

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Children's Centres in Better Start Bradford Reach only

I agree that my contact details and the name and date of birth of my child can be shared with BHT Early Education and Training so that they can contact me to offer an early language development check when my child is two years old

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I understand that at any time I can withdraw consent for my information to be held on the Council's database, or shared with partners by talking to the children's centre where my child is registered. I have the right of access to personal information held about me and my children by the children's centre and can request this by making an application in writing.

Signed by main carer:		Date:	
Signed by second carer:		Date:	
Worker name (please print):		Agency:	
Worker contact details:			

Referral for Children's Centre Services (excluding Family Support)

Service(s) requested- if a family needs family support please complete the Common Referral form Please tick as appropriate	
<input type="checkbox"/> General information about children's centre activities and support to engage with services	
Information about activities <input type="checkbox"/> Baby Massage: a 5 week course for babies from 6 weeks to 6 months & carers. <input type="checkbox"/> Baby Group: a weekly session for 1's & under, their parents & carers. <input type="checkbox"/> Stay & Play: sessions for parents, carers & children under 5. <input type="checkbox"/> Holiday Activities: days out & centre based activities for families with under 5's & young siblings.	
Early Learning <input type="checkbox"/> Support with bonding & attachment: Help to develop an emotional relationship with your baby. <input type="checkbox"/> Bookstart Corner: A 4 week programme delivered in the home to help your child develop a love of stories. <input type="checkbox"/> Development Movement & Play: A programme focussing on physical play (six months) <input type="checkbox"/> Early Language Development & Play: A programme focussing on language & communication (18 months) <input type="checkbox"/> Play in the Home: A programme focusing on play and learning	
Support to access early education <input type="checkbox"/> 2 year old place: Find out whether your child is eligible for a place & what the options are. <input type="checkbox"/> 3 or 4 year old place: Help choosing the right early learning place for your child.	
<input type="checkbox"/> Support for a child with additional needs	
Courses for parents <input type="checkbox"/> Family Links Nurturing: A 10 week course to help parents understand & manage feelings & behaviour & become more positive & nurturing in their relationship with children & each other. <input type="checkbox"/> Welcome to the World Antenatal Nurturing: Antenatal course for expectant parents. <input type="checkbox"/> HENRY: Health, Exercise & Nutrition for the Really Young, a 9 week course including weaning & healthy eating.	
Support for parents <input type="checkbox"/> Advice Appointment: Benefits advice sessions run by a partner agency are available at some centres. <input type="checkbox"/> Adult Education: A variety of courses run each term. Free crèches places are available. <input type="checkbox"/> Breastfeeding Support: Help with breastfeeding & weaning. <input type="checkbox"/> Home safety support: Children's centres can help identify potential risks in the home & arrange for a fire safety check. <input type="checkbox"/> Oral Health: Support to register with a dentist. <input type="checkbox"/> Information about Fluoride Varnish sessions. <input type="checkbox"/> Smoking Cessation: Help & advice to stop smoking.	
<input type="checkbox"/> Dad's & male carer's support	
<input type="checkbox"/> Volunteering: Develop skills & add to your CV by helping out at the children's centre.	

Consent to referral for children's centre services			
<i>I have obtained verbal consent from the parent(s) of this child to share the contents of this form with the children's centre and for centre staff to make contact with the parent(s)</i>			
Name of referrer		Date consent obtained	