|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| \\Home\StoZ\Siddrah.Farid\Desktop\Random\Logo.png[Image result for oldham council logo](http://www.google.co.uk/url?sa=i&rct=j&q=&esrc=s&source=images&cd=&cad=rja&uact=8&ved=0ahUKEwi29YW6yprXAhUjB8AKHQDcCXAQjRwIBw&url=http://www.manchestereveningnews.co.uk/news/greater-manchester-news/counter-terrorism-police-investigated-claims-12627268&psig=AOvVaw3QyCEZKCrrq3q58Hi9L_p7&ust=1509529679432423)   |  | | --- | | **AIM Strategy Meeting Referral Form** | | **Please send completed form to**  **CSC Leads**  **Claire Rinaldi** [**Claire.Rinaldi@oldham.gov.uk**](mailto:Claire.Rinaldi@oldham.gov.uk)  **Rima Zafrin** [**Rima.Zafrin@oldham.gov.uk**](mailto:Rima.Zafrin@oldham.gov.uk)  **YJS Lead**  **Nicola Holmes-** [**NicolaHolmes@positive-steps.org.uk**](mailto:NicolaHolmes@positive-steps.org.uk)  **CSC strategic lead Andrea Worthington-** [**andrea.worthington@oldham.gov.uk**](mailto:andrea.worthington@oldham.gov.uk) |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Referrer’s name:** | |  | | **Role of Referrer:** |  | | **Contact Telephone Number (inc Extension + Mobile):** | |  | | **Date:** |  | | **Agency:** | |  | | | | | **Address:** | |  | | | | | **Name of**  **child/YP :** | **Home address + phone No or Placement Details** | | **Male or Female** | **DOB** | **PID No** | |  |  | |  |  |  | | **Any diversity needs for the child/young person:** | | | | | | | **YP’s/Family’s first Language?**  **Will an interpreter be required? Yes No** | | | | | |  | | **Other household members/parent’s/carers/significant others** | | | | | | | **Name** | **Relationship** | | **Male or Female** | **DOB** | **Contact number** | |  |  | |  |  |  | |  |  | |  |  |  | |  |  | |  |  |  | |  |  | |  |  |  |  |  |  | | --- | --- | | **REFERRAL CONCERNS; Details of sexual behaviour, chronology of allegations and specific incidences of inappropriate sexual behaviour** | | | **Background information (Lived experiences, ACE’S, discontinuity of care, domestic abuse, reason for CSC involvement and status i.e., CIN, CP, CLA)**  **Home circumstances (genogram, relationship status, protective factors, any contact with adults who pose risk, past or present)**  **General Behaviour** **(any aggressive behaviour or strengths)**  **Education/Leisure (which establishment, any hobbies, interests, strengths, protective factors, isolation concerns)**  **Peer relationships (Age-appropriate friendships, positive/negative influences, was behaviour peer led?)**  **Emotional/Mental & physical health (taking any medication, any current previous involvement with services such as CAMHS?)**  **SEN (any additional needs, suspected or diagnosed, functioning age, EHCP plan)** | | | **Is there an ongoing police investigation?** | **Yes No**  **bail dates:**  **Released under investigation: Yes No**  **Awaiting CPS decision: Yes No** | | **Date of initial strategy discussion:**  **Outcome of initial strategy discussion:** | | | **Young Person’s views on their situation? (in denial, accepting of some responsibility, prepared to engage in intervention, struggling emotionally)** | | |  | | | **What are the parent/carers/family’s views?** | | |  | | | **Action plan following AIM strategy discussion:** | | |  | | |