Professional discusses with manager and/or agency’s designated/ named safeguarding/ child protection advisor. Working Together to Safeguard Children provides that professionals  **do not need consent** to share personal information. It is one way to comply with the data protection legislation but not the only way. The GDPR provides a number of bases for sharing personal information.

It is not necessary to seek consent to share information for the purposes of safeguarding and promoting the welfare of a child provided that there is a lawful basis to process any personal information required.

**Professional has concerns about a child’s welfare**

If the child is suffering from a serious injury, medical attention must be sought immediately from Accident and Emergency (A&E).

If concern is of a child suffering or likely to suffer significant harm, go straight to referral.

If there are concerns that a child may be a potential victim of modern slavery or human trafficking then a referral should be made to the [National Referral Mechanism](http://www.nationalcrimeagency.gov.uk/about-us/what-we-do/specialist-capabilities/uk-human-trafficking-centre/national-referral-mechanism), as soon as possible**.**

**Where a referrer is dissatisfied with the outcome of the referral, consideration to further action identified in**[**Resolution of Professional Disagreements Procedure**](https://sussexchildprotection.procedures.org.uk/skzq/complaints-and-professional-disagreements/resolution-of-professional-disagreements)**should be considered.**

Feedback should be provided to family and referrers about the outcome of this stage of the referral.

Referrals should be made to the safeguarding MASH/Front Door For Families/SPOA where the child is living or is found. In urgent situations outside office hours, the referral should be made to the relevant Emergency Duty Service/Out of Hours Team (see [Local Contact Details](https://sussexchildprotection.procedures.org.uk/yqkth/appendices/local-contact-details#s333)).

If the child is known to have an allocated social worker, referrals should be made to them or in their absence the manager or a duty officer in the relevant social work team.

All referrals must be followed up in writing **within 24 hours**.

Where there are concerns identified about any adults at risk of harm or [abuse](https://sussexchildprotection.procedures.org.uk/page/glossary?term=Abuse&g=3EzN#gl51), a referral should be made to Adult Social Care under the [Safeguarding Adult Procedures](http://sussexsafeguardingadults.procedures.org.uk/)

A Child and Family Assessment

No further action, provision of information and advice or signposting to another agency

Referral for services under the [Early Help](https://sussexchildprotection.procedures.org.uk/page/glossary?term=Early+help&g=xcjN#gl5) Plan procedures

A Strategy

Discussion

Emergency action to protect a child - see [Immediate Protective Action](https://sussexchildprotection.procedures.org.uk/zkpt/response-to-child-protection-referrals/action-on-receipt-of-referrals#s56)

Outcome - *A manager must sign and approve the outcomes of the referral and ensure a chronology has been commenced and / or updated.*

LA social worker/manager acknowledge receipt of referral and decide next course of action **within one working day**

*If there is no acknowledgement by Children's Services of the referral within a****further 24 hours****, the professional should contact Children’s Services*

Screening Process takes place – see [Action on receipt of a referral](https://sussexchildprotection.procedures.org.uk/zkyppt/response-to-child-protection-referrals/action-on-receipt-of-referrals)