Please complete this form on behalf of your agency/service to support children and young people within Child’s Planning who have been identified as requiring further support.

The information you provide will support the Team Around the Child to identify the correct agency/service and support them to complete the Request for Assistance form with the information required. Thank you

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| --- | --- |
| Service/Agency Children and Young Person’s Service | Women's Aid |
|  |  |
| A discussion prior to Request for Assistance is required  | Yes [ ]  No [x]  |
| If yes, please advise how contact should be made | Click or tap here to enter text. |
|  |  |
| Service/Agency email for the Request for Assistance  | cyp@mwaelgin.co.uk |
| Service/Agency phone number | 01343 548565 or Helpline 01343 548549 |
|  |  |
| Team Leader | Diane Milne |
|  |  |
| Description of the Service/Agency  | Supporting Children and Young people up to the age of 18 years old who have or are experiencing Domestic Abuse.  |
|  |  |
| What specific programmes are offered through this service/agency to support a CYP | Support is age/stage led by the child/young person however part of our support is around the impact of Domestic Abuse, Safety Planning and Healthy/Unhealthy Relationships.  |
|  |  |
| What to expect when the Request for Assistance is accepted  | Confirmation of request received, this will be followed up with contact to the parent or guardian of the CYP to discuss support going forward. |
|  |  |
| Date information was updated | 28/11/2024 |