

# Wigan Building Attachment and Bonds Support Service

## Referral form for health and care professionals

Please see our website for service information and referral criteria [www.nwbh.nhs.uk/babs-wigan](http://www.nwbh.nhs.uk/babs-wigan)

Parent / Primary Carer and Child details <i>*All fields mandatory</i>			
	Parent /Carer 1	Parent / Carer 2	Child / unborn child
Name			
Contact details: Address Telephone number Email			
DOB/ EDD			
NHS No			
Ethnicity			
Interpreter needed?			
Veteran?			
Any disabilities?			

Details of referring professional making <i>*All fields mandatory</i>	
Full name:	Position:
Agency:	Telephone number:
Email address:	Mobile number (if applicable):
Reason for referral: <i>please include as much information as possible using the guidance below to support you</i>	

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Professionals involved with Parents / Carers and Infant (including unborn) *Mandatory fields							
				Name		Contact details	
Parent and infant's GP							
Midwife / health visitor							
Children's Centre							
Paediatrician							
Adults' mental health services							
Any other services?							
Any other children in household? <i>Please provide details</i>							
Are there any safeguarding concerns?							
Named social worker or lead clinician							
CP		CIN		Early Help		Other	
Any impact due to misuse of drugs or alcohol?							
Any potential risks to home visiting?							

Consent * Mandatory field						
Has referrer met with parent / carer?	Yes		No		Date	
Has parent / carer given consent for referral?	Yes		No		Date	
Is consent given for sharing and gathering of relevant information to other partnership agencies?	Yes		No		Date	

**Guidance for referrers:**

- The Wigan BABS service aims to support the developing relationship between the parent / carer and their baby / toddler when there are concerns about this relationship.

- Please refer to and complete the following checklist of risk factors that increase the likelihood of difficulties in the parent-infant relationship.

<b>Factors present in parent</b> <i>M = mother F = father</i>	<b>M</b>	<b>F</b>	<b>Factors observed in parent-infant relationship</b>	
History/current alcohol and / or drug misuse			Negative feelings towards baby	
Serious medical condition			Physically punitive/rough towards baby	
History / current anxiety or depression			Lack of sensitivity to baby's cries or signals	
Learning disability			Lack of vocalisation to baby	
Single teenage parent without family support			Lack of eye-to-eye contact	
Past criminal or young offender record			Infant has poor physical care (ie dirty / unkempt)	
Previous child in foster care or adopted			Does not anticipate or encourage infant development	
Violence reported in family			Lack of consistency in caregiving	
Acute family crisis or recent significant life stress			<b>Factors observed in infant</b>	
On-going lack of support / isolation			Developmental delays	
Inadequate income / housing			Exposure to harmful substances in utero	
Previous child has behaviour problems			Traumatic birth	
Parental experience of bereavement or loss, including perinatal loss.			Congenital abnormalities/illness	
Background of abuse, neglect, loss in childhood			Very difficult temperament / extreme crying / difficult to soothe	
Episode of being in care as a child			Very lethargic / non-responsive / unusually passive	
Chronic maternal stress during pregnancy or ambivalence about the pregnancy			Low birth weight / prematurity	
Disappointment or unrealistic expectation around the parent-infant relationship			Resists holding / hypersensitive to touch	
Other (please describe)			Failure to thrive / feeding problems / malnutrition	

**Please return your completed referral form to [nwbh.babswigan@nhs.net](mailto:nwbh.babswigan@nhs.net)**