**Appendix 2: Triggering of Escalation: Notification to the relevant Safeguarding Children Partnership (SCP - details below)**

**This form should be used to notify the relevant SCP that the escalation process has been triggered and the escalation is moving to Stage 2**

|  |  |
| --- | --- |
| **Name of Child** |  |

|  |  |
| --- | --- |
| **Date of Birth** |  |

|  |  |
| --- | --- |
| **Escalation Raised by (practitioner)** |  |

|  |  |
| --- | --- |
| **Practitioner’s Agency** |  |

|  |  |
| --- | --- |
| **Escalation Raised with (agency and team)** |  |

|  |  |
| --- | --- |
| **Date Escalation Raised** |  |

|  |  |
| --- | --- |
| **Circumstances of Escalation (include the reason for the escalation, the nature of the disagreement, what is was about, whether it stemmed from a meeting or referral etc.)** |  |

|  |  |
| --- | --- |
| **Date Escalation moved to Stage 2** |  |

**The form must be completed by the agency raising the escalation. Please securely email a copy of the form to the relevant Safeguarding Children Partnership;**

* **Bedford Borough Safeguarding Children Partnership –** **LSCB@bedford.gov.uk**
* **Central Bedfordshire Safeguarding Children Partnership -** **cbscb@centralbedfordshire.gov.uk**
* **Luton Safeguarding Children Partnership -** **Lutonlscb@luton.gov.uk**