



One Minute Guide



What is MAPLAG and its purpose?

MAPLAG is the Multi-Agency Liaison and Assessment Group which was developed as part of a recommendation from a Serious Case Review (SCR) in March 2019, where a lack of communication through poor multi-agency collaboration was reported as an area for concern.

The **MAPLAG** meet every six weeks to discuss high risk vulnerable cases with the recognition that pregnant women with complex health and social needs do not always access the services they require for both themselves and their unborn baby.

The purpose of **MAPLAG** is to enable relevant agencies to work together, share information and provide a consistent and collaborative plan of advice, support and care to pregnant women with complex health and social needs. It is widely accepted that early intervention is essential in safeguarding children effectively and that a multi-agency approach increases the capacity of practitioners to take actions to keep their unborn babies and children safe.

Who can refer to MAPLAG?

Any agency can make a referral into MAPLAG. There is a Criteria of Risk Factors within page three of the [MAPLAG protocol](#) designed to aid the referrer.

Which agencies are involved?

- Midwifery
- Perinatal Mental Health Midwife
- Children's Social Care, 0-19 Service,
- Police
- Substance Misuse Services
- Youth Offending Team and Mental Health Service,
- Domestic Abuse support service
- Adult soc care
- CSE team
- CCG



A multi-agency response encourages service engagement with the mother, reducing risk factors and in some cases can result in successful retention of the care of a Mother's new-born.

What does a high-risk case look like?

A high risk case could have a number of factors including:

- previous children / baby removed from home
- use of substances, alcohol or drugs
- chaotic lifestyle
- sofa surfing with no permanent accommodation
- high level of domestic abuse
- significant self-neglect, ill health. None/poor engagement with services, no family/social support
- disabilities
- sexual health issues/families supportive of FGM
- significant mental health issues with history of diagnosed/medicated interventions, self-harm
- homelessness, asylum seeker, refugees poverty, sex trafficking
- exploitation (financial/economic, sexual, children, vulnerable)
- involvement in the criminal justice system
- concealed pregnancies, late Bookings (>16 weeks)

**It is likely that engagement with services
could be poor.**



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Information Sharing & Consent

It is the responsibility of the referring agency to seek consent. However, in cases where there are concerns with regard to safeguarding and protecting vulnerable adults and children and the unborn from significant harm, consent is not required to make a referral to MAPLAG. Professionals should also recognise that in some cases gaining consent may put individuals/families at risk and may not be safe to do so.

When considering information sharing good practice is guided by:-

- [Caldicott Principles](#)
- [Seven Golden Rules of information Sharing](#)
- [Wakefield District Safeguarding Children Board procedures](#)
- [Inter-agency Information Sharing](#)
- [Working Together to Safeguard Children 2018](#)
- [Article 6\(1\)\(e\)](#) and [Article 9\(2\)\(b\)](#) of the [General Data Protection Regulation \(GDPR\)](#)



Who can I contact?

The MAPLAG meeting is chaired by the Safeguarding Midwife from MYHT

Contact Details:

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For clarification on identifying referral risks if you are unsure, contact the MYHT Safeguarding Team on 01924 541968

Supporting Documents



Wakefield [MAPLAG Audit 2021](#)

Wakefield [MAPLAG Protocol for Multi-Agency Assessment and Support for High risk Vulnerable](#)