

Notification of placement/change of placement of children in care within another local authority

Name of local authority child is being placed with (host authority)				
Have you spoken to anyone in the host authority about this child? If yes, please give details				
CHILD/YOUNG PERSON DETAILS				
Family name of child		First name/s of child		
Date of birth		Gender		Religion
Ethnicity		Nationality		First language
Country of birth		Other language		Fluency
GP details				
Child's legal status	S20			
	S21			
	Care or Supervision Order under S31			
	Remand to LA			
	Placement Order			
Other (please specify)				
Name and address [inc. postcode] of parent/person with parental responsibility				
Name and contact details of child's IRO				
RESPONSIBLE AUTHORITY DETAILS				
Responsible authority - name and address and contact person details				
Name, address [inc postcode], email and telephone number of team manager				
Name, address, email and telephone number of Independent Reviewing Officer (IRO)				
Name, address, email and telephone number of social worker				
Out of hours service contact details				
PLACEMENT DETAILS (in host authority)				
Placed with (establishment/foster carer/organisation)				
Name, address [inc. postcode] and telephone number of placement				
If your authority has local knowledge of the placement which it would be appropriate to share with the host local authority, please contact [add local details]				
Start date of placement				
Is this a series of planned short breaks	YES	NO	Details	

Expected end date of placement, if known		
Placement type	Foster home – LA	
	Foster home – IFA	
	Registered children’s home	
	Registered boarding school	
	Pre-adoptive placement	
	Other – please give details	

SAFEGUARDING AND SOCIAL CARE INFORMATION

	Yes	No	Details
Is the child subject to a child protection plan?			
Is the child subject to MAPPA?			
Does the child have a history of running away or missing from home? If yes, is there a current MISPER Trigger Plan? If yes, please attach			
Are there any concerns around CSE? Is there a current plan to manage the risk? If yes, please attach			
Do you want the host authority to manage the risks around the child Missing or risk of CSE? If yes, this will be further discussed			
Are there any other significant concerns or risks?			
Has a risk assessment been completed? Please specify what type of risk assessment. If yes, please attach			
Should the Police be informed of any risks?			

EDUCATION INFORMATION

Name, address [inc. postcode] and telephone number of school or educational provision			
Does the child have an Education, Health and Care Plan (EHC Plan)? If yes, please attach			
Which Local Authority will maintain the EHC Plan?			
Has the Virtual Head for the host authority been informed?			

HEALTH AND RESPONSIBLE COMMISSIONER INFORMATION

Does the child have additional needs arising from a physical or learning disability or mental ill-health?			
Has the health service in the receiving authority been notified?			
Date of last health assessment			
Contact details of person who completed the assessment			

YOUTH OFFENDER INFORMATION

Is the child subject to any Court order or YOS intervention as a young offender?			
If YES, which is the supervising Youth Offending Service?			
Has the Youth Offending Service in the host authority been notified?			

HAS THE PLACEMENT HAD THE FOLLOWING INFORMATION?

Current Risk Assessment			
Current Pathway Plan			
Police – risk assessment			
Other – please give details			

End of placement Notification Form

END OF PLACEMENT	
When the placement ends and the child moves out of that area, the responsible authority must notify the nominated point of contact person where the child was, that the placement has ended:	
Reason the placement ended	
End date of placement	
Name of Person notified	
Date notified	

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Team: Fostering Service
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