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| derbyshire_logo_very_small |  | **The Care Planning, Placement & Case Review (England) Regulations 2010. Children placed in Derbyshire by other local authorities** |

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| **CHILD/YOUNG PERSON/YOUNG PERSON’S DETAILS** |
| Name  |  |
| Gender  |  |
| Ethnic origin |  |
| First language if not English |  |
| Date of birth |  |
| NHS Number |  |
| Legal status | AccommodatedS 20 |  | Care Order S 31 |  | RemandedS 21  |  | Care LeaverAged 16/17[[1]](#footnote-1) |  |
| Other please specify |  |

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| **RESPONSIBLE AUTHORITY DETAILS** |
| Name of Local Authority |  |
| Supervising social worker  |  | Tel. no. |  |
| Email address |  |
| Team manager |  | Tel no. |  |
| Email address |  |
| IRO |  | Tel no. |  |
| Email address |  |

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| **NOTIFICATION OF PLACEMENT:** |
| Start date of new placement in Derbyshire *or* | Yes |  | No |  |
| Is this a series of planned short breaks? | Yes |  | No |  |
| End date of placement previously notified | Yes |  | No |  |
| If end of placement, address to which child is discharged |  |
| Person providing information |  |
| Designation  |  |
| Email address |  |
| Telephone Number |  |

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| **PLACEMENT DETAILS** |
| Placement/Carers’ name |  |
| Provider organisation |  |
| Placement address |  |
| Placement telephone number |  |
| Placement type: | Registered children’s home |  | Registered residential school |  |
| Foster home |  | Other – please specify[[2]](#footnote-2) |  |
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| **PLACING ORGANISATION DETAILS (*if different from responsible authority)*** |
| Name of Organisation |  |
| Worker details |  | Tel no. |  |
| Email address |  |

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| **SAFEGUARDING INFORMATION** |
| Does the child/young person have a history of running away? | Yes |  | No |  |
| If yes: is s/he considered to be at risk of sexual exploitation/trafficking? | Yes |   | No |  |
|  will you require assistance with carrying out return interviews?  | Yes |  | No |  |

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| **EDUCATION INFORMATION** |
| Will the child/young person be attending a Derbyshire school? | Yes |  | No |  |
| If yes, please give details |  |
| If no, what are the arrangements for providing education |  |
| Does the child/young person have an education, health and care plan | Yes |  | No |  |
| If yes, please give details |  |

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| **HEALTH & RESPONSIBLE COMMISSIONER INFORMATION** |
| Do you require access to any specialist health services in Derbyshire? | Yes |  | No |  |
| If yes, please give details |  |
| Do you require initial/review health assessments to be undertaken locally | Yes  |  | No |  |
| If yes, please give details |  |

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| **YOUNG OFFENDER INFORMATION** |
| Is the young person subject to an order as a young offender? | Yes |  | No |  |
| If yes, which is the home YOS? |  |
| Details of any other YOS involved |  |

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| **PLEASE RETURN THIS FORM TO:** |
| **GCSX.OLANOTIFICATIONS@derbyshire.gov.uk** |

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| **FOR FURTHER INFORMATION PLEASE CONTACT:** |
| **Gill Windle, Business Services Assistant 01629 537100** |
| **Gill.Windle@derbyshire.gcsx.gov.uk** |

1. Statutory guidance on children who run away or go missing from home or care, Section 65, January 2014 [↑](#footnote-ref-1)
2. For example, unregulated accommodation [↑](#footnote-ref-2)