**LEGAL PLANNING RECORD:**

**REQUEST ACCOMMODATION UNDER SECTION 20 IN AN EMERGENCY**

***FOR HEAD OF SERVICE TO COMPLETE AND UPLOAD***

Date:

Name of child/ren:

Name of Head of Service:

Name of Team Manager:

Name of Social Worker:

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| 1. **REASON FOR REQUESTING SECTION 20 ACCOMMODATION.** |
| *A* ***brief*** *outline of why this child needs to be accommodated. Have parents requested this? Does the adult requesting this have PR? Does the parent with PR have capacity? Does Young Person requesting S20 accommodation have capacity?* |

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| 1. **WHAT ALTERNATIVE CARERS HAVE BEEN EXPLORED?** |
| *What efforts have been made to keep the child/ren in the care of their family?* |

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| 1. **WHAT INTERVENTIONS/SUPPORT HAVE BEEN IN PLACE TO PREVENT THE CHILD/REN COMING INTO CARE** |
| *Details of interventions/support we’ve tried with the aim of supporting the child/ren to remain at home.* |
| 1. **CARE PLAN** |
| *What is the plan for this child if accommodated under section 20?* |

Was this case already open to Social Care? YES / NO

Would this be the first time this child/ren have been in Local Authority Care? YES / NO

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| 1. **LEGAL ADVICE** |
| *To include rationale* |

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| 1. **HEAD OF SERVICE DECISION** |
| *To include rationale* |

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| 1. **ACTIONS** | | |
| **TASK** | **WHO** | **WHEN** |
| **HOS to upload completed document to Mosaic** |  |  |
| **SW to take case to Placement Panel** |  |  |
| **HOS notification to CPO – Liyana Probyn-Skinner if agreement is given to accommodate child/ren** |  |  |