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| **Request to approve an unregulated placement** |
| *There will be some circumstances, despite efforts to identify an appropriately matched placement that is regulated by Ofsted, that consideration will need to be given to placing a child/young person in an unregulated placement.*  *There are instances where a placement with connected carers becomes unregulated. In such circumstances, this form needs to be completed.*  *The request to place a child/young person in an unregulated placement needs to be approved by the Director of Operations or in their absence, Sandwell Children’s Trust Chief Executive.*  *Background information should be completed by the child’s social worker and request authorised by the relevant Head of Service in consultation with the Head of Service - Placement Provision*  ***Reminder: Children and young people must be visited on a weekly basis as a minimum when placed in an unregulated placement*** |

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| **CHILD DETAILS AND PREVIOUS PLACEMENTS** | | | |
| **Name(s)** |  | **Date of Birth** |  |
| **Home Address** |  | **Gender** |  |
| **Language** |  |
| **Ethnicity** |  | **Religion** |  |
| **Disability (please state)** |  | **Legal status** |  |
| **Team** |  | **Team Manager** |  |
| **Key Worker** |  | **IRO** |  |
| **Head of Service** |  | **Persons with PR** |  |
| **LCS Number** |  | **Current placement** |  |
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| **How many previous placements has the child had? Please provide details of type and length of each previous placement** | | | |
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| **Current care plan: Provide background information (one paragraph only), including details of the options being considered for permanency and whether the current care plan is reflective of any Permanency Planning Meetings and Legal Planning Meeting discussions** | | | |
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| **How does the proposed placement meet the needs of the child/young person?** | | | |
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| **How suitable is the physical environment in meeting the child/young person’s needs?** |
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| **Provide a brief ‘Pen Picture’ of the child/young person: Include a summary of educational needs, enjoyment, achievement, health and wellbeing, identity and any risks** |
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| **Summary of placement search – have we expended every other option?** |
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| **Placement options considered and reasons why not suitable** |
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| **Child’s wishes and feelings in relation to the proposed placement and date when obtained** |
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| **Parent’s view in relation to child’s/young person’s proposed placement** |
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| **Views of the child/young person’s IRO and date when the consultation with the IRO took place** |
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| **Partner agencies informed of placement? How are they supporting the child/young person?** |
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| **Agreed safety plan for child/young person – what arrangements are in place to reduce the risk of harm to the child/young person?** |
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| **Positive relationships – how will the child/young person be helped and supported to develop relationships in the new setting? How will behavioural and emotional needs be met?** |
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| **RESPONSE TO REQUEST** | |
| **HEAD OF SERVICE COMMENTS** Confirm if the weekly visiting schedule is suitable or if it should be more often |  |
| **HEAD OF SERVICE SIGNATURE** |  |

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| **RESPONSE TO REQUEST** | |
| **DIRECTOR OF OPERATIONS COMMENTS** |  |
| **DIRECTOR OF OPERATIONS SIGNATURE** |  |