Appendix 1

**VISITING AND CONTACT FREQUENCY RISK ASSESSMENT**

The minimum visiting requirements set out on page 5 Covid-19 Secure Practice Guidance apply

**Issues to think about when considering frequency:**

1. Key issues and risk for the child/young person – what increases safety for the young person?
2. Changes in situation that do not meet the threshold for s47 but increase concerns and risk level for the child/young person
3. Are there child/young person or parental issues that the Covid-19 measures might make worse i.e. mental health issues; domestic abuse; tension in family relationships?
4. Other agencies involved and their level of contact / oversight – including the child attending school or child care setting?
5. Engagement by child/young person and family in virtual communication?
6. Internet and smart phone access in order for child / family to undertake meaningful virtual contact

**Brief Summary of Risk Assessment:**

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| --- |
|  |

**Agreed type and frequency of visits/contact:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Other Professionals** | | | | **Merton Practitioner / Social Worker** | | |
| **Name:** | **Type:** | | **Frequency:** | **Type:** | | **Frequency:** |
|  | **Phone** |  |  | **Phone** |  |  |
| **Virtual** |  |  |
| **Visit** |  |  |
|  | **Phone** |  |  | **Virtual** |  |  |
| **Virtual** |  |  |
| **Visit** |  |  |
|  | **Phone** |  |  | **Visit** |  |  |
| **Virtual** |  |  |
| **Visit** |  |  |

**Manager Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date agreed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_