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| **Local authority social work evidence (EPO)** |  | In the family court sitting at |
|  | In the matter of the Children Act 1989 |

Use of this document is recommended by the President of the Family Division, the Association of Directors of Children’s Services, Cafcass, HM Courts and Tribunals Service, the Department for Education, the Ministry of Justice and the Chair of the Family Justice Board, in compliance with the revised Public Law Outline (PLO) 2014.

**The child(ren) – use one per template per family**

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| **Names**  | **Gender** | **Date of Birth** | **Child’s current placement status** | **Child’s current legal status** |
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| **Local Authority and Social Worker details** |
| Case number |  |
| Filed by [local authority] |  |
| Social work statement number in the proceedings, e.g. 1st, 2nd**N.B**. A final statement should be completed on the Final Statement Template (FST) |  |
| Social work statement number for this witness e.g. 1st, 2nd, 3rd |  |
| This author/witness’s name, qualifications, experience, and office address |  |
| This author/witness’s HCPC registration number |  |

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| **Set out what type of EPO you are seeking and why?** |
| *There is reasonable cause to believe that the child is likely to suffer significant harm if*1. *He is not removed to accommodation provided by the LA;or*
2. *He does not remain in the place in which he is being accommodated*

*OR**Section 47(1) enquiries are being made by the LA in respect to the child AND those enquiries are being frustrated by access to the child being unreasonably refused to a person authorised to seek access and the applicant has reasonable cause to believe that access to the child is required as a matter of urgency* |

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| **1 Family composition*** This section should include family members and relationships, and should specify the relationship in respect of each child subject to the application. Please set out the family members' full names, their dates of birth, their nationality, ethnicity and their current addresses.
* Where an address needs to be kept confidential, send the information to the court.
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| **Name** | **Relationship** | **Parental Responsibility** | **DOB** | **Nationality** | **Ethnicity** | **Address** |
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**2. Triggering event**

Set out the event that has prompted the application for the EPO

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**3. Analysis of impact on the child**

Set out what the imminent danger is to the child, why an EPO is necessary to remove them/keep them away from their parent(s).

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**4. Conditions**

Set out whether any conditions need to be attached to the EPO (re contact or medical/psychiatric or other assessment of the child)

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| **5. Case management issues and proposals**  |
| List any case management issues e.g. application for ICO to be listed, any issues for immediate determination |
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| **6. Statement of procedural fairness** |
| Have the contents of this statement been communicated to mother, father, significant others,and the child in a way which can be clearly understood? If not, what has been tried? |
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| **7. Signature** |  |
|  |  |
| Print full name |  |
|  |  |
| Role/position held |  |
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|  | **The facts in this application are true to the best of my knowledge and belief and the opinions set out are my own.** |
| Signed |  |
|  |  |
| Date |  |  |