Step Up/Step Down Request and Decision Record Form

To be completed by the current lead professional

Child(ren):	ldentifier- eldest child only
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Allocated Consumers	
Allocated Caseworker:	
Date of form completion:	
Step up/down?	
Date of discussion with parents and consent gained:	
Parents views about step up/down:	
Date TAF members notified of step up/down discussion:	
Date of last assessment:	
Date of last Team Around Family/Plan updated meeting	
Up to date chronology on LL:	
Date children last seen:	



Is the case summary updated?			
Has there been a FNWM/ FGC?			
What are we worried about? Step up – Please attach appropriate evidence document or give brief summary highlighting concerns Step Down –Please attach upto date plan identifying outstanding work			
Document	Y/N	Notes/explanation	
FNWM			
Safety Plan			
Harm Matrix			
Engagement Toolkit			
Graded Care Profile			
CE Matrix			
Sexual Harm Matrix			
DASH assessment			
CSE Matrix			
Other			
Summary (if required)			



What work had been attempted/completed? (use bullet points) include whether successful or not and dates if applicable.			
Is the safety plan on LL or incorporated into the family plan?	Yes □ No □		
Outcome of step up/down	discussion:		
Date of transfer			
Agreement as to who will inform family of transfer			
New allocated worker			
Name of team manager agreeing step/down			

Team Co-ordinators/Business Support

Team Co-coordinators/Business Support recording step up/step down meetings must ensure a copy of this form is uploaded onto the child's file in the document store on Liquid Logic.

Team Co-coordinators/Business Support must also enter a case note directly onto Liquid Logic detailing any decisions relating to step up/step down of their team cases