**Case Supervision form**

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| **Type of Plan** delete as applicable | | CIN CP CIC Care Leaver | |
| **Length of time on Plan** | |  | |
| **Significant events/update since last supervision** | | | |
|  | | | |
| **Visiting frequency** | | | |
|  | | | |
| **Court timetable/Private or Public Law** | | | |
|  | | | |
| **Date of last visit?** |  | **Is last visit recorded?** | Y/N |
| **Is case summary updated?** | Y/N | **Is chronology updated?** | Y/N |
| **Date of last CIN meeting/core group/Statutory review** | | |  |
| **Date of next CIN meeting/core group/Statutory review** | | |  |
| **Date of next RCPC/LAC review** | | |  |
| **Date of Last LAC Health Assessment** | | |  |
| **Date of Last Personal Education Plan/Next PEP** | | |  |
| **Date of Pathway Plan** | | |  |
| **Voice of the child (specific to the current circumstances and is this Influencing the Plan)** | | | |
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| **Reflection and Analysis (Impact of the Plan and Interventions / Outcomes)** | |
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| **What is working well?** | |
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| **What are we concerned about?** | |
|  | |
| **Plan Review Progress of the Plan for Children and Young People** | |
|  | |
| **Actions (to include update on actions from last supervision and new actions agreed today)** | |
|  | |
| **Date of next supervision** |  |