

**CHILDREN YOUNG PEOPLE AND FAMILY’S SERVICE**

**RISK ASSESSMENT TEMPLATE**

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| --- | --- |
| **Name of child / young person:** | **Date of birth:** |
|  |  |
|  |  |
|  |  |

**Family members involved in the risk assessment:**

|  |  |  |
| --- | --- | --- |
| **Name** | **Relationship** | **Address** |
|  |  |  |
|  |  |  |
|  |  |  |

**Person undertaking the Risk Assessment:**

|  |  |  |
| --- | --- | --- |
| **Name** | **Designation** | **Organisation** |
|  |  |  |
|  |  |  |

**Professionals consulted as part of this assessment:**

|  |  |  |
| --- | --- | --- |
| **Name** | **Designation** | **Organisation** |
|  |  |  |
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|  |  |  |
|  |  |  |

**Framework checks undertaken:**

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| --- | --- | --- |
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**Purpose of the risk assessment:**

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**Summary of the Family’s history of involvement with Herefordshire Children’s Social Care:-**

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**Details of offences, suspected offences against children, convictions, cautions, findings of fact, allegations, generalized concerns**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Details of any current orders in force, e.g. Probation Order, Registered Sex Offender, Notification Order, Sex Offenders Prevention Order, Risk of Sexual Harm Order, License**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Personal responsibility for the behaviors of concern:**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**What information have they provided to the child’s main carer.**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Details of the Child and their Family:-**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**The wishes and feelings of the child in relation to contact with this person (If the child is preverbal state what you think the child would want)**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Assessment of Parent’s current parenting capacity to protect from harm.**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Mother**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**The impact of XXX’ offending history has been explored and discussed in details.**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Are there any factors which impact on the parents/’carer’s capacity to protect from harm, for example, physical/mental illness, disability, poor experience of being parented, care history, childhood abuse, history of violence, alcohol, substance misuse.**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Consideration and practical arrangements for safeguarding the child**

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**Social support network of the main carer**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Social support network of the child within the family**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Father**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Social support network of the child outside of the family, including professional contacts**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Support and monitoring systems**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Social Worker Analysis**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Name and contact details of social worker completing the assessment**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Signed and dated:** xxxxxxxxxxxxxxxxxxxxxxxxxx

**Comments/endorsement by social work manager:-**

xxxxxxxxxxxxxxxxxxxxxxxxxx

**Signed and dated:** xxxxxxxxxxxxxxxxxxxxxxxxxx