**A close-up of a logo

Description automatically generated**

## **National alert notification template**

**CHILD/YOUNG PERSON’S DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Full name** | **Known by other names** | **Date of birth or expected due date** | **Gender** |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Last known address** |  | | |
|  |  |  |  |
| **Postcode** |  | **Contact number** |  |

|  |  |
| --- | --- |
| **Pen picture**  *This should help anybody reading the alert know all the important things about the child or young person. You should think about who they are (name, age etc), what they look like and any communication needs they have. This will help people be more prepared if they must respond to the child.* | |
| **What are you worried about?**  *This should identify any known risks and complicating factors to the child, a parent/carer or a worker. The information should be up to date, accurate and succinct. It should explain when the child was last seen, who with and where and what the impact of being missing is on the child.* | |
| **What needs to happen when the child is found?**  *This will explain the actions that need to be taken and by who to increase the child’s safety.* | |
| **If the child is found, please contact Northumberland Children’s Social Care.** | |
| **Monday to Thursday between 08:30 and 17:00 and Friday between 08:30 and 16:30** | |
| **Name of person or team to contact.** |  |
| **Contact details (telephone number and email address)** |  |
| **Monday to Thursday between 17:00- 08:30 and Friday from 16:30 until Monday until 08:30** | |
| **Name of person or team to contact.** |  |
| **Contact details (telephone number and email address).** |  |

|  |  |
| --- | --- |
| **Name and role of person completing the national alert notification.** |  |
| **Date completed.** |  |
| **Name of senior manager quality assuring the alert notification, the decision and rationale.** |  |
| **Date of quality assurance.** |  |
| **Name of Head of Service, the decision and rationale.** |  |
| **Date of decision.** |  |

**THIS FORM SHOULD BE UPLOADED ON THE CHILDS CHILDRENS SOCIAL CARE RECORD.**