CONFIDENTIAL HIGH PRIORITY

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| **‘NEED TO KNOW’ form CONFIDENTIAL and HIGH PRIORTY** |
| Children/Young Person’s Names: | Dob and age: |
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|  |  |
|  |  |
| Current Address: |
|  |
| CIN/CP/Looked After/Care Leaver/YOT or other service? |  |
| Legal Status e.g. s20, ICO, CO etc. |  |
| Allocated worker and Team: |  |
| Date of incident: |  |
| Summary of incident: |  |
| Key events connected to and of relevance to incident: |  |
| Summary of risks: |  |
| Immediate Actions being taken: |  |
| Outstanding and planned actions: |  |
| IRO & QAAS Manager Notified (Names, date and time): |  |
| EDT Notified (Date and time): |  |
| Other agencies Notified (Agency, date and time) |  |
| Name of person completing form: |  |
| Service Manager sign off: |  |
| Date: |  |
| Head of Service review: |
| Head of Service Comments: |  |
| Head of Service Instructions: |  |
| To be Passed to Director and Portfolio Holder / Lead Member by HoS? | YES/NO |
| Ofsted to be Notified?www.gov.uk/guidance/report-a-serious-child-safeguarding-incident | YES/NO | By whom? |  |
| Update to HoS required by (date/time): |  |