**Basic information sheet for LPM:**

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| **1. Case details** |

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| **1.1 The child(ren)** |

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| **Names** | **Gender** | **Date of Birth** | **Child’s current placement status** | **Child’s current  legal status** |
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| **1.2 Family composition** |
| * This section should include family members and relationships, and should specify the relationship in respect of each child subject to the application. Please set out the family members' full names, their dates of birth, their nationality, ethnicity and their current addresses.   *This section should detail the child(ren) subject of this LPM and all known immediate and extended family members, primary care givers and significant others (both children and adults).*  *The individual’s relationship to each of the child(ren) subject to this statement should also be specified, as well as the individual’s date of birth, address, nationality and ethnicity, e.g. Father of Jack.*  *No box should be left blank. Please delete any rows in the table that are not used. A consistent format should be used throughout.*  *Addresses which need to remain confidential need to be marked as such. If addresses are unknown, clearly state this.* |

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| **Name** | **Relationship** | **Parental Responsibility** | **DOB** | **Nationality** | **Ethnicity** | **Address** |
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| **2. List of previous assessments and interventions**  *This section needs to include all assessment (single assessment, parenting assessment,PAMS assessment etc) completed to date and the outcome of the assessment i.e. progress to Child in Need, , reccommendations of further support, closure etc.*  *Interventions that have been provided also need to be included such as substance misuse support, parenting support. What was the outcome of this support? Did parents engage? What was the impact of the inervention on the child/ren?* | | |
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| **Description of assessment/intervention** | | **Date** | **Outcome and effectiveness** | |
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| **Has a referral been made for a Family group conference?**  **Date**  **Outcome**  **If no conference has been convened, please state the reasons** | | | | |
| **3. Proposed Draft Pre-Proceedings Agreement:** | | |
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| *Set out the period of time that you propose that the Pre-Proceedings should run over.*  *Briefly summarise what actions you are proposing in your draft Pre-Proceedings agreement.*  *Set out any case management issues and proposals, e.g. delay factors, special factors relevant for the child, vulnerability of any key participant, any further proposed assessments including why they are necessary, etc.*  *Include the outcome of any assessments which have already been done. If an update is needed please provide the rationale for proposing this. If you, in agreement with your Team Manager and Head of Service, consider it essential to undertake/complete further assessment/s to inform longer term decision-making for the child(ren), you need to clearly set out the rationale of the need for the assessment/s. The purpose of the proposed assessment/s needs to be clear. All pre proceedings, unless already done so, should include a parenting assessment and sibling assessment*  *HoS MUST be in agreement with any use of experts. ISW are not to be used for parenting assessments and must be completed within the team working with the child/ren and family unless absolutely extenuating circumstances. Psychological assessments are only to be used if necessary whereby a parents functioning is outside that of a parenting assessment consideration family functioning and history.* | | |

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| **3. Signature** |  |
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| Print full name |  |
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| Role/position held |  |