***QA and RAG form for CP Conferences***

Details of Subject/Children:

|  |  |
| --- | --- |
| Name: |  |
| Date of birth: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Initial CP | 1st Review | 2nd Review | 3rd Review |

|  |  |
| --- | --- |
| 4th Review | Explanation required of reasons: |

|  |  |
| --- | --- |
| Date of Conference: |  |
| Time of Conference: |  |
| Venue: |  |
| Name of Social Worker/Team: |  |
| Name of Chair: |  |

|  |  |
| --- | --- |
| Date of Next Conference: |  |
| Time: |  |
| Venue: |  |

|  |  |
| --- | --- |
| Did the allocated social worker attend? | YES / NO |
| Did the allocated social worker attend on time? | YES / NO |

|  |  |  |  |
| --- | --- | --- | --- |
| How many days in advance of the conference was the social worker`s report provided to parent(s)? | | | |
| 1 day | 2 days | 3 days | |
| Did manager authorise and provide comments? | | | YES / NO |

|  |  |
| --- | --- |
| Was the report child focussed and provided assessment and analysis? | |
| YES / NO | Comments: |

|  |  |
| --- | --- |
| Was consideration given for the child to attend? | |
| YES / NO | Comments: |

|  |  |
| --- | --- |
| Were parents invited? If not, why not? | |
| YES / NO | Comments: |

|  |  |
| --- | --- |
| Were consultation booklets provided for child/children and parents? | YES / NO |
| If not, were their views provided for the chair? | YES / NO |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Did all the appropriate agencies attend? | | | YES / NO | |
| Police | YES / NO | Youth Offending Service | | YES / NO |
| Health Visitor | YES / NO | Substance Misuse Team | | YES / NO |
| School Nurse | YES / NO | Mental Health Team | | YES / NO |
| Midwifery | YES / NO | PACT | | YES / NO |
| Other | YES / No |  | |  |

|  |
| --- |
| Which agency provided a report? |
| 1. |
| 2. |
| 3. |
| 4. |

|  |  |
| --- | --- |
| Did all the agencies involved participate appropriately? | YES / NO |
| If not, please identify name, agency and role. | |
| 1. | |
| 2. | |
| 3. | |
| 4. | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is the CP Plan up to date? | | | YES / NO | |
| Is progress identified? | YES | NO | | N/A |
| If not, why not? Comments: | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Have statutory visits been undertaken within the identified timescale? | YES | NO | N/A |
| If not – please explain: | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Have Core Groups taken place? | YES | NO | N/A |

|  |  |  |
| --- | --- | --- |
| Have there been any complaints? | YES / NO | YES / NO |
| Comments: | | |

|  |  |
| --- | --- |
| Has legal advice been necessary? | YES / NO |
| Before or at the 3rd review? | YES / NO |
| Comments required by the 3rd review: | |

|  |  |
| --- | --- |
| Have other issues been addressed i.e. Housing? | YES / NO |
| Comments: | |

|  |  |
| --- | --- |
| Have issues of Diversity been addressed? | |
| Culture | YES / NO |
| Ethnicity | YES / NO |
| Religion | YES / NO |
| Disability | YES / NO |
| Sexual Orientation | YES / NO |
| Other: | YES / NO |

Summary analysis linked to the child/ren’s live experiences and outcomes:

|  |  |  |
| --- | --- | --- |
| RAG Rating: | | |
| GREEN | AMBER | RED |

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