***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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