



Dorset Council

Children's Services Directorate

Visits to Children in Long-Term Residential Care Regulations 2011

Independent Visit Questionnaire for Staff

DETAILS OF RESIDENTIAL SCHOOL

Basic Details	
Name of Child/Young Person	
Residential Home Name	
School Setting Name	
Name of School Staff Member	
Role of School Staff Member	
Date of completion	

FEEDBACK ABOUT CHILD/YOUNG PERSON

Please provide details of any safeguarding concerns related to the child/young person since the last Independent Safeguarding Visit
What are the child/young person's strengths?
What are your targets for developing these strengths over the academic year?
How can you tell when the child/young person is happy?
Does the child/young person seek interaction with key members of staff?
Yes <input type="checkbox"/>
No <input type="checkbox"/>
Please comment below:
How does the child/young person interact with peers?
Does the child/young person seek help/support when needed?
Yes <input type="checkbox"/>
No <input type="checkbox"/>
Please comment below:
Can the child/young person indicate when they want to do something or finish an activity?
Yes <input type="checkbox"/>

No

Please comment below:

How can you tell when the child/young person is distressed?

Is there anyone or anything in the school that makes the child/young person unhappy?

Yes

No

Please comment below:

Are there any concerns with the child/young person's behaviour?

Yes

No

Please comment below:

If yes, how are these managed?

What are the arrangements for communication about the child/young person between school and residential staff?

What systems of communication does the child/young person use and who can they use this system with?

How is contact between the child/young person and their family facilitated?

What contact do the residential staff have with the child/young person's family?

Has the child/young person experienced any physical changes since the last Independent Safeguarding Visit i.e., eating and drinking patterns, weight,

Is support provided to the child/young person around personal care?

Yes

No

Please comment below:

Who completes personal care support?

Have these staff had appropriate training? Please detail below:

How the is the child/young person involved in choosing their menu?

Is the menu providing a balanced, healthy, and varied diet appropriate to the child/young person's needs and choices?

How often is the child/young person's bedroom cleaned?

How often is the child/young person's bedding changed?

How often are the child/young person's clothes washed? What are the arrangements for this?

What activities are available for the child/young person in the evenings/weekends? How well does the child/young person engage with these?

Does the child/young person have a routine that is appropriate for their age, ability and needs?

Please provide an overview of their day

How often is this reviewed?

Are there any other comments you want to make?

Are there any issues you would like to discuss as part of the Independent Safeguarding Visit?

Signatures

Signature:

Date: