|  |  |  |  |
| --- | --- | --- | --- |
| Name of Child |  | Date of Birth |  |
| Name of children’s home |  | Date of Admission |  |
| Keyworker |  | Date of Safety Plan |  |

|  |
| --- |
| **Risk to Self** |
| **What are we worried about?** |
|  |
| **What’s working well?** |
|  |
| **What needs to happen?** |
|  |
| **Scaling –** where ‘0’ means there is little evidence of continued significant harm, and ‘10’ means that no action needs to be taken |
|  | **Child** | **Keyworker** | **Social Worker** |
| **Today’s score** |  |  |  |

|  |
| --- |
| **Risk to Other Residents** |
| **What are we worried about?** |
|  |
| **What’s working well?** |
|  |
| **What needs to happen?** |
|  |
| **Scaling –** where ‘0’ means there is little evidence of continued significant harm, and ‘10’ means that no action needs to be taken |
|  | **Child** | **Keyworker** | **Social Worker** |
| **Today’s score** |  |  |  |

|  |
| --- |
| **Risk to Staff** |
| **What are we worried about?** |
|  |
| **What’s working well?** |
|  |
| **What needs to happen?** |
|  |
| **Scaling –** where ‘0’ means there is little evidence of continued significant harm, and ‘10’ means that no action needs to be taken |
|  | **Child**  | **Keyworker** | **Social Worker** |
| **Today’s score** |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Child  |  | Signature |  | Date |  |
| Keyworker |  | Signature |  | Date |  |
| Manager  |  | Signature |  | Date |  |
| Social Worker  |  | Signature |  | Date |  |