

## 06.8a Care plan for Children in Care

This form must be used alongside the individual child's registration form which contains further details.

<b>Name of child</b>		<b>Date of birth:</b>	
<b>Child's address</b>			
<b>Contact information for main carers</b>			
1. Name			
Relationship to child			
Phone numbers			
2. Name			
Relationship to child			
Phone numbers			
<b>Any additional healthcare needs</b> (give details and complete 04.2a Health care plan form, if required)			
<b>Social Care/Social Worker</b>			
Name			
Phone no.			
<b>GP/Doctor</b>			
Name			
Phone No.			
<b>Details of professionals meeting convened at start of placement</b> (include date of meeting, names of agencies/professionals attending and any special considerations for the child)			

<b>Risk assessment required?</b>	<b>Yes or No</b>
If yes, include details here, including date completed:	
<b>Daily care requirements</b> e.g. before meals/going outdoors	
<b>Describe what constitutes an emergency for the child and what actions are to be taken if this occurs</b>	
<b>Name(s) of staff responsible for an emergency situation with this child</b>	

**The child's carer and key person must sign below to indicate that the information in this plan is accurate and the carer agrees for any relevant procedures to be followed.**

Carer's name		Signature		Date	
Key person's name		Signature		Date	
Setting manager's name		Signature		Date	

**Review completed (at 2 weeks, 6 weeks, 3 months onwards)**

Carer's name		Signature		Date	
Key person's name		Signature		Date	
Setting manager's name		Signature		Date	

**Copies circulated to:**

Carers

Other agencies/professionals

Child's personal records (with registration form)