**St Michael’s Pre-school - Care plan for looked after children** 

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of child |  | Date of birth: |  | |
| Child’s address |  | | | |
| Contact information for main carers | | | | |
| 1. Name |  | | | |
| Relationship to child |  | | | |
| Phone numbers |  | | | |
| 2. Name |  | | | |
| Relationship to child |  | | | |
| Phone numbers |  | | | |
| Any additional healthcare needs(give details and complete 04.2a Health care plan form, if required) | | | | |
| Social Care/Social Worker | | | | |
| Name |  | | | |
| Phone no. |  | | | |
| GP/Doctor | | | | |
| Name |  | | | |
| Phone No. |  | | | |
| Details of professionals meeting convened at start of placement (include date of meeting, names of agencies/professionals attending and any special considerations for the child) | | | | |
|  | | | | |
| Risk assessment required? | | | | Yes or No |
| If yes, include details here, including date completed: | | | | |
|  | | | | |
| Daily care requirements e.g. before meals/going outdoors | | | | |
|  | | | | |
| Describe what constitutes an emergency for the child and what actions are to be taken if this occurs | | | | |
|  | | | | |
| Name(s) of staff responsible for an emergency situation with this child | | | | |
|  | | | | |

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)