



## Home Visit & Child/Young Person Engagement Report

<b>Name of CYP:</b>	
<b>DOB:</b>	
<b>Carers:</b>	
<b>Residential Address of CYP:</b>	
<b>Caseworker:</b>	

<b>Staff Conducting Home Visit:</b>	
<b>Date of Home Visit:</b>	<a href="#">Click here to enter a date.</a>

### Observation

Was the CYP sighted:	<input type="checkbox"/> Alone only at home <input type="checkbox"/> Alone only in the community <input type="checkbox"/> Both alone and with the carer at home <input type="checkbox"/> Both alone and with the carer in the community <input type="checkbox"/> Both alone and with the carer in both the home and community <input type="checkbox"/> With the carer only <input type="checkbox"/> Not sighted
If not sighted, reason CYP was not sighted?	
Was the CYP bedroom room sighted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was the CYP's home environment sighted? What rooms?	
If so, what evidence was sighted in the home that reflects the CYP's identity and culture?	

### Presentation & Affect

How did the CYP present? (E.g. clean & tidy, dishevelled etc.)	
What was the CYP affect? (Did the CYP appear happy, sad, cheerful, talkative, distressed etc.?)	



What evidence supports this observation?	
Was the CYP willing and able to engage with staff?	

### **Engagement**

What topics were discussed with the CYP?	<input type="checkbox"/> General conversation <input type="checkbox"/> Education <input type="checkbox"/> Medical <input type="checkbox"/> Birth Family Contact <input type="checkbox"/> Placement Disclosure <input type="checkbox"/> Placement update/Placement stability <input type="checkbox"/> Case Planning/review goals <input type="checkbox"/> Leaving Care (for CYP 15yrs +) <input type="checkbox"/> Life Story information <input type="checkbox"/> Charter of Rights <input type="checkbox"/> Culture & Identity <input type="checkbox"/> Other
Provide detailed description of conversation held with CYP regarding any topics identified above, or any topics in addition to the above:	
What topics were discussed by the carer with staff regarding, or on behalf of the CYP:	Education <input type="checkbox"/> Medical <input type="checkbox"/> Birth Family Contact <input type="checkbox"/> Placement Disclosure <input type="checkbox"/> Placement update/Placement stability <input type="checkbox"/> Case Planning/review goals <input type="checkbox"/> Leaving Care (for CYP 15yrs +) <input type="checkbox"/> Life Story information <input type="checkbox"/> Charter of Rights <input type="checkbox"/> Culture & Identity <input type="checkbox"/> Other
Provide detailed description of conversation held with carer regarding any topics identified above, or any topics in addition to the above:	



Next scheduled Home Visit:	<a href="#">Click here to enter a date.</a>
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Author of report	
Date:	