



**Risk assessment and conclusion**

<b>Name of child/young person:</b>
<b>Date of Birth:</b>

<b>Negative Influencing Factors</b>	<b>Positive Influencing Factors</b>

<b>Recommendations and conclusion</b>

<b>Signed:</b>	<b>Position:</b>	<b>Date:</b>
<b>Signed:</b>	<b>Position:</b>	<b>Date:</b>

**Referral Procedure  
Part 3**

<b>Aims and Objectives of Placement Environment</b>
<b>Values</b>
<b>Activities</b>
<b>Education</b>
<b>Specific areas for attention</b>
<b>Any other comments</b>
<b>Young Person Signature (if appropriate):</b>
<b>House Manager Signature:</b>
<b>Care Manager Signature:</b>