

CAMHS STATUTORY ADVICE (REPORT) FOR EDUCATION, HEALTH AND CARE PLAN

All considerations should be based on child or young person's life aspirations.

Please expand boxes as necessary and complete all sections

Personal details	Name:	DoB:	Age:	NHS Number:
Home Address				
Telephone and/or Email				
School				

CAMHS Clinician(s)	
CAMHS address	
Telephone and/or E-mail	

Please provide reference to who referred to CAMHS and when.

Method(s) of Assessment/Examination

Please record when and where child was assessed and what you did to assess child (e.g. parent interview, clinical examination, formal assessment tool, observation in naturalistic environment)

Findings resulting from Assessment/Examination

Please record your conclusions and findings including any diagnosis and diagnostic implications:

Child's needs, outcome and provision

What are the child's current needs? (difficulties)	What is the provision to meet the needs? (How/ where/ who/ how often?) (what CAMHS is providing only)	What is the expected outcome? (change as a result of CAMHS's input) Please include long-term (next key stage in education) and short-term (next 12 months) aims.

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Treatment/ Care Plan	Date that current Treatment/Care Plan commenced (attached ?)
Medication	Note any current medical prescriptions:

Completion of Statutory Report:

Signature	Name and Role	Date

Submission Date:

Requested Date of Submission	Actual Date of Submission

Submission date: if you anticipate any difficulties in submitting your report please contact the **General Manager CYPF** and the **SEN Team** immediately. SEN team to be reached at 0121 569 8240, or contacted via email at sen_newehcp@sandwell.gov.uk.

Please save as word document and return to the Statutory Special Educational Needs team via GCSX.

OFFICE USE ONLY (STATUTORY SEND TEAM)

Monitoring Submission Dates

Requested date	Submission Date	Received Date