



## Kids' DOOR 2

## Practitioner Response Plan

Client ID .....

Practitioner .....

Date .....

## A. Through Kids' DOORS, the following wellbeing and/or safety risks have been identified:

- |  |   |   |   |   |
|--|---|---|---|---|
| <input type="checkbox"/> Culture/religion    | <input type="checkbox"/> Living situation       | <input type="checkbox"/> Conflict with parents/family | <input type="checkbox"/> Conflict between parents/family        | <input type="checkbox"/> Child's safety to others |
| <input type="checkbox"/> Child's wellbeing   | <input type="checkbox"/> Parent/carer wellbeing | <input type="checkbox"/> Child's safety from others   | <input type="checkbox"/> Child's safety from him/her/themselves |   |
| <input type="checkbox"/> Major stressors     | <input type="checkbox"/> Protective factors     | <input type="checkbox"/> Supports from others         | <input type="checkbox"/> Other (specify).....                   |   |
| <input type="checkbox"/> No risks identified |   |   |   |   |

B. Given these wellbeing and/or safety risks, the **practitioner/service** response is:

- ☐ No additional action required – all wellbeing or safety risks are well managed or absent
- |  | <i>With whom</i><br><i>(child/parent</i> | <i>By whom</i><br><i>(practitioner</i> | <i>Notes</i> |
|--|--|--|--------------|
|  | <i>/carer/other)</i>                     | <i>/service)</i>                       |              |
| <input type="checkbox"/> Extra action as follows:                                      |  |  |              |
| <input type="checkbox"/> Increase service engagement by:                               |  |  |              |
| <input type="checkbox"/> Between session contact                                       |  |  |              |
| <input type="checkbox"/> More frequent and/or longer sessions                          |  |  |              |
| <input type="checkbox"/> Bringing person (eg parent/carer/other) into the sessions     |  |  |              |
| <input type="checkbox"/> Keep person (eg parent/carer/other) <b>away</b> from sessions |  |  |              |
| <input type="checkbox"/> Bring cultural consultant into the sessions                   |  |  |              |
| <input type="checkbox"/> Other (specify)   |  |  |              |
| <input type="checkbox"/> Conduct further assessment                                    |  |  |              |
| <input type="checkbox"/> Conduct safety planning                                       |  |  |              |
| <input type="checkbox"/> Notify a statutory authority/agency                           |  |  |              |
| <input type="checkbox"/> Other (specify)   |  |  |              |

### C. Given these wellbeing and/or safety risks, the **child/parent/carer** has agreed to:

☐ No extra action required – all wellbeing or safety risks are well managed or absent

☐ Extra action as follows:

<i>By whom</i> <i>(child/parent</i> <i>/carer/other)</i>	<i>With whom</i> <i>(practitioner</i> <i>/service)</i>	<i>Notes</i>
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☐ Between session contact

☐ More frequent and/or longer sessions

☐ Bring person (eg parent/carer/other) into the sessions

☐ Keep person (eg parent/carer/other) **away** from sessions

☐ Bring cultural consultant into the sessions

☐ Other (*specify*)

☐ Participate in further assessment

☐ Participate in safety planning

☐ Engage with statutory authority/agency

☐ Other (*specify*)

### D. Consent/assent to share information

<i>With whom</i>	<i>By whom</i>	<i>Notes</i>
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☐ Child has requested information be shared

☐ Child has been advised of need to share information

☐ Parent/carer has been advised of need to share information

☐ Other (*specify*)

☐ Consent not required (*explain why*)

### E. Updates, progress and follow up notes

<i>Additional information after completion of Practitioner Response Plan</i>	<i>Date</i>	<i>By practitioner/service</i>
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