





WHAT IS A CARE PLAN?

- A Care Plan is put together for every young person when they come into care. This is a plan of your life in care and all the things to help and support you while you are in care. It is also a plan for **YOUR** future;
- ★ You can arrange to talk to your Social Worker about your life in care and the things in your Care Plan Review form ANYTIME YOU LIKE;
- * Your Care Plan Review form is also talked about at a special meeting. These are called 'Child in Care Review Meetings'.
- ★ There is a meeting about your Care Plan before or when you first go into care. After that, there is a meeting every six months for the first two years. After that, there is one every year.
- * In between these meetings, you can ask for a special review meeting anytime.

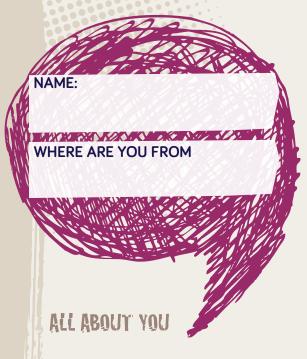
DO I HAVE TO FILL IT OUT?

* If you do not want to fill out the form, you can write a letter to be read out at the meeting. You can also say what you want to at the meeting or ask someone to say what you want for you. It is completely up to you!

WHAT ELSE DO I NEED TO KNOW?

- * If you want help, you can choose someone to help you fill out your form e.g. Social Worker or your Social Care Worker. You can talk to your Social Worker about who you would like to help you fill out the form.
- The information you put on your form will be heard by the people at your 'review' meeting. Your Social Worker will talk to you about who will be at the meeting.
- * It is ok to be honest about how you are feeling. You do not need to worry about upsetting anyone else.

You can read more about Care Plans and Child in Care Review meetings on pages 6 – 8 of the Guide In your Information Pack



WHAT THINGS DO YOU LIKE E.G. YOUR FAVOURITE FOOD OR TV PROGRAMME?	
WHAT DO YOU LIKE TO DO IN YOUR SPARE TIME E.G. A HOBBY?	
WHAT ARE YOU GOOD AT?	
WHAT ARE TOO GOOD AT:	
IS THERE ANYTHING YOU NEED HELP WITH TO KEEP IN TOUCH WITH YOUR CULTURE OR RE	FLIGION?
TO THERE AND TOO NEED HEEF WITH TO REEF IN TOOOH WITH TOOK COLIONE ON NO	LLIOIOIV:



YOUR HOME

WHAT DO YOU LIKE ABOUT YOUR HOME?
IS THERE ANYTHING THAT YOU DO NOT LIKE ABOUT YOUR HOME?
IS THERE ANYTHING THAT YOU WOULD LIKE TO CHANGE ABOUT YOUR HOME?
YOUR FAMILY
HOW OFTEN DO YOU GET TO SEE YOUR BIRTH FAMILY?
ARE THERE PEOPLE IN YOUR FAMILY THAT YOU WOULD LIKE TO SEE MORE/LESS OF?
DO YOU GET TO SEE EVERYONE YOU WANT TO SEE?
ARE YOU HAPPY WITH THE PLACE WHERE YOU MEET THEM OR WOULD YOU LIKE TO CHANGE IT?
IS THERE ANYTHING ELSE YOU WANT TO SAY ABOUT YOUR FAMILY?

YOUR FAMILY OUTSIDE IRELAND (IF YOU HAVE FAMILY OUTSIDE IRELAND)

HOW OFTEN DO YOU GET TO TALK TO YOUR FAMILY OUTSIDE IRELAND?	
DO YOU GET TO TALK TO EVERYONE YOU WANT TO TALK TO?	
IS THERE ANYTHING ELSE YOU WANT TO SAY ABOUT YOUR FAMILY OUTSIDE IRELAND?	
ME and MY CARE PLAN REVIEW FORM **	

YOUR FRIENDS



WHO ARE YOUR FRIENDS?	*
DO YOU GET ON WITH ALL OF YOUR FRIENDS?	
CAN YOU HAVE FRIENDS OVER AT YOUR HOME?	
CAN YOU GO ON SLEEPOVERS/HAVE FRIENDS SLEEP OVER AT YOUR HOME?	
CAN 100 00 ON SEEL OVERS, HAVE I KIENDO SEEL OVER AT 100K HOME.	
YOUR EDUCATION	
LIOW ARE VOLLCETTING ON IN COLLOCA OR TRAINING OR ON VOLID COLLDES	
HOW ARE YOU GETTING ON IN SCHOOL OR TRAINING OR ON YOUR COURSE?	
WHAT ARE YOUR FAVOURITE SUBJECTS/THINGS ON THE COURSE?	
DO YOU GET ENOUGH HELP WITH YOUR HOMEWORK OR DO YOU NEED MORE HELP	?
IS THERE ANYTHING YOU NEED HELP WITH IN SCHOOL/TRAINING/YOUR COURSE?	
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LOOKING AFTER YOURSELF & KEEPING SAFE IS THERE ANYTHING THAT YOU WANT TO SAY ABOUT YOUR HEALTH E.G. EXERCISE, VISITS TO THE DOCTOR, DENTIST, EYE DOCTOR? IS THERE ANYWHERE YOU DON'T FEEL SAFE OR FEEL BULLIED? WHO DO YOU TALK TO IF YOU HAVE A PROBLEM OR ARE FEELING UPSET? IS THERE ANYTHING WORRYING YOU THAT YOU WOULD LIKE TO TALK ABOUT? YOUR SOCIAL WORKER WHAT IS YOUR SOCIAL WORKER'S NAME? CAN YOU CONTACT YOUR SOCIAL WORKER EASILY? DO YOU FEEL LISTENED TO AND SUPPORTED BY YOUR SOCIAL WORKER? IS THERE ANYTHING YOU WOULD LIKE YOUR SOCIAL WORKER TO HELP YOU WITH? YOUR FUTURE WHAT WOULD YOU LIKE TO HAPPEN IN THE FUTURE? DO YOU NEED ANY HELP WITH YOUR FUTURE PLANS? WHO WOULD YOU LIKE TO HELP YOU?

YOUR SAY AT YOUR CHILD IN CARE REVIEW MEETING

IF YES:
WHAT DO YOU WANT TO SAY AT YOUR CHILD IN CARE REVIEW MEETING?
WHAT DO TOO WANT TO SAT AT TOOK CHIED IN CARE REVIEW MEETING:
DO VOLLNIEED ANIVELEE DAT THE CHILD IN CARE DEVIEW MEETING E.C. COMEDODY (VOLLCHOOSE)
DO YOU NEED ANY HELP AT THE CHILD IN CARE REVIEW MEETING E.G. SOMEBODY (YOU CHOOSE) TO SAY SOMETHING FOR YOU?
IS THERE ANYTHING ELSE YOU NEED HELP WITH TO GET READY FOR YOUR CHILD IN CARE REVIEW
MEETING?
WHO WOULD YOU LIKE TO HELP YOU GET READY FOR YOUR CHILD IN CARE REVIEW MEETING?
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IS THERE ANYTHING ELSE THAT YOU WOULD LIKE PEOPLE AT THE REVIEW MEETING TO KNOW E.G. ABOUT YOUR HOME, SCHOOL, HOBBIES
ABOUT TOOK HOME, GOTTOOL, HOBBIES
YOUR SPACE
HUUN STRUE
IS THERE ANYTHING ELSE AT ALL THAT YOU WANT TO TALK ABOUT THAT WE HAVE NOT TALKED
ABOUT?
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IS THERE ANYTHING YOU WANT TO TELL ME ABOUT YOURSELF THAT YOU THINK I SHOULD KNOW?
IS THERE ART THING TOO WART TO THE MIL ABOUT TOURSELF THAT TOO THINK I SHOULD KNOW!



ARE YOU HAPPY FOR PEOPLE AT THE REVIEW MEETING TO HEAR WHAT YOU HAVE WRITTEN DOWN ON THIS FORM? YES / NO

ON THIS FORM? YES / NO
IF THERE IS ANY PART OF THIS INFORMATION THAT YOU DO NOT WANT PEOPLE AT THE REVIEW TO HEAR, PLEASE TALK TO YOUR SOCIAL WORKER.
HAVE YOU SEEN YOUR CARE PLAN? YES / NO
WERE YOU INFORMED ABOUT THE DECISIONS MADE AT YOUR LAST REVIEW MEETING? YES / NO
HOW DO YOU WANT TO BE TOLD ABOUT ANY DECISIONS MADE AT YOUR 'CHILD IN CARE REVIEW' MEETING?
SIGNATURE: DATE:





