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Form
Handover Record – Care Team Leader/Clinician
 Residential Care and Transition Services

Handover details		
Program/position	Clinician	Senior Residential Care Worker (SRCW)
Completed by	Completed for	Date

Program					
Item	Placement	Details	Action	By who	By when
Planner	Requirements				
	Concerns				
	Routine				
	Social/recreational/activity sampling				
	Clothing allowance				
Neighbours (concerns, parking, positive)					
Housekeeping/env ironment					

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Program					
Item	Placement	Details	Action	By who	By when
Team culture (positive, H2H, H2S, toxic, Sanctuary needs)					
General program update					

Young person <i>(copy and paste this table for each young person in placement)</i>					
Item	Young Person	Details	Action <i>Next appointment, visit frequency, reason for contact, support reason, issues, concerns, etc.</i>	By who	By when
Name	Young Persons' Name				
D.O.B.	DOB/Age				
Alerts					

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Young person (copy and paste this table for each young person in placement)					
Item	Young Person	Details	Action Next appointment, visit frequency, reason for contact, support reason, issues, concerns, etc.	By who	By when
Key contacts/per young person	Child Safety (CSO, TL, Service Centre, Other, CSO Visits frequency, day, and time)	Child Safety Service Centre -	CSO visits:		
		Child Safety Officer -			
		Child Safety Team Leader -			
		Child Safety Senior Team Leader -			
		Child Safety Other? -			
	Community Visitor CV Visits frequency, day, and time)		Visits:		
	NDIS (Package and Support Coordinator)	NDIS Support Coordinator -			
Doctor/ Paediatrician (Contact details, next appointment)	GP/Medical Centre -	Next Appointment:			
	Paediatrician -				
	Other				

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Item	Young Person	Details	Action <i>Next appointment, visit frequency, reason for contact, support reason, issues, concerns, etc.</i>	By who	By when
	OT/Speech/ Therapy <i>(Contact details, next appointment, frequency, NDIS, or external provider)</i>	Occupational Therapist	Appointments:		
		Speech	Appointments:		
		Therapy	Appointments:		
		Behaviour Support Practitioner	Appointments:		
	Other Medical Contacts		Reason for contact:		
	School/Education <i>(Contact Person, ESP, School Issues, etc)</i>	School Details - Teacher - Guidance Officer - Deputy Principal/Principal - Start/Drop off: Finish/Pick Up:			
EVSP/Tutoring <i>(Contact Person, Frequency, Time/Day, Next Appointment)</i>					
Family <i>(Contact Arrangements, Frequency, Supervised or Unsupervised, Method of contact, How YP feels about contact, etc)</i>					

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Item	Young Person	Details	Action <i>Next appointment, visit frequency, reason for contact, support reason, issues, concerns, etc.</i>	By who	By when
	Other External Contacts				
	Stakeholder Meeting (Who arranges, Frequency, Attendees)				
IR Contacts (Incident report contacts)					
Staff – SRCW/AC only (Including staff issues)	SRCW: Area Coordinator:				
Behaviour Management / Issues of Concern					
Current incentives in the house	GBI's				

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Item	Young Person	Details	Action <i>Next appointment, visit frequency, reason for contact, support reason, issues, concerns, etc.</i>	By who	By when
Current Phase					
Psychoeducation and Capacity Building (These are linked to your CTARS Goals Goals)	Or Print your CTARS Goals and attach				
YPs Interests, Views, Wishes (Discussion with YP of new sport to try / savings goal / favourite activities etc)					

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Monitoring					
Monthly reports	TAR (6 monthly) DAR (monthly) GOALS (fortnightly/monthly)				
Important upcoming dates (not already listed)					

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Handover tasks					
Item	Handover Job List	Details	Action	By who	By when
CTARS Updated	Contacts	TL, CSO, CV, Respite, School Contact Person, Family, NDIS Supports Do not contact list			
	Medication	Check medication chart to ensure there are no medications that run out and if there are, have a plan in place for its renewal and entry on CTARS			
	Behaviour Support Plan /Safety Plan	Confirm most recent is uploaded to CTARS <i>Documents/Assessment and Intervention/Plans</i>			
	ATC	ATC are on file or notification to coverage about when the documentation will expire			
	Incident Reporting List	Ensure all email recipients are listed in CTARS for incidents report & are current. <i>Clients/Edit/External Client Links</i>			
	Medicare	Details both printed in the house (Yellow) folder and saved onto CTARS			
Notification to Stakeholders	External	Email sent week prior to leave to relevant stakeholders informing of leave, coverage and if there is anything needing to be followed up prior to the leave commencing.			
	Internal	Connect with teams and update on contact person for leave period			
Planners	Duration of Leave	To be completed for the duration of leave if applicable/possible			
	Paid Activities	Paid Activities for duration purchased in advance			

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Item	Handover Job List	Details	Action	By who	By when
	Family Contact	Family contact arrangements made in advance where possible/practicable			
	Share Outlook Planners	Share Outlook Planners for Young Person/s with Float/ Region CTL's to support/edit last minute changes			
	Handover Discussion with AC	Handover discussion with AC about support required for Program and staffing during absence			
	Handover Discussion with SRCW	Handover discussion with SRCWs about supporting the team to update the planner when new appointments/events pop up			
	Uploaded to CTARS	Planners uploaded to CTARS <i>Documents/Client Visual Planning/Activity Planners</i>			
Communication	Out-Of-Office Email	Set up and activate Out-of-Office Email notification for duration of leave with contact listed			
	Phone Transfer	With SPM decide on number (specific CTL or Admin) for work phone to be diverted to			
	Change Message on phone	If applicable, change message on voicemail regarding contact arrangements while you are on leave			
Misc. Admin	Team Meeting	Team Meeting coverage to be organised and agenda to be discussed/topic points submitted			
	CS Documentation	Document requests have been sent for the month to Child Safety (Case plans, placement agreements etc.)			

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