

reached
run and feed



What are they and where might they be?

Being a chef

Have you had any experience with the following:

	Have you done this before?	How confident are you with this?	Would you like some support with this?
	YES/NO	VERY/OK/NOT	YES/NO
Writing your CV	yes	OK	Yes
Looking for a job or training	yes	OK	Yes
Filling in an application form	yes	yes	No
Preparing for an interview	yes	yes	No
Attending an interview	yes	yes	No

Is your time-keeping good?

Yes ☒

No ☐

Sometimes ☐

Do you have suitable clothing for work / interviews?

Yes ☐

No ☒

What transport do you have nearby, for when you travel to work/college etc?

megarider and on a bus.

Are there any areas that you feel you need some extra support with?

Yes ☒

No ☐

Who could you get support from?

I DON'T KNOW

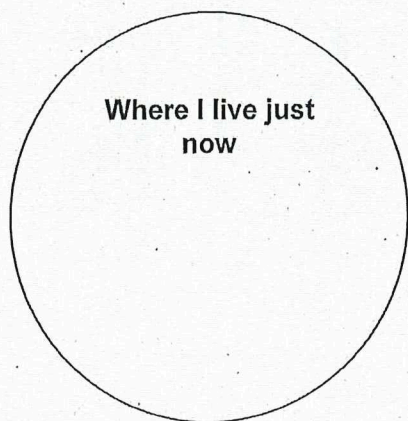


my pathway views - where I live

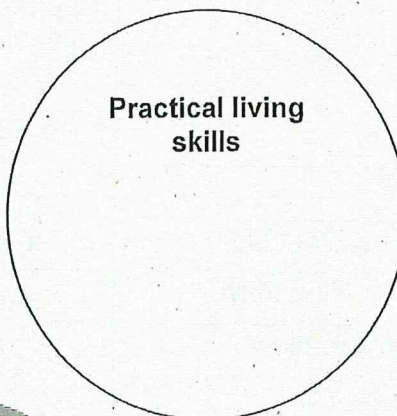
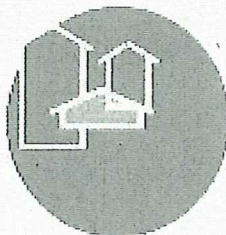
Name:

Think about some of these things for where you live now and any future plans you may have ...

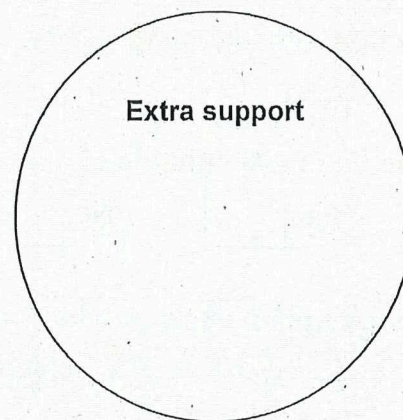
- What do you know about? What is going well?
- What are you concerned about?
- Is there any kind of support you may need?



Where I live just
now



Practical living
skills



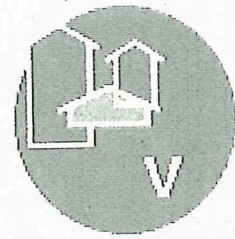
Extra support



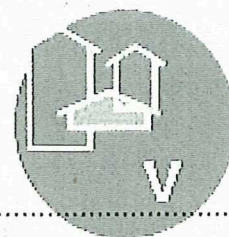
Accommodation
options for the
future

IF YOU WOULD LIKE TO EXPLORE SOME THINGS FURTHER, YOU CAN
CONTINUE WITH THE REST OF THIS SECTION.

my pathway views where I live



Any other comments



Name:

This section will help you to look at where you live just now and where you may want to live in the future. You will look at the steps it will take to get there. If you are still living in care, then starting to think ahead does not mean that you have to move on immediately.

Where you live is more than just a roof over your head - it's also about things like planning any moves, looking after yourself, getting the support you need, safety and getting on with your neighbours.

Where I live just now

How do you feel about where you are currently living?

(circle the words)

Happy Safe

Ready to Leave

Fed Up

OK

Settled

Worried

Lonely

Cared For

Unsafe

Want to Stay

Any other words? want my own house

What do you like about where you live? Some pals

What would you like to change or improve? me getting my own b&t

How long would you like to stay where you currently are? to the end of January 08.

Will you be able to do that?

Yes

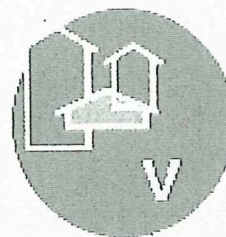
☒

No

☐

Don't Know

☐



Practical living skills

If you are starting to think about where you may want to live in the future, it is also important to think about the skills and knowledge you will need to live more independently.

How would you rate your skills and knowledge in the following areas?

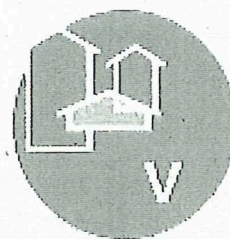
	1 = none 4 = expert			
Cooking	1	2	3	4
Budgeting	1	2	3	4
Paying Bills	1	2	3	4
Keeping Safe	1	2	3	4
DIY	1	2	3	4
Basic First Aid	1	2	3	4
Furnishing Your Home	1	2	3	4
Cleaning and tidying	1	2	3	4
Washing and ironing clothes	1	2	3	4
Shopping for and storing food	1	2	3	4
Sewing	1	2	3	4
Getting a TV Licence	1	2	3	4
Sorting out Council Tax	1	2	3	4
Accessing local Leisure Facilities	1	2	3	4
Knowing about other local amenities (e.g. Library, Police Station etc.)	1	2	3	4
Travelling	1	2	3	4
Any Others?				

Which areas would you like to learn/know more about?

None

Who can help you with this? And how?

Anne (my THROUGH WORKER)



Accommodation options for the future

If you are starting to think about moving on to somewhere else, what sort of accommodation would you be considering...

...in the near future? *getting my own house or a wee furnished flat.*

...in the longer-term? *getting my own house or a wee furnished flat.*

Ideally, what sort of things would you prefer for where you may live in the future?
(tick the boxes)

Location:

- | | |
|-------------------------------------|----------------------|
| ☒ | Near friends |
| ☒ | Near family |
| ☐ | Near carers |
| ☐ | Near school |
| ☐ | Good transport links |

- | | |
|-------------------------------------|------------------------|
| ☒ | Near college |
| ☐ | Near work/training |
| ☒ | Near shops |
| ☐ | Near leisure amenities |
| ☐ | |

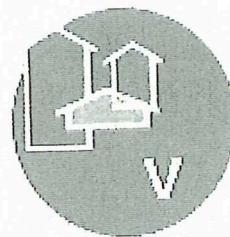
Size of place:

- | | |
|-------------------------------------|-----------|
| ☐ | Bedroom |
| ☐ | Bedsit |
| ☐ | 1 bedroom |
| ☒ | 2 bedroom |
| ☐ | 3 bedroom |

Type of Accommodation:

- | | |
|-------------------------------------|-------------------------------|
| ☒ | Supported Accommodation |
| ☒ | Housing Association |
| ☒ | Own Tenancy |
| ☒ | Joint/Shared Tenancy |
| ☒ | Council Property |
| ☒ | Private Rented |
| ☐ | Family/Friends/Partners Place |
| ☐ | Supported lodgings |

Continued ->



Who you're living with:

- | | |
|-------------------------------------|-----------------|
| ☒ | On your own |
| ☐ | With partner |
| ☐ | With children |
| ☐ | With family |
| ☒ | With friend(s) |
| ☐ | With a flatmate |

Anything Else:

Which area would you like to be living in?

Kiliwing OR Darly.

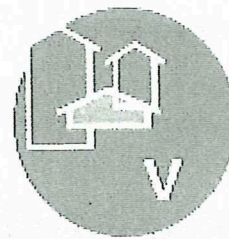
Why?

Kiliwing = near collage and near my friends and some family members.

Darly = near Rathbone and Near friend and Boyfriend.

What are you most looking forward to about any future accommodation?

I get out this shoppit unit. eat and I can watch tv and eat when I like to.



Are there any things that worry you about future accommodation?

Being homeless.

Which organisations have you had contact with about accommodation?

Please give details, if any. (e.g. meetings, application, assessment, etc.)

with Anne ~~my through-~~
care worker.

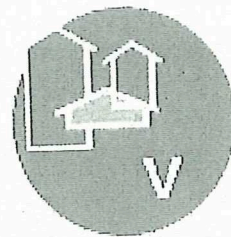
Would you like to speak to anyone else about your accommodation?

Yes ☒

No ☐

Don't Know ☐

If yes, who? The council or some-one
how gets me a house.



Are you aware of things that could pose difficulties for you in future accommodation? (e.g. unwanted visitors, paying bills, accessibility etc.)

Yes, I've been told a hundred
times before and I think I'm
ready to move on.

Extra support

Do you think you will need any extra support with your accommodation?

Yes

☒

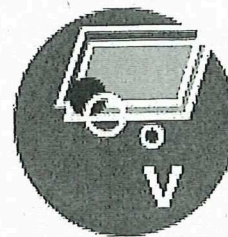
No

☐

If yes, what sort of support will this be?

to get furnished etc.
In bot the extra support is
only for a couple of weeks.

For more information on leaving home and housing go to: www.leavinghome.info



my pathway views - money

Name: Georgina McMillan

Think about your money situation.

- What are you happy with?
- What are you concerned about?
- Is there any kind of support you may need?

Where you get
your money from

What you spend
your money on

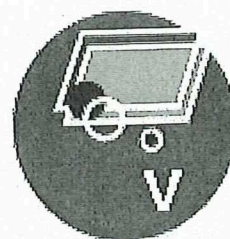
Budgeting skills

Bank accounts,
savings & loans

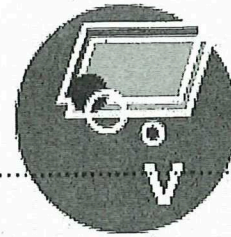
Future financial
support

IF YOU WOULD LIKE TO EXPLORE SOME THINGS FURTHER, YOU CAN
CONTINUE WITH THE REST OF THIS SECTION.

my pathway views - money



Any other comments



Name:

We all need money in some shape or form! This section is about your sources of income, seeing what financial support you may be entitled to and managing any money you may have.

Depending on your current situation you may receive money from different sources. Some of the questions in this section may not be relevant just now but you may want to revisit this when your circumstances change.

How would you describe your money situation at the moment?

(please circle the words)

I get by OK

I have to borrow money a lot

People help me out

I never have enough

I worry about money

I manage to save a bit

I watch how much I spend

Always skint!

I always have enough

I lend money to friends

Is there anything else you would like to say about your money situation at present? NO .

Where you get your money from

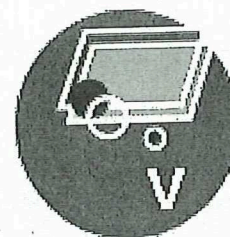
Where do you get your money from at the moment?

HOW MUCH per WEEK or per MONTH? (circle one)

Pocket Money	£9.75
Training Allowance	—
Job / Wage	—
Benefits	—
Loan	—
Family	£20.00
Friends	£10.00
Local Authority	—
Other collage =	£37.95
TOTAL =	£67.70

What benefits or financial support do you currently receive?

What you spend your money on



What do you currently spend:

HOW MUCH *per WEEK* or *per MONTH*? (circle one)

Complete the amounts below:

AMOUNT

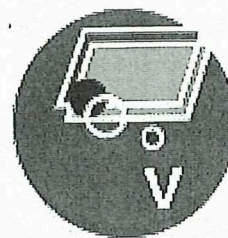
	Rent
	Gas/Electricity
	Telephone/Mobile
	Clothes
	Travelling
	Food
	Entertainment/Leisure
	TV Licence
	Council Tax
	Toiletries
	Repaying Loans
	Work/College/School Equipment
	Laundry
	Household items
	Cigarettes
	Alcohol
	Holidays
	Hobbies
	Child Care
	Credit Cards
	Savings
	Other
	= TOTAL

At the end of the week/month do you have?
(circle one)

No money left

A bit of money left

Lots of money left



Bank accounts, savings and loans

Do you have a bank, building society or post office account?

Yes ☒ No ☐

Do you ever save money in a savings account?

Yes ☒ No ☐

Do you want to say how much you have in savings? £

20.00

Are you saving for anything in particular? NO

Do you need any more information or help to set up a current or savings account?

Yes ☐ No ☒

If yes, who could help you with this?

What kind of outstanding loans, debts or credit cards do you have to pay?

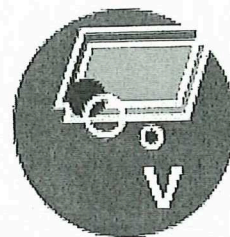
NONE

Is there any other money you have to pay out at present?

Yes ☐ No ☒

If yes, give details.

NOT AT THE MOMENT!



Future financial support

Young people who have been looked after by a local authority may be entitled to certain kinds of financial support.

Has someone explained that you may be entitled to financial support from your Local Authority?

Yes

☒

No

☐

Have you already had any financial support from your Local Authority?
(e.g. a leaving care grant or other money)

Yes

☐

No

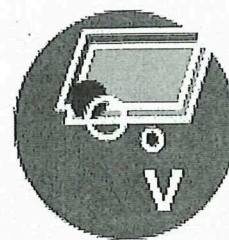
☒

What kind of financial help do you think you may need from your Local Authority for aftercare support...

...during the next 12 months?

To get out ~~from~~ this unit
is the first thing.
Second thing is to get me a house.

...in the future?



Who will help you look at on going financial support and money issues?

Has someone checked to see if you are entitled to benefits, to see if you are receiving all benefits that you may be entitled to?

Yes

☐

No

☐

Don't Know

☒

I know I am not entitled to claim Benefits

☐

Do you think you may be entitled to other money?
(e.g. Criminal Injuries compensation, Inheritance, etc.)

Yes

☐

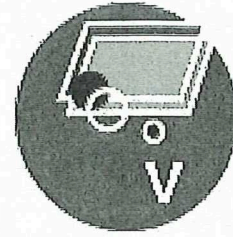
No

☐

Don't Know

☒

Would you like help to find out and who from?



Budgeting skills

To live more independently, it is important to know how to manage your money, to plan how to spend your money wisely, to make sure bills are paid and maybe save up for things like holidays etc.

How do you feel you can manage money?

(please circle one)

Very well

Quite well

OK

Not very well

Not at all

What do you do if you have no money?

i speak to my brother.

Would you like help with learning how to budget your money?

Yes

☐

No

☒

Have you any other comments, questions or concerns about money and financial support?

I've been budgeting my money for years now.

my pathway views - rights & legal issues

Name:

Georgina McMillan

Think about any rights and legal issues that affect you.

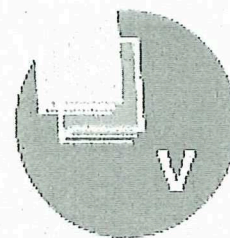
- What do you know about? Is anything affecting you just now?
- What are you concerned about?
- Is there any kind of support you may need?

Knowing my rights

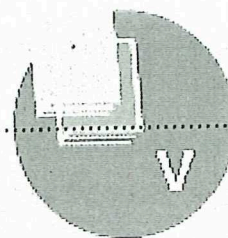
Legal proceedings

Crime

IF YOU WOULD LIKE TO EXPLORE SOME THINGS FURTHER, YOU CAN
CONTINUE WITH THE REST OF THIS SECTION.



Any other comments



Name:

We can come across rights and legal issues in many aspects of life. Sometimes its about knowing what we are legally entitled or have a right to.

Whether you are the victim of crime or have committed offences yourself, it is also important to be aware of your legal position and to have the appropriate support if you have to go to court.

But it's not just criminal matters where the law is relevant - if you feel you have been treated unfairly on any matter there may be a legal solution. This section will help you to think about your current situation and provide some information on rights and legal matters.

Knowing my rights

Have you been given any information about what support you are legally entitled to?

Yes ☒

No ☐

Give details:

~~Not at all~~
I all ready now

Would you like to know more about your legal rights?

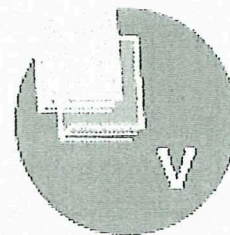
Yes ☐

No ☒

Is there anything in particular that you want to know about?

WHO can help you find out and HOW?

(eg Citizens Advice Bureau, Welfare Benefits advisers, Who Cares? Scotland, etc)



Legal proceedings

Do you have your own solicitor?

Yes ☐ No, I don't need one ☐ No, but I would like one ☐

Are you currently involved in any court cases?

Yes ☒ No ☐

If so, what is your involvement, and what stage is it at?

witness

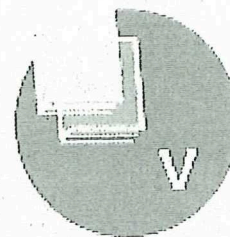
What kind of support, if any, would you like in relation to current legal proceedings?

NONE

Are you currently subject to any order from the court or children's hearing?

☒ Supervision requirement	☐ Community Service order
☐ Probation order	☐ Fine
☐ Compensation order	☐ Custody
☐ Other	☐ Don't know

If so, what are the requirements of this order? Are there any other workers involved in this?



Crime

Have you been stopped by the police or charged with an offence within the last six months?

Yes ☐

No ☒

Do you need any support with this? **NO**

Have any crimes been committed against you within the past few years?

Yes ☐

No ☒

If yes, has this been dealt with? Would you like any support in this? **NO**

What kind of additional support, if any, would you like in relation to your rights or legal matters?

For further information about issues raised in this section:

Visit www.adviceguide.org.uk or the 'law' section on www.youngscot.org

Contact the Scottish Child Law Centre (if you are under 18 years of age):

Telephone: **0800 3288970**

Email: enquiries@sclc.org.uk

pathway assessment summary

Name Georgina McMillan

Pathway Assessment	Date completed/ updated	Consent for Assessment information to be shared with ...	Any comments
lifestyle 			
family and friends 			
health and well-being 			
learning and work 			
where I live 			
money 			
rights & legal issues 			

pathway assessment summary (cont.)

Consent

There may be times when it is helpful to share information in the Pathway Assessment sections with other people or agencies. The reasons for passing on the information are:

- to help make sure that you receive the support from particular services
- so that you don't have to answer the same questions again in a different setting

Apart from the people or agencies listed on the previous page, the information in the Pathway Plans will not be passed on to anyone else without your consent. The exception will be if there are concerns about your safety or the safety of others. Efforts will be made to contact you to seek or update your consent.

Has Consent and Information Sharing been explained and discussed with the young person?

Yes ☐

No ☒

Agreed by Georgina McMillan (young person)

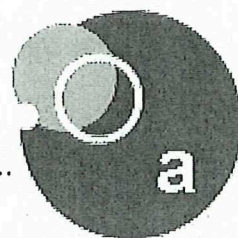
Date

and

on behalf of (responsible authority)

Date

pathway assessment for: lifestyle



Name:

Has 'My Pathway Views: Lifestyle' been completed?

Yes

☐

No

☐

Have the views of anyone else (e.g. carer, support worker or other relevant person) contributed to this assessment?

Yes

☐

No

☐

If yes, please give details:

How you're feeling - are there any concerns about the way you feel?

Activities - how do you spend your time? What are your leisure interests and hobbies? Are you getting a chance to do everything you want to?

Risks and safety - are you aware of personal safety? Are there particular situations or times when you are more at risk?

What's important to me - who or what is important to the way you live your life?

Identity - how do you see yourself? (including religious, cultural and sexual identity) Is any support needed?

The needs identified by the young person are...

The overall assessment of need is...

If necessary, please continue on another sheet ...

pathway assessment for: lifestyle

Are there any comments or differences in opinion?

Consent

There may be times when it is helpful to share information in this section with other people or agencies. The reasons for passing on the information are:

- to help make sure that you receive the support from particular services
- so that you don't have to answer the same questions again in a different setting

Please ensure that all agreements for Information Sharing and Consent details are recorded on the Pathway Assessment summary page.

This Pathway Assessment has been completed by:

.....

Date

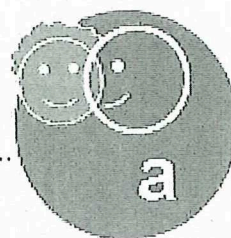
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway assessment for: family & friends



Name:

Has 'My Pathway Views: Family & Friends' been completed?

Yes ☐

No ☐

Have the views of anyone else (e.g. carer, support worker or other relevant person) contributed to this assessment?

Yes ☐

No ☐

If yes, please give details:

Family Relationships and Contact - what kind of on-going support is needed? What level of family contact is there?

Caring responsibilities - are there any needs arising from responsibilities to care for others?

Your own children - are there any needs in relation to children?

Your Life story - is any support required for life story work?

Friends and other important people - who is important to you? What is contact like with your peers?

The needs identified by the young person are...

The overall assessment of need is...

If necessary, please continue on another sheet ...

pathway assessment for: family & friends

Are there any comments or differences in opinion?

Consent

There may be times when it is helpful to share information in this section with other people or agencies. The reasons for passing on the information are:

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This Pathway Assessment has been completed by:

.....

Date

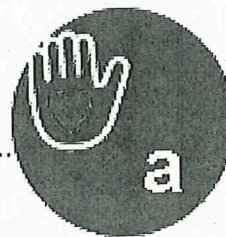
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway assessment for: health & well-being



Name:

Has 'My Pathway Views: Health & well-being' been completed?

Yes ☐ No ☐

Have the views of anyone else (e.g. carer, support worker or other relevant person) contributed to this assessment?

Yes ☐ No ☐

If yes, please give details:

General health - do you have any on-going health issues or concerns?

Health services - is there contact with all the health professionals there should be?

Medical conditions or disabilities? - are there any disabilities that create specific needs? Any medication requirements?

Healthy lifestyle - are there any needs in relation to diet, exercise, substance use, sexual health?

Emotional well-being and mental health - is there adequate support? How do you cope with stressful situations.

The needs identified by the young person are...

The overall assessment of need is...

If necessary, please continue on another sheet ...

pathway assessment for: health & well-being

Are there any comments or differences in opinion?

Consent

There may be times when it is helpful to share information in this section with other people or agencies. The reasons for passing on the information are:

- to help make sure that you receive the support from particular services
- so that you don't have to answer the same questions again in a different setting

Please ensure that all agreements for Information Sharing and Consent details are recorded on the Pathway Assessment summary page.

This Pathway Assessment has been completed by:

.....

Date

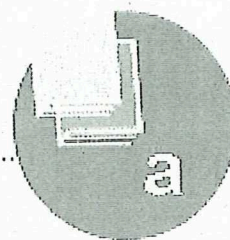
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway assessment for: learning & work



Name:

Has 'My Pathway Views: Learning & work' been completed?

Yes

☐

No

☐

Have the views of anyone else (e.g. carer, support worker or other relevant person) contributed to this assessment?

Yes

☐

No

☐

If yes, please give details:

Future plans and ideas - what would like to do in the future? What needs and wishes do you have about studying, training or work?

School - what has your experience of school been like? Is any support required?

Skills and experience - what strengths and abilities do you have? Any gaps?

Studying - what qualifications and certificates have been gained? What else would you like to pursue? What support is needed?

Training and work - what experience have you had? Are there any needs for support to make progress?

The needs identified by the young person are...

The overall assessment of need is...

If necessary, please continue on another sheet ...

pathway assessment for: learning & work

Are there any comments or differences in opinion?

Consent

There may be times when it is helpful to share information in this section with other people or agencies. The reasons for passing on the information are:

- to help make sure that you receive the support from particular services
- so that you don't have to answer the same questions again in a different setting

Please ensure that all agreements for Information Sharing and Consent details are recorded on the Pathway Assessment summary page.

This Pathway Assessment has been completed by:

.....

Date

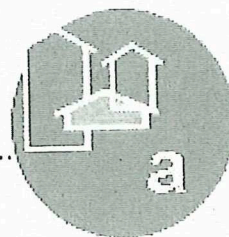
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway assessment for: where I live



Name:

Has 'My Pathway Views: Where I Live' been completed?

Yes ☐

No ☐

Have the views of anyone else (e.g. carer, support worker or other relevant person) contributed to this assessment?

Yes ☐

No ☐

If yes, please give details:

Where I live just now - what needs are there where you are currently living?

Practical living skills - are there any gaps in every day living skills? Are you aware of what you need to know?

Accommodation options for the future - where would you like to live? What kind of accommodation is most suitable? Who else is helping with accommodation needs?

Extra support - are there any difficulties anticipated? Will extra support be required?

The needs identified by the young person are...

The overall assessment of need is...

If necessary, please continue on another sheet ...

pathway assessment for: *where I live*

Are there any comments or differences in opinion?

Consent

There may be times when it is helpful to share information in this section with other people or agencies. The reasons for passing on the information are:

- to help make sure that you receive the support from particular services
- so that you don't have to answer the same questions again in a different setting

Please ensure that all agreements for Information Sharing and Consent details are recorded on the Pathway Assessment summary page.

This Pathway Assessment has been completed by:

.....

Date

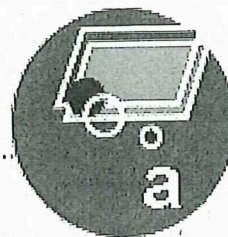
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway assessment for: money



Name:

Has 'My Pathway Views: Money' been completed?

Yes ☐

No ☐

Have the views of anyone else (e.g. carer, support worker or other relevant person) contributed to this assessment?

Yes ☐

No ☐

If yes, please give details:

Where you get your money from - what are your current sources of money? Will this change?

What you spend your money on - what are your current out-goings? (leisure, family contact, clothing, bills, etc.) Is this OK?

Bank accounts, savings and loans - do you have a bank account? Do you save? Do you need any help with debt?

Future financial support - will there be additional support required in the future? What will be the entitlement to benefits and other monies?

Budgeting skills - is any help required with budgeting skills?

The needs identified by the young person are...

The overall assessment of need is...

If necessary, please continue on another sheet ...

pathway assessment for: money

Are there any comments or differences in opinion?

Consent

There may be times when it is helpful to share information in this section with other people or agencies. The reasons for passing on the information are:

- to help make sure that you receive the support from particular services
- so that you don't have to answer the same questions again in a different setting

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.....

Date

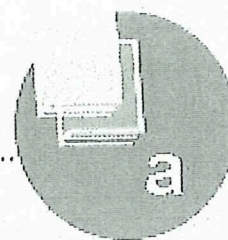
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway assessment for: rights & legal issues



Name:

Has 'My Pathway Views: Rights and Legal issues' been completed?

Yes ☐

No ☐

Have the views of anyone else (e.g. carer, support worker or other relevant person) contributed to this assessment?

Yes ☐

No ☐

If yes, please give details:

Knowing my rights - have you received information about legal entitlements to support? Do you need further advice on legal issues?

Legal proceedings - are you involved in any current proceedings? Are you subject to any legal orders?

Crime - are you needing any support in relation to crimes committed against you or by you?

The needs identified by the young person are...

The overall assessment of need is...

If necessary, please continue on another sheet ...

pathway assessment for: rights & legal issues

Are there any comments or differences in opinion?

Consent

There may be times when it is helpful to share information in this section with other people or agencies. The reasons for passing on the information are:

- to help make sure that you receive the support from particular services
- so that you don't have to answer the same questions again in a different setting

Please ensure that all agreements for Information Sharing and Consent details are recorded on the Pathway Assessment summary page.

This Pathway Assessment has been completed by:

.....

Date

and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway plan summary

Name

Pathway Plan	Date completed/ updated	Consent for Plan information to be shared with ...	Any comments
lifestyle 			
family and friends 			
health and well-being 			
learning and work 			
where I live 			
money 			
rights & legal issues 			

Consent

- to help make sure that you receive the support from particular services
- so that you don't have to answer the same questions again in a different setting

Has Consent and Information Sharing been explained and discussed with the young person?

Yes ☐

No ☐

Date

and

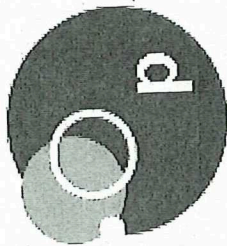
on behalf of (responsible authority)

Date

From the Pathway Plans, the following actions are identified as priorities:

[illegible]

pathway plan for: lifestyle



Name:

Has 'My Pathway Views: Lifestyle' been completed?

Has the Pathway Assessment been completed?

Yes	No
Yes	No

Yes	No
Yes	No

Based on the needs set out in the Pathway Assessment the following action is required:

If NO action is required just now, please tick this box , ☐ record any comments on the next page and complete the agreement

What action needs to be taken?	Who is responsible for this?	This will happen by...	Is there a contingency plan? (if so, give details)	Did it happen? When?	If yes, what was the outcome? Give details If no, why not? Did anything else happen?

pathway plan for: lifestyle

Please record any comments or differences in opinion about what action needs to be taken here:

Consent

There may be times when it is helpful to share information in this section with other people or agencies. The reasons for passing on the information are:

- to help make sure that you receive the support from particular services
- so that you don't have to answer the same questions again in a different setting

Please ensure that all agreements for Information Sharing and Consent details are recorded on the Pathway Plan summary page.

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..... Date

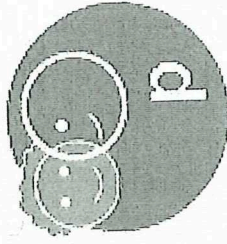
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway plan for: family & friends



Name:.....

Has 'My Pathway Views: Family & Friends' been completed?

No ☐ Yes ☐

Has the Pathway Assessment been completed?

No ☐ Yes ☐

Based on the needs set out in the Pathway Assessment the following action is required:

If NO action is required just now, please tick this box , ☐ record any comments on the next page and complete the agreement

What action needs to be taken?	Who is responsible for this?	This will happen by...	Is there a contingency plan? (if so, give details)	Did it happen? When?	If yes, what was the outcome? Give details If no, why not? Did anything else happen?

pathway plan for: family & friends

Please record any comments or differences in opinion about what action needs to be taken here:

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..... Date

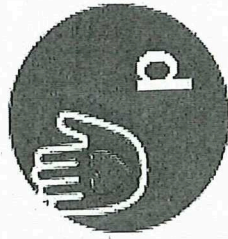
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway plan for: health & well-being



Name:.....

Has 'My Pathway Views: Health & Well-being' been completed? ☐ Yes ☐ No

Has the Pathway Assessment been completed? ☐ Yes ☐ No

Based on the needs set out in the Pathway Assessment the following action is required:

If NO action is required just now, please tick this box , ☐ record any comments on the next page and complete the agreement

What action needs to be taken?	Who is responsible for this?	This will happen by...	Is there a contingency plan? (if so, give details)	Did it happen? When?	If yes, what was the outcome? Give details If no, why not? Did anything else happen?

pathway plan for: health & well-being

Please record any comments or differences in opinion about what action needs to be taken here:

Consent

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..... Date

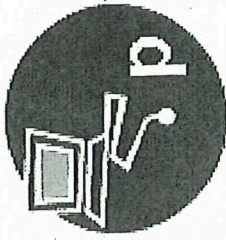
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway plan for: learning & work



Name:

Has 'My Pathway Views: Learning & Work' been completed?

Yes

☐

No

☐

Has the Pathway Assessment been completed?

Yes

☐

No

☐

Based on the needs set out in the Pathway Assessment the following action is required:

If NO action is required just now, please tick this box , ☐ record any comments on the next page and complete the agreement

What action needs to be taken?	Who is responsible for this?	This will happen by ...	Is there a contingency plan? (if so, give details)	Did it happen? When?	If yes, what was the outcome? Give details If no, why not? Did anything else happen?

pathway plan for: learning & work

Please record any comments or differences in opinion about what action needs to be taken here:

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..... Date

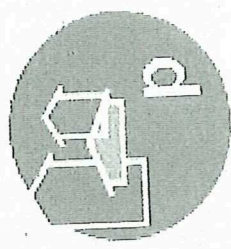
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway plan for: where I live



Name:.....

Has 'My Pathway Views: Where I Live' been completed?

Has the Pathway Assessment been completed?

Yes	No
Yes	No

Based on the needs set out in the Pathway Assessment the following action is required:

If NO action is required just now, please tick this box , ☐ record any comments on the next page and complete the agreement

What action needs to be taken?	Who is responsible for this?	This will happen by...	Is there a contingency plan? (if so, give details)	Did it happen? When?	If yes, what was the outcome? Give details If no, why not? Did anything else happen?

pathway plan for: where I live

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..... Date

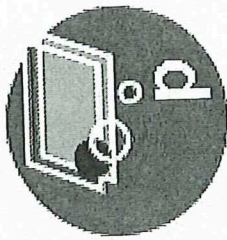
and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway plan for: money



Name:

Has 'My Pathway Views: Money' been completed?

☐	☐
--------------------------	--------------------------

No

Has the Pathway Assessment been completed?

☐	☐
--------------------------	--------------------------

Yes

Yes

Based on the needs set out in the Pathway Assessment the following action is required:

If NO action is required just now, please tick this box , ☐ record any comments on the next page and complete the agreement

What action needs to be taken?	Who is responsible for this?	This will happen by...	Is there a contingency plan? (if so, give details)	Did it happen? When?	If yes, what was the outcome? Give details If no, why not? Did anything else happen?

pathway plan for: money

Please record any comments or differences in opinion about what action needs to be taken here:

Consent

There may be times when it is helpful to share information in this section with other people or agencies. The reasons for passing on the information are:

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Please ensure that all agreements for Information Sharing and Consent details are recorded on the Pathway Plan summary page.

This Pathway Plan has been completed by:

..... Date

and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway plan for: rights & legal issues

Please record any comments or differences in opinion about what action needs to be taken here:

Consent

There may be times when it is helpful to share information in this section with other people or agencies. The reasons for passing on the information are:

- to help make sure that you receive the support from particular services
- so that you don't have to answer the same questions again in a different setting

Please ensure that all agreements for Information Sharing and Consent details are recorded on the Pathway Plan summary page.

This Pathway Plan has been completed by:

..... Date

and (young person)

and agreed by

on behalf of (responsible authority)

Date

pathway plan progress reviews

Name

The purpose of Progress Reviews is to see how things are going with the Pathway Plans. During the review you should go over the previous plan and think about what needs to happen next. You should also discuss whether the consent and information sharing agreements need to be updated. Any new details should be updated on the relevant summary page.

The first review will take place by: (date)

Date of review	Who attended?	Outcome of review: Is there a need to update the plan? Is any reassessment of needs required? Are new plans required? Are there any changes in circumstances that need to be recorded? Is there any unmet need?	The next review will take place by ...

Copies of any written notes from Progress Reviews should be kept in this section.

pathway plan progress reviews

Date of review	Who attended?	Outcome of review: Is there a need to update the plan? Is any reassessment of needs required? Are new plans required? Are there any changes in circumstances that need to be recorded? Is there any unmet need?	The next review will take place by ...

Hopes for the Future

Do you think there will be any difficulties or challenges in making those steps?

no

Who would you like to help with this?

my through care
worker

Before planning for the future, some people find it helpful to have an opportunity to talk about past experiences. (i.e. before or during the time you were looked after)

Would you like the opportunity to talk about anything like this?

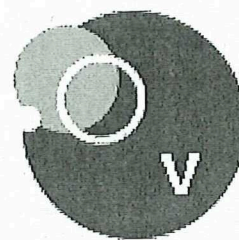
Yes

☐

No

☒

If 'yes', WHO would you feel most comfortable talking to?



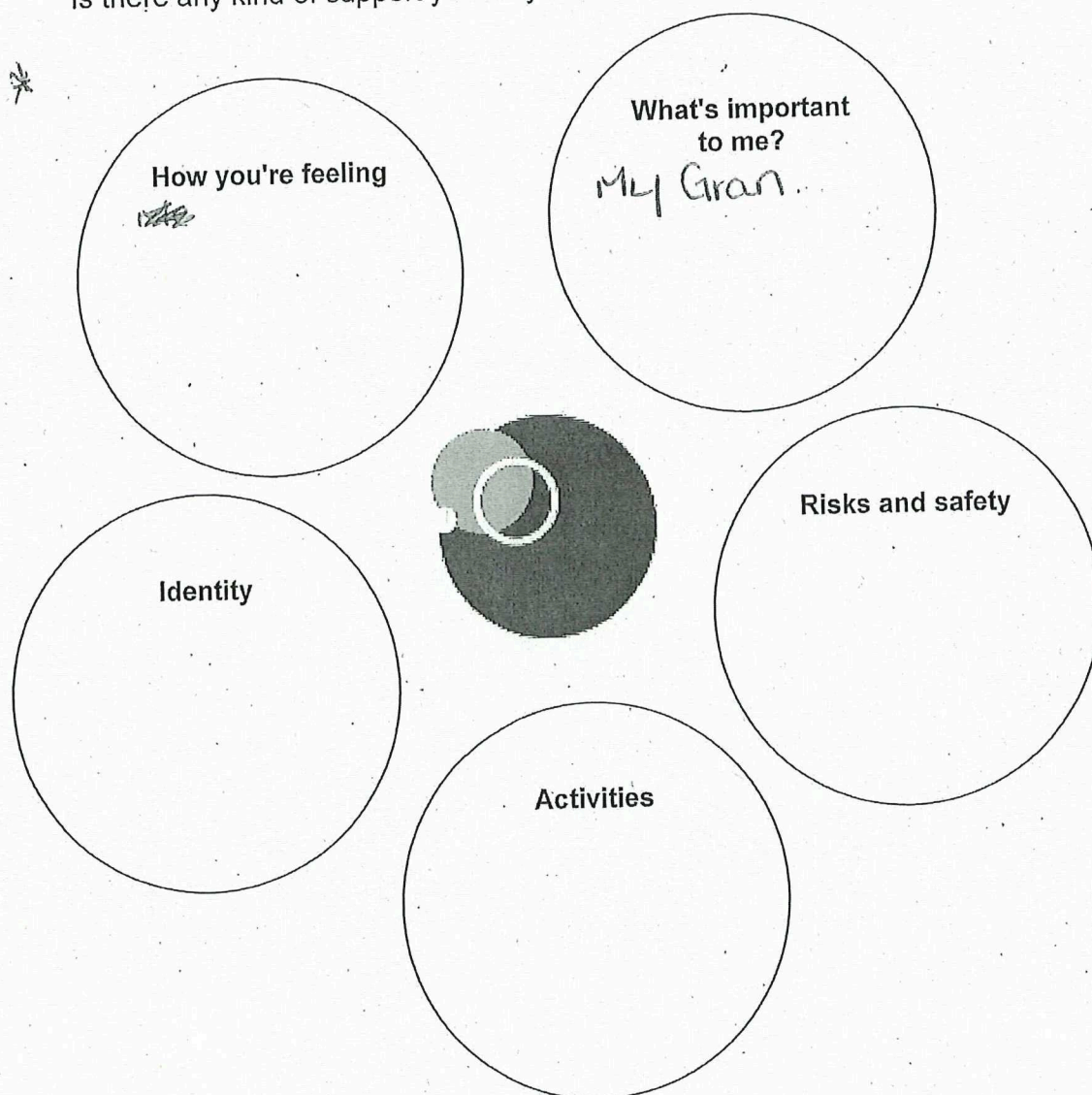
pathway views - lifestyle

Name: Georgina McMillan

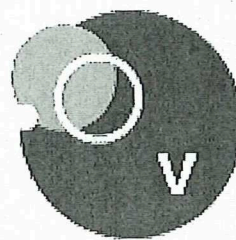
Think about how some of these things may influence your lifestyle.

- What do you feel good about?
- What are you concerned about?
- Is there any kind of support you may need?

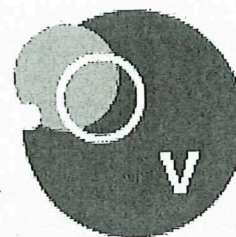
*



IF YOU WOULD LIKE TO EXPLORE SOME THINGS FURTHER, YOU CAN
CONTINUE WITH THE REST OF THIS SECTION.



Any other comments



Name: Georgina McMillan

In this section you can think about how you spend your time, your interests and what is important to you. It is also about looking at lifestyle choices, certain risks and keeping safe.

How you're feeling

What words best describe the way you feel today? (circle all that apply)

Good	Bad	Happy	Depressed	Excited	
Nervous	Hopeful	Tired	Scared	Stressed	Safe
Lonely	<u>OK</u>	Worried	Angry	Bored	

Are there any words of your own?

Oh, but a bit messed up because
i dont know what is happen with
my family. I miss my gran

Is this generally how you feel?

☐

Yes

☐

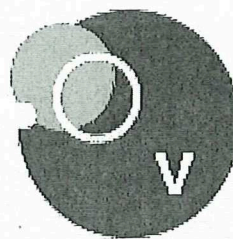
No

☒

Sometimes

Is there anything you want to say about how you feel today?

I Really miss my gran and more
family and friends. (Boyfriend)



Activities

* Before you go on to answer the questions in this section, it may be useful to look at how you spent your time over the past week.

	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Is this a typical week?

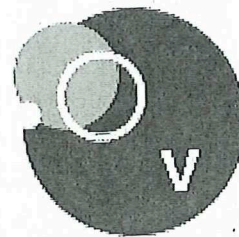
Yes

☐

No

☐

If no, what are the main differences?



In a normal week, what are the things you most look forward to?

going to the pitchers on a
friday night with friends.

What parts of the week do you not look forward to?

monday morning.

* What do you like to do during your leisure time?

writing letters to my mother.

Are there other things you would like to do?

Yes

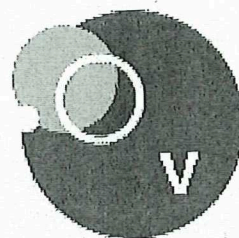
☒

No

☐

If yes, what else would you like to be doing?

Swimming, Singing + Dancing, working
with motors.



Risks and safety

Are there any times or situations when you feel unsafe?

Yes

☒

No

☐

If yes, what are those situations ...

when i run-away from the unit and other young people come with me.

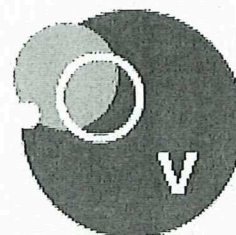
... and how do you deal with them?

i would phone the police or i would try and get back to the unit.

What could help you feel safer?

(e.g. talking to someone, particular support or practical things)

telling me my gran's safe and where she is, and if she's got plenty of food, ect. £



What's important to me?

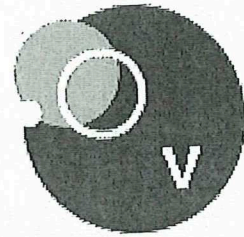
There is a wide range of people or factors that can be important to the way you live your life.

From the list below, what or who is important to you?

Please circle one number on a Scale of 1 - 4.

1 = Not important at all, up to 4 = Very important

	How important?			
	Not at all	Not really	Fairly	Very
PEOPLE				
Friends	1	2	(3)	4
Family	1	(2)	3	(4)
Boyfriend/ Girlfriend	1	(2)	3	(4)
Carers	1	(2)	3	4
Support worker(s)	1	(2)	3	4
* IDENTITY				
Cultural background	1	(2)	3	4
Religious beliefs	1	(2)	3	4
Sexuality	1	2	3	(4)
OPPORTUNITIES				
Your job	1	2	3	(4)
Your school or college	1	2	3	(4)
How much money you have	1	2	(3)	4
Availability of Transport	1	2	(3)	4
Where I Live	1	(2)	3	4
ACTIVITIES				
Having fun	1	2	3	(4)
If it's good for my health	1	2	3	(4)
Whether it's safe	1	2	(3)	4
Getting a Buzz	(1)	2	3	4
Others (Please state)				
	1	2	3	4
	1	2	3	4



Is there anything you would like to say about what is important in your life?

my GRAN and my brother craig and getting money to make shure they have food. ect.

Identity

How would you describe yourself? What makes you - YOU?

Charful (sometimes) friendly, helpful. ect.

Have you been supported and encouraged to explore your beliefs or religion?

Yes ☐

No ☒

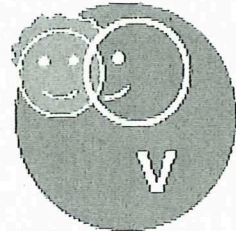
Have you thought about your cultural background?

Yes ☒

No ☐

Is there anything that you would like to talk about or get any support with in relation to your beliefs or your culture?

getting a house or a wee fonished apartment.

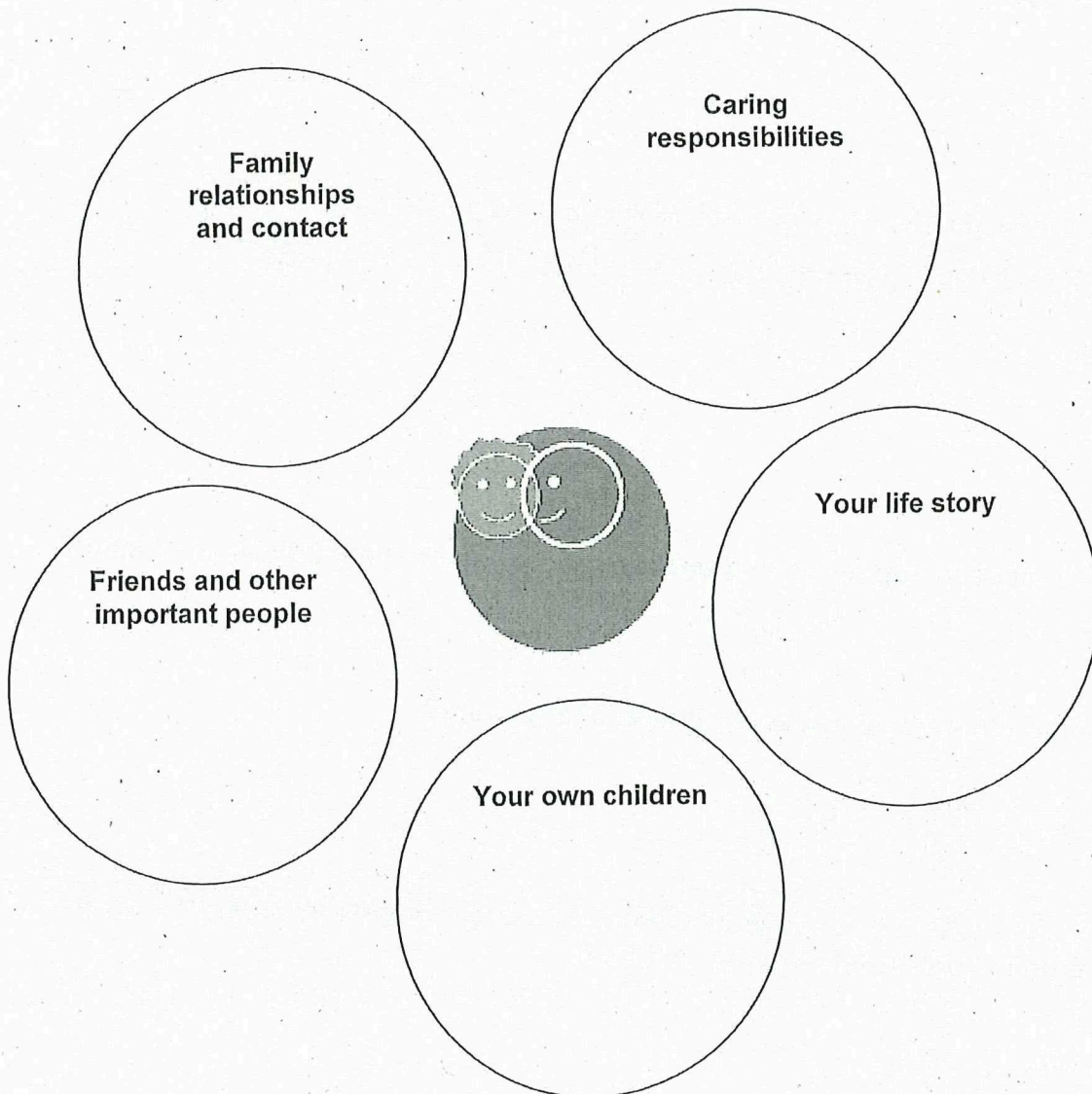


my pathway views - family & friends

Name: Georgina McMillan

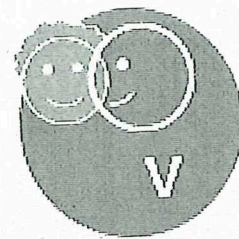
Think about how some of the things may relate to your family and friends.

- What do you feel good about?
- What are you concerned about?
- Is there any kind of support you may need?

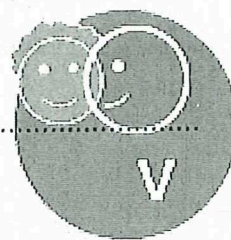


IF YOU WOULD LIKE TO EXPLORE SOME THINGS FURTHER, YOU CAN
CONTINUE WITH THE REST OF THIS SECTION.

my pathway views - family & friends



Any other comments



Name: GIORGINA MCMILLAN

In this section you can think about your relationships with your friends and family - how things are going just now and how they might change in the future.

Family relationships and contact

Family can mean different things to different people, and some may have more than one family.

Are you comfortable talking about your family and personal background when you may be asked questions about this?

Yes ☒

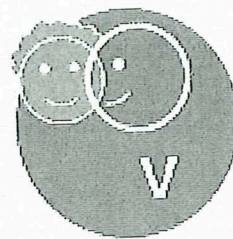
No ☐

What members of your family are you currently in contact with?

(you can include birth family, step-family, foster family, adoptive family, etc.)

V

Name of Family member and relationship	How often are you in contact with them? (daily, weekly, monthly, once or twice a year, none)	Is this level of contact: - about right - too much - not enough?	Is there anything you would like to say about how you feel? (e.g. your relationship, supportive aspects, any difficulties)
	Weekly (sometimes)	not enough	—
	weekly	not enough	By writing letters



Are there other members of your family whom you would like to make contact with?

☒

Yes

☐

No

☐

Don't Know

How might you go about doing this? Who could help you with this?

I would deal with this by running away.

Social worker and staff can help but does not!

Ideally, what would you like your family relationships to be like?

happy, and me and my gran getting a house together in Kilmarnock.

Caring responsibilities

Do you have any responsibilities to care for any members of your family or anyone else?

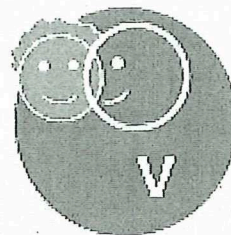
Yes

☒

No

☐

If yes, what sort of help do you get with this? NONE.



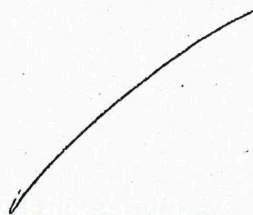
Would you like any extra help? If yes, please give details.

getting a house with ma gran
in Kilsinning.

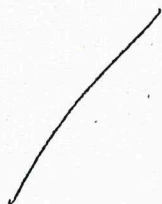
Your own children

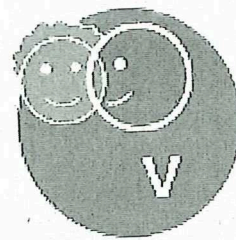
This section should be completed if you are a parent. If you are to become a parent in the near future, you should come back to this section at the appropriate time.

If you have children, would you like to say a bit about them.
(e.g. names, ages, where they live, etc.)



What are your hopes for your children, now or in the future?





If your child/children live with you, what sort of support do you have to look after them?

/

Is this enough? Would you like more support? Who could help with this?

/

If your child/children do not live with you, how much contact do you have with them?

/

Is this: (circle one)

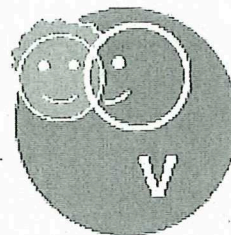
Too Little

About Right

Too Much

How do you feel about this? Would you like more support? Who could help with this?

/



Your life story

Have you ever done any life story work?

(e.g. looking back at who you've lived with, where and what it was like)

☒

Yes

☐

No

☐

Don't Know

Would you like to do further life story work? Who could help you?

my self!

Do you have photographs?

Yes

☒

No

☐

Are they kept safe?

Yes

☒

No

☐

Would you like to take some more photographs?

(e.g. of your family, carers, places you used to live, etc)

Yes

☒

No

☐

Would you like to create a family tree?

Yes

☒

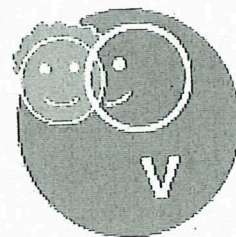
No

☐

If yes, who could you speak with to get the information you'll need?

(e.g. from family, carers, the internet, library, etc.)

I Dont know Really.



Friends and other important people

Your network of people around you can include friends and other people who are important to you. These people can be important for friendship, support or having someone to talk to.

Think about some of the people who are your friends or are important in your life.

Write down their names

[Redacted]

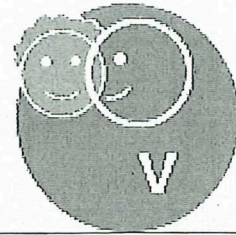
an)
brother)
Ellan (mom)
(Papa)
(Boyfriend)

List some good things about these people?

They've been there for me
when I need them ect.

List some things that are not so good?

margaret mcmellan (mom) - ~~the~~
when she goes back to her
boyfriend.



What things are important to you about your friends?
(Please circle one number on a Scale of 1 - 4)

	1= not important 4= very important			
Make you laugh	1	2	3	4
You can trust them	1	2	3	4
Are about the same age as you	1	2	3	4
Can get you things you want	1	2	3	4
Will do what you ask them to do	1	2	3	4
Will look out for you and stick up for you	1	2	3	4
Lives close by and can see them often	1	2	3	4
Others: (please state)				

Are there any friends or people you used to have who you would like to get back in touch with?

Yes ☒ No ☐

How might you do this? Who could help?

* Really Don't know! *

While completing this section you may also want to think about:

- the people you live with and the area you live in - see WHERE I LIVE
- what you do with your friends - see LIFESTYLE

CONTACT CALENDAR (Social Work)

[illegible]

CONTACT CALENDAR (Family)

[illegible]

DAILY CASE NOTES

<u>NAME:</u>	Georgina McMullan
<u>DOB:</u>	9/12/91
<u>DATE:</u>	28/2/07

ek

no contact

45

4/5	No contact.
-----	-------------

n/s

n/s	Geogrey at hemio with num no contact
-----	---

Link to Care Plan/Action Plan:

DAILY CASE NOTES

NAME:	Georgia M. Millan
DOB:	09/12/91
DATE:	27/12/07 TUESDAY

E/S Georgia at mums no Contact

L/S no contact

N/S No contact.

DAILY CASE NOTES

NAME:	Georgina Mcmillan
DOB:	09/12/91
DATE:	21/12/04

PKS Georgina at mums no contact

L/S At mums no contact.

N/S No contact.

DAILY CASE NOTES

Link to Care Plan / Action Plan:

HARLEY PLACE DAILY CASE NOTES

AME:	Georgina McMillan
DB:	09/12/91
ATE:	24/02/07.

3rd [REDACTED] Georgina up and organised for the day. Georgina then had brunch and was unit based watching TV and playing pool. Georgina then left at 12.05pm to catch the 12.15pm train to her mums.

L/s Georgina on home leave: No contact.

r/s No contact at her mums

o Care Plan/Action Plan:

DAILY CASE NOTES

NAME:	GEORGINA McMILLAN
DOB:	09-12-91
DATE:	23-02-07

e/s No CONTACT, GEORGINA AT MUMS.

L/S Georgina vty 3pm unit based making cakes no ISSUES

N/S No issues with Georgia tonight, settled really well.

DAILY CASE NOTES

NAME:	Georgina m ^c millan
DOB:	09/12/91
DATE:	22/02/07.

Thurs 8/5 There has been no contact from Georgina

4/5 NO CONTACT, GEORGINA AT MUMS

N/S No contact from Georgina

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	Georgina Mcmillan
DOB:	09/12/91
DATE:	21/2/07

ELS No contact. on an overnight at mum's.

LS No contact

N/S No contact.

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	09/12/91
DATE:	20/02/07
[REDACTED]	Georgina collected belongings from Unit [REDACTED]
[REDACTED]	N
[REDACTED]	No contact [REDACTED]

Link to Care Plan / Action Plan:

HARLEY PLACE DAILY CASE NOTES

AME:	Georgia McMillan
OB:	09/12/91
ATE:	19/02/07

 No Contact from Georgia. 

4/ No contact 

N/S No contact 

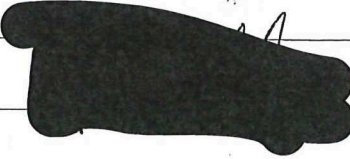
to Care Plan/Action Plan:

HARLEY PLACE DAILY CASE NOTES

AME:	Georgina McMillan
OB:	09/12/91
ATE:	198/02/07

E/S No contact with Georgina 

L/S No contact 

N/S No Contact from Georgia at home
with mum. 

to Care Plan/Action Plan:

DAILY CASE NOTES

IE:	Georgina McMillan
:	09/12/91
E:	16/02/07

Fri
E/S No contact from Georgina.

[REDACTED]

4/S
NO CONTACT AT MOM'S

[REDACTED]

n/s no contact

[REDACTED]

17/2/07 NO contact - [REDACTED]

17/2/7 No Contact [REDACTED]

n/s no contact

[REDACTED]

are Plan/Action Plan:

DAILY CASE NOTES

<u>NAME:</u>	GEORGINA McMillan
<u>DOB:</u>	09-12-91
<u>DATE:</u>	15.02.07.

L/S No CONTACT WITH UNIT.

N/S No contact with unit

ink to Care Plan/Action Plan:

DAILY CASE NOTES

<u>NAME:</u>	GEORGINA McMILLAN
<u>DOB:</u>	09.12.91
<u>DATE:</u>	14.02.07

e/s. GEORGIE STILL MISSING - NO CONTACT

n/s No contact with unit

Link to Care Plan/Action Plan:

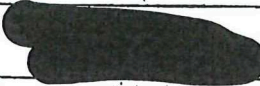
DAILY CASE NOTES

<u>NAME:</u>	Georgia McMillan
<u>DOB:</u>	9.12.91
<u>DATE:</u>	12.2.7

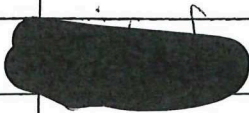
Ab No Contact



L/S No contact



n/s No contact



Link to Care Plan/Action Plan:

HARLEY PLACE DAILY CASE NOTES

<u>NAME:</u>	Georgina McMillan
<u>DOB:</u>	9/12/91
<u>DATE:</u>	11/2/07

ES

No contact



Ys

No Contact.



n/s

No contact



Link to Care Plan/Action Plan:

HARLEY PLACE DAILY CASE NOTES

<u>NAME:</u>	Georgina McMillan
<u>DOB:</u>	4.12.91
<u>DATE:</u>	10.2.07

E/S

~~1~~ No contact with Georgina



L/S

no contact



K/S

No contact ~~of~~ with unit

2

Link to Care Plan/Action Plan:

HARLEY PLACE DAILY CASE NOTES

<u>NAME:</u>	Georgina McMillan
<u>DOB:</u>	4/12/91
<u>DATE:</u>	9/2/07

E/S No contact with Georgina [REDACTED]

U/S NO CONTACT WITH GEORGINA [REDACTED]

N/S No contact with unit [REDACTED]

Link to Care Plan/Action Plan:

DAILY CASE NOTES

AME:	Georgina McMillan
OB:	4/12/91
ATE:	8/2/07

E/S	No contact with Georgina
-----	--------------------------

45. Georgina has had no contact with Unit

Ans :	No contact
-------	------------

to Care Plan/Action Plan:

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	W/12/91
DATE:	7/2/07
e/s	no contact with Georgina [REDACTED]
U/S	NO CONTACT WITH GEORGINA [REDACTED]
n/s	No contact [REDACTED]

Link to Care Plan / Action Plan:

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4/12/91
DATE:	6/2/07 (Tuesday)
E/S	No contact with Georgina.
L/S	no contact with unit S. Walker
N/S	No contact with unit

DAILY CASE NOTES

NAME:	GEORGINA McMILLAN.
DOB:	4/12/91
DATE:	5/2/07 (MONDAY)
E/S	No CONTACT
L/S	No contact with Georgina
N/S	No contact with unit

DAILY CASE NOTES

[illegible]

DAILY CASE NOTES

NAME:	Georgina Mcmillan
DOB:	4/12/91
DATE:	3/2/07
e/s	no Contact [REDACTED]
W/S	no Contact from Georgina. [REDACTED]
N/S	Georgina is still missing [REDACTED]

Link to Care Plan / Action Plan:

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4/12/91
DATE:	2/2/07
E/S	Georgina still missing, No contact with unit
HS	Georgina has not contacted unit
N/S	Georgina is still missing.
Link to Care Plan / Action Plan:	

DAILY CASE NOTES

[illegible]

PERSONAL INTERESTS AND HOBBIES

Name: Georgina McMillan

Activity /	MON	TUES	WED	THUR	FRI	SAT	SUN
Week Beg					23/2/07	24/02/07	
BOARD GAMES							
SKATING							
SWIMMING							
BAKING							
COMPUTER							
P.S.2					✓		
OUTINGS							
HAIR / MAKE-UP							
SNOOKER / POOL							
CYCLING							
WALKING							
1-2-1 TIME							
CONTACT SPORTS							
D.V.D. / VIDEO							
T.V.					✓		
READING							
PLAYING CARDS							
OUTDOOR PURSUITS							
YOUTH CLUBS							
CADETS							
Other:							
Other:							
Other:							
Other:							

PERSONAL INTERESTS AND HOBBIES

Feb 07

Name: Georgina

Activity /	MON	TUES	WED	THUR	FRI	SAT	SUN
Week Beg	08/11						
BOARD GAMES							
SKATING							
SWIMMING							
BAKING							
COMPUTER							
P.S.2							
OUTINGS							
HAIR / MAKE-UP							
SNOOKER / POOL							
CYCLING							
WALKING							
1-2-1 TIME							
CONTACT SPORTS							
D.V.D. / VIDEO							
T.V.							
READING							
PLAYING CARDS							
OUTDOOR PURSUITS							
YOUTH CLUBS							
CADETS							
Other:							
Other:							
Other:							
Other:							

DAILY CASE NOTES

NAME:	GEORGINA McMILAN
DOB:	04.12.91
DATE:	31.01.07
e/s	No CONTACT, GEORGINA STILL MISSING.
l/s	No contact from Georgina.
n/s	No contact with unit
Link to Care Plan / Action Plan:	

DAILY CASE NOTES

NAME:	GEORGINA McMILLAN
DOB:	04-12-91
DATE:	30-01-07
E/S	No contact, GEORGINA still missing. [Redacted]
L/S	No contact still missing... [Redacted]
N/S	- Still missing [Redacted]
Link to Care Plan / Action Plan:	

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4.12.91
DATE:	28.1.7

←/s No contact, absconder. terms still active.

n/s No Contact

n/s still missing

29/1/07 still missing

/s No contact with unit

n/s No contact

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:

Georgina M^c Millan

DOB:

4-12-91

DATE:

27-1-07

E/S

No contact

C/S

No contact

N/S

No contact

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:

Georgina McMillan

DOB:

4-12-91

DATE:

26-1-07

11:10am

No contact from Georgina or her family

26/1/07

No CONTACT FROM GEORGINA

tw/s

No contact with unit

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	Georgina M ^c Mullan
DOB:	4/12/91
DATE:	25/1/07

Thursday

E/S

The unit has had no contact with Georgina.

L/S

There has been no contact made between Georgina and the unit.

N/S

No contact with Georgie - still missing.

Link to Care Plan
/ Action Plan:

第 10 章 数据库系统 10

第 11 章 数据库系统 11

第 12 章 数据库系统 12

第 13 章 数据库系统 13

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2000 年 10 月 1 日

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4/12/91
DATE:	23/1/07

els Georgina has still not returned to visit and there has been no contact from mum. S/w update by email

4/5 No contact from Georgie tonight.

N/S There's been no news of Georgie tonight

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4.12.91.
DATE:	22.1.07

E/S No contact at time of writing,
No return

L/S STILL NOT BACK IN UNIT, NO CONTACT FROM GEORGINA
MUM PHONED AT CHANGE OVER.

W/S No contact with unit

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	Georgina memillan
DOB:	4/12/91
DATE:	21/1/07

e/s Georgina did not rty this am
 is at mum's house, mum contacted
 unit at 12.40pm staff spoke
 with Georgie who was refusing
 to return to unit. mum spoke
 with staff also staff asked mum
 to return Georgie to unit
 mum assured staff she would
 return Georgie (see main Log Book)

L/S No contact at time of writing

n/s still no contact of news of Georgie.

DAILY CASE NOTES

NAME:	GEORGINA MCMILLAN
DOB:	04-12-91
DATE:	20-01-07 SAT.

E/S Georgina up bright & early. Out on contact with Mum, left at 9.45am. No issue

L/S Georgina out with her mum & has made no contact with the unit ATOW 9.15pm.

N/S George^p failed to return - reported missing on 10-46pm

Link to Care Plan

/ Action Plan:

contact with mum

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4/12/91
DATE:	19/1/07 Friday

N/S

Georgina returned to unit with her mum at 10pm, her mum left shortly after. Georgina appeared quite happy, she made herself a sandwich and watched television for a short while, she went up to her bed at her usual time and settled quickly.



Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4.12.91
DATE:	19.1.07
FRIDAY.	

E/S. George up at 7.30am, dressed and organised for school left unit at 8.30am is being picked up by Staff at 1.40 to attend Review meeting at Aitken place.

REVIEW DECISIONS

1. Continue to reside in H.P.
2. Contact - 4 hrs midweek
All day weekend.
3. H.P. to explore dance + gym classes
4. S.W + HP to explore situation at St. Andrews. Maybe Who Cares involvement.

next review: FRI 16th Mar 2pm

L/S GEORGINA R.T.U From Her L.A-C Review, APPEARED QUITE PLEASED WITH THE ABOVE DECISIONS, OUT WITH MOM AROUND 2pm. AND TO R.T.U For 10pm.

DAILY CASE NOTES

NAME:

Georgina McMillan

DOB:

4.12.91.

DATE:

18.01.07

E/S

Georgie up at 7.30 am, dressed and organised for school, had breakfast, was in excellent mood and was keen to attend St Andrews, writer escorted Georgie to school and spoke briefly with Assistant Head regarding plans for Georgie's educational programme. Georgie was in good mood and was relaxed during meeting, No issues

L/S

Georgie was picked up by staff from school at 2.00pm and taken to Dentists after dinner went out for a run in the PC with staff had a visit from her new social worker this evening.

N/S

No issues with Georgie tonight, went for a bath then off to bed settled well.

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4.12.91
DATE:	17.01.07

Early Georgie up for 7.30am. Busy doing school work.
10am out with [REDACTED] from better feelings returned at 11am.

4/s Georgie taken down town to get school shoes + trousers. On return collected by mum at 5pm, to return at 9pm.

n/s No issues with Georgie tonight went for a bath then into her room settled well.

Link to Care Plan / Action Plan:

[REDACTED] continued to try and make contact with [REDACTED]. [REDACTED] has meeting today 2pm.

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4/12/91
DATE:	16/01/07

Tues.

E/S. Georgie up and organised today did work into the Education room then went out with Education Support worker to the ~~library~~ town back in for lunch then out again with (Student) no Issues.

4/5 Georgina unit based and had dinner. Georgina then on HP to friend and watching TV. Georgina also went to visit her friend for 1hr then had supper.

N/S Georgie up to bed and settled very well

DAILY CASE NOTES

NAME:	Georgina m ^c millan
DOB:	4/12/91
DATE:	15/01/07.

Mon E/S Georgina up and organised for the day.
 Georgina then spent the day doing
 schoolwork. Well done Georgina.

E/S Georgina had a visit from F.A.C.U.
 this afternoon that lasted 1½ hrs see
 log book. after dinner went out with
 her mom for 4hr contact not returned
 at time of writing report.

N/S Georgina off to bed 10pm no issues

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4/12/91
DATE:	14/1/07

Sunday

E/S. Georgina up at 10:30 am for brunch complaining of a sore stomach and arm eat some breakfast and then went down town.

W/S Georgina unit based all shift. Georgina had dinner and spent time dying her hair with KR. Georgina then went for a bath and watched TV.

N/S Georgina appears at 10:10pm - handing in her phone before going

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4/12/91
DATE:	13/1/07

Eat & f Georgia up today and had a bath. Georgina then tidied her bedroom and completed a chore (bathroom). Georgina also hoovered the downstairs hall and tidied the laundry. Well done Georgina. Georgina then went downstairs with [REDACTED] and when she rty she was unit based [REDACTED]

L/S Georgie taken to Carnival with staff and other Y/P. [REDACTED]

N/S RTU 10PM enjoyed herself phoned her mum then watched tele, off to bed 11-15. no other issues [REDACTED]

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	GEORGINA McMILLAN
DOB:	4/12/91
DATE:	12/1/07. (Friday)
E/S	GEORGIE UP & SHOWERED & INTO THE EDUCATION ROOM BY 9.15 AM. WORKED WELL THROUGHOUT THE MORNING. OFF TO IRVINE AFTER LUNCH WITH STACY TO PURCHASE ART EQUIPMENT & SCHOOL WORKBOOKS.
U/S	GEORGIE RETURNED FROM IRVINE AT 2.50 PHONED MOM, LEFT THE UNIT AT 6 TO MEET FRIENDS.
N/S	Georgie RTU 10 PM was told to back in unit for 9.10, took her-self off to bed. no further issues

Link to Care Plan / Action Plan:

DAILY CASE NOTES

NAME:	Georgina mcmillan
DOB:	4/12/91
DATE:	10/1/07

Wed.

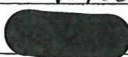
E/S. Georgie taken to Archenhauie School to see about admission admission refused (Link worker) going to take up the case. worked to rest of the Morning in education Room.

L/S Georgie out after dinner with a couple of times put a washing on as wash day was changed and nobody was using machine. Shw faced unit and will visit tomorrow her issues

n/s Georgie upstairs at 10:10pm - a bit annoyed at the high wind and her window not closing properly, though settled well.

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	Georgina mc millan
DOB:	4/12/91
DATE:	11/1/07 (THURSDAY)
e/s	Georgina up and Showered then in School Room doing School work worked well all morning S/W visited at 12:30pm Georgina then helped out in Kitchen after lunch no issues Staff spoke with Bob neilly re Schooling issues See main log 
L/S	Georgina in good form this shift, out a run in the PC, rtu about 5:15 had dinner then out to the magnum Swimming, recieved a tip from mum no issues. 
N/S	Georgina watched T.V before going to bed at 10:30pm. 
Link to Care Plan / Action Plan:	

DAILY CASE NOTES

NAME:	GEORGINA McMILLAN
DOB:	04.12.91
DATE:	09.01.07
E/S	Georgie up, organised & into the education room. Worked very hard all day. No issues [REDACTED]
L/S	George doing school work this afternoon. Georgie at the dancing to-night. no issues [REDACTED]
N/S	'Georgia' watching tele with other young people then off to bed & settled well [REDACTED]
Link to Care Plan / Action Plan:	

DAILY CASE NOTES

NAME:	GEORGINA McMIWAN
DOB:	04.12.91
DATE:	08.01.07.
MONDAY	
E/S	GEORGIE UP AND ORGANISED IN EDUCATION ROOM WORKED WELL THIS MORNING. PHONED [REDACTED] RE GEORGIE'S SCHOOLING WAITING FOR RETURN T/C. [REDACTED]
L/S	GEORGIE UNIT BASED ALL SHIFT. SPENT MOST OF THE EVENING WATCHING D.V.Ds IN THE LOUNGE WITH STAFF & Y/P. HELPED TO MAKE SUPPER - NO ISSUES [REDACTED]
N/S	Georgie in her bed settled asleep at start of shift, slept throughout the night. [REDACTED]
Link to Care Plan / Action Plan:	

DAILY CASE NOTES

NAME:	GEORGINA McMILLAN
DOB:	04.12.91
DATE:	07.01.07

e/s GEORGIE UP, HAD BRUNCH & HELPED TO
DO UPSTAIR TOILS. UNIT BASED FOR
THE REST OF THE SHIF. NO ISSUES

u/s
Georgie was unit based most of
the day on the phone a lot to
family after dinner went to the
Cinema with staff and other
y/p.

n/s Georgie returned from the cinema at 10.10pm
was off to bed around 10.25pm.

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4/12/91
DATE:	6/1/07

E/S. Georgie up for brunch sat with Staff then left the unit to go into town at 12.30pm.

L/S Georgie spent time in her room at start of shift. Georgie had dinner then played trivial pursuits with the group. She then got her hair dyed by [REDACTED] and came back downstairs to watch t.v with others. Georgie's mum called her mobile many times throughout this shift also on phone to a Steven White a few times. No issues

A/S Georgie upstairs at start of shift then off for a shower then settled back in her room for the night

Link to Care Plan
/ Action Plan:

NAME:

Georgie mcmillian

DOB:

1/12/91

DATE:

5/1/07

E/S

Georgie up had B/Fast then
Went for a Shower until Based
has all shift

L/S

Georgina Quite Quiet Start of Shift,
Spent Time in Her Room with Staff.
Out to the Cinema with Unit Group
After Dinner.

N/S

Mum phoned at 9.25pm, - informed that
Georgie wasn't in. She returned at 10.10pm
- received a call from mum on her mobile
- George appeared upset - Fine once call
ended and handed in her phone - off
to bed around 10.20pm.

Link to Care Plan
/ Action Plan:

UNIT CASE NOTES

NAME:	GEORGIE McMILLAN
DOB:	4-12-91
DATE:	4-1-07

E/S Georgie up this morning had shower and washed hair. Got her hair blow dried + straightened by [REDACTED]. Georgie had breakfast, watched some t.v then left unit with [REDACTED] at 1:30pm to go a walk. She was asked to return to unit at 2:30pm. (returned at 2pm) [REDACTED]

L/S Georgie unit based playing pool after dinner spoke to writer R/e other 4:ip in unit talking about her told Georgie not to get involved in this as they will be talking about someone else. Tomorrow Georgie taken this on board out to skating at 6:30pm with [REDACTED] Staff dropping them off and picking them up [REDACTED]

N/S Georgie rto with group, had supper and watched television for a short while, her mood was good and she went upstairs for a bath at 10:15pm, she went straight to bed and settled to sleep soon after, slept soundly throughout the night. [REDACTED]

Link to Care Plan
i Action Plan:

DAILY CASE NOTES

NAME:	Georgina McMillan
DOB:	4/12/91
DATE:	8/1/07

2/s Georgina wakes for brunch. After brunch. Georgina off for a shower. Georgina spent time with K.R doing her hair and make up. Georgina off down the town with [REDACTED] till to her mum.

* Staff spoke to [REDACTED] Georgina re the death of her cousin. Georgina appears okay with this.

4/s Georgina was out with [REDACTED] this afternoon came back in at 3:30pm saying Georgina had been attacked. See (Log Book) Police notified remained in unit for the rest of the evening [REDACTED].

n/s Georgina in lounge at 10pm. Then upstairs for a bath then off to bed.

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	GEORGINA m'millan
DOB:	04.12.91
DATE:	02.01.07

E/S. Georgie up at 11am had breakfast, then showered and done her hair sitting with other girls doing hair and makeup.

n/s GEORGIE LEFT THE UNIT AT 1.30 RETURNED AT 3.45. AFTER TEA SHE WENT OUT AGAIN AT 5.30 RETURNING AT 6.45 WATCHED A DVD. HAD SUPPER THEN WATCHED TV.

n/s Georgie in pleasant ~~happy~~ mood this p.m. Interacting well.

Link to Care Plan
/ Action Plan:

DAILY CASE NOTES

NAME:	GEORGINA McMillan
DOB:	04-12-91
DATE:	01-01-07

E/S GEORGINA UP AT 11 HAD BREAKFAST, WENT UP TO HER ROOM TO CHANGE, WENT DOWN TOWN WITH OTHER Y/P TO SEE IF THE SHOPS WERE OPEN AT 12.45.
BACK AT 1.20

L/S Georgina unit based most of the shift. Watched TV and played pool. received 1 TK from mum tonight
no issues

N/S Georgina watched F.V tonight with other yps. New spaks with Michael N/S. Up to bed and settled quickly

Link to Care Plan
/ Action Plan:

PERSONAL INTERESTS AND HOBBIES

Name: GEORGINA

Activity /	MON	TUES	WED	THUR	FRI	SAT	SUN
Week Beg	15 th	16 th	17 th	18 th	19 th	20 th	21 st
BOARD GAMES							
SKATING							
SWIMMING							
BAKING							
COMPUTER							
P.S.2							
OUTINGS				OUT IN PC.			
HAIR / MAKE-UP	✓			✓			
SNOOKER / POOL							
CYCLING							
WALKING	✓			✓			
1-2-1 TIME	mum 4 hrs.						
CONTACT SPORTS							
D.V.D. / VIDEO							
T.V.	✓		✓				
READING							
PLAYING CARDS							
OUTDOOR PURSUITS							
YOUTH CLUBS							
CADETS							
Other:	out with mum.	out to friends for 1hr	Out with mum		OUT WITH MUM 17-18	OUT WITH MUM	
Other:							
Other:							
Other:							

PERSONAL INTERESTS AND HOBBIES

Name: GEORGINA

Activity /	MON	TUES	WED	THUR	FRI	SAT	SUN
Week Beg	8.1.07	9.1.07	10.1.07	11.1.07	12.1.07	13.1.07	14.1.07
BOARD GAMES							
SKATING							
SWIMMING				✓			
BAKING							
COMPUTER							
P.S.2							
OUTINGS				MAGNUM	✓	CARNIVAL	
HAIR / MAKE-UP							✓
SNOOKER / POOL							
CYCLING							
WALKING							✓
1-2-1 TIME							
CONTACT SPORTS							
D.V.D. / VIDEO	✓						✓
T.V.	✓						✓
READING							
PLAYING CARDS							
OUTDOOR PURSUITS							
YOUTH CLUBS							
CADETS							
Other:							
Other:							
Other:							
Other:	EDUCATION ROOM.	Dancing	Out in local community	out a run in the park	OUT WITH FRIENDS	downtown with Staff	

PERSONAL INTERESTS AND HOBBIES

Name: George McMillan

Dec 2006

Activity / WEEK BEG	MON	TUES	WED	THUR	FRI	SAT	SUN
	25	26	27	28	29	30	31
BOARD GAMES				✓			
SKATING							
SWIMMING							
BAKING							
COMPUTER							
P.S.2							
OUTINGS	Shops.						
HAIR MAKE-UP							
SNOOKER/ POOL							
CYCLING							
WALKING	✓	✓	✓			✓	
1-2-1 TIME	✓	✓					
CONTACT SPORTS							
D.V.D/MDEO	✓	✓					
T.V.	✓	✓	✓	✓	✓	✓	✓
READING	✓						
PLAYING CARDS		✓					
OUTDOOR PURSUITS							
YOUTH CLUBS							
CADETS							
Other:			OUT WITH FRIEND		PICTURES	Letter writing & out to shops	

CONTACT CALENDAR (Social Work)

[illegible]

CONTACT CALENDAR (Other Agencies)

[illegible]

CONTACT CALENDAR (FAMILY)

[illegible]

Education / Work Calendar

[illegible]

PERSONAL INTERESTS AND HOBBIES

Name: GEORGINA McMILLAN

Activity / WEEK BEG	MON	TUES	WED	THUR	FRI	SAT	SUN
	1	2	3	4	5	6	7
BOARD GAMES							
SKATING						✓	
SWIMMING				✓			
BAKING							
COMPUTER							
P.S.2							
OUTINGS							
HAIR MAKE-UP			✓	✓	✓	✓	
SNOOKER/ POOL		✓		✓			
CYCLING							
WALKING		✓		✓			
1-2-1 TIME							
CONTACT SPORTS							
D.V.D/VIDEO		✓					
T.V.		✓		✓	✓		✓
READING							
PLAYING CARDS							
OUTDOOR PURSUITS							
YOUTH CLUBS							
CADETS							
Other:			Shopping		Cinema		

PERSONAL INTERESTS AND HOBBIES

Name: GEORGINA JAN 2007

Activity / WEEK BEG	MON	TUES	WED	THUR	FRI	SAT	SUN
	1	2	3	4	5	6	7
BOARD GAMES							
SKATING							
SWIMMING							
BAKING							
COMPUTER							
P.S.2							
OUTINGS							
HAIR MAKE-UP		✓					
SNOOKER/ POOL	✓						
CYCLING							
WALKING							
1-2-1 TIME							
CONTACT SPORTS							
D.V.D/VIDEO							
T.V.	✓✓	✓					
READING							
PLAYING CARDS							
OUTDOOR PURSUITS							
YOUTH CLUBS							
CADETS							
Other:	WENT TO SHOPS						

