

CLIENT REVIEW/EXIT FORM YOUNG PERSONS SECURE ESTATE CDS-Q

CONFIDENTIAL All white boxes should be completed as appropriate when there is an update following the client's review, a discharge from structured treatment or an exit. Grey boxes not submitted to NDMS.

Date Client/NOMS ID Keyworker

Client Details

First name initial

Surname initial

Date of Birth dd/mm/yyyy

Client stated sex

Healthcare

Hep B intervention status - tick one option

- Offered and accepted - not yet had any vaccinations
- Offered and accepted - started having vaccinations
- Offered and accepted - completed vaccination course
- Offered and accepted - refused at later date
- Offered and refused
- Immunised already
- Not offered
- Assessed as not appropriate to offer
- Deferred due to clinical reasons

Hep C intervention status - tick one option

- Offered and accepted - not yet had a test
- Offered and accepted - had a hep C test
- Offered and accepted - refused at a later date
- Offered and refused
- Not offered
- Assessed as not appropriate to offer
- Deferred due to clinical reasons

Interventions

Intervention type	<input type="text"/>	Intervention type	<input type="text"/>
Intervention start date	<input type="text"/>	Intervention start date	<input type="text"/>
Intervention end date	<input type="text"/>	Intervention end date	<input type="text"/>
Intervention type	<input type="text"/>	Intervention type	<input type="text"/>
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Intervention end date	<input type="text"/>	Intervention end date	<input type="text"/>

Select one or more from below

- 52. YP harm reduction (specialist)
- 56. YP specialist pharmacological intervention
- 63. YP psychosocial - counselling
- 64. YP psychosocial - cognitive behavioural therapy
- 65. YP psychosocial - motivational interviewing
- 66. YP psychosocial - relapse prevention
- 67. YP psychosocial - family work

Discharge / Exit Information

Discharge date

Discharge reason - tick one option

- Treatment completed - drug-free
- Treatment completed - occasional user (not opiates or crack)
- Transferred - not in custody
- Transferred - in custody
- Transferred - re-commissioning transfer
- Incomplete - dropped out
- Incomplete - treatment withdrawn by provider
- Incomplete - treatment commencement declined by client
- Incomplete - client died
- Incomplete - deported
- Incomplete - released from court
- Incomplete - onward referral offered and refused

Prison exit date

Prison exit reason

Prison exit destination

Referral on release status - tick one option

- Referred to youth offending team and structured treatment provider
- Referred to youth offending team
- Referred to structured treatment provider
- No onward referral

Has the client been provided with reconnect support? Yes - Standard reconnect support Yes - Enhanced reconnect support No

Is the client threatened with homelessness in the 56 days (8 weeks) following exit from secure estate?