Appendix H: template case summaries and position statements

H1. Case summary on behalf of the local authority

Case No.[............]

CASE SUMMARY NUMBER [No.]

ON BEHALF OF THE APPLICANT LOCAL AUTHORllY FOR THE HEARING ON *[DATE]*

Re ...

[Insert the abbreviated case title such as Re Al

THE CHILD(REN)

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Age & DOB | Living arrangements | Orders/S20 including the date |
|  |  |  |  |
|  |  |  |  |

THE RESPONDENTS AND INTERVENERS



|  |  |  |
| --- | --- | --- |
| Party | Name | Relationship to the children |
| 1 Respondent |  |  |
| 2 Respondent |  |  |

**TIMETABLE**

**Please do not delete the columns below. The dates should be filled in when the event has occurred.**

|  |  |
| --- | --- |
| Event | Date of the event or date by which the event should be listed including any relevant summary |
| Application |  |
| 26 weeks from issue of  application.  Please include  dates of any extension. |  |
| EPO |  |
| ICO |  |
| PCMH (6 days from issue) |  |
| CMH (12-18 days from issue) |  |
| IRH (no later than week 20) |  |
| Final hearing  (completed by no later than week 26) |  |

|  |  |
| --- | --- |
| Has PLO taken place | Yes/No |
| If so, please confirm;   1. The length of the PLO, and 2. The summary outcome of any assessments. |  |

FAMILY GROUP CONFERENCE

|  |  |
| --- | --- |
| Has a FGC taken place | Yes/No |
| If so, please confirm;   1. The outcome(s) of the conference 2. Any agreed plan |  |

THRESHOLD & FINDINGS

|  |  |
| --- | --- |
| Date of the threshold/findings document | 1. Interim: 2. Final: |
| Date of responses by the relevant parties/interveners | 1. **1** Respondent mother: 2. 2 Respondent father:   3. |
| Please confirm that the Applicant has all the evidence it requires in support of the threshold findings sought.  **(If there is any outstanding evidence please identify each outstanding evidence and the date by which it will be filed and served)** |  |
| Are threshold/findings agreed? |  |
| If not agreed,  please set out a summary of the |  |

|  |  |
| --- | --- |
| main areas of dispute. |  |

COMPLIANCE

|  |  |
| --- | --- |
| Have previous court orders been complied with | Yes/No |
| If not please identify the order not complied with and suggested directions sought |  |

LINKED OR PAST PROCEEDINGS

|  |  |
| --- | --- |
| Are there linked or past proceedings involving members of this family | Yes/No |
| If so, please confirm;   1. The identity of the same; and 2. The outcome of those proceedings. |  |

APPLICATIONS TO BE DETERMINED AT THIS HEARING (e.g. Part 25)

|  |  |  |  |
| --- | --- | --- | --- |
| Application (identify the applicant) | Person(s) being assessed/subject to the application | Peron(s) undertaking the assessment | Proposed completion date |
|  |  |  |  |
|  |  |  |  |

ISSUES TO BE DETERMINED AT THIS HEARING

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Issue | Applicant's position | Mother's position | Father's position | Guardian's position | Other |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |

SUMMARY OF THE PROPOSED DIRECTIONS/ORDERS

|  |  |  |
| --- | --- | --- |
| Number | Directions/Orders | Agreed/not agreed |
| 1. |  |  |
| 2. |  |  |

SUMMARY OF THE RELEVANT BACKGROUND

ADDITIONAL INFORMATION OR FURTHER SUBMISSIONS

SUGGESTED READING LIST

|  |  |  |
| --- | --- | --- |
| Document | Date | Bundle ref |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |

[Please insert advocate's or the author's details including the date]