

➤ Introduction Process



Your new SW/YPA will explain the following to you fully, on completing this could you please sign below.

Tick box

- | | | |
|---|------------------------------|-----------------------------|
| ■ The role of the SW/YPA | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ■ The complaints procedures | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ■ Your rights to access your file | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ■ How to contact a NYAS advocate | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ■ What the Pathway Plan is and how it will be developed | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ■ Your financial entitlements | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ■ The One Point | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ■ How often you will receive a visit | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ■ Health Adviser | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ■ Teenagers 2 work | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

YPA _____

Young Person _____

↳ Contacting other Agencies



In order to provide you with the best service possible, your SW/YPA may need to share information with other people.

If you are happy for them to do this please sign the following:

- Family members _____
- Health services _____
- Education services _____
- Department for Work & Pensions _____
- Social Worker _____
- Accommodation Providers _____
- One Point _____
- Youth Offending _____

Your SW/YPA will always inform you when they are liaising with other people on your behalf.