**Durham County Council Children and Young People’s Service**

 **Supported Lodgings Service**

**Placement Evaluation for the Purpose of Review – Young Person**

Name of Young Person:

Date of Birth:

Name of Provider:

Address:

Supported Lodgings Officer:

Young Person’s Advisor:

How long has the person been in placement?

Dates: from to

Is the placement satisfactory?

What do you feel you are getting from this placement?

Do you feel you have enough support from the provider?

Do you feel you have enough support from your Advisor?

In your views, are there any ways in which the supported lodgings service could be improved?

What kind of support if any do you feel you will need in future?

Have you any plans for your future? (e.g. accommodation, college, employment etc)

Are there plans for the placement to end?

Has supported lodgings matched your expectations – is it what you thought it would be?

Any other information you would like to add or comments you would like to make?

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_