

## Notification Stage 2 1<sup>st</sup> Line Manager to 1<sup>st</sup> Line Manager

All Stage 2 Resolutions should be resolved within 2 working days

|                      | Date                         |  |
|----------------------|------------------------------|--|
| Notification Stage 2 | Date                         |  |
|                      | Name of madessional          |  |
|                      | Name of professional         |  |
|                      | submitting resolution        |  |
|                      | Agency                       |  |
|                      | Further agency details       |  |
|                      | (For education please        |  |
|                      | provide type of school;      |  |
|                      | For health please include    |  |
|                      | who you are employed by)     |  |
|                      | Contact Details              |  |
|                      | Name of professional who     |  |
|                      | you have raised resolution   |  |
|                      | with                         |  |
|                      | Agency                       |  |
|                      |                              |  |
|                      | Further agency details       |  |
|                      |                              |  |
|                      | Contact Details              |  |
|                      | Child/Family Name            |  |
|                      | (Please state how many       |  |
|                      | children this escalation     |  |
|                      | relates to)                  |  |
|                      | Date of Birth                |  |
|                      | <b>Current Level of Need</b> |  |
|                      | ICS Number (if known)        |  |
|                      | NHS Number (if known)        |  |
|                      | Any additional comments      |  |
|                      |                              |  |