DSO 02/2017 - Annex E

Multidisciplinary team review record (New form to be completed each day)

1	Date	
2	Name	
3	Atlas ref	

Attendees		Name	Signature
4	Detained individual (if not in attendance, record the reasons in the comments box below)		
5	HOIE Manager		
6	Contracted Service Provider Centre Manager		
7	Case Manager (if on open ACDT)		
8	Healthcare		
9	Others (please specify)		

Mandatory Regime – Make arrangements for fresh air and shower				
	Daily Regime Assessment	Yes / No and comment		
10	Access to phone	If no, confirmation detained individual can access legal adviser.		
11	Toiletries			
12	Social visits			
13	Official visits			
14	Library book request			
15	Daily shop order			
16	Recreational facilities e.g. gym			
17	Smoke breaks (if appropriate), access to lighter			
18	TV			
19	Internet			

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20	Other (e.g. education, arts and crafts, games). Please list:				
The detained individual has been provided with details of elements of regime he/she will be able to access and any elements which are being restricted and provided with a written copy of this form Notified by:					
21	Name				
22	Date				
23	Time				
24	Comments: to include reasons for continuation or ending of removal from association/temporary confinement, alternatives to removal from association/temporary confinement discussed and considered, any room adjustments, why regime restrictions are/remain in place, planning for return to association, association with others who are subject to Rules 40/42 (Rules 35/37 in STHFs), and a staged return.				