# BUCKINGHAMSHIRE COUNTY COUNCIL FOSTERING PANEL

# FRONT SHEET/CHECKLIST FOR LONG-TERM MATCH AT PANEL

The purpose of this document is to alert Family Finding Fostering Social Workers (FF FSW) and Children’s Social Workers (CSW) to the reports that need to be submitted to the Fostering Panel for a long-term match.

Please attach this Front Sheet to the front of the bundle and tick/sign off the checklist once all the required documents have been collated.

Please note that both the CSW and the FF FSW are responsible for ensuring that their respective reports are of good quality, signed by all relevant parties, and are completed within the agreed timescales. However, the FF FSW will co-ordinate the collation of all the required reports, prior to sending 2 double-sided copies of each to the Fostering Panel Business Support Officer, within Panel submission timescales.

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| --- | --- | --- | --- |
| **Name of Applicant/s** | **Names of Social Workers and Managers** | | |
| Applicant 1:  Applicant 2 : | Placement Social Worker: | | |
| Placement Team Manager: | | |
| Child/ren’s Social Worker: | | |
| Children’s Team Manager: | | |
| **Are the foster carers approved by an IFA? i**f so please provide the details, and confirmation that they have been approved as long-term foster carers by their agency: | | | |
| **Child/ren to be matched: Name/s and Date/s of Birth:** | | | |
| **Paperwork, checks and references required** | | **To be located by:** | **Submitted: Y/N or N/A** |
| **Information about the child/ren to be matched:** | | | |
| Child Health Assessment, updated within the last 6 months (2 copies only, for the Panel Chair, and Panel Advisor) | | CSW |  |
| Most recent school/nursery report | | CSW |  |
| A clear photograph of the child/ren | | CSW |  |
| **Information about the Foster Family** | | | |
| Confirm that DBS’s and Medicals are up to date in line with BCC Fostering Service procedures (please tick here). | | FF FSW |  |
| Most recent Household Review, signed by all.  (Any significant updates/changes since the above was completed must be reflected in the Matching and Support Plan). | | FF FSW |  |
| Most recent minutes of Bucks County Council Fostering Panel, to include ADM decision, if came to panel in the last 6 months. | | FF FSW |  |
| Updated Safe Caring Policy, specific to the child/ren in placement, and signed by all in the household (if the children/yp are of an appropriate age/ability) | | FF FSW |  |
| **Plus:** | | | |
| Selection, Matching and Support plan.  *To be completed jointly by the CSW, and the FF FSW, and signed by all parties, inc. the respective Team Managers.* | | CSW &  FF FSW |  |
| **Plus:** Any other reports that will aid the Panel/ADM in reaching an evidence-based recommendation/decision (i.e. reports presented at Court from other professionals, if consent to share has been provided by the Court).  Please describe below, any additional documents submitted: | |  |  |
| **Please ensure that all applicants, SW’s and their Managers have read, signed and dated all the documents prior to submission to the Fostering Panel BSO.** | | FFSW & CSW |  |

Please contact the Fostering Panel BSO or the Fostering Panel Advisor if you have any queries/concerns about any of the above requirements, prior to the Panel submission dates.