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| --- |
| **Initial or Emergency Matching Checklist and record of decision** |
| **Name/s of child(ren)** | **Age**  | **Date of birth** | **Gender** | **Ethnicity** |
|  |  |  |  |  |
| **Needs and Outcomes received?** | **Yes** |  | **No** |  |
| **Further Information Requested? ie risks; location; contact arrangements, transport.** |
|  |
| **Potential carers who match the child’s profile*** **List a maximum of five and rank in order of preference starting with “most appropriate match”.**
* **Include brief description of reasons: strengths and vulnerabilities; risks of potential match and people consulted i.e. Supervising Social Workers, Team Managers.**
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| **Have any of the above carers been ruled out, if so for what reasons?** |
|  |
| **Has the carer been spoken to?** | **Yes** |  | **No** |  |
| **Has the referral be given to the carer? (by email or phone)** | **Yes** |  | **No** |  |
| **Is additional support required for this placement i.e. transport, enhanced respite?** | **Yes** |  | **No** |  |
| **Has ATR been attended or HOS approval been given to this additional support?** | **Yes** |  | **No** |  |
| **Has a matching discussion or meeting taken place?** |  |  |  |  |
| **Is there a record of the matching discussion or meeting on the child’s file?** |  |  |  |  |
| **Has the proposed carer agreed to the placement?** **If no, please record reasons below** | **Yes** |  | **No** |  |
|  |
| **Has the child’s social worker been given carer’s details?****If CSW has declined please give reasons below:** | **Yes** |  | **No** |  |
|  |
| **Record of Decision** |
| **Name of carer providing/potentially providing placement:** |  |
| **Anticipated start date of placement:** |  |
| **Completed by:** |  |
| **Date:** |  |