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| Adoption Transition Feedback from foster carers |
| Name/mos number  |  |
| Name of child dob/mos number  |  |
| Planning meeting –date(s)  -were you listened to (ie your views about child’s needs, own diary commitments/flexibility -was the plan individual to the child? -flexibility (contingency planning discussion)  |  |
| Did you feel that the plan was realistic for the child? |  |
| Was the plan changed discussion and by whom?  |  |
| How did you help the child engage with the new parents? |  |
| Were you able to share information (inc. family info and use of Secure Base checklist) with new parents in preparation for move? |  |
| How did you help the new parents engage with the child? |  |
| Is ongoing contact arranged?(considerations) |  |
| Signed  |  |