Checklist for ShoBPA Process

Please email to shobpa@oneadoptionwy.leeds.gov.uk

|  |  |
| --- | --- |
| **Childs Name** |  |
| **Date of birth** |  |
| **ID Number**  |  |
| **Social Worker** |  |
| **Team Manager** |  |
| **Date of ShoBPA** |  |

|  |  |  |
| --- | --- | --- |
| **Document** | **Author/Role** | **Date of document** |
| CPR – including pictures |  |  |
| Birth Mother Consent |  |  |
| Birth Father Consent |  |  |
| Birth Mother Health Report |  |  |
| Birth Father Health Report |  |  |
| Neo-natal and obstetric form |  |  |
| Pre-Adoption Medical Report |  |  |
| Form CR-C – carers report |  |  |
| Legal Order |  |  |
| IRO confirmation |  |  |
| Birth certificate |  |  |
| Parenting Assessment |  |  |
| Expert Report if any  |  |  |
| Expert Report if any  |  |  |
| Expert Report if any  |  |  |
| Viability Report if any  |  |  |
| Viability Report if any  |  |  |
| Viability Report if any  |  |  |
| Full F&F Report if any  |  |  |
| Full F&F Report if any |  |  |
| Any other Reports, if any |  |  |

Please complete and sign to confirm all the above are included

Signed…………………… Name ………………….. Team manager

Date ……………………..