

London Borough of Havering Fostering Panel Report
Expiry of Regulation 24 – request for extension of the
temporary placement (Regulation 25)

Child / s Name:
D.O.B.
Gender:
Racial background:
Religion:
Date child became looked after:
Legal Status:
Carer / s Name:
What is the carers relationship to the child, include details about the nature of the pre existing relationship :
Date temporary approval as a foster carer granted :
Date temporary approval expires:
Assessing Social Worker:
Supervising Social Worker:
Child's Social Worker:

Care Plan and Summary:

What is the Local Authority Care plans including dates for any court hearings?

Reason for 8 week Extension: Include views and recommendation of all parties including the foster carer, child, social worker and birth family members. Is there a consensus that the placement should be extended? If not provide details.

Is the carer meeting all of the child's identified needs, including adhering to the care plan and safeguarding the child?

What are the positives about this arrangement?

Are there any concerns or gaps about the care provided? If yes how are these being addressed and by who? Please provide details

What is the proposed future fostering panel date or Court hearing as applicable?

Does the carer fully understand the Fostering Regulations that govern the placement?

Fostering Manager Name:

Signature:

Date:

Fostering Social worker Name:

Signature:

Date: