Maximize Monthly Visits

Child(ren)'s Name(s)	Date

Update the Social Worker

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How is/are the child(ren) adjusting to placemen	t?	
Has anything changed? -Behavior, milestones achievements, regressions		
Educational		
Medical/Dental		
Mental Health (outside services such as BST or PSR, length of appointments, & are the services effective)		
Family Changes		
Appointments or times you will be out of town		
Social Worker's Signature	Foster Parent's Signature	

Ask the Social Worker

Social Worker's Contact- Social Worker's Emergency Contact- After Hours Emergency Contact-
Do you have any additional expectations from our family?
Has any additional information surfaced about the child(ren)'s history that may help us parent?
Are there any concerns about the care the child(ren) are receiving in this home? If yes, How can we address the concern? - If no concerns are noted, positive feedback is always welcome!
What resources are available to the foster family? - Share if there are any issues surrounding other provider's interactions with the foster parents that are involved with the child(ren)'s care. P.S.R. etc.
Are there any additions/changes in the plan for visitation, therapy, medical/emotional appointments, visits, court, etc.?
Any updates on the case plan that may have an affect on the child(ren) and foster family?
How involved are the bio family members? Where are the siblings?
Who may the child(ren) have contact with, and limitations such as supervised or not?
Is there any information about the siblings/family changes the child(ren) may need to know about?
When will the next C.F.T. and court dates be?
Are there any plans to move the child(ren)?
Are there any concerns of the child(ren) that we need to be aware of?
What is the child's long-term permanency plan?