

**APPENDICE MM****CatholicCare****FAC OOHC FORM:  
Initial Interview Case notes**

**Form number: OOHC 14/1  
Issued: Jan 2015  
Contact: Team Leader  
Ph. (02) 8700-3333**

**Prospective Carers Name(s):-****Date:-****Time:-****Interview Staff:-****Family Members Present:-****Summary of specific areas for follow up from initial information provided:-****Interview Information:-**

(Include details as per Initial Interview Guidelines)

**Also note:****Questions asked by Prospective Carers:-****Questions asked by Staff:-****Any concerns raised by Prospective Carers:-****Any concerns raised by Staff:-****Outcome of Interview:-****Further Follow-up & Action Plan:-**

**Reference: OOHC Intake of Foster Carers Procedure**

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