

Kinship carer renewal assessment report guidelines

The purpose of this document is to guide assessors in the process of gathering information from a kinship carer, other household members and the child, to inform a sound and comprehensive renewal assessment. The assessment should be relatively straightforward in most cases, given that for the preceding approval period the carer will have had regular contact with staff from the Department of Children, Youth Justice and Multicultural Affairs (Child Safety) and foster and kinship care service staff members, who have been providing regular and ongoing support to the carer, and undertaking case work with the child. Additionally, the carer should have continued to have demonstrated their ability to provide quality care and meet the suitability requirements.

Disclosure statement and privacy notice:

Child Safety is collecting the personal information on this form for the purpose of assessing the applicant's suitability to become or continue to be a kinship carer. This is authorised under the *Child Protection Act 1999* and the *Child Protection Regulation 2011*. The applicant's personal information will be managed in accordance with the *Information Privacy Act 2009*.

Under the *Childrens Court Rules 2016* and the *Director of Child Protection Litigation Act 2016*, Child Safety is required to provide relevant information to the Director of Child Protection Litigation (DCPL) in relation to child protection proceedings, and the DCPL has a duty to disclose documents relevant to the proceeding to each other party. Therefore, any information provided to Child Safety that may be relevant to current or future court proceedings may be provided to the parties, including the parents. This may include applications for future child protection orders for children already placed in the applicant's care as an approved foster or kinship carer, such as long-term child protection orders.

Advise the applicants and household members of the Disclosure statement and Privacy Notice (above) which relates to information they provide to the Child Safety in assessing their application/s as carer/s. Discuss with the applicant/s and household member/s that any information that they provide to Child Safety in the course of their assessment will be managed in accordance with the *Information Privacy Act 2009*.

Ensure applicants and household members are aware of the how their personal information could be dealt with during proceedings in the Childrens Court. Advise applicants and household members that in Childrens Court applications, Child Safety may be required to provide information about the applicants or household members which may be disclosed to all parties to the proceedings, including the child's parents.

Using these guidelines

The prompt questions are designed to assist assessors in their 'conversations' with the carer, other household members and the child. These guidelines do not cover all components of a kinship carer renewal assessment (for example, prompt questions are not provided for gathering information about the parents' views or views of other persons of significance to the child. Rather, the guidelines focus on prompt questions for gathering key assessment information to enable the assessor to gather relevant information for the assessment report.

When communicating with Aboriginal or Torres Strait Islander applicants, use a narrative, storytelling approach to collect information, rather than lists of direct questions. Assessors should be aware of sensitive topics, for example, with applicants that were part of the Stolen Generation or who have been abused themselves.

Renewal assessment for Aboriginal and Torres Strait Islander kinship carers

These guidelines apply to all kinship carer applicants, however, it is acknowledged that additional considerations and skills apply to the assessment of Aboriginal and Torres Strait Islander applicants, to ensure that culturally competent carer assessments are undertaken.

It is not possible to reflect all of the possible considerations that may apply to individual Aboriginal and Torres Strait Islander cultural groups across Queensland in these guidelines, therefore, the planning phase for the renewal assessment of Aboriginal and Torres Strait Islander kinship carers may be seen as the most valuable step in the assessment process.

Where possible, the renewal assessment of an Aboriginal or Torres Strait Islander applicant should be undertaken by an Aboriginal and Torres Strait Islander foster and kinship care service. Where the assessor is not an Aboriginal or Torres Strait Islander person, a partnership approach should be applied to assist the assessor build a relationship with the carer and better understand the Aboriginal or Torres Strait Islander family, their cultural traditions and norms.

For non-Indigenous assessors, contact should be made by the assessor with the local Indigenous foster and kinship care service to ensure that local protocols are followed, cultural traditions are understood and parenting styles explored, prior to undertaking the renewal assessment. The assessor should also request that a worker from the service attend the interview with the carer.

Kinship carer renewal assessment report guidelines

Subsequent carer applications for approval as a kinship carer

Where a care arrangement is being considered for a sibling or another child who is kin of an approved kinship carer, a new certificate of approval is required for each additional child.

As part of an assessment for subsequent applications for approval to be a child's kinship carer, consider the assessment information that was gathered as part of the assessment for the carer's current certificate of approval, if the certificate of approval was issued within the last three years.

Unless specifically indicated by the carer's circumstances, there is no requirement to complete additional:

- carer health and wellbeing questionnaire
- medical checks
- referee checks

The focus of the initial assessment for subsequent applications for approval to be a kinship carer for a child will be depend on:

- how long ago the previous kinship carer assessment was undertaken (to inform the current approval)
- the nature of any changes to the carer's personal history, including any changes to adult household members
- the carer's demonstration of their ability to provide care to all children in the care arrangement in accordance with the Statement of Standards.
- the frequency and type of contact with the carer since the previous assessment – by the CSO and the foster and kinship care service

Complete the following assessment domains:

- No 1 - Motivation to care for the child/ren
- No 2 - Relationship with the child/ren
- No 7 - Understanding of, and attitude towards, the child protection issues and the need for the child to be placed in a care arrangement
- No 8 - Carer's personal circumstances and ability to meet the specific needs of the child/ren
- No 9 - Working with Child Safety

If there have been changes in other assessment domains since the previous assessment, provide additional relevant information to reflect these changes.

In 'Other assessment information' address any new information to inform the new approval decision, including:

- changes to the carer's personal circumstances, including adult household members
- the impact of the proposed care arrangement to children already living with the carer
- the frequency and type of contact with the carer since the previous assessment – by the CSO and the foster and kinship care service
- the views of the abovementioned CSO and the foster and kinship care service on the carer's capacity to meet the needs of the child.

The assessment report together with the initial assessment report relating to the child currently placed with the carer will be submitted to the CSSC Manager.

Kinship carer renewal assessment report guidelines

Contents

Renewal assessment for Aboriginal and Torres Strait Islander kinship carers	1
Part 1 – Preliminary information gathering (to be completed by Child Safety)	3
Part 2 - Assessment information (to be completed by the assessor)	4
Assessment domains	5
1. Motivation to care for the child	5
2. Relationship with the child	5
3. Relationship with the child’s family, family dynamics and family	6
4. Family history	7
5. Parenting style	7
6. Carers’ spousal relationship	9
7. Understanding of, and attitude towards, the child protection issues and the need for Understanding of, and attitude towards, the child protection issues and the need for the child to be placed in a care arrangement -	
8. Carer’s personal circumstances and ability to meet the specific needs of the child.....	10
9. Working with Child Safety	12
10. Managing change, stress and carer support	13
11. Training and education	14
Statement of standards	14
Part 3 - Recommendation and rationale (to be completed by the assessor)	15
Analysis of strengths and vulnerabilities	15
Recommendation and reason	16
Reference List	17

Part 1 – Preliminary information gathering (to be completed by Child Safety)

Child Safety's contact with the carer

For the preceding one or three year period, one or more Child Safety officers, or staff member of a foster and kinship care service, will have been in regular contact with the carer to provide support to the carer/s and undertake case work with any children placed with the carer/s.

Purpose and focus

Information should provide evidence of how the carer has demonstrated their ability to meet the statement of standards and provided for the safety and wellbeing of the child.

Suggested prompts

- How well do you feel you know the carer and child?
- What is your overall view of the suitability of this care arrangement for the child?
- Describe the relationship between the child and carer?
- What is your understanding of the child's views about the carer arrangement? How did you read that understanding (ie. speaking with the child, observations, information from a third party)?
- What are the positive aspects of the care arrangement?
- How has the carer been meeting the child's needs?
- How would you describe the ability of the carer to work with Child Safety and other key stakeholders?
- Have there been any concerns about the level of care provided by the carer to the child?
- Are there any issues or concerns regarding the care arrangement that need to be addressed as part of the carer's renewal assessment? Have these issues been addressed with the carer previously?
- Is there any specific information I may require as an assessor to complete the kinship carer renewal assessment?
- If not already provided on the assessment form: Have there been any standard of care reviews or investigations and assessments of harm reports in the preceding approval period? What were the concerns? What was the outcome? What actions were agreed to (recorded in the care arrangement agreement and/or Foster Carer Agreement) and what progress has there been to address the issues?

Note: If there are issues and concerns that need to be discussed with the carer, it is important to clarify whether the issues have been addressed previously with the carer. The renewal of approval process should not be the first time the carer is informed about issues or concerns that should have been discussed during the provision of ongoing day-today support with the carer.

Kinship carer renewal assessment report guidelines

Part 2 - Assessment information (to be completed by the assessor)

The assessment domains outlined below are used to capture information that will assist to determine whether the carer is able and willing to meet all the legislative requirements for renewal of approval as a kinship carer. Whilst the suggested prompt questions outlined relate to interviews with the applicant, relevant interview information gathered from other participants, such as household members, the child's CSO and foster and kinship care service staff, should also be summarised and used as supporting evidence under the relevant assessment domains.

Discretionary information can be considered under the Child Protection Act 1999 and the Child Protection Regulation 2011 as part of kinship carer renewal assessments. Discretionary checks should be conducted when additional information is required to inform the delegated officer's (the CSSC Manager) consideration of whether a person is able to meet the Statement of Standards (section 122 Child Protection Act 1999) for a child or young person in care, and is assessed as suitable to continue to hold a certificate of approval as a kinship carer.

Any discretionary information checks must relate directly to informing the suitability decision and must be clearly recorded in the applicant's renewal assessment. The CSSC Manager is responsible for considering the kinship carer's renewal assessment and if there are any discretionary checks that need to be actioned. Examples of some of these types of discretionary checks include but are not limited to:

- GP medical check
- Referee check
- information from an employer about a person's employment history
- information from other foster and kinship carer agencies if an applicant was previously approved as a foster or kinship carer either in Queensland or interstate.

These types of discretionary checks should be conducted as soon as the assessor or Child Safety identify this is required. Where the CSSC Manager is required to request the discretionary check, consultation between the assessor, kinship care agency and the CSSC Manager should occur for the CSSC Manager to determine how the additional information will be requested. The PSU where appropriate may also be consulted. The assessor must speak with the applicant/s and clearly advise why this discretionary information is being requested (i.e., this information is required by the CSSC Manager to make an informed suitability decision) and obtain the applicant's consent to conduct the check. The assessor must also advise the applicant/s that this information will be discussed with the applicant/s, assessed and recorded in their renewal assessment. If an applicant does not give consent for a discretionary check to be conducted, then the assessor must advise the applicant that this will also be discussed with them and recorded in their renewal assessment for the CSSC Manager to consider. The assessor should also make the applicant aware that if discretionary information can't be obtained, it may affect the CSSC Manager's ability to be satisfied whether the person is suitable to continue to be an approved kinship carer.

Kinship carer renewal assessment report guidelines

Interview with the subject child

If age and developmentally appropriate, the CSO and the child's safety and support network will provide advice on who is best placed to talk directly with the child, and areas to explore when talking to the child.

Purpose and focus

Children are often the most helpful source of information about carers. The kinship renewal assessment should include information about the quality of the relationship that the child has with the carer, including the child's perspective on any aspect of their care arrangement.

Where age and developmentally appropriate, comment on the child's views of their relationship with the carer and their feelings about living with the carer. Where it is not appropriate to interview the child because of their age or development, observations of the child's behaviour and interactions with the carer should be considered and recorded in this section, where possible.

Suggested prompts

- Talk to me about what is good about your care arrangement and living with your carer?
- Is there anything that is hard about living with your carer?
- Is there anything you would you want to change?
- How often do you see your birth family (mum/dad/brothers/sisters)? How does that happen? How do you feel about that?
- What opportunities do you get to be involved in Aboriginal or Torres Strait Islander community activities? Is this important to you? Can you give us some examples?

Assessment domains

1. Motivation to care for the child
Provide information about the carer's current motivation (reported and observed) to care for the child.
Purpose and focus
<p>Common motivations for kinship carers are a sense of commitment to the child and family, necessity and even guilt or shame. Research indicates that kinship carers are more likely to persevere with a care arrangement even when they experience considerable strain. Kinship carers may require additional support to manage the complexities of these feelings, their sudden role change and loss of their previous lifestyle.</p> <p>Aboriginal kinship carers may be strongly motivated by their sense of responsibility for the child, their memories of the Stolen Generation and their unwillingness for the child to be raised outside their Aboriginal family and community. They may advocate powerfully for the child to be placed with them.ⁱ</p>
Suggested prompts
<ul style="list-style-type: none"> • What is the best thing about being a kinship carer for the child? • Are there any challenges in caring for the child? • Are there things get in the way of caring for the child? • Do you feel like your obligations or commitment to the child have changed since you started caring? • How has the child adjusted to living with your family? • How did you support the child's adjustment and integration into your family? • How do you demonstrate to the child that you are committed to them and wish to continue to care for them and meet their emotional and daily care needs?

2. Relationship with the child
Provide information about the relationship between the carer and the child.
Purpose and focus
<p>Research indicates that one of the benefits of kinship care is children being able to maintain a sense of identity, belonging and stability because they are placed with people they know.</p> <p>For many kinship carers, their relationship with the child may change after they take on the caring role. For example, transitioning from being a child's grandparent or aunt, to also being the child's kinship carer, can create numerous challenges and unexpected changes to the type of relationship they have with the child. Explore how the carer has adapted to any changes in their relationship with the child and any ongoing supports the carer may require to assist them manage the change.</p>
Suggested prompts
<ul style="list-style-type: none"> • Describe your relationship with the child? • How has your relationship with the child changed since you took on the caring role? How have you managed these changes? • What are some of the positive aspects about your relationship with the child? • What are some of the challenging aspects about your relationship with the child? • How would you describe the child's attachment to you? • How would you describe the child's attachment to your own biological children and other household members? • How would you describe the relationship that your own biological children and other household members have with the child?

3. Relationship with the child's family, family dynamics and family

Provide information about the carer's ongoing relationship with, and expectations of, the child's parents and their ability to support family contact and relationships, and manage family dynamics. Identify possible conflicts and stressors and include information about what supports may be required.

Purpose and focus

Kinship care can provide a mechanism for a child's connection to family, community and culture, all of which are elements of a successful care arrangement.

However, kinship carers often feel divided loyalties between the child and the child's parents. It is not unusual for kinship carers to have feelings of grief and loss and to experience conflict in their family relationships. The nature of the relationship between the carer and the parents of the child is important as the child needs to be allowed to maintain a sense of loyalty to their parents.

Discuss any challenges or difficulties with family contact and how the carer manages family contact. Identify any supports the carer may need to better manage family contact, where applicable.

Managing parental contact has been identified as a major challenge by Aboriginal kinship carers. The conflict between protecting the child from further abuse and following traditional protocols and emotional connections, particularly when the perpetrator of the abuse or neglect may be the kinship carer's child, can be difficult.ⁱⁱ

Suggested prompts

- How are you involved in the child's connection with their birth family? (parents, siblings, extended family and significant others) (e.g., talk about family, family photos, phone calls, visits, seeing family on special occasions)
- How have you dealt with the child's birth parents?
- How often does the child see their family? Where? For how long?
- Describe your relationship with the child's birth parents?
- How has your relationship with the child's parent changed since you became a carer for the child? Are there any challenges?
- How do you manage these?
- Have there been any struggles or difficulties with family contact? How do you deal with these?
- Do you feel you are provided adequate support from Child Safety and the foster and kinship care service to manage contact between the child and their family?
- Is there anything that could be done differently?
- How do you provide for the child's need for connection to their cultural community? (i.e. maintaining Aboriginal or Torres Strait Islander identity).

4. Family history

Explore and discuss with the carer, any outstanding issues or proposed strategies from their last assessment in relation to significant aspects of the family's shared history (including carer's childhood history) that are influencing the care of the children and the care arrangement. .

Assessors should be familiar with information contained in the carer's previous carer assessment in relation to family history so that the carer's family history need not be fully re-explored at renewal.

Purpose and focus

An individual's experience of childhood is likely to impact on how they parent the child in their care. The carer's family history should have been comprehensively explored and considered during their initial approval and in most cases will not need to be re- explored at renewal of approval. However, the carer's positive and negative family experiences may be influencing the way they have been parenting the child. Discuss, where relevant, the strengths and challenges the carer may be experiencing as a result of their own childhood and how they have managed the challenges during their last period of approval, taking into consideration any outstanding issues or proposed strategies that were documented as part of the carer's previous assessment.

Suggested prompts

- In your last period of approval, have the events and experiences of your childhood impacted on the type of care you have been providing to the child?
- What strengths do you use from your own childhood to parent the child in your care?
- Are there any new challenges that arise for you as a result of your own childhood and the way that you were parented?
- How do you manage the challenges?
- Is there anything you wish you could do differently in relation to your parenting style?

5. Parenting style

Provide information about the carer's parenting style, including their compliance with the legal requirement under the *Child Protection Act 1999* that techniques for managing the child's behaviour must not include corporal punishment or punishment that humiliates, frightens or threatens the child.

Purpose and focus

Explore the parenting style of the carer over the past approval period, to establish whether the carer is continuing to provide a safe, stable and nurturing environment to the child.

When assessing an Aboriginal or Torres Strait Islander applicant's parenting style, assessors should be aware of their own views of 'good parenting' and how these views impact on their interpretation of Aboriginal or Torres Strait Islander child rearing practices. Information gathering must focus on an assessment about what is in the child's best interests, rather than making assumptions about desirable parenting practices.

For example, different sleeping arrangements such as co-sleeping, carers sharing a bedroom with younger children, and siblings and cousins sharing beds and mattresses can be a concern for child protection practitioners, but they can also be positive parenting techniques which help to establish attachments between the child and family. For some Aboriginal children, sleeping by themselves can be unsettling and disturbing.

Similarly, overcrowding and levels of responsibility for older children are common child protection concerns, but can actually be important tools for the child's socialisation with kin and community and their development of social and family responsibilities.

The traditional practice of extended family care may be viewed as promoting poor attachment between the carer and

the child and be seen as unsettling for the child. But shared care arrangements can fit well with the way Aboriginal families function and can mean that the child benefits from a “richer relational environment” and carers are supported in their role.ⁱⁱⁱ Explore the parenting style of the carer over the past approval period, to establish whether the carer is continuing to provide a safe, stable and nurturing environment to the child.

When assessing an Aboriginal or Torres Strait Islander applicant’s parenting style, assessors should be aware of their own views of ‘good parenting’ and how these views impact on their interpretation of Aboriginal or Torres Strait Islander child rearing practices. Information gathering must focus on an assessment about what is in the child’s best interests, rather than making assumptions about desirable parenting practices.

For example, different sleeping arrangements such as co-sleeping, carers sharing a bedroom with younger children, and siblings and cousins sharing beds and mattresses can be a concern for child protection practitioners, but they can also be positive parenting techniques which help to establish attachments between the child and family. For some Aboriginal children, sleeping by themselves can be unsettling and disturbing.

Similarly, overcrowding and levels of responsibility for older children are common child protection concerns, but can actually be important tools for the child’s socialisation with kin and community and their development of social and family responsibilities.

The traditional practice of extended family care may be viewed as promoting poor attachment between the carer and the child and be seen as unsettling for the child. But shared care arrangements can fit well with the way Aboriginal families function and can mean that the child benefits from a “richer relational environment” and carers are supported in their role.ⁱⁱⁱ

Suggested prompts

- Has your parenting style changed / developed since becoming a kinship carer?
- What new skills / strategies have you developed?
- How successful have these been?
- What discipline and behaviour management strategies have you implemented to manage the child’s behaviour? How have these worked?
- What boundaries do you implement in regard to space and privacy?
- Discuss the legislative requirement that discipline of the child must not include corporal punishment or punishment that humiliates, frightens or threatens the child in a way that is likely to cause emotional harm and the reasons for this requirement. Discuss whether this has been a challenge for the carer in the last approval period?
- Does the child display any behaviour that you feel you struggle to manage? What do you think would help you to manage these? Are there any supports that could be provided to help you?

Carer with children

- Do you use the same discipline and behaviour management strategies with your own children as you use with the child in your care? What are the differences and why?
- Has becoming a carer changed your relationship with your own children and the way you parent them? Have the changes been positive and/or challenging?
- Do you notice any tensions in your own family as a carer? (e.g., between the child in your care and your own biological children or other household members)

Carer’s children (to be asked age appropriately)

- Has your relationship with your parents changed since they started caring for the child? How has it changed and how do you manage the change?
- Where challenges exist for the carer family, discuss and identify possible supports or other options that could assist the family.

6. Carers' spousal relationship

Explore the implications of the care arrangement for the spousal relationship and provide information about identified strengths and any relationship difficulties or stressors since the previous assessment.

Purpose and focus

Research indicates that effective carers are likely to share a quality relationship with their partner, where they feel secure and satisfied in their partnership. Explore the strengths and challenges of the carers' relationship and the impact of these on their ability to provide quality care to the child.

Suggested prompts

- How has caring for the child impacted on your relationship? Have the impacts been positive, negative, challenging etc?
- How do you support each other in your caring role?
- What influences do the strengths of your relationship have on your caring role and abilities?
- What influences to any challenges in your relationship have on your caring role and abilities?
- Remind the carer of the requirement for a carer to inform Child Safety immediately about a change in carer circumstance and the reasons for this. Advise the applicant of the circumstance to which this applies (for example, change in spousal relationship, household membership, personal history, address and employment etc).

7. Understanding of, and attitude towards, the child protection issues and the need for a care arrangement

Discuss and provide information about the carer's current understanding of how the experience of abuse and trauma has impacted, or is impacting, the child and their demonstrated ability and willingness to ensure the safety of the children since the previous assessment.

Purpose and focus

Kinship carers must be willing and able to keep the child safe and also understand that they can ask Child Safety or their agency for help and guidance if required. To keep a child safe, kinship carers require an understanding of the child protection concerns that resulted in the need for the child to live apart from their parent/s and any risks that exist. Assessors need to determine the capacity of the applicant to keep the child safe.

Additionally, research indicates that complex family dynamics and divided loyalties can exist for kinship carers which in some cases can lead to carers experiencing difficulty protecting children. For example, limiting family contact if contact is unsafe. Research has found that kinship carers may also minimise risk, therefore it is essential to explore the applicant's understanding of the child protection concerns and future risk and to determine their level of ability and willingness to protect the child from future harm.

For Aboriginal and Torres Strait Islander children, when assessing the safety of a kinship care arrangement, it is important to also consider the child's culture and cultural safety, Aboriginal ways of child rearing, the applicant's kinship and community relationships and the supports that may come from being part of their community.

Suggested prompts

- Has your understanding of the child's experience of harm changed since the last time you were assessed as a carer? In what ways has it changed?
- How have you assisted the child/ren to overcome their experiences of harm, loss and trauma?

- How have you contributed to keeping the child safe?
- Do you have any current concerns about any safety risks to the child (if relevant)?
- Did you participate in the development of the child's case plan? Did you feel heard during this process?
- Do you have a copy of the child's current case plan? Do you know what the goal of the case plan is? How do you feel about the goal?
- Do you disagree with any aspects of the child's case plan? If so, how do you manage your feelings about this?

8. Carer's personal circumstances and ability to meet the specific needs of the child

Discuss and provide information about the carer's understanding of, and demonstrated capacity to meet, the specific needs of the children (including physical, emotional, developmental and cultural needs) since the previous assessment.

Where applicable, include any change in personal circumstances (since the previous assessment) and whether the change has impacted on, or is likely to impact, the children and/or the care arrangement.

If there has been a standard of care review or harm report, provide the carer with an opportunity to discuss their experience.

Purpose and focus

Discuss the child's specific needs and describe the extent to which the carer is meeting these specific needs. Explore any difficulties the carer may be experiencing in meeting the child's needs and any required support to enable the carer to better meet the child's needs.

Time capacity:

Establish whether the applicant has a realistic view of being a kinship carer (e.g. challenges, goal of reunification, or what if reunification is unsuccessful).

Providing care can require a carer to allocate a significant amount of time to caring for and supporting the child, attending meetings, facilitating family contact etc. Explore how the carer manages their time and whether they are facing any challenges with juggling competing demands and/or meeting the needs of the child.

Cultural and identity competency:

Explore how the carer preserves and supports the child's culture, language, religion and sexuality. Explore how the carer encourages and supports the child to develop and maintain their connection to community.

For an Aboriginal and Torres Strait Islander child, explore how the carer demonstrates respect for and interest in Aboriginal or Torres Strait Islander culture. Consider their involvement in the Aboriginal or Torres Strait Islander community and their knowledge of, and willingness to access, support services for Aboriginal and Torres Strait Islander children. Assessors should be aware that connection to community is the most powerful way for an Aboriginal or Torres Strait Islander child to build their cultural identity.^{iv}

Practical capacity:

Explore whether the carer is managing the practical aspects of caring for the child, including size of vehicle, room in vehicle, transport expectations, adequate size of house and bedrooms etc.

Health and wellbeing:

The health and wellbeing of carers can impact the effectiveness of their care for a child. Therefore the circumstances surrounding their health and wellbeing must be taken into account during the renewal assessment process and when determining any ongoing support required to maintain a successful and stable care arrangement.

Significant health issues will not necessarily preclude a carer from being renewed, particularly when the carer demonstrates that their health issues are managed and do not impact on their capacity to provide quality care.

Suggested prompts

Household safety

- Have any household safety issues been raised since your last approval? If so, how have these been addressed?
- Complete another Household Safety Study if the carer has moved or have made significant changes to their home environment e.g., renovations

Time capacity:

- How has caring for a child impacted on your time commitments?
- Do you feel like you are managing to juggle all your different commitments? For example, taking the child to appointments and school, facilitating, attending case planning meetings, interacting with the child's school, and participating in any training and development etc.
- Do you feel like you are adequately supported to juggle your different commitments? Is there anything that could be offered assist you to managing the competing demands?

Health and wellbeing:

- Have there been any changes to your health and wellbeing since your last approval? If so, what are the changes?
- How have these impacted on your ability to provide care?
- How do you manage your health issues?
- Have you had any immunisations since your last approval? If so, what type?
- Have you continued to follow the immunisation schedule for all children placed in your care?

Complete a new Health and Wellbeing Questionnaire where the carer has experienced health issues in the preceding period of approval.

Financial stability:

- What financial support do you receive to help you care for the child?
- What supports are there for the child in your care? (e.g., child related costs are used to assist to meet the child's particular care needs).
- Is your current financial situation sufficient for you to continue to meet the child's care needs and is there anything that you need financial support for, to enable you to continue to care for the child?

Cultural and identity competency:

- How do you provide for the child's need for connection to their cultural community?
- What types of activities do you and/or the child engage in to support and encourage their culture, language, religion and sexuality?
- Is there a cultural plan and if so, what is your role in meeting the outcomes of this?

Standard of care reviews and harm reports:

- Have any children in your care been subject to standard of care reviews or harm during your last period of approval?
 - If yes, what were the concerns?
 - What was the outcome?
 - What have you learnt from these experiences?
- Is there anything that Child Safety or other parties (e.g., foster and kinship care service) could have done differently to support you through this process?

9. Working with Child Safety

Explore and provide information about the carer's demonstrated attitude towards working with Child Safety since the previous assessment.

Purpose and focus

To ensure quality outcomes for children in care, carers must be able to work effectively as part of a team with the child, parents, foster and kinship care service and Child Safety.

When conducting a renewal assessment for an Aboriginal or Torres Strait Islander kinship carer, be aware that the carer themselves may have experienced the trauma of removal from their family and community or grown up in abusive institutional settings. These negative experiences must be respected, and the assessor should reinforce that Child Safety's role is to work in partnership with carers.

Suggested prompts

- What is your understanding of the child's case plan? Do you have a copy?
- How do you assist in meeting the goals of the case plan?
- Do you feel like you have enough information to help you care for XX?
- What is your understanding of your role as a kinship carer and the decisions you are able to make in that role? What decisions are you required to consult about?
- Who do you see as the key people involved in meeting the child's needs?
- How often do you interact with the key people? How does this assist you in caring for the child?
- Have you had any conflict with Child Safety or other agencies? If yes, how has this been resolved?
- What kind of interactions do you have with Child Safety?
- What are the good and bad things about how the child's case is managed? Is there anything missing?
- How have you dealt with major disagreements between you and Child Safety staff?

10. Managing change, stress and carer support

Discuss and document how the carer has managed changes, stress and carer support issues associated with their role as a kinship carer since the previous assessment. Consider the carer's current commitments, support systems and support needs and identify current support needs associated with the care arrangement.

(Note: using an ecomap may assist the carer to consider and discuss these issues, particularly if an ecomap has not previously been developed with the carer).

Purpose and focus

Kinship care arrangements are often complex and challenging and research indicates that although they receive less support, they may require more support than foster carers.^{viii} Research indicates that carer applicants who are connected to an established support network in the community have a greater likelihood of success in the role of carer.

Suggested prompts

- What is the most difficult thing you experience being a kinship carer? What, if anything, could be done to help deal with the things that make being a carer difficult?
- What, if any, areas of being a kinship carer have you struggled with in the preceding approval period? (e.g., particular behaviours, working with Child Safety or other agencies)
- What, if anything, could be done to help deal with things that make being a carer difficult? What support could be offered to assist you?
- What training may assist you in developing in these areas?
- What training, if any, would you like to attend in the next three years?
- Have you been involved in any support groups? (e.g., kinship carer support groups, foster and kinship care service support groups). If yes, how have these groups assisted you in your role and will you continue to attend?
- If no, what would be the benefits of attending such a group and would you be willing to attend?
- How has Child Safety and/or foster and kinship care service supported you in your role as a kinship carer?
- Describe the major sources of personal and practical support that you access outside of your family.
- Why is this support important to you?
- Are there any gaps in the support that you have been offered? If yes, what could be provided to you to fill these gaps?
- What are your ongoing support needs?
- Do you believe the role you play in caring for the child gets the recognition that it deserves from Child Safety of foster and kinship care service? Are there ways in which you could be made to feel more valued?
- Does the child in your care receive respite? If so, how often is it accessed and do you find it beneficial?
- Does the child in your care have a current Placement Agreement and do you have a copy of the Placement Agreement?
- What supports are there for the child in your care? (e.g., mentoring schemes for Aboriginal or Torres Strait Islander young people, planning for family reunification, planning for transition to adulthood).

11. Training and education

Explore and where applicable, provide information about relevant training completed since the previous assessment, or requested by the carer, and/or information currently requested or required by the carer in order to effectively respond to the child's specific care needs.

Suggested prompts

- Have you had any training since becoming a kinship carer?
- Do you know the types of training that are available for you to access?
- Is there any kind of training or education that you think could help you care for the child?

Statement of standards

Provide the carer with the 'Interview resource: Statement of Standards and discuss examples of how they have met the Standards of Care for the child since the previous assessment. Record the details of how they have met the standards, in the Interview resource.

Comments

Outline whether or not the applicant understands the standards of care and their obligation to provide care that meets the standards. Ensure the carer understands Child Safety's processes for responding to concerns about care provided to a child in out-of-home care, through the conduct of standard of care reviews and harm reports.

Use the 'Interview resource: Statement of Standards' (located in the Child Safety Practice Manual, Chapter 8 resource list) to assist the carer to provide evidence of how they have met each standard and document their examples.

Examples of a carer ability to meet the standards of care may include:

- a) leading by example; not belittling; listening to and valuing the child's opinions; and helping the child feel safe and comfortable by having their favourite toys and books.
- b) ensuring wellbeing, health and education needs are met; providing a loving caring environment, food, comfort and education; and providing for special dietary needs.
- c) listening to the child's opinions; using caring and responsive language; encouraging expression and open communication through discussion and respect of different opinions.
- d) allowing the child to participate in, and learn about, their culture; encouraging interaction with family members and community; and supporting the child's religious needs even if they differ from the applicant's views.
- e) providing access to schooling and school materials, sports, hobbies, interactions with peers; encouraging development of interests appropriate to age and ability; and taking the child to exhibitions and other events.
- f) ensuring school attendance and teaching of life skills; encouraging and supporting interactions with peers and elders; and actively exploring educational options for the future, such as TAFE, university or apprenticeships.
- g) setting boundaries, rewarding good behaviour, communicating, negotiating effectively; using time out and behaviour charts or rewards; and being aware that corporal punishment is not an option.
- h) Ensuring medical, dental and therapeutic services are provided as required.
- i) encouraging interaction with family, friends and community; organising birthday parties, visits with friends, sports and hobbies; and nurturing appropriate friendships.
- j) working with Child Safety in regards to contact; raising concerns and discussions with the CSO to ensure the best interests of the child are met; assisting with telephone calls and emails where appropriate; and encouraging development of a life book and collection of precious photos.
- k) ensuring appropriate care; attending specialist appointments with the child and implementing recommended care strategies; showing respect of rights and dignity; providing medical and any other support required.

Part 3 - Recommendation and rationale (to be completed by the assessor)

Analysis of strengths and vulnerabilities

Summarise the strengths and benefits, as well as the vulnerabilities and risks the carer brings to their role as kinship carer for the child. The summary will be based on all information gathered, and observations made, during the assessment.

Examples of strengths may include (but are not limited to) the carer's:

- positive motivation to care for the child as a result of the type of relationship with, and connection to, the child and desire to keep the child safe
- adequate support network of family and friends and understanding of formal supports available as a kinship carer
- close and supportive spousal relationship
- mostly positive relationships with their own children
- secure attachment and positive relationship with the child
- willingness and ability to abide by Child Safety's direction regarding contact and understanding of the importance of family relationships
- demonstrated use of positive parenting strategies and willingness to ask for assistance or guided when difficult challenges arise
- acknowledgement of the harm and risk of harm experienced and the impact of this on the child
- capacity to effectively manage stress
- current health that indicates no health issues that would impact on their capacity to provide quality care
- ability to provide a consistent and stable routine and a safe home environment
- positive parenting style that provides appropriate boundaries, routine and consequences if required
- understanding of the importance of family contact and maintaining connections for the development of identity and self-esteem
- understanding of the roles and responsibilities of kinship care and a willingness and ability to work with key stakeholders to meet the needs of the child.

Examples of vulnerabilities and risks may include (but are not limited to):

- strained relationship between the carer and child's parents which impacts on the carer's ability to facilitate and support family contact and respect the child's need for maintaining a relationship with their parents
- the risk of unsupervised contact between the child and parents due to the nature of the close relationship between the carer and the parents and the carer's minimisation of the harm and future risk of harm to the child.
- the carer's lack of support resources and networks and the impact this has on their ability to cope with the challenges of caring for the child
- the carer's own history of abuse and long history of intergenerational patterns of abuse and neglect and the affect this has on the ability of the carer to respond appropriately to the child and meet the child's emotional care needs
- the carer's financial concerns and the impact this has on their ability to manage the household budget and meet the ongoing costs of caring for the child
- the carer's authoritarian methods of parenting and belief that children should be 'hit' or 'whacked' to 'bring them into line'.
- The carer's difficulty in accepting and adapting to their loss of independence upon becoming a carer for the child and the impact this has on the carer's feelings towards the child.

Recommendation and reason

The assessor's reason for recommendation is a final summary providing evidence to support or not support the renewal of approval of the carer. In providing a reason and rationale, consideration must be given to the strengths of the care arrangement balanced against all potential risks.

The recommendation for approval or refusal is based on the applicant's understanding of, and willingness and ability to meet, all the legal obligations required to be an approved kinship carer under the *Child Protection Act 1999* and *Child Protection Regulation 2011*, as informed by the following considerations:

- whether the care arrangement continues to be in the best interests of the child
- the carer's understanding of, and willingness and ability to provide care consistent with the statement of standards
- whether the care is a suitable person to be an approved kinship carer for the child and members of their household are suitable persons to associate on a daily basis with the child
- the carer's motivation to provide care for the child
- the carer's relationship with the child's parents and capacity to manage family relationships in the best interests of the child
- the quality of the relationship that the child has with the carer
- the carer's parenting skills
- the carer's understanding of the harm or risk of harm to the child, including their acknowledgment of harm
- the carer's ability and willingness to maintain family connections, including contact between the child and their siblings, parents and other persons of significance to the child
- the ability and willingness of the carer to work with Child Safety in planning for the child and meeting case plan goals.

Reference List

- i. State Government of Victoria, Department of Human Services (Victorian Aboriginal Child Care Agency), December 2010, *Assessing kinship care for Aboriginal children: A practice guide for child protection practitioners*, Melbourne, 18.
- ii. State Government of Victoria, Department of Human Services (Victorian Aboriginal Child Care Agency), December 2010, *Assessing kinship care for Aboriginal children: A practice guide for child protection practitioners*, Melbourne, 23-24.
- iii. State Government of Victoria, Department of Human Services (Victorian Aboriginal Child Care Agency), December 2010, *Assessing kinship care for Aboriginal children: A practice guide for child protection practitioners*, Melbourne, 20.
- iv. State Government of Victoria, Department of Human Services (Victorian Aboriginal Child Care Agency), December 2010, *Assessing kinship care for Aboriginal children: A practice guide for child protection practitioners*, Melbourne, 27.
- v. McHugh, M. (2002), *The costs of caring: A study of appropriate foster care payments for stable and adequate out of home care in Australia*. Haymarket, NSW: Association of Children's Welfare Agencies.
- vi. State Government of Victoria, Department of Human Services (Victorian Aboriginal Child Care Agency), December 2010, *Assessing kinship care for Aboriginal children: A practice guide for child protection practitioners*, Melbourne, 25.
- vii. Australian Institute of Health and Welfare 2011. *The health and welfare of Australia's Aboriginal and Torres Strait Islander people, an overview 2011*. Cat. no. IHW 42. Canberra: AIHW.
- viii. Waterhouse, S. (2001), "Keeping children in kinship placements within court proceedings", in B. Broad (ed.) *Kinship care: The placement choice for children and young people*, pp. 39-46, Russell House, Lyme Regis, UK.