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| **Assessment Domain** | **5.1 Motivation to Foster** |
| **Link to Policy requirement** | Ability to identify personal experiences, background, current family dynamics and lifestyle, and reflect on how these are relevant to caring for a child in care. |
| **Link to Statement of Standards** | * The child’s dignity and rights will be respected at all times.
* The child’s needs relating to his or her culture and ethnic grouping will be met.
* The child will be encouraged to maintain family and other significant relationships.
 |
| **Focus** | **Suggested Prompts** | **Resources / Sources of Information** |
| Research indicates that a positive‘motivation to foster’ is highly predictive of a carer applicant becoming a successful carer.*Establish if:** the applicant has a realistic view of fostering (challenges, goal of reunification)
* the decision has been well thought out and discussed with significant others; and
* the carer applicant is motivated to meet the needs of foster children.
 | * Describe your understanding of the nature of fostering.
* Why do you wish to foster and how did you come to the decision to foster?
* How long have you considered fostering?
* Have you discussed your willingness to foster with your spouse/partner, children, other household members, family, friends and/or other foster carers? How did they respond?
* Does your spouse share a commitment to your decision to provide foster care?
 | * Interview resource: Motivation to foster
* Interviews with carer applicant/s
* Training assessment sheets and personal reflections.
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Based on the following information, Bill and Ann are assessed as being highly, positively motivated to become foster carers and as having a realistic view of the foster carer role and its challenges:** *They expressed a high level of motivation to provide foster care and make a difference to the lives of children, having thought seriously about taking on this role over the past two years.*
* *Both expressed a love for children and enjoyment from interacting with children. Ann, in her role as a primary school teacher for many years enjoys all opportunities, she has to give children “a life filled with love and laughter”. Bill wants to “provide a home and loving environment for children who need it”.*
* *They have had positive personal experiences of childhood and consider they have the skills, motivation and resources to provide similar experiences to children who have not had such positive experiences.*
* *They articulated possible challenges that may come with providing foster care and were realistic about their expectations regarding children who may be placed in their care.*
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| **Assessment Domain** | **5.2 Household Members Assessment Domain** |
| **Link to Policy Requirement** | Ability to provide a safe and stable living environment that is free from harm or risk of harm. |
| **Link to Statement of Standards** | * The child’s dignity and rights will be respected at all times.
 |
| **Focus** | **Suggested Prompts** | **Resources / Sources of Information** |
| Household members can have a significant influence over the experience a child will have in care and can directly contribute to the success or breakdown of a care arrangement. *Assess if:** the applicant has considered the impact fostering may have on other members of the household and how this will be managed
* the applicant has discussed fostering directly with household members
* household members have considered the impact fostering will have on them and the role they can play in providing care; and
* consider whether the care arrangement of the child may pose any risks to the safety of the applicant or any other children in the applicant’s household (e.g., the parents or family members of the child being considered for care arrangement have been identified as a safety risk for the applicants and children in the household)
 | *Applicants** How do you think members of your household will respond to a child in care being placed in your home?
* How will you support household members who are adapting to child in the household and manage any conflict that arises with household members as a result of fostering?

*Adult household member** Are you supportive of the applicant’s decision to provide foster care?
* How might having a child in care placed in your household impact on you?
* How do you see your role in relation to a child in care being placed in your household?
* What could you do to make a child in care in your household feel comfortable during their care arrangement?

*Household member – child / young person** How do you feel about your parent/s decision to become a foster carer?
* What are some of the things that might change when your parents are caring for another child?
* How would you help another child to feel comfortable in your family?
 | * Interview with other adult household member
* Interview with young person
* Interview with child
* Interviews with applicants and other household members
* Training assessment sheets and personal reflections
* Interview resource: Interview with other household member
* Interview resource: Interview with child
* Interview resource: Interview with young person.
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***No concerns were identified in relation to household members with regard to Ann and Bill becoming prospective carers.**There are no other people living in Ann and Bill’s household. Ann’s parents visit regularly. Ann and Bill have discussed fostering with Ann’s parents and her parents are supportive of them being foster carers.* |

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| **Assessment Domain** | **5.3 Personal Background** |
| **Link to Policy requirement** | Ability to identify personal experiences, background, current family dynamics and lifestyle, and reflect on how these are relevant to caring for a child in care. |
| **Link to Statement of Standards** | * The child’s dignity and rights will be respected at all times.
* The child will receive emotional care that allows him or her to experience being cared about and valued and that contributes to the child’s positive self- regard.
* The child will receive positive guidance when necessary to help him or her to change inappropriate behaviour.
* The child will be encouraged to maintain family and other significant relationships.
 |
| **5.3 Personal background: Childhood experiences** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| An individual’s experience of childhood is likely to impact on how they parent their own children.Exploring the experience of childhood with the applicant will provide insight into the way they currently provide care to their child/ren and intend to provide care for a child in care.Assist the carer to reflect on their childhood and identify what they will bring with them to the role of foster carer as a result of their experiences.The experience of a difficult or abusive childhood should not preclude an applicant from being assessed as suitable. Assess if the applicant has worked through this experience and emerged with strengths that will assist them to provide quality care. | * What was it like growing up as a child in your family?
* How did your family communicate as you were growing up? How were emotions expressed and conflicts resolved?
* Who disciplined you as a child and what methods of discipline were used?
* What impact did this have on you as a child?
* What impact do you think your childhood experiences have had on you as an adult?
* How would you describe the education you received and your experience of school life?
* Are there any experiences from your childhood that you are dealing with today?
* In bringing up children what do you do/ would you do differently from what your parents did?
 | * Interview resource: Childhood experiences
* Interview resource: Genogram
* Interviews with applicants
* Training assessment sheets and personal reflections.
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***In summary, no concerns were identified in relation to Ann or Bill experiencing difficulties during childhood that would impact on their ability to provide quality care. This assessment is based on the following information gathered during their assessment:**Bill and Ann each reflected on their childhood experiences. Ann spoke of having a positive and supportive childhood and identified that everyone respected each other. Whilst her parents had disagreements, these were resolved through open discussion. Ann was never smacked as a child and identified appropriate discipline methods used by her parents.**Bill talked of having a contented childhood and of having “lots of fun and adventure” with his brothers. His mother was affectionate and encouraged.**Bill recalled that a difficult aspect of his childhood was the “yelling and screaming” in his parents’ relationship and that they did not resolve conflicts. Despite his parents separating, they have an amicable relationship and worked hard to ensure their separation didn’t have a negative effect on their children. Bill was able to reflect on his experience of the tension between his parents and identified what he does differently in his own relationship, such as addressing issues in constructive ways.**Bill was “occasionally” smacked as a child and identified that this was a relatively ineffective form of discipline and led to him feeling fearful and angry. He spoke of more effective, appropriate forms of discipline also used by his parents (i.e., time out, removal of privileges) and identified that he would use such strategies himself as they assisted him to think about his behaviour and learn from his mistakes. It is assessed that Bill has gained strengths through reflecting on what inappropriate discipline techniques were not affective for him as a child.**Both Ann and Bill attended many schools as a result of moving locations. Ann’s commitment and love of being a teacher reflects her conviction that education is a significant part of growing up and should be enjoyable. Bill attended school regularly and was an average student. He left after grade 10 and sought employment, viewing this as the best choice for him. He is supportive of the importance of receiving a sound education.* |

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| **5.3 Personal background: Significant life events/experiences** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Significant life events / experiences (e.g., adversity; loss and grief; trauma) contribute to an individual developing values, attitudes, beliefs and ways of approaching the world.Exploring these experiences with an applicant can assist to develop an understanding of their view of the world and ways of coping with life’s challenges.It may provide insight into how the applicant may respond to a child in care who has/is currently experiencing loss and grief or trauma.Experiences of this nature should not preclude an applicant from being assessed as suitable. Assess if the carer applicant has worked through these experiences and emerged with strengths that will assist them to provide quality care. | * Describe the significant events/experiences of your life which have most shaped the person you are today.
* How did these events/experiences impact on your life?
* How did you manage or work through these events/experiences?
* How will these events/experiences impact on your ability to provide foster care?
* What strengths have you developed from these events/experiences that will assist you to provide care?
* What challenges may arise when providing care as a result of these experiences?
 | * Interview resource: Lifeline
* Interviews with applicants
* Training assessment sheets and personal reflections.
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill and Ann have both had personal experiences of loss and grief:**Bill experienced the loss of aunties and uncles, and other people who were good friends of his parents. For these losses, Bill appreciates the importance of talking about the loss, supporting other family members (such as his parents) who were grieving, and assisting each other to move forwards. Bill also talked about a more personal loss he experienced seven years ago when his dog died of a snake bite and of it taking some time for him to recover from his loss. He also described his parents’ separation as a time of grief since he lost his experience of family which he was so familiar with. He worked through this by talking to his parents who, on their part, endeavoured to retain their parenting role as much as possible to reassure their sons that they were still there for them.**For Ann, the death of an uncle by cancer and of her grandparents, were significant losses she had to deal with and were made more complicated as they died in her birth country and therefore no family was able to be there. Ann appreciated the importance of working through the grieving process together with other bereaved family members. She also experienced grief when some of her students lost family members and she needed to support them.**Both Ann and Bill demonstrated that they can apply these experiences to assist children who may have a number of significant losses to cope with. They acknowledge the importance of children being able to express their emotions by talking about their feelings, using art or craft and being provided with personal space. Their experience of being supported by other family members in their own grieving has provided them with the conviction that grieving children especially need to be supported calmly and patiently through their experience of loss. They also acknowledge the importance of preserving memories for children through photos etc.* |

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| **Assessment Domain** | **5.4 Social Assessment** |
| **Link to Policy requirement** | Ability to identify personal experiences, background, current family dynamics and lifestyle, and reflect on how these are relevant to caring for a child in care. |
| **Link to Statement of Standards** | * The child’s need for physical care will be met, including adequate food, clothing and shelter.
* The child’s material needs relating to his or her schooling, physical and mental stimulation, recreation and general living are met.
* The child will receive education, training or employment opportunities relevant to the child’s age and ability.
* The child will receive dental, medical and therapeutic services necessary to meet his or her needs.
* The child will be given the opportunity to participate in positive social and recreational activities appropriate to his or her developmental level and age.
* The child will be encouraged to maintain family and other significant personal relationships.
* If the child has a disability – the child will receive care and help appropriate to the child’s special needs.
 |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Identifying family structure assists to examine role allocation and the functions that family members have.The stability of family structure and flexibility to adapt to changes in structure may provide insight into how accommodating and supportive the family will be in providing care for a child in care. | * Describe your family structure.
* How stable and flexible is your family structure?
* What different roles do members of your family play and how will providing care impact on these roles?
* How will your family structure adapt to caring for a child in care?
 | * Interview resource: Genogram
* Interview resource: Ecomap
* Interviews with carer applicants
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***From observations and discussions with Bill and Ann, they are considered to have a stable and committed relationship. They are a contented couple who enjoy being together, creating a home together and sharing everyday experiences. They consider their family structure to be extremely stable as they have a strong commitment to their relationship and are sensitive to each other’s needs.**Bill and Ann are aware that caring for children will result in significant changes in their lifestyle, particularly not being able to spend all their time exclusively together. In view of this, they will involve the children in activities around the home and in any interactions with family, friends and neighbours. They have many ideas about involving children in the different aspects of their lives, ensuring that they feel welcome and part of the family.* |

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| **5.4 Social assessment: Social support** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| 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 foster carer.***Explore:**** the applicant’s current level and sources of support.
* the impact fostering may have on the existing support network; and
* the applicant’s capacity to identify and access additional support if necessary.
 | * Describe the major sources of personal and practical support that you access outside of your family base.
* Why is this support important to you?
* What impact do you think fostering a child in care will have on your support networks?
* Will your existing support system be available / useful to you in your role as a foster carer?
* What additional support do you think might be necessary in the foster carer role?
* Where would you access this support?
 | * Interview resource: Ecomap.
* Interview resource: Support in times of stress.
* Interviews with carer applicant/s
* Training assessment sheets and personal reflections.
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill and Ann are assessed as having a positive support network that is readily available. Their social support includes:** *Their parents: They have good relationships with each other’s parents and Ann’s parents are very supportive of her and Bill becoming foster carers and have provided household items for the children who will be placed in care with them.*
* *a small group of close friends, whom they have contact with at least fortnightly.*
* *Ann’s network of friends through her teaching position who provide her primarily with professional support and some social support.*
* *Bill’s ‘mates’ from work who are committed family people. Bill considers that they are people he could readily confide in. He also has access to a workplace counsellor; and*
* *neighbours, who they often share resources with, and all have children are keen to be supportive of Bill and Ann should they become foster carers.*
 |
| **5.4 Social assessment: Time available to provide the level of care required** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Providing foster care requires a carer to allocate a significant amount oftime to caring for and supporting the child/ren, attending meetings, facilitating family contact etc.***Explore that the carer applicant/s has considered:**** their current time commitments,
* the extra time they will need to meet the needs of a child/ren in care, and
* if they will have/are willing to make time to meet the needs of a child in care.
 | * ow do you currently utilise your time?
* How do your commitments differ between the working week and the weekend?
* How do you think caring for a child will impact on your current time commitments?
* Which time commitments would you be willing /able to modify to give you time to meet the needs of a child in care and fulfil the role of a foster carer?
* Do you believe you will have the time to provide the standard of care required for children in care? i.e., taking children to appointments; facilitating contact; attending case planning meetings; interacting with the child’s school; participating in training and development etc.
 | * Interview resource: Use of time
* Interviews with carer applicant/s
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill and Ann are both considered to have the time available to meet the needs of children placed in their care and are able to adapt their lifestyle to meet required changes to a certain extent.**Bill works hours are flexible and if required he is able to alter his work hours. Family Leave is readily available at his work place.**Ann is a full-time primary school teacher and reports that she has an excellent relationship with other staff. It would be practical if children in their care were able to attend her school where she would be readily available if required during school hours. The school is very supportive of family relationships and there are quite a number of children in foster care who attend the school and staff are familiar with their special needs.* |

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| **5.4 Social assessment: Financial support/stability** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Financial instability can create stress and tension in a carer applicant’s household that may impact on their ability to provide quality care. Assess that the applicant has a regular and sufficient source of income to meet the financial commitments and material needs of family members.Some applicants may also have unrealistic ideas about the nature of the allowances provided by Child Safety to meet the costs of caring. Explore their understanding of the financial support provided by Child Safety. | * Are you in stable employment and/or in receipt of a regular income?
* Is this income sufficient to meet financial commitments and the material needs of family members?
* What is your understanding of the financial support provided to foster carers by Child Safety?
* Do you believe that providing foster care will have a significant impact on your financial situation?
 | * Interviews with carer applicant/s
* Training assessment sheets and personal reflections.
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill and Ann have a realistic view of the amount of financial support provided by Child Safety. They consider themselves to be in a good position financially to support a child who is placed in their care as they have paid off their home and one of their cars. They both have secure employment.* |

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| **Assessment Domain** | **5.5 Relationships** |
| **Link to Policy requirement** | Ability to identify personal experiences, background, current family dynamics and lifestyle, and reflect on how these are relevant to caring for a child in care. |
| **Link to Statement of Standards** | * The child’s dignity and rights will be respected at all times.
* The child will receive emotional care that allows him or her to experience being cared about and valued and that contributes to the child’s positive self- regard.
* The child will receive positive guidance when necessary to help him or her to change inappropriate behaviour.
* The child will be encouraged to maintain family and other significant relationships.
 |
| **5.5 Relationships: Present spousal relationships** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Effective foster carers are likely to share a quality relationship with their partner, where they feel secure and satisfied in their partnership.Explore with applicants the cohesiveness and functioning of their relationship, with a particular focus on how it relates to their capacity to provide care as a team.Where an applicant is in a relationship that is not a spousal relationship, explore the quality of the partnership and how it will impact on the applicant’s ability to provide care. | * How long have you and your spouse been in a relationship?
* Describe your relationship?
* What are the strengths of your relationship?
* How do you communicate, support each other, make important decisions, and resolve conflict?
* What roles do each of you assume in the relationship and how were these established?
* How do you think fostering will impact on your relationship?
* How will you share the responsibility of fostering a child in care and support each other in the foster carer role?
 | * Interview resource: Family relationships
* Interviews with carer applicants
* Observations
* Training assessment sheet and personal reflections s
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Based on the following information, no concerns were raised in relation to Bill’s or Ann’s past relationships impacting on their current relationship:**Bill identified no significant past relationships.**Ann was previously partnered and advised that she and her ex-partner grew apart gradually. Ann chose to leave the relationship when she realised that the relationship was co-dependent and unhealthy.**Ann believes that she has dealt with the difficult and troubling experiences from her past relationship by rediscovering her own interests, independence and strong, positive connections with her family, friends and Bill.* |
| **5.5 Relationships: Parental relationships with children (including adult children not living in the household)** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Positive relationships between a carer applicant and their child/ren may indicate that the applicant is capable of developing and maintaining positive relationships with children and young people.Reflect on the applicant’s relationships with their children to identify approaches and skills that might be applied to building a relationship with a child in care.Problematic or conflictual relationships may not preclude a carer from being assessed as suitable. Explore the reasons for the relationship breakdown and strategies the applicant has taken to resolve or manage the situation.If possible, interviews should be undertaken with the applicant’s children to confirm the information provided by the applicant. | *Applicants** Describe your relationships with your children.
* How would your children describe your relationship with them?
* What are the strengths / challenges in your relationships with your children?
* What impact do you think providing foster care will have on your children and your relationships with them?
* What strategies would you employ to preserve your relationships with your children during potentially stressful times?
* What have you learned from raising your children that you will apply to caring for children in care?
* Applicants children (to be asked age appropriately)
* How would you describe your relationships with your parents?
* What are the strengths and challenges in your relationship with your parents?
* What have your parents done to develop a relationship with you?
* How do you think your parent/s providing foster care will affect your relationships with them?
 | * Interview resource: Family relationships
* Interviews with carer applicants and their children
* Observations
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill and Ann have no children of their own. They explained that they were open to having children though wanted to be well established together and in their own home before having a family. They express the same motivation in relation to becoming foster carers, believing that now is the right time for them.**Bill and Ann have demonstrated positive relationships with children in the following ways:** *They often interact with their friends’ children socially and are godparents to some of them. They both have close relationships with their nieces and nephews. Their friends in the neighbourhood all have children whom they often interact with.*
* *As a primary school teacher, Ann interacts daily with numerous children and has developed many positive skills for relating appropriately to children. Bill considers that one of Ann’s strengths is the “amazing effect” she has on children and that she develops a friendly relationship with Children very quickly. Ann encourages relationships by developing mutual respect and establishing herself “as a friend and someone who cares”. She ensures that she is well informed about the special needs of individual children and researches information to ensure that she responds appropriately to children based on their specific needs.*
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| **Assessment Domain** | **5.6 Health and wellbeing** |
| **Link to Policy requirement** | Ability to provide a safe and stable living environment that is free from harm or risk of harm |
| **Link to Statement of Standards** | * The child’s needs for physical care will be met, including adequate food, clothing and shelter.
* The child will receive emotional care that allows him or her to experience being cared about and valued and that contributes to the child’s positive self- regard.
 |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Significant health issues may present challenges for a carer applicant in providing foster care. Challenges may contribute to instability of the placement or create an unsafe environment for a child in care.Explore health issues of the applicant to assess the impact they will have on the applicant’s capacity to provide care. In some instances, advice from a General Practitioner or specialist may be needed to decide if the health issue can be managed effectively or if the health issue will limit the applicant’s ability to provide foster care.Explore the immunisation status of the applicant and children in their care. Knowing the immunisation status of carers and children in their care can assist with placement matching.Significant health issues and immunisation status may not preclude an applicant from being assessed as suitable, particularly when the applicant can demonstrate that the health issues are managed and will not impact on their capacity to provide quality care. | * Are there any issues related to your health that may impact on your capacity to provide foster care to children?
* If there are health issues, what strategies could you put in place to manage them?
* Describe any matters related to the health of anyone else in your household that may impact on a child in care or on your capacity to provide care to a child in care?
* What strategies could you put into place to manage this?
* Have you had any immunisations as an adult? If yes, please specify.
* Have you received a booster dose of the pertussis (whooping cough) vaccine in the last 10 years?
* Have all children in your care (including your children) been immunised in line with the National Immunisation Program Schedule?
* If requested by Child Safety, will you ensure any child placed in your care is immunised in line with the National Immunisation Program Schedule?
 | * Self-Assessment:
* Carer Applicant Health and Wellbeing Questionnaire
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale** |
| **For example:***Bill and Ann both enjoy good health and fitness and are committed to maintaining this. Whilst they are both medicated to treat health issues, these conditions are not considered to affect their ability to provide care for children, as they are committed to one another’s well-being and attend regular medical reviews. The following information supports this assessment:** *Bill is medicated for the ongoing treatment of depression. He suffered depression in his previous job in Queensland Rail when he was a train driver as this was a highly stressful position. He has since changed positions and views his current job as considerably less stressful. He believes that he is unlikely to experience the same level of depression as he regularly attends visits to his doctor and is working towards ceasing the medication. Bill also monitors himself carefully and has a plan in place to contact the doctor if required. There is some family history of depression.*
* *Ann has a thyroid condition that is controlled by daily medication. She maintains good health and has regular reviews with her specialist.*
* *Bill and Ann are aware of each other’s medical condition, and they work together to ensure that neither becomes vulnerable to health problems.*
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| **Assessment Domain** | **5.7 Stress Management** |
| **Link to Policy requirement** | Ability to identify personal experiences, background, current family dynamics and lifestyle, and reflect on how these are relevant to caring for a child in care. |
| **Link to Statement of Standards** | * The child’s dignity and rights will be respected at all times.
* The child will receive emotional care that allows him or her to experience being cared about and valued and that contributes to the child’s positive self- regard.
* The child will receive positive guidance when necessary to help him or her to change inappropriate behaviour.
 |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Providing care to children in care is a challenging role. Carer applicants must be able to identify how they will cope with the stress and challenges that may develop in the foster carer role.Explore how the applicant has dealt with stressful events or periods previously and how they might utilise these strategies to manage the stress that will come with providing care. | * What is the most difficult thing you have ever had to deal with in your life?
* How did you deal with it?
* What did you learn from it?
* Is there anything creating stress for you or your family members at present and how are you coping with it?
* How do you recognise stress in yourself and respond to it?
* What challenges/stressors do you anticipate will come with the role of foster carer and how will you manager this?
* What support could you access when dealing with the stress of providing foster care?
 | * Interview resource: Support in times of stress
* Interview with carer applicant/s
* Training assessment sheets and personal reflections
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill spoke of two events that were particularly stressful for him. The first being when his parents separated and the second in his profession as a train driver where he experienced near misses, suicides, fights, and objects on the track. He often required staff counselling to debrief, and these situations contributed to his depression.**Ann’s stressful experiences included leaving her home country with her family to move to Australia, and her father and brother’s involvement in a serious car accident, resulting in her father being badly injured and being off work for a long time. She found strength in prayer and by being helpful to others.**Bill knows when he becomes stressed because he tends to have restless sleep and gets headaches. He has learnt to deal with stress and relax by talking things through. Sometimes he finds it helpful to play on the computer or go for a bike ride. When Ann is stressed, she becomes snappy and has disturbed sleep. She has learnt to cope rationally by taking time to stop and think before reacting. She relaxes by reading a book or taking a bath and is committed to healthy eating habits. She focuses on the positive and endeavours to make the best of any given situation.**The applicants have both been able to reflect on their experiences of stress and have developed appropriate strategies to deal with personal stress. They have each acquired the skills to manage difficult and stressful times which will ensure that they are able to maintain a nurturing home environment for children in their care. They were both realistic about the additional stress that caring for a child may trigger and demonstrated insight into strategies they could use to manage this stress, including:** *addressing problems/challenges early before they get out of hand by talking about them to reach a mutual understanding and maintain an openness to different solutions.*
* *taking time out to reflect before reacting; and seeking external support.*
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| **Assessment domain** | **5.8 Capacity to provide quality care** |
| **Link to Policy requirement** | * Ability to provide a safe and stable environment that is free from harm or risk of harm
* Ability to provide a nurturing environment that contributes to a child’s positive self-regard
 |
| **Link to Statement of Standards** | * The child’s dignity and rights will be respected at all times
* The child’s needs for physical care will be met, including adequate food, clothing and shelter.
* The child will receive emotional care that allows him or her to experience being cared about and valued and that contributes to the child’s positive self-regard.
* The child’s needs relating to his or her culture and ethnic grouping will be met.
* The child’s material needs relating to his or her schooling, physical and mental stimulation, recreation and general living are met.
* The child will receive education, training or employment opportunities relevant to the child’s age and ability.
* The child will receive positive guidance when necessary to help him or her to change inappropriate behaviour.
* The child will receive dental, medical and therapeutic services necessary to his or her needs.
* The child will be given the opportunity to participate in positive social and recreational activities appropriate to his or her developmental level or age.
* The child will be encouraged to maintain family and other significant personal relationships
* If the child has a disability – the child will receive care and help appropriate to the child’s special needs.
 |
| **5.8 Capacity to provide quality care: *Parenting style*** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| The way a carer applicant manages their own children or children they have relationships with will be an indicator of how they will manage children and young people in care.Explore parenting style with the applicant to establish if the applicant is likely to provide a safe, stable and nurturing environment to children in care. | *Applicant/s with children** How would you describe your role as a parent?
* What do you think are some of the most important things you as a parent can teach children?
* What aspects of parenting have you found most challenging?
* What are some of the rules/expectations in your household?
* What discipline / behaviour management strategies do you/have used?
* How would you apply your parenting style when caring for a child in care?
* Are your children immunised in line with the National Immunisation Program Schedule?
* Are you willing and able to take children placed in your care for their immunisations when required?

*Applicants without children** Describe any relationships you have with children and young people.
* How do you communicate with children and young people?
* What discipline and behaviour management strategies do you/have you used?
* How do you make children feel respected and understood?
* How would you apply your approach to children to caring for a child in care?
* What are your views on child immunisation?
* Are you willing and able to take children placed in your care for their immunisations when required?
 | * Interview resource: Parenting styles
* Interviews with carer applicant/s
* Observations
* Training assessment sheets and personal reflections
* Referee report – when requested
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| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***As a couple, Bill and Ann have had no experience of nurturing their own children. However, they have learnt from their own parents and friends. Ann comments that her parents have been happily married for 40 years and they were both committed to raising their son and daughter in a stable, happy home where there were clear boundaries and values. Bill’s parents shared the role of raising their three sons and providing a secure home for them until their separation when Bill was 16 years old. From that time he considers his mother carried the most responsibility.**Bill and Ann have reflected on their upbringing and advised that as parents/carers they are committed to:** *readily showing affection to children in their care, more so than their parents;*
* *being constantly available to meet the needs of children in a manner that ensures children feel safe and secure in a stable environment;*
* *encouraging children to experience a broad range of activities and interests;*
* *modelling appropriate communication styles and engaging and interacting with the children at their level;*
* *working together and supporting each other in the caring role to ensure consistency and to promote stability and a sense of belonging for children; and*
* *being well-prepared to meet children’s needs by ensuring they keep themselves well informed.*
* *Both Bill and Ann have positive memories about the methods of discipline their parents used when rearing them. Their method of disciplining children will be guided by key values and practices including:*
* *negotiating rules and consequences with children that are age appropriate and ensuring there is a limit to the number of rules and consequences that apply to everyone in the household;*
* *listening sensitively to children to ensure they feel respected and cared for;*
* *talking through issues to resolve differences in a calm manner;*
* *respecting each other and children in the manner in which they communicate, including having regard for each other’s’ personal space;*
* *never depriving children of anything significant including rewards already achieved through positive behaviour; and*
* *always affirming children for their efforts and achievements.*
* *Bill and Ann are committed to Child Safety’s legislation regarding corporal punishment. Both their parents rarely used physical discipline and Bill reflects that as a method of discipline it was ineffective as a means of teaching good behaviour and tended to create negative emotions like fear and anger.*
 |
| **5.8 Capacity to provide quality care: *Providing care to children and young people in care*** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Children in foster care may present with behaviours that are more challenging to manage than an applicant would expect from their own or other children they have relationships with.Applicants need to be aware of the issues impacting on children and young people in care and be able to employ suitable behaviour management strategies in response to complex behaviour resulting from abuse.Applicants need to be aware that due to the vulnerable nature of children in care, high standards for care are set, that children must receive from carers and Child Safety. These expectations are set out in the Statement of Standards and should be explored with the applicant to establish the extent of their understanding and their capacity to implement the standards in a practical way.Applicants may provide other regulated care services from their home e.g., family day care, stand-alone care | * How do you think caring for a child in care will be different to caring for your own or other children you have cared for?
* Outline your knowledge of the types of abuse / harm that children in care may have experienced?
* How can this harm impact on children?
* How could you help a child in your care recover from the impact of abuse / harm?
* What is your understanding of Child Safety’s legislative stance on corporal punishment for children in care?
* Why do you think these requirements are in place?
* What alternative positive behaviour management strategies could you implement to address complex/difficult behaviour?
* What communication skills would be important?
* How would you demonstrate respect for a child’s right to privacy and confidentiality?
* Reflecting on the Statement of Standards, give examples of ways you would provide quality care to a child in your care.
* How do you think the provision of other care services will impact on your ability to provide quality care to children placed with you?
 | * Interviews with carer applicant/s
* Training assessment sheets and personal reflections
* Interview resource: Statement of Standards
* Interview with Family Day Care Provider that the family day care educator is affiliated with.
* Observations
* Referee reports – when requested
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Information gathered during the assessment and training process indicates that Bill and Ann are assessed as having:** *an understanding and awareness of how children are harmed and the impact of harm on children’s lives and behaviour;*
* *an understanding of how a child’s behaviour may reflect their experience of abuse;*
* *an understanding of the needs of children who have been sexually abused and acknowledgement of the need for careful supervision when these children are interacting with other children to ensure that all children remain safe;*
* *an awareness of how, as carers of children who have been harmed, they will need to build a relationship of trust and respect with children and create an environment where the children feel safe. They acknowledge the time and skill this will take;*
* *the skills and creative ideas for building appropriate relationships with children;*
* *a warm and welcoming home and the closeness and stability within their own relationship that will promote a supportive, nurturing environment for children placed in their care;*
* *the ability to attend to the needs of children in a manner that includes the participation of children in planning activities and making decisions;*
* *a clear understanding of legislation regarding corporal punishment and commitment to never using such means to discipline children in their care. They appreciate how punishing children with physical discipline would only reinforce a child’s experience of abuse;*
* *the skills and ability to use appropriate discipline techniques, such as positive reinforcement and the rewarding of good behaviour. What they consider most important is to talk through issues with children and communicate clearly about any consequences that may be required. They are willing to work with children to problem solve so that children learn to deal with their own issues and resolve conflict through a supportive relationship that builds trust and respect; and*
* *an appreciation of their own need for privacy and space and understanding that children also need space and privacy. Each child will have their own room and they will develop agreements with the children about respecting each other’s privacy. For example, by not entering another’s room without consent or without knocking on the door.*
 |
| **5.8 Capacity to provide quality care:** ***Ability and willingness to provide care that upholds the rights of a child in care as outlined in the Charter of Rights Child Protection Act 1999,*** [schedule 1](https://www.legislation.qld.gov.au/view/html/inforce/current/act-1999-010#sch.1) |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Applicants need to be aware of children and young peoples’ core rights as outlined in the Charter of Rights of the *Child Protection Act 1999.*Explore with the applicant/s the ability and willingness to support a child’s rights especially when they may sit outside their comfort zone, beliefs or understanding. | * What is your understanding of the Charter of Rights for a child or young person in care?
* How would you support a child to speak up if they believe their core rights are not being complied with?
* Explore scenarios: If you attend church on a regular basis and you care for a child who does not have any religious beliefs, how would you manage this?
* How would you respond to a child whose gender identity is different to their assigned sex, or assist them to develop resilience when they experience negative comments from others?
* What is your understanding of the importance of keeping Aboriginal or Torres Strait Islander children connected to family; how would you support their connection to culture?
* What are your thoughts on children and young people having a say in the decision making about their life?
 | * Interviews with carer applicant/s
* Exploration with child currently in the carer’s care (i.e. for an applicant who has been caring for the child as a kinship carer)
* Training assessment sheets and personal reflections
* Interview resource: Charter of Rights
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill and Ann were able to demonstrate that they understood the importance of the Charter of Rights by:** *stating they would ensure the children placed in their care are aware of and understood their rights when it comes to being a child in care especially if they were of an age where they could understand*
* *supporting the children’s beliefs and values to the best of their abilities, even if these beliefs and values differed to their own.*
* *advocate and support children to voice their concerns to themselves or their CSO when they don’t agree with decisions made about their life.*
 |
| **5.8 Capacity to provide quality care: *Capacity to meet the standards of care*** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Applicants are aware of the importance of and their responsibility to adhere to the Standards of care (Statement of Standards) when caring for a child or young person in care. | * Explore with the applicants their understanding of standards of care and ascertain their ability to support and meet the standards.

  | * Interviews with carer applicants
* Exploration with child currently in the carer’s care (ie for an applicant who has been caring for the child as a kinship carer)
* Training assessment sheets and personal reflections
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill and Ann showed an understanding of the standards of care and the importance of ensuring they are meeting these standards when they care for a child, they showed this by:** *stating that they understand that when a child is placed in their care they must work with the department and child safety and support network to ensure the child is cared for in line with the statement of standards*
* *they showed a commitment to ensuring they would provide care in line the standards.*
 |
| **5.8 Capacity to provide quality care: Developing and/or maintaining a positive sense of identity in a child or young person** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Children in care often lack a positive sense of identity which can impact negatively on their self-esteem and development. Applicants need to be aware of the importance of developing and/or maintaining a positive sense of identity in a child and be able to identify ways of doing this. | * What do you believe contributes to a person having a positive sense of identity?
* How could you contribute to developing and maintaining a positive sense of identity in a child in your care?
* How could you help a child in your care to maintain a positive connection to their family and community?
 | * Interviews with carer applicants
* Training assessment sheets and personal reflections
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill and Ann are assessed as having the ability and motivation to develop and maintain a child’s positive sense of identity.* *They would do this by:** *encouraging children in their care to maintain their personal identity in a manner that enables them to feel good about themselves and their individual qualities;*
* *being committed to working with Child Safety to encourage children to maintain contact with their natural family, always ensuring that contact is in the best interest of the child.*

*They advised that they will encourage phone calls and assist with transport where required; and** *actively encouraging and supporting the preservation of memories, particularly for children in care who may have had a lot of instability in their young lives.*
* *They are committed to respecting the belongings a child might consider precious, even clothes they have grown out of or toys and objects that are broken.*
* *They consider photos and other ways of keeping records, like scrap booking, are important means of preserving memorabilia.*
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| **5.8 Capacity to provide quality care: Household Safety** |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| The safety requirements outlined in the *Household Safety Study* are recognised ways to avoid accidents and injuries involving children around the home.Applicants must meet the mandatory safety requirements.Exploration of other safety requirements should have an educative focus and be used to assess the applicant’s commitment to the safety of children in their care and willingness to make adjustments or changes. Where safety issues are identified, work with the carer applicant to identify strategies to address any risks. | * Does your household meet the mandatory safety requirements?
* Were any safety issues identified while completing the Household Safety Study?
* Have you made any changes necessary to ensure the safety of your home?
* If not, what changes still need to be made?
* When and how will these safety issues be addressed?
 | * Self-assessment:
* Home safety checklist
* Household Safety
* Observations
* Training assessment sheets and personal reflections Study’.
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill and Ann’s home and property are assessed to meet mandatory safety requirements.**Refer to Household Safety Study for further detail.** *Their four bedroom lowset home is well fenced on 1.5 acres.*
* *The immediate neighbourhood is quiet and friendly, and their nearest neighbours are mostly young couples with children.*
* *They have two good-natured, child-friendly dogs, a cat and chickens.*
* *Neither Bill nor Ann smoke.*
* *They have no firearms.*

*From observations, Bill and Ann are very safety conscious in regard to children. They have built their home and landscaped their property in a manner that will provide a safe environment for children.* |

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| **Assessment Domain** | **5.9 Capacity to support and maintain an Aboriginal and Torres Strait Islander child’s connection to their family, community, culture, tradition, and language.** |
| **Link to Policy requirement** | Aboriginal and Torres Strait Islander children have a right to be supported to develop andmaintain a connection with the child’s family, community, culture, traditions, and language,particularly where a child is in the care of a non-Indigenous person (connection principle). |
| **Link to Statement of Standards** | * The child’s dignity and rights will be respected at all times.
* The child will receive emotional care that allows him or her to experience being cared about and valued and that contributes to the child’s positive self-regard;
* The child’s needs relating to his or her culture and ethnic grouping will be met.
* The child will be encouraged to maintain family and other significant relationships.
 |
| **Focus** | **Suggested prompts** | **Resources / Sources of Information** |
| Applicants caring for an Aboriginal or Torres Strait Islander child or young person are willing to support the child or young person maintain a strong connection to their family, community, culture, traditions, and language and where required support case planning requirements for the transition/reunification to a more suitable cultural care arrangement such as the child’s family group as per [s83](https://www.legislation.qld.gov.au/view/html/inforce/current/act-1999-010#sec.83) of the CP Act – [Schedule 3](https://www.legislation.qld.gov.au/view/html/inforce/current/act-1999-010#sch.3). | * What could you do to support an Aboriginal or Torres Strait Islander child maintain a connection to their family and culture?
* Do you have an understanding the Aboriginal and Torres Strait Islander child placement principle is and what this would mean for you as a carer?
* Are you committed to providing opportunities for Aboriginal and Torres Strait Islander children to actively participate in cultural activities and celebrations?
* Are you committed to supporting any and all reunifications planning for the child or young person to return to their family group and community?
 | * Interviews with carer applicants
* Exploration with child currently in the carer’s care (i.e. for an applicant who has been caring for the child as a kinship carer)
* Training assessment sheets and personal reflections
 |
| **Based on information gathered, briefly summarise key points and provide your clear assessment and rationale.** |
| **For example:***Bill and Ann’s showed a commitment to support all cultural requirements should they care for an Aboriginal or Torres Strait Islander child or young person by stating that every child and young person should be encouraged and supported to maintain cultural connection with their family and community.**Bill and Ann advised that if they did care need to care for an Aboriginal or Torres Strait Islander child or young person they would need assistance and information on the specific cultural requirements, such as their country and language group from the department and the child’s family, to fully support and maintain the cultural connection and requirements for the child or young person.**Bill and Ann were able to clearly acknowledge the requirement for Aboriginal and Torres Strait Islander children and young people to be with their family group and stated they would positively support any and all reunification requirements to ensure their return home to family and/or community.* |

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| **Assessment Domain** | **5.10 Outcome of referee checks (if applicable)** |
| **Link to Policy requirement** | Ability to provide a safe and stable living environment that is free from harm or risk of harm |
| **Focus** | **Resources / Sources of Information** |
| The conduct of referee checks is discretionary.* Where referee checks have been requested, and the applicant has provided their consent for a referee check via the Discretionary check consent form, contact is to be made with the carer applicant/s to obtain referee details. One referee will be selected by the assessor.
* Referee checks should preferably be done by phone and at the earliest possible time to ensure that there are no delays.
* Referee details are to be recorded on the *Referee Questionnaire for Carer Applicants form* and a summary of the referee report is to be recorded in the *Foster carer applicant assessment and recommendation – Initial approval only* form, which is provided to the applicant/s.
* Consideration of a discretionary referee check should be given when gathering information from, for example, the employer/supervisor of an applicant who works in child related employment.
* Where an applicant has declined to provide consent for a referee check, this is to be noted in the assessment and recommendation form. Advise the applicant that their decision not to provide consent for a referee check may affect their overall suitability decision to be approved as a carer.
 | * Referee Questionnaire for Carer Applicants form
 |
| **For example:***Following a recommendation by the assessor, referee reports were sought from Ann’s work colleagues. The assessor considered that employment related referee reports would add value to the assessment given Ann’s employment as a teacher and her daily interaction with students.**Referee reports provide supporting evidence that Bill and Ann are suitable applicants. The reports are supportive of Bill and Ann’s choice to become foster carers and indicate that they are considered to have “excellent skills” for relating to children and a commitment to the role of being foster carers.* |

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| **Assessment Domain** | **5.11 Outcome of GP medical checks (if applicable)** |
| **Link to Policy requirement** | Ability to provide a safe and stable living environment that is free from harm or risk of harm |
| **Focus** | **Resources / Sources of Information** |
| The conduct of GP medical checks is discretionary.* Where a GP medical check have been requested by the delegated officer, and the applicant has provided their consent for the medical check through the *Discretionary checks consent form* the PSU will forward the *Carer Health and Wellbeing Questionnaire* and the discretionary check consent form to the applicant’s nominated GP for completion.
* Information received by the GP or medical specialist will be considered by the CSSC or PSU manager and discussed with the assessor
* Where an applicant has declined to provide consent for a medical check, this is to be noted in the assessment and recommendation form. Advise the applicant that their decision not to provide consent for a referee check may affect their overall suitability decision to be approved as a carer.
 | * Carer Health and Wellbeing Questionnaire
* GP medical check form
 |
| **For example:***Following a request by the CSSC Manager, a medical check was requested for Bill due to his disclosure of having Hepatitis which is a communicable disease.* |

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| **Section 6 – Foster carer assessment for a specific Aboriginal or Torres Strait Islander child** |
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| **Note: This section is only be completed for applicant’s seeking to be foster carer for a specific Aboriginal and Torres Strait Islander child/ren** **with whom they have a significant relationship, but no cultural connection.**  |
| **Assessment Domain** | **6.2 Relationship to the specific child*** Nature and significance of the applicant’s relationship to the child
* Current or recent contact they have had with the child
* Nature of the applicant’s relationship to the child’s family group
 |
| Link to Policy requirement | Establishing who is a person of significance to an Aboriginal and Torres Strait Islander child, requires a partnership approach with Aboriginal and Torres Strait Islander children and families as they have the expert knowledge about these matters.  |
| Link to Statement of Standards | * The child’s dignity and rights will be respected at all times.
* The child will receive emotional care that allows him or her to experience being cared about and valued and that contributes to the child’s positive self-regard;
* The child’s needs relating to his or her culture and ethnic grouping will be met.
* The child will be encouraged to maintain family and other significant relationships.
 |
| **6.2 Foster carer assessment for a specific Aboriginal or Torres Strait Islander child: *Relationship to the specific child*** |
| **Focus** | Resource / Source of Information |
| If this is proposed to be a new care arrangement for the child:* Explore with the applicant/s their relationship with the child or young person such as:
	+ How long they have known the child or young person, and have they had regular contact with the child or young person during over this period of time?
	+ What is the nature of their relationship with the child or young person and how do they see their relationship as being significant to the child or young person?
* What concerns does the applicant have about becoming a carer for the child
* What is the nature of other household members contact with the child?
	+ What has been discussed with household members about the proposed carer arrangement?

If the carer is currently caring for the child as a kinship carer:* Explore the carer’s experience of being the child’s carer
	+ what has worked well
	+ what has been challenging
 | * Interviews with carer applicants
* Information from the child’s family group (where this can be provided by the child’s CSO)
* Discussion with other household members
 |
| **6.3 Foster carer assessment for a specific Aboriginal or Torres Strait Islander child: *The child’s views*** |
| F**ocus**  | Resource / Source of Information |
| * Outline child’s perspective about the quality and importance of their relationship with the carer applicant.
	+ Explore how well they know the applicant?
	+ What are their earliest memories about them; their fondest; their recent memories?
	+ What has been the nature of this contact eg visiting their home, staying over at their place
	+ What are some examples of how important this person is to the child.
* Explore the child’s views about living with the applicant.
	+ What does the child think would be good about living with them?
	+ What worries do they have if they were to live with the carer applicant?
 | * Information from the child (this may be provided by the child’s CSO)
* Information from the child’s family group (where this can be provided by Child Safety practitioner
 |
| **6.4 Foster carer assessment for a specific Aboriginal or Torres Strait Islander child: *Additional supports*** |
| **Focus**  | **Resource / Source of Information** |
| * Identify what supports may help the applicant provide (or continuing providing) care to the child.
	+ Discuss the challenges to caring for the child and how these could be (or were) managed by the carer.
	+ Did the carer ask for help? Who provided the help sought?
	+ With the advantage of hindsight, what are the applicants views about what could have assisted the carer or child at the time? .
 | * Interviews with carer applicants
* Information from the child and/or the child’s CSO
* Information for the carers support worker (if the application relates to a continuing care arrangement for the child)
 |
| **6.5 Foster carer assessment for a specific Aboriginal or Torres Strait Islander child: *Confirm the applicant’s preference regarding their Certificate of approval*** |
| **Focus Resource / Source of Information** |
| * Explore their understanding about a condition placed on their certificate of approval, to care only for the specified child. Make sure the carer has made this decision themselves.
	+ Use their own words about why they prefer to have a condition specifying the
	+ name/s of the child/ren they are approved to care for (if approved).
 | * Interviews with carer applicants
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| **Rationale for recommendation** |
| **Based on information gathered throughout the assessment process, briefly provide a rationale for recommendations.** |
| **Example:***Bill and Ann are recommended for approval based on the following reasons:** *they enjoy a stable, committed relationship in which they model good communication skills and the ability to resolve conflicts appropriately;*
* *their home is a warm and welcoming environment that will enable children in care to develop a sense of belonging;*
* *they are committed to providing a safe environment for children where there is no risk of harm;*
* *Bill and Ann have a broad range of practical skills which will allow them to interact appropriately and effectively with children;*
* *they enjoy interacting with children and have nurturing dispositions which will enhance children’s self-regard;*
* *they have a clear understanding of child protection legislation and of their role and responsibilities as foster carers*
* *they have the willingness and skills to work collaboratively as part of a team with Child Safety and agency staff;*
* *they are committed to family and will be supportive of children in their care having contact with their natural family; and*
* *their family and friends are supportive of them becoming carers and are will readily assist them as required.*
 |