



Foster Carer Applicant Assessment and Recommendation Form Initial Approval Only

Privacy Notice and Disclosure Statement

The Department of Child Safety, Seniors, and Disability Services (Child Safety) is collecting the personal information on this form for the purpose of assessing the carer applicant/s for consideration to become approved foster carers. The collection of this information is authorised by the *Child Protection Act 1999* and the *Child Protection Regulation 2023*. Your personal information will be treated in accordance with the *Information Privacy Act 2009*.

Under the *Children's 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 in your care as an approved foster or kinship carer, such as long-term Child Protection Orders.

A copy of the completed report will be provided to the carer applicant/s prior to finalising the approval process and information will be provided to the foster and kinship care service.

Assessment details

Applicant 1 Name		Date of Birth	
Applicant 2 Name		Date of Birth	
Date of Application		ICMS ID Number	
Expiry Date of Application	Enter date	Was an extension granted?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Child Safety Service Centre / Foster and Kinship Care Service Details

Child Safety Service Centre			
Foster and Kinship Care Service <i>(if applicable)</i>			
External assessor's business name and contact details <i>(if applicable)</i>			
Report compiled by		Departmental / Agency position	
Signature		Date	Enter date

Sources of Information

Mandatory Information:

<input type="checkbox"/>	Training Outcomes	<input type="checkbox"/> N/A	Foster carer – specific child only
<input type="checkbox"/>	Interview with applicant/s		
<input type="checkbox"/>	Interview with household members		
<input type="checkbox"/>	Carer Applicant Health and Wellbeing Questionnaire		
<input type="checkbox"/>	Household Safety Study		

Additional sources of information (discretionary):

<input type="checkbox"/>	GP Medical check	
<input type="checkbox"/>	Referee reports	
<input type="checkbox"/>	Other (please specify)	

1. Demographics

Family Name:

September 2023



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1.1 Residential Address	
Applicant 1	
Applicant 2	

1.2 Personal details and household members		
Have the applicant/s personal details or household member/s details changed since the APA Initial was lodged?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, outline details of any change		

1.3 Family Genogram

2. Employment		
	Applicant 1	Applicant 2
Employment Status	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Casual <input type="checkbox"/> N/A	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Casual <input type="checkbox"/> N/A
Current Employer		
Employed since		
Occupation		
Hours of work		
Pension details		
Outline previous employment details for the past 5 years, where current employment is less than 5 years.		
<i>(Include employer, employment status and length of employment)</i>		

3. Assessment Interviews

Applicant 1 - Interviews

Date	Duration
Enter date	
Enter date	
Enter date	
Comments	

Applicant 2 - Interviews

Date	Duration
Enter date	
Enter date	
Enter date	
Comments	

Other interview participants

Please provide information relating to interviews conducted with other individuals. Such as other household members and applicant's children. Include the rationale as to why the other individuals were interviewed. Where there are more than 4 other interview participants (in addition to the applicants) please complete and attach another page.

Name	
Relationship to applicant	
Interview date	Enter date
Duration	
Comments	

Name	
Relationship to applicant	
Interview date	Enter date
Duration	
Comments	



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Name	
Relationship to applicant	
Interview date	Enter date
Duration	
Comments	

Name	
Relationship to applicant	
Interview date	Enter date
Duration	
Comments	

4. Training					
Applicant 1			Applicant 2		
Has the carer completed required Getting ready to start training modules?			Has the carer completed required Getting ready to start training modules?		
Foster carer – specific child only	<input type="checkbox"/> N/A		Foster carer – specific child only	<input type="checkbox"/> N/A	
1. Context of foster care	<input type="checkbox"/> Yes	<input type="checkbox"/> No	1. Context of foster care	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Understanding the past for a child or young person	<input type="checkbox"/> Yes	<input type="checkbox"/> No	2. Understanding the past for a child or young person	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Early days in care arrangement	<input type="checkbox"/> Yes	<input type="checkbox"/> No	3. Early days in care arrangement	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Quality Care – working together	<input type="checkbox"/> Yes	<input type="checkbox"/> No	4. Quality Care – working together	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the applicant met required competency in the Foster Carer Training Modules?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Has the applicant met required competency in the Foster Carer Training Modules?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Additional comments regarding training					

5. Assessment Domains

The information presented in this section should be a summary of your assessment based on all information gathered and should be brief (no more than a few paragraphs per topic). All reports and interview questionnaires should be placed on the applicant's file. For more detail regarding the information to be included under each of the domain headings below, see [*Guidelines to completing assessment – Initial approval only*](#)

Where there are two applicants, information on both applicants should be provided under each domain heading.

5.1 Motivation to foster

5.2 Household members

5.3 Personal background

- Childhood experiences
- Significant life events experiences

5.4 Social Assessment

- Family structure
- Social support
- Time available to provide the level of care required
- Financial support / stability

5.5 Relationships

- Present spousal relationship
- Significant past relationships
- Parental relationships with children (including adult children not living in the household)

5.6 Health and Wellbeing

- Health concerns
- Immunisations

5.7 Stress Management

5.8 Capacity to provide quality care

- Parenting style
- Providing care to children and young people in 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](#)
- Capacity to meet the standards of care
- Developing and/or maintaining a positive sense of identity in a child or young person
- Household safety
- Immunisation (if anti-immunisation, are the carers willing and able to take children placed in their care for scheduled immunisations).

5.9 Capacity to support and maintain an Aboriginal and Torres Strait Islander child's connection to their family, community, culture, tradition, and language.

Yes

No

5.10 Ability to work as part of a team

5.11 Were referee checks requested? (If yes, provide responses below)

Yes

No

5.12 Was a GP medical check requested? (If yes, provide outcome details below)

Yes

No

5.13 Other relevant issues

(Please provide details of any relevant issues that may impact of the carer/s ability to provide care)

6. Foster carer assessment for a specific Aboriginal or Torres Strait Islander child

ONLY complete fields 6.1 to 6.5 when the applicant is seeking to care for a specific Aboriginal or Torres Strait Islander child and they:

- are not a relative of the child or recognised as kin under Aboriginal tradition or Island custom
- are recognised by the child or their family group as person significant to the child
- do not have a cultural connection to the child and is not kin (refer to the *Child Protection Act, schedule 3*).

Is this Foster carer assessment for a specific child/ren?

Yes

No

If yes add child/ren details below.

6.1 Specific child/ren details

Name	DOB	CSSC	CSO	Cultural identity	Current intervention type	Current Case plan <i>(if Yes attach case plan)</i>
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No

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.

Where there are two or more applicants, complete for each applicant.

6.3 The child's views

If the child's CSO has not obtained the child's views, the assessor may, in consultation with the CSO and the child's safety and support network, arrange to talk with the child to seek their views about the care arrangement. If appropriate, record the child's views using their own words.

- About the significance of their relationship with the applicant
- Their thoughts and opinions about living with the proposed carer applicant.

6.4 Additional supports

Document any support and development needs that will assist the applicants to be culturally responsive.

6.5 Confirm the applicant's preference regarding their Certificate of approval

Clarify that the applicant prefers to only be available to care for the specific (and named) Aboriginal and Torres Strait Islander child/ren, and they understand this will be a condition of their approval (if approved). If the applicant is instead wanting to be a foster carer for any child, make this clear.

Rationale for Recommendations

Reflecting on the Statement of Standards (below), summarise the information gathered during the assessment process, to validate your recommendation. This includes highlighting the strengths of the applicant/s that will assist them to meet the standards of care of the challenges that might present concerns. Please provide evidence for conclusions made (e.g. quotes, observations, corroborations or relevant research).

Statement of Standards (Section 122 of *Child Protection Act 1999*)

1. The chief executive must take reasonable steps to ensure a child who, for the purposes of this Act, is placed in the care of an approved foster carer, licensed care service or departmental care service, is cared for in a way that meets the following standards (the "statement of standards")
 - a) The child's dignity and rights will be respected at all times;
 - b) The child's needs for physical care will be met, including adequate food, clothing and shelter;
 - c) 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;
 - d) The child's needs relating to his or her culture and ethnic grouping will be met;
 - e) The child's material needs relating to his or her schooling, physical and mental stimulation, recreation and general living will be met;
 - f) The child will receive education, training or employment opportunities relevant to the child's age and ability;
 - g) The child will receive positive guidance when necessary to help him or her to change inappropriate behaviour;
 - h) The child will receive dental, medical and therapeutic services necessary to meet his or her needs;
 - i) The child will be given the opportunity to participate in positive social and recreational activities appropriate to his or her developmental level and age;
 - j) The child will be encouraged to maintain family and other significant personal relationships;
 - k) If the child has a disability – the child will receive care and help appropriate to the child's special needs.
2. For subsection (1)(g), techniques for managing the child's behaviour must not include corporal punishment or punishment that humiliates, frightens or threatens the child in a way that is likely to cause emotional harm.
3. For subsection (1)(j), if the chief executive has custody or guardianship of the child, the child's carer must act in accordance with the chief executive's reasonable directions.
4. The application of the standards to the child's care must take into account what is reasonable having regard to –
 - a) the length of time the child is in the care of the carer or the care service; and
 - b) child's age and development

6.1 Rationale for recommendations

1. Legislative Requirements

Are you satisfied that the applicant meets the below **legislative requirements for approval**:

Section 135(1)(a) of the *Child Protection Act 1999*

- i. is a suitable person to be approved as a foster carer, *and*
- ii. all members of the applicant's household are suitable persons to associate on a daily basis with children; *and*
- iii. each adult member of the applicant's household hold a working with children authority; *and*
- iv. is able to meet the standards of care in the Statement of Standards; *and*
- v. is able to help in appropriate ways towards achieving plans for the protection of a child placed in their care;

and

Part 8 s23 of the *Child Protection Regulation 2023*

- a) Does not pose a risk to the child's safety; *and*
- b) Is able and willing to protect a child from harm; *and*
- c) Understands and is committed to the relevant principles; *and*
- d) Has completed any training reasonably required by the chief executive to ensure the person is able to care properly for a child.

Yes

No

8. Policy Requirements

Are you satisfied that the applicant/s has met the following criteria for suitability / approval?

- 1. 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.
- 2. Ability to provide a safe and stable living environment that is free from harm or risk of harm.
- 3. Ability to provide a nurturing environment that contributes to a child's positive self-regard.
- 4. Ability to work as part of a team that includes the child, their family, Child Safety and other relevant service providers.

Yes

No

9. Recommendation

APPROVAL RECOMMENDED		<input type="checkbox"/>	APPROVAL NOT RECOMMENDED		<input type="checkbox"/>
If approval is recommended, is the approval subject to any reasonable conditions?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If approval is not recommended, are there steps that could be taken to address concerns?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, outline the recommended condition/s. If relevant, include a condition (in line with the applicant's preference) to only care for [Insert child/ren's name], who is an Aboriginal or Torres Strait Islander child with whom they have significant relationship with, but otherwise they do not meet the legislative definition of kin.			If yes, what steps would need to be taken to address concerns?		

10. Foster and Kinship Care Manager - Endorsement of Assessment <i>(if applicable)</i>			
Has this assessment been completed by a Foster and Kinship Care agency or outsourced to an external assessor by a Foster and Kinship Care agency for completion?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If yes, the Foster and Kinship Care Manager is required to provide their endorsement and recommendation for this assessment to progress to the required Child Safety Service Centre (CSSC) Manager for approval:</i>			
Has the Foster and Kinship care manager read, and quality assured this assessment?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the Foster and Kinship care manager supportive of this assessment being sent through to the CSSC Manager for approval?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Manager Name			
Date endorsed	Enter date		
11. Care Arrangement Considerations			
<i>Is the carer being assessed for a specific child/ren:</i>	<input type="checkbox"/> Yes...progress to next question	<input type="checkbox"/> No...complete the below	
Detail the applicant's views on the care arrangement types that they believe would best match their strengths.			
<i>Is the carer being assessed for a specific child/ren:</i>	<input type="checkbox"/> Yes...progress to next question	<input type="checkbox"/> No...complete the below	
Recommendations regarding appropriate care arrangements during the next approval period.			
Recommendations for meeting the applicant's support and development needs during the next approval period.			

12. Applicant Signature and Comments			
A copy of the <i>Foster Carer Applicant Assessment and Recommendation Form – Initial Approval Only</i> has been provided to the applicant/s.		<input type="checkbox"/> Yes	<input type="checkbox"/> No
The applicant/s has read the assessment and recommendation and has had the opportunity to make additional comments below.			
Applicant 1	I have read and understood the privacy notice and confirm that the information is correct.	Applicant 2	I have read and understood the privacy notice and confirm that the information is correct.
Signature	<div style="background-color: #e0e0ff; width: 100%; height: 30px;"></div>	Signature	<div style="background-color: #e0e0ff; width: 100%; height: 30px;"></div>
Name		Name	
Date	Enter date	Date	Enter date
Additional comments by applicant		Additional comments by applicant	