Practice Paper
Assessment of foster carer applicants
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Queensland Government
Department of Child Safety
Introduction
A review of foster care outcome research and current practice throughout Australia, New Zealand and the United Kingdom has shown a need for a standardised and evidenced-based foster carer screening model. Initial screening processes need to allow for early identification of inappropriate applicants and all household members need to be involved in the assessment process. The focus of the assessment needs to be on the applicant’s demonstrable knowledge, skills and abilities; as well as the applicant’s ability to reflect on how their experiences, views and behaviour may impact on their ability to provide for a child in care.

In this practice paper the term ‘worker’ refers to either a departmental officer or a fostering agency staff member.

Framework
Assessment frameworks used by other jurisdictions consistently include the following topics:
- motivation;
- social supports;
- relationships;
- parenting style;
- childhood history;
- stress management;
- household safety;
- referee and health checks;
- applicants understanding of harm;
- cultural awareness; and
- teamwork.

The foster carer screening and assessment model described, incorporates the above information and ensures an open, accountable and transparent framework. Importantly, the assessment model means that the worker undertaking the assessment and the applicant/s work together in partnership to recognise the carer’s strengths and reflect on how this will impact on caring for a child in care. If done well this means that the decision about approval can be arrived at jointly, although the ultimate decision making responsibility still lies with the department. The decision is informed by evidence, which has been collected from a variety of sources, including:
- the outcomes of personal history checks for the applicant/s and other household members;
- other reports and assessments which the applicant/s is able to provide, including information from other jurisdictions if the applicant has been previously approved to provide foster care;
- observation of the applicant/s, family interactions and the physical enviromment, both in interviews and in any other interaction with the worker;
- resources utilised through the assessment process; and
- the applicants participation in training, both from written worksheets and Personal Reflections materials as well as from the observations of trainers.

Purpose of assessment
The purpose of the assessment of foster carer applicants is to ensure that members of the community who apply to become foster carers are assessed and approved in accordance with the Child Protection Act 1999, to provide safe and accountable care environments for children and young people who are subject to statutory child protection intervention.
Principles

Assessments of foster carer applicants will be conducted in a way that ensures the:
- safety of all children placed with approved foster carers;
- provision of accurate and timely information;
- collection of accurate and useful information;
- accurate recording of information, which will avoid duplication; and
- privacy of the foster carer applicant.

Principles that underpin good assessment practice include:
- welfare practice, for example, The Australian Psychological Society/Australian Social Work Ethical Guidelines;
- fairness, objectivity and non-judgmental attitudes;
- awareness of the impact of culture and values on both the assessor and the applicant;
- clarity of roles, expectations and privacy limitations;
- flexibility to cater for individual differences;
- openness and respect;
- a two-way process of information sharing and provision;
- transparent processes;
- honesty and directness, including the courage to bring up difficult or challenging issues in a straightforward manner and share observations and conclusions, even if applicants may find them confronting;
- inclusiveness, including sharing processes and outcomes wherever possible;
- confidentiality;
- maintaining boundaries and a sense of purpose, in that the assessment is goal-directed and does not become a counselling and support function; and
- referral and follow-up when needed.

Assessment criteria

Approval will be granted to an applicant who, in accordance with the Child Protection Act 1999, section 133 and the Child Protection Regulations 2000, section 9:
- is a suitable person to be an approved foster carer, and all members’ of the applicant’s household are suitable persons to associate on a daily basis with children; and
- is able to meet the standards of care in the Statement of Standards; and
- is able to help in appropriate ways towards achieving plans for the child’s protection; and
- does not pose a risk to the child’s safety; and
- understands, and is committed to, the principles for administering the Child Protection Regulations 2000; and
- has completed any training reasonably required by the chief executive to ensure the person is able to properly provide the care; and
- understands the policies and procedures implemented by the chief executive to ensure the care meets the standards of care in the Statement of Standards.

In addition, the applicant must meet the following criteria:
- the 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;
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- the ability to provide a safe and stable living environment that is free from harm or risk of harm;
- the ability to provide a nurturing environment that contributes to a child’s positive self regard; and
- the ability to work as part of a team that includes the child, their family, the department and other relevant service providers.

Phases of assessment

Foster carer intake

Key research findings indicate that:
- the immediacy of the response to the initial inquiry was critical in the recruitment of foster carers;
- often the most suitable applicants are easily dissuaded if they think that they are not needed;
- it is often the least suitable applicants who are the most persistent;
- timely follow up (within a few days) is a major determinant of whether people will go on to be approved carers;
- personal follow up (a home visit, or personal telephone call, as opposed to a form letter) is extremely important – it also offers a beginning point for assessing the applicant;
- the quality of engagement at this point can save a lot of resources in training and assessment, if applicants are given enough information to make realistic decisions about whether to proceed or self-select out; and
- those persons who go on to be foster carers have often considered fostering for a long period, and may have sought information at different stages of their life and needed time to reflect on the information.

The initial inquiry is a vital stage of the assessment and screening process, as it allows:
- for an educative role with regard to the role and need for foster carers;
- information sharing as to the range of foster carers needed, including the need for respite, short and long term carers, as well as carers for children and young people from varied backgrounds and with ranging needs;
- the collection of information which will inform the assessment and allow for early screening to occur, thus reducing the unnecessary use of resources later on; and
- an opportunity for early self-selecting out, should this be appropriate.

Household Safety

Once applicants have begun to be informed about fostering and have decided to explore the idea further, the second phase of assessment will occur, which is the Household Safety Study. The information included in the Household Safety Study will be collected through an initial home visit and self-assessments conducted by the applicants.

The safety of the household is an important aspect of assessment, ensuring the safety of any children and young people placed with foster carers in the future. The chief executive has an obligation to take all reasonable steps to give effect to the terms of the Statement of Standards outlined in the Child Protection Act 1999, section 122. The department must be seen to be a model guardian for those children who are in the care of the chief executive and in maintaining that high standard it may be that standards are imposed which might go beyond the expectations of many...
parents. The safety requirements, including the mandatory safety requirements outlined in the Form 2: Household Safety Study, are recognised ways to avoid accidents and injuries around the home. The department must ensure children and young people's safety whilst they are in the care of the department.

In addition, conducting the Household Safety Study early in the assessment process:
- provides important information as to the appropriateness of the household for fostering;
- provides an indication as to the applicant’s commitment to fostering and willingness to make adjustments/changes; and
- allows for early screening of inappropriate applicants and avoids unnecessary use of resources, such as avoiding further screening, assessing or training an applicant who does not meet the mandatory safety requirements.

The Household Safety Study aims to prevent injury to children and young people in foster care placements and covers the following topics:
- fires safety;
- water safety;
- indoor safety;
- outdoor safety;
- sun safety;
- vehicle safety;
- SIDS;
- pets safety; and
- other.

These topics are based on research into preventable childhood injury, which shows that:
- almost 60% of all injuries to children in Queensland occur in the home;
- more than half of the injuries were to pre-school age children;
- children encountered different hazards around the home depending on their developmental stage;
- for children under one year the most common injury causes were falls, poisoning and burns;
- children in the 1-4 year age group were most commonly injured by falls, poisoning and by striking or collision with objects; and
- older children in the 5-14 year age group presented most commonly with falls, collisions and cuts. They were most likely to be hurt in the garden, trampolines and bicycles often involved in their injuries.

“Almost 60% of all injuries to children in Queensland occur in the home. Of these, 40% can be attributed to falls with poisonings and burns other significant causes of nonfatal injury. These three issues along with drowning, the most common cause of injury death in the home, have been identified as priority areas at a national and state level. Significant childhood injury prevention is possible in the home environment...With the application of specific environmental modifications particular patterns of predictable injury can be reduced.” (Injury Bulletin, 2001, Injuries in the home—children, No 66, June.)
Assessment

1. Gathering evidence to inform the assessment

The assessment of foster carer applicants is a process of collecting information about the applicant’s abilities and potential to provide foster care and then making a recommendation about their suitability based on an assessment of the information collected.

There are a variety of ways to collect the information, including
- using ecomaps and lifelines;
- observation;
- interviews; and
- handouts and questionnaires.

In addition, information can be collected from the following:
- referee reports;
- household safety assessment;
- medical assessments;
- outcome from attendance at training; and
- outcome from personal history checks.

2. Assessing skill sets

Assessing the capacity of an applicant to fulfil the requirements of the Child Protection Act 1999 and meet the assessment criteria presents some challenges to deficit-based assessment models, which are usually focused on describing needs rather than highlighting skills.

Foster carer assessment is also predictive, in that an attempt is made to provide evidence relating to the applicant’s experiences and actions in other contexts, and draw conclusions as to how this will impact on their ability to provide foster care - both positively and negatively.

For example, the worker may assess how:
- an applicant has managed a blended family, and use this as an indicator of how they might manage the introduction of new children into the household;
- a separated parent has dealt with the role of the non-custodial parent, and use this as an indicator on how they might deal with contact visits between a child and their parents; and
- an applicant has managed their relationship with their own adolescent children as an indicator of how they will relate to young people in care.

Rather than generally assessing the personal qualities and attributes of an applicant, assessing an applicant’s “skill set” means:
- linking the skills and attributes which an applicant demonstrates back to the skills and attributes that are necessary to provide quality foster care;
- seeing skills in a developmental context, for example, the applicant's current skills, what skills need to be developed, what can be inferred from past experiences and similar roles and what can be predicted by attitudes and explanations;
- realising that the skills involved in fostering are spread across the many aspects of the role and strength in some areas or skills does not necessarily mean strength in others. For example, skills in working with other stakeholders in a statutory context are different from skills in providing daily care; skills in advocacy and assertiveness are different to
skills in managing a household environment; general social skills ( amiability, openness, friendliness) are different to skills in managing a range of complex tasks; skills in self care and self knowledge are different to skills in communicating with children. Mapping these skills across many domains with a realistic eye to both the strengths and the deficits of the applicant is part of building a thorough assessment.

3. Holistic assessment

Foster care assessment is more than balancing perceived strengths against weaknesses or vulnerability’s and then totalling the “pluses” and “minuses”. A holistic assessment links strengths to negative life experiences and measures the resolution of hardship, disadvantage and pain rather than the event itself. Most importantly, the applicant and the worker must be able to reflect on how this experience may impact on caring for a child in care.

Sometimes the factors that motivate and empower carers are the same ones which present challenges or appear to undermine their suitability of others. When examining these areas with applicants, the worker needs to see them as a start to the growth process and consider whether:

- there are any unresolved issues which may cause difficulties;
- any lessons have been learned;
- there are patterns of behaviour; and/or
- insight into patterns of behaviour is evident.

Sometimes a person’s awareness of the journey (process) is more important than their supposed destination (outcome) in resolving grief, pain or life experiences.

Resources can be drawn upon by the worker to facilitate a better assessment, particularly when confronted by issues that are new or complex. These resources can include:

- tools, for example, strengths cards or questionnaires;
- assessment technologies and methodologies (the use of genograms and ecomapping);
- participation in training, both from the written worksheets and Personal Reflections materials as well as from the observations of trainers;
- information gained from journal articles and books; and
- contact people and experts in other sectors and organisations or specialist units and services (for example, for consulting on issues such as domestic violence, the impact of sexual abuse on adult survivors, the effects of disability on parenting, specific health conditions).

Evidenced-based resources have been developed for workers to use which rely on a range of sources to collect information and these can be accessed at www.childsafety.qld.gov.au/fostercare/regulation/. The use of these resources is optional and workers are able to use other resources in order to assist them to collect the information to inform the assessment.

Knowledge allows the worker to look for patterns, employ theories and perspective’s, draw conclusions and link assessment to an evidence-based body of research and practice, for example:

- ecological and systems theories;
- research on outcomes for children and young people in care;
- Awareness of cultural issues;
- models of family functioning; and
- feminist and other critiques of welfare practice.
Values enable the worker to connect with the experiences and issues that are presented by applicants and give us insight into the assessment process. These factors have the potential to impact both negatively and positively on an assessment and the worker needs to critically engage with them as a practitioner, for examples:

- personal experiences of being parented;
- life experiences outside of the welfare sector;
- culture;
- personalities, interests and lifestyle;
- values about families, child protection and fostering;
- gender and sexuality; and
- ability to maintain an open and accepting attitude while addressing issues clearly.

Renewal

A foster carer will initially be approved for a 12 month period. After this period, the department will invite the carer to apply for renewal of approval and carers wishing to continue must respond with an application. An assessment of suitability similar to the original assessment is then undertaken. The Form 3b: Carer Applicant Assessment Recommendation Form – Renewal of Approval Only will be completed by the worker and the Form 4: Approval Decision is again completed by the child safety service centre manager. The major difference in this phase is the focus on placement experiences and how the carer has demonstrated an ability to care for children and meet the requirements of the relevant sections of the Child Protection Act 1999.

The assessment report

The Form 3a: Carer Applicant Assessment and Recommendation – Initial Approval Only leads to a clear recommendation as to an applicant’s suitability. This recommendation is the focus of the document. All other information leads to and informs the recommendation.

When completing the Form 3a: Carer Applicant Assessment and Recommendation – Initial Approval Only:

- provide summaries under each topic, using dot points;
- systematically addresses the criteria for approval;
- use diagrams (eg genograms, timelines) when helpful;
- draw direct quotes from supporting documents if necessary; and
- draw on research and other sources if necessary.

Remember, the Form 3a: Carer Applicant Assessment and Recommendation – Initial Approval Only is a tool. Interviews and assessing procedures should follow a different format with information gathered in a natural and logical style. Should information come up during one aspect of the assessment, continue the interview and return to the issue at a later point.

It is important that the report identifies each source of information. Workers are expected to add comments and observations that draw on your skills. This is achieved by separating direct quotes and observations from interpretive comments- eg, “the applicant said xxxx”, “I observed xxxx in an interaction between the applicant and their spouse”, “this has lead me to conclude that xxxx”.

Ethical issues
In order to maintain professional objectivity, workers are required to establish clear professional boundaries that safeguard against subjectivity and over-identification with the applicants. Any real, perceived or potential conflict of interest (for example previous or current contact with applicants either socially or in a work context) must be discussed with the team leader at the commencement of the assessment, or as soon as possible after the potential or actual conflict of interest is identified.

The Child Protection Act 1999, section 187 states that information obtained by the persons involved in the administration of the Act must not be disclosed or given to anyone else. The person may disclose the information to the extent necessary to perform the person’s functions, if the disclosure is for the purposes directly related to a child’s welfare or if the disclosure relates to the functions of cooperating with government entities that have a function relating to the protection of children, or is otherwise permitted by law.

The Federal Government has enacted the Privacy Act 1988 (Commonwealth). Whilst the Queensland Government currently has no privacy legislation, it has made a commitment to protecting the privacy of people via an administrative privacy regime. The administrative privacy regime introduced by the Queensland Government is designed to provide people with confidence that personal information collected about them will be collected fairly, stored securely and used for purposes that they know about. If information is shared with others, they will have been advised to whom their personal information is disclosed.

Therefore, throughout the application and assessment process, and when requesting information from applicants, or from people providing information about an applicant, the applicant must be advised that the information they provide during the assessment process will be kept confidential unless the sharing of such information is a required part of the assessment process or child protection concerns arise. The applicants must be advised that information will be recorded into an assessment report, and who will have access to this report and receive copies of the report.

Personal perception of issues, “warning signs” and gut feelings about applicants are sometimes a starting point for looking deeper into specific areas, but they should never be considered without a careful assessment of the workers own values, and without being aware of personal and professional experiences. A good assessment framework rationalises the place of intuition and positions it as a legitimate professional tool, but one which needs to be validated (or challenged) from more objective sources.

Uncertainty and doubt are part of the assessment process. Deception and misleading statements, ambiguity and avoidance are all elements of communication and may be presented by applicants during the assessment. Whenever possible, these issues should be addressed during the course of the assessment.

The worker should acknowledge uncertainty and doubt directly by highlighting inconsistencies or by relaying their impressions (for example, “you told me that you are opposed to drinking and do not consume alcohol at all. I did, however, note many crates of beer bottles under the house when I walked in…”). Remember that this needs to be justifiable and the observation able to be shared with the applicant, both during the assessment and once they have access to the written document.

Similarly, some applicants may refuse to discuss some issues and may relay little or no information about significant elements of the assessment.

Ultimately, the worker does not have the ability to accurately measure the truth content of every statement an applicant makes, and is not expected to. By clearly establishing expectations with the applicant and taking the time to build trust and rapport, the worker should be able to form an overall picture of the extent to which an applicant has engaged in the process. The written
assessment should comment on this. If a person will not answer a direct question, or provides ambiguous or misleading responses this can only be cited this in your report.

Engaging with applicants and collecting information is only one element of completing a foster carer assessment. The ability to present this information so that it is clear and accessible is essential to the process.

Common problems faced by workers during an assessment

The following section provides the worker with information that will assist them to address problems that may arise during the assessment process.

Problem: Interviews take a long time.
- Review the information already gathered and plan the interviews.
- It could be that some applicants require more time than others to process the information and consider whether fostering is right for them.
- Discuss the issue with the applicants and explore whether the process is the problem, or if the applicants wish to put their application on hold to further consider their options.
- Be more direct in the interview sessions. Advise the applicants how long you will spend together and set an agenda with the applicants about what will be discussed.
- Don’t just follow the forms or resources as an interview format - follow the natural flow of the interview to gather the information needed and then use to inform the assessment report.

Problem: Information is conflicting.
- Identify where the conflict has come from and consider the reliability of the information.
- Compare the information to that collected from a range of other sources including observations, interviews and referee checks.
- Discuss the conflicting information with the applicants.

Problem: The applicant’s children are not happy about the idea of fostering.
- Discuss the issue with the applicants. It may be that the parents have not fully discussed fostering with the children and they require more information and time to consider.
- Accept the children’s views as valid and assist the applicants to consider their options, including placing their application on hold or consideration of other options to fostering which will better suit their situation.

Problem: The report is very long.
- Read assessment reports prepared by other workers.
- Ensure that information is not repeated throughout the document.
- Ensure that it is a summary of information and refer to supporting evidence where appropriate.
- Start with the evidence then link to assessment criteria.

Summary

The worker is not required to make a decision but needs to provide sufficient information for the delegated decision-maker to do so. If the workers recommendation is uncertain, or the worker cannot easily weigh up the issues to come to a clear conclusion, this should be stated with an explanation of why.

The worker does not “owe” it to the applicants to advocate for them, apologise for them, or justify
their decision to foster, nor does the worker need to “weed out” applicants by writing an argument. If the worker presents the assessment clearly and accurately, the issues will “speak for themselves” and an accurate picture of the applicants will be available to the delegated decision-maker.

Finally, remember:

- when facing any problems or a complex assessment, discuss the issues with colleagues, practice experts, a team leader or a senior practitioner;
- use a variety of sources to collect information;
- start with the evidence and link it to the assessment criteria;
- the assessment is predictive and not just about applicants at one point in time;
- to ensure that statements and recommendations rely on evidence - including information provided by the applicants, research and literature; and
- the focus is on the needs and safety of future children and young people placed in the household.