The purpose of this document is to guide assessors in the process of gathering information from a kinship carer applicant, other household members and the child, to inform a sound and comprehensive assessment of the applicant’s ability to provide quality care for that child.

Using these guidelines

The prompt questions are designed to assist assessors to have ‘conversations’ with the applicant, other household members and the child. Having conversations with the relevant parties, rather than strictly following a list of formal questions, is more likely to lead to applicants who are engaged and prepared to give more detailed information to inform the assessment.

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

These guidelines do not cover all components of a kinship carer assessment (for example, prompt questions are not provided for gathering information about the parents’ views or views of a recognised entity). Rather, the guidelines focus on prompt questions for gathering key assessment information from the applicant, other household members and the child to enable the assessor to provide a summary of the information in the assessment report.

For further information and research findings about the distinct issues that should be considered when assessing kinship carers and the unique elements of supporting kinship carers, refer to the department’s Kinship Care Program Description and Kinship Care: A Literature Review.

Assessing Aboriginal and Torres Strait Islander kinship carer applicants

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

For Aboriginal people, kinship care is a longstanding and integral part of their cultures and communities. Despite the sustained trauma and loss experienced by Aboriginal people, Aboriginal families and communities continue to take care of each other in time honoured ways. Kinship care is a culturally appropriate and traditional way of caring for Aboriginal children and research evidence indicates that kinship care helps Aboriginal children maintain their cultural identity and connections, and this lessens the stigma of out-of-home care.

Torres Strait Islander people value and preserve family connections no matter how apparently distant those connections appear to Western eyes. Torres Strait Islander families are often interconnected and honour family connections with great commitment and sincerity.

Torres Strait Islanders see themselves very differently from Aboriginal people. Therefore assessors should be aware of assumptions they may have about “Indigenous” cultures. However, there are also Torres Strait Islanders who have family connections to the Kaurereg nation, which is a distinct Aboriginal group who are the original inhabitants and traditional owners of the Torres Strait Islanders, Horn Island, Hammond Island and Prince of Wales Island (the inner island group). This is a cultural influence that also shapes Torres Strait Island people.

For an Aboriginal or Torres Strait Islander kinship carer applicant, planning for the assessment prior to engaging with the applicant is imperative. It is not possible to reflect all of the possible considerations that may apply to individual Aboriginal and Torres Strait Islander cultural groups across Queensland in these guidelines, therefore, the planning phase for assessing Indigenous kinship carers may be seen as the most valuable step in the assessment process.

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

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

When communicating with Aboriginal or Torres Strait Islander applicants, use a narrative, story telling approach to collect information, rather than lists of direct questions. Assessors should be aware of sensitive topics, for example, applicants that were part of the Stolen Generations or have been abused themselves.
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Part 1 - Preliminary information gathering (to be completed by Child Safety)

The child’s views about the placement

Child Safety is responsible for obtaining the views of the child about the proposed placement prior to the commencement of the kinship carer assessment. The assessor may also interview the child if the child safety officer has not obtained the child’s views or provided such information to the assessor.

Purpose and focus

Children are often the most helpful source of information about relatives and community kin. The kinship assessment should include information about the quality of the relationship that the child has with the applicant, including the child’s perspective on the significance of the relationship.

The department is responsible for providing children with the opportunity to participate in decision-making about their lives, which includes decisions about the most appropriate out-of-home care placement.

This information should be provided by the child’s CSO where possible, as the child’s views about the placement should be obtained as part of the process of exploring a potential suitable kinship care placement, and provided to the assessor.

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

- How well do you feel you know (applicant)?
- How often have you visited, or stayed with (applicant)?
- What were the good things about the visit?
- Were there any things that you were worried about or didn’t like about the visit?
- What sort of feelings do you have toward (applicant) or memories of (applicant)?
- What do you think will be some of the positive or good things about living with (applicant)?
- Is there anything that worries you about living with (applicant)?
- Do you have any concerns about living with any of the other people in the household?
- How do you feel about moving away from friends; changing schools; moving away from your suburb; living with siblings or moving away from siblings; and moving away from other activities or networks?

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

The assessment domains outlined below are used to capture information that will assist to determine whether the applicant is able and willing to meet all the legislative requirements for approval as a kinship carer, including their ability to meet the standards of care for the child, as outlined in the *Child Protection Act 1999*, section 122. Each domain is to be used to assess multiple standards of care competencies. Whilst the applicant’s competency to meet all standards of care must be assessed, only the standards that most clearly relate to each domain have been documented under the domain type.

Whilst the suggested prompt questions outlined relate to interviews with the applicant, relevant interview information gathered from other participants, such as household members, should also be summarised and used as supporting evidence under the relevant assessment domains. Suggested prompt questions for interviewing adult and child household members (excluding the subject child) are outlined on page 13 of this document.

1. **Motivation to care for the child**

Explore the applicant’s reasons (reported and observed) for applying to become a kinship carer for the child.

**Purpose and focus**

Common motivations for kinship carers are a sense of commitment to the child and family, necessity and even guilt or shame. Research indicates that kinship carers are more likely to persevere with a placement even when they experience considerable strain. Kinship carers may require additional support to manage the complexities of these feelings, their sudden role change and loss of their previous lifestyle.

Aboriginal kinship carers may be strongly motivated by their sense of responsibility for the child, their memories of the Stolen Generations and their unwillingness for the child to be raised outside their Aboriginal family and community. They may advocate powerfully for the child to be placed with them.

Establish whether:

- the applicant is motivated to meet the needs of the child
- the decision has been well thought out and discussed with significant others
- they have feelings of obligation, family loyalty, expectations of family members, the child, community and the department and the impact of such on their caring role
- supports are required to assist the applicant manage challenging feelings around the role of becoming a kinship carer for the child and the nature of those supports.

Links to the standards of care, *Child Protection Act 1999*, section 122(1):

(d) the child’s needs relating to his or her culture and ethnic grouping will be met

(i) the child will be encouraged to maintain family and other significant personal relationships.
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### Suggested prompts

- Why do you wish to provide care for the child?
- How did you come to be identified as a potential carer for the child? What is the background to this placement for the child?
- What personal feelings led you to this point of wanting to care for the child? For example, feelings of obligation to the child and child’s parents, or feelings of guilt.
- Have you discussed your willingness to care for the child with your spouse or partner, children, other household members, family and friends? How did they respond?
- Describe any concerns you may have in caring for the child, including possible feelings of resentment at having to take on the caring role and concerns about the change in your role (for example from grandparent or aunt, to kinship carer).
- Does your spouse share a commitment to your decision to provide care for the child?

### 2. Relationship with the child

Explore the nature and significance of the relationship between the applicant and the child. Include observations of the applicant and child interaction, where practicable.

Links to the standards of care, *Child Protection Act 1999*, section 122(1):

(a) the child’s dignity and rights will be respected at all times

(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.

#### Purpose and focus

Research indicates that one of the benefits of kinship care is children being able to maintain a sense of identity, belonging and stability because they are placed with people they know. Many kinship carer applicants will already have a strong, existing relationship with the child. However in practice, other applicants may have little relationship with the child but are sought out to assume care of family members or are identified because they are significant to the child or are community kin. For these applicants, they may potentially be developing a significant relationship with the child upon placement and this can mean adapting to greater levels of change for both the carer and child.

#### Suggested prompts

- Describe your relationship with the child and the current contact you have.
- What are some of the positive aspects about your relationship with the child?
- What are some of the challenging aspects about your relationship with the child?
- How does your relationship with the child relate to your motivation to care for the child?
- Do you think your relationship with the child will change as you take on the caring role? How will it change? Discuss the challenges that may arise and how the applicant will manage the change and possible challenges, including exploration of resources available to the carer, such as services in their area, extended family, and supports offered by the department of foster and kinship care service.
- Explore the applicant’s attachment or ability to develop nurturing relationships with the child.
- Explore the kind of relationship the applicant believes they will have with the child in care, including their views on what the child will call them i.e. discussion that they are not ‘mum or dad’ or ‘Mr or Mrs’.
- Do the other members of your household have an existing relationship with the child? Describe the type of relationship they have.
- How do you think members of your household will respond to the child living in your home?
- How will you support household members who are adapting to the child in the household and manage any conflict that arises with them as a result of you caring for the child?

Where a genogram has been provided, review or examine the genogram with the applicant as a way of exploring the applicant’s relationships with the child and the child’s siblings and extended family.
### 3. Relationship with the child’s family, family dynamics and family contact

Explore the applicant’s relationship with, and expectations of, the parents and their ability to support family contact and relationships and manage family dynamics. Identify any possible conflict and stressors and include information about what supports may be required.

Links to the standards of care, *Child Protection Act 199*, section 122(1):

- (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
- (j) the child will be encouraged to maintain family and other significant personal relationships.

#### Purpose and focus

Kinship care can provide a mechanism for a child’s connection to family, community and culture, all of which are elements of a successful out-of-home care placement.

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

In assessing the ability and willingness of the applicant to protect the child from future harm, challenges and difficulties that may arise with family contact must be discussed, in addition to how family contact will be managed and any supports the applicant may need to protect the child.

Consider that the home environment of the applicant may be different to other families and assess the strengths and risks of the family and community relationships that surround the placement. For example, other family and friends may stay regularly or visit and these connections may provide contact for the child with cousins and significant family and community members.

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

#### Suggested prompts

- Describe your relationship with the child’s parents. What is the quality of the relationships? Are their any current challenges? For example, consider whether the relationship is co-operative and amicable, or oppositional and marked by hostility and resentment.

- What has been the significance of your relationship with the parent who is responsible for harm to, or neglect of, the child? What does this mean for your future relationship with them? For example, the applicant may be a relative who has been best friends with the offending parent since childhood. The influence of this strong relationship on the ability of the applicant to keep the child safe must be explored and assessed.

- What is your attitude towards the child’s family? How will this impact on your caring role and ongoing relationship with the child’s parents and extended family?

- What possible challenges may arise with the child’s parents given your role change from (role type)? For example grandparent or aunt or uncle to kinship carer.

- What are your feelings and views about family contact?

- How will you assist the child to remain connected with their parents, family and significant others?

- What is your ability to manage contact between the child and their family and possible feelings of divided loyalties between the parents, child and the department?

### 4. Family history

Explore how significant aspects of the family’s shared history (including the applicant’s childhood history) may influence the care of the child and the proposed placement.

Links to the standards of care, *Child Protection Act 199*, section 122(1):
(a) the child’s dignity and rights will be respected at all times
(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
(g) the child will receive positive guidance when necessary to help him or her to change inappropriate behaviour.

**Purpose and focus**

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 children and are likely to provide care for a child in care.

Assist the applicant to reflect on their childhood and identify what they will bring with them to the role of kinship carer as a result of their experiences. Explore their positive and negative family experiences and the nature of discipline used in the family of origin. Explore the stability or instability of family during the applicant’s childhood. Assess whether the applicant has worked through any childhood difficulties and abuse and any resulting strengths that will assist them to provide quality care.

Significant life events and experiences contribute to an individual developing values, attitudes, beliefs and ways of approaching the world. Explore these experiences (such as adversity, loss, grief and trauma) with the applicant to help them develop an understanding of their view of the world and ways of coping with life’s challenges. Exploration of these experiences may also provide insight into how the applicant may respond to a child in care who has experienced, or is currently experiencing, loss and grief or trauma.

Experiences of this nature should not preclude an applicant from being assessed as suitable. Assess whether the carer applicant has worked through these experiences and emerged with strengths that will assist them to provide quality care.

**Suggested prompts**

- 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?
- Are there any experiences from your childhood that you are dealing with today?
- In bringing up children what do you do, or would you do, differently from what your parents did?
- How do you plan to establish limits and discipline the child?
- Describe the significant events and experiences of your life which have most shaped the person you are today.
- How did these events and experiences impact on your life and how have you worked through these events and experiences?
- How will these events and experiences impact on your ability to provide kinship care?
- What strengths have you developed from these events and experiences that will assist you to provide care?
- What challenges may arise when providing care as a result of these experiences?

### 5. Parenting style

Explore and provide information about the applicant’s parenting style. Where the applicant has not previously parented a child, consider their proposed approaches and attitudes towards parenting, including their expectations regarding the behaviour of the child.

Ensure the applicant is aware of the legislative requirement regarding the use of corporal punishment and their obligation to provide care that is consistent with the statement of standards.

Inform the applicant that positive behaviour support must be consistent with the statement of standards (refer to the Positive Behaviour Support policy) and discuss with them the matters of concern process that applies when a standard of care is breached.
Links to the standards of care, *Child Protection Act* 1999, section 122(1):

(a) the child’s dignity and rights will be respected at all times
(b) 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
(g) the child will receive positive guidance when necessary to help him or her to change inappropriate behaviour.

**Purpose and focus**

**Parenting style:**

The way a kinship carer applicant manages their own children, or children they have relationships with, will be an indicator of how they will manage the kinship child in their care.

Explore the parenting style of the applicant to establish whether the applicant is likely to provide a safe, stable and nurturing environment to the child.

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

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

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

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

**Parental relationships with children:**

Positive relationships between the applicant and their own children may indicate that they are capable of developing and maintaining a positive relationship with the kinship child, if this does not already exist.

Reflect on the applicant’s relationships with their children to identify approaches and skills that might be applied to building a relationship with the child.

Explore the reasons for problematic or conflictual relationships where they exist and the reasons for the breakdown. Explore 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.

**Suggested prompts**

**Applicant 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 and expectations in your household?
- What discipline and behaviour management strategies do you, or have you, used?
- Discuss the department’s legislative requirement that discipline of the child must not include corporal punishment or punishment that humiliates, frightens or threatens the child in a way that is likely to cause emotional harm.
- Why do you think these requirements are in place? Do you agree with these requirements? Are you willing to discipline the child in a way that does not include corporal punishment?
- How would you apply your parenting style when caring for the child?
• What boundaries do you put in place in regard to a child’s space and privacy?

**Applicant 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, or have you, used where you have been responsible for a child?

• Discuss the department’s legislative requirement that discipline of the child must not include corporal punishment or punishment that humiliates, frightens or threatens the child in a way that is likely to cause emotional harm.

• Why do you think these requirements are in place? Do you agree with these requirements? Are you willing to discipline the child in a way that does not include corporal punishment?

• How do you make children feel respected and understood?

• How would you apply your approach to the child if placed in your care?

• What boundaries will you put in place in regard to the child’s space and privacy?

**Parental relationships with children:**

**Applicant**

• Describe your relationships with your children.

• How would your children describe your relationship with them?

• What are the strengths and challenges in your relationships with your children?

• What impact do you think providing kinship 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 the child in care?

**Applicant’s children (to be asked age appropriately)**

• How would you describe your relationships with your parents?

• What are the strengths and challenges in (or good and not so good things about) your relationship with your parents?

• What things do your parents do that make you feel that they care about you and love you?

• How do your parents react or respond when you do something they don’t like? What do your parents do or say if you do something you shouldn’t or something they don’t like?

• How do you think your parents providing kinship care will effect your relationships with them?

6. Applicants’ spousal relationship

Explore the quality of the spousal relationship and the possible implications of the placement for the relationship. Gather information about identified strengths and any current and previous relationship difficulties or stressors.

Links to the standards of care, *Child Protection Act 1999*, section 122(1):

(a) the child’s dignity and rights will be respected at all times

(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.

**Purpose and focus**

Effective carers are likely to share a quality relationship with their partner, where they feel secure and satisfied in their partnership.

Explore with the applicant 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
Kinship carer initial assessment report guidelines

Impact on their ability to provide care.
Significant past relationships can continue to affect a carer applicant and their family members. Relationships need to be explored to establish the ongoing impact on the applicant and their family, as well as any strengths or current challenges that may have developed as a result of the relationship.

### Suggested prompts

- How long have you and your spouse been in a relationship?
- Describe your relationship and the strengths and challenges of your relationship?
- How do you communicate and make important decisions?
- How do you support each other?
- How do you resolve conflict?
- What roles do each of you assume in the relationship and how were these established?
- How do you think caring for the child will impact on your relationship?
- How will you share the responsibility of caring for the child and support each other in this role?
- Describe any past relationships that have had a significant impact on you and your current relationship.
- Discuss the department’s requirement for a carer to inform the department immediately about a change in carer circumstance and the reasons for this. Advise the applicant of the circumstance to which this applies (for example, change in spousal relationship, household membership, personal history, address and employment etc.).
- Explore the applicant’s willingness to provide details about any change in carer circumstances to the department.

### 7. Understanding of, and attitude towards, the child protection issues and the need for an out-of-home care placement

Explore the child protection concerns for the child and details about the applicant’s understanding of how the experience of abuse and trauma may impact on the child and their ability and willingness to ensure the safety of the child.

Links to the standards of care, Child Protection Act 1999, section 122(1):

- (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
- (g) the child will receive positive guidance when necessary to help him or her to change inappropriate behaviour
- (i) the child will be encouraged to maintain family and other significant personal relationships.

### Purpose and focus

Kinship carers must be willing and able to keep the child safe and also understand that they can ask the department or their agency for help and guidance if required. To keep a child safe, kinship carers require an understanding of the child protection concerns that resulted in the need for an out-of-home care placement and any risks that exist. Assessors need to determine the capacity of the applicant to keep the child safe.

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

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

### Suggested prompts

- What is your understanding of the harm and trauma experienced by the child?
- What do you believe has been the impact of harm to the child?
• What is your understanding of any safety risks to the child?
• What is your understanding of why the child cannot currently remain at home and why family contact may occur with some restrictions?
• Do you feel you have the capacity to keep the child safe? How will you keep the child safe?
• Do you have any concerns about keeping the child safe?
• What are some examples of how you will show commitment to protecting the child from further harm? For example, not allowing unauthorised contact with parents.
• Have you seen a copy of the child’s case plan? Do you know what the goal of the case plan is? Do you agree with the goal? How will you contribute to meeting the case plan goals? How do you think you would feel if the goal was to change in the future?
• Explore the applicant’s understanding of the need to support the case plan even at times when they do not agree with the case plan and how the applicant will manage their feelings if they disagree with aspects of the case plan.
• How will you assist the child to overcome their experiences of harm, loss, and trauma?
• How will you support the child’s adjustment and integration into your family?

8. Applicant’s personal circumstances and ability to meet the specific needs of the child

Explore the applicant’s personal circumstances, characteristics and the strengths they are likely to bring to the role of a kinship carer. Outline how these factors inform the applicant’s understanding of, and capacity to meet, the specific needs of the child (including physical, emotional, developmental and cultural needs).

Links to the standards of care, Child Protection Act 1999, section 122(1): refer to all standards of care

<table>
<thead>
<tr>
<th>Purpose and focus</th>
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<tbody>
<tr>
<td>Discuss the child’s specific needs and describe the extent to which the carer can meet these specific needs. Consider the family and household situation including the family lifestyle and attitudes.</td>
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<tr>
<td>Children in care may present with behaviours that are more challenging to manage than a carer may expect from their own children. Carers need to be aware of the issues impacting on the child and be able to use suitable behaviour management strategies in response to complex behaviour resulting from abuse.</td>
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<tr>
<td>Discuss with the kinship applicant that due to the vulnerable nature of children in care, legislated standards of care are set and some of these standards may differ from the way in which the applicant has previously responded to the child, or responded to their own children. Explain that these expectations are set out in the statement of standards and explore the applicant’s understanding of the standards and capacity to implement the standards in a practical way.</td>
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<tr>
<td><strong>Time capacity:</strong></td>
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<tr>
<td>Establish whether the applicant has a realistic view of being a kinship carer (e.g., challenges, goal of reunification, or what if reunification is unsuccessful).</td>
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<tr>
<td>Providing care can require a carer to allocate a significant amount of time to caring for and supporting the child, attending meetings, facilitating family contact etc. Explore that the applicant has considered:</td>
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<tr>
<td>• their current time commitments</td>
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<tr>
<td>• the extra time they will need to meet the needs of a child in care</td>
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<tr>
<td>• if they will have time and are willing to make time to meet the needs of a child in care.</td>
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<tr>
<td><strong>Financial stability:</strong></td>
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<tr>
<td>Kinship carers are more likely to have a reduced income and have a lower socio-economic status than foster carers. Furthermore, Aboriginal carers are more likely to struggle financially than non-Aboriginal carers. For kinship carers, their lower socio-economic status, paired with having less material resources, can create stress and tension in the household that may impact on their ability to provide quality care. Assess whether the applicant has a regular and sufficient source of income to meet the financial commitments and material needs of family members.</td>
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| Material disadvantage alone is not an indicator of risk of harm or neglect or lack of capacity to provide care. However, given the extent of disadvantage that may exist for some applicants, assessors should discuss and identify ways in which the department can facilitate material and financial support in a timely manner, where necessary. Consider what poverty may mean for the
applicant on a day to day basis, including having enough food and money to buy petrol for the car.

Some applicants may also have unrealistic ideas about the nature of the allowances provided by the department to meet the costs of caring. Explore their understanding of the financial support provided by the department.

**Cultural and identity competency:**

Explore how the applicant intends to preserve the child’s culture, language, religion and sexuality.

Not all Aboriginal and Torres Strait Islander children are connected to culture and community, therefore it is important to explore how the applicant will provide cultural care and the challenges that may arise for them.

Explore how the applicant intends to encourage and support the child to develop and maintain their connection to community and how they will help the child to settle into the placement and build a strong identity.

Keeping Torres Strait Islander children in care in touch with their communities, their culture and family, means more than just cultural knowledge and identity – it allows a child to have that social network for dedicated family support that Torres Strait Islanders highly value and generally offer to their children when they grow up in the Torres Strait Islander community. It is a crucial part of the Torres Strait Islander identity that you know everyone around you and you can rely on so many people for different levels of caring and support.

For an Aboriginal and Torres Strait Islander child, explore how the applicant will demonstrate respect for and interest in Aboriginal or Torres Strait Islander culture. Discuss and assess the applicant's involvement in the Aboriginal or Torres Strait Islander community and their knowledge of, and willingness to access, support services for Indigenous children. Assessors should be aware that connection to community is the most powerful way for an Aboriginal child to build their cultural identity.

**Practical capacity:**

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

Research indicates that Aboriginal carers are more likely to have more children in their care, are more likely to live in public housing and have less material resources, such as transport, than non-Indigenous carers. Identify and document any practical or material supports required by the applicant to ensure an appropriate placement for the child, such as bedding, cupboards, linen, car seats and clothing for the child.

**Health and wellbeing:**

Kinship carers generally experience more physical and mental health problems than foster carers. In addition, for Aboriginal carers this is likely to be an even more significant problem. Indigenous Australians are more likely to develop cardiovascular disease, diabetes, and be hospitalised for mental health problems than non-Indigenous Australians.

The health and wellbeing of carers can impact the effectiveness of their care for a child. Kinship carers are more likely to be single older women and grandparents, therefore the circumstances surrounding their health and wellbeing must be taken into account during the assessment process and when determining the support required to enhance the likelihood of placement success and stability.

Explore the health issues of the applicant to assess the impact they will have on their capacity to provide care. For example, old age or weight concerns may make it more difficult for a carer to look after younger children who need to be regularly lifted or require a carer who can run after them when needed. In some instances, advice from a General Practitioner or specialist may be needed to decide whether the health issue can be managed effectively or whether the health issue will limit the applicant’s ability to provide care.

Significant health issues will not necessarily 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.

### Suggested prompts

- How will you respond to behavioural difficulties? Provide some examples.
- What is your understanding of how the child may display anxiety, anger, hurt and affection? How will you respond to these emotions?
- Does the child have any needs for which you will require additional support in order to meet these needs? Outline what supports may be required.

**Time capacity:**

- How do you currently spend your time? What kinds of activities and commitments do you have during the week and weekends?
- How do your commitments differ between the working week and the weekend?
### Kinship carer initial assessment report guidelines

- How do you think caring for a child will impact on your current time commitments?
- Which time commitments would you be willing and able to modify to give you time to meet the needs of the child and fulfil the role of a kinship carer?
- Do you believe you will have the time to provide the standard of care required for children in care? For example, taking the child to appointments, facilitating contact, attending case planning meetings, interacting with the child’s school, and participating in training and development etc.
- Do you think there will be any area of caring for the child that you may struggle with or that you may want assistance with?

### Financial stability:

- Are you in stable employment and 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 kinship carers by the department?
- Do you believe that providing kinship care will have a significant impact on your financial situation?

### Cultural and identity competency:

- How will you provide for the child’s need for connection to their cultural community?
- What types of activities and supports do you think could be explored with the child that could assist to support and encourage their culture, language, religion and sexuality?
- What do you think you can do as a carer to show the child that you support their cultural identity and sexuality?
- What is your understanding of the child’s culture and practices?
- How willing are you to build strong partnerships with the child’s Aboriginal or Torres Strait Islander family and with the local Indigenous foster and kinship care service? How will you do this?
- How would you respond if the child denied their Aboriginal or Torres Strait Islander culture?
- What would you do if the child was experiencing racism at school?

### Health and wellbeing:

- Do you have any health or wellbeing concerns that may impact on your ability to provide quality care to the child? If so, how will you manage these whilst caring for the child?
- If there are health issues, what strategies do you currently use to manage them and what strategies could you use in the future?
- Describe any health issues of other household members that may impact on the child or on your capacity to provide care to the child.
- What strategies could you put into place to manage this?

### 9. Working with the Department

Explore and provide information about the applicant’s attitude towards working with the department.

**Purpose and focus**
To ensure quality outcomes for children in care, applicants must be able to work effectively as part of a team with the child, parents, foster and kinship care service and the department.

The applicant should be able to:
- describe the nature of effective teamwork
- identify and demonstrate the skills and attributes that will allow them to contribute to effective teamwork and evidence their willingness to work as part of a team
- outline the roles and responsibilities of kinship carers as part of the team
- describe how they will work in line with the legislative principles, policies and procedures guiding the work of the department.

When assessing Aboriginal kinship carer applicants, assessors should be aware that some applicants may have themselves...
experienced the trauma of removal from their family and community. In addition, some applicants may have grown up in abusive institutional settings and these negative experiences need to be discussed with the applicant as they may have an impact on the way they will view the department.

Discuss the applicant’s feelings about working with the department and explore their possible feelings of wariness and distrust due to past child protection practices.

Reinforce that the department’s role is to work in partnership with carers.

<table>
<thead>
<tr>
<th>Suggested prompts</th>
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<tbody>
<tr>
<td><strong>Working as a team:</strong></td>
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<tr>
<td>• Describe your previous experience of working as part of a team.</td>
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<tr>
<td>• Where you have encountered difficulties working as part of a team, how have you resolved these?</td>
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<tr>
<td>• What is your understanding of the roles and responsibilities of kinship carers?</td>
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<tr>
<td>• What is your understanding of the decisions you are allowed to make for the child and the decisions that you need to consult the department about?</td>
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<tr>
<td>• Who do you see as other key stakeholders involved in meeting the child’s needs? How do you feel about interacting with them when need be? How may they assist you to care for the child?</td>
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<tr>
<td>• How will you ensure that the child is provided with opportunities to participate in decision-making?</td>
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<tr>
<td>• How would you advocate on the child’s behalf if you felt their needs were not being adequately met?</td>
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<tr>
<td><strong>Working with the department:</strong></td>
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<tr>
<td>• What is your understanding of the role of the department in the life of the child who will be placed in your care?</td>
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<tr>
<td>• What involvement do you think the department will have in your life if you become a kinship care for the child? Discuss the ways in which the department will be involved with the child.</td>
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<tr>
<td>• What is your understanding of how long you will be caring for the child and working alongside the department and the child’s parents to develop and implement case plan goals?</td>
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<tr>
<td>• What is your understanding of the support that the department will provide you to undertake your role?</td>
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10. Managing change, stress and carer support

Explore the applicant’s current commitments, support systems and support needs (using a genogram or ecomap may assist), and identify any changes the applicant may need to consider in becoming a kinship carer for the child. Explore specific resources and supports that are needed to sustain the placement with the applicant in order to support placement feasibility, stability and maximise the child’s needs being met.

<table>
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<th>Purpose and focus</th>
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<tr>
<td>Kinship care placements are often complex and research indicates that although they receive less support, they may require more support than foster carers.(^a)</td>
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Research indicates that carer applicants who are connected to an established support network in the community have a greater likelihood of success in the role of carer. Providing care to a child 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 kinship carer role.

Explore:
• the applicant’s current level and sources of support
• how the applicant maintains a positive attitude during periods of stress
• the impact caring may have on the existing support network
• 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
• how the applicant will remain committed to the child even when times are difficult
• the applicant’s capacity to identify and access additional support if necessary.
Identify the supports which are needed to achieve the child’s needs and case plan goals. Supports required by the carer may include bedding or financial support or specialist support.

For Aboriginal and Torres Strait Islander applicants, discuss the role of Indigenous foster and kinship care services and outline the types of support that may be provided to them should they be supported by such a service following approval. Ideally, a kinship carer of an Aboriginal or Torres Strait Islander child should be supported by an Indigenous agency. A greater level of support and guidance around cultural issues has been found where carers are managed by an Indigenous agency rather than by the statutory department.

**Suggested prompts**

- Describe the major sources of personal and practical support that you access outside of your family.
- Why is this support important to you?
- What impact do you think caring for the child will have on your support networks?
- How will your existing support system be available and useful to you in your role as a kinship carer?
- What role does your extended family play in providing you with support? What role would they play in assisting you to care for the child? For example, explore possible respite options.
- What additional support do you think might be necessary in the kinship carer role?
- Are there other family or community members who could provide respite or babysitting?
- How would you go about accessing this support? For example, seek advice from the child’s CSO, agency support worker or Placement Services Unit
- What is something that has been a personal challenge or difficulty for you 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 and stressors do you anticipate will come with the role of kinship carer and how will you manage these? What situations do you think you’ll find particularly challenging to deal with? – this can relate to the applicant’s own triggers and values
- What support could you access when dealing with the stress of providing care for the child?

**Interviews with household members**

**Purpose and focus**

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 kinship care placement. Assess whether household members have considered the impact caring for the child will have on them and the role they can play in providing care.

**Suggested prompts**

**Adult household member**

- Are you supportive of the applicant’s decision to provide kinship care?
- How might having the child placed in your household impact on you?
- How might your relationship with the carer applicant and child change positively or negatively by the child residing in the home?
- How do you see your role in relation to the child who will be living in your home?
- What could you do to make the child feel comfortable during their time living in your home?

**Household member – child**

- How do you feel about your parents’ decision to become a carer for the child?
- 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?
- What would you do if you were having problems with the child or were unhappy about the situation? Who would you talk to?

**Genograms, ecomaps, Aboriginal family circles and Torres Strait Islander considerations**

Gathering family information and constructing a genogram, ecomap or Aboriginal family circle helps family members to tell their story and expand cultural stories. The information should always be treated with respect and gathered purposefully, i.e., to explore family dynamics, history and patterns of behaviour and connectedness with the wider community.

Where possible, the child’s genogram or ecomap should be developed with the child and their family in the early stages of contact with the family, to assist with the exploration of kinship care options, kinship respite options for the child and resources within the family that can be utilised to support the child’s case plan. Where this occurs, the genogram or ecomap should be provide to the assessor to assist with, and inform, their assessment.

The assessor may also develop a genogram or ecopmap with the carer applicant to help identify the people in the applicant’s network (both family and community) who can assist them in their caring role. The genogram or ecomap may assist the assessor to explore and document the applicants’ support network, potential stressors and support needs.

**Genograms** help us to understand family relationships and family patterns. They record information about family members and their relationships over a number of generations. Genograms display family information graphically in a way that provides a quick visual representation or summary of complex family relationships and dynamics. They enable the assessor to grasp a huge amount of information about a family and to scan for potential problems or resources (McGoldrick et al, 2008). Structural, relational and functional information about a family can be viewed on a genogram both horizontally across the family context and vertically through the generations. They help both the assessor and the family to see the bigger picture and may highlight problems in their current and historical context. For further information about genograms refer to Interview resource: Genogram.

**Ecomaps** enhance genograms because they depict the larger systems affecting the individual and family system (Hodge 2000, 2005B in McGoldrick et al, 2008). They enable us to assess the connectedness of the immediate members of the family to one another as well as to the broader system (i.e., extended family, friends, neighbours, the community and culture and to evaluate the family’s strengths and vulnerabilities in relation to the other situation). For further information about ecomaps refer to Interview resource: Ecomap.

**Aboriginal family circles** help to identify the significant people within an Aboriginal child’s life. They reflect both the closeness of relationships and the extent of responsibility between family members. An Aboriginal Family Circle depicts different relationships that surround an Aboriginal child and may open placement and relationship possibilities for the child. Kinship networks not only reflect relationships of association, they also represent a spiritual relationship. Relationships between a child and a member of the family circle may not appear to be ‘close’ however the child’s relationship though association, responsibility and spirituality are significant.

An Aboriginal family circle may be large and include each person in a language/country group. A child may not have a close relationship with all members of their family circle within the mainstream definition of kinship care, yet their relationships through association, responsibility and spirituality are significant.
Relationships explained

Parents and siblings
Birth mother, birth father, spiritual mother and father, brothers and sisters, including the children of one’s sister (if female). Half brothers and sisters hold the same importance as full brothers and sisters.

Extended family
Aunts, uncles, great uncles and aunts and first, second, third, fourth and fifth cousins (and their children).

Grandparents
Paternal and maternal grandparents, spiritual grandparents.

Spiritual relations
People not necessarily related by blood, people given to a child to act as a parent, grandparent, or an Elder of one’s tribe and community.

Skin group/totem and in-laws
Sharing the same skin name or totem indicates a relationship, (men and women do not share skin names, a totem could be an animal or plant and must be respected), partners of relations, i.e.; a cousin’s wife or husband.

Community
Includes each person’s tribal group and the community in which they live and/or belong.


Torres Strait Islander considerations:
When assessing a kinship carer applicant for a Torres Strait Islander child, assessors should be aware that family is very important to Torres Strait Islander people’s identity. For example, when discussing geneology with a Torres Strait Islander person, they may be able to give you the names of upwards of six generations of their family, including many branches through marriage and cultural adoption. Family members can be second or third cousins, in Western terms, or connected through marriage five or six generations before, but they are still family and may be called ‘cousins’.

Additionally, the Torres Strait Islander concept of family is also influenced by who they grew up around and with. Someone who grew up alongside a distant cousin in the same house or as near neighbours or as community members, may consider each other to be to be “cousin-sisters” or “cousin-brothers” – they are as close as sisters and brothers and these are very important relationships.

Statement of standards
Provide the applicant with the ‘Interview resource: Statement of Standards’ and discuss examples of when the
applicant has met the standards, or how the applicant would meet the standards for the child.

Comments
Outline whether or not the applicant understands the standards of care and their obligation to provide care that meets the standards. Provide information to the applicant about the department’s matter of concern process that occurs when a standard of care is breached.

Use the ‘Interview resource: Statement of Standards’ (located in the Child Safety Practice Manual, Chapter 8 resource list) to assist the applicant understand the standards of care and evidence their understanding of each standard by documenting examples of how they would meet each standard. Discuss with the applicant, behaviours or activities that may be inconsistent with the statement of standards. Examples of an applicant’s ability to meet the standards of care may include:

a) leading by example; not belittling; listening to and valuing the child’s opinions; and helping the child feel safe and comfortable by having their favourite toys and books.

b) ensuring wellbeing, health and education needs are met; providing a loving caring environment; food, comfort and education; and providing for special dietary needs.

c) listening to the child’s opinions; using caring and responsive language; encouraging expression and open communication through discussion and respect of different opinions.

d) allowing the child to participate in, and learn about, their culture; encouraging interaction with family members and community; and supporting the child’s religious needs even if they differ from the applicant’s views.

e) providing access to schooling and school materials, sports, hobbies, interactions with peers; encouraging development of interests appropriate to age and ability; and taking the child to exhibitions and other events.

f) ensuring school attendance and teaching of life skills; encouraging and supporting interactions with peers and elders; and actively exploring educational options for the future, such as TAFE, university or apprenticeships.

g) setting boundaries, rewarding good behaviour, communicating, negotiating effectively; using time out and behaviour charts or rewards; and being aware that corporal punishment is not an option.

h) ensuring medical, dental and therapeutic services are provided as required.

i) encouraging interaction with family, friends and community; organising birthday parties, visits with friends, sports and hobbies; and nurturing appropriate friendships.

j) working with the department in regards to contact; raising concerns and discussions with the CSO to ensure the best interests of the child are met; assisting with telephone calls and emails where appropriate; and encouraging development of a life book and collection of precious photos.

k) ensuring appropriate care; attending specialist appointments with the child and implementing recommended care strategies; showing respect of rights and dignity; providing medical and any other support required.

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

Analysis of strengths and vulnerabilities

Summarise the strengths and benefits, and vulnerabilities and risks that the applicant brings to the role of kinship care for the child. The summary will be based on all information gathered, and observations made, during the assessment.

Examples of strengths may include (but are not limited to) the applicant’s:

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

Examples of vulnerabilities and risks may include (but are not limited to):
• strained relationship between the applicant and child’s parents which may lead to divided loyalties and loss of parental connection for the child if not managed well
• the risk of unsupervised contact between the child and parents due to the nature of the close relationship between the applicant and the parents and the applicant’s minimisation of the harm and future risk of harm to the child. This indicates the applicant may be less willing to inform the CSO of problems with contact and may be less likely to comply with formalised contact plans.
• the applicant’s lack of support resources and networks that would assist them to cope with the challenges of caring for the child and the impact on the applicant’s time and lifestyle
• the applicant’s own history of abuse and long history of intergenerational patterns of abuse and neglect indicate the child may be placed at risk of further harm
• the applicant’s financial concerns and current limited practical resources that would require addressing prior to appropriate placement of the child
• the applicant’s authoritarian methods of parenting and belief that children should be ‘hit’ or ‘whacked’ to ‘bring them into line’.
• complexity in relation to the changing role and responsibility of the applicant in going from grandparent to assuming the parental role. This may be compounded by the applicant’s loss of independence and traditional grandparent role.

Recommendation and reasons
The assessor’s reason for recommendation is a final summary providing evidence to support or not support the approval of the applicant. In providing a reason and rationale, consideration must be given to the strengths of the placement balanced against all potential risks.

The recommendation for approval or refusal is based on the applicant’s understanding of, and willingness and ability to meet, all the legal obligations required to be an approved kinship carer under the Child Protection Act 1999 and Child Protection Regulation 2011, as informed by the following considerations:
• whether the placement is in the best interests of the child
• the applicant’s understanding of, and willingness and ability to provide care consistent with the statement of standards
• whether the applicant is a suitable person to be an approved kinship carer for the child and members of their household are suitable persons to associate on a daily basis with the child
• the applicant’s motivation to provide care for the child
• the applicant’s family and childhood history; relationship with the child’s parents; and capacity to manage family relationships in the best interests of the child
• the quality of the relationship that the child has with the applicant
• the applicant’s parenting skills
• the applicant’s understanding of the harm or risk of harm to the child, including their acknowledgment of harm
• the views of other members of the household, including children
• the applicant’s ability and willingness to maintain family connections, including contact between the child and their siblings, parents and other persons of significance to the child.
the ability and willingness of the applicant to work with the department in planning for the child and meeting case plan goals.

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