**FOSTERING PANEL CHECKLIST**

**FULL APPROVAL**

**Prospective Foster Carers Name/s:**

**Liberi Number/s:**

**Date of Panel:**

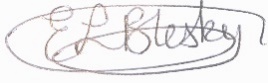
**Social Worker(s) Attending:**

**Prospective Foster Carer(s) Attending:**

|  |  |  |
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|  | **Notes** | **Tick** |
| Kent Fostering Assessment Report (signed and dated by Assessing Social Worker, Team Manager and Prospective Foster Carers) |  |  |
| Genograms |  |  |
| Eco-map |  |  |
| Chronologies |  |  |
| **CONFIDENTIAL** Checks and References |  |  |
| Risk and Vulnerability Chronology (Signed and dated by Assessing Social Worker, Team Manager and prospective Foster Carers) |  |  |
| Safe Care Plan (signed and dated by Assessing Social Worker and prospective Foster Carers) |  |  |

**NB: Please ensure all paperwork complete before submission to Panel Administrator**

Signed…………………………………



Signed ……………………………………………………

Team Manager

Date ………………….…………………………

**FRONT SHEET**

**To be completed for all prospective foster carers applying to be registered with Kent County Council.**

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| **Name of Kent Fostering Panel** |  |
| **Date of Kent Fostering Panel** |  |

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| **Prospective Foster Carer’s Household:**  *Full Name of Carers and all household members (please include every person in the house and add any previous names)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Full Names of Prospective Carers** | | | | | | | | | | | | | | | | | **Date of Birth** | | | | | | | | | | | **Liberi Number** |
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| **Other Household Members** | | | | | | | | | | **Relationship** | | | | | | |  | | | | | | | | | | |  |
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| **Address of Carers:** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Dates living at this address:** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Previous Addresses:**  (in last 10 years) | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Telephone** | **Home** | | |  | | | | | | | | | | **Email** | | | | |  | | | | | | | | | |
| **Mobile** | | |  | | | | | | | | | | **Email** | | | | |  | | | | | | | | | |
| **Authors of Report:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Fostering Social Worker** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Office Base** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Telephone Number** | | | |  | | | | | | | | |  | | | | |  | | | | | | | | | | |
| **Fostering Team Manager** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Office Base** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Telephone Number** | | | |  | | | | | | | | | **Email** | | | | |  | | | | | | | | | | |
| **Assessment Timescales:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Date application accepted:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Date stage 1 checks completed:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Date assessment completed:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Date assessment updated:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Registration Sought:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Pen Picture and Photograph of the Prospective Carer/s:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PROSPECTIVE CARERS HOUSEHOLD** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **FURTHER DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | **Prospective Carer 1** | | | | | | | | | | | | | | | | **Prospective Carer 2** | | | | | | | |
| **Gender** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Nationality** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Partnership Status** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Primary language spoken in the home** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Other language/s spoken in the home** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Religion** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Practising/non-practising** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Immigration status where appropriate** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Are any of the applicants registered as disabled?** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Local Authority Area** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| 1. **Children under 18 living in the household** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Family name** | | **Forename/s** | | | | | | | | | | **Gender** | | | | **Date of birth** | | | | | | | **Age** | | | | **Relationship to applicant/s** | |
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| 1. **Adults living in the household** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Family name** | | **Forename/s** | | | | | | | | | | **Gender** | | | | **Date of birth** | | | | | | | **Age** | | | | **Relationship to applicant/s** | |
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| 1. **Children under 18 from current or previous relationship(s) living elsewhere or deceased**   *(Please include children who have been looked after by the prospective carer/s, i.e. former partner’s children)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Family name** | | **Forename/s** | | | | | | | | | | **Gender** | | | | **Date of birth** | | | | | | | **Age** | | | | **Relationship to applicant/s** | |
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| 1. **Adult children living elsewhere**   *(Please include adult children that have been looked after by the prospective carer/s, i.e. former partner’s children)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Family name** | | **Forename/s** | | | | | | | | | | **Gender** | | | | **Date of birth** | | | | | | | **Age** | | | | **Relationship to applicant/s** | |
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| 1. **Accommodation**   **Brief description of accommodation (including outside space)**  *Information about the prospective carer/s home and neighbourhood and the bedroom available for the child(ren)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Date Home Safety Checklist completed:**  *Summary of findings and any matters outstanding and timescale for completion:* | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| **Date Fire Safety Check completed:** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 1. **Household Finances** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | **Prospective Carer 1** | | | | | | | | | | | | | **Prospective Carer 2** | | | | |
| **Monthly earned income (after deductions)** | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **Monthly state benefits (please indicate type)** | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **Monthly income from any other source** | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **Monthly mortgage or rent payments** | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **Monthly council tax payments** | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **Any other significant regular expenditure** | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **Are there any significant debts or loans apart from a mortgage** | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **Verification of income and savings and analysis** | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| 1. **Animals and Pets**   **Comment on all pets**  *(name, breed, age, health, any identified risks/action to mitigate risks)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Date Pet Assessment was completed:** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| **Verification of Documents, Checks and References** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Verification of documents** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | **Prospective Carer 1** | | | | | | | | | | | | | | **Prospective Carer 2** | | | | | | |
| **Date birth certificate seen** | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | |
| **Date passport or other certification of nationality seen** | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | |
| **Date driving licence seen** | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | |
| **National Insurance number and date seen** | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | |
| **If the prospective carers are married to each other or have registered a civil partnership, date certificate seen** | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | |
| **If the prospective carer/s are divorced or have terminated a civil partnership, date divorce or dissolution certificate/s seen?** | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | |
| **Have the prospective carer/s documents been verified?** | | | | | | | | **YES / NO** | | | | | | | | | | | | | | **YES / NO** | | | | | | |
| 1. **Enhanced DBS Checks / Criminal Offences**   *Fostering regulations require DBS checks for all adult household members* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name** | | | | | | | | | | | | | | | **Date check completed** | | | | | | | | | | | | | |
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| ***Any additional information including a summary of all convictions and cautions that show up on the DBS certificate, however minor or dated, and senior management decision.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Kent Local Authority Check**   *Fostering regulations require a current local authority check* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Date of residence in Kent** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Name of referee and status** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Date check completed** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| ***Any additional information:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Kent Local Authority Designated Officer Check** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name of referee and status** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Date check completed** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| ***Any additional information:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Other Local Authority Check and Overseas Check** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name of local authority** | | | **Dates resident in this local authority** | | | | | | | | | | **Date check completed** | | | | | | | **Name of local authority person and status** | | | | | | | | |
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| ***Any additional information:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Ofsted Check** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name of referee and status** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Date check completed** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| ***Any additional information:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Social Media and Internet Checks** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Date social media websites / internet search completed:** | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
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| 1. **Previous Partners / Relationships** *(For prospective carers who are separated, divorced, have dissolved a civil partnership or set up household with a previous partner)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Prospective Carer 1** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Previous Partner** | | | | | | **Dates of Relationship** | | | | | | | | | | | | | | | | | | **Date of Reference** | | | | |
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| **Write-ups of references and checks with ex-partners to be included in confidential personal references section. Give details if any checks were not sought or not received.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Prospective Carer 2** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Previous Partner** | | | | | | **Dates of Relationship** | | | | | | | | | | | | | | | | | | **Date of Reference** | | | | |
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| **Write-ups of references and checks with ex-partners to be included in confidential personal references section. Give details if any checks were not sought or not received.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Applications to Foster, Adopt or Register as a Childcare Provider** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Have the prospective carer/s or any member of the household previously applied to be an adopter, foster carer or register as a childcare provider?** | | | | | | | | | | | | | | | | | | | | | | | | | **YES / NO** | | | |
| ***If yes, give name and address of the agency / service and type of application:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Previous Family Court proceedings**   *(Fostering regulations require the assessing service to obtain any other information they consider relevant and this should include involvement in any previous family court proceedings)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Have the prospective carer/s been involved in any family court proceedings or in any proceedings about children and/or family?** | | | | | | | | | | | | | | | | | | | | | | | | | **YES / NO** | | | |
| ***Any additional information:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **School, college, nursery, health visitor check** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Subject** | | | | | **Name of school, college, nursery** | | | | | | | | | | | | | | | | | | | | | **Date check completed** | | |
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| ***Any additional information:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Health**   *(Fostering regulations require details of health supported by a medical report, include an assessment of the implications of this health information for parenting the child).* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | **Prospective Carer 1** | | | | | | | | | | | | | | | | **Prospective Carer 2** | | | | | | | |
| **Name of GP** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Name of GP Practice** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Name of Fostering Service Medical Adviser** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Date/s of Medical Adviser report** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| ***Any additional information:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Employment Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | **Prospective Carer 1** | | | | | | | | | | | | | | | | **Prospective Carer 2** | | | | | | | |
| **Current Occupation (if any)** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Current Employer (if any)** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Address of Employer** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Name of Line Manager** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Date started** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Current hours of work** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| **Proposed hours of work following placement of child/ren** | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |
| 1. **Previous employment, occupation or voluntary work involving children and vulnerable adults** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name and address of employer or organisation** | | | | | | | **Dates employed** | | | | | | | | | | | | | | | | | **Date of any completed reference** | | | | |
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| ***Any additional information:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**PROSPECTIVE CARER/S DESCRIPTIVE INFORMATION**

*Repeat sections above for each prospective carer and use this to inform your analysis*

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| **Prospective Carer 1** |
| **Family history (including significant life events)**  *Family history summarising the prospective carers experience of being parented and information about their relationships with parents and siblings. All significant life events, including exploration of any abuse, loss or traumatic experiences, family history of offending behaviour, time spent in prison and the impact of this on prospective carers development.* |
|  |
| **Education and employment**  *Summary of education and employment, including voluntary work with children and adults, highlighting any significant transferable skills for the fostering task, implications of employment on fostering role..* |
|  |
| **Previous relationships**  *Summary of any previous marriage, civil partnership or similar significant relationship and effect and impact on the prospective carer.* |
|  |
| **Analysis of the prospective carers life experiences, relationships and attachment style and how this impacts on their capacity and competence to care for children. What evidence is there that the prospective carer has overcome adversity and demonstrates reflection. Analysis of prospective carers openness and transparency through sharing personal information from past and present.** |
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| **Prospective Carer 2** |
| **Family history (including significant life events)**  *Family history summarising the prospective carers experience of being parented and information about their relationships with parents and siblings. All significant life events, including exploration of any abuse, loss or traumatic experiences, family history of offending behaviour, time spent in prison and the impact of this on prospective carers development.* |
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| **Education and employment**  *Summary of education and employment, including voluntary work with children and adults, highlighting any significant transferable skills for the fostering task, implications of employment on fostering role..* |
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| **Previous relationships**  *Summary of any previous marriage, civil partnership or similar significant relationship and effect and impact on the prospective carer.* |
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| **Analysis of the prospective carers life experiences, relationships and attachment style and how this impacts on their capacity and competence to care for children. What evidence is there that the prospective carer has overcome adversity and demonstrates reflection. Analysis of prospective carers openness and transparency through sharing personal information from past and present.** |
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**FULL APPROVAL**

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| **Perception of self and relationships** |
| **Description, personality and identity**  *Details of personality and information and leisure activities and interests. Information about religious persuasion, racial origin, cultural and linguistic background, political views and capacity of the prospective carer/s to provide individualised care.* |
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| **Current relationship**  *Include details of how prospective carer/s demonstrate affection and intimacy, sex life and sexual preferences, disagreements and differences, stability and commitment within their relationship. How will couples maintain fulfilling intimate relationships and privacy when fostering? If a single applicant, awareness of the responsibilities if they embark on a new relationship and how this would be managed.* |
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| **Complaints and allegations**  *Include details of any complaints, allegations, challenges made against or on behalf of the prospective carer/s in previous roles.* |
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| **Analysis of prospective carer/s personal qualities and personality that may influence the fostering task. What evidence is there that the prospective carer/s current relationship is secure, stable and strong enough to deal with the stresses and strains of fostering. Is there mutual support and any vulnerabilities within the carer/s relationship?** |
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**HOUSEHOLD AND NETWORK**

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| **Household**  *Details of adult and children household members and existing family relationships. Including personality, interests, education, employment, health and their likely involvement in the fostering task. Summarise the day to day life of the family (****Interviews and direct work to be attached).*** |
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| **Wider family and support network**  *Summary of wider family and friends who are likely to be of significance to the prospective carer/s and the children that will be cared for in the fostering household. Include extended family who may pose a risk through association (****Ecomap should be attached)****.* |
|  |
| **Analysis of the informal support system and family dynamics, including how realistic and resilient the members of the fostering household and support network are to the challenges of caring for traumatised children. Are the prospective carer/s able to discuss sensitive issues about family members? Are there any specific considerations for future matching and vulnerabilities within the household?** |
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**PROSPECTIVE CARERS FOSTERING CAPACITY**

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| **Experience of caring for children**  *Include details of previous and current relationships with children, including step-children, fostered or adopted children. Please detail any past or present contact issues and include details of the quality of those relationships* |
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| **Motivation to care for children and why now**  *Summary of how personal qualities, attributes and life experiences have contributed to the prospective carer/s plan to foster children, include intrinsic factors such as values, beliefs and extrinsic factors such as financial reward, sibling for a birth child etc.* |
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| **Ability to provide emotional warmth, empathy, a sense of belonging, commitment and resilience for the duration of the placement**  *Summary of evidence* |
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| **Helping children make sense of their previous experiences**  *Evidence of how carer/s will promote secure attachments between children and appropriate adults. What is the prospective carer/s understanding of traumatised children’s needs..* |
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| **What is the prospective carer/s attitude to difference and their ability to promote a child’s identity?**  *Including gender, sexuality, ethnicity, cultural and linguistic background, religion, political views and disability..* |
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| **How will the prospective carer/s meet the child’s educational and health needs promote learning and development**  *Include emotional and mental health needs and how they will facilitate taking children to school, etc..* |
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| **How will the carers provide a stimulating environment, appropriate leisure opportunities, healthy lifestyle for the children and being able to balance competing commitments.** |
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| **What are the prospective carer/s approach to discipline, providing structures and boundaries?**  *Include examples of how the carer/s understand, respond and manage children and young people’s behaviour including encouraging children to take responsibility for their behaviour and helping them to learn how to resolve conflict. What behaviours do the carer/s feel they will or will not be able to manage at this time and why? How will the carer/s regulate their own emotions when challenged by children’s behaviour? What are the rules and boundaries within the household.* |
|  |
| **Working effectively with others and managing different perspectives**  *Include how prospective carer/s will promote and manage contact between children and their families. Is there evidence that prospective carer/s will work effectively with other professionals. How will they manage differences of opinion and challenge disagreement with the child’s care plan?* |
|  |
| **Permanency**  *What is the carer/s understanding and attitude towards permanency and how they will meet the requirements of Kent’s Permanency Policy. Foster carers are required to care for any child placed with them as if they were a member of their family and this expectation should carry through into Staying Put arrangements.* |
|  |
| **Analysis of how the prospective carer/s will care for children, including what the child’s experience of living with this family is likely to be. Is the carer/s understanding of child development, attachment and their ability to manage behaviour sufficient to begin fostering? Do the carer/s have a range of different strategies they can employ?** |
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**PROSPECTIVE CARER/S – SAFEGUARDING**

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| **What is the prospective carer/s understanding of safeguarding and safer carer and how will this be demonstrated within the family environment?**  *Summary of the carer/s awareness of child abuse and their capacity to protect children from harm and danger, including child sexual exploitation, internet safety and risk from predators in the community or in positions of trust. How will the carer/s balance the risks involved in day to day activities, including attitudes to personal and sexual boundaries. How will the carer/s manage the care of children who have experienced abuse or have the potential to be abusive to others.* |
|  |
| **How will the prospective carer/s share any concerns, changes of behaviour or circumstances or any significant changes in relationships in the fostering household or wider network?** |
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| **Analysis of the prospective carer/s ability to assess and manage risk, including whether they have a realistic and proportionate approach, to ensure that children and the fostering household are kept safe from harm. Analysis of the prospective carer/s ability to respond to a disclosure and talk about sexual abuse.** |
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**Preparation, Training, Expectations, Development and Support**

*Provide information about any formal training or preparation courses that the prospective carer/s have attended. Describe any areas where further training, information or support might be appropriate.*

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| **Skills to Foster feedback and preparation**  *Summary of the feedback, preparation including attitude to learning, and participation in the assessment process.* |
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| **Analysis of how the prospective carer/s have developed their understanding of what it will mean to be a foster carer and have a realistic view of how to care for a potentially traumatised child and their role within the child’s world. Are there are any areas where the carer/s need further preparation and why?** |
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**CHRONOLOGY - Addresses**

*A chronology will be devised not only of the prospective carer/s work and education history, but also a ‘life map’ of significant events in their life. This will incorporate events such as marriage, divorce, births etc.*

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| **Name of applicant** | |  | |
| **Date started** | **Date finished** | **Event** | **Address, location or details** |
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**Education and Employment**

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**RECOMMENDATIONS**

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| **Social Worker Summary and Analysis:** | |
| **What are the strengths of the prospective carer/s and what do we think will work well?** | |
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| **What are the vulnerabilities of the prospective carer/s and what are we worked about?** | |
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| **Scaling Question** | |
| ***On a scale of 0 – 10, where 10 is the prospective carer/s have demonstrated they will safeguard children, provide competent care to meet a complex child’s needs and recognise and seek consultation to respond to concerns and where 0 is the prospective carer/s are not able to safeguard and meet the needs of a complex child at this time. Where would you and the prospective carer/s scale this assessment and why?***  **0…………………………………………..10 - Prospective carer/s**  **0…………………………………………..10 - Assessing Social Worker** | |
| **What needs to happen next?**  *Who rates where and why? Identify the prospective carer’s development and training needs and the support and supervision required to enable the carer/s to meet the fostering standards and develop the skills and competencies to care for children with a wide variety of needs and challenges.* | |
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| **Social Workers Recommendation** | |
|  | |
| **Fostering Social Worker** | **Name** |
| **Signature** |
| **Date** |
| **Fostering Team Manager** | **Name** |
| **Signature** |
| **Date** |

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| **Name of prospective carer/s** |  | |
| **I/We have read the report prepared on my/our suitability to be foster carers.**  **I/We certify that, to the best of my/our knowledge and belief, the factual information contained in the report is accurate and I/we have indicated in the box below any factual corrections that need to be made.**  **I/We understand that if any of this information is found to be false or misleading, this will raise concerns about my/our ability to work effectively with the local authority as foster carers** | | |
| **Knowing that this report will be submitted to a fostering panel / court, I/we have the following factual corrections/observations/comments:** | | |
|  | | |
| **I/We understand that any information supplied by me/us in respect of this application may be held and/or processed in Kent County Council’s electronic system and is subject to the relevant provisions in the Data Protection Act 1998 and other relevant statutes.**  **I/We understand that this form is the property of the Kent Fostering Service to which I/we have applied. I/we agree not to copy this document (other than for my/our own personal records) or disclose its contents in full or in part, to any other person, fostering service or authority without the fostering service’s permission.** | | |
| **Signature** | |  |
| **Date** | |  |
| **Signature** | |  |
| **Date** | |  |