

LEICESTER CITY COUNCIL Fostering Service

Policy on Connected Person's Foster Care Placements

1. Introduction

- 1.1. Kinship Foster Care is where a Looked After Child or young person lives with family, friends or other people who are connected with them, in a placement approved by the Local Authority; this will be under a Care Order (Section 31 Children Act 1989), Interim Care Order, or provision of accommodation by agreement (Section 20 CA 1989). Kinship foster carers are assessed and approved under The Fostering Services Regulations (2011) in line with BAAF Guidance, Fostering National Minimum Standards and the Care Planning Placement and Case Review Regulations (2010).
- 2. A key principal is that children and young people should be enabled to live within their families where it is consistent with their welfare. If children and young people cannot remain at home, then placement with family, friends or connected people should be explored. Having a secure attachment and placement stability are important in building resilience, and promoting children's long-term well-being. Children within kinship care are generally reported to feel secure, happy and feel a sense of belonging within their family. Research also evidences high levels of commitment from Kinship carers, their strong bonds with the children, the pleasure they find in the children themselves and the satisfaction they derive from caring.
- 2.1. Kinship placements can allow children to maintain positive links with their heritage and their sense of identity and self-esteem can be maximised.
- 2.2. However, kinship placements can also present challenges. Many carers are grandparents where issues of age and health may be a significant factor. There may also be complex family relationships, housing overcrowding or financial difficulties. Carers need time and the opportunity to reflect on the impact of their decision. Ultimately, the assessment process with Kinship carers is designed to weigh up these factors with the welfare of the child/young person as the priority.

3. Assessments of prospective kinship carers

3.1. In Leicester, assessments are undertaken by the Fostering and Kinship Assessment Team.

- 3.2. The workers within the team undertake assessments of prospective carers and provide, supervision and support to the carers where a child has already been placed with the carers. Once approved, the ongoing supervision and support of kinship foster carers passes to the Supervision and Support Team. Where children and young people leave kinship care via rehabilitation to birth parents or via permanent orders such as Special Guardianship Orders the Supervision and Support Team in conjunction with the child's social worker continue to provide support until the order is made or the child returns home.
- 3.3. All referrals are welcomed without prejudice. This includes referrals irrespective of the age, gender, sexuality, or ethnic, cultural and religious heritage of the applicant. Where possible assessments are allocated to Social Workers that reflect the heritage of the applicant. The assessing Social Worker will be provided with access to appropriate support and guidance.

4. The Referral System

4.1. It may be the case that there are a number of family members and/or friends who come forward to care for children. Social workers may make use of a Family Group Meeting, and undertake a "viability assessment" to identify the most positive placement to go forward for a full assessment.

5. The Viability Assessment

- 5.1. When undertaking a viability assessment, the following will be covered.
 - Relevant sections of BAAF Form C Interviewing the prospective carers: This will cover issues such as their motivation, their relationship with the children, birth parents and contact. Issues of safety, parenting capacity, and family history are covered and areas such as whether the applicants have any major health or child protection concerns. Schedule 4 of the 2010 Regulations details what is to be covered.
 - Assessing the accommodation. Assessment is made of the space for a child or children and the safety of sharing a bedroom. A Health and Safety Checklist is completed, and a pet questionnaire completed if relevant.
 - Safety checks, Social Care client database (Liquid Logic) and CAIU checks are completed on all members of the household, checking with other Local Authorities if the proposed carers are known to them, if they do not live in Leicester City.
 - > The child's wishes and feelings about the proposed arrangements must be taken into account.

6. 'Regulation 24' Placements

6.1. There is provision in the legislation for Looked After Children and young people to be placed with carers for a time limited period where a full kinship foster care assessment is to be completed. The principle behind this is to not delay placements and/or minimise placement moves.

- 6.2. Where an immediate placement is made, checks are undertaken, and the BAAF Form C Viability completed, as far as practicable, before placement. Good practice includes viewing case files the department might hold on potential carers in order to identify any concerns or risks to the child.
- **6.3.** Temporary approval is granted. Information about the child including the Care Plan, is given to the carer, and a Placement Plan is prepared. The Child's Social Worker will visit weekly until the first Review, and then at least four weekly. The full assessment is then undertaken.
- 6.4. Where a child has been placed under Regulation 24, although such placements may be positive in the longer term, there is clearly some degree of risk if the outcome of the assessment is not positive.
- 6.5. A Foster Carer Agreement (Regulation 24) is signed by the carers, and Service Manager. The carers will receive a Fostering Allowance and are eligible for equipment.
- 6.6. If the full assessment has not been completed after 16 weeks, agreement is sought for an extension to the temporary approval, (Regulation 25). The IRO is informed. The extension is up to a further 8 weeks.

7. The Assessment Process

- 7.1. Kinship foster carers are subject to a comprehensive assessment process as mainstream carers, but the assessment is focussed on meeting the needs of the specific child/children rather than generic issues. The BAAF Form C is used.
- 7.2. The assessment itself comprises the following:-
 - A series of weekly home visits (usually between 6 to 10 visits) to cover the applicants history, relationships, support networks, parenting skills, child protection issues, ADP issues.
 - Applicants have a full medical with their GP.
 - A minimum of 3 referees are interviewed one family member and two nonrelated individuals.
 - Statutory checks are undertaken (DBS, Social Care Records, CAFCASS, Housing, Schools, Health Visitor, Employer).
 - The views of the looked after child/children are sought as are the views of any children or young people in the household.
- 7.3. Workers undertaking the assessment will make a recommendation as to whether prospective carers should be approved as kinship foster carers. This is presented as a report to the Leicester City Fostering Panel that meets on a monthly basis. The Fostering Panel then makes a recommendation to the Agency Decision Maker.
- 7.4. If the outcome of the assessment (at any stage of the process) is negative, this will be discussed with the applicant, the Team Manager and Social Worker and an appropriate course of action decided upon. Legal advice will be sought, particularly in care proceedings, and advice given to the applicant.

8. Support to Kinship Foster Carers

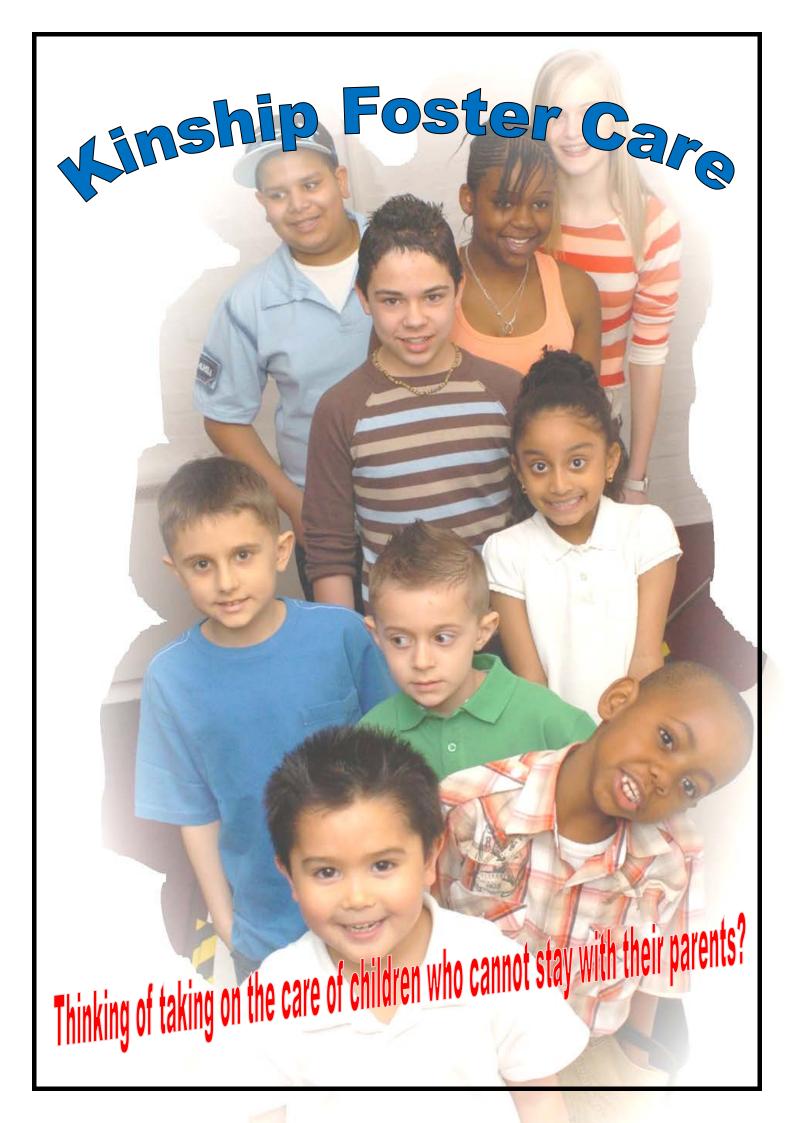
- Kinship foster carers are entitled to receive the full fostering allowance (this includes Regulation 24 and 25 Placements).
- Kinship Foster carers are eligible to take up all the training offered by the Fostering service.
- Kinship foster carers receive specific training related to kinship issues. They
 are expected to complete First Aid and Training, Support and Development
 Standards training offered by the Fostering Service.
- Kinship foster carers can get practical help with start-up costs and equipment such as beds, bedding etc.
- All Kinship Carers will have an allocated Supervising Social Worker, and have access to out of ours support available to all Foster Carers.

9. Post Approval

- 9.1. All kinship foster carers have their own Supervising Social Worker. Their role is to supervise the placement and carers. Regular supervisory visits are undertaken alongside Unannounced Visits and Annual Reviews.
- 9.2. Where appropriate we will also provide advice to carers on how to secure legal orders for permanency eg; Special Guardianship Orders and complete the necessary reports in conjunction with the childcare social worker.

10. Partnership working

10.1. Crucial in the success of kinship foster care placements is the degree of communication and partnership working between Social Workers, Kinship Foster Carers and Supervising Social Workers in the fostering service.



What is Kinship Foster Care?

Kinship foster care is where a child cannot be cared for by their parents and, as a result, is "looked after" by the local authority (in care). This child goes to live with a relative, family friend or a person connected to the child, who then needs to be approved by the local authority.

Many carers will have no experience of working with the city council and they may feel confused and uncertain. Hopefully this leaflet will start to explain some of the questions and concerns you may have.

Why Kinship Foster Care?

Social workers and fostering workers encourage kinship foster care because they believe that this is better for some children than being looked after by a foster carer they do not know. This is because it is easier for children to keep in touch with their parents, friends and other family members and helps them to maintain their religion, language, culture and heritage.

The families who offer kinship foster care want to help keep the family together. Our experience is that the commitment from kinship foster carers is something that gives a child great security and helps them to feel loved and comfortable within their own family environment. This experience has led us to value, promote and support kinship foster care.

What do Children Need and Want from Kinship Carers?

- Children want to grow up healthy and well educated even if they don't want to eat their greens or do their homework!
- Children want to have their wishes and feelings understood and to be involved in planning for their future.
- Children need to know that whatever has happened is not their fault and that they are not inferior to sisters and brothers still living at home or with other families.
- Children want help to remain connected to their past, to live in the present and to look forward to the future. Continuity is vital for us all, but particularly for children who have to leave their home and parents.
- Children want their parents and their kinship carers to cooperate if at all possible. It can be scary for a child to be at the centre of hostilities.
- Children say it is more important to them to stay in their families than to have more freedom and more money spent on them elsewhere.
- The most important thing for children is to feel loved, understood, secure, valued and accepted for who they are, rather than how someone would like them to be.
- Children need to trust their carers to protect them from whoever has hurt them.
- Children want to feel they belong and are wanted and that they have a right to their place in the family.
- Most children want to hang on to their parents even if they can't live with them. If you show respect and compassion from their parents, it would help children to feel better about themselves.
- Children feel more confident if everyone tells them the truth and tells them the same story in a sympathetic way – even if it is a painful story. They also want to have the right to privacy.

How does Kinship Foster Care work?

Child protection agencies can recommend that children are 'looked after' (come into care) because they fear that parents may not be looking after them safely.

In some situations, the child's social worker, together with the parents, will approach relatives and friends to see if they are able to look after the child. Sometimes a Family Group Conference maybe held to help families work out how children can be kept within their extended families when they aren't able to live at home. Don't feel guilty if you can't do it, there are other ways to help your family.

If a looked after child goes to live with a relative, friend, or connected person, this person will become the child's kinship foster carer.

Kinship carers will be looking after the child on behalf of Leicester City Council Children & Young People's Service. They will need to be approved as a kinship foster carer: this assessment is carried out by a social worker from the Kinship Foster Care Team.

Whatever my views of the parents, can I ensure I am positive about them to the child?

What do I need to think about?

Personal

Considerations

Am I doing this on my own or with my partner? If jointly, is our relationship stable enough?

Can I put the needs of the child before my relationship with the parents?

Can I cope with the possibility that birth parents feel resentment?

Am I prepared to attend any training I might need to parent the child effectively?

What support do I have around me to make this work?

The parent(s) may only be allowed supervised contact. Can I limit seeing the parent to make sure the children are safe?

How do I feel about the other side of the child's family (mum or dad's side)? Can I ensure they are part of the child's life?

Do I have the ability to fully commit myself to the care of the child?

Does the child have certain cultural and/or religious needs and could I ensure these needs are met?

How would the child feel about me becoming their main carer?

How will other family members view my decision to care for the child? Will this cause unmanageable rifts in the family?

I may have to supervise the contact of parent(s) until the child is 18. Could I do this? Do I have the patience and skills to care for a child who has child who has suffered trauma and may have additional behavioural and/or emotional needs?

Am I healthy, able and have enough energy to care for the child until they reach adulthood?

What do I need to think about? Practical Considerations

Do I have a child-friendly house, free of hazards?

Could the parent(s)
cause problems for the
child's new carer?
Could I cope with this
and keep the child safe?

Are my family members and regular visitors to my home happy to have checks carried out on them, e.g. police checks?

Am I hoping to start a family of my own or undergoing fertility treatment? Can I put my plans on hold for a significant period of time?

How would my own children be affected if I take on the care of another child?

Would I need to give up work to care for the child?

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Can I provide the long term stability and meet the child needs?

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Do I live very close to the parents? Do they present a risk? Would I need to move?

Am I prepared to work openly and honestly with professionals involved with the child, updating workers and attending relevant meetings?

Do I have other caring responsibilities, such as a partner or older relatives with care needs?

Do I have children of a similar age? Research tells us that existing children suffer if a child of similar age joins their family.

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Very young children will require a secure settling in period. Am I prepared

to take time off from

work to make this work?

Do I have enough room in

my house? Would I need

a larger home?

What does a Viability Assessment look like?

The child's Social Worker will visit you in your home to explore how you may be able to meet the child(ren)s needs.







The Social Worker will carry out Police Checks and checks on other systems on all the members of your household.



- Who else is in the home.
- Where you live and what this will mean in terms of school changes or distance from other relatives.
- Your physical health and the need to care for the child(ren) into adulthood.
- Your emotional and mental health, including any history of mental illness.
- Your relationship to the child(ren), to their parents and to their wider family.
- Your own experience of childhood and of being a parent.
- Your experience of education and how to support children's' educational needs.
- Any past or present issues concerning domestic violence, substance misuse and/or criminality.
- The safety of the area you live in and what support from services is available locally.
- What support you will get from family and friends to help you.

What does a Kinship Assessment look like?

1) How available you are

Time to build that important bond and time to respond to the child's needs. Balancing your current tasks with new caring tasks and how to help the child understand their situation, their past, providing educational, social and emotional support.

2) How you will manage contact

Your ability to make judgements and act protectively to maintain safe suitable contact arrangements with parents and children. Putting the child's needs at the centre when it means putting the parents needs to one side. Supervising contact and any support you may need with contact.

Your ability to protect the child

The risks the child has and could face. The role you will take in keeping them safe and your understanding of child protection. Your knowledge of child development and your support network.

A Kinship Assessment is more detailed than a Viability Assessment and will look at your strengths and limitations. It includes at least 6 visits of about 2-3 hours, visits to other family members and to three referees, seeing the children in your home, police checks and a health report from your GP. You will be asked about....

4) Why you want to care for the child?

Your understanding of the child protection concerns that lead to this situation. Your existing relationship with the child(ren) and your view on the need for long term care for the child(ren).

5) Your personal history

Your childhood experiences and your parenting experiences. Your role and the relationships in your family. Your physical and mental health, your current and previous relationships and your lifestyle choices.

6) How can you manage practically?

Your home environment, space in the home and your finances?

Fostering Panel

When the social worker has enough information they will write a report which you will be given and will be able to comment on.

This report goes to the Fostering Panel which is made up of professionals involved in caring for children as well as experienced foster carers and adults who have been fostered themselves.

The panel will then make a recommendation to the Agency Decision Maker (ADM) on whether you should be approved as a kinship foster carer. This senior manager will make the final decision.

If we are involved in Court proceedings, a report may be needed about you and your family in order for the Court to decide where the child should live.

There are some circumstances where someone cannot be approved as a kinship foster carer, for example where:

- The carer's home environment is assessed as not safe or secure enough, for example a family facing eviction.
- The carer's health assessment shows the carer is not able to care for the child, in the longer term.
- Child protection agencies have concerns about the carer or family.

Competing with parents?

Kinship Foster Care Assessments are carried out at the same time as Parenting Assessments. It is important that this is not seen as a competition for the child. Only if the parenting assessment is not successful, the kinship foster carer would step in to care for the child without further delay. This is done because we feel it is important for children to have a secure home as soon as possible.

What will be my responsibilities as a Kinship Foster Carer?

Just like other foster carers, kinship foster carers never have Parental Responsibility.

You'll be expected to provide a caring home in which the child's physical, emotional, educational, cultural and social needs are met. You will be working openly and honestly in partnership with social workers and professionals (e.g. school). They will support you, and monitor that child's progress through the review meetings and regular visits to ensure that the best interests of the child are being met. You are expected to attend training.

What happens if the Courts have made a Care Order on my foster child?

If a Court has made a Care Order on your child, this means the City Council has joint Parental Responsibility with the parents. Social workers must decide where a child will live and for how long as well as what contact the child will have with members of their family. It will be up to you to ensure that all decisions made by the Court and Department, regarding the child in your home, are carried out.

Can a child still see their parents?

Depending on individual circumstances, it is our responsibility to ensure contact between a child and their parents takes place from the beginning of the placement.

This could be in your home and you may be asked to supervise. A child could also meet their parents away from your home if this is considered appropriate.

Unless there are strong reasons why this shouldn't happen, you'll be encouraged to make sure your child stays in touch with other family members.

Help and Support

Having a child come to live in your family, even when you are a relative and know the child well, is likely to create changes in all the family relationships and it will take time for adjustments to be made. Social workers are available to offer you advice and support.

Kinship foster carers will have an allocated Assessing Supervising Social Worker during the period in which they are being assessed. All approved kinship foster carers will then have a supervising social worker to offer support through regular home visits.

Wanting and needing support as a kinship carer is not the same as being unable to manage. The supervising social worker will provide practical help and advice as well as emotional support. They can also provide equipment that the carer may need to help them to care for the child.

The child will also have a Social Worker, who will visit them regularly and meet with the kinship carers.

Kinship foster carers are expected to complete training, including First Aid (within 6 months of approval) and Training, Support and Development Standards within 18 months of approval.

Kinship foster carers also become members of Foster Talk (independent advice and support) and can attend the foster carer support groups.

Financial

Kinship foster carers of looked after children will receive a fortnightly allowance from the fostering service to help towards the cost of looking after the child. This is based on the child's age, (N.B. Kinship carers are NOT entitled to claim Child Benefit). Extra financial support may be available to meet additional needs the child may have, this would be discussed with the supervising social worker.

Permanent care

Children may return to their parent's care if the problems that led them to leaving can be overcome. If this is not possible, children need to have the security and stability of living with their carers until they reach adulthood (aged 18 or over).

If a child is to remain living with a kinship foster carer in the long term, the fostering service can advise the carer about legal orders they can apply for to make the care arrangements more secure and permanent. These include Special Guardianship Orders, Child Arrangements Order or Adoption.

Legal advice is often advisable when considering the permanent care of a child, where the kinship carer gains parental responsibility.

Leicester City Council is committed to equality of opportunity, elimination of discrimination, and promotion of good relations between all people, regardless of age, disability, race, ethnic or national origin, gender, gender identity, religion or belief, sexual orientation, pregnancy or maternity, marital or civil partnership status, or trade union membership.

Our aim is to ensure that people can fully participate and we are committed to promoting equality in respect of the fostering service's roles.





