

Renewal of Approval

Foster carer renewals should be completed within 90 days of the date the application was 'properly made' i.e., the date the APA was lodged. If an application for renewal is unlikely to be decided within 90 days and more time is required, ensure the applicant is advised of the delay and a written agreement entered into between the CSSC Manager and the applicant. This agreement should also include the period of the extension as outlined in the *Child Protection Act 1999* s143(2) & s143A(3).

Where the foster carer/s approval has expired before an application for renewal of approval is lodged, a new application for initial approval must be lodged and treated as an initial approval rather than renewal of approval.

For each assessment domain, where changes/issues have been identified, provide a summary of the information gathered and a clear assessment and rationale.

Discretionary information can be considered under the *Child Protection Act 1999 and the* Child Protection Regulation 2023 as part of foster carer renewal assessments. Discretionary checks should be conducted when additional information is required to inform the delegated officer's (the CSSC Manager) consideration of whether a person is able to meet the Statement of Standards (section 122 *Child Protection Act 1999*) for a child or young person in care and is assessed as suitable to continue to hold a certificate of approval as a foster carer.

Any discretionary information checks must relate directly to informing the suitability decision and must be clearly recorded in the applicant's renewal assessment. Some discretionary checks can be completed by assessors, however there are some discretionary checks that the CSSC Manager who is responsible for considering the foster carer's renewal assessment will need to action. Examples of some of these types of discretionary checks include but are not limited to:

- GP medical check
- Referee check
- information from an employer about a person's employment history
- information from other foster and kinship carer agencies if an applicant was previously approved as a foster or kinship carer either in Queensland or interstate.

These types of discretionary checks should be conducted as soon as the assessor or Child Safety identify this is required. Where the CSSC Manager is required to request the discretionary check, consultation between the assessor, foster care agency and the CSSC Manager should occur for the CSSC Manager to determine how the additional information will be requested. The PSU where appropriate may also be consulted. The assessor must speak with the applicant/s and clearly advise why this discretionary information is being requested (i.e., this information is required by the CSSC Manager to make an informed suitability decision) and obtain the applicant's consent to conduct the check. The assessor must also advise the applicant/s that this information will be discussed with the applicant/s, assessed, and recorded in their renewal assessment. If an applicant does not give consent for a discretionary check to be conducted, then the assessor must advise the applicant that this will also be discussed with them and recorded in their renewal assessment for the CSSC Manager to consider. The assessor should also make the applicant aware that if discretionary information can't be obtained, it may affect the CSSC Manager's ability to be satisfied whether the person is suitable to continue to be an approved foster carer.



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Assessment Domain	6.1 Motivation to Foster	
Link to Policy Statement	Ability to identify personal experiences, background, current family dynamics and lifestyle, and reflect on how these are relevant to caring for a child in care.	
Link to Statement of Standards	 The child's dignity and rights will be responsible. The child's needs relating to his or her cuit. The child will be encouraged to maintain. 	ulture and ethnic grouping will be met.
Focus	Suggested Prompts	Resources/Sources of Information
Explore whether the experience of fostering has impacted on the carer's motivation to continue caring and if their motivation continues to be positive.	 Describe any changes to your original motivation to provide foster care. Why do you wish to continue fostering? 	Interviews/contact with carer applicant/s

Where changes in the carer's motivation are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Whilst Jane continues to have a high level of motivation to provide care and demonstrates a dedicated commitment to long-term fostering, she has identified challenges that she has faced as a carer which have lead to decisions to not accept some types of placements that may have a negative impact on herself and other children in her household. Despite this, Jane is still considered to be positively motivated to continue as a carer.

Assessment Domain	6.2 Household members	
Link to Policy Statement	Ability to provide a safe and stable living environment that is free from harm or risk of harm.	
Link to Statement of Standards	The child's dignity and rights will be respecte	d at all times.
Focus	Suggested Prompts	Resources/Sources of Information
Explore how the experience of fostering has impacted on the household members and if they continue to have a commitment to supporting the foster carer in their role.	 Applicants How have members of your household responded to a child in care being placed in your household? How have you supported household members in adapting to having a child in care in the household? How have you managed any conflict with household members as a result of fostering? Adult household member How has having a child in care in the household impacted on you and how have you adapted? How have you addressed any challenges? Will you continue to support the foster carers in their role? Household member – young person/child What have you enjoyed about your parent/s caring for another child? 	Interview/contact with other adult household member Interview/contact with young person Interview/contact with child Interviews/contact with applicants and other household members Training assessment sheets and personal reflections



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Assessment Domain

Advise applicants and household members of the Disclosure statement and Privacy Notice which relates to information they provide to Child Safety in assessing their application/s as carer/s.

Ensure applicants and household members are aware of the how their personal information could be dealt with during proceedings in the Children's Court.

6.2 Household Members

- What things have been difficult?
- What things have changed since your parent/s started caring for another child?
- How do you feel about your parent/s decision to continue to provide foster care?

Applicant / Adult household members

- Discuss with the applicant/s and household member/s that any information that they provide to the Child Safety in the course of their assessment will be managed in accordance with the *Information* Privacy Act 2009.
- However, in Children's Court applications, Child Safety may be required to provide information about the applicants or household members which may be disclosed to all parties to the proceedings, including the child's parents.

Interviews with carer applicant/s, household members

Observations

Disclosure statement and privacy notice:

The Department of Child Safety, Youth Justice and Multicultural Affairs (Child Safety) is collecting the personal information on this form for the purpose of assessing your application to become or continue to be a foster or kinship carer. This is authorised under the *Child Protection Act 1999* and the Child Protection Regulation 2011. Your personal information will be managed in accordance with the Information Privacy Act 2009.

Under the Children's Court Rules 2016 and the Director of Child Protection Litigation Act 2016. Child Safety is required to provide relevant information to the Director of Child Protection Litigation (DCPL) in relation to child protection proceedings, and the DCPL has a duty to disclose documents relevant to the proceeding to each other party. Therefore, any information provided to Child Safety that may be relevant to current or future court proceedings may be provided to the parties, including the parents. This may include applications for future child protection orders for children already in your care as an approved foster or kinship carer, such as long-term Child Protection Orders

Where changes/concerns are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Jane's household currently consists of Jane (foster carer), her daughter Renee (aged 17) and Jake, who has been placed with Jane long-term.

Jane identified that Renee sometimes takes on an unreasonable level of parenting responsibility of her own accord. Jane has raised this with Renee as she desires her daughter to 'experience her own childhood'.

Renee talked about her strong feelings of affection for Jake and whilst she likes to help her mother with Jake's care, this is not expected by her mother and she does not feel extra pressure as a result of having children placed in her home. Renee was positive about the one- to-one time that her mother sets aside with her and talked about how these experiences allow her to feel cared for, valued, and loved by her mother.

No serious concerns were raised in relation to the impact of fostering on household members. The household is assessed as being committed to providing appropriate and supportive care to children placed in the home.



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Assessment Domain	6.3 Social Assessment
Link to Policy Statement	Ability to identify personal experiences, background, current family dynamics and lifestyle, and reflect on how these are relevant to caring for a child in care
Link to Statement of Standards	The child's need for physical care will be met, including adequate food, clothing and shelter
	 The child's material needs relating to his or her schooling, physical and mental stimulation, recreation and general living will be met
	The child will receive education, training or employment opportunities relevant to the child's age and ability
	 The child will receive dental, medical and therapeutic services necessary to meet his or her needs
	 The child will be given the opportunity to participate in positive social and recreational activities appropriate to his or her developmental level and age.
	 The child will be encouraged to maintain family and other significant personal relationships
	If the child has a disability – the child will receive care and help appropriate to the child's special needs.

6.3 Social Assessment: Family Structure

Focus	Suggested Prompts	Resources/Sources of Information
Identify if there have been any changes in family structure. Examine the impact that any change has had on the ability of the carer to continue to provide quality care.	Describe any changes to your family structure or role allocation and what led to	Interview resource: GenogramInterview resource: Ecomap
	these changes?Has providing care changed your family structure?	Interviews/contact with carer/s
	How has your family adapted to changes in family structure?	
	 Have any changes to your family structure or roles impacted on your ability to provide quality care? What are these impacts and how do you address them? 	

Where changes are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Changes in family structure as a result of fostering relate to Jane's daughter taking on increased responsibility. Whilst this is a concern for Jane, this change is not assessed as having an impact on her ability to continue to provide quality care based on the following:

- · Renee does this of her own volition;
- Jane acknowledges that it is not Renee's responsibility to take on a parenting role with Jake and has discussed her concerns and expectations with Renee;
- Jane feels that she is managing this dynamic well with Renee and talking openly with Renee about her concerns has helped; and
- · No specific concerns have been raised regarding Renee's relationship with Jake.



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6.3 Social Assessment: Social Support		
Focus	Suggested Prompts	Resources/Sources of Information
During the approval period the applicant may have experienced changes in their support network. Additionally, caring for a child in care may have had an impact on the support they receive outside of their family. Identify whether any changes to support networks have occurred, and the impact that change has had on their ability to continue to provide quality care.	 Describe any change in your support network. What impact has fostering had on your support network? How have any changes to your support network impacted on your ability to provide quality care? What additional support, if any, do you think is necessary to continue in your foster carer role? How would you access this support? 	 Interviews resource: Ecomap Interview resource: Support in times of stress Interviews with carer applicant/s Training assessment sheets and personal reflections

Where changes are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Whilst Jane has a stable and consistent support base consisting of a few close friends, throughout the approval period she experienced several difficult life situations, such as the death of her ex-partner, grandmother and adult foster child. While her grandmother was one of her primary supports, Jane identified multiple other supportive people in her life whom she can rely on and support her role as a foster carer.

6.3 Social Assessment: Time available to provide the level of care required

Focus	Suggested Prompts	Resources/Sources of Information
During the approval period the applicant may have had a change of circumstances that impacts on their available time, or they may have realised the significant time commitment that caring for a child or young person requires. Assess if the carer continues to have the necessary time to provide quality care.	 Describe any changes in your time available to provide the level of care required. What time commitments have you had to modify in order to meet the needs of a child in care? Are you currently providing another regulated care service from your home (eg. family day care, stand-alone care)? If you are, how will this impact on the quality of care you provide to a child placed with you Do you still have the time required to provide the standard of care required for children in care? 	 Interview resource: Use of time Interviews/contact with carer and their children Interview with carer Interview/contact with Family day care provider that the family day care educator is affiliated with

Where changes are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Jane identified that she had to modify her schedule in order to meet Jake's medical and daily care needs and this initially impacted on the amount of one-to-one time available to spend with her daughter. Jane found this difficult and admits that she felt guilty at times for not spending as much time as she used to with her daughter

Jane advised that she was quickly able to establish a new routine and now prioritises her own daughter's need for individual time with her, as well as Jake's care needs. Jane feels positive about the way she now manages her time and believes that she continues to have the time required to meet the needs of her own family and the needs of the child who are placed in her care.



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Assessment Domain	6.4 Relationships	
Link to Policy Statement	Ability to identify personal experiences, backgroand reflect on how these are relevant to caring	
Link to Statement of Standards	The child's dignity and rights will be respected at all times.	
	 The child will receive emotional care that a being cared about and valued and that conself-regard. 	
	The child will receive positive guidance who to change inappropriate behaviour	en necessary to help him or her
	The child will be encouraged to maintain fa	mily and other significant relationships
6.4 Relationships: Present spousal relationship		
Focus	Suggested Prompts	Resources/Sources of Information
Identify if there have been any changes to spousal relationships. Changes in a carer/s spousal	Describe any change that has occurred in your spousal relationship.	Interviews/contact with carer applicants
relationship may impact on the carers' capacity to provide care as a team and also have an impact on other family members.	 How has change in your spousal relationship impacted on your ability to provide care? 	 Observations Training assessment sheets and personal reflections
	How has change impacted on any children in your care?	and porcental remotions
	What does change mean for the ongoing care of children?	

Example:

Jane recently separated from her partner of 6 months. She advised that whilst this was difficult and she missed the company, the separation had no impact on her role as a foster carer as her partner did not take on any caring responsibilities in relation to the children. Jane advised that the separation has no visible impact on Renee or Jake as she kept her relationship very separate from her home life as she was hesitant to introduce the children to someone whom may not be in her life long-term. Jane understands that if she were to commence a new relationship, she must inform Child Safety as soon as practicable and that various personal history checks and assessments would need to be completed.

Where changes are identified, briefly summarise key points and provide your clear assessment and rationale.

6.4 Relationships: Parental relationships with children (including adult children not living in the household)

Identify if there have been any changes in the carer's relationship with their children (including adult children not living in the household). The provision of foster care may have had an impact on the carer's relationship with their children. Identify any changes with both the carer and their children, and the impact this may have on the carer's ability to continue to provide care. Suggested Prompts Applicants Describe any change that has occurred in your relationships with your children. How has providing foster care impacted on your relationship with your children? How have you managed these changes? How do these changes impact on your ability to continue to provide quality care? What skills/strategies do you use to maintain and nurture your relationship with your own children, whilst still providing quality care to a child in care? Applicants			-
changes in the carer's relationship with their children (including adult children not living in the household). The provision of foster care may have had an impact on the carer's relationship with their children. Identify any changes with both the carer and their children, and the impact this may have on the carer's ability to continue to provide care. Describe any change that has occurred in your relationships with your children. How has providing foster care impacted on your relationship with your children? How have you managed these changes? How do these changes impact on your ability to continue to provide quality care? What skills/strategies do you use to maintain and nurture your relationship with your own children, whilst still providing quality care to a child in care?	Focus	Suggested Prompts	Resources/Sources of Information
 Ine provision of foster care may have had an impact on the carer's relationship with their children. Identify any changes with both the carer and their children, and the impact this may have on the carer's ability to continue to provide care. How have you managed these changes? How do these changes impact on your ability to continue to provide quality care? What skills/strategies do you use to maintain and nurture your relationship with your own children, whilst still providing quality care to a child in care? 	changes in the carer's relationship with their children (including adult	 Describe any change that has occurred 	
appropriate way)	had an impact on the carer's relationship with their children. Identify any changes with both the carer and their children, and the impact this may have on the carer's	 on your relationship with your children? How have you managed these changes? How do these changes impact on your ability to continue to provide quality care? What skills/strategies do you use to maintain and nurture your relationship with your own children, whilst still providing quality care to a child in care? Applicants children (to be asked in an age	



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 Has any change occurred in your relationship with your parent/s? Has your relationship with your parent/s been affected by them providing foster care? How has it been affected? What do your parents do to maintain a relationship with you? 	
relationship with you?	

Where changes are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Jane's role of providing care has had an impact on both her and her daughter's own experience of sexual assault. Despite this, it is assessed that Jane continues to have the ability to provide a high quality of care. This is based on the following:

- Jane has demonstrated an awareness of the potential impact of fostering on Renee by modifying her placement preferences to ensure that Renee's emotional needs are not threatened by the inappropriate placement of young people in the family.
- Jane and Renee's experience of sexual assault has presented itself as a potential area of vulnerability for them both, and
 exposure to disclosures by young people who have had similar abuse histories has at times been emotionally challenging
 for them. As a result, Jane has chosen to change her placement preferences to stipulate that children and young people
 who have experienced sexual abuse not be placed with them. Jane has made this choice in order to protect Renee from
 preventable emotional distress.
- Renee feels that her mother's role as a foster carer has not impacted negatively on their relationship in any way. Renee said that her mother is always open to hearing her views about accepting other placements and what types of placements she is comfortable with.

Assessment Domain	6.5 Health and Wellbeing	
Link to Policy Statement	Ability to provide a safe and stable living envious harm	vironment that is free from harm or risk of
Link to Statement of Standards	and shelter	ne met, including adequate food, clothing
	 The child will receive emotional care the cared about and valued and that contril 	at allows him or her to experience being butes to the child's positive self-regard.
Focus	Suggested Prompts	Resources/Sources of Information
Identify any changes to the carer's health and wellbeing during the approval period and the impact of any changes on their capacity to continue to provide quality care.	 Describe any changes to your health and wellbeing. Describe any changes related to the health and wellbeing of other members of your household. How do changes to your own health, and/or to the health of other members of your household impact on children placed in your care and on your capacity to provide care? What strategies do you use to manage these impacts? Have you had any immunisations since your last approval? If so, what type? Have you continued with the immunisation schedule for all children placed in your care (as requested by the Child Safety)? Have you continued to follow the National Immunisation Program Schedule for your children? 	 The Carer Applicant Health and Wellbeing Questionnaire is a mandatory requirement and will need to be completed at both initial and renewal of approval.



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Where changes are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Jane periodically suffers from migraines and asthma, though she is able to control the severity with medication. She did not identify any serious health concerns that would impact on her capacity to continue to provide high quality care to children and young people.

Assessment Domain	6.6 Stress Management		
Link to Policy Statement		Ability to identify personal experiences, background, current family dynamics and lifestyle, and reflect on how these are relevant to caring for a child in care.	
Link to Statement of Standards	 The child's dignity and rights will be respective. The child will receive emotional care that cared about and valued and that contribute. The child will receive positive guidance with change inappropriate behaviour. 	allows him or her to experience being tes to the child's positive self-regard.	
Focus	Suggested Prompts	Resources/Sources of Information	
Explore how the carer has demonstrated their management of stress related to fostering during the approval period.	Describe any challenges/stressful events that you have faced in your role as a foster carer and how you have managed these?	Interview/contact with carer	
	Describe any new strategies you have developed to manage stress.		
	 Describe any challenges that you have found difficult to manage? 		
	How might you manage such events in the future?		

Where issues/concerns are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Jane's capacity to manage stress during the carer approval period was assessed and she spoke of facing many challenges related to providing care to children placed with her. Jane identified that at times she has felt like she has "failed" young people placed with her by not being able to either maintain ongoing placements or prevent young people from absconding. The development of Jane's self-care has centered on her acceptance that she is not required to "rescue" children or young people. She feels that this has been a learning experience for her and she has gained skills to deal with the stressors associated with fostering.

She has dealt with stressors by seeking support from the foster and kinship care service and her family. Through this support and supervision, her understanding of her role as a foster carer has developed. As such, she is assessed as having the skills and ability to address challenges in a responsive, appropriate manner.

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Assessment Domain	6.7 Capacity to provide quality care
Link to Policy Statement	Ability to provide a safe and stable environment that is free from harm or risk of harm
	Ability to provide a nurturing environment that contributes to a child's positive self-regard
Link to Statement of Standards	The child's dignity and rights will be respected at all times
	The child's needs for physical care will be met, including adequate food, clothing and shelter.
	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
	The child's needs relating to his or her culture and ethnic grouping will be met
	The child's material needs relating to his or her schooling, physical and mental stimulation, recreation and general living will be met.
	The child will receive education, training or employment opportunities relevant to the child's age and ability.
	The child will receive positive guidance when necessary to help him or her to change inappropriate behaviour
	The child will receive dental, medical and therapeutic services necessary to his or her needs.
	The child will be given the opportunity to participate in positive social and recreational activities appropriate to his or her developmental level or age.
	The child will be encouraged to maintain family and other significant personal relationships
	If the child has a disability – the child will receive care and help appropriate to the child's special needs.
6.7 Capacity to provide quality ca	are: Parenting Style

6.7 Capacity to provide quality care: Parenting Style

Focus	Suggested Prompts	Resources/Sources of Information
During the approval period, the carer may have adapted their parenting style to accommodate fostering. Identifying any changes to the carer's parenting style and assess whether changes in parenting style act to assist or inhibit their ability to provide a safe, stable and nurturing environment to children in care.	 Describe any changes to your parenting style, including discipline/behaviour management strategies, during your approval period? How successful have these changes been in parenting children in your care? What aspects of parenting have you found most challenging and most effective in your role as foster carer? How do you think children placed with you would describe you and your relationship with them? 	Interview/contact with carer

Where issues/concerns are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Jane advised that at times she experiences challenges in parenting Jake, who is diagnosed with Asperger's Syndrome. As a result, she has altered her parenting style to develop clear routines for Jake, modified her home environment, and adapted her behaviour management strategies to support Jake's needs. Observations indicate that Jake feels safe and loved in this environment. This is a major achievement for Jake and illustrates a positive outcome resulting from Jane's provision of consistent and appropriate care and support.



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6.7 Capacity to provide quality care: Providing care to children and young people in out-of-home care		
Focus	Suggested Prompts	Resources/Sources of Information
Identify if the carer has employed positive behaviour management strategies to address the behaviour of children and young people in their care. Exploring the carer's behaviour management techniques can assist to assess their ongoing ability to practically meet the Statement of Standards, particularly that the dignity and rights of children and young people in their care are respected at all times and that they receive positive guidance when necessary to help them change inappropriate behaviour.	 How does caring for a child in care differ from caring for your own children or other children you have cared for? How has your knowledge of the impact of abuse / harm on children, helped children in your care recover from the impact of abuse / harm? What positive behaviour management strategies and communication techniques have you implemented to address complex/difficult behaviour? Describe instances when you have experienced difficultly in managing a child's complex behaviour? What could you do differently next time to try to positively manage or address complex behaviours? How have you demonstrated respect for a child's right to privacy and confidentiality both within your home and in outside settings? How you have demonstrated your ability to meet the Statement of Standards as a carer and provide quality care to a child in your care. 	Interview/contact with carer
Where issues/concerns are identified, briefly summarise key points and provide your clear assessment and		

Example:

rationale.

Information gathered during the period of Jane's approval as a carer, indicates that she has faced challenges in caring for young people with complex needs. Issues in relation to this have been discussed and addressed with Jane throughout the approval period and whilst this area of care provision continues to be a challenge, she is assessed as being able to continue to provide quality care. This assessment is based on the following information:

- In one particular placement, Jane experienced challenges in relation to managing a young person's behaviour. This resulted in Jane experiencing high levels of stress and she decided to end the placement. Whilst supervision with Jane throughout the placement focused on understanding the young person's abuse history and possible reasons behind the young person's behaviour, Jane's expectations of the young person to change their behaviour were unrealistic (i.e., Jane desired that the young person meet a standard of behaviour that was not, in itself, unreasonable, but which did not take into account the impact of the young person's experience of abuse). Jane is aware that caring for young people with significant emotional and behavioural issues requires a lot of flexibility and patience, and through her experience of this particular placement, she was able to identify that this can be an area of challenge for her.
- Jane discussed that some of her determination to maintain certain rules and behaviour is based on her concern about how different behaviours would impact on Jake, who has been placed with her long-term. As a result of her experience of managing challenging placements, Jane decided to amend her placement preferences and now only provide care to children aged 12 and under. Jane's alteration of placement preferences reflects her ability to learn from experience and is an attempt to ensure that future placements are compatible with both her capacities as a carer and her family's needs.
- Some concerns were identified in relation to Jane's capacity to be flexible about the standards of behaviour she expects form young people who have experienced harm. Discussions with Jane about this issue have focused on helping her gain a greater understanding of the impact of harm on children and young people, and how this affects their behaviour and functioning. Ongoing supervision with Jane continues to address this issue.

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6.7 Capacity to provide quality care: Developing and/or maintaining a positive sense of identity in a child or young person.

Focus	Suggested Prompts	Resources/Sources of Information
Identify how the carer has contributed to strengthening and/or maintaining a positive sense of identity in children placed in their care.	 How have you contributed to the development and/or maintenance of a positive sense of identity in children in your care? How have you helped children in your care maintain a positive connection with their family and community? 	Interview/contact with carer

Where issues/concerns are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Whilst Jane facilitates and is supportive of appropriate family contact, at times she struggles with Jake's behaviour upon his return from contact. Jane advised that this leads to her feeling frustrated with Jake's family. Jane manages this by debriefing with the foster and kinship care service and Jake's CSO and she is mindful not to let her feelings of frustration for Jake's family impact on her care for Jake or Jake's experience of family contact.

6.7 Capacity to provide quality care: Cultural Awareness

Focus	Suggested Prompts	Resources/Sources of Information
assisted children in their care to maintain links to their cultural heritage and community.	How you have supported children from Aboriginal and/or Torres Strait Islander backgrounds to maintain links to their family, community and culture.	Interview/contact with carer
	 What new techniques have you learnt to implement during your time as a foster carer, to maintain children's links to their culture? 	
	 What positives have you seen as a result of assisting children to maintain links to their culture? 	

Where issues/concerns are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Jane has not yet cared for any children from Indigenous backgrounds. Despite this, she advised that she has had a lot of exposure to, and experience interacting with, people from diverse ethnic backgrounds. Jane's primary consideration in caring for children from different cultural backgrounds would be to seek information about their culture and make the home environment and her parenting style as consistent as possible with those cultures.

6.7 Capacity to provide quality care: Household Safety

o. Capacity to provide quality care. Household barety		
Focus	Suggested Prompts	Resources/Sources of Information
A new 'Household Safety Study' is to be completed by the assessor.	 Has the constitution of the household (i.e., people living in the household) changed? 	Interview/contact with carer
Determine if the carer has maintained an appropriate standard of household safety. Foster carers must continue to	 If so, does this relate to any additional or different safety issues for your household? 	
meet mandatory safety requirements.	 Have any other household safety issues been raised? 	
	 How are these safety issues being addressed? 	



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Where issues/concerns are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Due to Jake's behaviours, which include running across roads, climbing onto unsafe surfaces (e.g., stove, fence), putting items into electrical sockets etc., Jane has had to increase her awareness of home safety and adapt her practices to maintain a high standard of home safety by ensuring that:

- all medications and poisons are kept locked up and out of reach of children;
- · safety plugs are fitted into electrical sockets and locks are on the stove/oven; and
- · the yard is fully fenced.

Assessment Domain	6.8 Ability to work as part of a team	
Link to Policy Statement	Ability to work as part of a team that includes the child, their family, Child Safety and other relevant service providers	
Link to Statement of Standards	 The child's dignity and rights will be respected at all times. The child's needs relating to his or her culture and ethnic grouping will be met. The child's material needs relating to his or her schooling, physical and mental stimulation, recreation and general living will be met. The child will receive education, training or employment opportunities relevant to the child's age and ability. The child will receive dental, medical and therapeutic services necessary to meet his or her needs. The child will be encouraged to maintain family and other significant relationships. 	
	If the child has a disability - the child will receive care and help appropriate to the child's special needs.	
Focus	Suggested Prompts	Resources/Sources of Information
Assess the demonstrated ability of the carer to work as part of a team. Provide details of how, during the approval period, the carer has: • participated in case review processes	 Describe how you have participated in case review processes? (i.e., Family Group Meetings etc.) How do you actively support the case plans and identified goals of children in your care? 	Interview/contact with carer
actively supported the case plans of children and young people in their care	 How do you support children in your care to participate in decision making? 	
supported a child or young person in their care to participate in decision making.		

Where issues/concerns are identified, briefly summarise key points and provide your clear assessment and rationale.

Example:

Jane demonstrates an ability to work as part of a team and support children in her care, including working with Child Safety, the foster and kinship care service and other agencies (including schools, medical professionals and counsellors). Whiles Jane demonstrates a willingness to maintain open and positive relationship with parents and ensures that she always speaks positively about children's parents when children are present, she has experienced levels of frustration in relation to family contact and working with some families. This issue continues to be addressed by the foster and kinship care service and is not considered to impact on the children placed in Jane's care. Jane is well aware of the negative feelings she experiences and is mindful not to let her attitude impact on children and their experience of family contact. To manage these emotions, Jane debriefs with her support network, CSO and the foster and kinship care service.



Renewal of Approval

Rationale for Recommendation

Based on information gathered throughout the renewal of approval assessment, briefly provide a rationale for recommendations.

Example:

Jane has maintained a high standard of care for Jake (in long-term placement with Jane) and other children and young people placed with her during her previous approval period. Jane has consistently met the standards of care for the children placed with her. Her strengths are her warm and caring nature, her skill in, and compassion for meeting children's needs, and her commitment to continuing to meet the high needs of Jake. A challenge identified for Jane relates to her capacity to be flexible about the standards of behaviour she expects for young people who have experienced harm, and an area of vulnerability is the emotional stress she may experience in relation to caring for children or young people who have experienced sexual harm. Jane at times also experiences some frustration in relation to working with children's families due to differences in the way they manage their children's behaviour during family contact. Jane has demonstrated insight into these issues and they are currently being managed by giving careful consideration to the placement of children with Jane and ongoing supervision by the foster and kinship care service. It is assessed that these challenges do not impact on her ability to continue to provide a high quality of care to Jake.

I recommend that Jane's approval as a foster carer be renewed for a further two-year period.