**Bolton Children Services**

**Guidance notes for Children’s social workers**

**requesting a**

**Family and Friends carers (connected person)**

**assessment**

**This guidance and checklist is to be used for any friend or family member (connected person) who is being put forward to be assessed as an alternative care provider.**

This basic information is to be gathered by the social worker before all referrals are put through to the F&F team.

**Also make sure you check Liquid Logic to see if the individual or anyone in their household is known to the LA.**

For Reg. 24 assessment

* Please make sure that the individual/couple are made aware that a PNC check will be completed on everyone in the household over 18 and ask whether there is anything which might come up.

In most cases, the allocated social worker should try to gather the information requested in the referral and will:

* Give an indication of whether an individual/couple are suitable to be assessed or not progressed and the evidence to support this. This will reduce the amount of unsuitable referrals being made to the F&F team and prevent possible delay.
* Inform the individual/couple of the processes and what is expected from them from the onset. This will provide them with the earliest opportunity to make an informed decision whether they wish to be assessed and will reduce the amount of unnecessary referrals being made to the F&F team. \*The F&F team have visited individuals/couples who have withdrawn from the assessment once they have understood the entire process.
* Provide information in advance to the F&F team of any involved professionals as they may need to contact as part of their assessment. If F&F team can make contact with multi-agency partners as soon as possible, this may minimise potential delay.

**Please consider the following when completing the referral:**

1. A family and friends assessment will include detailed discussions around their own childhood/experiences of parenting/their own children (if they have any), previous relationships and a number of references to be obtained. If they have children; their views will be obtained.
2. Has the person put forward, met the children? How long have they known the parent for? When was the last time they had contact with the children? Is it a close relationship?
3. Is there anything in relation to either party (or a criminal nature) that we need to be aware of, as all juvenile records, cautions, warnings and spent convictions will show up on a DBS check?
4. While a medical condition may not automatically rule out an individual, we need to be aware as soon as possible. The person put forward needs to know that the Medical Advisor will require feedback from any involved medical professional.
5. **If you feel that following the above discussions that the people put forward should not be assessed further; this needs to be discussed with your manager and the legal team and reasons for not pursuing a referral to the Family and Friemds team for assessment needs to be clearly recorded and a statement to that effect may need to be submitted to the court and all parties.**
6. If the individual wishes to progress for an assessment, advise them of their right to withdraw at any stage of the process.
7. If the individual wishes for further time to consider whether they wish to be assessed, a timescale will need to be agreed. This will need to take into account any filing dates of the assessment.
8. If suitable:
* Ensure the adult/s are created on Liquid Logic and are linked to each other, and the child/ren.
* If **Reg 24 assessment -** completed the PNC checks. Ensure a CHOC form is completed and you have sought HOS approval

**Family & Friends Assessment Referral Form**

All sections of this form should be completed by the child’s social worker from Information gathered during the Screening process to ensure they are positive potential carers. Please return to Shirley Jennings- Teamleader Family and Friends Team. Please note that it is good practice for the referring social worker and the assessing social worker to carry out the first visit jointly.

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| --- | --- |
| 1. **Name(s) of the prospective carer(s) with whom the child is to be placed:**
 | **1.**  |
| **2.**  |
| 1. **ID Number of Applicant/s (ensure that applicants are added as relationship/s for the child on Liquid Logic) Have they had any previous involvement with CS**
 | **1.** |
| **2.** |
| 1. **D.O.B.:**
 | **1.**  |
| **2.**  |
| 1. **Address:**
 |  |
| 1. **Tel No.:**
 | **Home:**  |
| **Mobile:**  |
| 1. **Are they are a UK citizen ? What is their nationality/ethnicity/first language ?**
 |  |
|  |
| 1. **Name & D.O.B. of Child/Children to be placed:**
 | **1.**  |
| **2.**  |
| **3.**  |
| 1. **Child’s Identification No.**
 |  |
| 1. **Child(ren)’s Home Address**
 |  |
| 1. **Legal Status of Child(ren):**
 |  |
|  **11. Why is this assessment being requested? (Including background information as to why the child(ren) are being brought into care? Please attach chronology as well as any other relevant information if completed eg Childen & family assessment/Geneogram.**  |
|       |
| 1. **Do they know they have been put forward for assessment? What is there understanding of local authority concerns?**
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|   |
| 1. **Applicant’s relationship to Child(ren):**
 |  |
| 1. **Date and outcome of family group conference.**
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|  |
| 1. **What is the plan for the child(ren)? Date for PLO meeting:**
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|       |
| 1. **Are any other family members or other connected people being considered as carers? If so give details.**
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|       |
| **14. What are the views of the child with regards to possible placement with the applicant/s? Has the child been consulted?** |
|       |
| **15. Briefly what, if any, is the quality of the pre-existing relationship of the prospective carer(s) to the child’s birth parents?** * **Do the birth parents/extended family support this potential placement? Yes/No**
* **Are there any concerns regarding prospective carers being able to work within Local Authority plans, particularly in relation to agreed contact with birth families? Do the parents pose any risks?**
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|  |
| **16. Details of adults and children who already live in the prospective carer’s household:** |
| **Name** | **D.O.B.** | **Gender** | **Relationship to Prospective Carers** |
|       |       |       |       |
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| **17. Briefly Is there adequate space within the prospective carer’s household for the child/ren?: Where will the child sleep** |
|       |
| **18. Have you advised them that PNC/DBS checks will be undertaken? Do any of the members of the household have any convictions? If yes, please give details:**  |
|       |
| **19. Have you advised them that medical checks will be undertaken? Have they or ever had any physical or mental health difficulties? If yes, please give details:**  |
|       |
| **20. Do you feel that the person put forward should be assessed further? Have you any concerns?**  |
|       |
| **21. Name of Social worker and manager authorising this referral:** |
|       |
| **22. Date of referral to Family and Friends Team:** |

**Good practice suggests that either a joint meeting between the child’s social worker and the assessing social worker or a joint visit to the applicants takes place at the earliest opportunity.**

**Family and Friends Social Worker will anticipate identifying on the Child & Family Assessment the following :**

* **CHILD’S(REN’S) NEEDS  (including Cultural – Religious –Health (physical and emotional) – Education – Leisure.**

 **Please note: Child/rens social worker will need to complete a CPR/Child’s profile should this assessment be presented to Bolton’s Fostering Panel**