**Initial Assessment and Placement Approval for Family & Friends Carers of Looked After Child**

This pro forma contains the information necessary for the Department to give temporary approval for a child who is looked after\* to be placed with a relative or friend who is not an official Foster Parent. If approval is obtained it will be for a period of 6 weeks, if the placement is required beyond that timeframe arrangements must be made with Fostering First for approval as Family & Friends Foster Carers.

Section One must be completed whether the placement is being made in an emergency Out of Hours or during working hours. Section Two is additional information to be gathered before/on placement if practicable or as soon as possible afterwards (no later than 3 working days).

**Section One**

**The child/ren**

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| --- | --- | --- | --- | --- |
| Name | DOB | Gender | Legal Status | Relationship to Prospective Carers |
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Briefly state why accommodation is required now:

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Views of the child/ren regarding the proposed placement:

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Views of the parent/s regarding the proposed placement (if known):

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Previous relationship between proposed carer/s and child/ren (e.g. normal levels of contact to date, have they stayed overnight previously):

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**The Prospective Carers**

The prospective carer/s:

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| Name | DOB | Gender | Address |
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Relationship of prospective carer/s to birth parent (include any issues regarding the relationship with the other birth parent if relevant). How will these relationships affect their ability to provide safe and appropriate care?

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Other members of their household:

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| --- | --- | --- | --- |
| Name | DOB | Gender | Relationship to Prospective Carers |
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Criminal convictions disclosed by Prospective Carers:

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Consent to local Police Check and check on Children & Families records (all members of household 16 years and over):

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| --- | --- | --- |
| Print Name | Signature | Date |
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Confirm Local Police PNC Check completed:

Any information received via Police Check:

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Summary of previous history of Prospective Carers or members of household on Protocol:

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Physical condition and size of the property:

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Proposed sleeping arrangements for the child/ren:

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**Section Two**

What practical arrangements need to be in place for the prospective carer/s to provide for the care of the child/ren, including any specific needs they may have? (include availability of clothing, equipment (e.g. cot, pushchair), transportation to and from school etc)

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**Basic information regarding health and lifestyle of prospective carer/s:**

Is/are the prospective carer/s generally in good health? Are the prospective carer/s undergoing any medical treatment? Are they taking prescribed medication? Give details:

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Do the prospective carer/s or any members of the household smoke and if so what arrangements do they intend to take to protect the child/ren from the harmful effects of second hand smoke:

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Do the prospective carers use alcohol and/or non-prescribed drugs? If yes, give details:

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What role, if any, are the prospective carers to have in contact arrangements for birth parent/s? Are there any issues around this contact that need to be explored with the prospective carer/s?

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Information to be given to prospective carer/s:

* As the children are looked after an allowance will be paid by the DHSC to assist them in caring for the children based upon the Isle of Man Fostering Child’s Allowance rates. Standard Letter will be sent confirming the arrangement which will include a form for them to provide bank details where the allowance should be paid to.
* This approval/arrangement is for up to 6 weeks, if it is anticipated that the child/ren will still be looked after and living with the prospective carer/s for longer than this they must be assessed as Family & Friends Foster Carers by the Fostering Service.

Social Worker completing assessment:

Date:

Decision and comments of Chief Social Worker/Head of Statutory Social Work Services:

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(this could be retrospectively completed for decisions made OOH)