

**KINSHIP CARE**

**PROCEDURES AND GUIDANCE**

#### September 2021

1. **Definition of Kinship Care**
   1. Kinship Care is an arrangement for a relative or close friend to provide care for a child. There are many such arrangements where children are placed by their parents with family or friends without the involvement of the local authority. This Kinship Care procedure only applies to children who are Looked After and Accommodated by the local authority and placed by the local authority with Kinship Carers and eligible children who are subject to, or whose Carers are considering applying for, a Kinship Care order as outlined in Part 13 of the Children and Young Persons (Scotland) Act 2014 and the Kinship Care Assistance (Scotland) Order 2016. Support to other children who are placed in the care of family or friends by their parents would be provided through the Highland practice model if the child/young person had additional needs.
   2. In terms of children, an eligible child is a child who:
      * is or was previously looked after;
      * was placed with the involvement of the local authority;
      * is at risk of becoming looked after.

# Legal basis of placement

* 1. A child can only be looked after and accommodated in terms of the following legislation:

The Children’s Hearing (Scotland) Act 2011

[Children's Hearings (Scotland) Act 2011 (legislation.gov.uk)](https://www.legislation.gov.uk/asp/2011/1/contents)

* + - Section 83 where a Children’s Hearing makes a Compulsory Supervision Order and names the place of residence as their Kinship Carers
    - Section 39 and 47 where a Child Protection Order has been granted
    - Section 86 where the Children’s Hearing have made an Interim Compulsory Supervision Order.

The Children (Scotland) Act 1995

* + - Section 25 where the local authority has made a decision to Accommodate the child <https://www.legislation.gov.uk/ukpga/1995/36/section/25>

Adoption & Children (Scotland) Act 2007

https://www.legislation.gov.uk/asp/2007/4/section/84

* Permanence Order
  1. Children who are Looked After and accommodated and cared for by Kinship Carers have the same status as any Looked After and Accommodated child and work with them is governed by the duties of Section 17 of the Children (Scotland) Act 1995.
  2. The Arrangements to Looked After Children (Scotland) Regulations 2009 and Looked After Child procedures apply for short and long term planning, decision making and child’s plan meetings. [Guidance on Looked After Children (Scotland) Regulations 2009 and the Adoption and Children (Scotland) Act 2007 - gov.scot (www.gov.scot)](https://www.gov.scot/publications/guidance-looked-children-scotland-regulations-2009-adoption-children-scotland-act-2007/)
  3. Children who are cared for by Kinship Carers where there is a Kinship Care Order in place, are not considered Looked After and therefore the Looked After Children (Scotland) Regulations do not apply.

# Kinship Care Order

* 1. A Kinship Care Order is:
     + an order under section 11(1) of the 1995 Act which specifies the child is to reside with the Kinship Carer and gives that person parental rights.
     + an order under section 11 (1) which appoints the Kinship Carer as a guardian for the child.

From April 2016 Section 11 orders which were previously known as Residence Orders, and satisfy the criteria set out in para 3.2, will be Kinship Care Orders.

* 1. For the purpose of a Kinship Care Order a qualifying person must be:
     + Related to the child and this includes relations through marriage or civil partnership and those related to the child by half blood.
     + A friend or acquaintance of a person related to the child
     + A person who has such other relationship to, or connection with, the child as the Scottish Ministers may by order specify.
  2. A parent, whether or not they have parental rights and responsibilities, as they already have responsibilities towards their child cannot be assessed as a Kinship Carer.
  3. A Kinship Care Order allows the person caring for the child to make the day to day decisions about the upbringing of the child. A Kinship Care Order does not affect the birth parent’s responsibilities and rights, unless the Court has formally removed these.

* 1. If a Kinship Carer is planning to apply for a Kinship care order in respect of a looked after child the Social Worker should provide the original Kinship care assessment, the minutes of the meeting when they were approved, and details of what support is being requested to the Kinship care panel.
  2. If a Kinship Carer is seeking assistance with the legal expenses incurred in applying for an order an application should be made for legal aid for those with a disposable income of less than £26,239 (as at 11th June 2020) and confirmation should be provided to the Kinship Panel in relation to this.
  3. Kinship Carers can be supported to apply for a Kinship Care Order if they are not entitled to legal aid up to a maximum of £1,500 for uncontested cases and up to a maximum of £3,000 for cases which are contested.
  4. When a Kinship Care Order is applied for, the court may order a report by Health & Social Care. Legal services have guidance and a template. When you submit your report you should advise the identified administrative assistant in Health & Social Care, Business Support, who deals with this, so that an invoice can be raised.

# Decision to accommodate a child/young person

* 1. Before any child is looked after away from home it must be clear that separation from their parent(s) is in their interests, and the criteria of the legislation are fulfilled. Every effort must be made to support the child at home before accommodation is considered. Use of Section 25 to make placements with family or friends will be unusual because a parent is only likely to require such accommodation from the local authority because there is no-one in their family or friendship network. Before accommodating a child under Section 25 consideration must be given to providing help and support using

Section 22. All decisions to accommodate a child (whether or not placed within the family) must be made by the Children’s Services Manager.

* 1. Whenever a child becomes Looked After, the starting point of any assessment is gathering information about the child and their need for the intervention of the local authority. If the child does not already have a Childs plan one needs to be created in Care First and all relevant information gathered from the child, his/her family and other agencies involved. It is important to record the child and parent’s views including their views of the placement.

# Emergency placement with Kinship Carers

* 1. If a child is to be placed by the local authority on an emergency basis with friends/family on a Kinship care basis the following needs to be carried out ideally prior to placement but if this not possible within 3 working days of placement.
     + CareFirst records on all members of the household,
     + Contact police public protection unit to see if any concerns in relation to the address or adult members of the household
     + Check health records if possible, for all adult members of the household.
     + If the carer is in another local authority area these checks would need to be carried out in that area.
     + Confirm the legal basis of the Looked After child and the legal basis of the placement
     + Visit the accommodation - consider the safety of the environment and see the living and sleeping accommodation for the child. This stage is a basic safety check to try to ensure that there are no significant issues within the Kinship Carer’s family that could place the child at risk.
     + Provide a copy of the essential core record and the child’s plan, if available, to the Kinship Carer. If the child plan is not available, make sure that this is shared with the carer as soon as practicable.
     + Complete the written agreement about the child’s care needs and what the council plan to provide to meet immediate needs and what financial support will be provided. (See Appendix 1 – while all of the details may not be available at this point it must be completed as far as possible).
     + The carers should be informed in writing of their status and the timescales in relation to the full assessment being undertaken.
     + The Practice Lead agrees the suitability of the placement on the basis of the information available.
     + The carer’s details must be entered onto CareFirst and linked to the child in networks.
     + Consider immediate needs for financial supports and any essential clothing or equipment
     + The social worker and Practice Lead to meet with the relevant parties within 3 working days of child’s placement to review how things are going and to consider whether any additional support required and whether it is appropriate for the placement to continue.

**N.B.** If the child is to remain with the friends/family carers for longer than 3 days the full Kinship Care assessment needs to be undertaken. (see section 7)

# Viability of placement

* 1. Kinship Carers should be considered for children who are Looked after and accommodated at the earliest opportunity and the possibility of a kinship placement should be explored at each child’s plan meeting. If someone is interested in becoming a Kinship Carer for a child/young person then arrangements should be made to have a discussion with them in the first instance to explore this further. This discussion should focus on the needs of the child and the how the prospective carers would be able to meet these needs and what additional support may be required to enable them to do so. The carers should be asked to complete a form in relation to whether they have any relevant criminal convictions and seeking their approval to carry out checks with the police, health and local authority (Appendix I).
  2. This discussion may lead to a full assessment being undertaken or alternatively the carers may not be considered suitable either as they no longer wish to be considered or there are issues of concern identified, for example; recent domestic violence, concerns in respect of the prospective carers own children, substance misuse issues.
  3. The prospective carer should be informed in writing by the social worker if the decision is made not to undertake a full assessment and the reasons for this. Equally if the assessment process has been started but information then comes to light which means that the prospective Kinship Carers are not considered suitable then again, the reasons for this should be communicated to the prospective Kinship Carers in writing. There is not a right of appeal in relation to the decision not to progress to a full assessment, but the complaints process can be used if appropriate.

# Family meeting

* 1. A family meeting should be considered as soon as it has been assessed that a child may need to be accommodated. This should be arranged by the child’s social worker. If the child is to be accommodated on an emergency basis the family meeting should be arranged as soon as possible and certainly within 2 weeks. The family meeting must involve all members of the extended family who may have a significant role in the child’s life and the meeting must help them consider how they can work together to support the child and the carer.

# Criteria for Kinship care assistance for children who are not looked after

* 1. Kinship care assistance is available to children who are not looked after when:

1. An eligible child under the age of 16 years is being cared for by Kinship Carers who have or are considering applying for a Kinship Care Order.
2. An eligible young person over the age of 16 is being cared for by Kinship Carers who have a Kinship Care Order.
3. An eligible child is cared for by a guardian appointed under Section 7 of the Children’s (Scotland) Act 1995
   1. An eligible child is a child who is:
      * is or was previously looked after
      * was placed with the involvement of the local authority
      * is at risk of becoming looked after
   2. The involvement of the local authority in placing the child means that the Local Authority would have placed the child with foster carers or in residential care had there not been a kinship care placement available.
   3. In terms of a child/young person being at risk of being looked after the reasons for this

i.e. whether their wellbeing is being, or is at risk of being, adversely affected by any matter, should be clearly identified in the child’s plan following an assessment by a social worker.

* 1. If a Kinship Carer approaches the local authority seeking assistance information should be gathered to establish whether they meet the criteria above i.e. that the child is an eligible child and that there is a Kinship Order in place or that they are in the process of applying for a Kinship Care Order.
  2. If the eligibility criteria are not met the carer should be informed of this and the reasons for this in writing. There is not a right of appeal, but the complaints procedure can be followed if appropriate.
  3. If the eligibility criteria are met, then the full Kinship Care assessment will be undertaken, and they will be advised of this and the timescales for undertaking the assessment in writing.

# Assessment of Kinship Carers

* 1. A social worker must be identified to undertake the assessment of the Kinship Carers. In some cases, this may be a social worker other than the child’s social worker where the Practice Lead/Children’s Service Manager considers that this will enhance the Kinship Care assessment. The Kinship Carer must be advised in writing of the proposed time scale in relation to the assessment being completed. The assessment must be completed within 8 weeks and a decision made in relation to approval within 12 weeks. Where it is believed that this timescale will not be met the Children’s Service Manager must be informed at the earliest possible date and a date agreed for the completion of the assessment.
  2. The assessment of placements for looked after children must be started prior to placement or immediately after the placement has begun when this has been an emergency placement.
  3. For children who are not formally looked after the assessment should be started once the request from the Kinship Carer has been made if the criteria is met in section 8 above.
  4. The assessment must focus on how these proposed Kinship Carers can meet the needs of the child as outlined in the child’s plan and identify their strengths and their vulnerabilities. If the proposed Kinship Carers are a couple, then both adults need to be part of the assessment. The assessment also needs to identify what supports the carers need to enable them to meet the child’s needs (see Appendix C for areas to be covered in the assessment).
  5. The following are essential as part of the assessment
     + A PVG application should be undertaken in respect of the applicant/s and a disclosure check should be undertaken for other members of the household who are over 16 years of age.
     + A health reference on all adult members of the household. A pro-forma for this is attached. (Appendices E and F)
     + Two references from people out with the immediate family at least one of which must comment on their parenting ability.
     + The written agreement (Appendix A for Looked after children and Appendix B for children who are not looked after)
     + Local Authority checks to be carried out on all members of the household and if they live in another local authority area record checks must be carried out by the Local Authority where the proposed Kinship Carers live.
     + Carer/s must be entered on CareFirst.
* The Kinship Carer(s) should be advised, if appropriate, to seek advice from the Welfare support team in Highland Council to make sure that they are in receipt of all benefits they are entitled to - 08000901004.

The Kinship Carer(s) should also be advised of the National Kinship Care Advice Service (KCASS) who can provide advice and guidance on a range of issues. <https://kinship.scot/blog/2020/07/23/changes-to-kinship-care-advice-service-for-scotland>

* 1. The report must carefully analyse the information received in the course of the assessment and consider the strengths and pressures in the placement. The assessment should consider the applicants own background – where they were born and brought up, their experience of being parented, their experience of parenting, their relationship history etc. The report must evidence whether the carer/s can provide adequate and safe care for the child and a recommendation must be made as to whether they have the capacity to meet the needs of the child. It is important that the child and parent’s views in relation to the placement are included in the report.
  2. The assessment report should be checked by the Practice lead and must be shared with the Kinship Carers and any other relevant people 10 working days before the meeting for consideration of approval as Kinship Carers. Any issues that have been identified should be discussed with the Kinship Carers and their views in relation to the issues raised recorded in the assessment. The final assessment report should be signed and dated by the social worker undertaking the assessment and the Practice Lead.
  3. The assessment should clarify what assistance is being requested:
     + Payment of a Kinship Care allowance
     + Financial assistance to enable them to apply for a Kinship Care Order
     + A start up grant to enable them to purchase essential items
  4. A separate file must be started for the Kinship Carers where all information in relation to them must be stored. This information must be kept for 25 years after the termination of the placement or until their death if earlier than 25 years.
  5. The Kinship Care Advice Service for Scotland (KCASS) is being led by Adoption UK Scotland (AUKS) and AFA Scotland (AFAS). They can be contacted on 0808 800 0006 or by e mail [scotland@adoptionuk.org.uk](mailto:scotland@adoptionuk.org.uk)
  6. A child’s plan meeting must be held 6 weeks after the start of the placement if the child is looked after. It must be confirmed at this point whether or not the placement is to continue. If the plan is for the child to remain with the Kinship Carers the assessment must be completed by the 8 week point.

# Smoking and Kinship Carers

10.1 Tobacco remains the leading cause of preventable death in the UK, one in two long term

smokers will die from a smoking related conditions”. (Highland Smoking Strategy 2018-2021). The Highland council are committed to ensuring that children placed in Kinship Care have the best possible opportunity to grow in a healthy environment where positive behaviour is modelled and external risks factors, such as smoking, are reduced.

10.2 As part of all kinship assessments it is the responsibility of the assessing social worker to take a full smoking history and current picture of each prospective carer and the household. The detail of this should include what substance is smoked (tobacco/vaping), how often, where, for how long and what – if any – attempts have been made to give up.

10.3 Where prospective carers have self-identified as smokers the assessing social worker should ensure all prospective carers are aware that smoking within the house and could preclude them from being considered as Kinship Carers. The social worker should also signpost to smoking support services. (GP service, Practice Nurse, NHS Highland, Pharmacy services)

10.4 It is the responsibility of the kinship panel to evaluate the kinship assessment – including smoking information and consider this alongside the health and wellbeing needs of each infant, child or young person.

# Approval of Kinship Carers

* 1. The assessment report along with the outcome of the Disclosure (Scotland) checks, health checks, written agreement and references must be submitted to the Kinship Care Panel along with the Child’s plan and chronology for the child. The assessment will then be considered by the panel and a recommendation made to the Agency Decision Maker in relation to approval. A summary of the reasons for the recommendation must be completed within 5 working days of the meeting.
  2. The summary of the reasons for recommendations will be sent to the Agency Decision Maker within 10 days of the panel along with all the supporting paperwork and the Agency Decision Maker will have a further 5 working days to review the information and make the final decision. Where the Agency Decision Maker does not agree with the recommendations of a panel, they will discuss with the Chair of the panel and if required, defer back to a further Panel for reconsideration.
  3. The Chair of the Kinship Panel will write to the Kinship Carers to formally advise them of the decision of the Agency Decision Maker within 5 working days of the decision and they will be advised of their right of appeal.
  4. If approved the worker undertaking the assessment must notify the CareFirst Support Team who will be responsible for adding the Kinship Carer role on Care First.
  5. Following approval, the Practice Lead/Children’s Service Manager must notify by activity the Business Support Foster Desktop (BSFOST) of the new Kinship Carer(s) to enable the Business Support officer to obtain the financial details necessary for any payments to be made.
  6. The worker undertaking the assessment must also create a service agreement on Care First if financial support has been agreed and add an activity which requires to be assigned to the Practice Lead/Children’s Service Manager for Service Authorisation.

Following the Practice Lead/Children’s Service Manager authorising, the same activity requires to be re-assigned to the Business Support Fostering team Desktop and must include the current rate of Child benefit each child is in receipt of.

Business support will then set up the payment.

* 1. The Kinship Care agreement must be reviewed following approval to include details of procedure for review of the placement and any additional supports to meet the child’s needs and to confirm the payment which will be made to the carers.
  2. Qualifying care relief allows carers who look after children or adults to receive certain payments (qualifying amounts) tax free. Information in relation to this can be found in the link below.

[HS236 Qualifying care relief: foster carers, adult placement carers, kinship carers and staying put carers (2021) - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/qualifying-care-relief-foster-carers-adult-placement-carers-kinship-carers-and-staying-put-carers-hs236-self-assessment-helpsheet/hs236-qualifying-care-relief-foster-carers-adult-placement-carers-kinship-carers-and-staying-put-carers-2021)

# Appeals

* 1. If the Kinship Carer is not approved as a Kinship Carer, they have the right of appeal to the Executive Chief Officer (ECO) Health & Social Care within 28 days of them being notified of the decision.
  2. The Executive Chief Officer (ECO) Health & Social Care will make arrangements for the appeal to be considered and identify someone to hear the appeal and provide feedback on the circumstances. The person hearing the appeal can then either, make an agency decision, uphold the decision of the placement confirmation meeting or refer it back to the placement confirmation meeting for further consideration. The appeal should be considered within 28 days of receipt and the person considering the appeal has a further 5 working days to respond in writing to the appellant.

# Kinship Care allowances

* 1. There is a start-up payment available to help the carers purchase essential items for the child. The maximum value of payment available will be determined by the Health, Social Care and Wellbeing Committee and reviewed periodically. Authority to commit expenditure rests with the Children’s Service Manager as budget holder. Receipts are required for any purchases made and the money will be refunded by forwarding the receipts to the budget holder.
  2. The Kinship Care allowance is paid at the same rate as Foster Care allowance less Child Benefit. The payments are made from Section 50 of the Children’s Act 1975. Kinship Carers of looked after children are also entitled to a summer holiday payment, a birthday payment and a religious festival payment. This is not generally payable to children who are placed on a Kinship Care Order. The rates can be found at the link below.

<https://www.highland.gov.uk/fosteringandadoption/downloads/file/22/kinship_fees>

Financial support to Kinship Carers prior to their approval is the responsibility of the family team.

* 1. Kinship Care allowances will continue to be paid for children where there is a Kinship Care Order in place for as long as the young person remains in full-time education up to the age of 18 years. The payments for looked after children will continue to be paid for as long as the child/young person remains looked after.

13.3 Kinship Carers of looked after children are entitled to claim travel expenses (which will be paid at the same rate as that paid to foster carers) to enable them to attend meetings, take the child to contact, hospital appointments etc. If any additional expenses are required for example to enable the child to attend after school activities or for additional childcare this should be agreed in advance with the budget holder. The placement agreement for looked after children should set out what payments have been agreed and the child’s plan reviews should consider any additional needs thereafter.

# Kinship Carer’s out with the Highland council area

* 1. If a looked after child is placed with Kinship Carers in another local authority, the Local Authority and the local health authority must be informed.

# Transfer to Highland from another local authority

* 1. If a child who is in a Kinship placement out with the Highland Council area moves to the area and it is agreed that Highland Council accept responsibility for the case the Chair of the Kinship Panel should be notified.

# Child’s plan meetings

* 1. A child’s plan meeting must be held 6 weeks after the start of the placement if the child is looked after. It must be confirmed at this point whether or not the placement is to continue.
  2. Further child’s plan meetings must be arranged as per the Looked After children’s regulations. At the 6 month child’s plan meeting the needs of the child for permanency and the possible legal options need to be explored. If the Kinship Carer/s wish to pursue caring for the child on a permanent basis then consideration must be given in the child’s plan of their ability to meet the child’s needs in the longer term.
  3. Should the child’s plan meeting make a multi-agency recommendation in relation to the route for permanency being a Kinship Care Order the process outlined in Section 3 should be followed. Should the preferred route be a Permanence Order then the case should be referred to the Adoption and Permanence Panel who would consider the preferred legal route.

# Review of Kinship Carer

On an annual basis there must be a specific additional discussion immediately following the Child’s Plan Meeting, chaired by the QARO, to consider in detail any supports/advice/training the Kinship Cares and partners to the plan are identifying to address any barriers they are experiencing in carrying out their responsibilities to meet the Child/Children’s needs. Attendance will include the Kinship Carer, the Lead Professional and QARO, with other partners as identified where appropriate. As this is primarily about the Kinship Carer needs in relation to the child, attendance by the child would not normally be expected. Any changes/additions to the support for the Kinship Carers will be recorded in the Action Record under ‘Issues’ by the QARO following the CPM, and included in the Child’s Plan.

There is not a review process for Kinship Carers of children who are not looked after (i.e. who are now secured through a Kinship Order). They will be written to annually and asked to confirm that there has been no change in their circumstances.

# Existing Kinship Care arrangements

It is important to ensure that current Kinship Carers existing prior to the implementation of this procedure have a file set up for them as carers, and that their details are entered into CareFirst. The support needs of existing Kinship Carers must be considered within the child’s plan.

# End of kinship placement

19.1 The chair of the Kinship Panel should be informed in writing when a Kinship placement has ended. The memo should include the date the placement ended and the reason for the placement ending.

19.2 This memo will then be submitted to the next panel for discussion and the worker notified of the outcome. The Practice Lead/Children’s Service Manager must ensure that the Service Agreement and payment and any future allowances are ended on Care First within 2 working days of the placement ending.

19.3 If the placement of a looked after child ends on an unplanned basis the Lead Professional must consider having a Disruption Meeting to consider along with the Kinship Carer/s, what led to the breakdown in placement and whether other input or additional supports could have prevented the breakdown.

19.4 When a looked after child has to be removed on an emergency basis and is subject to a Compulsory Supervision Order with a condition of residence a Directors transfer should be completed.

# 20. Checks on other care givers

If the Kinship cares are using others to provide care for example to baby sit children, then the alternative carer should be asked to complete Appendix J to ensure that they are suitable carers for the child/young person.

# 21. Information and advice for Kinship Carers

The Kinship Care Advice Service for Scotland Kinship Scot is run by Adoption UK Scotland in partnership with the Adoption and Fostering Alliance. They can be contacted on 0808 800 0006 or by e mail [scotland@adoptionuk.org.uk](mailto:scotland@adoptionuk.org.uk) and the website is<https://kinship.scot/>and contains lots of useful information.

Appendix A



#### Written agreement between:

**The Highland Council Children’s Services and Kinship Carer/s**

* I/we agree to care for (child’s full name, home address and date of birth) who is being placed with (names of carers) in terms of (legal basis of placement)
* The Child’s parents details are: (name, address and contact details of parent/s)
* The contact arrangements for (child’s name) are:
* Name and contact details of child’s doctor are:
* Name and contact details of Child social worker are:
* Name and contact detail of School (if appropriate) is:
* Name and contact detail of health visitor (if appropriate) are:
* I/we Kinship Carer for (child’s name) agree to care for (child’s name) in a safe, appropriate and caring way and not to use physical punishment.
* I/we agree to seek medical attention for (child’s name) when necessary.
* I/we agree to allow the local authority access to (child’s name) at all reasonable times.
* I/we agree to work as part of the childcare team involved with (child’s name) and to contribute to the child’s plan.
* I/we agree to comply with the agreed contact arrangements.
* I/we agree to notify the local authority of any significant events or serious illness or occurrence in relation to the child or members of the household.
* I/we agree to care for (child’s name) in a smoke free environment (if child is under 5).
* I/we agree to ensure that any information about (child’s name) is kept secure and not disclosed to other people without the permission of the local authority.
* I/we agree to allow the local authority to remove the child at the end of the placement.
* The Highland Council agrees to provide support to (carer’s name) including financial support for the care of the child. (The detail of this financial support is to be added in when/if approval granted and the details of any intermediate financial support to be put in)
* The Highland Council agrees to provide/ have provided (any immediate resources for practical aspects of caring for the child)
* The Highland Council agrees to assist (name of carer) to negotiate educational and medical resources to meet the child’s immediate needs. Any complaints will be dealt with through The Highland Council Social Work Service complaints procedure
* The Health and Social Care service will work with other Highland Council services to access any necessary support to (name of carers)
* The Highland Council will strive to ensure that there are no organisational barriers to the child and her/his carer experiencing as normal a life as possible

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| Signed: | Date: |
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| Signed: | Date: |
| Print: | |
| For and on behalf of the Highland Council | |
| Signed: | Date: |
| Print: |  |
| Designation: |  |

Appendix B



#### Written agreement between:

**The Highland Council Children’s Services, and Kinship Carer/s who have already obtained or who have applied for a Kinship Care Order**

* I/we agree to care for (child’s full name, home address and date of birth)
* The Child’s parents details are: (name, address and contact details of parent/s)
* Name and contact details of child’s doctor are:
* Name and contact details of Child social worker are:
* Name and contact detail of School (if appropriate) is:
* Name and contact detail of health visitor (if appropriate) are:
* I//we Kinship Carer for (child’s name) agree to care for (child’s name) in a safe, appropriate and caring way and not to use physical punishment.
* I/we agree to seek medical attention for (child’s name) when necessary.
* I/we agree to allow the local authority access to (child’s name) at all reasonable times.
* I/we agree to work as part of the childcare team involved with (child’s name) and to contribute to the child’s plan.
* I/we agree to care for (child’s name) in a smoke free environment (if child is under 5).
* I/we agree to advice the Highland council of any significant changes in the child’s or our circumstances.
* The Highland Council agrees to provide support to (carer’s name) including financial support for the care of the child. (The detail of this financial support is to be added in when/if approval granted and the details of any intermediate financial support to be put in)
* The Highland Council agrees to provide/ have provided (any immediate resources for practical aspects of caring for the child)

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| For and on behalf of the Highland Council | |
| Signed: | Date: |
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| Designation: |  |

Appendix C

#### Areas for consideration in Kinship Carer assessments

**Safe**

* + Local Authority checks to be carried out on all members of the household
  + Disclosure (Scotland) checks to be undertaken on all adult members of the household.
  + Discussion with the carer/s about whether they have any criminal convictions or any charges pending?
  + Has/have the carer/s been able to protect children in the past? Have there been any issues in relation to children in their care?
  + What is the carer/’s parenting experience?
  + If the child’s parents have been abusive towards the chid what is the carer/s view of this?
  + Can the carer/s prioritise the needs of the child over and above the needs of their parent/s?
  + What routines and boundaries would the carer/s be putting in place for the child? Are they appropriate and reasonable and age appropriate?
  + Is the accommodation and its immediate environment safe for the child?
  + Who else lives in the house?
  + Does the child show any behaviour which would place him/her at risk and how are the carer/s able to manage this?
  + Do the carer/s have any animals that may pose a risk to the child?
  + Is there monitored safe access to a computer?

#### Healthy

* + Are the carer/s in good health?
  + Are there any mental health issues?
  + Is the accommodation clean and hygienic for the child?
  + Are there any issues now or in the past in respect of alcohol or drug misuse?
  + Do the carer/s smoke? If so are they trying to stop? Has there been discussion re the impact of this on the child?
  + Will the carers encourage the child to have a healthy diet/lifestyle?
  + If there are issues in relation to smoking, alcohol or drug misuse or diet are the carer/s able to make any necessary changes to their behaviour.
  + If the carer/s was unable to care for the child due to ill health can they identify anyone who would provide this on a short or long term basis?
  + Does the child have any particular health difficulties? If so, how will the carer/s manage these?
  + Will the carers be able to ensure that the child’s routine health needs are met?

#### Achieving

* + What is the carer/s attitude towards education?
  + Will they actively support and encourage the child?
  + Are the carer/s able to take the child to and from school if necessary?
  + Has the child got an appropriate place to sleep and to play?
  + What resources might the carer need to help them look after the child?
  + Is the carer aware that they must not smack the child or use inappropriate chastisement of any kind?
  + Are the carer/s able to give appropriate praise and encouragement to the child?

#### Nurtured

* + Why does the carer/s wish to care for the child?
  + What is the child’s relationship like with the carers?
  + Do the carer/s understand the needs of the child and do they have an understanding of child development?
  + If this is a long-term/permanent placement how will the carers cope with the change from childhood to adolescence?
  + How will the carer/s be able to cope with the change in role?
  + What is the effect of the child being placed with these carer/s on other members of the family? If the carer/s have their own children, their views in relation to the placement must be sought.
  + Are there any other family members who may be affected by the change in role of the carer’s e.g. other grandchildren.
  + If the child has been abused how will the carer/s be able to deal with this? For example, if the child shows sexualised behaviour or is not able to engage emotionally?
  + Are the carer/s able to promote contact if appropriate? Do they understand the possible impact of contact on the child?
  + Are they able to prevent contact if necessary?
  + Are they able to supervise contact if appropriate?
  + Is the care offered good enough? Will the carers manage any risks that have been identified? What supports will they need to do this?
  + Will the carer/s be able to help the child return to the care of their parent/s if this is appropriate?

#### Active

* + Does the child attend any out of school activities? Will the carer/s be able to support continued attendance?
  + What is the carer’s lifestyle? Is it active and healthy?
  + Will the carer/s be able to provide opportunities for the child to take part in suitable activities?
  + Does the child have any hobbies they would wish to pursue and are the carer/s able to assist them with this?
  + Do they have the energy levels needed to care for the child?

#### Respected and Responsible

* + Will the carer agree to an assessment and checks being made?
  + Does the placement meet the child’s cultural and religious needs?
  + How will the carer help the child to understand their circumstances and ensure that can have a positive outlook?
  + How will the carer ensure that the child’s wishes, and feelings are heard?
  + Will the carer work in partnership with the Local Authority, other partners to the plan and the children’s hearing system?
  + How will the carer/s respond to some of the core requirements in relation to the way they care for the child, minimum expectations etc?
  + How will the carer/s deal with parent/s that take all that the carers are offering as a right and show no gratitude?

#### Included

* + What are the carer’s work commitments?
  + How will this impact on the child?
  + Can the carer provide for the child?
  + Will the carer promote the child’s independence and confidence to achieve in education and in the social environment?
  + Community knowledge of family changes and expectations, including any “cover story” that the child or carer/s may wish to use.
  + If the child is to stay overnight with friends are the carer/s able to make appropriate arrangements to make sure the child is safe.
  + Is the accommodation suitable for the needs of the child, carer/s and their family? Are there appropriate safety measures in the home – child locks, storage of harmful substances etc.
  + Have the carer/s explored the impact of caring for the child on their lifestyle – employment, saving for retirement, caring for older relatives.

#### In addition

* + What is the relationship between the carers?
  + Are there any acrimonious family relationships which will impact on the child?
  + The impact of the change of relationships, the effects of loss, grief and separation, anger, hostility and failure on all members
  + In areas of weakness what supports can be provided to help the carer/s to meet the child’s needs and who will provide the support.
  + A full family history must be taken looking at previous relationships, strengths and stresses in relationships, potential impact on family relationships in the future if the child continues to live away from their birth parents.
  + What supports extended family members can provide to the child and the carers.
  + Will the child and or carer/s need respite and is there anyone who would be able to provide this?
  + If the parent/s have been substance misusers are the carer/s able to help the child understand the effects of this. Do they understand the impact this is likely to have had on the child’s behaviour including health physical, emotional and educational development and their ability to form lasting relationships?
  + What is the atmosphere like in the home?
  + The assessment must include the family relationships and bonds with the child’s birth parent/s.
  + What is the carers’ understanding of the reasons for the child being unable to live with his/her birth parent/s at this moment in time?
  + Are the carer’s able to be open about any difficulties including failures of parents even if this has a negative impact on the child’s parents and the relationship between them and the parents?
  + What do the carer/s see as areas that cause them difficulty?
  + What support, knowledge and skills development would they like?
  + The assessment must conclude with an analysis of the risks and benefits to the child of the proposed care arrangements looking at the strengths of the carer/s any pressures and what support would be needed to help them manage the pressures.
  + Part of the assessment and subsequent plan must record the views and wishes of the birth parent/s and of the child (appropriate to age and understanding) about the care arrangements and needs to be completed in partnership with the child and birth parent/s

Appendix D



Name of Referee\*

Address of referee\*

Date

Dear (Name of referee) \*

#### Re: Kinship care application

|  |  |
| --- | --- |
| **Name:** |  |
| **Address:** |  |

\* - Delete as applicable

Your name has been given to me as someone willing to provide a personal reference. The above mentioned are currently being assessed as Kinship Carer(s). for …………………….

I would be grateful if you could answer the following questions:

|  |
| --- |
| **1. How long have you known the applicant(s)?** |
|  |
| **2. In what capacity?** |
|  |
| **3. How much and what type of contact do you currently have with them** |
|  |
| **4. Please comment on the applicant(s) experience of looking after children.** |
|  |
| **5. Please comment on the applicant(s) ability to provide a safe and caring**  **environment. Please advise if you have any concerns about the applicant(s) ability to keep the child safe from harm and abuse.** |
|  |

|  |
| --- |
| **6. Please comment on the applicant(s) ability to work as part of a team.** |
|  |
| **7. Do you think the applicant(s) will encourage the child to achieve to his/her full potential both in terms of education and in encouraging social activities?** |
|  |
| **8. Do you think the applicants lead a healthy lifestyle and will ensure that the child’s health needs are met?** |
|  |
| **9. Do have any concerns about the applicant(s) which you feel social work services should know about?** |
|  |
| **10. Are there any other comments you wish to make?** |
|  |

#### Signature: ………………………………………….. Date: …………………………………………..

A stamped addressed envelope is enclosed for your reply. Thank you for your assistance.

Yours sincerely

I do/do not give my consent for this reference to be shared with the applicants.

#### Signature: …………………………………………..

**Date: …………………………………………..**

Appendix 6

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name & Address of GP and Practice |  |  | **Please reply to:**  Health & Social Care  e-mail:  Date: |  |  |  |

**STRICTLY CONFIDENTIAL**

Dear Dr……………

|  |  |
| --- | --- |
| **Re: Prospective Kinship Carers - Medical Report** | |
| **Name** |  |
| **Address** |  |
| **D.O.B** |  |

I am currently in the process of assessing …………….... as a Kinship Carer for ………………….

I understand that they are patients of yours and it is necessary, according to the Looked After Children (Scotland) Regulations 2009 to obtain a medical report in relation to any health issues that may affect …...……….. ability to look after children for example, serious physical illness, mental illness or substance/alcohol related issues.

I would be grateful if you could advise me if there are any health related issues that, in your view, would have a bearing on ………………..………. ability to provide care for the child/ren.

....……………has given his/her consent for you to disclose this information. Please see the permission letter attached.

Many thanks. Yours sincerely

Social Worker

**Consent to disclose medical information**

I hereby give permission for Dr …………… to disclose any relevant medical information in relation to the Kinship Carer assessment.

…………………………………….

Name…………………………….

Appendix F

Name & Address of GP and Practice **Please reply to:**

Health & Social Care

e-mail:

Date:

Dear Dr…………………..

#### RE: NAME, ADDRESS AND DATE OF BIRTH

The above named is a member of the same household as a person who is being assessed as a Kinship Carer.

It is necessary, according to the Looked After Children (Scotland) Regulations 2009 to obtain a medical report in relation to any health issues that may impact on the child/ren in respect of any adult residing in the household.

I would be grateful if you could advise me if there are any health related issues that may impact on the placement of the child/ren in this household.

……………has given his consent for you to disclose this information, please see the permission letter attached.

Many thanks.

Yours Sincerely

Social Worker

**Consent to disclose medical information**

I hereby give permission for Dr …………… to disclose any relevant medical information in relation to the above.

…………………………………….

Name…………………………….

Appendix G

**KINSHIP CARE - CHECKLIST FOR SOCIAL WORKER**

|  |  |
| --- | --- |
| **Prospective Carer:**  **Name, Address and Date of Birth** |  |
| **Child’s Name**  **Name and home address** |  |

|  |  |
| --- | --- |
| **SEEK APPROVAL FOR CHILD BEING ACCOMMODATED FROM CSM FOR LOOKED AFTER CHILD** | **Date completed** |
|  |  |
| **ESTABLISH LEGAL BASIS OF PLACEMENT/ESTABLISH CRITERIA MET FOR CHILD WHO IS NOT LOOKED AFTER** | **Date completed** |
| What is the Legal Status of the child? |  |
| **EMERGENCY PLACEMENT WITH KINSHIP CARERS/VIABILITY ASSESSMENTS – Checks to be**  **carried out within 3 days of placement.** | **Date completed** |
| CareFirst Records on all members of the household to be undertaken |  |
| Contact police public protection unit to see if any concerns in relation  the address or adult members of the household |  |
| Check health records if possible, for all adult members of the household |  |
| Visit the accommodation – consider safety of the environment, and  see the living and sleeping accommodation for the child. |  |
| Provide a copy of the essential core record and the child’s plan (if available) to the Kinship Carer |  |
| Complete the written agreement about the child’s care needs and  what the council plan to provide to meet the immediate needs, this must include financial support. |  |
| The Practice Lead agrees the suitability of the placement on the basis of the information available. |  |
| The Carers details must be entered onto CareFirst and linked to the child in networks. |  |
| Consider the immediate needs for financial support and any  essential clothing or equipment |  |
| Social worker and Practice Lead to meet with the relevant parties within 3 working days of child’s placement to review how things are going and to consider whether any additional support required and  whether it is appropriate for the placement to continue. |  |
| If the placement is not considered suitable the carers should be  informed of the reasons in writing for both emergency placements and when considering whether a placement is viable |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **PLANNED PLACEMENTS WITH KINSHIP CARERS** | **SENT** | **REC’D** | **Date Completed** |
| Enhanced Disclosure checks on all adult members of the household. |  |  |  |
| Health Reference on all adult members of the household |  |  |  |
| Two references from people out with the immediate family |  |  |  |
| Written agreement to be completed for children  placed by the local authority |  |  |  |
| Local authority checks to be carried out on all members of the household (including other local authorities if they previously lived out with Highland. |  |  |  |
| Assessment report to be completed within 8 weeks and submitted to the Kinship care panel with all the relevant documentation. Assessment to be shared with the Kinship Carers prior to panel. |  |  |  |
| A separate case file must be started for the  Kinship Carers. |  |  |  |
| Family Meeting to be arranged including all members of the child’s family who have a role to play. This should be done prior to or within 2 weeks of placement. |  |  |  |
| Obtain written agreement with carer |  |  |  |

|  |  |
| --- | --- |
| **APPROVAL** | **Date completed** |
| Papers sent to Kinship care panel – Assessment Report, Written Agreement, Personal References, Medical Report on all adults in the household, Outcome of Disclosure checks for all adults in the household, Child’s plan and Chronology for the child |  |
| If approved Social worker to notify CareFirst Support team who will be responsible for adding the Kinship carer role on Care First |  |
| Following approval, the Kinship Care agreement must be reviewed and updated |  |
| **PAYMENT ARRANGEMENTS** | **Date completed** |
| Social worker to create a service agreement on care first and add an activity which should be assigned to the practice lead for  service authorisation. |  |
| Practice lead authorises the activity and re-assigns to the |  |

Business Support Fostering Team Desktop. Information to be provided about the rate of Child Benefit each chills is in receipt of. Business support will then set up payment and return to practice lead for Authorisation.

**Social Worker making assessment**

|  |  |
| --- | --- |
| **END OF PLACEMENT** | |
| Date Placement ended |  |
| Notification sent to chair of Kinship panel that placement ended. |  |
| Practice lead must ensure that Service Agreement, payment and any future allowances are ended on Care First within 2 working days of placement ending. |  |

Appendix H

Name & Address of Kinship Carer **Please ask for:**

**Direct Dial:**

**E-mail:**

**Your Ref:**

**Our Ref:**

**Date:**

**Re: Kinship Care application**

I am writing in relation to your application to become a Kinship Carer for ………………(name and date of birth of child/ren).

I am writing to confirm that the plan is to complete the assessment within 8 weeks, i.e. by ……………. (insert date). The assessment will be then be presented to the Kinship Panel for consideration and they will make a recommendation to the Agency Decision Maker in terms of approval. The assessment report will be shared with you prior to the Kinship Panel being held.

Yours Sincerely

Social Worker

Appendix I

**PERMISSION FOR HIGHLAND COUNCIL LOCAL AUTHORITY CHECK/DECLARATION**

**Prospective Kinship Carer Name:…………………………………………………………….**

**I (name) Date of Birth:**

**Address:**

**hereby declare that I have/have not been convicted of any criminal offence and I do/do not have any criminal charges pending.**

**Signature: Date:**

**Information regarding criminal offences pending**

|  |  |  |
| --- | --- | --- |
| **Offence** | **Date** | **Outcome** |
|  |  |  |
|  |  |  |

**Information regarding criminal charges pending**

|  |  |  |
| --- | --- | --- |
| **Offence** | **Date** | **Outcome** |
|  |  |  |
|  |  |  |

**I confirm that the above information is true**

**I agree to the Highland Council checking their database and the data bases of any local authority where I previously resided and to them contacting the police and my GP seeking any relevant information in respect of my ability to provide safe care**

**Signature: Date:**

Appendix J

**PERMISSION FOR HIGHLAND COUNCIL LOCAL AUTHORITY CHECK/DECLARATION**

## Kinship Carer Name:

**Relatives/Friends/Neighbours/Care of Children in Kinship placement for Babysitting/Emergencies etc.**

**I (name) Date of Birth:**

**Address:**

**hereby declare that I have/have not been convicted of any criminal offence and I do/do not have any criminal charges pending.**

**Signature: Date:**

**Information regarding criminal offences pending**

|  |  |  |
| --- | --- | --- |
| **Offence** | **Date** | **Outcome** |
|  |  |  |
|  |  |  |

**Information regarding criminal charges pending**

|  |  |  |
| --- | --- | --- |
| **Offence** | **Date** | **Outcome** |
|  |  |  |
|  |  |  |

**I confirm that the above information is true**

**I agree to the Highland Council checking their database and the database of any local authority where I previously resided.**

**Signature: Date:**