

Placement with Parents Assessment Guidance

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Purpose of the Assessment

The purpose of the assessment is to enable the local authority to determine whether this care arrangement will safeguard and promote the child's welfare and meet their needs as set out in their care plan

When to Complete the Assessment

Where consideration is being given to place, on a full-time basis, a child subject of either an Interim Care Order or Care Order with:

- a Parent
- a Person with Parental Responsibility
- a Person who has been given Parental Responsibility through a Residence Order or Child Arrangement Order

Or

When the family time (contact) for a child, subject of an Interim Care Order or Care Order, is being considered for increase to include overnight stays or periods of care exceeding 24 hours.

Decision Making

The decision to start the reunification process or increase family time (contact) to include overnight stays, is a big decision that impacts the child and the family, not only in the short term but shapes their relationship for the future. Best practice would dictate the decisions to consider reunification or significant changes to family time (contact) are made in a multi-agency forum, alongside the child and their family, usually within the formal review process.

Upon the completion of the assessment, recommendations to progress with extended family time (contact) will be considered and authorised (where agreed) by the area manager.

Recommendations for reunification will be considered and authorised (where agreed) by the senior manager.

Decisions reached will be the following:

- Child can/cannot have overnight family time or period of care extending 24 hours
- Child cannot be reunified now, but further work is recommended as part of this assessment period
- Child cannot be reunified now, safeguarding concerns are too high
- Child can be reunified subject to successful reunification transition period.

Assessment Expectations

The assessor should be a qualified Social Worker. As part of the assessment they should undertake a series of home visits to inform the assessment; considering parenting capacity, home environment,

any existing responsibilities/conditions that may impact on parent's ability to care for the child/young person. As well as any external factors that may influence or impact on their parenting.

The assessor will work in an open and honest way with the parents, ensuring they evidence discussion around any risks/concerns and they have evidenced any work completed with the parents to support and aid their understanding and outcome of this work.

As part of this assessment any medical references needed should be collated as well as ensuring everyone identified to play a significant role in the child's life aged 18+ has a DBS check completed as part of the assessment.

Disclosure Barring Service (DBS)

Parents and all household members over 18 years old are required to undergo a Disclosure Barring Service (DBS) check or Police National Computer Check. This will also apply to regular visitors who are likely to have **regular, unsupervised** time spent with the child.

It is recommended, members of the household and significant others are given opportunity to declare any past offences or cautions and these are discussed while waiting for checks to be returned.

The Manager will need to give due consideration to the significance of any information from self-declaration or DBS or Police National Computer Check (PNC). In doing so, Managers should consider what is the context of the criminal record if they have one, consider any intel or allegations that had no criminal outcome and the reason for this. Managers should also take into consideration if the person was honest with us about their history before formal checks were completed, have shown insight into any concerns we may have, and if they have shown remorse.

Manager's should reference any supporting evidence that has informed their decision making as to the significance of the information to the child and ensure this is also in the appendices. Please remember to ensure consent has been given by police for this and any restricted or redacted information is checked before it is shared.

Local Authority Check

We always need to consider if children or adult's have been known to any social work service at any time in their lives, if so, in which authority area and for what purpose and the relevance of this to the child's welfare.

Assessment Plan

By using an assessment session planner, those involved in the assessment are clear on what is expected of them before and during the assessment process.

As there may be several children, family members, significant others and professionals to consult with, the order of the sessions and what to cover will need to be planned around this. Through having key information available from other sources, prior to a planned session with parents, this can make time

spent with parents more purposeful, with challenge and support offered in a more meaningful way, enabling reflection and change where required.

A suggested assessment session planner will look like this:

Date and Time	Session with e.g. Mr Smith	Details and purpose of session	Location	Did the session take place? If not, why not?
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For the avoidance of doubt, all members of the household and all children of the parents (where a relationship is present) will need to be interviewed for the purpose of this assessment.

Consideration will need to be given to interviewing arrangements of significant others e.g. frequent visitors to the household and those who will be providing key support and care for the child such as a close friend or relative.

To ensure a holistic assessment, you will be drawing on several different sources of information, to triangulate and confirm self-reported information and to seek, where necessary, different expertise and opinion. When you have a number of reports available to you, the content of these reports do not need to be copied over into the main body of your assessment, with permission from the author, these can be referenced and added as appendices to inform decision making by a senior manager or a Judge.

There is an array of tools that can be used to explore themes or areas of both parent and child's lives, these can range from questionnaires, scaling tools and creative worksheets for children. Tools such as these can be found in [Assessment Toolbox on ReSources](#).

Examples of reports and professionals used for these assessments are listed below:

- Previous Court evidence, parenting assessments, psychological assessments.
- Paediatric reports, Mental Health support information, any other professional agency report e.g. drug worker
- Chronology of previous involvement with Children Social Work, also include Adult Social Care where applicable

Adjustments Made to Support the Parent

It is important for adjustments to be made to support parents and children's understanding and wellbeing during the assessment period. Examples of this are below but are not limited to:

- Time allowed to support the development of positive working relationships
- Proceeding with the assessment sessions at their own pace, including offering breaks in sessions.
- Encouraging subject to contribute to sessions and care tasks, for example by asking her/him how she/he feels and what she/he thinks.
- Role modelling of tasks expected, in particular prior to observations
- During observations providing in the moment feedback and support with refocusing on to the task
- Checking their understanding for example by asking XXXX to repeat what they have understood.
- Explanations provided for why things have been suggested
- Support provided to attend appointments and participate in them.
- Use of goal setting and printing goals out as a visual prompt

- Encouraging the use of lists
- Offering stress management opportunities such as breaks in sessions, encouragement to take time out, to go for a walk or rest if necessary.
- Where required use of translators and/or literature in suitable font size, coloured sheets (dyslexia), picturised tools.
- Learning Disability or Mental Health Advocate
- Following instructions as per cognitive ability assessment (where available)
- Learning style questionnaires

Changes to Family Time (Contact)

This is a significantly impactful decision for a child and their family. Before this decision is made and any new and extended family time (contact) is introduced, we must consider:

- Messages this gives to the child
- Messages this give to the family
- Impact should this start, and then later need to reduce or stop
- Risk within the family and community and how these can be managed/addressed

Assessment During Care Proceedings

Placement with Parent assessments are not only completed when considering increase of family time (contact) or reunification for a child in our care. We may need to complete this assessment as part of care proceedings, where we are seeking an Interim Care Order, or have an Interim Care Order where the child is to remain in the care of the parent.

During care proceedings, if a parenting assessment is ordered, pursuant to s.38(6) CA 1989 and Devon have an Interim Care Order, childcare planning regulations will need to be followed. A Placement with Parents assessment is required at the point the family are moving from the Child and Parent Assessment placement (foster or residential unit), to their home (day 1) for further assessment under Interim Care Order. Social Workers will need to prepare the assessment in advanced, utilising information provided in the parenting assessment already available, as well as their own observations, knowledge of the family, visits to the child and family, wishes and feelings and professional views as a minimum.

Assessment Content

The Framework for the Assessment of Children in Need and their Families (Department of Heath et al, 2000) is used to ensure we give full and holistic consideration to the child's developmental needs, their family and environmental factors and parenting capacity.

Further guidance on this framework can be found here:

Framework for the Assessment of Children in Need and their Families (Department of Heath et al, 2000).

https://www.basw.co.uk/system/files/resources/basw_123020-9_0.pdf

Assessing Children in Need and their Families Practice Guidance

https://dera.ioe.ac.uk/15599/1/assessing_children_in_need_and_their_families_practice_guidance_2000.pdf

Definitions of risk and protective factors

<https://learning.nspcc.org.uk/media/1095/reunification-practice-framework-guidance.pdf#page=72>

For consideration of safety for neglect see

<https://learning.nspcc.org.uk/media/1095/reunification-practice-framework-guidance.pdf#page=120> and [Neglect Toolkit on Devon Children and Family Partnership](#)

When considering the needs of adolescents for reunification, please see NSPCC guidance:

<https://learning.nspcc.org.uk/media/1095/reunification-practice-framework-guidance.pdf#page=110>

Key Points for Consideration

- Have parents demonstrated understanding and acceptance of why the child is in care?
- Do they show understanding of the impact of trauma on development and relationships?
- Parenting capacity should consider the type of parenting that would be required to bridge this gap and meet the need of a child who has experienced abuse and trauma.
- What are the strengths and vulnerabilities of the child's developmental needs, family and environmental factors and parenting capacity?
- How will their needs and desired outcomes be met when the child is in the care of their parents? What will be the impact if they are not fully met, can this be mitigated through support or other means?
- What remaining issues in the household might pose a risk to the child's welfare, do parents see them as a risk, what is their understanding of safeguarding?
- Has the household members and wider family members changed since the child has been out of the parent's care?
- What impact have any changes had on the family functioning and how does the parent plan to re-integrate the child in to current routines and arrangements, what would need to be adjusted or changed to accommodate the child?
- Where a child is returning to the same house or community, how will parents consider and respond to the risk of this being a re-trigger of trauma (this will need to be considered in line with child's wishes and feelings as well as any transition plan home).
- Is there anything in the history or lifestyle of any member of the household (including those under 18 years) that might be adversely impacted as a result of the recommended plan for placement of the child with their parent(s)? for example:
 - Is there anyone terminally or chronically ill who is receiving a significant level of care from the parent(s)?
 - Is the parent currently providing care to a disabled child / adult?
 - Is the parent in poor health themselves?

- How well do the adults and children in the household know the child, how much time have they spent with one another in the past, what role do they play now, how does the child talk about them/do they talk about the child?
- What strengths do you see in the relationships, consider quality of relationship, ability to understand the needs of the child as well as balance these needs with wider family and external influences/pressures they may face.
- Are there any concerns regarding the relationship between the child and any significant other identified in this report, have you openly explored these worries with them and considered their response?
- How will the proposed care or family time (contact) arrangement impact on any connected child?
 - Consider, how does this proposal impact on other children, within the household and wider family?
 - Are there other siblings/half-siblings, or connected children that will need support with this?
 - How have their views been fully considered? – These should be recorded in the children’s views sections
 - Have we considered need to change their care plan/supports as a result of this assessment?
 - Can parents/carers understand possible impact and balance the competing needs of all children?

Children’s Wishes and Feelings

It is important we speak to all the children directly connected to the parents/carers and understand their views, wishes and feelings. This will include children who are in the care of the parents as well as any children who are significant to the parents or child but live separately e.g. children of either parent who frequently visit but live with other resident parent or other.

See NSPCC Reunification Practice Framework for what should be covered in Wishes and Feelings as a minimum standard:

<https://learning.nspcc.org.uk/media/1095/reunification-practice-framework-guidance.pdf#page=89>

Remember:

- We should allow children time to ask questions and voice any worries they may have and seek clarity as needed.
- We need to be sensitive to children and their individual situations, for example if you are seeking their views on a reunification or overnight family time arrangement which they are not also being considered for, be mindful as to how they will interpret or understand this and how it might make them feel.
- We also need to consider, if children’s views differ to their parents or other adults, how would they tell us?

Minimum Standards for Completion of Assessment

- Completion of a Consent to Vetting Forms (DBS)
- Checks (CareFirst / Eclipse/Police Records / Medical for all adults in the home)
- Evidence of consultation with other key people including Independent Reviewing Officer, Education and Health and any other statutory agencies involved.
- Placement with Parent Assessment
- Comprehensive Reunification and Placement Plan, including schedule for increase of family time (contact) and/or gradual reunification, to include review periods, observation of child in care of parent/s and direct work with child to ensure their lived experience is understood.

Recommendations and Planning

The assessment should be completed before we move forward with any plans to reunify the child with their family. Everyone should be clear of the purpose of the assessment, as well as possible outcomes and contingency planning.

Preparation work with the child and parents must be completed to give them the best opportunity to succeed. The outline of this work will be summarised in the recommendations section and it is helpful to draft a reunification plan which can provide further detail as outlined below:

- What parents/carers need to achieve to enable reunification / changes to family time (SMART goals)
- The support and services to be provided to the family and child to meet the child's needs; the timescales of these and review dates.
- Arrangements for the child's education
- Any further input required to child and/or parents to acknowledge the reasons for the child being placed in care, to ensure there is no minimisation of previous actions and to assist in the process of coming to terms with any trauma that may previously have occurred.
- Dates the Reunification Plan will be formally reviewed and the contingency plans in the event of the reunification plan not being successful.

NSPCC have developed a Reunification Plan Template to support a multi-agency agreement setting out the roles and responsibilities of the various agencies involved in supporting the parents. This can be found here:

<https://learning.nspcc.org.uk/media/1095/reunification-practice-framework-guidance.pdf#page=98>

Contingency planning means we should consider other options should reunification not be achievable, a “not now” outcome, does not mean always mean “not ever”. As part of the assessment if we have identified areas of work that need to be completed, then this should be made clear and opportunities to engage in this work offered. This should be reflected in the child’s care plan.

Equally if risk is considered too high, then work will be needed with the child/young person to make sense of this, as well as keep safe work, so they start to build skills needed for the future to recognise risk, and learn to make safe and healthy decisions for themselves.

Where the recommendation does not support reunification see guidance:

<https://learning.nspcc.org.uk/media/1095/reunification-practice-framework-guidance.pdf#page=121>

Visiting

- If a child / young person subject of an Interim Care Order is placed with a parent, the child / young person must be visited at least once a week until the first review and thereafter at intervals of not more than **4 weeks**.
- If a child / young person subject of a Care Order is placed with a parent, visits must be made within 1 week of the making of the Care Order and thereafter at intervals of no more than 6 weeks.
- The child/ren must be seen in their placement, but consideration should be given to also visiting children away from placement and their views sought independently from their parents/carers.
- The assessor must ensure direct work is completed with all involved, parents, children, other family members and associates who will play a part in the child's life and may be impacted upon by these decisions. These can be attached to the appendix.

Recommended External Guidance

Assessing Children in Need and their Families Practice Guidance

https://dera.ioe.ac.uk/15599/1/assessing_children_in_need_and_their_families_practice_guidance_2000.pdf

Care Planning Regulations 2010 Schedule 3

<https://www.legislation.gov.uk/ukxi/2010/959/schedule/3/made>

Devon's Policy for Assessments

https://devonchildcare.proceduresonline.com/p_assessment.html

Framework for the Assessment of Children in Need and their Families (Department of Heath et al, 2000).

https://www.basw.co.uk/system/files/resources/basw_123020-9_0.pdf

Other guidance, resources and tools can be found on ReSources in Assessment Toolbox

<https://devoncc.sharepoint.com/sites/reSOURCEforChildrensSocialCare/SitePages/Assessment-Tool-Box.aspx>

Policy and Procedure Placement with Parents

https://devonchildcare.proceduresonline.com/p_place_with_parents.html

Reunification: an evidence-informed framework for return home practice

<https://learning.nspcc.org.uk/media/1095/reunification-practice-framework-guidance.pdf>