



Notes by Sanet Viljoen
2023

PLANS FOR CHILDREN IN TERMS OF THE CHILDREN'S ACT

1. LEGISLATION

Legislation that guides social service practitioners regarding assessment and plans that need to be compiled:

- Children's Act
- Regulations
- National Norms and Standards Part III and Part V
- Norms, standards and practice guidelines

| CHILDREN'S ACT | | | | | |
|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. | <p>Interpretation (definitions)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Alternative care</td> <td>means care of a child in accordance with section 167</td> </tr> <tr> <td>Assessment of a child</td> <td>means a process of investigating the developmental needs of a child, including his or her family environment of any other circumstances that may have a bearing on the child's need for protection and therapeutic services</td> </tr> </table> <p>Please read all the definitions to understand the Children's Act as a whole.</p> | Alternative care | means care of a child in accordance with section 167 | Assessment of a child | means a process of investigating the developmental needs of a child, including his or her family environment of any other circumstances that may have a bearing on the child's need for protection and therapeutic services |
| Alternative care | means care of a child in accordance with section 167 | | | | |
| Assessment of a child | means a process of investigating the developmental needs of a child, including his or her family environment of any other circumstances that may have a bearing on the child's need for protection and therapeutic services | | | | |
| 7. | Best interest of child standard | | | | |
| 10. | <p>Child participation Every child that is of such an age, maturity and stage of development as to be able to participate in any matter concerning that child has the right to participate in an appropriate way and views expressed by the child must be given due consideration.</p> | | | | |
| 105. (6) (e) | <p>Provision of designated child protection services Designated child protection services include- the drawing up of individual developmental plans and permanency plans for children removed, or at risk of being removed, from their family</p> | | | | |
| 157. (1) (a)(iii) (4) | <p>Court orders to be aimed at securing stability in child's life Before a children's court makes an order in terms of section 156 for the removal of the child from the care of the child's parent or care-giver, the court must- obtain and consider a report by a designated social worker on the conditions of the child's life, which must include- a documented permanency plan taking into account the child's age and developmental needs aimed at achieving stability in the child's life and containing the prescribed particulars. When issuing an order involving the removal of the child's parent or care-giver, the court may included in the court order instructions as to the implementation of the permanency plan for the child.</p> | | | | |
| 188. (1) (e) | <p>Responsibilities and rights of foster parents The foster parent of a child has those parental responsibilities and rights in respect of the child as set out in- a foster care plan between the parent or guardian of the child and the foster parent</p> | | | | |
| 194. (1)(d) (1)(e) | <p>National norms and standards for child and youth care centres Permanency plans for children Individual development plans</p> | | | | |
| REGULATIONS | | | | | |
| 55(3) | <p>A permanency plan approved by a children's court, must, unless the children's court, in terms of section 157(1)(b)(v) of the Act, directs otherwise, be evaluated by the social worker concerned within six months of the its implementation and thereafter at intervals of six months with a view to establishing, unless he or she had been adopted or placed</p> | | | | |

| | |
|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | in foster care, whether the child may be returned to the care of his or her parents or caregiver. |
| 71. (d) (a) | Provision of services by cluster foster scheme ensure that a foster care plan as contemplated in section 188(1)(e) of the Act is compiled in respect of each child in cluster foster care, as soon as possible, but not later than 21 days after the child's placement in the cluster foster care scheme assist a young person with the transition leaving cluster foster care after reaching the age of 18 |
| 75. (1) (a) (ii) | The core components of programmes to meet the developmental, therapeutic and recreational needs of children. with regards to developmental programmes- independent living for children disengaging from the residential care programme |
| NATIONAL NORMS AND STANDARDS PART III NATIONAL NORMS AND STANDARDS FOR CHILD PROTECTION | |
| 6. | Foster care services Foster care services, supervision and arrangements around such supervision, must – (a) be based on a care plan an individual plan for the child concerned; (e) allow foster parents to participate in the planning and drafting of a care plan and individual development plan and to be consulted and informed of plans; (i) be appropriate to the child's developmental needs and be based on respect for the child's individuality, strengths, dignity, cultural, religious and linguistic heritage; (l) ensure that the care plan and individual plan are based on a proper developmental assessment of the child; (p) ensure that care plans and individual development plans are reviewed regularly by the social worker managing the foster care with the participation of the child and the foster parents, within their respective abilities. |
| 7. | Integration into alternative care services Integration into alternative care services must – (x) ensure that the care plan and individual development plan are based on a proper developmental assessment of the child; an (y) ensure that the care plan and individual development plans are reviewed regularly. |
| 9. | Permanency plans Permanency plans must- (a) be designed by service providers who have the appropriate training, support and supervision to maximise their abilities and capabilities to develop such plans; (b) clearly identify why the child is unable to remain with his or her own family, or is being placed under court-ordered supervision with that family, at the time when the plan is being drafted; (c) clearly specify what it is that needs to be achieved in order to terminate court-ordered supervision or restore the child to the care of his or her family, and what services will be offered for that purpose and by whom; (d) give priority to enabling the child to remain in or be restored to his or her own family, while also providing for other permanent solutions such as adoption, foster care or independent living arrangements, should this not be achieved despite genuine efforts to provide the necessary services to achieve permanent placement withing the child's own family; |

| | |
|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <ul style="list-style-type: none"> (e) take account of the assessment framework, the assessment report and any other relevant information; (f) be family centred and focused on the strengths and capacities of family members; (g) be based on a multi-disciplinary and inter-sectoral approach; (h) be sensitive to the linguistic needs, religious and cultural values of children and their families; (i) make provision for the involvement of the child, his or her family and significant other persons; (j) provide sufficient and helpful information to the child, his or her family and significant other persons; (k) provide assistance to cope with changes in circumstances and environment and include a specific plan for preparing, supporting and monitoring such changes; (l) be based on approved policy and procedures; (m) encouraging children to identify and express emotions appropriately and empower them to find effective and positive ways to express and manage emotions; (n) encourage positive interaction with service providers; (o) encourage children to build and maintain appropriate relations with friends, service providers, family members and significant other persons; (p) include support to children when relations break down to cope with the impact of having contact or not having contact with family members and significant other persons; (q) provide for adequate health care and education opportunities; (r) provide such capacity and support as may be required to enable constructive and effective behaviour; (s) include measures for preparing children for reintegration into their families and communities; (t) include measures allowing children to participate in and understand changes to permanency plan, which should only happen if it is in the best interest of the child concerned; (u) be reviewed regularly; and (v) be clear on goals and expectations. |
|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**PART V
NATIONAL NORMS AND STANDARDS FOR CHILD AND YOUTH CARE CENTRES**

| | |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2. | <p>Therapeutic programmes</p> <p>(e) every child must receive an effective and appropriate developmental assessment and referral service which should lead to appropriate placement.</p> |
| 3. | <p>Developmental programmes</p> <p>(a) A child's development plan and programme must be based on an appropriate and competent assessment of his or her developmental needs and strengths.</p> <p>(b) Every child in a child and youth care centre must have a plan and programme of care and development.</p> <p>(c) Every child in a child and youth care centre must participate in formulating their care and development plans and must be informed of those plans.</p> |
| 4. | <p>Permanency plans for children</p> <p>(a) Every child in a child and youth care centre must have a permanency plan based on a developmental assessment of the child.</p> <p>(b) The child must participate in the development of the permanency plan and be informed about the plan and any changes to it.</p> |

| | |
|----------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5. | <p>Individual development plans</p> <p>(a) Children may receive services in accordance with their individual development plan which facilitates their well-being within a temporary programme and which enables them, where necessary, to make a successful transition to new circumstances.</p> <p>(b) Every child in a child and youth care centre has the right to a permanency plan which includes reunification, security and life-long relationships.</p> <p>(c) Every child has the right to participate in formulating his or her individual development plan and to be informed about their plan, and to be involved in decisions to make changes to their plan.</p> <p>(d) The individual developmental plan must be based on an appropriate and competent assessment of their developmental needs and strengths and, where reasonably possible, be in the context of their family and community environments.</p> <p>(e) The family of the child or other persons with bonds to the child, must be involved in the child's individual development plan unless it is shown that this would not be in the best interests of the child.</p> <p>(f) There must be a review of each child's placement and individual development plan at least once every six months while the child remains in the centre.</p> |
| 8. | <p>Assessment of children</p> <p>(a) Assessment of a child in a child and youth care centre must be undertaken by a multi-disciplinary team.</p> <p>(b) The initial assessment must take place within 48 hours of the child's admission to the centre, and there must be regular reviews of the process.</p> <p>(c) Assessment must be strength-based, holistic and appropriate to the child's culture, language and developmental stage.</p> <p>(d) Assessment must be done with the participation of the child and, as far as it is reasonably possible, with the child's family.</p> <p>(e) The assessment process must aim to increase insight and competency and must include shared decision-making.</p> <p>(f) Assessment processes and documentation must be of such a nature that they can be used at the point of reception, and do not need to be repeated.</p> |
| 9. | <p>Family reunification and reintegration</p> <p>Every child should have a care plan which aims to provide life-long relationships with their family or appropriate alternative and re-integration in the family and community within the shortest possible time-frame.</p> |
| FINAL NORMS AND STANDARDS AND PRACTICE GUIDELINES | |
| 148. | <p>Norm: All children in need of care and protection have a permanency plan which indicates continued support to the children.</p> <p>Standard: A permanency plan must be developed according to the prescribed format.</p> <p>Provincial guidelines:</p> <ul style="list-style-type: none"> • The permanency plan must be informed by the assessment framework, the assessment report and any other relevant information. • If a recommendation is made for alternative placement of the child, a permanency plan must be attached to the children's court report. • The permanency plan must: |

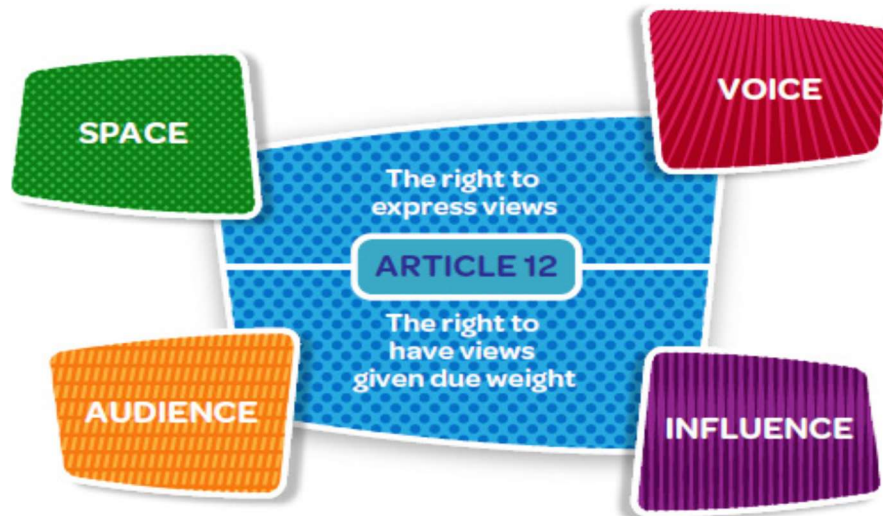
| | |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <ul style="list-style-type: none"> ○ Clearly identify the reasons why the child is unable to remain with his/her own family, or is being placed under court-ordered supervision with that family, at the time when the plan is being drafted. ○ Clearly specify what it is that needs to be achieved in order to terminate court-ordered supervision or restore the child to the care of his/her family, and what services will be offered for that purpose and by whom. ○ Explore the following options, taking into account that the first option is the most desirable and the last option the least desirable: <ul style="list-style-type: none"> ♣ Foster care with relatives or non - relatives as geographically close to the parent or care -giver as possible to encourage visiting by the parent or care -giver. ♣ Adoption of the child by relatives. ♣ A relative or relatives obtaining guardianship of the child. ♣ Adoption of the child by non - relatives, preferably of similar ethnic, cultural and religious backgrounds. ♣ Permanent foster care with relatives or non-relatives or with a cluster foster care scheme. ● A permanency plan approved by a children’s court must, be assessed for applicability by the social worker concerned within two months after its implementation and thereafter at intervals of six months with a view to establishing whether the child may be returned to the care of his/her parent or care-giver. |
| 152. | <p>Norm: The child has the right to interventions that are appropriate to his age, maturity and developmental needs.</p> <p>Standard:</p> <ul style="list-style-type: none"> ● A foster care plan must be developed according to the prescribed format. ● Foster care plan must be developed by all relevant professionals including the child, his/her parent, guardian. ● A foster care plan must be developed to indicate the proposed intervention and the roles and responsibilities of all the relevant parties concerned during the interventions. ● The process of supervision must be discussed with the child and his/her parent/guardian/caregiver before it is included in a contract ● Review of the foster care plan on a six-monthly basis. ● Individual Development Plan resulting to a care plan and permanency plan must be developed for each foster child within a multidisciplinary team to inform the foster care plan. <p>Provincial guidelines:</p> <ul style="list-style-type: none"> ● The foster care plan must document and record the role and responsibility of: <ul style="list-style-type: none"> ○ The designated social worker. ○ Designated CPO. ○ The biological parent(s). ○ Child. ○ Family members or other persons who have an interest in the well-being of the foster child. ● A foster child who is of sufficient age and maturity must be consulted during the formulation of a foster care plan and his/her views considered. |

| | |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 163. | <p>Norm: All foster cluster care schemes must uphold the rights of children</p> <p>Standard:</p> <ul style="list-style-type: none">• Every child in a cluster foster care scheme must have:<ul style="list-style-type: none">o A permanency plan upon admission and assessed two months after placement and every six months thereafter.o Foster care plan must be developed within 21 days after placement of the child and assessed on a six -monthly basis.o An IDP must be developed and assessed on a six - monthly basis.o A plan for independent living must be included in the permanency plan when a child turns 15 years. <p>Provincial guidelines:</p> <ul style="list-style-type: none">• A foster care plan must be developed according to the prescribed format to indicate the proposed intervention and the roles and responsibilities of all the relevant parties concerned during the intervention. |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

2. CHILD PARTICIPATION AND ASSESSMENTS

2.1 Model of child participation

Lundy's Model of participation is the most appropriate for child participation because it is grounded in the UNCRC and focused on a rights-based approach to involving children in decision making.



This model provides a way of conceptualising Article 12 of the UNCRC which is intended to focus decision-makers on the distinct, albeit interrelated, elements of the provision. The four elements have a rational chronological order:

| | |
|------------------|-------------------------------------------------------------------------------------|
| SPACE | Children must be given safe, inclusive opportunities to form and express their view |
| VOICE | Children must be facilitated to express their view |
| AUDIENCE | The view must be listened to. |
| INFLUENCE | The view must be acted upon, as appropriate |

QUESTIONS TO CONSIDER REGARDING LUNDY'S MODEL OF PARTICIPATION

Outlined below are some simple questions to consider in thinking about your participatory practice:

| TICK | SPACE: | TICK | AUDIENCE: |
|------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <p>Have you given attention to the physical space where you meet?</p> <p>Have you sat in the room and looked at it from a child's perspective?</p> <p>Have you given time to developing safe emotional space with the child?</p> <p>Have the children's views been actively sought?</p> <p>Have steps been taken to ensure that the children can take part?</p> <p>Do you have a creative tool box? e.g. box/bag with toys, tissues, markers, paper, games</p> | | <p>Have you decided what to do with the information the child has given you?</p> <p>Have you identified who needs to hear what the child is saying?</p> <p>Have you identified who has responsibility to listen to the voice of the child?</p> <p>Is there a process for communicating children's views?</p> |
| TICK | VOICE: | TICK | INFLUENCE: |
| | <p>Have you checked out the child's level of communication?</p> <p>Have you thought through the barriers to participation?</p> <p>Do you know their favourite means of communicating?</p> <p>Have you spent time building their capacity to express their voice?</p> <p>Does the child understand the importance and value of their voice being expressed?</p> | | <p>Have you fed back to the child what is happening and why?</p> <p>Were the children's views considered by those with the power to effect change?</p> <p>Are there procedures in place That ensure that the children's views have been taken seriously?</p> |

2.2 Child participation practice standards

These practice standards aim to provide a framework that gives guidance and direction to any adult responsible for facilitating participatory processes with children. They are based on the guiding principles of this framework. Each standard is accompanied by a set of criteria which can be used as indicators to assess whether or not the standard is being met.

| STANDARD | HOW TO MEET THE STANDARD |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>An ethical approach: participation is transparent and informative</p> <p>What does this mean?</p> <p>Adults involved in consultations with children follow ethical and participatory practice and put children's best interests first.</p> | <ul style="list-style-type: none"> • Girls and boys are able to freely express their views and opinions and have them treated with respect. • There is clarity of purpose about children's participation and honesty about its parameters. • Children must be given information about their right to participate in a child-friendly and accessible format. The information should include: <ul style="list-style-type: none"> o how they will participate; o why they have been given the opportunity to participate; o the scope of their participation; o the potential impact their participation could have. • Children understand how much impact they can have on decision-making and who will make the final decision. • The roles and responsibilities of all involved (children and adults) are clearly outlined, understood and agreed upon. • Clear goals and targets are agreed upon with the children concerned. • Children are involved from the earliest possible stage and are able to influence the design and content of participatory processes. • 'Outside' adults involved in any participatory processes are sensitised to working with children, clear about their role and willing to listen and learn. |
| <p>Children's participation is voluntary</p> <p>What does this mean?</p> <p>Children have the choice as to whether to participate or not</p> | <ul style="list-style-type: none"> • Children have time to consider their involvement and processes are established to ensure that they are able to give their personal, informed consent to their participation. • Children's participation is voluntary and they can withdraw at any time they wish. • Children's other time commitments are respected and accommodated (e.g., to home, work and school). • Support from key adults in children's lives (e.g., parents/guardians, teachers) is gained to ensure wider encouragement and assistance for the participation of girls and boys. |
| <p>Children's participation is relevant</p> <p>What does this mean?</p> <p>Children participate in processes and address issues that affect them – either directly or indirectly</p> | <ul style="list-style-type: none"> • The issues are of real relevance to the children being involved and draw upon their knowledge, skills and abilities. • Children are involved in setting the criteria for selection and representation for participation. • Children are involved in ways, at levels and at a pace appropriate to their capacities and interests. • Ways of working and methods of involvement incorporate, and build on, supportive local structures, knowledge and practice and take into consideration social, economic, cultural and traditional practices. |
| <p>Children's participation is respectful</p> | <ul style="list-style-type: none"> • Children can freely express their views and are treated with respect; |

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>What does this mean?</p> <p>Children should be treated with respect and provided with opportunities to express their views freely and to initiate ideas. Staff should also respect and gain an understanding of the family, school and cultural context of children's lives.</p> | <ul style="list-style-type: none"> • Where children are selected as representatives, the process will be based on the principles of democracy and active steps to be inclusive; • Ways of working build self-esteem and confidence, which enable children to feel that they have valid experiences and views to contribute; • Programme staff should encourage all adults involved in the programme to be respectful towards children at all times. |
| <p>Participation is child friendly</p> <p>What does this mean?</p> <p>Children experience a safe, welcoming, inclusive and encouraging environment that enables participation.</p> | <ul style="list-style-type: none"> • Methods of involvement are developed in partnership with children so that they reflect their preferred mediums of expression. • Sufficient time and resources are made available for quality participation and children are properly supported to prepare for their participation. • Adults (including children's own parents/guardians) are sensitised to understand the value of children's participation and are enabled to play a positive role in supporting it (e.g., through awareness-raising, reflection and capacity building). • Child-friendly meeting places are used where girls and boys feel relaxed, comfortable and have access to the facilities they need. The meeting places must be accessible to children with disabilities. • Organisational or official procedures are designed/modified to facilitate (rather than intimidate) children and make less experienced boys and girls feel welcome. • Children are asked what information they need and accessible information is shared with children in good time, in child friendly formats and in languages that the children understand, including children with visual or hearing impairments. • In situations where children meet with different native/first languages, access to written information and professional interpretation is provided that allows for children's full participation in discussions. • Non-technical language is used in all discussions involving children and/or all jargon or technical terms are clearly explained. |
| <p>Participation is inclusive</p> <p>What does this mean?</p> <p>Child participation work challenges and does not reinforce existing patterns of discrimination and exclusion. It encourages those groups of children who typically suffer</p> | <ul style="list-style-type: none"> • All children have an equal chance to participate and systems are developed to ensure that children are not discriminated against because of age, race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status. • Children's involvement aims to include all rather than a few, this could mean reaching out to children in their local settings rather than inviting representatives to a central point. |

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>discrimination and who are often excluded from activities to be involved in participatory processes.</p> | <ul style="list-style-type: none"> • Participatory practice with children is flexible enough to respond to the needs, expectations and situation of different groups of children –and to regularly re-visit these concerns. • The age range, gender and abilities of children are taken into account in the way participation is organised (e.g., in the way information is presented). • Those working with children are able to facilitate an environment that is non-discriminatory and inclusive. • No assumptions are made about what different groups of children can and cannot do. • All children are given an equal opportunity to voice their opinions and have their contributions reflected in any outcomes of a participatory process, including in processes that involve both children and adults. • If there is a limit to how many children can participate, children themselves select from among their peers those who will represent them in participatory initiatives based on the principles of democracy and inclusion. • Influential adults are engaged to gain family and community support for the participation of discriminated-against groups. |
| <p>Participation is supported by trained and committed adults</p> <p>What does this mean?</p> <p>Adults working with children are committed to the aim of consulting with children and are trained and supported to carry out participatory practices.</p> | <ul style="list-style-type: none"> • Adults are sensitised to children’s participation and understand the need for commitment to children’s participation. • Adults are provided with appropriate training, tools and other development opportunities in participatory practice to enable them to work effectively and confidently with children of different ages and abilities. • Adults are properly supported and supervised and evaluate their participation practice. • Support is provided for adults for whom children’s participation represents a significant personal or cultural change, without this being regarded as a problem. • Adults are able to express any views or anxieties about involving children in the expectation that these will be addressed in a constructive way. |
| <p>Participation is safe and sensitive to risk</p> <p>What does this mean?</p> <p>Involvement in a consultation must not expose any child to threats or actual harm to well-being. A child’s safety and health is considered in every possible way, with safeguards put in place. This includes both physical and emotional well-being.</p> | <ul style="list-style-type: none"> • The protection rights of children are paramount in the way children’s participation is planned and organised. • Children involved in participation work are aware of their right to be safe from abuse and know where to go for help if needed. • Skilled, knowledgeable adults are delegated to address and coordinate child protection issues during participatory processes. • Adults organizing a participatory process have a child protection strategy that is specific to each process. The strategy must be well communicated and understood by all staff involved in the process. • Safeguards are in place to minimise risks and prevent abuse (e.g., children are adequately supervised and protected at all times; risk assessments are in place for residential activities |

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <p>away from home; children are protected from abuse from other children).</p> <ul style="list-style-type: none"> • Adults recognise their legal and ethical obligations and responsibilities (e.g., in respect of their own behaviour or what to do if they are told about the inappropriate behaviour of others). • A system for reporting critical incidents is in place and understood by all staff. • Careful assessment is made of the risks associated with children’s participation in speaking out, campaigning or advocacy. Depending upon the risks identified, steps may be needed to protect children’s identity or to provide follow-up measures to give protection (e.g., to ensure their safe reintegration into their communities). • Consent is obtained for the use of all information provided by children and information identified as confidential needs to be safeguarded at all times. • A formal complaints procedure is set up to allow children involved in participatory activities to make a complaint in confidence about any issue concerning their involvement. • Information about the complaints procedure is accessible to children in relevant languages and formats. • No photographs, videos or digital images of a child can be taken or published without that child’s explicit consent for a specific use. • Unless otherwise agreed, it must not be possible to trace information back to individual/groups of children. • Responsibilities relating to liability, safety, travel and medical insurance are clearly delegated and effectively planned for. |
| <p>Participation is accountable and ensures follow-up and evaluation</p> <p>What does this mean?</p> <p>Respect for children’s involvement is indicated by a commitment to provide feedback and/or follow-up and to evaluate the quality and impact of children’s participation.</p> | <ul style="list-style-type: none"> • Children are supported to participate in follow-up and evaluation processes. • Follow-up and evaluation is addressed during the planning stages, as an integral part of any participation initiative. • Children are supported and encouraged to share their participatory experiences with peer groups, local communities, organisations and projects with which they may be involved. • Children are given rapid and clear feedback on the impact of their involvement, the outcome of any decisions, next steps and the value of their involvement. • Feedback reaches all children involved. • Children are asked about their satisfaction with the participation process and for their views on ways in which it could be improved. • The results of monitoring and evaluation are communicated back to the children involved in an accessible and child-friendly way, and their feedback is taken into account in future participation work. |

| | |
|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <ul style="list-style-type: none"> • Mistakes identified through evaluation are acknowledged and commitments given about how lessons learned will be used to improve participatory processes in the future. • Adults will evaluate how they have translated and implemented children's priorities and recommendations into their policies, strategies and programmes. • Sustainability of support is discussed with children. Adults will provide clear feedback to children regarding the extent/limit of their commitment to support children's on-going initiatives and organisations. If on-going support is not possible, adults will provide children with resources and support to make contact with other agencies who can support them. |
|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

2.3 Ethical considerations when conducting assessments

- The social worker should only undertake an assessment if the child and their caregiver agrees (in instances where the caregiver can be located).
- When securing consent, the social worker should be transparent and should respect the child and caregiver(s).
- Consent should be considered on a case-by-case basis and maturity of the child taken into consideration. Where the child is deemed to be able to give consent, it is unlikely that caregiver consent will override the decision.
- Consent should not be secured through coercion or inferred from a lack of response to a request for consent.
- Parental consent can be secured from one parent. If there is conflict, the social worker will have to consider carefully whose consent will be secured (and why). If parents are separated, consent will be secured from parent who has custody of child.
- Relevant copies of assessment-related documents should be made accessible to the child and caregivers, as appropriate.
- Within a multi-disciplinary team, ensure that information shared is accurate, up to date and necessary for the purpose which you are sharing it. It should be shared with people who need to see it and shared securely.
- All sharing and storage of assessment information should be done lawfully and consent gained again, in relation to these, from the child and caregiver.
- If consent is not granted, this should be recorded for future reference. The social worker should also respect the wishes of the child and caregiver if there is (confidential) information they do not wish to be recorded on the assessment form and/ or shared with others.
- The social worker should perform the public interest test i.e. if there are possibilities of harm to the child or others. In this case, the social worker should always record these decisions. If uncertain, seek help from supervisor.

3. THEORETICAL UNDERPINNINGS

3.1 Developmental approach

What is the developmental approach about?

| Strengthening | Participation |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none">• This is about the enhancement and optimization of positive functioning.• Empowerment and development focus on strengths and capabilities and provides opportunities to become more effective.• These interventions are pro-active, enabling the development of competencies that strengthen the capacity to adapt and continue with growth.• Assumes that life events, crises and developmental milestones are growth opportunities | <ul style="list-style-type: none">• Children, youth, families and communities participate fully in the processes, decisions and programmes affecting their lives• No one tells them what is best• They make the key decisions• 'Experts' are a resource only.• A partnership, shared power exists.• Child, family and community are empowered. |

Principles of the developmental approach:

- Each human being has immense potential to be whole and to be effective within their daily living experiences within a variety of contexts. We need to trust that if we facilitate that the person has the right resources, he/she will develop towards wholeness and well-being.
- Each person has strengths.
- Development cannot be forced, only supported and nurtured.
- Each person must be understood and responded to holistically.
- Labelling and categorising people is not helpful to development and is to be avoided.
- There are no experts, only learners on a journey of development.
- Development is lifelong. All human beings have the capacity to grow and change throughout their life.
- Mistakes are not failures, but opportunities for learning and growing.
- Every crisis is opportunity for learning, change and growth.
- The past can inform the here-and-now, but there is no emphasis on causes. The present and future are more important than the past. The emphasis rests on the optimum use of each moment to take the next step.
- When individuals experience themselves differently, they are enabled to behave differently. The developmental approach is therefore, primarily about enabling people to experience themselves as whole and competent at any given time as well as over time

3.2 Strength-based approach

Strength-based practice values:

- Despite life's struggles, all persons possess strengths that one can marshal to improve the quality of their lives.
- We can increase client motivation by placing a consistent emphasis on client-defined strengths.
- Discovering strengths requires cooperative exploration between clients and helpers.
- Focusing on strengths turns practitioners toward discovering how clients managed to survive vs. judging or blaming.
- All environments – even the most bleak – contain resources.

3.3 Child development

To be able to compile a care plan and IDP, social workers must take into consideration the child developmental levels. An extensive example follows:

| CHILD DEVELOPMENTAL CHARACTERISTICS |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Infancy 0 – 24 months |
| The child is dependent on the parent/caregiver. This is a time of rapid growth and advancement in almost all areas of physical and motor development, cognitive development (including language acquisition, imitation) and psychosocial development (attachment, forming a trusting and loving relationship with his/her parents/caregivers and families). The development of secure attachment is of cardinal importance as it affects all future relationships in the child's life. Weaning is an important milestone in this development stage. Physical milestones include that the infant will be able to sit alone by 7 months, starting to crawl by 10 months, and walk independently by the age of 15 months. |
| Early childhood 2 – 6 years |
| This stage is the pre-school stage and the child is referred to as a toddler. The child becomes more self-sufficient and starts caring for him/herself. The emphasis is on developing cognitive, language and physical skills that prepare the child for school. In early childhood children start to use memory strategies such as rehearsal, organisation and retrieval strategies. As young children are considered to be more suggestible, the accuracy of memory can be influenced by the way in which adults communicate with the young child, for example by leading or repeated questioning. Preschool children solve problems based on what to them appears to be most important. They tend to be egocentric, believing that others think, feel and perceive in the same way as they do. They do not have the ability to reverse their thinking and cannot always distinguish between fantasy and reality. The ability to regulate their emotions is an important developmental task of early childhood. Although their social world widens, the family relationships remain the most influential aspect in their development. Attachment and parenting styles are crucial aspects in the development of the young child. Sibling relationships form an important part of the child's social interaction. |

Middle childhood 6/7 to 11/12 years

This is known as the school-going age where they become less egocentric, rarely confuse appearance with reality and are able to reverse thinking. Thinking at this stage, is limited to concrete concepts and reasoning abstractly and hypothetically is beyond the ability of this child. Language and vocabulary rapidly increases and they can identify and name their emotions. They can also experience and recognise conflicting emotions. The capacity of their long-term memory increases.

The mastery of skills becomes important for their self-concept. They tend to compare themselves to their peers to prove competence. The peer group forms a bridge between the parent and independence and offers a safe place where the child can experiment and gain self-knowledge. Children become more sensitive towards the emotions of others and often react with anger and hostility towards persons they feel have betrayed them. They may sometimes turn the anger towards themselves, which may impact on their emotions and behaviour.

The child's social environment widens and he/she enjoys being with friends. However, parents are still the primary caregivers and have a powerful influence on the child's development.

Adolescence 11/12 – 18/20

The adolescent undergoes prominent physical and physiological changes described in as a storm phase. Independence from parents and the development of autonomy become important developmental tasks. The formation of an individual identity is a key developmental task of adolescence. The phase is characterised by experimentation. Failure to accomplish an individual identity can result in identity confusion.

Thinking is characterised by the ability to deal with problems on a more abstract level. Memory is fully developed. Thinking and reasoning abilities may be affected by adolescent egocentrism. It may manifest in a perception that he/she is the centre of everyone's attention, which can lead to extreme self-consciousness. It may manifest in an idea of being invincible, which may lead to risk taking behaviour.

The peer group plays a prominent role in their lives. Dating starts of a sign of independence and the adolescent spends more time with peers and less with the family. The need to belong and fit in makes the adolescent more susceptible to peer pressure. Sexuality, eating disorders, substance use, depression and suicide attempts, delinquency and teenage pregnancy can pose challenges in this life stage.

Adolescents often question parental values and norms. Although independence is an important developmental task, they still need active parenting and the guidance, warmth and structure that parents provide.

4. PLANS

4.1 Permanency plan (Regulation 55)

If a child is removed from the care of his or her parents, a permanency plan should form part of the court report. Permanency planning should be a well-thought out process involving the child, parents, and prospective caregivers or parents. This process should not be rushed and all possible options aimed at family preservation and reunification should be prioritised because generally, the child's own home should ideally be the best home to provide permanency.

It is generally difficult for people to make decisions, especially those that change a child's life or have permanent consequences. The rationale for taking decisions is to make sure that one is doing what is in the best interest of the child, considering the fact that every child has a Constitutional right to parental care or family care, or alternative care if removed from the family environment. If the child or the child's parents have to make major decisions, they should not be hastened, but should be provided with enough time and all possible options.

The child's right to a permanent or stable placement should take precedence if:

- The goals of restoring the child to parental care cannot be achieved within a certain period.
- If it is not in the best interest of the child to remain or be reunified with his or her parents.
- If the prognosis of the parents' ability to rehabilitate and receive the child back into their care is poor. Reconstruction services must be offered to parents and caregivers to facilitate ultimate reunification with the child.
- If the child does not have a parent, caregiver, relative or family member who can care for him or her, and all measures to trace or find such persons should be exhausted before considering alternative placement. If the child's family cannot afford to care for the child, that should not be the only motivation and grounds to consider permanent alternative placement. Efforts should be made to assist such families.

A child should not remain in a state of limbo or temporary safe care for more than six months. Permanent or stable placement should help the child to feel psychologically secure and have a sense of security and a feeling of being wanted and loved.

Before concluding a permanency plan, the designated social worker should take into account the following factors:

- The ideal that every child should be provided with the opportunity to grow up within his or her family and where this is proved not to be in his or her best interest or not possible, to have a permanency plan which works towards life-long relationships in a family or community setting.
- The best way of securing stability in the child's life in terms of section 157(1)(b) of the Act.
- The age and developmental stage of the child.
- The child's therapeutic, educational, cultural, linguistic, developmental, socio-economical and spiritual needs.
- The views of the child.

A permanency plan must explore the following options, taking into account that the first option is the most desirable and the last option the least desirable:

- (a) If the child is to be removed from the care of his or her parent, guardian or caregiver, the possibility of placing the child in foster care with relatives or non-relatives as geographically close to the parent or caregiver as possible to encourage visitation by the parent or caregiver.
- (b) The possibility of adoption of the child by relatives.
- (c) The possibility of a relative or relatives obtaining guardianship of the child.
- (d) The possibility of adoption of the child by non-relatives, preferably of similar ethnic, cultural and religious backgrounds.
- (e) The possibility of placing the child in foster care with relatives or non-relatives or within a cluster foster care scheme.
- (f) The possibility of placing a child in inter-country adoption, only if all the options mentioned above are not viable.
- (g) The possibility of placing the child in a child and youth care centre.

A permanency plan approved by a children's court must be evaluated by the social worker concerned within six months of its implementation and thereafter at intervals of six months with a view to establishing, unless he or she had been adopted or placed in foster care, whether the child may be returned to the care of his or her parent or caregiver.

4.2 Care Plan

- The goal of the care plan is to monitor the movement of the child in the system.
- It is a plan based on an assessment of the least restrictive and most empowering long-term option for the child and should be made before child is placed in care – even if it only covers a few days.

- The case manager writes the Care Plan after an assessment procedure involving the young person, departments/organisations, relevant professionals and the placement caregiver or team.
- The care plan only relates to children that will be placed away from home – therefore removed from parental care.
- In the case of an emergency – it should be completed as soon as possible after placement.
- The Care Plan can be changed only at a formal review.
- The Care Plan is a long-term arrangement for a young person’s future.
- When a child changes placement you should only need to change the IDP.
- The Care Plan must link to the statutory requirements/processes.
- A copy of the Care Plan must be given to the child, the parent/care-giver, the court and the placement/care-giver.
- Care Plan must be aligned with the IDP
- The Care Plan must be reviewed every six months.
- Child and parent/care-giver as well as multi-professional team/other experts must be involved in the assessment as far as possible.

According to the Information Guide, a care plan must accompany the final court report and must be reviewed every six months.

Example of care plan:

| |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Surname:</p> <p>Forenames:</p> <p>Gender:</p> <p>Date of birth:</p> <p>Date this intervention started:</p> <p>Date of this plan/Review:</p> <p>Young person’s address before intervention</p> <p>Name of principal caregiver at this address:</p> <p>Relationship to this young person:</p> <p>Were the children and family engaged with the CYC system prior to this care intervention? Y/N</p> <p>If yes, give reasons for the involvement and indicate what support and capacity building was offered to the young person and family:</p> <p>Indicate the legal basis for current work with this young person:</p> <p>Why does the young person need to be in an alternative care placement now?</p> <p>What attempts have been made for the young person to live with a relative or close family friend? Explain:</p> <p>What resources, supports and capacity building have been offered so far to the young person and family/friends to keep the young person in the community?</p> <ul style="list-style-type: none"> • Resources • Support <p>If it is inappropriate or impossible to keep the young person in the community/family – indicate the reasons:</p> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Which organisations, relatives and practitioners have been consulted concerning the young person's situation and the formulation of this plan?

What is the overall CP for this young person? (This refers to the long-term "permanency" plan for the young person, not the present, not the present alternative care placement)

| | |
|--|-------------------------------------------------------------------------------|
| | Remaining with the family/friends with support/capacity building services |
| | Return to the family within time-limited period |
| | Specify proposed time frame: |
| | Return to the community (e.g. foster care, adoption with time-limited period) |
| | Specify proposed time frame: |
| | Independent living with support services |
| | Special residential care (e.g. facility for the disabled) |
| | Other (specify) |

Explain the reasons for this plan:

What needs to be done before this plan is achieved?

| | KEY TASKS | WHO | TARGET DATE |
|----|-----------|-----|-------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |

What long-term needs does the child which the care placement must meet? (Circle of courage)

Belonging:

Mastery:

Independence

Responsibility/caregiving (generosity):

If not possible to meet all of the above, which should be the priority needs and how should they be addressed?

What type of placement at this point is proposed?

For how long?

Is this transitional care placement or long-term? (Long-term refers to a placement intended as an alternative care placement at level 4 of the system) (Specify)

What is the contingency plan if the preferred placement is not available or breaks down?

For how long is the young person likely to be under statutory care?

What is the agreement with the young persons and family with regard to ending this intervention?

What steps will be taken if the young person, family or staff wished to alter this plan?

| |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>The first review of this plan will take place at:</p> <p>Date:</p> <p>Venue:</p> <p>The initial IDP will be in place by:</p> <p>Responsible organisation:</p> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

4.3 Individual developmental plan

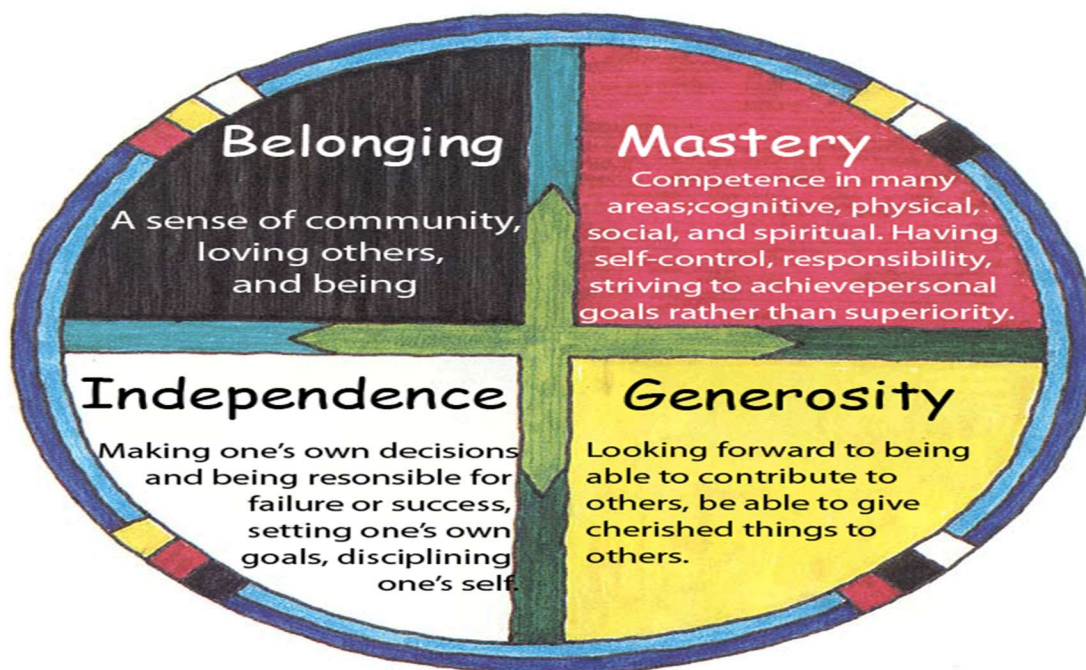
In the mid 90's, South Africa adopted the strengths-based Circle of Courage model as part of the transformation of the child and youth care system. This approach is followed in the USA about the treatment of families with children who have severe emotional and behavioural disabilities. The Circle of Courage is a holistic approach to reclaiming children and youth, which is grounded in values of deep respect for the dignity of children and in resilience science.

This model was developed by Larry Brendtro, Martin Bronkenleg and Steven van Bockern. It is based on a Native American/American Indian orientation towards life. It is presented virtually as a wheel with four spokes or supports that keep the wheel 'true' and strong. It is believed that all four parts of an individual's 'circle' must be whole to have a self-secure, prosocial approach to life. A lack of strength in any of the four areas of development can result in emotional and behavioural difficulties. There are 4 universal growth needs:

- **Belonging:** encompasses our relationships and human interdependence
- **Mastery:** is success, achievement, and motivation
- **Independence:** the power to make decisions, to problem solve, to be responsible and to grow
- **Generosity:** is compassion, empathy, and altruism, the truest form of caring for others.

It is believed that all four parts of an individual's "Circle" must be intact to have a self-secure, pro-social approach to life. A lack of strength in any of the four areas of development results in emotional and behavioural difficulties. In using this framework for assessment with children, the fundamental question is "what does this child need to experience and/or be able to do in order to experience him/herself as whole, and live out these values and principles in everyday life now and in the future?"

This model can be used for all people, of all ages, who live in community with others – not just for alternative care or the school setting.



Example 1:

| BELONGING | |
|--------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| THEME 1A: Relationship, Identity and well-being | |
| Family | <p>Closest family, family interest in each other, extended family, family members, closeness in terms of relationship, who is important to who, encouragement of one another, safety to express feelings to one another, expression of feelings, generations under one roof, safety and comfort within home, choices and decision-making, roles and feeling needed and worthwhile, family fun, affection, support, respect, delegation of chores and supervision of children, parental/family guidance.</p> <p>Questions: Who do you consider your family? Who do you think are your closets family? Does your family seem interested in the things you do? Who in the family do you feel closest to? Does anyone in the family encourage you when you do well? If you seldom feel encouraged, why do you think this is? Would you like someone to help with this? Who?</p> |
| Friends/peers | <p>Closest friends, special friend/s, talking about personal things, trusting, care and interest from friends, range and number of friends, visits to and from friends, activities friends do together, bullying, teasing.</p> <p>Questions: Who you do consider your closest friends? / Are your friends interested in what you do? / Which friend do you feel closest to? / How many friends about your age have you had for more than 6 months?</p> |
| Religion, culture, ethnicity | <p>Religion, cultural group, ethnic background, respect, acknowledgment, freedom to participate, participation in these activities.</p> <p>Questions: Do you belong to a particular religion or cultural group? If so, do you have enough opportunity to attend religious services or cultural activities? / Do you have enough opportunity to follow the custos of your religion and/or cultural group?</p> |
| Caregiver/s | <p>Closest relationship, interest in each other, who is important to who, encouragement, safety to express feelings, expression of feelings, safety and comfort within relationship/home, choices and decision-making, roles and feeling needed and worthwhile, fun, affection, support, respect, delegation of chores, care and supervision of activities, guidance.</p> <p>Questions: Does your caregiver seem interested in the things you do? / Which staff member do you feel closest to? / Which caregivers encourage you when you do well? / If you are seldom encouraged and supported by your caregiver, why do you think it is?</p> |
| Relationships | <p>Time with people, physical affection, poor relationships, relationships which feel bad, home base, 'space' to be, talking and sharing feelings with friends and family, trust, care, fun, freedom to be 'yourself', number of caregivers since birth, someone to turn to in crises, fear of sexual or physical harm.</p> <p>Questions: How do you get on with people you live with? / I there is anyone with whom you get on badly, could you tell about it? / Do you regularly spend time away from your family or caregivers? / How do you feel when</p> |

| | |
|------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <p>you have to be away from them? / How do you think being away from them affects you? / Do any of the adults you live with show you physical affection? It this right for you? If not, say why? How often do you spend time with your close family in a week? Is this amount of contact right for you? If not, what would you like to change? If you never see your family, is this what you would prefer? / Do you have a 'home base' where you feel welcome? Be sure of a bed/place to sleep if necessary, expect to go for major holidays if you would like to, drop in without invitation, expects help at special times. / Do you have a special friend you can talk to about personal things? If you do not have as many friends as you would like, what can you do to try to make more? How often do you see your friends? Is this enough time with friends? / Would you like to try and find out more about your family? Be in touch with them? If you are living away from your family, can you explain why? Would you like to talk this over with an adult you can trust? / Do you have enough information about the places you knew when you were a lot younger? Who can help you find out more? / How many people have taken care of you since you were a baby? / Apart from your parents and close family, is there any other adult you know who you could turn to in a crises or when you are unhappy?</p> |
| Language | <p>Language used most often, people who understand, opportunity to speak own language, respect, teaching on other necessary languages, literacy, time with those who speak your language and share cultural background.</p> <p>Questions: What language do you use most often and feel the most comfortable with? Do you have enough people who can understand you when you speak your own language? Do you have enough opportunity to speak your own language? / Do you have enough opportunity to meet and spend time with others who share your same language and cultural background?</p> |
| THEME 1B: HEALTH & WELL-BEING | |
| Food | <p>Sufficient, nutritional, special needs, eat too much, too little.</p> <p>Questions: Do you feel you get sufficient food? / Do you enjoy the food you get? / Do you have any special needs for health or religious or cultural reasons? / What are your favourite foods? / Do you think you sometimes eat too much or too little?</p> |
| Health | <p>Medical condition, sleep, medications, information on drugs and alcohol, assistance with substance abuse, hearing, eyes, disability, HIV/AIDS, universal precautions, teeth, information on body changes, sexuality.</p> <p>Questions: Is there anything you would like to report or ask about with regard to your health? / Do you find it easy to sleep at night? / do you wake up during the night? / What do you do if you wake up or can's sleep? / When did you last have a medical examination and what did the nurse or doctor say? / Has everything been done that needed to be? / Do you have problems with your hearing? Explain. / Do you have any problems with your speech? Explain. / Do you have any problems with your sight? Explain. / How tall are you? How much do you weigh? Are you worried</p> |

| | |
|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | about your weight? / When did you last visit a dentist? Do you have any problems with your teeth? / Do you have any ongoing health problems? Do you think you know enough about how to deal with them? / Have you had information about how drugs can affect your health? Have you used drugs? |
| Clothing | Sufficient, appropriate, warmth, in OK condition, choice. Questions: Do any of your clothes need to be mended? Who could do this? Do you have sufficient clothes for schools, home, important occasions, when you are with your friends? Do you like the clothes that you have? |
| Sport/recreation | |
| MASTERY | |
| General competency | Skills, activities in which person excels, desire to learn skills, encouragement for development and mastery, special interests, special talents, special needs, special coping skills, ways of managing adversity, problem solving. |
| Social, emotional and life skills | Adjusting behaviour and conversation to different situations, cautioned by the police or charged with a criminal offence, serious trouble, support, cook a meal, wash the dishes, mend clothes, wash clothes, shop for food, basic first aid, using public phone, catch a bus or taxi, make decisions, express feelings without hurting someone, ask when uncertain, say no when you feel uncomfortable or scared, pay compliments, cope with changing roles, handling money, personal goals, use of free time. |
| Education and employment | School, college, courses, university, employment, sufficient income, knowledge, schooling, school attendance, appropriateness of education, skills training for employment, accessibility, relationship with teachers, literacy, spiritual guidance, career interests, family support, job satisfaction, dealing with unemployment, homework, dreams, hopes, challenges. |
| INDEPENDENCE | |
| Inner control/discipline | Patience, understanding, listening, responding appropriately, handling strong feelings appropriately, temper/anger management, concentration, think before acting, perseverance, pick on other people, force others to do things, restlessness, make choices and decisions, fulfill obligations without reminders, task completion. |
| Responsibility | Own up/admit to wrongdoing, take responsibility for feelings, take responsibility for actions, take responsibility for expression of feelings, willingness to face consequences, ability to take responsibility by making the wrong right, careful decision making and choices, thinking through issues before acting. |
| GENEROSITY | |
| Caring and sharing | Helpfulness, using opportunities to express care, enjoyment in helping each other, expression of care, respect and care for boundaries, respect and care for opinions and feelings, recognition of elders and their contribution, sharing possessions and experiences, expressing comfort and concern, selflessness, sacrifice for other's well-being, including and supporting those who are perceived to be weaker or are disabled without patronising. |

Example 2:

| |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Physical and Emotional Well-being |
| Questions asked: Physical well-being checklist, general health, chronic and acute illness, physical development, disability, nutrition, clothing and psycho-emotional development. |
| Belonging |
| <ul style="list-style-type: none">• The need to belong is universal and is fostered in many ways, such as through feeling loved and supported through positive relationships and through a sense of connection to family, friends and community.• Belonging is about children developing a positive sense of who they are and feelings that they are valued and respected as part of a family and community.• From birth, children develop a sense of who they are. Relationships with family members, other adults and children, friends and members of their community play a key role in building their identities.• Children's sense of whole is shaped by their characteristics, behaviour, understanding of themselves, family and others.• Belonging is about having a secure relationship with or a connection with a particular group of people.• When children feel a sense of belonging and sense of pride in their families, their peers, communities, they can be emotionally strong, self-assured and able to deal with challenges and difficulties. This creates an important foundation for their learning and development.• Often their issues with separations and loss are compounded by a series of out-of-home placements and by problematic relationships in their birth families.• Belonging includes coming to terms with separations from birth families and other significant people, a sense of connection to culture and ethnicity, the ability to make friends and maintain peer relationships, participate in community activities and regular contact with people who model, encourage and rewards activities that promote community activities and regular contact with people who model, encourage and reward activities that promote a sense of belonging.• A sense of belonging and being loved is third in Maslow's hierarchy of needs, after physiological needs for food, clothing and shelter (first) and the need for personal safety (second). Respect and esteem for self and others is the fourth and self-actualization is the fifth. Maslow's theory thus parallels the elements of the Circle of Courage.• The need to belong is universal and is fostered in many ways, such as feelings loved, supported, positive relationships and through a sense of connection to family, friends and community. Belonging in children is about them developing a positive sense of who they are and feelings that they are valued and respected as part of a family and community. Questions asked: Safety, Identity: Birth certificate and ID, Identity: personal family, Identity: cultural, Identity: religious/spiritual, positive communication, psycho-emotional development, positive relationship with peers, boundaries for daily living and sense of place in the world. |
| Mastery |
| Mastery is being able to do some things well and to feel pride in being able to do so. <ul style="list-style-type: none">• Age and developmental stage competence can be used interchangeably with mastery |

- Age and developmental stage are important in assessing competence. Competencies are changed when children experience control over their life events, show a capacity for self-regulation, and have both motivation and abilities to accomplish goals.
- Mastery encompasses being really good at something, enjoying a variety of activities, abilities to cope with adversities, emotional expressiveness, healthy sexual development and being able to regulate emotions.
- Empowerment is an important aspect of mastery.
- Competence is fundamental to Erikson's psychosocial development theory and begins with secure attachment relationships and capacities for self-regulation.

Questions asked:

Educational checklist, general competency, actively engaged, supportive learning environments, care-givers involvement in learning, motivation to achieve, psycho-emotional development and positive relationships with peers.

Independence

Independence means the freedom to make choices and to have control over your own life.

- Autonomy is used interchangeably with independence.
- The development of autonomy is gradual, beginning with planned dependency early in life, learning to respect elders and being taught about the value of autonomy.
- Adults and peers can provide guidance and values, but young people should be encouraged to make their own choices and to control their own destinies.
- Independence is a major, life-long developmental task whose beginnings are in infancy.
- Shame is a sense of the self as fundamentally defective, while doubt involved fear of others, fear of being attacked by others, and innate belief in an unjust world. Such attitudes and beliefs undermine optimism about the future and capacities for resisting negative role models and situations.
- Persons whose autonomy have been respected and enhances, on the other hand, expect to have their wills affirmed in a range of domains and they also respect and affirm the wills of other people.
- The involvement of children and youth in planning for their futures and in making decisions that affect them are important parts of respecting and fostering autonomy.

Questions asked: Planning and decision-making, personal power, responsibility of self, engagement in activities that will help in the future, positive view of personal future.

Generosity

Generosity is intricately linked with respect.

- Understanding that other people have the right to the same freedom and social resources as you, is fundamental to respectful behaviour.
- Helping another person and making a contribution to their well-being not only demonstrates high respect but enriches one's own sense of self-worth and positive identity.
- When generosity occurs, the recipient feels nurtured and their feelings of belonging are enhanced.

Questions asked:

Service to others, peaceful conflict resolution, honesty and respect

Example 3:

The content of the Assessment Tool of Children in Alternative Care was used with the Circle of Courage to explain the new tool of the Department. See the diagram below.

See the Assessment tool for the in-depth explanation of each Developmental Area.

Example of IDP:

| Developmental areas | What are the desired outcomes/goals? | What will be done? | Who will do this? | By when? |
|-----------------------------------|--------------------------------------|--------------------|-------------------|----------|
| Physical and emotional well-being | | | | |
| Belonging | | | | |
| Mastery | | | | |
| Independence | | | | |
| Generosity | | | | |



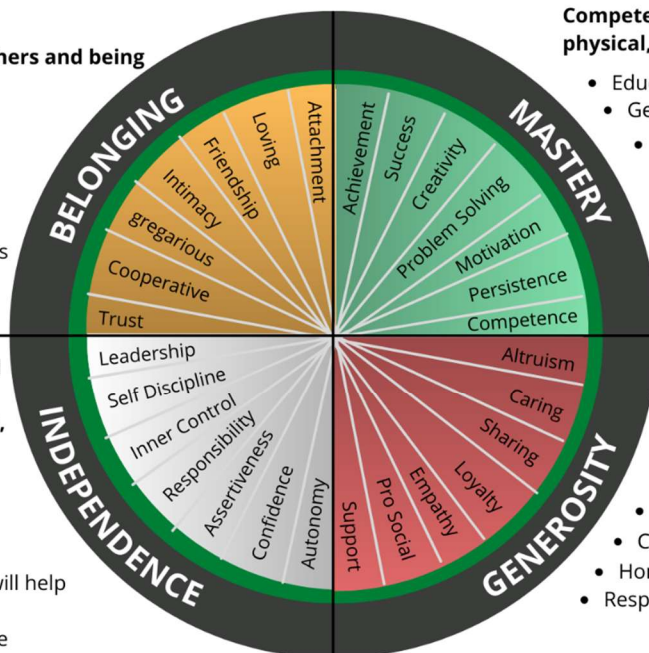
Assessment Of Children In Alternative Care

A sense of community, loving others and being

- Identity: Birth certificate; ID; Personal and family, cultural, sexual, religious/spiritual
- Safety
- Caring relationship/ caregiver
- Positive communication
- Positive relationship with peers
- Boundaries for daily living
- Sense of place in the world

Making one's own decisions and being responsible for failure or success, setting one's own goals, disciplining one's self.

- Planning and decision-making
- Personal power
- Responsibility for self
- Engagement in activities that will help him/her in the future
- Positive view of personal future



Competence in many areas: cognitive, physical, social & spiritual

- Education Checklist
- General competency
- Caregivers/volunteers involvement in learning
- Actively engaged in learning and embraces new activities which are age related
- Engagement with rolemodels and mentors

Looking forward to being able to contribute to others, be able to give cherished things to others

- Service to others
- Peaceful conflict resolution
- Caring
- Honesty
- Respect

Developmental Area: Physical & Emotional Well-being

- Physical well-being list
- Chronic and acute illness
- Disability
- Nutrition
- General health
- Physical development/ cultural aspects
- Clothing
- Emotional Development

Assessment

- Strengths & resources
- Needs/ concerns
- Changes wanted (desired outcomes)
- Actions to effect change (who/ timeframe)

IDP

- Developmental Areas
- What are the desired outcomes/ goals
- What will be done?
- Who will do it?
- By when?

The goal of the IDP is to:

- guide and promote the child's development

- guide and set out the intervention and tasks of all relevant parties

The IDP is to be completed after the developmental assessment has been done which provides and informs:

- an in-depth and holistic view of the child's situation, as well as their family.
- a comprehensive picture of the child's general well-being and his/her developmental strengths and needs (guided by the Circle of Courage domains).
- actions to be taken by the child, his/her care-giver and significant others to address specific developmental needs.
- It identifies what should happen to meet the identified needs, who should do it and when the actions should take place.

Where possible, the child should be provided with a simple written copy of the plan that they can understand. This is especially important when some of the case actions are their responsibility to take forward.

Each child must have his/her own IDP.

The formal review of an IDP and Care Plan provides an opportunity to re-evaluate the child/family needs, identify barriers to achieving developmental plan goals, and ensure that developmental plans continue to be relevant to their needs. It examines the progress made with addressing developmental needs. It also requires a re-assessment of all the developmental areas to determine whether there have been any significant changes which may then require adjustment to the IDP and Care Plan.

Reviews must be undertaken by the multi-disciplinary team and the same tool used for the initial assessment should be used to guide the review.

The review should start with an appraisal of whether the planned actions were implemented and what the results were. Progress or lack of progress made should inform the review of the child's plans (Care Plan, IDP and Permanency Plan)

The IDP review is an on-going process throughout the life cycle of the case, until the case is disengaged/closed. Therefore, the IDP is a working document.

After the review, the IDP will:

- Continue to be implemented as planned
- Be revised
- Be closed

4.4 Foster Plan

Definition:

A plan between the parent/guardian and the foster parent, compiled not later than 21 days after the placement by using the prescribed format to indicate the proposed intervention

and responsibilities and rights of the relevant parties. The plan must be reviewed every six months.

Example of a foster plan:

| | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-----------|
| PART A: PARTICULARS OF BIOLOGICAL PARENTS | | |
| PART B: DETAILS OF FOSTER PARENTS | | |
| DETAILS OF DESIGNATED CPO/ DESIGNATED SOCIAL WORKER | | |
| PART C: DETAILS OF CHILD/CHILDREN | | |
| PART D: DETAILS OF RESPONSIBILITIES AND RIGHTS IN RESPECT OF CHILD | | |
| D1: Please provide details concerning the day to day care of the child by the foster parents and/or parental responsibilities and rights by the foster parents | | |
| D2: Please provide details of matters on which the biological parents/guardians must be consulted or may be required to provide their consent | | |
| D3: CONTACT | | |
| Please provide details concerning any agreed contact by biological parents or family members or other persons having an interest in the child in foster care | | |
| D4: Particulars as to the reunification services to be provided by the designated social worker or designated child protection organisation and the role and responsibilities of biological parents in relation to such services | | |
| D5: Particulars as to financial contributions to the child's maintenance and upbringing of schooling by the parent/guardian | | |
| D6: Particulars as to supervision and monitoring services to be undertaken by the designated social worker/designated child protection organisation | | |
| PART E: ANY ADDITIONAL INFORMATION | | |
| | | |
| | | |
| | | |
| PART F: VIEWS OF THE CHILD | | |
| Has the child or have the children who is of sufficient age and maturity been given an opportunity to express their views in the formulation of his foster care plan, and have these views been given due consideration? Y/N | | |
| PART G: SIGNATURES | | |
| | NAME | SIGNATURE |

| | | | |
|--------------------------------------------------------------------------------------------------|--------|--|--|
| Name of biological parent/family member/person having an interest in the well-being of the child | Father | | |
| | Mother | | |
| Name of foster parent | Father | | |
| | Mother | | |
| Name of designated statutory worker | | | |

4.5 Independent living plan

The goal of the independent living programme is to enable young persons to achieve self-sufficiency before leaving alternative care. Providing independent living skills assessment, education, vocational training, job seeking and written independent living plan for each participating young person will assist in achieving the goal.

Outcomes expected from the independent living plan:

- the youth shall have identified an affordable and potentially permanent place to live upon their discharge from the programme
- have researched different living options, including transitional/post-18 accommodation options
- have identified a back-up plan for emergency accommodation, should their 1st option not work out
- have been given the opportunity to strengthen relationships with the people they will be living with or renting from once they leave care
- understand basic personal safety skills
- be able to demonstrate self-sufficiency and independence from social services
- gain significant employment experience or vocational training through internships, learnerships, or vocational training
- learn to communicate effectively with individuals in the community
- make progress toward educational goals
- have an improved self-awareness as it relates to their family dynamics
- increase their overall level of responsibility
- increase their capacity to avoid or remain free from illegal/criminal entanglements and risky behaviour
- secure and maintain positive peer relationships
- understand and exercise their rights and responsibilities as citizens
- feel prepared and supported through their transition out of care
- have a stronger sense of self (be aware of their strengths, talents and cultural identity)
- have been able to build healthier relationships

- have been able to identify and build a stronger network of support
- feel better prepared (emotionally and physically) for moving through transitions
- be able to make better choices regarding the future
- be able to navigate local resources to meet their needs
- have the practical skills and the internal resources to cope with the reality beyond care
- be able to continue with their education/studies
- be connected to developmental opportunities

Eligibility for the independent living programme:

Persons aged 16 and over who are preparing to move out of care. They must be equipped with skills to enable them to integrate swiftly in the communities.

Objectives of the independent living programmes:

- promoting the importance of early planning for one's future
- developing each individual's innate strengths
- promoting the concepts of permanent connections/long-term relationships – as opposed to short term interventions
- ensuring transition of young people aged 16-18 from state custody to self-sufficiency and successful adult living; from depending on the alternative care giver to creating a network of support so that they are able to function interdependently and increasingly meet their own needs
- supporting youth by encouraging a multi-disciplinary approach through training of field staff and other appropriate and responsible adults through the creation and support of a multi-disciplinary 'transition team' that supports the young person to strengthen their network of support
- providing support to staff at alternative care placements to become 'transitions friendly' and more able to work from a youth development perspective with older youth
- develop youth targeted resources and community partnerships

Plans can include the following:

| | |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Strengthening social and emotional skills</p> | <ul style="list-style-type: none"> • relationship building skills • decision making skills • self-awareness • social awareness • communication skills • conflict resolution skills |
|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| | |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Employment preparation/assistance</p> | <ul style="list-style-type: none"> • basic and remedial education • job readiness or job maturity skills • on-the-job training • job search assistance • exposure to career days • opportunity to develop interview skills • job maintenance skills • cv writing skills • list of organisations offering work readiness support |
| <p>Post-secondary training and education preparation</p> | <ul style="list-style-type: none"> • financial assistance • tutoring • study skills (training) • assistance with school registration • educational assessment • career plan • educational pathway planning • visits to FET/university/further skills training/college • planning for continued education after care |
| <p>Identifying accommodation options and preparing reintegration</p> | <ul style="list-style-type: none"> • transitional housing project and youth development support services • assistance with rental issues • research the costs of different housing options • creation of linkage between other departments and local authorities • training of leases, landlord and tenants law • emphasis on education and employment in order to earn a living wage for rental • acquiring apartments or apartment leases that are set aside for rental to youth aging out of alternative care |
| <p>Provision of personal and emotional support</p> | <ul style="list-style-type: none"> • mentoring programmes • training programmes for foster parents, child and youth care workers and adoptive parents to promote building skills with youth • support groups for youth • assistance with obtaining community resources and support systems |
| <p>Gathering essential documents</p> | <ul style="list-style-type: none"> • ability to apply for a birth certificate • ability to apply for an id document or relevant papers (asylum seeker/refugee status) with certified copies • cv writing • opening a bank account • a learners/drivers license • a contact list of their network support • a list of emergency contact details • a library card |

| | |
|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Developing independent living skills</p> | <ul style="list-style-type: none"> • managing a household: menu planning, creating shopping lists, meal preparation, cleaning, food storage, washing their own clothes, home management and starting to pay bills • financial management skills which includes: budgeting, savings, opening a bank account, filing income taxes and becoming an informed consumer • self-confidence, personal responsibility, problem solving and goal-setting • communication and relationship development |
| <p>Self care skills</p> | <ul style="list-style-type: none"> • personal hygiene • alcohol and drug abuse • parenting skills • responsible parenting |
| <p>Health and well-being issues</p> | <ul style="list-style-type: none"> • visit to local health care centre • list of key health care services including eyes, dental, sexual and reproductive services • medical records • clinic care • nutrition knowledge • fitness/exercise plan • personal hygiene • skills for stress management • basic first aid skills • someone they can speak to about gender and sexuality • accessing a counsellor for emotional support |
| <p>Building networks of support and navigating community resources</p> | <ul style="list-style-type: none"> • access to supportive and trustworthy adults • mentor/mentors • connection, where possible to biological family • access to a list of community resources • experiences to explore their cultural heritage • access to youth/social/recreational club • experience through volunteering/community service |
| <p>Transition to self-sufficiency</p> | <ul style="list-style-type: none"> • conduct assessments of skills and needs • co-develop transition plans based on assessment • involvement of the youth in the development of the transition planning • youth involved in local planning activities • independent living services and support information packet provided to all youth while in care |

5. GLOSSARY

| | |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Alternative Care | It is defined as a placement either in foster care; a Child and Youth Care Centre (CYCC) or temporary safe care following an order made in respect of the Children’s Court or Child Justice Act. (see section 167 of the Children’s Act) |
| Age out of care | A young person who leaves care around the age of 18 primarily because they have reached the age of 18. |
| Assessment | Assessment can be defined as a process and a product. As a process, assessment involves the gathering, analysing and synthesising of information to provide a concise picture of people’s needs and strengths, within their unique circumstances. As a product, assessment results in an actual formulation or statement regarding the nature of a person’s circumstances and other related factors at a given time (Hepworth et al., 2012). According to the Children’s Act assessment of a child means a process of investigating the developmental needs of a child, including his/her family environment or any other circumstances that may have a bearing on a child’s need for protection and therapeutic services. |
| Belonging | This developmental need and social value have to do with a deep sense of relationship or attachment with other human beings. It is reflected in a sense of relatedness, of care of love, of community, of Ubuntu, of respect for other and for nature. |
| Care plan | A care plan refers to a plan of treatment and care of a child whilst the child is in alternative care and focuses on the probable ultimate reunification of the child with his or her family, whilst providing him/her with the necessary services, care, developmental programmes or intervention. |
| Case review | Reassess the child/family needs and identify barriers to achieving case goals. |
| Cluster foster care | The reception of children in foster care in accordance with a cluster foster scheme registered by the provincial head of the department. |
| Continuum of care | Continuum of care includes the care and placement of a child into alternative care by court order ranging from placement into foster care, temporary safe care or placement in a child and youth care centre. Services rendered range from the reception, assessment, care and exit of a child from the child and youth care system. The child may exit the continuum either through discharge from alternative care, through termination of foster care or movement to an independent living programme after reaching the age of 18 of 21, whichever applicable. |
| Developmental assessment | Comprehensive assessment of child/family situation and needs. |
| Developmental plan | Based on an assessment and decide on case/developmental goal/s and who will do what and by when. |
| Foster care | Care of a child with a person who is not the parent or guardian of the child as a result of an order of the Children’s Court. |

| | |
|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Generosity | Is directly linked to a deep sense of being needed and valuable, together with a desire and ability to contribute positively to the lives of those with whom the young people lives and comes into contact every day. |
| Independent living | Having opportunity to be self-sufficient as possible and the right to pursue a course of action. |
| Independent living programme | A psychoeducational, developmental, training programme designed to develop a range of competencies in a young person preparing to age out of care, that enables them to navigate their social environment more independently and to access appropriate support when required. |
| Individual development plan | An individual plan (IDP) refers to a detailed developmental intervention plan focusing on strengths rather than pathologies, to building competency rather than attempting to cure. An IDP should be based on a strong believe in the potential within each child and family regardless of the reason for being in the child protection system. It should be informed by the Circle of Courage approach that is based on the assessment against the values and principles of belonging, mastery, independence and generosity. An IDP must clearly state target issues to be addressed, why, by whom, and when, in order to address developmental areas or issues in relation to a child in alternative care. |
| Implementation | Guided by the case/developmental plan: refer and connect client to resources and provide direct interventions. |
| Independence | Is directly linked to a deep sense of inner control of self disciplining and the ability to make responsible choices and decisions. Ability to take responsibility for actions. |
| Mastery | It is directly linked to a deep sense of competence and capacity which comes from the ability to successful complete the appropriate developmental tasks and function effectively in family, community and society each day. |
| Permanency Plan | Refers to a plan drawn by a designated social worker with the participation of affected parties and where appropriate, relevant professionals. A permanency plan is applicable if it is not in the best interest of the child to remain in parental care or if it is not possible for a child who has been removed from parental care to be reunited with his or her family. A permanency plan must clearly specify what needs to be achieved ultimately, in order to terminate court-ordered supervision or to restore a child to the care of his or her family. |

REFERENCES

DePanfillis, D. 2018. *Child Protective Services: A guide for Caseworkers*. US Department of Health and Human Services.

Department of Social Development. May 2010. *Norms, Standards and Practice Guidelines for the Children's Act*.

Department of Social Development. *Assessment Tool for Children in Alternative Care. Assessment Tool & Training Guide*.
<https://www.socialserviceworkforce.org/system/files/resource/files/Assessment%20Tool%20for%20Children%20in%20Alternative%20Care%20%20Assessment%20and%20Training%20Guide.pdf>

Department of Social Development. 2013. *Information Guide on the Management of Statutory Services in terms of the Children's Act 38 of 2005*.

Department of Social Development. 2020. *National guidelines on independent living for children in alternative care*.

Republic of South Africa. 31 March 2010. *Children's Act, 2005. Regulations relating to the Children's Court and International Child Abduction*. Government Gazette.

Republic of South Africa. 1 April 2010. *The Children's Act, 2005 (Act 38 of 2005) Consolidated Regulations pertaining to the Children's Act, 2005*. Government Gazette.

The Children's Act, 38 of 2005. Pretoria: Government Printers.