



Foster Carers Handbook

together for
children

FOSTERING SUNDERLAND

2021

Introduction

Congratulations!

Welcome to Together for Children Fostering- Sunderland!

The fact that you have been provided with this handbook means that you have now been approved as a Foster Carer with Together for Children Fostering - Sunderland. We hope that this will be the start of a long and happy fostering career with us. This handbook book focuses on the practical issues involved in fostering today.

From time to time procedures and policies may change and this document will be updated and any necessary amendments included. The handbook should be used in conjunction with the Foster Carer Portal where you will find all the policies, procedures, guidance, resources and training programmes. Your fostering social worker will provide you with login details to enable you to take advantage of the resources stored on the Foster Carer Portal. If at any time you require information that is not included, we would be grateful if you could let us know – it is likely that other carers will require the same information and arrangements can be made to include it as an addition.

On behalf of the Fostering Service, THANK YOU again for all of your hard work to date – we sincerely look forward to working with you in the months and years to come making a real difference to the lives of the children in need within our community. We hope that you will find being a foster carer rewarding and satisfying. By working together we will be able to keep children and young people safe, provide them with a secure and caring home and improve their life chances for a brighter, happier future. Your fostering social worker will be available for help, advice and support and will see you personally on a regular basis to undertake supervision visits.

If you are worried, uncertain or do not know the answer to a problem or situation you can telephone your fostering social worker to discuss the situation. If your fostering social worker is not available the fostering team also provide a duty worker service during office hours, they will be able to help or support you. The Foster Carer Handbook has been devised to be a quick reference guide to try to answer the most frequently asked questions and help you understand some of the requirements of being a foster carer. The handbook can never be all encompassing: any information not in this handbook can be sought from the fostering team.

Together for Children Fostering - Sunderland is regularly inspected by OFSTED. Foster care is subject to consideration on how the service and carers meet National Minimum Standards, some of which are detailed in the handbook. These standards are based on the Fostering Regulations and are enforceable by law. Standards and Regulations are there to protect and safeguard both children and foster carers and impose duties that ensure children and young people placed in foster care are well looked after and are kept safe. The Fostering Agency wish you an enjoyable and rewarding experience in fostering and remember, if in doubt, pick up the telephone or email to contact us.

Contents

Introduction.....	2	FOSTERING SUNDERLAND
Accidents	6	
Accommodated / Looked After / Cared for	6	
Allegations / Complaints	6	
Agency Decision Maker	8	
Appropriate Adult (AA)	8	
Baby Sitting / Staying with Friends.....	9	
Behaviour Management	9	
Belongings	11	
Bullying	12	
Channel.....	12	
Changes in Circumstances	13	
Changing a Child’s Name	13	
Child Abuse	13	
Emotional Abuse.....	13	
Physical Abuse	13	
Sexual Abuse.....	14	
Child Protection	14	
Child Benefit	14	
Children’s Care Plans	15	
Children Act 1989	15	
Children’s Guardian	15	
Compliments and Complaints.....	16	
Confidentiality	16	
Connected Person	18	
Corporal Punishment.....	18	
Court Appearance.....	18	
Court Orders.....	18	
Culture and Language.....	19	
Day Support for Foster Carers	20	
Delegated Authority (Decision Tool available on Foster Carer Portal).....	20	
Deprivation of Liberty	20	

Dinner Money	21
Disclosure and Barring Service – DBS check	21
Disruption of care / Unplanned ending	22
Drug and Alcohol Abuse.....	23
Emergencies and assistance	24
Eating Problems.....	24
Education.....	25
Exclusions	27
Emergencies	28
Enuresis - Nocturnal	28
Equalities	28
Family Time (Contact).....	29
First Aid.....	30
Foster Care Agreement.....	30
Foster Carers Consultative Group.....	31
Fostering Panel	31
Fostering Standards.....	33
Hair Care	33
Health	33
Holidays in the UK.....	34
Holidays Abroad.....	34
Immunisation.....	34
Information and Communication Technology	34
Insurance	35
Leisure Activity.....	35
Life Story Work	35
Lockable Space within the home	36
Matching.....	36
Medical Examinations.....	36
Medication Administration	37
Mockingbird.....	37
Missing from Care.....	38
National Minimum Standards for The Agency	38

Next Steps.....	38
Nursery Provision.....	39
Children in foster care who are aged 3 or 4 years old will be able to receive 30 hours free childcare, if the following criteria are met:	39
Ofsted	39
Parental Responsibility - (PR).....	39
Payments	40
Placement Plan	41
Play, Stimulation and Toys.....	42
Radicalisation.....	44
Records	44
Recruitment.....	47
Retention	47
Religion	47
Respite	48
Reviews.....	48
Safer Care	48
Short Breaks.....	49
Special Guardianship Order (SGO).....	49
Stability of care for Children	49
Statement of Purpose.....	50
Substance Misuse	50
Support network.....	50
Support and Support Groups.....	50
Termination/Withdrawal of Approval.....	50
Training for Foster Carers	51
Glossary	52

Accidents

It is good practice and an expectation that carers should record any accident in which a child in your care is involved, how the accident happened and what action you have taken as soon as is reasonably practical. It can sometimes be difficult to remember or explain the signs of an injury weeks after the event. Always tell the child's social worker and/or your fostering social worker as soon as you can. An Accident/Incident form is included in the child's portfolio or is available on the fostering portal.

If a Cared for Child placed with you has a more serious accident or sudden illness and requires medical or hospital treatment, consent to treatment will be required, so always have the document which delegates this authority to you readily available. Young people 16 years or over can give their own consent to medical treatment. Some children under 16 years of age may also be able to give or refuse consent if they are considered to have sufficient understanding. It is important to talk with the child, keep them informed, give reassurance and gain their views.

You must keep the child's social worker and your fostering social worker informed of any organised medical treatment. If the accident or event occurs outside normal office hours you should notify the Emergency Duty Team on 0191 5205552.

Accommodated / Looked After / Cared for

These are terms you will hear used: 'Accommodated' and being 'Looked After' are two legal terms which describe children who are in the care of Together for Children, in both cases the children can be in foster care.

A child who is being 'Looked After' is defined in Section 22 of the Children Act 1989, as a child in the care of the Together for Children, under an Interim Care Order or Care Order, or a child who is being provided with Section 20 accommodation by Together for Children. We have recently changed our language to reflect the lived experienced of children and young people in care and throughout this handbook, children and young people will be referred to as Cared for.

Allegations / Complaints

If an allegation is made directly to you about another person's conduct towards a child, you should inform your fostering social worker or the child's social worker immediately. If an allegation is made about the conduct of yourself or a member of your household in respect of a child then this would be investigated under safeguarding procedures and the management of allegations process overseen by the Designated Officer for Together for Children. There is a specific mandatory training course provided to foster carers which explains this process and what independent support is available.

Allegations and complaints are occasionally made against foster carers and this can put foster carers in a difficult and sometimes distressing situation. The Fostering Agency has an investigation and safeguarding procedure which aims to deal with allegations against carers quickly, confidentially, fairly and impartially. This procedure is known as Allegations against

Foster Carers and is commenced when an allegation is made against an adult caring for or working with a child or young person.

After the investigation of any allegation a decision will be made as to whether the allegation is found to be:

Substantiated – There is sufficient identifiable evidence to prove the allegation. Relevant Conduct has occurred.

Unsubstantiated – This is not the same as a false allegation, it simply means that there is insufficient identifiable evidence to prove the allegation. The term does not imply guilt or innocence.

Unfounded – There is no evidence or proper basis which supports the allegation being made, or there is evidence to prove that the allegation is untrue. It may also indicate the person making the allegation misinterpreted the incident or was mistaken about what they saw; alternatively, they may not have been aware of all the circumstances.

Malicious/False – There is “clear” evidence to prove that there has been a deliberate act to deceive and the allegation is entirely false.

When an allegation is made against a foster carer it can be a very stressful time. Your fostering social worker will provide support but will not be able to discuss the progress made within the allegation process during the investigation and this can result in foster carers feeling isolated and unsupported.

To support foster carers through an allegation and investigation The Agency have commissioned the services of ‘Fostering Network’ to provide Independent Support Service to foster carers. The Independent Advisors can provide face to face support, advocacy and/or mediation for foster families during difficult times such as allegations and complaints. In the Agency a discussion to access this service is held at the time of the allegation and an initial amount of support would be agreed by a fostering manager, if additional support is required this is discussed and agreed on an individual basis.

What support can the Independent Advisor give?

- General advice about the allegations and panel process
- Give emotional support as required
- Advisors will work on a model of empowering carers to express views, raise questions and encouragement to be proactive in their situation
- Non-adversarial advocacy based support
- Be a communication link between foster carers and their fostering agency (only if foster carer requires this)
- Be non-judgmental
- Be impartial in the advice they give
- Be confidential (subject to the usual safeguarding boundaries)

- Advisor will not tell the foster carer what to do but will point out objectively the advantages and disadvantage of a course of action to allow foster carers to make their own decisions from an informed perspective
- Spend time prior to a meeting to help foster carer prepare for the meeting
- Attend meetings (such as annual review and panel)
- Help with written responses to reports
- Help to explore what outcome they are hoping to achieve and how realistic the foster carer's desired outcome is

What is outside of the Independent Advisor role?

- Attend meetings in the foster carer's absence
- Pass on information for the agency to the foster carer
- Actively support a complaint
- Attend meetings such as LAC Reviews, Supervision meetings or meeting seen as day to day normal business
- Unless exceptional circumstance speak on behalf of a foster carer in a meeting, and then only with the approval of the Chair

The contact details for Fostering Network are: 0207 401 9582

Agency Decision Maker

Every Agency must have an Agency Decision Maker to make decisions for The Agency about the approval of foster carers. The Agency Decision Maker is a senior member of staff and must make decisions within ten working days of receiving the fostering panel's recommendation by way of the final panel minutes. Once the decision is made by the decision maker this must be given verbally to the applicant or foster carer within two working days and confirmed in writing within five working days.

Appropriate Adult (AA)

All young people aged 17 and under who are arrested for a suspected criminal offence are dealt with under the guidance of the Police and Criminal Evidence Act 1984. This means that they have to be dealt with as young people and not in the same way as an adult offender would be dealt with. This means that any young person aged 17 and under cannot be interviewed or processed unless in the presence of an appropriate adult. The appropriate adult, or AA as it is referred to, must be a person over 18 years of age who is deemed mature enough to consider the welfare of the young person in the criminal justice process at the Police station.

This will involve sitting in during the interview process. The appropriate adult is not there to substitute for a solicitor or indeed offer legal advice. The appropriate adult cannot be somebody who is co-accused in the offence or indeed the victim of the offence.

PACE codes of practice (Sec 21) specify information that the police must make available to an AA and the occasions when the AA must be present. For example, an AA must:

- be allowed to review the custody record as soon as is practicable after their arrival, and on request be given a copy of that custody record;
- be consulted by an Inspector at reviews of the young person's detention - be present when the custody officer explains to the child or young person their rights and entitlements while in police custody; and,
- be present when a child or young person is cautioned or charged.

Baby Sitting / Staying with Friends

The Agency recognises that foster carers may need a break, or have a special anniversary or outing planned, and occasionally will have to leave a Cared For Child/Children with a relative or baby-sitter and will ask a member of their support network to look after the children placed. Any regular babysitters would need to have a current DBS check.

A Cared For Child may ask to visit or sleepover at a friend's house. It is the foster carer's responsibility to find out all they can about the people the child wishes to visit. Foster carers are expected to have met the adults, have an address and telephone number and be confident the child will be safe and not at risk of any harm. It would be advisable for the foster carer to inform the child's social worker of such arrangements as this information may be useful when considering future care planning for the child.

Behaviour Management

Children can sometimes respond in a way that can be difficult to manage. This may include the use of inappropriate/offensive language, throwing objects and refusing to co-operate with simple tasks or instructions. These responses are often the result of earlier hurtful life experiences and is a way of the child coping with what he/she sees as a difficult situation.

How we behave or respond to one another is part of our communication and this behaviour is sometimes a way of the child communicating their hurt or distress. For many children it is also a way of trying to gain some control and order over their lives. It is important to remember in managing challenging behaviour that it is the behaviour that is unacceptable and not the child involved. As foster carers you would need to look beyond the behaviour and consider why a child is responding in this way.

Within the Solihull Approach we consider in such situations to help support you and the child/young person:

The four key questions

1. What is the chronological (exact) age and developmental stage of your foster child? What is their emotional stage of development? This may vary from moment to moment.
2. What has been happening to your foster child recently? These might be changes or disruptions and may be changes in your life, or to the child's life. How might this be important?
3. How does your foster child communicate to you in what they say, what they do, or how they behave?
4. What has happened to your foster child in the past that might be relevant now?

The Agency has a 'no smacking' policy within foster care and it is a clear expectation that the foster carer must never physically chastise a foster child. It is vitally important that any episodes of challenging or threatening or dangerous behaviour, including going missing, are recorded by the foster carer and this information is given to the child's social worker or fostering social worker. This can often help in identifying 'triggers' or 'patterns' for behaviour and help plan for managing possible future episodes.

All foster carers are offered training in Managing Behaviour to support positive care and attached of children. The Agency has a clear written policy on managing behaviour which includes supporting positive behaviour, de-escalating conflict and the use of discipline. Please ask your fostering social worker to discuss the policy and the training with you.

Please remember that as an Agency foster carer you do not need to deal with everything on your own. Any problems can always be discussed with your fostering social worker and the child's social worker and you will be given advice and support on how to approach challenging situations.

Guidelines for managing difficult behaviour: Prevention is better than cure.

- Get to know the child well; a strong relationship based on trust and respect is one of the most effective preventative measures.
- Involve the child in decisions about his/her care and about reasonable limits, appropriate to age and understanding.
- Teach by example: show respect for the child and for each other.
- Encourage good behaviour; notice and respond when children are being helpful or constructive or friendly or just quiet and co-operative.
- Be consistent; as far as you can – set reasonable limits and boundaries within the home.
- Be clear: children need to be aware of what is expected of them. Problems often occur when explanations are unclear or unreasonable.
- Never trivialise a child/young person's worries no matter what they are, as it is part of their forming of a trusting relationship with you.

When things are difficult:

Do

- Try to avoid head on conflict; try distraction or compromise – diffuse the situation wherever you can and stop it getting worse
- Use the chance for the child to learn; try to teach a positive alternative to 'bad behaviour' – e.g. 'let's do this' rather than 'don't do that' – always aiming to increase the child's own self-control.
- Make a distinction between the child and their behaviour; make it clear that you will go on caring for the child and recognise that their behaviour is not a personal affront towards you.
- Encourage the child to find a way out of difficult situations; make sure that the child has a way out of a confrontation without losing face and make sure that there are 'gains' in getting out of conflicts.

- If you have to use sanctions; make them immediate, fair and reasonable – don't store up punishment for later.
- Recognise the child's feelings: it may be unreasonable to bite or kick or scream, but it is not unreasonable to feel cross or unhappy. Help children to find acceptable ways of showing their feelings.
- Keep your own self-control; get help or walk away from a situation if you feel you are losing control.
- Never shame a child/young person as they will be unable to manage this and could escalate the situation further. Often children will not admit when they have done something due to feelings of shame or repercussion. If you know they have done something don't seek an admission but seek to resolve and talk through how things could be resolved. E.g. clean up the mess together.

Do not

- Don't 'go it alone: ask for help, ideas or advice – or just talk it over with someone.
- Don't make threats you can't carry out.
- Don't smack or threaten to smack or use any other physical punishment.
- Don't deprive a child of food or drink or threaten to force them to eat.
- Don't deprive a child of toys or possessions that they use as a comfort e.g. teddy bear from home.
- Don't inhibit a child's freedom of movement unless they or others are at risk.
- Don't use sarcasm or tease, belittle or shame a child into obeying you.

Belongings

Foster children may bring items of clothing, toys or other possessions with them when they come to stay. These belongings may not seem very valuable to an adult but they may be precious to a child and therefore should be treated with respect.

Remember the child will have been separated from their family and familiar surroundings and placed with strangers and what may seem an unimportant item to you may be a child's most treasured possession and hold some special memories. Carers should keep all belongings until advised otherwise by the social worker. Keep an inventory of the child's belongings and add to this when items are purchased. A copy of this is held within the child's file.

When a child leaves their placement **foster family** with you it is essential that their belongings are packed for them in appropriate luggage bags or suitcases. Items must not be packed into plastic bags or bin liners. Please send with them all their belongings and, even if they are changing schools, send their existing uniform - they may want to keep it for life story work.

Blood-borne Viruses: HIV and Hepatitis

Blood-borne viruses are infectious agents that some people carry in their blood. They can cause severe disease in some cases although few or no symptoms in others. The virus can be spread to another person and this may occur whether the carrier of the virus is ill or not.

The main blood-borne viruses that receive the response of concern are:

- Human Immunodeficiency Virus (HIV), which causes acquired immune deficiency syndrome (AIDS)
- Hepatitis B virus (HBV) and hepatitis C virus (HCV)

Blood-borne viruses are spread by direct contact with the blood of an infected person. Certain other body fluids may also be infectious. It should be noted that blood-borne viruses are not spread by normal social contact and daily activities such as coughing, sneezing, kissing, hugging, holding hands or sharing bathrooms, swimming pools, toilets, food, cups, cutlery and crockery.

Bullying

Bullying is defined as ‘deliberate hurtful behaviour repeated over a period of time when it is difficult for those bullied to defend themselves’ (Working Together to Safeguard Children 2018). In the first instance get advice from your fostering social worker, the child’s social worker or the Virtual School. Training is provided on this issue by the Fostering Service. Information regarding issues of bullying should be recorded within the child file as part of the incident form.

Channel

Channel is a key element of the Prevent Strategy (see Radicalisation below) -external link:

<http://www.homeoffice.gov.uk/publications/counter-terrorism/prevent/prevent-strategy/>

It is a multi-agency approach to protect people at risk from radicalisations. Channel uses existing collaboration between Local Authorities, statutory partners (such as the Education and Health sectors, Social Care services, Children’s Youth services and Offender Management services), the Police and the Local Community to:

- Identify individuals at risk of being drawn into terrorism;
- Assess the nature and extent of that risk; and
- Develop the most appropriate support plan for the individuals concerned.

Channel is about safeguarding children and adults from being drawn into committing terrorist-related activity. It is about early intervention to protect and divert people away from the risk they face before illegality occurs. Channel provides specialist interventions in relation to de-radicalisation and disengagement. Prevent training is available.

Changes in Circumstances

If there are any significant or planned/anticipated changes in the foster carer circumstances or the household then the foster carer must inform their fostering social worker. For example, if someone leaves or joins the household, any illness or health matters, any involvement with the police of anyone living in the home, staying at or visiting the foster home, any injury or accident, any change in employment status or new relationships, any pets or holidays. As soon as possible, preferably in advance, you must inform your fostering social worker if someone moves into/joins the fostering household so the appropriate checks can be made.

Changing a Child's Name

It is vital for children to be aware of their identity and their birth name is a major part of their identity. Foster Carers are not allowed to change the forename or surname of a child living with them. Where a child is old enough to make this decision, and wishes to do so, carers should seek advice from the child's social worker or their fostering social worker.

Child Abuse

Children are placed in foster care for a variety of reasons. Some children may have suffered neglect, physical, emotional, psychological or sexual abuse. All these forms of abuse are damaging to children.

As part of the Foster Care Training programme all foster carers are expected to undertake specific training to support and enable them to care for children who have suffered abuse. This is inclusive of safeguarding and safer care training.

Emotional Abuse

Emotional abuse is the common element in neglect, physical abuse and sexual abuse, because severe damage is caused to a child's emotional development alongside the more obvious injuries. Children need to feel safe and secure and able to rely on familiar and loving adults, so the emotional distress they experience as a result of ill-treatment is felt as a profound betrayal of trust. It is not surprising that all kinds of abuse can affect young people's lives long after the physical signs have faded.

Emotional abuse can also occur on its own. Adults may reject children or convey that they are worthless, unloved or inadequate. Racism, sexism, homophobic attitudes and many forms of bullying can also result in emotional abuse.

Physical Abuse

Physical abuse involves injury to a child or young person who may be hurt by a direct attack or through a failure to take reasonable steps to protect them. It may involve being hit with hands or implements, biting, burning, scalding, poisoning, suffocation or shutting in dark places. Shaking babies puts them at particular risk from brain damage.

Sexual Abuse

Sexual abuse entails forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. It may involve penetrative and non-penetrative acts. It includes involving children in the production of pornographic material, or getting them to look at it, and having children watch sexual activity or encouraging them to behave in sexually inappropriate ways. The abuse uses authority, threats, bribery or persuasion to involve the child and to keep the activity secret. Children may fear the breakup of their family if they tell about abuse by someone close to them.

Sexual abuse also includes: Child Sexual Exploitation (CSE) of children under 18 years of age (sometimes trafficking them across countries/boundaries) and contacting and grooming children through internet chat rooms and other forms of technology.

Neglect

Neglect means persistently failing to meet a child's basic needs in a way that is likely to result in serious harm to their health or development. Children may be malnourished or starving. They may have poor inadequate clothing or bedding and unheated bedrooms, they may be left in dirty clothes/nappies, they may become infected, injured or in pain and deprived of medical care. Neglect can be very serious and has long-term consequences for children's physical, emotional and social development.

Abuse of disabled children and young people

Disabled children may be abused in the same ways as any other children, but they can be even more vulnerable to some abusers especially if they have multiple disabilities because they may not be able to communicate what is happening to them.

Disabled children may be socially isolated and may not know what they should and should not be able to expect from others. They may become more vulnerable to abuse, bullying and intimidation.

Child Protection

There will be rare occasions where a child entering care is subject to a child protection plan. The child protection plan acknowledges children who have been at risk of harm at home and presented at a Child Protection Case Conference.

The Child Protection Conference is a meeting which is called specifically to look at risks to children and agreeing whether a child protection plan is needed. It is usual that, once a child **becomes Cared For** then the child protection plan will end and any risks to the child in relation to a return home are addressed through the child's care plan.

Child Benefit

Foster carers are not entitled to claim or to be in receipt of child benefit for a child placed with them.

Children's Care Plans

All Cared For Children and young people should have a written plan which clearly states what plans will be made for them in the future. The following are some of the people involved in making plans for a child's future:

The Child or Young Person
 Social Worker
 Family members
 Foster Carers
 Education Staff
 Medical Advisor
 Fostering social worker
 Children's Guardian
 Independent Reviewing Officer
 Solicitor

Children Act 1989

The principles of the Children Act 1989 are:

- The best place for children to be looked after is within their own families.
- The welfare of the child is paramount.
- Birth parents should be involved in all planning and decision making affecting their children.
- Legal proceedings should be avoided whenever possible.
- The welfare of the child should be promoted by a partnership between the family and the Local Authority. (In Sunderland this is Together for Children)
- Children should not be removed from their families and contact should not be ended unless it is absolutely necessary to do so for their wellbeing, where this does happen it should be through a Court Order.
- The child's needs arising from their race, culture, religion and language must be taken into consideration.

Children's Guardian

Children's Guardians are experienced Social Workers. They are appointed by the **Children and Family Court Advisory and Support Service** (CAFCASS) to represent the rights and interests of children in the care of Together for Children. Guardians are independent from local authorities. The Guardian will appoint a solicitor for the child who specialises in working with children and families. The Guardian will write a report to the Court saying what they think would be best for the child. The report must tell the Court about the wishes and feelings of the children.

The Guardian may interview a range of people who know and work with the child, including the foster carers. Information that is given to the Guardian may be used in the report that is given to Court. Children's Guardians are there to help achieve the best possible outcomes for the children they represent.

Compliments and Complaints

From time to time complaints may arise and a foster carer may wish to make a complaint or compliment. If this is a complaint, most issues can be resolved informally through discussion with either the fostering social worker or the child's social worker depending on the nature of the problem.

Sometimes the Foster Care Manager or the Social Work Manager may be a more appropriate person to hear and discuss your compliment, complaint or concerns. If a complaint cannot be resolved in this way then the formal Complaints Procedure can be used. Information about The Agency Complaints Procedure can be obtained from your fostering social worker.

Confidentiality

There are two elements to confidentiality and the fostering role. The first relates to information relating to other individuals outside of the child/immediate family. As a foster carer you will meet other foster carers on training and in support groups, you will have shared expectations as foster carers to complete specific training or shared tasks if the children placed are linked. All information shared must be treated within the concept of confidentiality.

The second relates to when Cared For Children come to live with you: the child's social worker will share full information about the child's background to enable you to care for the child. This information may include details about the child's birth family and the circumstances which led to the child coming into care. Much of the information will be personal and all of it is told to you in confidence.

Who else needs to know?

You will need to share some of the information with your children and some family members who are likely to have regular contact with the child. You should know how much your own children can cope with, depending on their age and maturity: use your discretion. It is important to emphasise to your children and family members the need for confidentiality. Breaches in confidentiality may lead to a complaint and could affect your approval as a foster carer.

Who does not need to know?

Friends and neighbours: basically, it is none of their business. A firm refusal to talk about the children in your care will usually stop questions.

Discussions with other carers

All foster carers are governed by the same principles of confidentiality. It is possible that another foster carer may have experienced the same issues as yourself and you may ask for general advice from them. This would not be breaking confidentiality, but you must not discuss specific details of a child's case or their background.

If the child tells you a secret

A Cared For Child needs a confidant like any other child. However, if the information they share with you is likely to have an impact on their future plans, you should encourage the child to share this information with their social worker and you can offer to help them with this. If the child will not do this it is essential you tell the child that you will have to share the information with a member of staff from the childcare team.

Some secrets cannot be kept. For example, if a child disclosed that they have been abused or ill-treated, you have to inform the child's social worker. It is always advisable to tell a child you will listen and you will help them but you cannot keep a secret if it is really important to their safety and their future.

Disclosures by children of Abuse

If a foster child tells you about abuse - actual, suspected or alleged - you must speak to the child's social worker, team manager or the duty social worker in the Integrated Contact and Referral Team immediately. Out of office hours you should contact the Emergency Duty Team. You cannot promise confidentiality. Be careful about making promises you cannot keep. The child needs to be clear that you will have to share what you have been told.

At this point of disclosure let the child know that:

- you are listening and accepting what the child is saying
- the perpetrator's actions were wrong
- it is not the child's fault
- you are pleased the child has told you
- you understand the child is likely to have mixed feelings, and
- what you intend doing next (honesty is very important)

During the disclosure accept and listen. Do not ask leading questions, just feedback and affirm what the child has said. Go at the child's pace. It is important that you stay calm and reassuring. Try not to react with horror or disbelief. Stay calm and take seriously what the child is trying to tell you. Continually reassure the child that what the person has done is not acceptable and is not the child's fault.

Try to write down exactly what the child has said, using his/her own words, either at the time or immediately after. This may be used in court. Following a child making a disclosure the involved social work team will take responsibility for the investigation that will follow. Normally, it will be helpful for the child, for you to support him/her during the investigation. If you are prevented from doing this you should ask the social worker investigating the case for the reasons why. You should be aware of your own need for support and should discuss this with your fostering social worker. There are other matters which a foster child may disclose to you. For example, if they are abusing drugs or have committed a criminal offence. Again, you must make it clear that you cannot guarantee confidentiality and contact the fostering social worker for advice.

Connected Person

A 'connected person' to a Cared For Child is a relative, friend or other person who has a connection with them. A 'connected person' can receive temporary approval as a foster carer for a child in care under regulation 24 of The Care Planning, Placement and Case Review (England) Regulations 2010 and subsequent amendments to this in 2013 and 2014. An assessment is undertaken within a 16-week period and if approved via fostering Panel and the Agency Decision Maker they are then known as connected foster carers.

Corporal Punishment

The Agency does not accept the use of corporal punishment in foster care. This means that a foster carer must never physically chastise a **Looked After Child**. Remember many of the **Looked After Children** have suffered physical abuse and injury, therefore physical punishment merely reinforces the belief that adults can hurt children.

Do remember it is the behaviour not the child that is the problem.

The Agency is keen to support all foster carers in understanding and managing challenging behaviour and there are many strategies available to foster carers to help deal with issues that arise. Your fostering social worker will help you access support and training in this complex area of foster care.

Court Appearance

Although this is unusual, in certain circumstances foster carers may be requested to give evidence to the Court. Foster carers are expected to keep accurate records during any placement and these will be important if you are questioned in Court.

Attending Court can seem a daunting experience. The child's social worker and your fostering social worker will both offer support and advice and also help to prepare carers before the Court date.

Court Orders

Under the Children Act and the Children and Family Act 2014 legislation, Court Orders are to be used as a last resort. It is not necessary for foster carers to be expert in child care law but it may be helpful to have an understanding of some of the more common Court Orders.

Emergency Protection Order (EPO)

This is an order under which children are removed from a situation in which they are at risk of immediate significant harm. The order must be signed by a magistrate. An Emergency Protection Order can last up to 8 days with a possible extension of up to a further 7 days. After 72 hours from the making of the Order, an application for discharge can be made by; a parent, a person with parental responsibility, the child, or anyone with whom the child is living at the time (this does not include foster carers).

Care Order

The Court will make a Care Order if it believes that: a child is suffering significant harm or is likely to suffer significant harm, or if the care being given is not what a parent should give, or the child is beyond the parent's control, or if making the order will help the child.

The Order will state Together for Children must look after the child and provide somewhere for the child to live. A Care Order gives shared parental responsibility to Together for Children and the child's parents.

The Care Order lasts until the young person reaches 18 years of age, or until the child is adopted, or a Supervision Order, a Special Guardianship Order or Child Arrangement Order is made, or the Court discharges the Care Order.

Under a Care Order it is presumed the child/young person will remain in contact with their family unless the Court states otherwise.

Child Arrangement Orders

In April 2014 the Children and Family Act introduced Child Arrangement Orders to replace the previous Residence and Contact Orders. This Order directs:

- With whom a child is to live, spend time or otherwise have contact;
- Where a child is to live, spend time or otherwise have contact with any person.
- The person with whom the child is to live acquires parental responsibility, this will be shared with the birth parent.

Special Guardianship Order

A Special Guardianship Order provides legal permanence for children for whom adoption is not appropriate. It gives the Special Guardian parental responsibility and the power to take decisions on the upbringing and care of the child to the exclusion of all others (except a joint Special Guardian). Birth parent(s) retain a level of parental responsibility and the child cannot be adopted without their consent.

Culture and Language

Culture describes the way people live their lives. Culture is founded on many different factors, for example; memories, common experience, background, racial identity, religion, class, language and family attitudes etc. Culture is part of a child's life, identity and heritage. All foster carers should respect and value a child's cultural heritage.

Foster carers should be aware it is possible that a child whose first language is not English may be placed with them. Language is an important part of a child's identity and culture. Every effort should be made to preserve a child's linguistic and communication skills, otherwise they may lose a part of their culture and feel a sense of grief or loss. If you need more information about a child's cultural and linguistic needs contact your fostering social worker and the child's social worker and you will be supported.

Day Support for Foster Carers

As a foster carer you may choose to make informal arrangements under your Delegated Authority keeping both your fostering social worker and the child's social worker informed.

In specific circumstances, when informal arrangements are not possible, funding may be provided for foster carers to access day support from another foster carer for their Child, when your support network identified in assessment are unable to cover these (reasons should be outlined to your fostering social worker) the circumstances can include are:

- Carers attending training/conferences provided by the department
- Carers attending meetings/reviews in respect of the child
- Carers attending meetings/reviews in respect of another child placed
- Carers attending hospital appointments in respect of themselves/or another child placed
- In emergencies, for example if the carer becomes ill or suffers personal injury

Foster carers must discuss day support requirements with their fostering social worker prior to the arrangement taking place. Often other foster carers will be approached to provide day support, this can be arranged through The Agency and a standard allowance is paid.

Delegated Authority (Decision Tool available on Foster Carer Portal)

It is expected that foster carers will be given the maximum appropriate flexibility to take decisions relating to the children in their care, taking account of the placement plan. When a child is placed with foster carers the parent and/or social worker will agree the level of authority that is to be delegated. Foster carers should be given delegated authority to make day-to-day decisions regarding things such as health, education and leisure, unless there are particular reasons cited as exceptions within the placement plan as to why this is not the case. If you do not receive this you must contact your fostering social worker and inform them on the day of the child being placed or the following day. No Looked After Child should be placed without a placement plan outlining this delegation.

Foster carers can use delegated authority in the use of their support networks. These are individuals you will have identified within the assessment process and each person will have been interviewed to clarify the level of support they are willing to give to the foster carer and have undertaken a DBS check.

Deprivation of Liberty

The Deprivation of Liberty Safeguards (DoLS) were introduced in 2009 (with strong links to the Mental Capacity Act 2005 and Mental Health Act 2007). DoLS aim to prevent the unlawful detention of adults in hospitals and care settings (inclusive of foster care) who lack capacity to choose where they live and/or to consent to care and treatment. DoLS are compatible with Article 5 of the European Convention on Human Rights (the right to liberty and security of person).

The Supreme Court has now confirmed that to determine whether a person is deprived of their liberty, there are 2 key questions to ask, described as the 'acid test'

1. Is the person free to leave?
2. Is the person subject to continuous supervision and control?

Whether or not the person objects to the arrangements, and even though the arrangements may be considered to be in the person's best interest, are irrelevant. This has more recently been applied to a child in a foster placement where legal status was sought to enable the DoLs to be met via 'inherent jurisdiction', the only application the local authority could lawfully make and ruled that the care received by the child did in fact amount to a deprivation of his liberty." This is a very rare occurrence and in this instance the needs of the child were so significant that the court made this decision.

This now means that if a person lacks capacity to consent to the care and/or treatment arrangements, is not free to leave and is subject to continuous supervision and control, they are deprived of their liberty. The judgement also advises that a low threshold should be used in applying the 'acid test' given the vulnerability of people who are likely to be deprived of their liberty and the intention that the Deprivation of Liberty Safeguards should be protective of such people.

Dinner Money

School dinner money or the cost of a packed lunch should be paid from the foster care allowance for the Cared for child. Children and young people living in foster care are not eligible for free school meals. Please check with the child's social worker whether the child is receiving free school meals when placed with you. You as the foster carer must inform the school that the child is no longer eligible as he/she is in your care.

Disclosure and Barring Service – DBS check

The Disclosure and Barring Service check is undertaken to discover if a person has an existing criminal record in the UK. DBS checks can include 'soft information' where no criminal charges have been brought but where serious concerns have been raised.

The Agency must undertake a Disclosure and Barring Service checks on all foster carers prior to approval and then subsequently every three years. DBS checks are undertaken on all household members 18 years and over. Although rare it is important to note that- should an allegation against a foster carer be proven or remain a significant concern- the Local Agency have a responsibility to inform the DBS and they will decide if this warrants the concern to be added to the harm list within DBS. This would mean that in an enhanced disclosure this information would be visible.

Disruption of care / Unplanned ending

Unfortunately, even in the most experienced foster care placements there can be circumstances which prevent the placement from working and being in the best interests of the child or young person. This can lead to a placement breakdown or unplanned ending. Disruption is the word used to describe a placement which ends in an unplanned way or ends outside of the timeframe agreed.

A disruption may occur when the Children's Social Work team form the view that the placement with you is no longer meeting the Child's needs, or you decide that you are no longer able to care for the child. The child may also 'vote with their feet' and decide to leave the care arrangement. Whenever possible, when it is recognised that an arrangement may be coming to an end a plan should be developed to either look at continuing with the arrangements (through an additional support plan) or look at moving the child on in a planned and amicable way. Pre-disruption/stabilising meeting is likely to be held at this point.

Foster carers are expected to avoid ending care arrangements abruptly or in an unplanned manner. This means you need to discuss any concerns you have about a placement with your fostering social worker and maintain good communication with them about your thoughts and any difficulties that arise in placement. Do not allow situations to escalate without seeking professional advice and support.

It is important that foster carers work with the Childrens Social Work Team to move a child on to another placement when this decision has been made. Finding another appropriate placement can take a number of weeks and it is always good practice to ensure a period of introduction is arranged for the Cared for Child to meet the new foster carer and foster family to increase the chances of the new placement being successful.

When care arrangements end in an unplanned way, there can be strong feelings about how or why things went wrong. This can be an extremely difficult and upsetting time for all concerned and it can be a frightening time for the child. It is important to remain professional and objective to enable lessons to be learned by all involved. It is generally not acceptable for a foster carer to demand a child is removed immediately from the placement and in times of difficulty it is a good idea to take some time-out to consider the positive experiences for the carer and the Child and try with all concerned to work through the difficulties. A child would only be moved in such a situation if there were exceptional circumstances.

Where a care arrangement ends in an unplanned way the Fostering Service will make arrangement for a Disruption Meeting to take place. This meeting gives the opportunity for the reasons why the for the placement may have disrupted to be explored and for lessons to be learned for the future. It is important that foster carers attend these meetings if invited. Together for Children have a policy outlining the Disruption process.

Drug and Alcohol Abuse

Drug and alcohol abuse can be a problem for some young people. Young people can be tempted to take or experiment with drugs regardless of their home and social circumstances. Young people from a variety of backgrounds can become involved in drug taking and excessive use of alcohol. If foster carers are concerned that a child living with them could be using drugs they must contact the child's social worker and their fostering social worker to discuss these concerns.

It is often difficult to tell if a young person is using drugs, particularly when they are taken occasionally.

Some possible indicators of drug abuse:

- Sudden changes of mood from happy and alert to sullen and moody
- Unusually irritable
- Loss of appetite
- Drowsiness or sleepiness
- Increased evidence of telling lies or furtive behaviour
- Unexplained loss of money or belongings
- Unusual smells, marks on the body, clothes or around the house

Of course, many of these signs can be associated with normal issues of growing up and adolescent behaviour and development. If a foster carer has any concerns then it is important to speak to the Child's social worker and your fostering social worker. Further specialist training is available on drug and alcohol misuse to support foster carers in this area of work.

Where foster carers have some concerns that young people in their care may be involved with drug or solvent abuse, they should discuss this with the young person's social worker and seek advice. We know that many young people will have experimented with drugs in some form or another before they leave school. Specific advice should be sought if there is particular cause for concern regarding use of drugs, excessive alcohol consumption and/or solvent abuse.

The attraction of drugs includes the excitement of the sensation, the alternative they offer to alcohol and the escape they can provide from feelings of inadequacy or low self-esteem. There is often peer pressure to join in. It is important that young people understand the different reasons why drugs are taken and what are generally considered to be appropriate and inappropriate uses.

There are several agencies and organisations which can help the young person with such difficulties whilst offering further support to the carer. Training will also be available to carers of older children and teenagers along with updated information in relation to County Lines.

Alcohol

Although many people do not think of it as a drug, alcohol can be equally damaging to health and wellbeing. It is important to talk to children and young people realistically and in context about the dangers of alcohol, especially when taken in large quantities. This includes both the potential effects on health and the changes that over indulgence will make to behaviour and judgement.

Discussing the issue of alcohol is especially important given the associations often made in the media with uninhibited behaviour. A high proportion of teenage mothers claim they were drunk when they conceived. An even higher proportion of young people claim they lost their virginity when drunk – and regret it. The use of alcohol within your home should be recorded within the child's Safe Caring Policy. Further information regarding alcohol and the law can be found on the The Fostering Network website.

Emergencies and assistance

If you think someone is "high" on drugs keep calm and patient and try to talk to them about how they are feeling. Do your best to bring them down by talking through, gradually and slowly, where they are and who you are. Sometimes it is best simply to stay with them and stay alert. Any criticism or consequences can wait for later.

In an emergency, make sure that the child or young person has plenty of fresh air, turn them on their side so they will not choke or vomit, do not leave them alone and get someone else to dial 999 to ask for an ambulance. Collect any tablets or other substances that might have been taken and give them to the ambulance driver/paramedic. Ways of helping young people with drug abuse include talking through the issues, teaching them to care for and value their health and their bodies and getting them to think about other activities or groups of friends which could provide different forms of relaxation or entertainment.

Eating Problems

Children and young people have very different eating habits and preferences. Some children will have big appetites whilst others may be reluctant to eat much at all, both of these can be common at the start of a placement when the child may be feeling scared and insecure.

As the child settles in your care placement progresses you will get to know the child or young person more and you will support them in eating a healthy balanced diet. However, you need to be aware that some eating problems are serious and can have a damaging effect on physical and emotional health. The most common of these eating disorders are Anorexia Nervosa, Bulimia and Compulsive Eating Disorder. Eating disorders can be linked with emotional well-being and control.

If you have any concern about the eating habits of a Looked After Child you should discuss these with the child's social worker and your fostering social worker who will both advise you on any action to take which may be inclusive of Children and Young Peoples Services (CYPS).

Anorexia Nervosa

People who suffer from Anorexia Nervosa have an extreme fear of normal body weight and feel fat, even when they have lost so much weight it is obvious to others. They may starve themselves by only eating tiny quantities of food. Some angrily resist attempts to get them to eat or will pretend to have eaten when they have not.

Bulimia

This tends to affect slightly older people although adolescents do suffer from it. People with Bulimia gorge themselves with food 'binges' and then make themselves sick to get rid of the food. They also may take large doses of laxatives. They may not look overweight or underweight, which may make their eating problem difficult to detect.

Compulsive Eating Disorder

People who eat compulsively consume much more food than their bodies need, or use food to comfort or distract them. They may become overweight which can lead to serious medical issues for the future. Eating problems may show during adolescence and should be taken seriously. As well as having an adverse effect on a young person's physical health, eating disorders are often a sign of significant emotional problems.

Eating disorders tends to affect girls more than boys, but it is important to remember that boys do suffer from them too. It is not always easy for foster carers to spot the signs of eating disorders but if you have any concerns about the eating habits of a child in your care then you should contact your fostering social worker; the child's social worker or the health professional involved with the child to discuss the matter – ensure the child's social worker is informed of the concern and any proposed treatment.

Education

It has been documented that the educational attainment of Cared For Children is well below children who are not Cared For. Some of the significant disadvantage is a result of changes in placement and often changes in school. This lack of consistency is a major factor impacting on poor educational attainment and can have an impact later and into later adult life. Foster carers have much to do in advocating for the children in their family. As a foster carer you will have a vital role to play acting as part of a committed team around the child. Carers should be involved and consulted in all aspects of a child's education and should appeal against decisions that are felt not be in the best interests of the child.

Attending school is an important part of everyday life and can provide a point of stability for Looked After Children who have had their lives disrupted and live apart from their families. It is vital where possible, for the child to remain in their existing school where they have an established network of friends and support. Foster carers will be required to transport the child to and from school and any difficulties should be highlighted at the Placement Planning and Care Planning Meetings. It is not acceptable for a Cared For Child to be out of education. They should receive priority action by all involved to support their education.

Foster Carers Role in Education

Carers play an essential role in supporting children in care with their education. It is crucial that a Child's educational arrangements are prioritized and discussed with the child's social worker and the fostering social worker prior to placement. Carers should highlight any difficulties the Child in their care may be experiencing at school or with their education. It is important that the carer maintain good links with the school and the child's social worker in regard to the child's education.

Carers should be responsible for:

- Recognising the educational strengths and limitations in regards to each Cared For Child.
- Keeping school informed of changes and emerging problems
- Helping the child to express their concerns or aspirations and advocating on their behalf
- Encouraging the Looked After child to develop their talents and recognize their achievements no matter how small
- Responding quickly to requests from school for discussions or meetings

Carers should ensure attendance at school by:

- Establishing clear expectations of attendance, punctuality, uniform and completion of homework
- Ensure that attendance is promoted and supported. If needed the child should be taken to school by the foster carer
- Promote and encourage friendships at school

Carers should provide an appropriate learning environment with:

- A quiet area to do homework
- Time for homework
- Books, pens, paper and other resources
- Learning opportunities outside the home e.g. visits to libraries, museums, parks
- Understanding of the child's ethnicity and background and consider these when making plans

Carers should take a positive interest in the Child's education by:

- Attending open evenings
- Supporting school policies on discipline and dress
- Taking an interest in the daily activities of school
- Completing homework diaries etc
- Supporting homework by reading with the Looked After Child, offering advice and making sure the child completes set work
- Supporting school events
- By rewarding achievement no matter how small

Personal Education Plans (PEPs)

You will hear PEPs mentioned a lot. PEP's should ensure that every **Looked After** Child receives access and support to services. They contribute to stability, minimize disruption and broken schooling, identify particular and special needs, establish clear goals and state who is responsible for achieving them and act as a record of progress and achievement.

The child's social worker is responsible for initiating the PEP but it is very much a joint plan with the designated teacher, foster carer, cared for young person and any other person involved in supporting their education. Once initiated these should be held termly.

It is required that foster carers attend PEP meetings as this will ensure that there is understanding of the any issues and regular communication between home and school. Carers should be given copies of completed PEPs.

Exclusions

If a child is excluded from school for a fixed period it is the duty of the school to inform the carer immediately and put in writing the reasons for the exclusion and the number of days the exclusion is for.

Whilst the Child is excluded the school must:

- Provide appropriate work for them to do at home
- Put in place measures to try and support the child to avoid future exclusions
- Provide carers with the name of a contact person should they wish to discuss or appeal the exclusion
- Be clear about the length of the exclusion and the date and time the Looked After Child should return to school/education.

If the exclusion is permanent the school must:

- Inform the carers in writing within one day clearly stating the date the exclusion took place
- Give details of previous warnings or fixed term exclusions
- Provide carers with the name and number of the Local Education Authority Advisor on the exclusion process

Valuing and supporting the education of a child in care is one of the most important contributions a carer can make because it is about investing and caring about the child's future and recognising that education is their passport to better chances in life. Education support to Looked After Young People is provided by the Virtual School.

Emergencies

If an emergency arises- for example if a child or young person placed with you has an accident, is missing, has involvement with the Police, or any incident which you feel requires urgent attention- then you should contact the social worker immediately.

During office hours you should speak to the Child's social worker and if they are unavailable speak to a team manager. If this is not possible speak to the duty social worker. If the area office is closed then you should contact the Emergency Duty Team.

Enuresis - Nocturnal

Any child who has suffered a traumatic experience may begin to wet the bed. A child placed with foster carers will almost certainly feel distressed and it is important to be patient and allow the child time to settle and feel safe and secure.

Displaying annoyance or attempting to punish a Looked After Child will merely add to their distress and may make the issue worse. Rewarding the child for success will work better than punishment for failure, but do not put the child under pressure to 'be good'.

Check if there are any practical barriers, such as the child being afraid to leave their bedroom at night to find the toilet. If the situation continues the foster carer should discuss with the Child's social worker or the foster carers fostering social worker. Persistent bed wetting could be an indication of another problem and a referral to a specialist service may be appropriate.

Equalities

The Agency has an Equalities Policy which will inform practice in the areas of foster care recruitment, child placement and foster carer supervision. In compliance with Equalities Policy and diversity issues The Agency and foster carers will need to understand and actively promote of the following:

- A detailed exploration of applicants' understanding of diversity must be an integral part of the foster care assessment and approval process for foster carers.
- All children need a positive identity, therefore sensitive and careful matching for the child with a foster family needs to ensure that the proposed placement will be able to promote his/her culture, religion, language and can therefore help the child build a positive sense of their own identity.
- Sibling groups should be kept together whenever possible as determined by the sibling attachment assessment.
- Foster placements for children from black and minority ethnic groups must ensure that there are clear plans for the children and a clear understanding from the carers of the need to encourage and celebrate their identity and cultural requirements. Foster carers should provide multi-cultural toys, books, cards, specific foods. Information for the carer can be obtained from the fostering social worker, the child's social worker, from training and from research on the internet.

Family Time (Contact)

Contact (now called family time) with birth parents and significant people has a crucial role in the care plans of Children and young people in foster care. The law clearly states that Local Authorities (in this case Together for Children) have a duty to promote contact between Children, their parents, relatives and other people who are important to the child.

Clear expectations on promoting family time are also outlined in the National Minimum Standards for Fostering: foster carers are expected to work closely with the local authority and promote family time for children with their birth families. Although foster carers have a responsibility to promote family time, the role of the child's social worker is essential in terms of providing foster carers with the necessary information including any assessment of risk for those involved in the family time.

Family time is really important for children and young people who may be at risk of losing their sense of identity and specific aspects of their culture. Children may be placed with foster carers who are not a cultural match and they will need to maintain links with family, friends and community so that their identity is encouraged and valued.

Research suggests that maintaining links between children and their families increases the possibility of children returning successfully to their family. It also suggests that family time enhances children's sense of identity as well as helping avoid disruptions in foster placements. Promoting and facilitating family time is a key task for foster carers and clear arrangements in regard to family time should be discussed, agreed and recorded prior to the child being placed and at the Placement Planning Meeting so that foster carers are clear what will be expected of them. Regular care planning meetings are held at least once in-between Children's reviews and issues can also be discussed in this forum.

Family time is usually, but in some circumstances does not have to be, face to face and can take the form of phone calls, exchanging letters, photographs or cards from holidays or special occasions. Children living away from their birth families often suffer feelings of grief and loss and positive steps should be taken to re-establish relationships if it is appropriate for the child and agreed within their care plan.

Problems with Contact/Family Time

Experienced foster carers will know that contact can have its difficulties. In some specific cases it may be clear that family time will not benefit children or could be damaging, depending on the risks involved. This is not common but the Family Law Courts have the power to restrict family time if they decide it is not in the child's best interests.

Family time may also cause distress for children and foster carers are often the people who have to deal with this when a child feels confused or disappointed. This can be emotionally difficult for foster carers, who feel frustrated that the family are letting the child down.

Children are often move to foster carer in an emergency when the family is experiencing overwhelming difficulties and loss of control in their lives. Parents may feel guilty or angry that

their child is living with foster carers if this is against their wishes and they may resent having to comply with plans they do not fully agree with. These reasons and feelings can lead to parents behaving in ways which appear inappropriate during family time. They may feel very emotional, give the children unrealistic messages or promise gifts.

Dealing with the problems of family time arrangements is often hard to manage but understanding the parent's experiences can help to make sense of the situation for the child as well as the family. Planning Meetings involving the foster carers and parents prior to or soon after the child is placed can help parents deal with their fears and clarify how arrangements can work best for the child. Foster carers can make invaluable contributions to the plans for children by recording behaviour of children in relation to family time. This may identify patterns that can contribute to decision making which may otherwise go unnoticed. It is important that family time is discussed in the foster carer's formal supervision with the fostering social worker so that problems and issues can be identified, shared and hopefully resolved.

First Aid

Fostering household should have a basic first aid kit available to deal promptly with minor injuries. It is a requirement that foster carers undertake first aid training. Please ask your fostering social worker to book you on this training.

If a child who is placed with you has particular health or development needs, the child's social worker will be able to provide information and give advice on specialist advisory or support groups for parents and carers. This should be discussed at the Placement Planning Meeting.

Foster Care Agreement

All approved foster carers are required to enter into a written agreement with the Agency. The agreement constitutes a statement of responsibilities, requirements and expectations of the partnership between The Agency and the foster carer. The foster carers are expected to comply with the outlined terms contained within the Sunderland foster carer agreement – this agreement is reviewed following the carers review or should a change of terms of approval take place.

The responsibilities of the foster carer are:

To give immediate written notice with full particulars to The Agency of:

- Any intended change of address
- Any change in membership of your household
- Any change in your personal circumstances
- Any change or any events which affect your capacity to care for the child placed with you
- Any criminal convictions or cautions or criminal charges pending at any time following your approval as a foster carer, involving you or someone in your household
- Any request or application by you, or any member of your household, to foster or adopt children

- Any intention by you to become a registered childminder or day care provider

Foster Carers must not administer any physical punishment to a Cared for Child. Advice is available from the child's social worker and your fostering social worker to help with alternative strategies.

Foster Carers are expected:

- To comply with the terms of the Child's Placement Plan and Care Plan.
- To provide and safeguard the child's welfare and treat him/her as a valued member of your own family
- To notify the social worker immediately of any serious illness or occurrence that affects the Looked After Child/young person placed with you.

Foster Carers Consultative Group

This is group of foster carers, Team Manager, and other members of staff from the Fostering Team who meet to discuss fostering, current practice, any developments within the Fostering Service and any issues which have arisen. The Consultative Group then feeds back information to the service and other foster carers to make positive changes to the service provided for Looked After Children in foster care.

There are also regular coffee mornings arranged to which all foster carers are invited. These are informal gatherings where staff members and foster carers can chat and any arising issues can be raised. Your views on the service and service delivery are welcomed to inform our continuous improvement. Should you wish to be part of the Consultative Group, please contact your Fostering Social Worker.

Fostering Panel

The fostering panel is a group of appointed people who make recommendations to the Agency Decision Maker in respect of the following:

- The approval of new foster carers and friends, family and connected carers, including the terms of approval eg, the type of placement, or whether the approval relates to a named child, or if there has been an exemption to the usual fostering limit.
- Consideration of all first Foster Carer Reviews
- The termination of registration of foster carers who are no longer suitable to act as approved foster carers.
- Monitor the reasons for the resignation of foster carers.
- To consider reviews where the carers' approval status needs to change significantly.
- To consider the issues and the approval status where there has been a serious allegation made against a carer.
- To offer guidance or advice on specific issues relating to the assessment of potential foster carers.
- To monitor compliance with the National Minimum Standards and Regulations in foster care.

- The Panel role includes making recommendations to the Agency Decision Maker on the approval or rejection of prospective carers.
- Panel has a quality assurance function in which it may consider practice issues which informs service development.
- Consider permanence for children in Long Term Foster Care.
- Emergency Panel meetings may be convened between monthly Panel meetings in order to avoid delay for Children.

The Agency Responsibilities

Support

As an approved foster carer you are entitled to advice, information, supervision and support. You will be allocated your own fostering social worker from within the fostering team who will help you in your role as foster carer for The Agency

Training

All approved foster carers are expected to undertake relevant training as required. You will be provided with a number of training courses to assist you to expand on your knowledge and skills to enable you to care appropriately for a child/young person who is placed in your care.

Some foster care training is mandatory and our annual Foster Care Training Programme covers essential training that must be satisfactorily completed by all approved foster carers, this includes a foster carer's partner if they live in the same household. Evidence of appropriate training for foster carers is a requirement set out in legislation and detailed in the Fostering National Minimum Standards and Regulations.

Placements

A Placement Plan will be made for each child placed with you, this will be inclusive of delegated authority and day to day arrangements required to care for the child placed.

Complaints

The Agency has its own complaints procedure. As a foster carer you are entitled to use this if you are not satisfied with any aspect of the service. It is recommended that you discuss any issues you may have initially with your fostering social worker or with a Manager in Children Social Care.

Review of foster carers

Your approval as a foster carer for The Agency will be reviewed annually and you will have the opportunity to contribute to your review either in writing or face-to-face with an Independent Reviewing Officer. Your first review as a newly approved foster carer will be completed within the first year and presented to the Fostering Panel for their consideration. Reviews are subsequently undertaken by the Independent Review Manager.

Fostering Standards (Copy of NMS 1-12 are held on the Foster Carer Portal)

The National Minimum Standards (NMS) for Foster Care consists of regulations, which are mandatory and minimum standards which must be taken into account when managing and developing the foster care service (Standards 1-12 relate specifically to the foster carers care). The National Minimum Standards form the legal framework for all The Agencies including Local Authorities and Independent Fostering Agencies.

National Minimum Standards for Foster Care are issued by the Secretary of State. Ofsted will take the National Minimum Standards into account when inspecting The Agencies.

Hair Care

Delegated Authority gives foster carers more flexibility in areas of personal care, including taking children for a haircut. It still remains good practice to check with the child's social worker that changing a hair style of a child would not create undue distress to the child's birth parents or family. This can be a delicate area and carers will be expected to use their discretion and experience. If in any doubt, consult with your fostering social worker.

Carers of children of Afro-Caribbean origin should be competent and knowledgeable to take appropriate care of their physical needs including hair care. Carers will need to know of appropriate hairdressers and barbers. Hairdressers and chemists will advise on a range of appropriate products suitable for skin and hair care.

Health

The Agencies have a duty to promote the physical and mental health and wellbeing of children. In conjunction with the children's social workers, they must make sure that Cared For Children placed with you are registered with a GP and see a dentist regularly, as well as having support including special equipment required for any particular health needs.

Foster carers will receive a summary of any health concerns identified following the Child's initial medical examination. How the carer will address these needs will be incorporated within the care plan – the carer will contribute to this plan. This planning is important to ensure the carer can provide appropriate care. This information should be provided by the child's social worker. It is important that as a foster carer all medication administered to a cared for child is in accordance to the prescription and a record is made each time the medication is given. Foster carers should record administering prescribed and non-prescribed medication.

When a child moves to foster care, the social worker must make sure that the foster carer is given appropriate authorisation via the Placement Plan to administer prescribed and non-prescribed medication and to consent to other medical and preventative treatment as written in the care and placement plans. Foster carers should encourage children to lead healthy lifestyles and to take part in positive activities which contribute to physical and mental health.

Holidays in the UK

It is an expectation that Cared For Children will experience holidays and outings whilst in foster care. A Looked After Child should be treated as a member of the foster family and be included in family holidays. To support this holiday allowance is provided. In some circumstances permissions is needed before a child can be taken away from the foster home for periods of time. Therefore, before foster carers make any holiday or trips away to include a child/young person they should contact the child's social worker to discuss their plans. Children or young people should not be taken out of school in term time for holidays.

Holidays Abroad

If foster carers are considering a holiday abroad with a Cared For Child, the carer must give the child's social worker plenty of notice of their plans. The particular legal status of the child will need to be considered by the social worker and permission may need to be sought from the parents or from the Court which can take some considerable time. Obtaining a passport can also be a lengthy process so it important to discuss your plans in good time so that the child's social worker can embark on making all the necessary arrangements to allow the child to leave the UK.

A passport should be obtained for every Cared For Child. Together for Children will pay the cost of the child's passport and a letter of delegated responsibility will also be needed when taking a child in care outside of the UK. For holidays abroad a risk assessment must be completed jointly with you, the fostering social worker and the child's social worker.

Immunisation

Children living in foster care must not be given inoculations that have not be discussed within care planning or excluded within the Delegated Authority. The child's social worker must always be informed if inoculations are being considered for the child/young person.

Information and Communication Technology

Computer, access to the internet and mobile phones are a key part of young people's lives. They are essential for keeping in touch with friends, for obtaining information and for fun. Foster carers have an important role to play in helping and encouraging young people to use communication technology in the safest way. Foster carers do not require an extensive knowledge of communication technology to be able to help. Everyday parenting skills demonstrated by sharing an active interest, supervision and developing the young person's ability to keep safe can be very useful.

The Agency encourages foster carers to support and assist children in developing skills in communication technology whilst taking sensible precautions to protect them from potential harm and exploitation in the rapidly changing field of technology. Training is available on the foster carers training programme

Dangers of Communication via Technology

- Contact by phone or online with people who may wish to harm children and young people
- Inappropriate and potentially harmful material
- Exposure to unsuitable advertising, invasion of privacy and identity theft
- Exposure to risks of cyber bullying or phone bullying

Safety Measures and Boundaries

- Time limits on computer usage should be agreed with the young person Computer use should not be a substitute for social interaction or physical activities
- Appropriate internet security must be installed on the computers
- Foster carers must supervise computer use in their home to avoid access to inappropriate/harmful material or people

Insurance

Foster carers should insure that they have sufficient household and car insurance and that their policies recognize their status as foster carers. This means foster carers should inform insurance companies that they are approved foster carers, omitting to do this would render your insurance policies invalid.

Leisure Activity

It is important for children to have access to a wide range of leisure activities, which helps them to enjoy their interests and develop self-confidence. Foster carers should encourage children to participate in activities in the same way that any reasonable parent would. Foster carers must be aware of the authority that they have to make decisions on activities, leisure interests and social events, and these must be included in arrangements for delegated authority in the placement plan.

Life Story Work

It is important that Cared For Children and young people have a good understanding of their background and foster carers will help this process by engaging in the completion of Life Story Work and Life Books. Life story work attempts to give back some of the past to children separated from their family of origin. It involves gathering together information and memories about the child or young person's life. Doing the work is what is important rather than the end product, but having something tangible can help preserve memories.

Some suggestions for the content of a child's Life Story Work Book:

- Birth Certificate or a copy, information about the child's birth, photograph of the hospital where the child was born
- Photograph of the child's birth parents, siblings, grandparents, extended family and any details and information available
- An explanation of why the child is separated from their family
- Information about visits with birth families
- Photographs of previous foster carers and previous schools
- Photographs of favourite activities, significant events, holidays, birthdays, Christmas
- Photographs with friends

- Anything else that is important to the child

Life Story Work is very important to the child and will help them in childhood and in later life gain some understanding of their identity and background and help them understand and recall their life in care. As the child's carer it is essential that you keep items for the child that can later be used for life story work, such as mementos of special occasions, photographs (including school photos) special clothes or toys.

Lockable Space within the home

As foster carers you will be required to store safety documentation for the child and for yourself. Please ensure that you have a safe and lockable space within your home to keep documentation safe. A lockable drawer or cupboard would be an appropriate safe space.

Matching

Cared For Children should be matched with an appropriate foster carer capable of meeting their identified needs. They should feel welcomed into the foster home, treated and valued as a member of the family, and included in the every-day life of the family. Cared For Children should when appropriate, leave a care arrangement in a planned and sensitive manner which makes them feel valued.

If there are already children placed with the chosen foster carer then the consent of the children's social workers has to be obtained before making the new placement. The purpose of this is to consider if it is suitable for all the children to be placed in the same household, and whether the foster carer will need any additional support to meet all their needs.

A placement should not be proposed unless it can be reasonably expected to meet the child's assessed needs, and the impact on other children has been considered. In an emergency a child can be placed with a foster carer outside of their terms of approval, but for a maximum of six days. This is only allowed exceptionally, in unforeseen circumstances. The child must always be moved to a more appropriate placement within six working days. There may be situation where a match is made for siblings which might require a carer to go 'over numbers' this is an exceptional circumstance and can only be considered with the Agency Decision Maker's agreement to a fixed period exemption – this usually relates to the requirements of the placement.

Medical Examinations

A child placed in foster care should have a medical examination prior to their first review. This will be arranged by the child's social worker. Cared for Children are examined by a Community Paediatrician at the children's centre. Following the request for the examination the foster carer will receive an appointment in writing and the foster carer will be expected to accompany the child at the examination. The outcome of the examination will be sent to the child's social worker who will discuss this with the foster carer and the child where appropriate.

Thereafter a child under 5 years must have a medical examination with a written assessment at six monthly intervals. Children over the age of 5 years must have a medical examination or a

health assessment annually. Foster carers will use their Delegated Authority in signing consent for medical or dental examinations or treatment. Foster carers must have the Delegate Authority section of the Placement Agreement signed by the person with parental responsibility. This would usually be a parent of a child or a Head of Service giving their agreement if required to medical treatment. The Placement Plan with Delegated Authority should be given to the foster carer when the child first arrives at the foster carer's home

Foster carers are expected to organise non-emergency medical treatment, including dentists and opticians, with the permission of the person with parental responsibility. If the child needs emergency treatment then the foster carer should make the necessary arrangements and then inform the child's social worker, their fostering social worker or a social work manager. (see Accidents). If the child requires urgent treatment the attending Doctor will generally treat the child first and then afterwards deal with the issue of consent. It is important that the foster carer has the document with Delegated Authority available at all times.

Medication Administration

When a child arrives at the foster home for the first time, the foster carer should find out from the child's social worker if the child is taking any medication, what it is, when it is taken, the dosage and if the child suffers from any allergies. Any medication either prescribed by the child's GP, or non-prescribed bought and administered by the foster carer, must be recorded and signed for within the foster care records. This administration of medication will be monitored by your fostering social worker at supervisory visits. This is a legal requirement under fostering regulations.

All medicines in the foster home taken by children or adults must be securely locked away out of the reach of children. It is to be remembered that children and young people of all ages become ill and can suffer overdose, serious complications and sometimes death when they have found and taken unsecured medications.

Mockingbird

The Fostering Network's Mockingbird programme is an innovative method of delivering foster care using an extended family model which provides sleepovers and short breaks, peer support, regular joint planning and training, and social activities. The programme improves the stability of fostering placements and strengthens the relationships between carers, children and young people, fostering services and birth families. TFC Fostering launched their first Mockingbird Constellation on 17.05.2021 to coincide with TFC's Foster Care Fortnight events. Prior to this launch the Hub home Carers for this constellation and the proposed second constellation completed training with Fostering Network as well as additional training with the Solihull Approach so that they can also be trainers of this course.

Missing from Care – (Absent Definition and Process for Carers and Young Person Missing Protocol SSCB can be located on the Foster Carer Portal)

If a child is missing from care you must contact the child's social worker or their team manager immediately. If it is outside of normal office hours you must contact the Emergency Duty Team and your local Police Station. Be prepared to give a clear description of the child and provide a photograph. You will also need to contact your fostering social worker.

National Minimum Standards for The Agency – available on the Foster Carer Portal

These standards outline the minimum expectation of foster carers (1-12) and The Agency in conducting their day to day care of Looked After Children and complement the Fostering regulations.

Next Steps

When children reach the age of 15 years the key responsibility for their care planning is transferred to the Next Steps Service.

Preparing for Independence

From a child becoming Cared For, foster carers develop children's life skills to help them move to independence. In Sunderland we advocate the principles of the preparing Looked After young people for adult Life in place to support young people in living independently and fulfilling expectations.

Objectives:

- Reduce care leaver homelessness
- Maximise potential to live safely in a home for life
- Provide a planned achievement-based route to independence
- Improve access to universal services
- Promote positive self-regard via home-based learning
- Enable young people to identify, apply and maintain employment, education and training

Young people aged 16-21 years of age who are Looked After or eligible for leaving care services and:

- Are unable to reside within their existing placement (in staying put)
- Are homeless or in unsuitable accommodation
- Have a plan for independence via supported living agreed at a statutory review

Foster carers are offered support and training to complement their role in supporting the Preparing for Independence for cared for young people; this will be introduced when the child is 13 years of age. Foster Carers are encouraged to support young people up to the age of 21. (Staying Put Policy and Guidance is available on the Foster Carer Portal)

Nursery Provision

Children in foster care who are aged 3 or 4 years old will be able to receive 30 hours free childcare, if the following criteria are met:

- Accessing the extended hours is consistent with the child's care plan; and
Where there is a single foster parent family, the foster parent is engaging in paid work outside their role as a foster parent; or
Where there are two foster parents in the same fostering household, both are engaging in paid work outside their role as a foster parent.

Further details regarding this entitlement are available in the Department of Education letter that can be accessed on the Foster Carer Portal. It is also essential that nursery provision is discussed with the child's social worker and your fostering social worker.

Ofsted

Ofsted is the organisation responsible for inspecting services by Together for children and our Independent Fostering Agency. Ofsted inspects and evaluates fostering and other services for children in care, against the single assessment framework and evaluation criteria which is inclusive of National Minimum Standards and Fostering Regulations among other legislative requirements.

You can contact Ofsted by:

Email: enquiries@ofsted.gov.uk By telephone: 0300 123 1231

By post:

Ofsted
Piccadilly Gate
Store Street
Manchester
M1 2WD

Parental Responsibility - (PR)

Parental responsibility means all the rights, duties, responsibilities, powers and authority which by law a parent has in relation to his/her child. Birth mothers automatically have parental responsibility alongside some fathers. In some circumstances other people may acquire parental responsibility.

Birth parents will retain some level of parental responsibility even when their child is Looked After. Birth parents will only lose their parental responsibility rights when a child is formally and legally adopted. As a foster carer you do not hold parental responsibility for a child in your care.

Payments

Foster Carer Support, Training and Payment Scheme April 2019 is available on the Foster Carer Portal.

Foster carer allowances are paid into the carer's bank or building society account weekly in arrears. Child age-related allowances are non-taxable since they do not contain any element of reward to the carer. Approved foster carers are also paid a professional fee which is determined by the level of training attended. The status of the foster carer is self-employed and you do need to register with the tax office find out more at Foster Carers and HMRC. All foster carers are provided with a P60 at the end of each financial year.

Further information and e-learning regarding tax allowances for foster carers can be accessed at: <http://www.hmrc.gov.uk/courses/syob2/fc/index.htm>

All approved foster carers have access to a helpline provided via their Membership of Fostering Network, this helpline can also be used to provide advice and guidance regarding self-employment and tax.

Foster carers cannot claim tax relief, child benefits, income support or free school meals for children in their care. A child with a disability may be entitled to Disability Living Allowances. (Disability Living Allowance Guidance can be found on the Foster Carer Portal). This allowance is payable in addition to the child age related allowance. If you consider the Child For Children in placement with you is entitled to this benefit, discuss the matter with the child's social worker before approaching the Benefits Agency. DLA should be used to enhance the quality of life for the particular child/young person and foster carers need to keep accurate accounts of all expenditure from this allowance. These accounts should be available to be seen by your fostering social worker.

If you have any queries about allowances or if you think you have been under or over paid you should contact your fostering social worker as soon as possible to enable the necessary adjustments to be made. Any underpayments will be reimbursed and any overpayments deducted at the earliest opportunity. It is important that foster carers check the payment of allowances to avoid the error of under and over payments becoming a problem.

Placement Plan

Every Cared For Child must have a Care Plan which includes a placement plan. Placement plans are the key to making sure that everyone concerned is clear about the foster carer's role as part of the team around the individual child. The Plan outlines how the day-to-day parenting tasks will be shared between the carer and the team.

The placement plan has to be written before the child is placed with the foster carer, unless this is not 'reasonably practicable', in which case it must be drawn up within five working days of the start of the placement. If a child is placed in an emergency it may not be possible to prepare the placement plan in advance, but it is not acceptable to fail to draw up a plan if the placement has been identified in advance.

Care Planning Placement and Case Review Regulations 2010 Schedule 2, spell out in detail everything that the placement plan must cover – **Key elements are:**

- How the child's day-to-day needs will be met
- Arrangements for health and education
- Arrangements for the social worker to visit
- Contact arrangements, including any decisions to refuse contact
- Arrangements for delegating authority to the foster care
- The name of the child's independent review officer.

Play, Stimulation and Toys

Play is vitally important to any child's development, and is one of the ways that young children learn and are stimulated to develop their intellectual skills. Play needs objects, space, companionship and time. Young children are stimulated and encouraged by parents and care givers. As children grow they become less reliant upon parent and peers become more involved and play patterns change according to age and maturity.

Some children who are placed in foster care may not have experienced any stimulation or positive encouragement. These children may have little incentive to explore or to play, they do not see their world as an interesting place where fun is enjoyed and skills can develop. Their understanding of the physical world may be limited compared with their peer group, and the child may not know how to relate or communicate with others appropriately or conform to expected behaviour.

Children whose early years have been marked by neglect may be of average intelligence but can arrive at infant school ill-equipped to cope, or unable to pay attention. The early life experiences of many children in care may have a significant impact upon their ability to concentrate and learn. Their play and interaction with other children may also be affected and they may be withdrawn, unable to share or communicate with other children and adults.

Research has shown that these children can benefit from one-to-one interaction involving play, affection, conversation and simple rewards for tasks completed. This type of attention can lead to a significant improvement in school performance and eventually can overcome or compensate for early years trauma and experiences. This is not an easy task and will take time, care, kindness, understanding and patience from foster carers to help the disadvantaged child achieve. All achievements no matter how small should be celebrated.

Foster carers have the opportunity to help children in their care by conversation and play. It does not require expensive toys or equipment to stimulate a child, in fact often simple household items can encourage a child to use their imagination. For children in care what is most important is that they are given caring, affectionate attention which they may have previously not had.

If you are unsure or concerned about a child's skills in this area or if you feel that child needs some special toys or equipment then contact your fostering social worker who will be able to advise you in this matter. It is good practice for all carers to register at a local Children's Centre for advice and support.

Pocket Money

Pocket money for the child in care is included in the foster care allowance and is therefore administered by the foster carer. The foster carer should assist the child in saving regularly by opening up a bank account for them. All Looked After Young People have a junior ISA.

Pocket money is for the child to choose how to spend, and should not be used to pay for regular entertainment, leisure activities, clothes or personal items, unless the child or young person chooses to buy more out of their own choice.

From the outset of placement, the following weekly pocket money rates are the minimum expected for looked after children:

Under 3 years	No pocket money	11 years	£5.50
3 years	£1.00	12 years	£6.50
4 years	£1.00	13 years	£7.00
5 years	£1.50	14 years	£7.50
6 years	£1.50	15 years	£8.00
7 years	£2.50	16 years	£9.00
8 years	£3.00	17 years	£10.50
9 years	£4.00	18 years plus	Not applicable
10 years	£5.00		

Qualifying Determination

This is where The Agency is considering not to 'approve' a prospective foster carer who has progressed beyond stage one to stage two of the assessment (when a brief report is presented to panel) or feels a foster carer is no longer suitable to foster or wishes to vary the foster carers approval status without the foster carers agreement.

In the case of receiving a qualifying determination that they disagree with the prospective and existing foster carers can make representations to The Agency or they can ask the IRM (Independent Review Mechanism) to review the situation. However, foster carers cannot do both.

Radicalisation

The Government has defined extremism in the Prevent strategy as:

“...vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces.”

There are a number of offences that can be considered when dealing with violent extremism. They include offences arising through spoken words, creation of tapes and videos of speeches, internet entries, chanting, banners and written notes and publications.

Most children and young people do not become involved in violent extremism. Numerous factors can contribute to and influence the range of behaviours that are defined as radicalisation and extremism. Therefore, in many cases interventions identified through the safeguarding process and Channel process may not appear to be specific under the threat of radicalisation / extremism. For example, they might relate to other needs of the individual such as in respect of mental health support, housing, relationships, offending behaviour or drug and alcohol issues. There may, however, sometimes be a need for specialist interventions in relation to de-radicalisation and disengagement and the appropriate referrals should be made at this time, either by safeguarding services to Channel, from Channel to safeguarding services or both / either to other specialist services. It is anticipated that any case going through the Channel process will give due consideration to safeguarding children and young people and the appropriate referral made.

Records

Records are kept on every Looked After Child and on every foster family. These records are separate from the records foster carers are asked to keep.

Records – foster carers

Fostering social workers record information about foster carers which will include a copy of their assessment and approval, all relevant checks and references and foster care reviews. There will also be a record of all the children living with the foster carers. If the foster carer wishes to see their records they should discuss this with their fostering social worker. Contact your fostering social worker about access to records if you wish to see your file.

Records – the child

All Cared For Children will have a file and a complete set of records which will be kept up to date by the child's social worker. When a child is living with a foster carer, the foster care must receive a copy of the following information from the child's social worker:

- Placement Plan including Delegated Authority – at the point of placement.
- Agreement of day to day arrangements – within one week of placement
- Care plan – within 5 days of placement.

As the placement progresses the foster carer will receive copies of reviews they have attended regarding the Looked After Child. Copies of all these documents must be kept as part of the child's records. The foster carer will also be kept informed of any changes and key decisions which are made.

The child's records must be kept confidential and stored in a safe and lockable place within the foster carers home.

Recording – foster care

It is vital that foster carers keep daily records in the children's portfolio of the events in the child's life and the household. This will help you provide clear information when you contribute to making plans for the Looked After Child's future. It also may provide useful information for the child in later life. Recording will help assist in considering protection for the child in your care and will safeguard family members from the risk of false allegations. Records could be of use in a Court hearing and may be asked for by Court.

Each child living with you should have a separate folder. The daily recording sheets will be retained and may in certain instances be requested by the Court for evidence. All written information about a child must be returned to The Agency when a child leaves your home.

Cared For Children and young people and their parents should be made aware that you are keeping records of happenings whilst the child is in your care. This can be explained at the Placement Planning Meeting. A child may also wish to contribute alongside your record keeping and this should be encouraged where appropriate and after discussions with the social worker.

When to Record

Records should ideally be made on a daily basis. This will help to ensure the accuracy of dates, times, conversations and incidents.

How to record:

- Keep the record simple, legible and clear.
- Notes do not have to be lengthy, just the main points.
- Keep to factual information and do not be judgmental.
- Accuracy is important when referring to specific incidents

What to record

- Details of contact visits with child's family, the child's reaction before and after contact and information about their contact with family members. Also include anyone's failure to arrive for contact and the reason why.
- Details of any other forms of contact such as telephone calls, birthday cards, letters.
- Details of visits, meeting with social workers or other professionals and the child's reaction if any.
- Dates of reviews, care planning meetings, case conferences etc and decisions made.
- Details of dental and medical appointments and any treatment given.
- Dates and type of immunizations.
- Dates, type and length of any illness
- Details of any accidents or injuries however slight. Describe what, when where it happened. Name any witnesses and any action taken. Record the time, date and name of the social worker to whom you reported the incident.
- Comments the child makes that gives you cause for concern. Always record using the child's own words and do not try to interpret or further question a child if this information is sensitive or may indicate any form of abuse. Contact the child's social worker immediately and reassure the child.
- Details of the child's behaviour that causes concern. Note their actual behaviour, what triggered it and how it was dealt with.
- Any positive improvements, achievements and happy events for the child.
- Dates when the child is away from the foster home – with family, friends, school trips, introductions to new carers or if they are missing from home.
- Details of times when child is with alternative care givers such as babysitters, detail who they are.
- Any significant contact with nursery or school such as comments about behaviour, achievements, open evenings at school.
- Any involvement with the Police.
- Details of any theft or damage caused by the child.
- Detail any specific incidents, events or changes of circumstances in your household. Include any complaint or disagreements.
- Detail any significant milestones in the child's development such as their first word or first steps or any exam success.
- Any other significant events or information.

Recording is vitally important for the child, the foster carer and the foster family. It is important that you attend Record and Report Writing Training for foster carers as this will inform and advise you on how to record and the significance of recording in your role as a foster carer. When a child stays with a respite carer their portfolio should go with the child to their respite carer as daily recordings need to be continued and the file has relevant information for the respite carer.

Recruitment

The Agency is committed to the continued recruitment of foster carers. The aim of marketing, advertising and recruitment is to draw a good response from potentially suitable applicants who have an interest in fostering Cared For Children.

Foster carers can play an important role in the recruitment of other foster carers and The Agency welcomes the support of existing foster carers in recruitment campaigns. Foster carers can also be involved in the Skills to Foster Training and also offering support to new carers (Linked carers and Mentoring).

If you know someone who may be interested in fostering for The Agency please introduce them to us and the Fostering Team will be happy to speak to them. If they subsequently progress to become an approved foster carer for The Agency then you will receive a small monetary reward. So do speak to your family and friends and support foster care recruitment.

Retention

The Agency values and are committed to the retention of its foster carers and are continually striving to improve services through the valued consultation with carers.

We regularly review our allowances; we have an annual award event in recognition of the most recent achievements of our carers and offer a range of social events for fostering families to attend. We value and support a buddying system drawn from our more experienced carers for new foster carers.

Religion

It is important that a Cared For Child's religious practices and beliefs are maintained during a period of separation from birth family. Foster carers cannot change a child's religion and should gain an understanding and support the child in his religious practices where appropriate.

Although you may not have strong religious convictions yourself, if religion is part of a Child's identity then it is important that you support the child to continue to practice his/her religion as required. You may have strong religious convictions, whereas the Child and his family may not, and it would be inappropriate and not acceptable to insist that the foster child practice your religion. If you are unsure about this aspect of your fostering role, speak to the Child's social worker. Any religious practice issues should be covered in the placement plan meeting. If you continue to have uncertainties contact your fostering social worker for advice.

Respite

Children with additional needs (this is inclusive of complex needs linked to a disability or to emotionally challenging needs of a child) may be offered 'short breaks' or respite placement to offer the child a different experience and aid their development in offering social or leisure opportunities. These are based on the child's needs and not the carer's needs.

There are occasions when carers are linked to support each other with the care of a child for example supporting each other with child care arrangements for training or in an emergency situation. This would be referred to as respite but these should be the exception rather than the rule as children placed with foster carers are to be treated as part of the family unit and should engage in all family trips/holidays. The details regarding the payments for respite care are detailed in the Fee, Training and Payment Scheme for carers.

Reviews

A foster carer will be involved in the foster carer review and the Looked After Child's review. All approved foster carers have annual reviews at which their continued approval is considered. During the course of the year your fostering social worker will have undertaken both announced and unannounced supervisory visits. They will have drawn up a personal development plan (PDP) with you; this will also form part of your review alongside training undertaken; social worker reports and end of placement/child consultation documents.

Safer Care

One of the most important parts of the work of foster carers is about safeguarding and protecting children in their care. Some children are harmed in foster homes. All forms of abuse can occur; physical, sexual, emotional, neglect.

Foster carers may abuse children in their care for a number of reasons including; losing their tempers maybe leading to physical or verbal abuse, neglect of a child's basic needs, sexual abuse or exploitation, emotional abuse through lack of skills, knowledge, understanding or respect of the child's issues. There is always a danger that some people will be attracted to fostering because of the opportunities it gives them to sexually abuse vulnerable children.

Allegations of all forms of abuse have to be taken seriously and safeguarding procedures apply to foster carers in the same way as any other adult in the community. If the foster home cannot be deemed to be a safe place then the foster carer may have their approval terminated. Where deemed necessary Police investigations will be undertaken in regards to allegations of abuse.

Children occasionally make false allegations of abuse. This may be because they misinterpret an innocent action; or because they want to draw attention to previous abuse for the first time; or as a way of exercising control over their own life; or to try to end a foster placement in the hope of being returned to parents.

Foster carers often think they will never be accused of abuse, but allegations of abuse can happen to anyone. Foster carers need training and other opportunities to consider what they can do to reduce the risk of allegations.

All foster carers will produce a Safer Care Policy for their home and family in relation to each child they are caring for and should be updated annually or following a serious incident. The purpose of the policy is to ensure that foster carers, household members and visitors to the home know the family rules on how to behave to ensure all children in the home remain safe from harm, and to minimise the risk of false allegations.

Risks can never be eliminated completely and some 'ordinary' things you do at home will need to be done differently when your family starts to foster. It is best to avoid difficult situations arising in the first place. Safer care must always be at the forefront of foster carers' minds, even at times when boundaries are more relaxed like holidays or leisure activities.

Your fostering social worker will assist you in drawing up a safer care policy for each child in your care to ensure it is appropriate to cover safeguarding and protection of Looked After Children in your care whilst also considering minimizing the possibility of false allegations being made. Training on the allegation process and how to minimise risk is provided by the Fostering Service.

Short Breaks

Some foster carers provide a series of short breaks to help children to remain within their own families. These services are mainly provided for children with disabilities. When children receive only short breaks their parents retain the main responsibility for planning for them, and therefore some of the standards and regulations do not apply.

Special Guardianship Order (SGO)

A Special Guardianship Order (SGO) is a legal order introduced in the Adoption and Children Act 2000, intending to provide legal permanence for children who cannot be cared for by their birth parents. SGO gives the special guardian parental responsibility for a child which is expected to last until the child reaches 18 years of age. But, unlike Adoption Orders SGOs do not remove parental responsibility from the child's birth parents, although their ability to exercise it is extremely limited.

In practice this means that the child is no longer the responsibility of Together for Children and the special guardian will have clear responsibility for day-to-day decisions about caring for the child or young person, and for making important decisions about their upbringing.

Stability of care for Children

Stability is a key part to ensuring that foster care is a positive experience for Cared For Children. Stability of children's living arrangements helps to ensure that children are offered the same opportunities as other children and that they have the individual support necessary to reach their potential. Stability is associated with better outcomes and placement instability can be a key barrier to improving educational outcomes. It is important that you identify any problems or issues at an early stage with your fostering social worker to try and maintain and avoid disruption or unplanned ending.

Statement of Purpose

This document is required by law under Fostering (England) Regulations 2011, the statement of purpose must include the aims and objectives of The Agency as well as the services and facilities that they offer. The statement of purpose for Together for Children is available on the website www.togetherforchildren.org.uk and is updated annually.

Substance Misuse

Nowadays we cannot prevent young people from coming in to contact with drugs. But by giving them accurate information we can help them to make the right choices. We also need to ensure young people know where they can go for support and who they can talk to without being judged.

Support network

There are the selected number of people you identified during your assessment to support you in your fostering role – e.g. while you attend training or in an emergency for school pick up or for overnights if needed. Your support networks tend to be people you trust and have known for a long time and would become familiar to a child when they are placed. It is expected members of your support network will have a current DBS.

Support and Support Groups

Foster carers will receive support and supervision in their role. Together for Children Fostering - Sunderland will support you by providing a range of supports that include:

- One to one support for foster carers
- Emergency Duty Team
- Training and guidance for foster carers
- Support groups
- Therapeutic support
- Children and Young People Service
- Buddying/peer support/carer mentors
- Carer on call
- Support Groups
- Carers Consultative

Termination/Withdrawal of Approval

When people are approved as foster carers their details and information relating to their approval status are kept in the form of a Foster Carer Register. In certain circumstances it might be necessary for The Agency to initiate processes to request that the carer's approval is ended, for example, if there were concerns about the standard of care being given by the foster carer.

If termination of approval is being considered a clear procedure exists which The Agency must follow and the foster carer will be given the opportunity to express his/her views on the matter.

Training for Foster Carers

The training needs of individual foster carers (and their partners, if [FOSTERING SUNDERLAND](#) appropriate) are identified by the fostering social worker in consultation with the carer and these are then recorded in the foster carer's personal development plan.

All approved foster carers are expected to satisfactorily complete their TSDS (Training Support and Development Standards) Workbook within their first 12 months of fostering (Connected Carers within the first 18 months). Foster carers are provided with support to help achieve this.

Mandatory core training is provided for all foster carers on a rolling programme on an annual basis and elements are reviewed with in the training programme. For further information, please see our Training, Fee and Payment scheme.

Glossary

Allegation – an accusation of physical, emotional or sexual abuse, or serious neglect, of a child or young person by a foster carer or other member of the foster family.

Allowance - this is a payment given to foster carers to cover the cost of the child's care including food, clothing, transport and pocket money.

Assessment – this is the process undertaken to ensure that a person is suitable to become a foster carer. The assessment process includes interviews, training, references and other checks.

Care plan – every child in care should have a care plan which will include details of their needs and how these will be met, and contain information about their placement and the longer-term planning for their care.

Cared For child - anyone under age 18 who is looked after by the local authority, either because they of a legal order or they are accommodated through a voluntary agreement with their parents.

Case Conference - A case Conference is when people who are involved with a child come together to discuss concerns about the child's welfare.

Child Age-Related Allowance – this allowance is paid to foster carers in respect of each child placed. This allowance is to cover the care costs of the child/young person.

Children's services - part of Together for Children – Sunderland, that has responsibility for providing services to children and young people, including the provision of foster care.

Child's social worker - this is a social worker who is provided by the responsible authority to work with a child and to plan for their care. They are also responsible for meeting with the child to ensure that their needs are being met.

CIN - abbreviation used for Child in Need.

CLA – abbreviation used for Child Looked After.

Connected Care - when a child is living full time with someone who is a family member, friend or was previously known to them.

More comprehensive guidance on family and friends foster care in England is given in Family and Friends Care: statutory guidance for local authorities.

Connected person – a connected person is a family member (whether by birth or marriage/civil partnership), friend of, or person who is known to, the child. They can be child minders, teachers, youth workers or others working in a professional capacity with the child.

Contact/Family Time – the process whereby children stay in touch with **FOSTERING SUNDERLAND** people who are important to them, including relatives such as parents and grandparents as well as others, such as former foster carers.

DBS check – the Disclosure and Barring Service check is undertaken to discover if a person has an existing criminal record in the UK. DBS checks can include ‘soft’ information, where no criminal charges have been brought but where serious concerns have been raised.

Delegated authority - this is where the responsibility for making day to day decisions about a child has been passed to the foster carer. This can include decisions around activities, haircuts and overnight stays amongst other things.

Foster Care Agreement - an agreement between The Agency and the foster carer which sets out matters such as terms of approval, the obligations of the foster carer, and what training and support The Agency will provide for them. More information on what should be included in the Foster Care Agreement can be found In Schedule 5 of the Fostering (England) Regulations 2011.

Fostering panel - the panel is a group of appointed people who make recommendations on the approval of prospective foster carers and any changes to the approval of existing foster carers. Details of who has to sit on this panel are covered in Regulation 23.

The Agency Decision Maker - this is a senior person within The Agency who makes a final decision on the recommendations from the fostering panel (see above). The qualifications required for this role are explained in National Minimum Standard 23.

Guidance - this explains how the regulations should be put into practice. All Agencies must comply with them unless there are exceptional circumstances. You can read the guidance relating to foster care in England on the Department for Education website.

Independent Fostering Provider (IFP) - an organisation that places children into foster placements. Some are profit making companies while other are charities or not for profit companies.

Independent Review Mechanism (IRM) – the IRM reviews, on behalf of the secretary of state, qualifying determinations issued by The Agency.

Independent Reviewing Officer (IRO) -the IRO is a social worker who takes part in the reviews for children in care. They chair the review and monitor implementation of the care plan, as well as ensuring that the child’s voice is heard and that their wishes are taken into account. You can find out more about the work of the IRO on the Department for Education’s website

Local Authority - the local council that has responsibility for children’s services, including provision for looked after children. In Sunderland this is provided by Together for Children.

National Minimum Standards – these describe the absolute minimum standard of service expected by the government, which The Agency must provide. They are used during inspections to check the regulations are being met. You can read the National Minimum Standards for Foster Care in England on the Department for Education website or on the Foster Carer Portal.

Ofsted – the Office for Standards in Education, Children’s Services and Skills (Ofsted) is the government body responsible for inspecting children’s services including fostering in England. All independent fostering providers have to be registered with Ofsted.

Parental Responsibility – this refers to all the rights, duties, responsibilities and powers which the law gives a parent in relation to their child. Mothers automatically have parental responsibility as do fathers if married to the mother when or after the child was born or by other legal agreements. Parental responsibility can also be given by the courts to others under orders such as special guardianship or adoption.

Pathway plan – the pathway plan is completed as part of the leaving care process for each young person and includes any actions that have to be carried out by together for children foster carer, the young person themselves and any others involved.

Personal Education Plan (PEP) – the PEP is part of the child’s care plan and gives information about the arrangements that have been made for their educational and/or training needs by the team around them.

Placement plan – the placement plan forms part of the child’s overall care plan and lays out how the placement will meet the particular child’s needs.

Private fostering – this is an arrangement whereby a parent arranges for their child under 16 (or under 18 if they are disabled) to live with someone who is not a relative (as defined below) for more than 28 days. Private fostering arrangements must be notified to Together for Children, who will visit periodically to ensure the welfare of the child.

Professional fee – this is the payment made to a foster carer for each child placed with them. The level of the professional fee is determined by the skill and training level of the foster carers.

Qualifying determination – this is where a The Agency is considering to not approve a prospective foster carer or wishes to change the terms of approval of an existing foster carer against their preference or feels a foster carer is no longer suitable to foster. In the case of receiving a qualifying determination that they don’t agree with, prospective and existing foster carers can make representations to The Agency or they can ask the IRM to review the situation. However, they cannot do both.

Regulations - these outline the legal requirements for foster care and all Agencies must comply with them these are linked to The Care Planning, Placement and Case Review (England)

Regulations 2010; The Care Planning, Placement and Case Review (England) and fostering (Miscellaneous Amendments) Regulations 2013; Fostering Amendments 2014 and the Children and Families Act 2014. Failure to do so is a breach of the law. You can read all of these on the Government Legislation website.

Relative - defined by the Children Act 1989 s.105 as a person who is by full blood, half blood, marriage or civil partnership the grandparent, brother, sister, uncle or aunt, or step-parent of a child.

Responsible authority - this is the authority that has responsibility for ensuring that the child is looked after appropriately while in its care. In Sunderland this is Together for Children.

Short breaks – these are a series of placements made for a limited amount of time where the child then returns to their parents. This does not include children who are subject to a care order.

Special Guardianship – when the court makes a Special Guardianship order it gives parental responsibility to the special guardian, which they share with anyone else who has this. The order lasts until the child is 18, unless the court discharges it earlier.

Statement of purpose – required by law under Fostering (England) Regulations 2011, the statement of purpose must include the aims and objectives of The Agency as well as the services and facilities that they offer.

Staying Put – the Children and Families Act supports young people staying with their former foster carers until they reach the age of 21 Sunderland has a scheme that supports this.

Fostering social worker – this is the social worker allocated to each fostering household to provide supervision, support and guidance on the fostering task to foster carer/s.

Usual fostering limit - under the Children Act 1989 Schedule 7, the number of children fostered by a foster carer is limited (the usual fostering limit). The current usual fostering limit is three children unless the children are all siblings although exemptions can be granted. More information about the usual fostering limit and its exemptions can be found in section 5 of the Children Act 1989 Guidance and Regulations Volume 4: The Agency Handbook