



# Stoke-on-Trent City Council Fostering Service

## **Foster Carer's Handbook 2022**

# Introduction

This Foster Carer handbook is designed to be a reference guide for both new and existing Foster Carers. The purpose of the handbook is to provide information and guidance to all our Foster Carers on fostering issues, it will also provide additional sources of information and provide practical help, identify standards of care that are expected from you, and in return, what you can expect from us.

## About the Foster Carer Charter

The Government launched the Foster Carers' Charter in March 2011. The Charter has been jointly produced by Government, fostering organisations, charities and children. It is part of the Government's wider programme of reform to improve the entire care system – including reducing barriers and delays to adoption and improving the quality of children's homes. The overall aim is to make sure that all children in care have greater stability, less upheaval and a better chance of a stable family life.

You can find out more information regarding the Foster Carer Charter from the Fostering Network website. The charter states:

### **Children come first:**

Children in foster care deserve to experience as full a family life as possible and be part of a loving foster family with carers who can make everyday decisions as they would for their own child and without the child feeling that they 'stand out' as a looked-after child. Children must be given every support to develop their own identities and aspirations, fulfil their potential and take advantage of all opportunities to promote their talents and skills. Above all, they should be listened to.

### **Local authorities and fostering services must:**

Recognise in practice the importance of the child's relationship with his or her foster family as one that can make the biggest difference in the child's life and which can endure into adulthood.

Listen to, and involve Foster Carers and their fostered children in decision-making and planning, and provide Foster Carers and their fostered children with full information about each other. In making placements be clear about the continuing care or support available (including for the child into adulthood), be sensitive to the needs of the Foster Carer and the child in making and ending placements and have contingency plans should the placement not work.

Treat Foster Carers with openness, fairness and respect as a core member of the 'team around the child' and support them in making reasonable and appropriate decisions on behalf of their fostered child.

Ensure that Foster Carers have the support services and development opportunities they need in order to provide their foster child with the best possible care. That includes liaising with local Foster Carer groups and seeking to respond to problems and disseminate best practice.

Make sure Foster Carers are recompensed on time and are given clear information about any support, allowances, fees, and holidays they will receive including in cases of dispute with the service or during gaps in placements.

## **Foster Carers must:**

Be positive adult role models, treat the foster child as they would their own child, and advocate effectively for all aspects of the child's development, including educational attainment and physical and emotional health and wellbeing. They must also co-operate fully as part of a team with other key professionals in the child's life.

Support their fostered child and do all they can to make the placement work. Take part in learning and development, use skills and approaches that make a positive impact and enable the child to reach his or her potential. Support their fostered child to help them to counter possible bullying and discrimination as a result of their care status.

Stoke-on-Trent City Council has signed this charter and is committed to working alongside Foster Carers to ensure that the children and young people that we look after are provided with the best quality care and greater stability.

# Document Contents

**Introduction.....2**

About the Foster Carer Charter .....2

    Children come first: .....2

    Local authorities and fostering services must:.....2

    Foster Carers must: .....3

**Chapter One..... 11**

**FOSTER CARE ..... 11**

Information for newly approved Foster Carers..... 11

Your Role as a Foster Carer..... 11

Membership of the Stoke-on-Trent Fostering Association ..... 12

Foster Carer’s Agreement and Supervision Contract ..... 13

The Role of the Fostering Panel..... 13

The Independent Review Mechanism ..... 13

Stoke-on-Trent City Council’s Fostering Service ..... 14

General Fostering..... 14

Mockingbird ..... 14

Therapeutic Fostering..... 15

Emergency Fostering ..... 15

Parent and Child Placements ..... 15

Short Breaks for Disabled Children ..... 16

Asylum Seeking Children ..... 16

Staying Put ..... 16

Respite Care ..... 16

Connected Person Foster Carers ..... 17

Preparing for a Child’s Placement/Placement Planning ..... 17

Buddy Scheme ..... 17

Foster Carer Recording ..... 17

Unannounced Visits to Foster Carer’s Homes..... 18

Individual Family Safer Caring Plan..... 18

Health & Safety in the Home ..... 18

    Kitchen Area ..... 18

    Bedroom ..... 19

Bathroom .....	19
Additional Areas.....	19
Outside Areas .....	20
Car Safety.....	20
Pets .....	20
Recreation .....	20
Diet .....	21
The Child's Social Worker .....	21
Children Who Foster.....	21
Foster Carers and Delegated Authority .....	22
Disclosure and Barring Service (DBS).....	22
Internet safety.....	22
Keep it Safe .....	22
Set Ground Rules .....	23
Returning Home or Moving On .....	23
Permanency .....	24
So, When Does Permanent Fostering Become the First Choice of Placement? .....	24
Moving Children to Adoption .....	25
What Adoption Requires of Foster Carers .....	25
Preparing for Adulthood.....	26
Activities and Events .....	26
Passports/Holidays.....	27
Family Time (Contact) .....	27
<b>Chapter Two .....</b>	<b>29</b>
<b>LEARNING AND DEVELOPMENT.....</b>	<b>29</b>
Safeguarding .....	29
Foster Carer's Agreement and Supervision Contract .....	29
Training in the First Year and Beyond .....	29
Support and Supervision of Foster Carers .....	30
The Aim of Supervision .....	30
The Role of the Supervising Social Worker (SSW) .....	30
Annual Reviews.....	31
What are Foster Carer Reviews? .....	31
What is the fostering reviewing process? .....	31

What should Foster Carers do? .....	32
Support Groups .....	32
The Training, Support and Development Standards.....	33
Confidentiality and Keeping Records.....	33
<b>Chapter Three .....</b>	<b>34</b>
<b>SUPPORT AND INFORMATION .....</b>	<b>34</b>
Foster Carer Events .....	34
The Children in Care Awards Evening .....	34
Kids of Carers.....	34
Independent Visitors.....	34
Working with Parents.....	34
Types of Abuse.....	35
Physical abuse:.....	35
Neglect: .....	35
Sexual abuse: .....	35
Modern slavery: .....	35
FGM:.....	35
Grooming: .....	35
Non-recent abuse: .....	35
Child trafficking: .....	36
Radicalisation: .....	36
Child Sexual Exploitation: .....	36
Child Criminal Exploitation: .....	36
Responding to Disclosures of Abuse .....	36
How to Respond to Serious Incidents.....	37
Safe Caring .....	37
Cyber Bullying .....	37
Social Networks and Grooming .....	38
The Virtual School .....	38
What is our role?.....	38
What do we actually do? .....	39
Bullying.....	39
Self-Harm .....	40
Eating Disorders .....	40

Anorexia .....	40
Bulimia.....	41
Further Advice .....	41
Substance Misuse .....	41
Soiling and Bedwetting .....	42
Bedwetting (enuresis) .....	42
<b>Chapter Four.....</b>	<b>43</b>
<b>FINANCES .....</b>	<b>43</b>
Current Allowances .....	43
Fostering – Childrens Allowances .....	43
Pocket Money.....	43
Fostering Skills Payment .....	44
Costs covered by the Fostering Allowance.....	44
Savings for Children/Young People .....	46
Other Fostering Payments.....	47
Children Who Must be Placed Alone.....	47
Children with Complex Health Care Needs (including Mental Health) and/or Disabilities..	47
Respite Payments.....	47
Festival Payments.....	47
Birthday Payments.....	48
Overpayment of Allowances .....	48
Recruitment payments ('refer a friend fee').....	48
Training Payments (*renewed*) .....	48
Long service retention payments .....	48
Tax Payments .....	49
Household and Buildings Insurance .....	49
Loans.....	49
State Pension/Tax for Foster Carers .....	49
The Use of DLA by Stoke-on-Trent Foster Carers .....	50
Care component .....	50
Mobility component .....	51
What to do if you believe the child you are looking after qualifies for DLA. ....	51
Payment Rules .....	52
Carers allowance .....	53

Blue Badge Scheme .....	53
Criminal Injuries Claims .....	53
<b>Chapter Five .....</b>	<b>54</b>
<b>POLICIES AND PROCEDURES .....</b>	<b>54</b>
Statement of Purpose.....	54
Fostering National Minimum Standards.....	54
Going Missing from Care .....	55
Missing .....	56
Unauthorised absence .....	56
Immediate actions if a child/young person is missing.....	56
Record Keeping .....	57
Child/ Young Person's Return.....	57
Health of Children Looked-After .....	57
G.P Registration .....	58
Health Assessments .....	58
Administering medication and keeping records.....	59
Storage of Medication .....	59
Recording the Administration of Medication.....	59
Errors in Administering Medication .....	60
Permission for medical treatment.....	60
Other medical matters e.g. dentists, opticians etc. Dental Care.....	60
Optical Care.....	60
Immunisations.....	60
Minor Accidents .....	60
First Aid Kits.....	60
Black and ethnic minority children.....	61
Asylum seeking children .....	61
Alcohol.....	61
Smoking.....	61
Placement restrictions.....	61
Sexuality and sexual health .....	62
Guidance for Foster Carers .....	62
Statutory Guidance on Promoting the Health and Well-being of Looked-After Children....	62
Aim .....	62



Introduction .....	62
The Role of Health Professionals in Providing Contraception and Sexual Health Advice and Treatment .....	63
Accessing Information and Advice .....	63
The Provision of Contraception and Sexual Health Advice to under 16s .....	63
HIV and Hepatitis .....	63
Education .....	64
Stoke-on-Trent Virtual School for Children in Care.....	64
Introduction .....	64
Overview.....	64
Our role is .....	64
On a day to day basis we .....	65
What happens if a child in my care needs to move school at a different time? .....	65
Personal Education Plans (PEPs).....	65
Exclusions .....	66
Additional Support for Children in Care .....	67
CAMHS Support .....	67
What Do They Do? .....	67
Application for Statutory Assessment for an Education, Health and Care Plan (EHCP).....	67
Virtual School- Educational Issues .....	68
Allegations against Foster Carers.....	68
Care standards investigation .....	68
Complaints by Foster Carers .....	69
Complaints by Foster Children .....	70
Whistleblowing Policy for Foster Carers .....	70
<b>Chapter Six .....</b>	<b>71</b>
<b>CHILD CARE LAW.....</b>	<b>71</b>
Child Focused Standards – Our Promise .....	71
Children Who Are Looked-After.....	71
The Law Relating to Looked-After Children.....	71
Children in Care.....	71
Accommodated Children – (S20, Children Act 1989) .....	71
Emergency Protection Order .....	72
Police Protection.....	72
Interim Care Order.....	73

Care Order .....73

Children’s Guardian.....74

Special Guardianship Order .....74

# CHAPTER ONE

## FOSTER CARE

### Information for newly approved Foster Carers

This section is designed to explain the procedures and policies relating to all Foster Carers. It also offers advice about the role of a Foster Carer and the support available to you.

### Your Role as a Foster Carer

Foster Carers are responsible for the day-to-day care of the child. Foster Carers are expected to care for any child placed with them as if they were a member of their own family. As part of the team, the Foster Carer will seek to ensure that all aspects of the child's needs are met. They are responsible for providing care, which promotes healthy, emotional, physical and sexual development as well as educational achievement.

As a Foster Carer, you are expected to advocate on behalf of the child. You are encouraged to act professionally and respectfully at all times. Children deserve dignity at all times and should move to any new home as you would expect to yourself, with clean washing and a suitable holdall.

# Membership of the Stoke-on-Trent Fostering Association

Dear Foster Carer,

I am writing to advise you that within the Stoke-on-Trent Foster Care Association you have an automatic right to membership of the Stoke-on-Trent Fostering Association.

The Association is known as Stoke-on-Trent Foster Care Association (“the Association”). The Association is governed by an Executive Committee.

The aims of the Association are:

- To protect and promote the interests of its Members generally
- To provide support and guidance for all General Foster Carers, Connected Carers, and their families. (“Foster Families”)
- To ensure that Foster Families’ views influence local, regional and national policy making concerned with Looked-After Children and Fostering
- To promote the development and wellbeing of Looked-After Children and young people who are the responsibility of Stoke-on-Trent (Local Authority)

The Association shall be non-party political and non-sectarian. Membership of the Association is automatically open to all approved General Foster Carers, and Connected Carers approved by Stoke-on-Trent.

There is no subscription fee payable. The Association positively welcomes all Members regardless of race, culture, age, sex, sexual orientation, religion, disability or marital status. The Association encourages all Members to be active and participate in the Association and their Group.

As an Association we do hope we can tempt you to join us, as you will be made most welcome.

With very kind regards and best wishes,

Chair Stoke-on-Trent Fostering Association

# Foster Carer's Agreement and Supervision Contract

All newly approved Foster Carer's will receive and jointly sign, alongside their appointed Supervising Social Worker a Foster Carer Agreement.

All Foster Carers will receive supervision in the form of a six-weekly meeting with their Supervising Social Worker (Short Breaks Foster Carers will have supervision every 12 weeks).

## The Role of the Fostering Panel

The Fostering Panel is chaired by an independent person who has the relevant and necessary skills and knowledge to carry out that role. A fostering panel is made up of at least five members. Of these five, one must include the Chair or Vice Chair; one Social Worker and at least three independent members. Fostering Panel's must only hold formal meetings if at least five members are present, forming a quorum.

The role of the Fostering Panel is to undertake the following tasks:

- To consider applications for approval and recommend whether or not a person is suitable to act as a Foster Carer, and if so the terms on which they should be approved – e.g. number and age of children to be placed.
- To consider the first review of newly-approved Foster Carers, and any subsequent reviews referred to it by the fostering service, and recommend whether or not they remain suitable to act as Foster Carers, and if the terms of the approval remain appropriate.
- To oversee the conduct of assessments carried out by the fostering service.
- To monitor and advise on the procedures for undertaking reviews of Foster Carers.
- To give advice and make recommendations on any other matters or cases referred to the Panel by the fostering service.

## The Independent Review Mechanism

The IRM is a review process, which Foster Carer's can use when they do not agree with the qualifying determination given by their Fostering service provider. The service is paid for by Stoke-on-Trent City Council. A review Panel, held independent of Stoke-on-Trent's Fostering Service, conducts the review process. This review Panel will:

- Review any proposed changes to your terms of approval
- Make a new recommendation to Stoke-on-Trent's Fostering Service on your suitability to foster and/or the terms of your approval for a specific child.

### **What the IRM does not do:**

- Make a decision about your case; this continues to be done by Stoke-on-Trent's Agency Decision Maker. The IRM is not a higher appeals authority.
- Consider the suitability of the care plan for a child, e.g. whether the child should be long-term Fostered.
- Handle complaints against the City Council. Complaints are dealt with under the Council's Complaints Procedure.

Further information for Foster Carers is available [Click here to visit](https://www.gov.uk/government/organisations/independent-review-mechanism/about)  
<https://www.gov.uk/government/organisations/independent-review-mechanism/about>

## Stoke-on-Trent City Council's Fostering Service

### General Fostering

This includes all children who need looking after for a variety of reasons. Many of the children and young people will only need to be Looked-After for a short time while the family are assisted to address their problems, but other children may need to stay longer. Some children and young people may need to be fostered because a Court has decided that they need to be placed away from their families for their own safety. Other children may be Looked-After as their parent has requested that the local authority cares for the child. Some children and young people may have more complex needs, and some may have challenging behaviour as a result of their lived experiences.

### 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, training, and social activities. The model was originally developed by The Mockingbird Society in America in 2004.

The programme improves the stability of Fostering placements and strengthens the relationships between Carers, children and young people, Fostering services and birth families. This centres on a constellation where one foster home acts as a hub, offering planned and emergency sleepovers and short breaks, advice, training and support, to six to 10 satellite households.

Relationships are central to the programme and the hub home builds strong relationships with all those in the constellation, empowering families to support each other and overcome problems before they escalate or lead to placement breakdown and increasing protective factors around children.

The constellation also builds links with other families important to the children's care plans and to resources in the wider community which can provide them with enhanced opportunities to learn, develop and succeed.

Stoke-on-Trent City Council are in process of developing the Mockingbird Programme with the partnership of Staffordshire County Council, Telford and Wrekin Council and Shropshire County Council. Stoke-on-Trent City Council have identified their hub carer and the project will be going live in summer 2022.

If you are interested in becoming part of the constellation, please discuss this with your Supervising Social Worker in the first instance. We are at the beginning of the journey as far as the Mockingbird Model is concerned and would like to build our constellations alongside our Foster Carers.

## Therapeutic Fostering

There is a small group of looked-after children who can present with unique challenges for which some Foster Carers may find increasingly difficult to manage. Evidence shows that where a child has a stable home environment, the child is more open and receptive to other specialist or professional input. Consequently, the key to successful and appropriate interventions is dependent upon on the availability of supported placements.

The main aim of the Therapeutic Fostering Scheme is to provide more specialist Foster placements, which are able to support young people to remain in Foster Care within the City Council. This will help the young people to maintain important links with their families and community. The Foster Carers will be provided with additional support and training to enable them to provide stability for these young people which will result in reducing the number of placement moves and placement breakdowns.

The Foster Carer will be paid an enhanced fee and will have direct access to consultancy with Changing Minds. It is anticipated that the types of children placed would have been stepped down from a residential home and/or previously unable to live within a family environment.

## Emergency Fostering

The Emergency Duty Team provides an emergency social care service for urgent situations which arise outside normal business hours and cannot be left, with an appropriate degree of safety, until the next working day. The EDT team will make contact with Foster Carer's when an emergency placement is needed out of hours.

The service is not an alternative means of accessing the usual daily activities of Adult or Children's Social Care for Stoke-on-Trent City Council. Therefore, the service cannot take on work from the day services that comes in prior to 17:00 nor undertake planned pieces of work from the area teams.

Operational hours are:

Monday to Friday 17:00pm – 8:30am

Friday 16:30pm – Monday 8:30am

Contact Number – **01782 234234**

## Parent and Child Placements

Foster Carers who provide parent and child placements offer intensive levels of support to the parents and their children in placement. They are involved from the beginning in establishing the support and assessment plan in order to promote a successful outcome. Foster Carers providing parent and child placements are provided with additional and relevant training to help them in their role. It is possible that the Parent and Child Foster Carer may need to gather evidence in relation to Court proceedings.

## Short Breaks for Disabled Children

Short Breaks Foster Carers offer short breaks to children by providing overnight and day care (the amount of care that each Carer provides depends on what they are able to offer and the needs of the child).

All Short Breaks Carers are assessed and approved in a similar way to Foster Carers. They are expected to complete their Short Breaks Standards once approved and to commit to on-going training and development.

## Asylum Seeking Children

Many asylum-seeking children come from cultural and religious backgrounds with which Social Workers, Foster Carers and health workers may be unfamiliar. Some will speak little or no English and may have witnessed or suffered horrific events beyond the comprehension of most people. Some, as a result, will suffer psychological distress or possibly exhibit signs of post-traumatic stress disorder.

Unaccompanied asylum-seeking children are unlikely to have medical records with them and may not be able to give a full individual or family medical history. Immunisation status will often be unknown and a course of primary immunisation may need to be undertaken.

Depending on the child's country of origin specific medical conditions may need to be considered including: Tuberculosis, Hepatitis B and C, Malaria, Schistosomiasis and HIV/AIDS. It is essential you seek professional medical advice to ensure the right course of action is taken.

Some asylum-seeking children may not know their date of birth as some cultures do not celebrate birthdays. An assessment of age may be carried out by Social Workers as part of the Child and Family Assessment. This is an ongoing process and can take time.

## Staying Put

The process for Staying Put is a formal arrangement where young people remain with their current Foster Carers after they reach the age of 18. This will be discussed as part of the young person's Statutory Review prior to their 18<sup>th</sup> birthday.

## Respite Care

There are a number of Foster Carers who can only offer care at certain times, this is usually at weekends or in conjunction with Foster Carers commitments elsewhere. Often this is supporting other carers if for example they are going on holiday and for some reason are unable to take their fostered child. This could also become a regular respite in order to give Foster Carers a break if this is appropriate. Respite care has to be agreed by the child's Social Worker and is usually undertaken in a planned way.



## Connected Person Foster Carers

Some Foster Carers are related to or have some kind of familial connection to the child or children they are fostering. These Foster Carers adhere to the same Fostering Regulations as General Foster Carers. The only difference is that they are approved at Fostering Panel to care for specific children rather than as a generic carer.

## Preparing for a Child's Placement/Placement Planning

During the preparation and assessment process you will have had opportunity to think about, discuss and decide the needs of children you feel you can care for. The terms of your approval are then written into the report that is presented at Foster Panel.

The Fostering duty worker, or your Supervising Social Worker, will contact you initially about the placement of a child. Unless you are being asked to look after a child in an emergency you will be given some time to consider and discuss with family members whether you are able to care for the child. You should be provided with detailed information regarding the child and their needs. It is important to find out as much about the child and their situation as possible.

When you are asked to consider looking after a child, the child's referral will be discussed to ensure you have all the relevant information that you will need in order to match your skill set with the needs and expectations of the child.

When considering the placement and agreeing to look after the child, it is at that time that you should consider whether the match is correct, taking into consideration the journey to school, contact /family time requirements and arrangements, the mix with other children within your home and the compatibility between the needs of the children.

The Placement Planning/Agreement meeting should occur within 5 working days of the child joining your family. It is at that point that any questions you have should be answered and any additional equipment or initial clothing requests for support should be made and agreed. It is advised to obtain any agreement in writing and should be included in the placement planning/agreement document.

## Buddy Scheme

The Buddy Scheme is designed to assist newly approved Foster Carers to feel part of the Fostering service. You will be allocated a fostering buddy, an approved Foster Carer who will support pre-approval in some cases and for up to 6 months after being approved. They will also help integrate you into the wider fostering network.

## Foster Carer Recording

You will be given access to an electronic form on a Word document for each child that is placed with you. This can be discussed further with your Supervising Social Worker and reflect on the quality of recordings in supervision.

## Unannounced Visits to Foster Carer's Homes

A Supervising Social Worker will make an unannounced visit at least once a year which is a requirement in the Fostering Regulations, although we often complete 2 per annum as this is good practice. During the visit, the property which includes bedrooms and the garden will be viewed. Children who are fostered will need to be seen during this visit.

## Individual Family Safer Caring Plan

During the assessment process, time will have been spent putting together a family safer caring plan. It is important to keep your plan under review and to give consideration to making specific changes before a new child arrives, taking into account the child's specific needs.

## Health & Safety in the Home

A Health and Safety assessment will be completed annually or updated if changes are made to the fostering home or if carers move into a new property. There is an expectation that the Foster Carer's home is maintained to a good level of cleanliness and is kept sufficiently warm. Carers are asked to keep health and safety at the forefront of everything they do.

Carers are asked to ensure that electric wiring is safe, fitted with a trip device and plugs are not overloaded. (All homes fitted with an RCD protected fuse board are automatically fitted with a trip device)

Plug-in air fresheners are highly toxic to babies and toddlers if inhaled and should never be used in homes where children under the age of five are placed.

Gas fires and boilers must be serviced annually. A battery-operated carbon monoxide detector should be installed. Patch style detectors are not sufficiently sensitive. Smoke alarms must also be fitted and will be tested by your Supervising Social Worker when undertaking your health and safety assessment.

All Carers must complete an up dated First Aid course every three years and there should be a basic First Aid box available. All medication should be kept in a locked box.

Carers who keep guns must have a current license and store them within the legal guidelines. A weaponry assessment will also be undertaken and reviewed by your Supervising Social Worker.

### **Kitchen Area**

For younger children cooker guards should be fitted but where this is not possible a gate on the kitchen door should be considered in order to minimise the possibility of young children being injured by hot drinks and food.

Consideration should be given for all children placed regarding the storage of knives and other sharp objects which should be kept out of reach and for under-fives cupboard doors should be fitted with child safety locks or a gate fitted to the kitchen door to prevent small children getting into cupboards. Cleaning materials and bleaches in particular should be kept off ground level and securely stored.

## **Bedroom**

Upstairs side opening windows should be kept locked and the keys kept in the Carer's bedroom for a quick exit in the event of a fire. Keys can be kept in upstairs windows provided restrictors are in place.

Children over the age of eight must have their own room or can share with a sibling pending a bedroom sharing risk assessment.

It would be anticipated that most babies, if they are sharing with the carers, would move into their own room by the age of 12 months. Children aged 3 and over should have their own bedroom however if a child is sharing a bedroom with a sibling then a bedroom sharing risk assessment will be completed by your Supervising Social Worker and the Child's Social Worker.

Bunk beds are not recommended for young people over the age of 14 and children under 7 should not sleep in the top bunk. There should always be a secure ladder to assist with accessing the top bunk.

Cots must carry the British Kite or CE marked and a new cot mattress must be purchased for each placement of a child under one or the mattress should have been fitted with a made to measure cover at the time of purchase.

## **Bathroom**

Electrical switches must be of the pull-cord variety or outside the bathroom. Where under-fives are placed, all shampoos, soaps and other liquids/detergents should be stored out of reach. Chemicals such as hair dye, cleaning materials, should be locked away or kept in high cupboards.

There should be a lock on the bathroom door out of reach of small children. The lock should have a release mechanism enabling the door to be opened from the outside in an emergency. Carers are asked to ensure that the hot water system is fitted with a thermostat to avoid scalding. Medicines should be kept in a secure cupboard or locked container out of reach of young children, either in the bathroom or elsewhere.

## **Additional Areas**

If your home has an accessible cellar or attic it is important to ensure these are kept locked at all times. Front and back doors need to be fitted with childproof locks or locks which cannot be reached by younger children.

Stair banisters need to be fitted in or have a maximum of 10cms between the rails. Where young children are placed there should be a stair gate at the top and bottom of the staircase.

## **Outside Areas**

Tools and garden equipment should be locked away when not in use. Sheds and garages should be locked at all times. Water features need to be covered with weight bearing metal or a wooden frame and fenced off. Sandpits must be covered when not in use in order to keep them clean and any swings, slides must be well secured.

Carers are asked to be aware of any poisonous plants that may be growing in the garden, e.g. laburnum, foxglove, yew and if necessary, take protective measures to ensure children are not poisoned. Rotary clothes lines should be fully extended or collapsed. A circuit breaker needs to be fitted to lawn mowers and garden fences made secure. Gardens should be checked regularly and be clear of debris or animal faeces.

## **Car Safety**

It is the driver's responsibility to ensure all legal guidelines as to the transportation of all children are followed. For information on choosing the correct car seat based on an infant or child's weight [Click here to visit http://www.childcarseats.org.uk/law/.childcarseats.org.uk/law/](http://www.childcarseats.org.uk/law/.childcarseats.org.uk/law/)

Foster Carer's cars must be insured as fully comprehensive and insurance companies informed that they will be taking Looked-After children in their vehicles. Child locks should be used with any child likely to open doors whilst the car is moving, and children should never be allowed to put their heads out of car windows when the car is moving.

## **Pets**

Whilst pets can be wonderful for children, they can also carry disease and potentially cause injury. Carers need to be aware of the individual risks that some animals might pose, for example, the danger of worms spreading from dogs and cats to children. A risk assessment must be written in relation to all animals kept by the Carer.

Animal waste must be cleared regularly and disposed of appropriately.

The assessing Social Worker will complete separate questionnaires for each animal during the assessment and at the Foster Carer's annual review to ensure they are safe with children. It is the Carer's responsibility to inform the Supervising Social Worker if new pets join the family.

## **Recreation**

Looked-After children are not permitted to use BB guns or take part in shooting birds or other animals. If a young person wishes to join a shooting club this should be discussed with their Social Worker. Further guidance will be given on a case by case basis. Carers need to ensure that any children taking part in horse riding are sufficiently competent to keep themselves safe in most situations and are dressed appropriately. It is also essential that the owner of the horse has appropriate insurance cover.

Trampolines must not be used without an enclosure.

Children under twelve should be supervised at all times even if playing in inflatable paddling pools.

## Diet

It is important for children in Foster Care and Foster Carer to maintain a healthy lifestyle which includes a balanced diet and exercise.

Change 4 Life is a society-wide movement that aims to prevent people from becoming overweight by encouraging them to eat better and move more. [Click here to visit https://www.nhs.uk/change4life](https://www.nhs.uk/change4life)

## The Child's Social Worker

By law, the Social Worker must see the child in your home. They will want to talk to you about the child's progress and will need to see the child alone and will see the child's bedroom.

The child's Social Worker will visit during the first week of the placement and at least every six weeks during the first year. If the child/young person stays with you for longer than a year then the child's Social Worker may visit three-monthly if all members of the professional network agree. Most Social Workers need to visit more often and must also visit when the child or Foster Carer reasonably ask them to.

The Social Worker's visit is a time for you to discuss the child and he or she will offer advice and support.

## Children Who Foster

Fostering is complicated and can be exhausting. We recognise that being a child of a Foster Carer can be a wonderful experience but equally, can be challenging – sharing a home and your parents and witnessing scary behaviour can all contribute to a child of a Foster Carer feeling worried or anxious.

At times you and your family will be put under a lot of strain. We are aware of the contribution that all members of the Fostering family make. You may find that although you take time to explain the Fostering task to your own children, there will be times when they find it difficult. You should seek advice and support from your Supervising Social Worker. It may be appropriate for your Supervising Social Worker to spend time with your child to discuss their concerns. They will also ask for your child's views when completing your Annual Review.

If you feel that your birth child/ren require additional support, this can be discussed with the Supervising Social Worker. It is also important that Supervising Social Workers discuss any issues arising with birth children when they undertake their visits to your home. This may not be required on every occasion but should be monitored closely.

The Fostering Service provides a support group, 'Kids of Carers' for foster carers own children and grandchildren. This group meets at least 4 times a year and is an opportunity for children and young people to meet together to share experiences and feelings with each other. This group is available to children aged 7 and over.

# Foster Carers and Delegated Authority

Looked-After children say that problems obtaining parents "and local authorities" consent to everyday activities can make them feel different from their peers, causing them embarrassment, exclusion and upset. It is therefore very important to agree upfront who can make which decisions about a Looked-After child, and that this is understood by all key parties and reviewed regularly. Foster Carers are encouraged to make safe decisions that they would in relation to their own birth children.

Wherever possible, Foster Carers should be given the maximum appropriate flexibility to take decisions relating to children in their care, within the framework of the agreed Placement Plan and the law governing parental responsibility (PR). Except where there are particular identified factors, which dictate to the contrary, Foster Carers should be given delegated authority to make day-to-day decisions regarding health, education, leisure.

It is important that Foster Carers know what authority they have to make decisions about everyday matters involving the child. Arrangements for delegating authority from the parents to the local authority and/or from the local authority to the Foster Carers, must be discussed, agreed and clearly recorded as part of the care planning process at Placement Planning Meetings.

## Disclosure and Barring Service (DBS)

As a Foster Carer, your DBS check will be repeated on at least a three-yearly basis. Children of Foster Carer's or Looked-After young people subject to staying put arrangements, are required to have a DBS check when they become 18, if there are children under the age of 18 in the home. Please notify your Supervising Social Worker immediately if a friend or family member over 18 comes to live in your home as they will need to have a DBS check.

## Internet safety

### Keep it Safe

Keep an eye on what is going on by keeping the computer in a family room, never in a bedroom. Learn how to use the computer, access internet sites and try out a chat room for yourself so you can understand what can happen. Check out which sites your children are visiting to see if they are acceptable.

Ask other parents to tell you about good chat rooms or websites. Look for sites that check messages in chat rooms and those which include clear guidelines for use, teen-friendly advice, warnings and how to report concerns.

Discuss security setting on Facebook and chat rooms to enable a young person to use appropriate settings.

You can install software filters which block access to websites with a sexual content. These do not make internet use totally safe so this is in addition to you taking an active interest in the sites your child is browsing.

- The internet can be fun and useful
- Have family internet rules to encourage safer use
- Paedophiles can use the internet to groom and contact children
- It is important that parents understand the internet
- Children under 13 should not be using Facebook

The internet is a wonderful and quick way for young people to find information, help them study and keep in contact with friends or meet new ones. Unfortunately, the internet is also an easy tool for child abusers. People who sexually abuse children use chat rooms and Facebook to become friendly with children or young people, often by pretending to be another child. Other risks include people who want to get personal information e.g. names, addresses or telephone numbers for fraud. Using the internet too much can lead to an unhealthy lifestyle.

Further guidance can be found on the UK. Gov website for internet safety. [Click here to visit https://www.gov.uk/government/organisations/uk-Council-for-internet-safety](https://www.gov.uk/government/organisations/uk-Council-for-internet-safety)

## **Set Ground Rules**

It is important that the child understands why there needs to be rules. Explain that because they cannot see or hear the people they chat to on the Internet, they may not be who they seem. Paedophiles gain the trust of young people on the Internet. Remind the youngsters that strangers on the internet can be just as dangerous as strangers on the street.

Limit the amount of time the child or young person spends on the Internet – and stick to it. Discuss the kind of websites they can visit which are right for their age. Discuss and make it clear that they must never give out their real name, address, home or mobile phone numbers, or any other personal details on the Internet.

They should be encouraged to let you know if someone is asking questions or wanting details, they do not feel happy about giving. If a child is secretive when using the computer, if you notice changes in how they act, problems sleeping or changes in routine or they are suddenly asking about sexual matter, you should look into whether their internet use has anything to do with it.

If a child or young person in your care is being bullied, remind them that they can block and “un-friend” those that are bullying them. If necessary, they can close their account and set up a new one which they keep more private. Encourage them not to respond to abusive messages. Some schools treat cyber- bullying as a school matter, so do contact them to see if they can offer support.

There is a lot of information for parents and Carers to help deal with or prevent cyber bullying. Be responsible and inform yourself so you are aware and prepared.

## **Returning Home or Moving On**

The child's return home should ideally be planned from the beginning of the placement, and the proposed date for the child to return home should have been set well in advance. Part of your role as a Foster Carer will have been to work closely with the child's family, to facilitate contact and maintain links with their parents.

Sometimes, you may not agree with the decision to return the child to the care of their parents.

However, you must accept the agreed plan and do all that is possible to help the child with the change that they are facing. Saying “good bye” can be one of the most challenging parts of Fostering, but also one of the most important as positive endings are critical for children to learn.

A child moving on can be a painful experience for you as a Foster Carer and it is important for you to feel supported. It is likely that you will be able to gain support from your family who may be experiencing similar feelings. Your Supervising Social Worker will offer support as will other Foster Carers who can empathise as they will have been in a similar position.

It is important that you consider how to help a child move on in a positive way, whatever the circumstances. Their possessions should be treated with respect, and should never be placed in black bin liner type bags. Important photos and memories should be carefully packed and kept secure until such time that all the child’s belongings can be moved. It is feasible that some young people may wish to remain in contact with you after they leave. This is part of life and something that you will need to think clearly about. In most cases children will benefit from staying in touch with people they have previously lived with and this should be discussed with your Supervising Social Worker.

## Permanency

Stoke-on-Trent City Council defines a permanent placement as one that can offer continuous care and commitment to the child into adulthood. Such a placement should endeavour to reflect the child’s ethnic, religious and cultural heritage or ensure that their needs are met in another way, acknowledge and respect their family of origin and where appropriate maintain ongoing links and relationships for the child which are responsive to his/her changing needs. Permanency refers to the placement of a child with a family for life and that placement may, or may not, be legally secured.

The word, “permanent”, is key; it means that children will stay in their Foster family until they reach the age of 18, and hopefully continue to be part of that family well beyond then.

## **So, When Does Permanent Fostering Become the First Choice of Placement?**

Fostering can be the best permanence option for children with complex care needs, ranging from health conditions to learning or physical disabilities, and emotional or behavioural difficulties, so their Foster Carers feel confident of accessing the necessary resources to support that placement. It is often the best option for older children, who may need more ongoing direct contact with their birth family, or those who feel a strong loyalty to their birth parents and do not wish to be adopted. Permanent Fostering differs from adoption as Foster Carers do not have parental responsibility (PR) for the child. A child who is permanently Fostered in long term foster care remains the legal responsibility of the local authority and their birth parents. This means that the person, or persons, who have PR for a child will be able and entitled to make important decisions regarding the child and how they will be brought up, such as their religion, education, and where they live. It will also involve giving medical consent for treatment or surgery. Long term Foster Carers will be able to make some decisions about the child but will need to be clear about where their authority ends. Your Supervising Social Worker will provide guidance about this.



# Moving Children to Adoption

Moving children on to adoption is one of the hardest and most important tasks you might perform as a Foster Carer. It is hard because a child with an adoption plan will probably have been with you for many months. You and your family will have formed a strong attachment to that child. Together you will have been through a range of experiences and emotions. You may know that child better than anyone else has ever known them. This knowledge will be crucial to helping the child move on to a new life.

## What Adoption Requires of Foster Carers

Complete generosity! Your home will have to become open house to strangers.

When you know a child's case is due to go to Adoption Panel for a match, discuss the likely timetables with your Supervising Social Worker and make them aware of any holiday plans. Introductions will be done at the child's pace, so all concerned might have to be flexible. Discuss with the child's Social Worker the preparation work that they will be doing with the child to help them move on. Foster Carers should be involved as much as possible.

The Adoption Service require the following:

- The child has got a memory box Your Social Worker will advise of the contents.
- Have involvement with completing direct work with the child/children regarding moving on, demonstrating that move on is positive
- It is an expectation that you will attend the Moving on to Adoption training and keep up to date with any changes
- There will be an expectation that you will establish a professional relationship with the adoptive family. The child should not be involved at this point (you will be offered support around the guidelines and timescales of introductions)
- There will be an expectation that you will provide information about the child's routines, personality, likes and dislikes, needs (All about me)
- It is an expectation that you will attend the child's adoption medical and any review medicals
- It is an expectation that you will be supported to promote a positive relationship between the child and the adopters, by facilitating any additional meetings i.e. chemistry/bump in meeting, child appreciation day
- In some cases, you may need to accompany a child to an activity day to give them the best opportunity to be matched with adopters.
- Adopters will prepare materials to introduce themselves to your child, i.e. family book, photographs, visual aids/recordings for you to share with the child. Timescales will be discussed with you with the relevant professionals.
- It is an expectation that Adopters will spend significant amount of time in your home/child's environment during the initial part of the transition period. During this period, foster carers will be expected to guide, advise and support and demonstrate. Foster carers will take the lead and slowly hand over the care of the child. Give the child permission to trust the adopters while remaining present and available to reassure the child.
- There will be an expectation that you will accompany the child/ren to the adopter's home (including overnight stays in suitable accommodation dependent on location arranged by your Supervising Social Worker)
- In relation to meals, the details will be discussed during planning meetings.

- During the transition period, it is an expectation that foster carers will utilise their support network to make themselves available during the entirety of the period.
- Once a child is linked with adopters you will be notified within 24-48 hours. It is an expectation that you will inform us of any events that may impact on the transition i.e. holidays, operations, weddings etc.
- Once a child is linked it is an expectation that a child will not receive respite care
- The transition period should be very low key i.e. no goodbye, farewell parties etc. (please discuss with relevant professionals involved)
- The transition plan/timetable MUST be adhered to, unless there is an emergency situation, which must be reported as soon as possible.
- On the day of placement the interaction between the foster carers and adopters must be brief as this would be an emotional time for all involved.
- Post placement indirect contact should be led by the child's needs facilitated by the adopters.
- There will be an initial meet up after placement between foster carers and the child with their adoptive family, which will be discussed at the planning meeting this is determined by the needs of the child.
- The introductions/transition of the child to their adoptive family are reviewed at least once during the process. It is important that foster carers and adopters are honest about how the transition is going, so that the Social Workers can make any changes to the plan as appropriate. Your Supervising Social Worker will be in contact with the foster carers throughout the transition so that foster carers feel supported and can raise any issues in a timely way.

## Preparing for Adulthood

The Children & Social Work Act 2017 introduced a new duty on Local Authorities, to provide a Personal

Adviser (PA) support to all care leavers up to age 25, if they want this support. As Corporate Parents, Stoke-on-Trent Children's Service is committed to improving life chances for young people living in and leaving care. We aim to ensure that young people who have been in care are equipped to participate socially and economically as adults.

[Click here to visit https://www.minimumstandards.org/fost\\_twelve.html](https://www.minimumstandards.org/fost_twelve.html)

The Leaving Care Service (Next Steps Team) focuses on delivering services to ensure that:

- Young people are kept in touch with whilst they are in care and as they leave care and supported through their Care Plan/Pathway Plan as they move into adulthood with appropriate levels of support
- Young people have access to appropriate education, training and employment
- Young people have access to a range of suitable accommodation
- The Leaving Care Service is a service for all Looked-After young people and those who have left care.

## Activities and Events

Opportunities for physical activities and for expressing creativity are known to be important factors for enhancing emotional well-being and combating a low sense of identity and self-esteem.

You should discuss with the child the sort of activities and hobbies that interest them and aim to organise regular activities for each child. You are expected to pay for these activities from the fostering allowances for the child.

[Click here to visit https://www.minimumstandards.org/fost\\_seven.html](https://www.minimumstandards.org/fost_seven.html)

## Passports/Holidays

If you would like to take a fostered child abroad on holiday, you must discuss this with the child's Social Worker. They will need to undertake an assessment of risk relating to the child's potential behaviours. This will be discussed with you before the child is allowed to go.

If the child is accommodated (sec 20) then permission is needed from his/her parent, this will be obtained by the allocated Social Worker. If the child is subject to a Care Order, permission can be given by the child's Social Worker's Manager for the child to holiday abroad for up to one month. If the child is subject to an Interim Care Order, permission from the Court may also be required.

Foster Carers cannot apply for a passport for a foster child, directly. The child's Social Worker will need to complete the application. As passports can take a considerable time to be processed by the Passport Office, you will need to discuss holiday plans as early as possible. It is essential to have a letter from the Strategic Manager giving permission to take the child out of the country. Foster Carers must carry the letter with you at all times, when abroad.

## Overnight Stays

Under Delegated Authority foster carers could be able to give Looked-After young people permission to stay overnight, and sometimes longer with friends and wider family. It recognises the importance of ensuring young people's safety while promoting their development through joining in the social and leisure activities with their peers.

The issue of overnight stays should be discussed at the child/ young person's Placement Planning meeting and written into the Placement Plan. It should be noted who can agree to short overnight stays and who should be informed. It should also be recorded if there is anywhere or anyone who the child/ young person should not be able to visit. Foster Carers should be aware of any individuals, addresses or areas which may place a child at risk.

DBS checks should not normally be sought as a pre-condition of a child staying overnight with a friend. However, DBS checks should be carried out on adults in a household where a child is to stay with adults only or if there is an arrangement for the child to stay in the household frequently or for a prolonged period.

## Family Time (Contact)

The child has a right to see their parents and vice versa, unless a Court has directed otherwise. When you are first approached about taking a new placement you will be told about the plan for continued contact. This plan is subject to change as directed by the court.

It is essential that you give careful consideration to whether you and your family will be able to manage the level of contact required before you agree to care for the child.

Contact is discussed and the specific plan agreed during the Placement Planning Meeting. The details of who will be having contact, frequency, length of time, location and whether the contact will be supervised or unsupervised will be set out. Usually, contact will take place at a Childrens Centre or out in the community and is facilitated by a contact supervisor or Social Work assistant. It is an expectation that Foster Carers transport children to and from contact in order to provide consistent emotional support at what can be a challenging time for children and their families. In some circumstances, it may be appropriate for contact to take place in your home, this will always be risk assessed and only with your full agreement and is not an expectation. It may be necessary for contact arrangements to change during the period of the placement. Changes can only be made after thorough discussions with everyone involved or when directed by a Court.

Whilst every effort will be made to place siblings together this may not be possible or deemed appropriate. In these circumstances it is important that contact arrangements between the siblings are also set up. If the child's siblings are placed with other Foster Carers it is important to establish a relationship with their carers early on to facilitate contact, and gain mutual support.

You should make sure that you are familiar with the legal status of the child. If the child is voluntarily accommodated under Section 20 anyone with parental responsibility for the child may remove the child from your care without giving notice. If this situation arises you should try to persuade the person who wants to remove the child to discuss their plan with the child's Social Worker or a manager first as a planned move home is always better for the child. However, if the adult insists on removing the child you should not place yourself at risk and it is probably better for the child to leave without witnessing an argument. If this happens you should telephone the child's Social Worker or the Emergency Duty Team immediately and encourage the person removing the child to do this as well.

If the child is subject to an Emergency Protection Order, a Care Order or an Interim Care Order and an adult who has parental responsibility wishes to remove the child from your care you should contact the child's Social Worker or the Emergency Duty Team. It may also be necessary for the Social Worker or yourself to contact the Police for support to enforce the Order. You should not put yourself or your family at risk, whilst also remembering that the child needs to be protected.

[Click here to visit https://www.minimumstandards.org/fost\\_nine.html](https://www.minimumstandards.org/fost_nine.html)

# CHAPTER TWO

## LEARNING AND DEVELOPMENT

### Safeguarding

Safeguarding means proactively seeking to involve the whole community in keeping children safe and promoting their welfare, holistically, it is not only about their physical safety. Child protection is a central part of safeguarding and promoting children's welfare. It is about protecting individual children identified as either suffering or at risk of suffering significant harm. This could be as a result of neglect, physical, sexual or emotional abuse.

Foster Carers are part of the team around the child and as such, are part of the professional network for that child. It is vitally important that any issues which may leave a child vulnerable should be reported to their Social Worker. The links below will assist and guide you.

[Click here to visit Working together to safeguard children 2018 - Fosterline](#)

[Click here to visit https://www.gov.uk/government/publications/working-together-to-safeguard-children--2](https://www.gov.uk/government/publications/working-together-to-safeguard-children--2)

[Click here to visit http://www.workingtogetheronline.co.uk/](http://www.workingtogetheronline.co.uk/)

### Foster Carer's Agreement and Supervision Contract

All newly approved Foster Carer's sign a copy of the Foster Carers Agreement and a Supervision Contract. These agreements outline the basic details of the Fostering task, and Foster Carer's responsibilities. It will also include the numbers and ages of children you have been approved to care for and any other specifications or limitations the Agency Decision Maker has made. Your Supervising Social Worker will sign the agreement on Stoke-on-Trent's behalf.

### Training in the First Year and Beyond

Fostering Standards have been designed to support Foster Carers from pre-approval through to their first year of Fostering. The standards set out what Foster Carers should know and be able to do in a clear way. These standards apply to all Foster Carers, including long-term Foster Carers and Connected Persons Foster Carers. See the link below for the standards.

All new General Foster Carers are expected to complete the Standards within 12 months of their approval. Connected Carers have up to 18 months to complete their Standards.

There are a range of training courses available to new and existing Foster Carers. The Fostering Service also encourages Foster Carers themselves to get involved with providing training where they are suitably qualified to do so. You will be aware of our electronic training system and how to register.

Training from external providers can also be registered through our electronic training system. If you identify training that you would like to undertake, please discuss this with your Supervising Social Worker in the first instance.

All approved foster carers will have a Personal Development Plan outlining the training that they will undertake each year. Foster carers are expected to ensure that they continue with their professional development throughout their fostering career.

[Click here to visit https://www.minimumstandards.org/fost\\_twenty.html](https://www.minimumstandards.org/fost_twenty.html)

## Support and Supervision of Foster Carers

### The Aim of Supervision

The main purpose of supervision sessions between the Supervising Social Worker (SSW) and the Foster Carer is to safeguard and promote the well-being of Looked-After Children in placement in order to ensure that every child in placement can achieve their full potential.

The definition of supervision, according to the Fostering Standards states that 'Meetings have a clear purpose and provide the opportunity to supervise the Foster Carer's work, ensure the Foster Carer is meeting the child's needs, taking into account the child's wishes and feelings, and offer support and a framework to assess the Carer's performance and develop their competencies and skills'. Supervision should be timely, with notes taken and agreed by the Foster Carer for accuracy and shared as soon as practicable with the Carer.

[Click here to visit https://www.minimumstandards.org/fost\\_twentyone.html](https://www.minimumstandards.org/fost_twentyone.html)

### The Role of the Supervising Social Worker (SSW)

The role of the Supervising Social Worker is to provide and deliver professional support and supervision to Foster Carers whilst promoting the safe care and development of our Foster children in order for them to achieve their full potential in terms of their physical, social, emotional and educational needs.

They also actively participate in the recruitment, assessment and training of prospective Carers as well as pursuing suitable placements for our approved Carers.

The Supervising Social Worker will support you by providing assistance with placement stability, training and other learning and development opportunities. They will undertake the Annual Foster Carer Review and support you with any attendance at The Fostering Panel, should the need arise. In the event of an allegation against a Foster Carer, the SSW will assist you with process and procedure and will advocate alongside additional support from The Fostering Network.

Fostering Regulations require that your Supervising Social Worker visit you at least every six weeks to provide supervision and support. These visits can be more or less frequent by management agreement, depending on your level of experience, the level of support you require, and the stability of arrangements for the child(ren) in your care.

Best practice also dictates that where there are joint carers, both carers should be seen regularly by the Supervising Social Worker, and that joint visits with the Child's Social Workers happen regularly to promote good communication and partnership working.

The Supervising Social Worker's visit is a time for you to discuss any problems or concerns and he or she will offer advice and support.

## Annual Reviews

### What are Foster Carer Reviews?

Foster Carer Reviews provide an assessment of whether or not a Foster Carer and their household remain suitable to care for foster children and whether their terms of approval are still appropriate.

Foster Carer Reviews are governed by statutory regulation under the Fostering Service Regulations 2011 Regulation 28 [2] and they are required to take place once every year but an early review can also be called due to change of circumstances, practice issues or safeguarding concerns. Fostering reviews are statutory meetings and should be accorded the same significance and priority as other statutory meetings such as Looked after Children Reviews or Child Protection Conferences.

Foster Carer Reviews take place for all Stoke-on-Trent foster carers whether they are General Foster Carers, Respite or Short Breaks Carers, or Family and Friend Carers. Foster Carers who work for Independent Fostering Agencies (IFAs) will have their own annual reviews, carried out by their own agency.

The purpose of the Foster Care Review is to;

- Enable the carer, their Supervising Social Worker (SSW), and FRO to evaluate and appraise the overall quality of the fostering task undertaken during the preceding year.
- Hear from the children fostered by them, their Social Workers, IROs, parents and other professionals, about how the support provided by the Foster Carer has made a difference
- Hear from the Foster Carer's own children about what life is like for them in the foster home
- Facilitate discussion about aspects of the Foster Carer's practice where there may be differences of view
- Consider areas for further development or progression
- Identify any gaps in support or training available to the carer and identify necessary actions.
- To make a recommendation in regards to the Foster Carer and their household's suitability to continue to foster.

### What is the fostering reviewing process?

Twelve weeks before the review, consultation forms are sent to Foster Carers, Children and Young People, Child Social Workers (CSW), Supervising Social Workers (SSW), and Independent Reviewing Officers (IRO). Once completed and returned, the consultation forms are then evaluated by the SSW before the review meeting and the feedback is used to create the agenda for the review. The SSW may also seek the views of others such as parents, teachers or therapeutic workers.

The review forms part of the foster carer's record and personal development planning, in much the same way as an appraisal and it also considers a number of standing items and statutory requirements, including Disclosure and Barring Service checks, health and safety, attendance at mandatory training, and recording.

A Foster Carers first review following their approval will be presented to the Fostering Panel and recommendations made by them regarding continued approval or actions. Subsequent review meetings are usually held at the carer's home, though not always, and are attended by the Foster Carer/s, their SSW and the FRO. On some occasion's reviews may be held early, for example when there have been difficulties or allegations made about the carer. In the case of an early review the Foster Carer may be supported by an independent person.

Following a review (except the first review which is presented to Fostering panel), the FRO completes a summary report setting out actions and recommendations regarding the Foster Carer's suitability to continue in the role. The report recommends whether the carer should continue to be approved or whether there need to be changes. The FRO also reviews the Carers professional development in regards to their training, support or development needs and will highlight any areas for further support. The Fostering Service's Agency Decision Maker (ADM) has oversight of all Fostering Reviews. The ADM considers the SSW's assessment, the FRO recommendations and Fostering Panel's recommendations where applicable in order to make the final decision in regards to the carers continuing approval. The ADM has the right to disagree with the recommendations of the FRO and Fostering Panel. Should this occur, the Team Manager will discuss this directly with the carer. All ADM's decisions will be provided in writing to the Foster Carer within eight weeks of the review taking place.

## **What should Foster Carers do?**

Foster Carers should prepare for their Annual Review by completing the following tasks:

- Ensure that both Foster Carers attend the review (where applicable), should the date and time of a review not be suitable, then the FRO or Team Coordinator should be informed as soon as possible.
- Work with their Supervising Social Worker to update key fostering documents prior to the review including:
  - Safer Caring Policy
  - Health and Safety Assessment
  - Personal Development Plan
  - Pet / Dog Assessment

## **Support Groups**

We encourage all new and existing Foster Carers to attend, our Quarterly Catch Up's which is a support group where they will have the opportunity to meet with other carers and to catch up on the latest developments within the fostering service. External speakers are invited to attend and can cover a range of subjects, which Carers and the Service have identified as requiring specific focus. Support groups meet regularly throughout the year and run both during the daytime and evening.

Details of upcoming dates for support groups can be found on our electronic training system and we expect all Foster Carers to attend the Quarterly Catch Ups and support groups as this is a useful way of sharing good practice and/or advice and to continue with learning and development.



# The Training, Support and Development Standards

As stated previously, all Foster Carers must achieve the Training and Development Standards by the end of their first year of approval. You will be provided with a workbook, which explains the standards.

Your Supervising Social Worker is responsible for assessing how you are applying your learning to being a Foster Carer and for identifying any extra learning or support that you might need. When you have completed the workbook, it will be checked by your Supervising Social Worker to ensure that it has been completed satisfactorily and will be signed off by a Fostering Team Manager. At that point, you will be issued with a Certificate of Successful Completion.

[Click here to visit https://www.gov.uk/government/collections/guidance-for-Foster-Carers](https://www.gov.uk/government/collections/guidance-for-Foster-Carers)

## Confidentiality and Keeping Records

It is essential that Foster Carers keep records and notes of their Fostering. This is not only a legislative requirement but also a matter of good practice. All general Carers have to attend training on this before they are approved. However, this guidance will help with some of the frequently asked questions, which arise.

Under no circumstances should Foster Carers place any information that they hold about the children Looked-After on to any social media platform. Children can only be discussed in themed support groups or Mockingbird Constellations if Foster Carers have permission to do so by parents/Social Workers, or the children themselves.

[Click here to visit https://www.minimumstandards.org/fost\\_twentysix.html](https://www.minimumstandards.org/fost_twentysix.html)

# CHAPTER THREE

## SUPPORT AND INFORMATION

### Foster Carer Events

The Foster Carers Association facilitate a number of social events throughout the year including a Christmas Party, Easter Party, Halloween Party and a Summer fun day which is open to Foster Carers and their families. These events are always popular with foster carers and an opportunity to meet with other foster carers informally. You will be invited to these vents by the Foster Carers Association and the fostering service.

### The Children in Care Awards Evening

The Children in Care Awards are held annually for children and young people who are nominated by their social worker, teachers and foster carers.

### Kids of Carers

Stoke-on-Trent's Fostering Service offers support groups to foster carers own children. This group is run by experienced Social Workers and provide the opportunity for the children and young people to share their feelings and identify issues that they want support with. Kids of Carers also have social activities to encourage the children to offer informal peer support.

### Independent Visitors

The appointment of an Independent Visitor should be considered at a child's review.

A child should be referred for an IV where the contact with their parents is infrequent, not positive for the child or where it appears the child would benefit. The purpose of an IV is that the child has the opportunity to have contact with an adult who is outside the "professional network".

The information that the Foster Carer has about the child should remain confidential unless the IV needs to know in order to keep the child safe – this should be discussed with the Supervising Social Worker.

### Working with Parents

The Children Act 1989 requires us to work in partnership with the parents of children who are "looked after". The child's parents maintain parental responsibility in all cases unless the child is adopted. You and the child's Social Worker should do all that you can to involve the parents in decisions about the child, particularly when the plan is for the child to return home. This is not always easy, as parents can sometimes appear challenging and uncooperative.

The child you look after may be from a different cultural background from you. They will need your support and guidance to develop their cultural identity and to respect other people from different ethnic backgrounds. It is essential to find out about the practices they or their parents follow, in respect of language, dress, food, skin and hair care, religious practices. The placement meeting offers a vital opportunity to discuss and clarify information with the child's parents.

We all need to remember our roots and children should be encouraged to keep photographs of their family. They need to know why they look like they do, what talents and personality traits they have inherited from their parents. It is not always easy to talk to a child about their parents. At all times Foster Carers should be balanced in their views about the child's family, being negative can affect not only the child, but your relationship with the parents.

## Types of Abuse

Some children who are fostered will have been physically, sexually or emotionally abused (or all three), or they may have been neglected. It is important that you understand and identify your own feelings towards abused children and their abusers before you become involved. You also need to be able to recognise the symptoms and types of behaviour that are a likely result of abuse so that you can respond in an appropriate way.

The following is only a basic guide and you should discuss further training with your Supervising Social Worker and or view the NSPCC and Local Safeguarding Children Board website.

**Physical abuse:** Physical abuse is when someone hurts or harms a child or young person on purpose. [Click here to visit http://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/physical-abuse/](http://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/physical-abuse/)

**Neglect:** Neglect is the ongoing failure to meet a child's basic needs and the most common form of child abuse [Click here to visit https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/neglect/](https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/neglect/)

**Sexual abuse:** When a child or young person is sexually abused, they're forced or tricked into sexual activities. [Click here to visit https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-sexual-abuse/](https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-sexual-abuse/)

**Modern slavery:** Child slavery occurs when a child is exploited for someone else's gain. It can include child trafficking, child soldiers, child marriage and child domestic slavery. [Click here to visit https://www.antislavery.org/slavery-today/slavery-uk/](https://www.antislavery.org/slavery-today/slavery-uk/)

**FGM:** FGM is when a female's genitals are deliberately altered or removed for non-medical reasons. [Click here to visit https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/female-genital-mutilation-fgm/](https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/female-genital-mutilation-fgm/)

**Grooming:** Grooming is when someone builds a relationship, trust and emotional connection with a child or young person so they can manipulate, exploit and abuse them. [Click here to visit https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/grooming/](https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/grooming/)

**Non-recent abuse:** Non-recent child abuse, sometimes called historical abuse, is when an adult was abused as a child or young person under the age of 18.

[Click here to visit https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/non-recent-abuse/](https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/non-recent-abuse/)

**Child trafficking:** Trafficking is where children and young people are tricked, forced or persuaded to leave their homes and are moved or transported and then exploited, forced to work or sold. [Click here to visit https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-trafficking/](https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-trafficking/)

**Radicalisation:** A Is defined as the process in which people come to support terrorism and extremism and, in some cases, to then participate in terrorist groups. [Click here to visit https://www.nspcc.org.uk/what-you-can-do/report-abuse/dedicated-helplines/protecting-children-from-radicalisation/](https://www.nspcc.org.uk/what-you-can-do/report-abuse/dedicated-helplines/protecting-children-from-radicalisation/)

**Child Sexual Exploitation:** Child sexual exploitation (CSE) is a type of sexual abuse. When a child or young person is exploited they're given things, like gifts, drugs, money, status and affection, in exchange for performing sexual activities. It is also possible that children who go missing on a regular basis may be subject to CSE. [Click here to visit https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-sexual-exploitation/](https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-sexual-exploitation/)

**Child Criminal Exploitation:** Child Criminal Exploitation occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child Criminal Exploitation does not always involve physical contact; it can also occur through the use of technology.

## Responding to Disclosures of Abuse

Children rarely lie about being sexually abused. It is difficult for them to talk about it and when they do, the adult who they are trusting must listen attentively to their story. Often, the effect that the abuse has on them in later life depends on the reaction of the person they told first.

So, it is vital that you:

- Listen to the child;
- Be careful not to ask leading questions. A good suggestion is to simply ask “what happened next?”
- Reassure them that it is not their fault;
- Tell them that they are brave to talk about it;
- Tell the child that they will be protected.

The child may ask that you keep what they have told you confidential. It is impossible to agree to this so it may be helpful to say before the child starts that you can't keep it a secret because to do so would not protect them so you will have to do something about it.

It is most important to remember exactly what the child says. You should write detailed notes as soon after the discussion as possible.

You should tell the Social Worker as soon as possible. You may also find it helpful to talk things over with the Emergency Duty Social Workers if the child talks to you out of office hours. [Click here to visit https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/](https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/)

## How to Respond to Serious Incidents

In the event of a serious incident occurring it is essential that you contact the child's Social Worker (or duty worker) and your Supervising Social Worker (or duty worker) by telephone as soon as possible. A serious incident would include an accident involving a foster child, Police involvement and a child going missing.

If a serious incident occurs out of normal office hours you should contact the Emergency Duty Team to report the incident. Call the team on **01782 234234**

## Safe Caring

As Foster Carers you have responsibility for caring for some of Stoke-on-Trent's most vulnerable children and young people. The nature of the fostering task means that you place yourselves and your family at greater risk than the average family, in terms of complaints and allegations. We all (you and Stoke-on-Trent's Fostering Service) have a duty to protect both fostered children, and your own family, thereby creating a safe family environment in which to live.

The links below are designed as a guide to offer you some suggestions of areas to think about in relation to the unspoken rules and customs in your household that you and your family take for granted but that foster children have to learn. All families are different in the way they function – as foster families you have to recognise that children come into your homes as strangers and therefore your life-style and house rules have to be adapted to ensure you care in a safe and nurturing way.

You should discuss your family's safe caring rules with your Supervising Social Worker to ensure that your ideas are compatible with the Stoke-on-Trent's policy on safe caring. Safe Caring should form a part of the Annual Household Review process.

## Cyber Bullying

Social network sites can be used as a tool for bullying amongst children and young people. This can involve a person sending abusive or intimidating messages to an individual, or posting threats on their wall. As with any form of bullying, cyber bullying can be traumatic and isolating for the individual. It is also more difficult to get away from as it follows young people wherever they go. Encourage those in your care to be open with you about their relationships with their peers and be aware of changes in their behaviour that may suggest they are being bullied. Keeping the computer in a communal area will also help you keep an eye on things.

If a child or young person in your care is being bullied, remind them that they can block and "un-friend" those that are bullying them. If necessary, they can close their account and set up a new one which they keep more private. Encourage them not to respond to abusive messages. Some schools treat cyber-bullying as a school matter, so do contact them to see if they can offer support.

There is a lot of information for parents and carers to help deal with or prevent cyber bullying. Be responsible and inform yourself so you are aware and prepared.

For further information on cyber bullying;

[Click here to visit https://www.connectsafely.org/tips-to-help-stop-cyberbullying/](https://www.connectsafely.org/tips-to-help-stop-cyberbullying/)

[Click here to visit https://www.kidpower.org/library/article/prevent-cyberbullying/](https://www.kidpower.org/library/article/prevent-cyberbullying/)

## Social Networks and Grooming

Often, adults who want to engage children in inappropriate behaviour, or talk to them for sexual gratification will seek out young people who desire friendship. Social networking sites offer a route for them to target young people. They will often use a number of grooming techniques including building trust with the child through lying, creating different personas and then attempting to engage the child in more intimate forms of communication including compromising a child with the use of images and webcams. Child sex abusers will often use blackmail, bribery, promises of gifts or guilt as methods of securing a meeting with the child.

Children and young people in foster care may be particularly vulnerable to approaches from strangers or people they hardly know online because of their past experiences. This will be especially true if they feel isolated from their peers. They may lack normal boundaries. Being open with them about the potential dangers and supportive of attempts to improve their social skills will help and in some cases this will need to be very carefully monitored to prevent a vulnerable child from being “groomed”.

The internet is a powerful tool. It's fun. It's social. It's educational. And used correctly it will stay that way. So, if you want to know more information on how children can surf in safety [Click here to visit http://www.thinkuknow.co.uk/](http://www.thinkuknow.co.uk/)

If you are concerned about someone's behaviour online towards your child, you can report this to the Child Exploitation and Online Protection (CEOP) Centre at [Click here to visit http://www.ceop.police.uk/](http://www.ceop.police.uk/)

## The Virtual School

To encourage everyone involved in the education of children and young people to have high aspirations. We work with schools and settings to raise achievement so that each child or young person does the very best they can.

### What is our role?

- Seeking places in the best schools and settings and working to keep to a minimum any time spent without a school place
- Providing challenge and support to schools and settings
- Making sure that the educational provision is suitable for the young person, meets their needs and is of a high standard
- Intervening if things are not going as well as they should.
- Supporting children and young people to do well in education and training and ensuring that high quality support is available when its needed
- Speaking up to explain the issues and challenges facing our young people

- Working together with others to respond to and reduce the challenges resulting from changes of care placement or school
- Challenging barriers to good attendance
- Working with others to keep children and young people engaged and motivated to learn

## What do we actually do?

On a day to day basis we;

- Check and make sure every child and young person has a Personal Education Plan (e PEP) and that arrangements are reviewed every term
- Check the progress of children and young people through ePEP review documents and by attending as many PEP meetings as we can
- Contact teachers, Social Workers and others to follow up and check the progress of actions agreed
- Look into and provide support where is needed using Pupil Premium Plus funding and check that this is working effectively
- Check the daily school attendance of all Looked-After Children.
- Respond to schools, Social Workers and Foster Carers if they are concerned about any aspect of education
- Take immediate action if a young person is at risk of exclusion
- Work with our partners to find school placements and provide advice and guidance
- Ensure that Pupil Premium Plus is used effectively to improve educational out-comes.
- Provide guidance on individual situations to achieve the best possible results for the child or young person concerned
- Provide high quality training and support for our partners including Foster Carers
- Provide information, advice and guidance on legislation and best practice relevant to the education of looked after children.
- Strongly advocate for education at every opportunity

## Bullying

Bullying is defined in departmental advice published by the DfE as:

**‘Behaviour by an individual or group, repeated over time, that intentionally hurts another individual or group either physically or emotionally’**

Bullying is defined on the Government website and states that the four key characteristics of bullying are that it is:

- Repetitive and persistent
- Intentionally harmful
- Involving an imbalance of power
- Causing feelings of distress, fear, loneliness or lack of confidence

For definitions [Click here to visit https://www.gov.uk/bullying-at-school/bullying-a-definition](https://www.gov.uk/bullying-at-school/bullying-a-definition)



Many children experience bullying. Being considered 'different' in some way can lead to bullying behaviour from peers. Foster Carers should be aware that children who are fostered may be targeted because of this.

Bullying can be:

- Name calling, including use on mobile phones,
- Physical violence such as pushing, punching or pulling hair;
- Demands for money, food or homework,
- Threats,
- Isolating individuals from friendship groups

Watch out for signs that the foster child is being bullied, this could include new anxieties about school or activities, withdrawing from engaging with Foster Carers or expressions of anger. Contact the school and the child's Social Worker immediately if you are worried.

## Self-Harm

The National Institute for Clinical Excellence (NICE) describes self-harm as "Intentional self-poisoning or injury, irrespective of the apparent purpose of the act"

It is very difficult to stop the young person harming themselves unless they want to, and it is important to listen and to support them. It can be distressing and difficult to support a young person who self-harms. The child's Social Worker and your supervising support worker will offer support and advice and arrange specialised assistance when appropriate.

### Helpline – SANE

Telephone support line for individuals who self-harm call **0300 304 7000**

Opening times 4.30pm – 10.30pm daily [Click here to visit http://sane.org.uk/home](http://sane.org.uk/home) or [Click here to visit https://youngminds.org.uk/find-help/feelings-and-symptoms/self-harm/](https://youngminds.org.uk/find-help/feelings-and-symptoms/self-harm/)

## Eating Disorders

### Anorexia

A young person with anorexia will be terrified of being a "normal" weight. They will think about food all of the time, count the calories in every piece of food and work out elaborate ways of avoiding eating.

It can destroy their self-confidence and make them feel that the only thing they are good at is controlling what they eat. They may deny that they are ill and still feel fat although their body weight shows otherwise. Many sufferers are so scared that they lie about what they eat and angrily reject any offer of help.



## Bulimia

Bulimia is more difficult for others to notice as you tend not to lose weight so dramatically, or your weight will fluctuate. Even people close to you at home or work may not recognise the illness, so it can persist for many years undetected. As with anorexia, people who develop bulimia become reliant on the control of food and eating as a way of coping with emotional difficulties in their life.

Children as young as seven or eight can develop eating disorders and are at particular long-term risk from the effects of malnutrition. A child or young person may not be ready to face their problem and may reject all attempts of help.

## Further Advice

**Beat** (formerly the Eating Disorders Association) is an organisation that campaigns and challenges the stigma faced by people with eating disorders and that gives people the help and support they need.

[Click here to visit https://www.beateatingdisorders.org.uk/](https://www.beateatingdisorders.org.uk/) or [Click here to visit https://youngminds.org.uk/find-help/feelings-and-symptoms/eating-problems/](https://youngminds.org.uk/find-help/feelings-and-symptoms/eating-problems/)

## Substance Misuse

(The following information has been taken from FRANK, Drugs and Young People in Foster Care produced in collaboration with The Fostering Network).

Discussing issues around drugs isn't always easy, but children and young people who talk openly about drugs are able to make informed choices. As a Foster Carer you can give young people in your care the opportunity to do this and help them to get sound advice from a trusted source.

Make sure that your home is a safe environment for children and young people. Any potentially dangerous substances should be kept out of reach of children and young people in your care. These are household products that give off strong fumes and can be inhaled, such as butane or propane gases, glues, aerosols, lighter-fluid, nail polish remover or paint.

Training in relation to Drug and Alcohol Awareness will be made available for Foster Carers, speak to your Supervising Social Worker about this. The aim of any course will be to help Foster Carers to understand their role in recognising substance misuse amongst children and young people.

## Other Useful Information

Talk to Frank for confidential, credible information about drugs:

[Click here to visit https://www.talktofrank.com/](https://www.talktofrank.com/)

For confidential advice about alcohol contact Drinkaware. Tel: **0207 766 9900**

[Click here to visit https://www.drinkaware.co.uk/alcohol-support-services/](https://www.drinkaware.co.uk/alcohol-support-services/)

# Soiling and Bedwetting

Soiling happens when a child does not use the toilet to pass a bowel motion. They may soil their underwear or go to the toilet in inappropriate places. This sort of behaviour is not uncommon in children who are not completely “toilet trained”. You should help to establish a regular toilet routine.

If the child is not constipated and they are soiling or smearing their faeces there may be a psychological reason. Sometimes a child who has been sexually abused or has suffered other trauma may behave in this way. It is important that specialised support and advice is sought in this situation.

## Bedwetting (enuresis)

The first steps in dealing with the problem are purely practical. You should put a waterproof mattress protector on the mattress. Make sure that the child does not have a large drink before going to bed. It is essential that the child is not made to feel guilty, they can be involved in the changing of the bed to assist in helping them to feel that they have some control over the situation.

Useful information on bed wetting and soiling can be found [Click here to visit https://www.eric.org.uk/blog/understanding-soiling-and-wetting-as-a-foster-carer](https://www.eric.org.uk/blog/understanding-soiling-and-wetting-as-a-foster-carer)

# CHAPTER FOUR

## FINANCES

### Current Allowances

#### Fostering – Childrens Allowances

The Foster Carer allowances from 1<sup>st</sup> April 2021 are set out below.

<b>Amount paid (birth – 2 years)</b>	<b>Amount paid (3 – 4 years)</b>	<b>Amount paid (5 – 10 years)</b>	<b>Amount Paid (11 – 15 years)</b>	<b>Amount Paid (16 years plus)</b>
£134.95	£138.04	£152.04	£183.33	£222.95

Parent and Child allowances: £550 plus skills payment

Therapeutic Step-Down Foster carers: £500 plus the child's allowances

These are linked to the age of the child.

Please note that the figures do not include annual Festival & Birthday Allowances, which will both be paid at one week's child allowance.

The weekly Fostering allowance is to be used by the Carer to cover all but the most exceptional costs of Fostering, including the costs directly associated in providing care for the child i.e. buying food, clothing, contributing towards housing costs, utility bills. It is expected that the whole of the allowance is either used for the care of the child or saved for the child.

### Pocket Money

Foster Carers have requested guidance on the amount of pocket money that young people should receive. The table below recommends the amount of pocket money to be given directly to the young person to spend as they wish. The lower amount is where carers are paying for a range of activities and/or outings. Where Carers are not funding such activities, they should provide the higher amount.

Please note, at the request of the child/young person, pocket money can be paid into a savings account.

Age Range	Minimum Amount of weekly Pocket
5 to 6 years	£1 to £2
7 to 8 years	£2 to £3
9-10 years	£3 to £5
11-12 years	£5 to £7.50
13-14 years	£7 to £10
15 + years	£10 to £15

## Fostering Skills Payment

Stoke-on-Trent City Council believes in ensuring that all our Foster Carers develop their skills on an on-going basis, so they are well trained and equipped to perform the complex tasks that are required of them in their day to day care of children and young people. We strive for the highest standards and Foster Carers are rewarded for their skills through a system of payment levels.

The Fostering Skills Payment is paid per child and is dependent on the agreed skills level of Carers. These are the Weekly Payment Per Child in Placement for each skill level.

Skill level 1. £90 for 1st placement and then £10 extra per child

Skill level 2. £180 for 1st placement and then £20 extra per child

Skill level 3. £270 for the 1st placement and then £30 extra per child

### How to achieve each level:

Skills level 1 – is achieved once the pre-approval training and 4 workshops are completed during the assessment process. All carers once approved are at skills level 1.

Skills level 2 – attend 3 mandatory trainings, we also advise that support groups are attended.

Skills level 3 – Level 3 Diploma.

Attending 3 out of 4 quarterly catch ups is also a mandatory requirement to maintain your skills payment.

## Costs covered by the Fostering Allowance

<b>1. 24-hour care and accommodation</b>
Accommodation, food and safe care that meet the Child or Young Person's needs.
<b>2. Basic clothing and school uniforms (Summer and Winter)</b>
School uniform, general sports activity clothing and other general clothing. If the child changes school, starts a new school, or needs replacement uniform within first 4 weeks of placement, this will be reimbursed.

Any replacement clothing including special requirements, e.g. unusual sizes or for children or young people with disabilities.

Funding of up to £100 for emergency clothing can be agreed by the Supervising Social Worker in situations where the child has come without sufficient clothing. Children who have been in care a reasonable amount of time and are moving from another Carer should not need this and all efforts will be made to retrieve the child's belongings from the previous Carer/provider. Possessions should not be placed in black bin liner type bags

### **3. Equipment and resources**

- Individual sports or hobby tuition and equipment.
- Stationery, calculators, school books drawing instruments, school bags, additional materials to support school or education activities including but not limited to arts and crafts materials and foodstuffs to support food technology lessons.
- Children and Young People of school age shall have access to a computer in the home for education, homework and recreational purposes. It shall be connected to the internet and be appropriately safeguarded against the use of inappropriate material.
- Resources relating to cultural/religious needs: Negotiation with the Fostering service if cost is high or frequent.
- Ensuring appropriate safeguarding measures for all resources and equipment, including future developments with changing technology e.g. Wi-Fi.

### **4. Holidays and Educational Trips for Children and Young People**

- Children and Young People accompanying their Foster Carers on family holidays.
- Any family outings.
- The cost of any day trips as part of the Child or Young Person's schooling. Reimbursement for school trips that are more leisure-based can be negotiated with the Service Manager for the case-holding Team.

### **5. Contact**

Foster Carers should ideally facilitate, transport and promote contact with siblings, parents and relatives as specified in the child or young person's Care Plan. Foster Carers are eligible to receive Fostering mileage (subtracting 10 miles per day) for contact transport which is part of the child's agreed care plan.

### **6. Insurance**

It is the responsibility of Foster Carers to be appropriately insured for any loss or damage to vehicles or property that arise in relation to their Fostering duties. If claims are excessive, discussion needs to take place with the Fostering Service.

### **7. Pocket money, birthday and festival gifts to Children and Young People**

- Pocket Money – the child should be free to choose, within reason, how this money is spent.
- Birthday and festival allowance is to cover the child's gift, party and additional festivities attended with the Foster family. The money should also enable the child to

buy gifts for their family. Unspent birthday or festival allowances should be returned to the service.
<b>8. Telephone calls</b>
Within reason and in agreement with the child's Social Worker, calls to family members and friends are to be included in the cost of care. These must be within reason and agreed with the Social Worker. Any costs associated with the use of a mobile phone should be agreed with the Social Worker.
<b>9. Toiletries and Cosmetics</b>
<ul style="list-style-type: none"> <li>• All toiletries, including skin and hair care products.</li> <li>• The cost of a regular haircut. For special hair care or toiletry requirements the Fostering Service may contribute.</li> </ul>
<b>10. Transport/Mileage</b>
<ul style="list-style-type: none"> <li>• Foster Carers are expected to provide day-to-day transporting (whether by car, train, bus or other form of transport) of children and young people placed with them.</li> <li>• Day to day transporting includes school runs within the catchment area of the placement, transport to activities, clubs, medical and dental appointments, therapy sessions, anything that would be considered part of caring for a child in care.</li> <li>• If the Foster Carer uses the train or other type of transport to accompany a child anywhere besides family contact or schools outside the catchment area, then the Foster carer can make a claim however £4.50 will be deducted from the journey cost per day.</li> <li>• Mileage to and from Foster Carer training will be paid at £0.50 per mile for the first 50 miles and then £0.18 thereafter without the deduction of the first 10 miles.</li> <li>• All other additional mileage can be agreed by the Fostering Team Manager in accordance with the above policy.</li> </ul>
<b>11. Glasses and contact lenses, hearing aids and other physical aids</b>
<ul style="list-style-type: none"> <li>• Provision of glasses, contact lenses, hearing aids and other physical aids if required, including replacement in the event of accidental damage or loss can be negotiated with Fostering and child's social work team on a case by case basis.</li> </ul>

## Savings for Children/Young People

From April 1<sup>st</sup> 2021, all Foster Carers will be asked to save £5 per week, per child Looked-After. This money will come from the activities allowance paid to each Foster Carer for each child. All children are expected to have a bank account as this is part of their identity. If your child does not have a bank account, carers are expected to save this money until such time an account can be opened. Where children do have a bank account, Foster Carers will be responsible for ensuring the safety of the money and how it is banked. The child's allocated Social Worker will also monitor the account. The Supervising Social Worker will discuss savings in supervision.

Once a child has been in the care of the local authority for one year, they will have a Junior ISA, or equivalent account opened for them. The Junior ISA account is monitored by The Share Foundation and Stoke-on-Trent City Council have agreed to matched funding the amount that the child will receive. This is set at £150 and will be held for the child until they are 18 years of age.

[Click here to visit https://www.sharefound.org/](https://www.sharefound.org/)

## Other Fostering Payments

Supervising Social Workers can authorise up to £100 to cover costs of emergency clothing/supplies if the child arrives in a Carer's home without any possessions; as long as a receipt is provided and added to the finance form.

### Children Who Must be Placed Alone

Whereby a Carer is approved to look after more than one child but agrees to care for a child who needs to be the only child under the age of 18 in the home due to risks to other children because of potentially harmful behaviour (such as physical, sexual or emotional). In this instance, a solo placement fee of £100 per week will be paid in recognition of the Carers being unable to receive Fostering payments for another child being placed.

### Children with Complex Health Care Needs (including Mental Health) and/or Disabilities

Whereby the child with a significant disability or complex health care need that requires a greater level of supervision, support and care to **any other Looked-After child of the same age**. In this instance, an additional fee of £100 per week will be paid.

### Respite Payments

Whilst the child is receiving respite, all payments to the main Carer for that child will cease and the respite Carer will receive the full allowance applicable to the placement, pro rata.

### Festival Payments

For Festival's, payment will be the equivalent to one week's age-related child's allowance, per child placed. The qualifying period for this is December 25<sup>th</sup>. Payment will be made four weeks in advance. Christmas is the default payment, please advise your Supervising Social Worker if you want this paid for another religious festival.

The qualifying period is the actual date of the festival, payment will be made four weeks in advance.

## Birthday Payments

For birthday's, payment will be the equivalent to one week's age-related child's allowance, per child placed. The qualifying period for this is the child's birthday. Payment will be made via payroll prior to the child's birthday.

## Overpayment of Allowances

Although every effort is made to ensure no overpayments are made unnecessarily, overpayments do occur due to the fact that Stoke-on-Trent Children's Services pay allowances partly in advance. Foster Carers will be expected to repay any overpaid allowances.

It is the Foster Carer's responsibility to check each fortnightly statement and to notify their Supervising Social Worker if an overpayment has been made.

## Recruitment payments ('refer a friend fee')

£500 will be paid to a foster carer introducing a family member or friend to foster for Stoke-on-Trent City Council. The amount will be payable once the person recruited has been approved as a foster carer for Stoke-on-Trent City Council.

## Training Payments (\*renewed\*)

Some foster carers will be invited to assist the fostering service to deliver particular training courses (Skills to Foster, Training Workshops etc.). A fee of £10 per hour will be provided, with prior agreement and permission from the fostering manager.

## Long service retention payments

- £100 will be paid to foster carers who have been fostering for Stoke for **5 years continuously**, payable after a positive annual review in the fifth year of fostering.
- £200 will be paid to foster carers who have been fostering for Stoke for **10 years continuously**, payable after a positive annual review in the tenth year of fostering.
- £250 will be paid to foster carers who have been fostering for Stoke for **15 years continuously**, payable after a positive annual review in the fifteenth year of fostering.
- £300 will be paid to foster carers who have been fostering for Stoke for **20 years continuously**, payable after a positive annual review in the twentieth year of fostering.
- £350 will be paid to foster carers who have been fostering for Stoke for **25 years continuously**, payable after a positive annual review in the twenty-fifth year of fostering.
- £500 will be paid to foster carers who have been fostering for Stoke for **30 years continuously**, payable after a positive annual review in the thirtieth year of fostering.

**Foster Carers must make claims for reimbursement of expenses within the same financial year that the expense was incurred.**

**Disclaimer: Please note that this document is intended as guidance only and each request will be considered within the context of its individual circumstances.**



# Tax Payments

Foster carers are responsible for paying their own income tax and national insurance contributions and must contact HM Revenue & Customs to register themselves as self-employed when they are approved at panel.

There is a national agreement regarding tax allowances for approved foster carers. During the tax year, carers will receive a fixed tax allowance, dependent upon the child/young person's age when placed with the carer in that year. A tax statement will only be sent to carers if a taxable amount is required to be paid for payments received above this allowance.

The Fostering Network and local HM Revenue and Customs office can provide full current information on the allowances which can be claimed.

Further information can be found [Click here to visit http://www.hmrc.gov.uk/individuals/foster-carers.htm](http://www.hmrc.gov.uk/individuals/foster-carers.htm) or by contacting HMRC newly employed helpline on 0845 915 4515 to register yourself as self-employed. You can also contact fostering network on **020 7620 6400** for further advice.

# Household and Buildings Insurance

Foster Carers are responsible for notifying their insurance companies who provide contents, buildings and car insurance that they are approved Foster Carers.

There may be occasions when you can make a claim to Stoke-on-Trent City Council for the replacement of property or possessions if there has been wilful damage by a Foster child. This will not cover situations where a claim can be made against an existing buildings or contents insurance policy.

If you wish to claim in these circumstances, you should contact your Supervising Social Worker and not destroy or throw away the damaged item until they have been seen.

# Loans

There are situations where it is possible for an interest free loan to be given in order to enable a Foster Carer to adapt or extend their property for the purposes of Fostering. There are specific criteria for considering such loans. If you would like to consider applying for a loan you should discuss the matter with your Supervising Social Worker. They will then advise you of the process and relevant procedures that will need to be followed.

# State Pension/Tax for Foster Carers

Qualifying care relief for Foster Carers

[Click here to visit https://www.gov.uk/government/publications/qualifying-care-relief-foster-carers-adult-placement-carers-Connected-carers-and-staying-put-carers-hs236-self-assessment-helpsheet/hs236-qualifying-care-relief-foster-carers-adult-placement-carers-Connected-carers-and-staying-put-carers-2019](https://www.gov.uk/government/publications/qualifying-care-relief-foster-carers-adult-placement-carers-Connected-carers-and-staying-put-carers-hs236-self-assessment-helpsheet/hs236-qualifying-care-relief-foster-carers-adult-placement-carers-Connected-carers-and-staying-put-carers-2019)

More information can be found [Click here to visit  
https://www.moneyadviceservice.org.uk/en/articles/](https://www.moneyadviceservice.org.uk/en/articles/)

## The Use of DLA by Stoke-on-Trent Foster Carers

Disability Living Allowance (DLA) for children may help with the extra costs of looking after a child who is under 16 and who has difficulties walking or needs more looking after than a child of the same age who doesn't have a disability. It is awarded based on mobility and care needs, not on diagnosis. DLA is not means tested.

To be eligible, the child's disability or health condition must mean one or both of the following apply:

- they need more looking after than a child of the same age who doesn't have a disability.
- they have difficulty getting about.

They must have had these difficulties for at least 3 months and expect them to last for at least 6 months. If they're terminally ill (i.e. not expected to live more than 6 months), they don't need to have had these difficulties for 3 months.

Disability Living Allowance is split into two components; a care component and a mobility component. The care component is paid at three different levels (low, medium or high) and the mobility component is either paid at high or low.

From the age 16 (to 64 years) DLA no longer applies, it is replaced by a Personal Independence Payment (PIP)

### Care component

To qualify for DLA care component, the child's care needs must ultimately stem from a disability and they must need substantially more help than a child of the same age without a disability. The rate the child gets depends on the level of looking after they need e.g:

The lowest rate care component is paid if the child needs help with personal care for a 'significant portion of the day'. This means for at least an hour on most days – for example, help with washing and getting dressed in the morning. This help may be given all at once or be spread out through the day.

The middle rate care component is paid if the child has either 'day-time needs' or 'night-time needs'. Day-time needs means they need either 'frequent' help with personal care, in connection with their bodily functions.

This means several times throughout the day, or continual supervision throughout the day to avoid substantial danger to themselves or others.

Continual supervision means frequent or regular supervision, rather than non-stop supervision.

Night-time needs mean that during the night the child requires either 'prolonged' help with their personal care, (this means for at least 20 minutes), or 'repeated' help with personal care during the night. This means at least twice, or to avoid danger to themselves, or others, another person needs to be awake and watching over them for either a 'prolonged' period or at 'frequent intervals' (this means more than twice).

The highest rate care component is paid if the child has day-time and night-time care needs.

## **Mobility component**

The lower rate mobility component is for children who can walk but who need someone to supervise or guide them. It is paid from five years of age. The child may still qualify even if they can get around places they know well, because the test is whether they need guidance or supervision in places they don't know well. It is often claimed for children with visual or hearing impairments, or learning disabilities, but others can qualify. To get the lower rate, the help the child needs with supervision and guidance must be greater than that for a child of the same age without a disability.

The higher rate mobility component is for children who are unable to walk or are 'virtually unable to walk'. This can be paid from the age of three years. Things that are taken into account in deciding if the child is virtually unable to walk include the speed, length of time and manner of walking, as well as the distance they can cover before they start to experience severe discomfort (for example, breathlessness or pain). It is also for children:

- who are both deaf and blind, or
- whose health would deteriorate with the exertion of walking, or
- who have severe mental impairments
- who have no legs or feet, or
- who have a severe visual impairment.

If the child in your care is in receipt of the higher rate mobility component and placed with you on a permanent basis, you may choose to exchange the payment for a car via the Motability scheme. You can find out more information [Click here to visit www.motability.co.uk](http://www.motability.co.uk)

Please note that Stoke-on-Trent will not be able to assist in financing the deposit for a Motability vehicle.

## **What to do if you believe the child you are looking after qualifies for DLA.**

If the child in your care is already in receipt of DLA their Social Worker should be involved in discussions with the parent to arrange transfer of the DLA to you (the Foster Carer). The Social Worker needs to advise the parents to notify DWP that the child is no longer in their care. In the same way, if a child moves from one Foster Carer to another, the Foster Carer must notify DWP and any DLA money transferred to the new carer.

If the child in your care is not already in receipt of DLA, you should, in the first instance, speak to the child's Social Worker to establish if a claim has already been submitted and/or to request assistance with making an application on the child's behalf. As a Foster Carer, you are entitled to apply on the child's behalf with the knowledge of the child's Social Worker. The child does not need to have a diagnosis prior to application. It is important to submit a claim for DLA as soon as possible as it cannot be backdated. The claim will apply from the date the form is received.

The application and any subsequent appeal process can be draining and complicated. Please make your Supervising Social Worker and the child's Social Worker aware if you need any additional support in completing the application.

It may also be possible to gain practical help in completing the documents from the DWP, Citizens Advice Bureau or Contact a Family (a charity that supports the families of disabled children) [Click here to visit http://www.cafamily.org.uk](http://www.cafamily.org.uk)

## Payment Rules

DLA is paid to the child, not the carer but if the child is under 16 the carer acts as an appointee.

The carer is expected to open a separate bank account, in the child's own name, into which the DLA will be paid.

The money is not intended to be saved for the child for use in later years as this could result in them being penalised for having large sums of savings. E.g, if a child returns to parents and there is more than £3000 in an account, this will affect any benefits claimed by the parents. For a child reaching 16, a sum of more than £8000 will affect their claim for income support and housing benefit.

There are no rules set by the DWP as to how DLA should be spent, however it is intended that the money be used to enhance the child's life. Examples of how the money could be spent are:

- Costly activities; horse riding, swimming lessons, after school activities.
- Additional equipment needed due to disability and funding above the expectation of a "normal Foster Carer" e.g, the third activity of the week.
- Provision of an escort to enable social events be attended.
- Extra helper for an outing or holiday.
- Taxi fares for days out.
- Accessible holidays. (could cover the family's expenses and once the fostering allowance has been used)
- Mini breaks away to accessible places.
- Individual equipment i.e. computer/communication aids.
- Specialist toys to meet the child's needs.
- Soft play equipment
- Anything that the carers feel will improve the child's life can be discussed with the Social Workers.

Your Supervising Social Worker will frequently ask to see evidence of how the DLA is being used. It is important that Foster Carers record what DLA the child is receiving and how it is being spent within their Foster Carers diary. DLA may also be discussed in the child's Looked After Review.

Where appropriate a child/young person should know they are in receipt of DLA and have a say in how it is used.

If it has been agreed that the money should be saved, this must be agreed by the child's Social Worker and IRO. It should be saved within an account which is clearly separate from that of the Foster Carer and must be in the child's name. This should not be in place of, or in the same account as the ISA savings Foster Carers are requested to keep for children which are matched by the Local Authority.

For more information about DLA [Click here to visit http://www.gov.uk/disability-living-allowance-children](http://www.gov.uk/disability-living-allowance-children) or [Click here to visit http://www.cafamily.org.uk](http://www.cafamily.org.uk)

## **Carers allowance**

If you are the main carer of a disabled child for more than 35 hours a week and the child is in receipt of DLA at middle or higher rate care component, you are eligible to apply for carers allowance (as long as you earn less than £110 a week). Your fostering allowances are not taken into account.

For more information and to apply call **0345 608 4321** or [Click here to email cau.customer-services@dwp.gsi.gov.uk](mailto:cau.customer-services@dwp.gsi.gov.uk)

## **Blue Badge Scheme**

If you are in receipt of DLA and aged 3 or over you may be entitled to a Blue Badge. The Blue Badge scheme helps those with severe mobility problems, who have difficulty using public transport, to park close to where they need to go. Charges and entitlement rules for the Blue Badge scheme vary across the UK.

For more information: [Click here to visit https://www.gov.uk/blue-badge-scheme-information-council](https://www.gov.uk/blue-badge-scheme-information-council)

To apply online [Click here to visit https://www.gov.uk/apply-blue-badge](https://www.gov.uk/apply-blue-badge) or contact your local council.

## **Criminal Injuries Claims**

In rare cases, and through discussion with the child's Social Worker, it may be decided that you can make a criminal injuries claim on behalf of the child in your care. You will need to make a claim through The Criminal Injuries Compensation Scheme, a government funded scheme designed to compensate blameless victims of violent crime in Great Britain. The Criminal Injuries Compensation Authority (CICA), administer the Scheme and decide all claims.

In order to make the claim, you can get advice from your local Citizens Advice service, a law centre, or from a welfare rights organisation.

You can find more information [Click here to visit https://www.gov.uk/guidance/criminal-injuries-compensation-a-guide](https://www.gov.uk/guidance/criminal-injuries-compensation-a-guide)

# CHAPTER FIVE

## POLICIES AND PROCEDURES

### Statement of Purpose

Stoke-on-Trent Fostering Services has produced a Statement of Purpose that provides a clear statement of the aims and objectives of Fostering Services and sets out the strategy for meeting those aims and objectives.

### Fostering National Minimum Standards

The Standards are issued for use by Ofsted, who take them into account in the inspection of Fostering services. The Standards may be used by providers and staff in self-assessment of their services; they provide a basis for the induction and training of staff and Carers; they can be used by parents, children and young people as a guide to what they should expect a Fostering service to provide and do as a minimum; and they can also provide guidance on what is required when setting up a Fostering service.

These National Minimum Standards are underpinned by the 2011 Regulations. Statutory guidance for Fostering services - Children Act 1989 Guidance and Regulations Volume 4: Fostering Services - sets out the wider context for local authorities, as providers and commissioners of Fostering services. This is not an exhaustive list, and other legislation and guidance is also be relevant, for example, legislation covering such matters as health and safety, fire and planning requirements.

[Click here to visit](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/192705/NMS_Fostering_Services.pdf)

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/192705/NMS\\_Fostering\\_Services.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/192705/NMS_Fostering_Services.pdf)

The National Minimum Standards does not mean standardisation of provision. The Standards are designed to be applicable to the wide variety of different types of Fostering service. They aim to enable, rather than prevent, individual providers to develop their own particular ethos and approach based on evidence of the most appropriate way to meet the child's needs. Many providers will aspire to exceed these standards and develop their service in order to achieve excellence.

It is intended that the Standards will be used, both by Fostering service providers and by Ofsted, to focus on securing positive welfare, health and education outcomes for children, and reducing risks to their welfare and safety. All providers and staff of Fostering services should aim to provide the best care possible for the children for whom they are responsible, and adhering to the Standards is an essential part, but only a part, of the overall responsibility to safeguard and promote the welfare of every individual child.

A handbook must be provided under standard 21.10.

**'On approval, Foster Carers are given information, either a handbook or electronic resources, which cover policies, procedures (including with regard to allegations), guidance, financial information, legal information and insurance details. This information is updated regularly.'**

The statements below explain the important principles, which underpin these Standards.

The child's welfare, safety and needs are at the centre of their care.

- Children should have an enjoyable childhood, benefiting from excellent parenting and education, enjoying a wide range of opportunities to develop their talents and skills leading to a successful adult life.
- Children are entitled to grow up in a loving environment that can meet their developmental needs.
- Every child should have his or her wishes and feelings listened to and taken into account.
- Each child should be valued as an individual and given personalised support in line with their individual needs and background in order to develop their identity, self-confidence and self-worth.
- The particular needs of disabled children and children with complex needs will be fully recognised and taken into account.
- The significance of contact for Looked-After children, and of maintaining relationships with birth parents and the wider family, including siblings, half-siblings and grandparents, is recognised, as is the Foster Carer's role in this.
- Children in Foster Care deserve to be treated as a good parent would treat their own children and to have the opportunity for as full an experience of family life and childhood as possible, without unnecessary restrictions.
- The central importance of the child's relationship with their Foster Carer should be acknowledged and Foster Carers should be recognised as core members of the team working with the child.
- Foster Carers have a right to full information about the child.
- It is essential that Foster Carers receive relevant support services and development opportunities in order to provide the best care for children.
- Genuine partnership between all those involved in Fostering children is essential for the NMS to deliver the best outcomes for children; this includes the Government, local government, other statutory agencies, Fostering service providers and Foster Carer.

## Going Missing from Care

When a child/ young person is placed with a Foster Carer there will a discussion at the Placement meeting as to the likelihood and risks of the child/young person going missing. The young person's view and the parents/Carer's view will be sought, and actions will be agreed that will need to be taken in the event of the young person going missing.

If it is assessed that there is a risk that the young person may go missing an action plan will be agreed and kept under review and discussed at the young person's Looked-After child review.

## Missing

In this context refers to a child or young person, who is absent from their home or placement without permission for any length of time where their age and experience, background and ability make this a concern; who has been forced to leave by their parents or Carers, or whose whereabouts are unknown.

## Unauthorised absence

Some children absent themselves from home or care for a short period and then return, often their whereabouts are known or may be quickly established through contact with family or friends or are unknown, but the child is not considered at risk. Sometimes children stay out longer than agreed as a boundary testing activity, which is well within the range of normal teenage behaviour. These children have taken “unauthorised absence” and would not usually come within the definition of “missing” for this guidance. If a child’s whereabouts are known, then they cannot be “missing”. Unauthorised absences must be carefully monitored as the child may subsequently go missing. Children/young people should be reported as absent without permission /agreement.

## Immediate actions if a child/young person is missing

If a child or young person is thought to be missing, immediate efforts should be made to try and locate him/her. Foster Carers are expected to undertake the following basic steps to try and find the child if considered safe to do so:

- Search bedroom / house / outbuildings / vehicles;
- Contact known friends and relatives where child/ young person may be;
- Check mobile phone, email and internet sites i.e. Facebook;
- Visit locations that the child is known to frequent;

If the absence falls within the definition of missing, without delay Foster Carers must notify: The Police; Parents or guardians and those who have parental responsibility; Social Worker and the accountable Team Manager; Emergency Duty Team if out of hours and the Social Worker and accountable Team Manager the next working day.

The EDT contact telephone number is **01782 234234**.

EDT operate between 17:00pm and 9am Monday to Friday, and all-day Saturday, Sunday and Bank Holiday; Supervising Social Worker;

Responsible authority for the child if the child has been placed by another Local Authority.

If the absence falls within the definition of **unauthorised absence**, then the Foster Carers should review the risk factors regularly and, in any case, if the period of absence continues for six hours, further consideration should be given as to whether the absence should fall within this guidance. **Six hours should be regarded as the maximum period before reconsideration and in many cases, a shorter period would be more appropriate (approx. 2 hours).**

**When reporting the child/young person missing to the police, you will need the following information:**

- Next of Kin;



- A description of the child and their clothing;
- Details of when the child was last seen and with whom;
- A recent photograph (it is important to have an up to date photograph of each child/young person you Foster)
- Family address;
- Known associates and addresses frequented;
- Personal details of the child; include full name, date of birth and nicknames;
- Any previous history of absconding/absenteeism and circumstances of where found;
- The names and addresses of the child's GP and dentist;
- Any factors which increase the risk to the child;
- Any illnesses or medication – when is medication required, if missed what are the effects
- Any notes/letters been left? Are any clothes missing?
- Does the missing child have a phone with them, if so service provider details and number?
- Does the child have any money?
- Has a search of the premises been completed?

## **Record Keeping**

It is essential that the Foster Carer keeps a record in the Daily log of all information relating to the child going missing.

## **Child/ Young Person's Return**

It is important that the child/young person be given a non-judgemental welcome on their return. The Foster Carer must inform the Police, the child's Social Worker, their Supervising Social Worker and EDT, if out of hours.

On the child's return their medical condition must be discussed with them and they should be offered a visit to the G.P. If they are in need of any medical attention it should be arranged promptly.

The child/young person will be offered the opportunity to speak with an independent professional of their choice. The interview will assess their needs with regard to advice; information and support.

## **Health of Children Looked-After**

The National Minimum Standards, (Standard 6) Outcome for Promoting Good Health and Wellbeing requires Children live in a healthy environment where their physical, emotional and psychological health is promoted and where they are able to access the services to meet their health needs.

[Click here to visit https://www.minimumstandards.org/fost\\_six.html](https://www.minimumstandards.org/fost_six.html)

As a Foster Carer you should encourage and support each child in achieving their optimum health. This includes providing a home environment which actively encourages and supports a healthy lifestyle and gives attention to diet, personal hygiene and health promotion.

You should ensure that the child attends health appointments and clinics as necessary, including dental and optician appointments. It is essential that you play your part in contributing to the child's health care plan and Care Plan. Older children should be positively encouraged to access all appropriate health services.

We will make sure that you are provided with relevant and up to date training on health and first aid to assist you in meeting the health needs of the child or young person. Specific guidance and training will be provided when caring for a child with complex health needs.

## **G.P Registration**

It is the Foster Carers responsibility to register a child placed with them with their General Practitioner.

## **Health Assessments**

When a child is placed with a Foster Carer the child's Social Worker will arranged for an Initial Health Assessment for the child, sometimes referred to as an IHA. The Initial Health Assessment is undertaken by a Specialist Paediatrician or Specialist Advanced Nurse Practitioner at the Child Development Centre at University Hospital of North Midlands. This health assessment should be completed within 20 days of the child or young person coming into care.

The social worker will share information with health and ensure that consent is gained from the birth family to access and share relevant birth, personal and family history that is relevant to the child or young person.

The health services that the young person is known to will also be advised of the child coming into care so that they can share new address, relevant health information and also arrange to transfer the care of them to another professional if needed, such as a health visitor or school nurse.

The health assessments must be child focused. Attention should be paid to the specific needs of the child, including looking at issues of disability, race, culture and gender. There should be sufficient time and preparation for the child to be given a clear understanding of the process and what is involved depending upon their age or level of ability. Sensitivity to the child's needs, wishes and fears is essential and all those involved with the care of the child should be included, particularly birth parents.

There should be a health assessment undertaken for the child or young person every 6 months if they are under 5 years old and then every 12 months if they are over 5 years old.

These health assessments are undertaken by qualified specialist public health nurses who are from school nursing or health visiting backgrounds.

The coordination of the requests for the review health assessment, also known as an RHA is completed by the Looked After Children Health team. This is a team of nurses and administration assistants who will ensure that the request is sent to the most appropriate service. They will also ensure that the carer will get a copy of the completed assessment health care plan as well as sending a copy of the assessment to the GP for their records.

The Looked after children health team can be contacted via the named nurse on **01785 301749**.

The looked after children health team will complete the health assessments for all children under the age of 5 years old. For those children over the age of 5 their assessment will be completed by the Stoke on Trent School nursing targeted intervention service.

If there are any health issues between health assessments there is a 0-19 health service within Stoke on Trent that would formally have been known as a Health Visiting or School Nurse service. They can be contacted via their Hub or via Chat health at:

Stoke Hub (covering all localities in Stoke-on-Trent)

Telephone Number: **0300 404 2993**

Chat Health Text Messaging Service For young people living in Stoke-on-Trent, text: **07520 615723**

Either the Foster parent or young person may contact the Service for advice.

## **Administering medication and keeping records**

It is Stoke-on-Trent Fostering Service policy to equip Foster Carer's with the knowledge and skills to be able to manage the safe handling, storage and administration of medication. Foster carers can also discuss this further with their Supervising Social Worker.

## **Storage of Medication**

The Foster Carer must have a letter from the child's GP or Consultant detailing all prescription medication required for the child, to include name of medication, reason, dosage or frequency.

If the child requires emergency medication (e.g. diazepam for status epilepsy) a separate letter from the prescribing GP or consultant must detail the circumstances in which it must be administered and what to do if further doses or treatment are required.

All medication must be kept in a locked cabinet/box or box in fridge if required.

Medication must be kept in the original packaging with the following details on the pharmacist label; child's name, date of birth, name of medication, dosages and times of administration and pharmacist signature (A pharmacy label with "as directed" is not acceptable).

## **Recording the Administration of Medication**

A medication-recording sheet must be completed for each individual child. The record has dose, time and signature for each administration. This is contained in the Foster Carer's diary. The following medication must be recorded on the medication-recording sheet:

- Prescribed medication taken on a daily basis. This will include epilepsy medication, behaviour management medication (Ritalin etc) and courses of antibiotics
- Emergency medication, such as rectal Diazepam, PRN medications, such as hay fever remedies, suppositories or laxatives.
- Non-prescribed medications, such as Paracetamol or Calpol.
- Medication self-administered by the Looked-After child.

## **Errors in Administering Medication**

If an error is made in the administration of any medication, the Foster Carer must:

- Seek immediate advice from the prescribing doctor or GP. If unable to contact the doctor, the Carer must contact an Accident and Emergency Department or use a local NHS walk in centre.
- Inform the child's Social Worker and Supervising Social Worker (duty if unavailable).
- Record on the medication sheet and in the Foster Carer diary.

## **Permission for medical treatment**

The issue of giving permission for medical treatment for a child or young person will be discussed at the placement planning meeting. It is important that you are aware of what level of treatment you are able to give permission for and this will be recorded in the placement agreement. The decisions will be made based on the legal status of the child or young person and also on their age. It is important to listen to the young person's wishes and feelings regarding their healthcare. A young person aged 16 or 17 years old is presumed by law to be competent to give consent for their own treatment.

## **Other medical matters e.g. dentists, opticians etc. Dental Care**

It is essential that Foster children have dental check-ups and appropriate treatment. It can be difficult to register with an NHS dentist; all efforts should be made to register with an NHS dentist within a reasonable travelling distance. If this proves impossible the Foster Carer should discuss with the child's Social Worker, the issue of private dental care and treatment.

## **Optical Care**

The child's health plan will identify a child's needs for eye care. The Foster Carer is responsible for taking the child to hospital or optician appointment.

## **Immunisations**

It is expected that children in Foster Care should receive the full range of immunisations. Where the birth parent of an accommodated child objects to a certain immunisation e.g. MMR their wish should be respected but ensure the child's Social Worker is aware.

## **Minor Accidents**

Foster Carers should report all accidents involving a Foster child to the child's Social Worker and their Supervising Social Worker as soon as possible after the event, in addition to recording it in the Foster Carer Diary.

## **First Aid Kits**

Foster Carers should have a first aid kit in the home, car and take one away with them on holiday.

## **Black and ethnic minority children**

Research evidence has shown that black and ethnic minority children suffer considerable health disadvantages. This is due in part to the strong link between the physical health of children and adverse social and economic conditions.

In addition, black and minority ethnic populations are vulnerable to certain hereditary diseases such as sickle cell anaemia, thalassemia and have a pre-disposition to forms of diabetes. This makes the need to ensure that a full family history is taken as part of the Health Assessment process all the more important.

Care must also be taken to ensure that children or parents whose first language is not English are able to communicate their needs and wishes. In particular, issues of consent and confidentiality will need to be managed carefully.

## **Asylum seeking children**

Many asylum-seeking children come from cultural and religious backgrounds with which Social Workers, Foster Carers and health workers may be unfamiliar. Some will speak little or no English, will have witnessed or suffered horrific events beyond the comprehension of most people. Some as a result will suffer psychological distress or possibly exhibit signs of post-traumatic stress disorder. Unaccompanied asylum-seeking children are unlikely to have medical records with them and may not be able to give a full individual or family medical history. Immunisation status will often be unknown, and a course of primary immunisation may need to be undertaken.

Depending on the child's country of origin specific medical conditions may need to be considered including: Tuberculosis, Hepatitis B and C, Malaria, Schistosomiasis and HIV/AIDS. It is essential you seek professional medical advice to ensure the right course of action is taken.

## **Alcohol**

The moderate use of alcohol is a socially acceptable and a well promoted way of being accepted by friends, having fun, feeling confident and relaxing. For these reasons, it is attractive to young people. As a Foster Carer, you will have your own views on drinking. We ask you to consider the importance of modelling the sensible use of alcohol and to be mindful that some children may have experienced trauma and abuse associated with the use of alcohol. [Click here to visit https://www.drinkaware.co.uk/alcohol-facts/alcohol-and-the-law/the-law-on-alcohol-and-under-18s/](https://www.drinkaware.co.uk/alcohol-facts/alcohol-and-the-law/the-law-on-alcohol-and-under-18s/)

## **Smoking**

Stoke-on-Trent Fostering Service acknowledges the proven skills and abilities of many of its Foster Carers who smoke but believes that children's health must be their primary consideration.

## **Placement restrictions**

No children under the age of 5 years will be placed with a general Foster Carer who smokes. Children of any age with a disability which means they are often physically unable to play outside, children of any age with respiratory problems such as asthma and children of any age with heart disease will not be placed with a general Foster Carer who smokes.

All older children who are able to express a view must be given a choice not to be placed with a smoking family.

## **Sexuality and sexual health**

It is important that young people have someone that they can trust to talk to about their emerging thoughts and feelings about sex and their sexuality. Young people need to feel that they can ask questions and receive non-judgemental answers. It is important to remember that a young person's views on sex and sexuality may have been affected by their life experiences.

When discussing sex, sexuality and sexual health it is important to think about it in the context of attitudes, values and beliefs. This will enable them to develop clarity about what they believe, why they believe it and a respect for, and interest in, the beliefs of others.

You may be caring for a young person who might be attracted to people of the same sex. They should be supported and listened to and further support sought if necessary. Gay, lesbian or non-binary teenagers may try to hide their true feelings or act as others want them to for fear of being ridiculed or rejected by family, friends or Foster Carers. For further support or information visit: -

Also, for advice from Stonewall regarding support in schools for non-binary or gender non-conforming students

[Click here to visit https://www.stonewall.org.uk/organisation-type/guide](https://www.stonewall.org.uk/organisation-type/guide)

## **Guidance for Foster Carers**

### **Statutory Guidance on Promoting the Health and Well-being of Looked-After Children**

#### **Aim**

The aim of this guidance is to support Carers in talking to young people about their sexual health. This is to improve sexual health outcomes for young people in care, by enabling them to make informed choices and to reduce the teenage pregnancy rate in young people in care.

[Click here to visit https://www.gov.uk/government/publications/promoting-the-health-and-wellbeing-of-looked-after-children--2](https://www.gov.uk/government/publications/promoting-the-health-and-wellbeing-of-looked-after-children--2)

#### **Introduction**

Advice to young people should always be in the context of helping them to resist pressure to have unwanted sex and to delay first sex until they feel ready and confident to make safe and responsible choices. It is important that Carers find out if the young person has any worries or concerns about seeking advice and offer further support to minimise the risk of pregnancy and sexually transmitted infections (STI's).

Support from other agencies and health professionals could be useful and any child protection issues will need to be addressed.

Young people should be encouraged to talk to their parents/ Carers about sexual health issues as evidence shows that where parents / Carers do engage in open discussions about sex, sexuality and relationships, those children have first sex later and are more likely to use contraception when they do become sexually active.

There is evidence that boys / males do not access health services as readily as girls / females, therefore extra encouragement may be needed to ensure their health needs are met. It should be remembered that the support provided should be appropriate to the young person and their individual needs, regardless of sexual orientation or preference.

## **The Role of Health Professionals in Providing Contraception and Sexual Health Advice and Treatment**

The term “health professional” refers to doctors, pharmacists and Nurses, including Looked-After Children (LAC) Nurses, contraceptive/sexual health Nurses, practice Nurses, health visitors and midwives.

### **Accessing Information and Advice**

Young people in care have the same right to confidentiality and treatment from health professionals as other young people. This means that they can ask for and access contraceptive advice from health professionals with the same degree of assurance about confidentiality as a young person who is not subject to a care order.

## **The Provision of Contraception and Sexual Health Advice to under 16s**

Young people, including under 16s, can get free sexual health advice and treatment. Health professionals are able to give confidential advice and treatment to young people under 16yrs, following their own professional codes of conduct and policies and procedures from the organisation they are employed by. These policies and procedures are informed by government guidance e.g. Fraser Guidelines to assess competency and understanding, and the law e.g. Children’s Act 1989, Sexual Offences Act 2003. This duty of confidence is not absolute and where a health professional believes that there is a risk to the health, safety or welfare of a young person or others, which is so serious as to outweigh the young person’s right to privacy, they should follow child protection protocols as outlined by Stoke-on-Trent Safeguarding board and *Working Together to Safeguard Children* (updated 2019)

[Click here to visit](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/779401/Working_Together_to_Safeguard-Children.pdf)

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/779401/Working\\_Together\\_to\\_Safeguard-Children.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/779401/Working_Together_to_Safeguard-Children.pdf)

[Click here to visit https://www.sexualhealth.cnwl.nhs.uk/](https://www.sexualhealth.cnwl.nhs.uk/)

## **HIV and Hepatitis**

HIV is Human Immuno-deficiency Virus. HIV damages the body’s immune system so that it cannot fight off certain infections and cancers. The virus can be passed on when HIV in infected semen, vaginal fluids, blood or breast milk gets into the blood stream of another person.

The HIV virus is not very strong and quickly dies outside of the body.

Even in the wet state, the virus is only live for 20 seconds when it is exposed to the air. The virus is destroyed outside the body by heat, drying, soap and water, detergents and bleach.

## Education

# Stoke-on-Trent Virtual School for Children in Care

### Introduction

The Virtual School team are educational advocates to help support our child or young person in care access excellent education and achieve their potential.

We can also offer advice and guidance for those children previously in care.

Please do not hesitate to get in touch regarding any educational query- no matter how small.

[Click here to email VirtualSchool@stoke.gov.uk](mailto:VirtualSchool@stoke.gov.uk) or call us on **01782 237948**.

### Overview

We strive to make sure that everyone involved in the education of our children and young people has the highest aspirations and provide the maximum opportunities for them to succeed.

We work with schools and education settings to raise achievement so that our children and young people do the very best they can and reach their full potential.

Children in care start with the disadvantage of their pre-care experiences and may often have additional or special educational needs. For these reasons children in care are entitled to additional funding to help close the attainment gap and have a termly Personal Education Plan that sets out the goals for the child or young person and describes how the school will help them to get there.

### Our role is

- Seeking places in the best schools and education settings and work together to ensure children always have a school place.
- Providing advice, support and advocating for children's education with schools and settings.
- Making sure that the educational provision is suitable for the young person, meets their needs and is of a high standard.
- Offering support and intervene if things are not going as well as they could to find solutions.
- Supporting children and young people to do well in education and training by ensuring that a high-quality PEP is in place to support learning.
- Speaking up to explain the situations our children and young people face and help to share their views on education matters.
- Working together with others to make things as smooth as possible when there are changes in care placement or school.
- Supporting schools to help our children have good attendance.
- Working with others to keep children and young people engaged and motivated to learn.



## **On a day to day basis we;**

- Check and make sure every child and young person has a Personal Education Plan (PEP) and that arrangements are reviewed every term.
- Check the achievements that children and young people are making through the PEP review documents and by attending PEP meetings if required.
- Contact teachers, social workers and others to follow up and check that children are ok in schools.
- Distribute Pupil Premium funding to schools and share ideas on how it can be used effectively.
- Check the daily school attendance of all of our children in care wherever they attend school.
- Respond to schools, social workers and foster carers queries about any aspect of education.
- Work together and provide advice if a child or young person is at risk of exclusion from school.
- Work with our partners to find school placements and provide advice and guidance.
- Ensure that Pupil Premium funding is used effectively to improve educational outcomes.
- Provide guidance on individual situations to achieve the best possible results for children.
- Provide high quality training and support for our partners including Foster Carers.
- Provide information, advice and guidance on legislation and best practice for children in care.
- Strongly advocate for education at every opportunity.

## **What happens if a child in my care needs to move school at a different time?**

(e.g. not at the end of primary school)

After consultation this process will be managed by a Virtual School AHT in the first instance. They will liaise with the chosen school and the City Council's Admissions Team.

The process shall be started as soon as a need to move schools is identified.

The aim should be to ensure there is no break in schooling. (Statutory guidance and best practice supports this).

The PEP document should inform these choices (Foster Carers should have a copy) as it is the most immediate relevant information regarding the young person's education.

[Click here to visit https://www.gov.uk/government/publications/promoting-the-education-of-looked-after-children](https://www.gov.uk/government/publications/promoting-the-education-of-looked-after-children)

[Click here to visit https://www.minimumstandards.org/fost\\_eight.html](https://www.minimumstandards.org/fost_eight.html)

## **Personal Education Plans (PEPs)**

We have a duty to promote the educational achievements of children in care under section 52 of the Children Act 2004 and must ensure that all children in care from age three have an effective and up-to-date Personal Plan. [Click here to visit](#)

<https://www.legislation.gov.uk/ukpga/1989/41/section/52>

PEPs should ensure that every child receives access and support to services. PEPs should contribute to stability; minimise disruption and broken schooling. They can also signal particular and special needs and strengths; establish clear goals, highlighting who is responsible for achieving them; and act as a record of progress and achievement.

More information can be found here;

[Click here to visit https://childlawadvice.org.uk/information-pages/education-for-looked-after-children/](https://childlawadvice.org.uk/information-pages/education-for-looked-after-children/)

Once the PEP is completed the school are responsible for sending a copy to the local authority electronically. The Virtual School staff will monitor PEPs for quality and appropriate time frames. They will use the PEP to monitor pupil progress and support, and to identify needs regarding further intervention or support needed.

The Social Worker is responsible for providing copies of the plan to Carers and other parties as relevant. However, school staff may also provide this from the meeting.

More information on National Curriculum Stages can be found [Click here to visit https://www.gov.uk/national-curriculum](https://www.gov.uk/national-curriculum)

## Exclusions

The Education and Inspections Act 2006 established that the “parent” becomes responsible for a child in the first five days of every exclusion, ensuring that he / she is not “present in a public place” during school hours. With children in care this responsibility in most cases, fall to the Social Worker and be carried out with the Foster Carer.

- Schools must provide “meaningful and relevant” work to all excluded pupils for the first five days.
- From the 6th day of a fixed exclusion, schools are responsible for providing full time education. Access to the services of Alternative Learning Programmes may be provided at this stage.
- Only the Head Teacher (or member of staff with delegated responsibility) can exclude a pupil. The school must record all exclusions electronically for the Government Census and the local authority and notify the “parent” in writing of the reason for exclusion within 24 hours.

Welfare Call monitors exclusions of all children in care on a daily basis and information is passed to the Virtual School Team within 24 hours. In the case of children in care both the Foster Carer and the child’s Social Worker, as legally holding PR, should receive this notification. Schools are encouraged to contact the Virtual School if a pupil is at risk of any exclusion where possible to enable timely intervention. The PEP should be revised to record changes to be made, and support given, to avoid future exclusions.

# Additional Support for Children in Care

## **CAMHS Support**

CAMHS is a partnership between Stoke-on-Trent City Council, Stoke-on-Trent's Primary Care Trust, NHS and voluntary organisations. CAMHS can only be accessed through social care together with school, GP or health services making a referral.

## **What Do They Do?**

They work in many different ways with young people, depending on their needs. They support Teachers, Youth Workers and people working with young people by offering them support and training on how to spot mental health difficulties.

They also offer them advice about how to create an environment that helps to prevent emotional difficulties developing. They employ specialist mental health workers to work with children and young people with mild or moderate mental health difficulties. These professionals can also support you.

Their Psychologists, Psychiatrists, Social Workers and Community Nurses provide more specialist services. These professionals work with children and young people with complex mental health difficulties, as well as supporting you. They also work with and support children and young people who may need very specialist treatment, which could involve hospital care.

## **Application for Statutory Assessment for an Education, Health and Care Plan (EHCP)**

An EHC plan is a legal document that describes a child or young person's special educational, health and social care needs. It explains the extra help that will be given to meet those needs and how that help will support the child or young person to achieve what they want to in their life.

There needs to be further analysis of need and further consultation with other agencies including an Educational Psychologist.

The school with the agreement of those holding parental responsibility usually makes an application for assessment. Those holding parental responsibility can also make an application.

When an application for statutory assessment is made it has to be accompanied within enough evidential paperwork – records from previous stages including pastoral plans.

Stoke-on-Trent currently has a team of Educational Psychologists in each of the four county areas. In each of these teams is a nominated team member providing a link for other agencies working with Children in Care.

For more information can be found [Click here to visit https://contact.org.uk/advice-and-support/education-learning/ehc-plans-assessments/what-is-an-ehc-plan/](https://contact.org.uk/advice-and-support/education-learning/ehc-plans-assessments/what-is-an-ehc-plan/)

# Virtual School- Educational Issues

Stoke-on-Trent Virtual School staff are very happy to offer advice on all matters relating to the education of Stoke-on-Trent's children in care.

## Allegations against Foster Carers

For more information [Click here to visit](#)

[https://www.proceduresonline.com/stokeontrent/cs/p\\_alleg\\_foster.html?zoom\\_highlight=allegations](https://www.proceduresonline.com/stokeontrent/cs/p_alleg_foster.html?zoom_highlight=allegations)

## Care standards investigation

A standard of care investigation will take place if there is reasonable cause for concern relating to the care offered by a Foster Carer.

The Supervising Social Worker will discuss the matter with the LADO (Local Authority Designated Officer) for child protection. If it is agreed that this is not a child protection issue but a standard of care concern, the following will take place:

### **1 The Foster Carer's Supervising Social Worker and the child's Social Worker will meet with a Fostering Manager to consider:**

- the nature and seriousness of the complaint,
- a full account of the issue as viewed by all involved,
- whether there has been ongoing concern about similar issues,
- a Fostering Manager will explore the pressures on the carer and the child's needs, what support had been offered and any urgent help the carer needs now.

### **2 The Fostering Manager and Supervising Social Worker will arrange to meet with the Foster Carer, within 7 days;**

- to explain the concern that has been raised and to understand the carer's explanation of the events,
- explore whether other people need to be interviewed, and by whom,
- look at whether new placements should be made during the investigation,
- to review any ongoing payments,
- consider what suitable support and training can be offered,
- agree the date of any follow up meeting,
- draw up an agreed plan for fostering supervision Social Worker visits,
- consider whether child protection procedures should be started.

### **3 Conclusion**

- the Fostering Manager will consider the information presented, consider any specialist advice to reach a conclusion,
- A clear analysis should be recorded which sets out the conclusions and any issues which have arisen,

- Where appropriate, recommendations and an action plan should be devised,
- Set a date for a follow up meeting with the carer within 3 months to review progress should they require an action plan.

#### **4 Actions**

The Fostering manager will, within 28 days:

- write to the carer, explaining the outcome and confirming agreement on specific training, specific support packages, increased visits by the Supervising Social Worker,
- confirm the date of the follow up meeting
- Confirm whether the matter will be presented for an early review and referred to the Fostering panel.

#### **5 If the matter is to be presented to Fostering panel**

The Fostering Panel may recommend that:

- the Foster Carer's approval should continue and no further action needs to be taken as the Panel is satisfied that the care standards issues have been fully investigated and resolved,
- a recommendation is made to change the terms of approval, for example, the number or ages of the children,
- There are some areas of concern and that the Supervising Social Worker should address these with the Foster Carer and identify suitable training and support,
- the Foster Carer's approval should not continue and should be terminated.

The Panel recommendations are verified by the Agency Decision Maker. The Agency Decision Maker will send the Foster Carers a letter which clearly sets out the decisions. If the decision is to terminate approval then the carers will receive a Qualifying Determination Letter and the opportunity to make representation to the Independent Reviewing Mechanism within 28 days of the date of the letter.

## **Complaints by Foster Carers**

If there are differences of opinion or problems in relation to your general work as a Foster Carer and the support and supervision you receive, you should first discuss matters with your Supervising Social Worker or Fostering Manager if necessary. If these differences arise in relation to a particular placement, you should initially discuss them with the child's Social Worker or Supervisor and also your Supervising Social Worker. In both cases, they will try to offer a satisfactory response or solution. Most matters can be sorted out in this way. If they are not, or you are not happy with the response, you should put your complaint in writing and send it to the responsible line manager. It may also be a good idea to get some general advice from The Fostering Network or the Foster Carers Association.

Complaints are dealt with formally. The manager who responds must acknowledge your complaint within seven days. He or she will write to you again within 20 days of the acknowledgment either with a response or a solution or, if the situation is complicated, tell you what action will be taken and the likely timescale for the investigation. The complaint may be investigated by a manager in the Fostering Service.

The manager will tell you, in writing, of the outcome of the investigation and respond to each issue raised. You will also be told of any action that will be taken as a result of your complaint.

If you are not satisfied with the outcome, you should write to a Fostering Service Manager within 14 days. Again, this will be acknowledged within seven days and you will hear more within 14 days. They will appoint a senior member of staff to investigate your original complaint. You will receive written notice of the outcome.

If you are not satisfied with this response, you will be entitled to progress your complaint via the Corporate complaints process.

## Complaints by Foster Children

Children and young people have the right to be listened to about what they want to happen in their lives. The child's Social Worker and Independent Reviewing Officer have responsibility to ask the child or young person about their wishes and feelings.

If the child or young person makes a complaint against you, we ask you to co-operate with us in investigating the complaint and trying to understand the child's reasons for doing so. If the child wishes to complain about the local authority or a worker working for Surrey, please help the child to make the complaint and co-operate in any investigations that may be made.

When a child or young person comes to live with you, they will be provided with information about how to complain if they are not happy with something. The young person may wish for someone independent to offer them support through the Children's Advocacy and Complaints Team.

[Click here to visit https://www.changegrowlive.org/stoke-staffordshire-childrens-rights/independent-advocates](https://www.changegrowlive.org/stoke-staffordshire-childrens-rights/independent-advocates)

## Whistleblowing Policy for Foster Carers

Stoke-on-Trent City Council is committed to the highest possible standards of honesty, openness, probity and accountability. It seeks to conduct its affairs in a responsible manner, to ensure that all Council activities are open and effectively managed, and that the Council's integrity and principles of public interest disclosure are sustained.

It is important that you feel able to voice any concerns that you may have in confidence and without fear of subsequent victimisation, discrimination or disadvantage. This is based on the presumption that any disclosure is made in good faith, is believed to be true, is not malicious or a false allegation and the person does not seek personal gain. If, however, an allegation is made frivolously, maliciously or for personal gain, disciplinary action may be taken. It is also important that concerns are investigated in the appropriate manner, and not by an approach to the media. Your concerns can be raised verbally or in writing.

You will be notified in writing of the outcome of any investigation. If you remain concerned and feel that the matter has not been properly investigated, you should contact the Local Authority Ombudsman Advice Team on 0300 061 0614 between 8.30 am – 5 pm Monday – Friday. [Click here to visit www.lgo.org.uk](http://www.lgo.org.uk)

# CHAPTER SIX

## CHILD CARE LAW

### Child Focused Standards – Our Promise

#### Children Who Are Looked-After

In general, children and young people who are Looked-After should return to their families as soon as possible. We ask Foster Carers to work closely with us and the child's family to make sure that the necessary links and relationships are maintained. We are committed to ensuring that we meet a child's religious, language, cultural and racial needs. We will treat children with disabilities in the same way as other children and will meet their special needs using mainstream services wherever this is possible but providing specialist services when it is not. Children who are not able to live with their families have a right to permanent alternative care.

#### The Law Relating to Looked-After Children

##### Children in Care

This refers to children and young people who are "Looked-After" by the local authority. The term 'Looked- After' was introduced by the Children Act in 1989 and refers to children who are subject to Care Orders and those who are accommodated under Section 20.

As a Foster Carer you will be looking after a child who is either "accommodated" under Section 20 of Children Act 1989 or subject to an Emergency Protection Order, Interim Care Order (Section 38 C.A 1989) or Care Order (Section 31, C. A 1989).

##### Accommodated Children – (S20, Children Act 1989)

This term refers to children and young people who are placed with Foster Carers with agreement from their parents. The parent retains Parental Responsibility, and decisions are made by the parent about their child in consultation with the child's Social Worker, the child and the Foster Carer. Children who are accommodated under Section 20 of the Children Act 1989 are subject to the same reviews and procedures as children who are subject to a Care Order.

Accommodated children can be removed from the Foster home by their parents. However, if the removal of the child by their parent is regarded as detrimental to the child's welfare, it is possible for the Local Authority to apply to the Court for an Interim Care Order.

For information on the different care orders [Click here to visit  
https://childlawadvice.org.uk/information-pages/care-orders/](https://childlawadvice.org.uk/information-pages/care-orders/)

# Emergency Protection Order

Under Section 44 of the Children Act 1989, the local authority can apply for an Emergency Protection Order (EPO) where there are reasonable grounds for believing there is an immediate risk of significant harm to a child. Applications will usually be made to the Family Proceedings Court.

Anyone can apply to the Court for an Emergency Protection Order if they fear that a child is in imminent danger. For example, a family member who has very serious concerns about the child could apply for an Emergency Protection Order.

The Order gives limited parental responsibility for the child to whoever applied for the Order. This parental responsibility is limited to whatever is needed for the child's welfare and the right to remove the child (or prevent their removal) from where they are now.

The local authority usually has to give the parents one day's notice of their application for an Emergency Protection Order. However, in rare and serious cases they don't have to give notice.

The local authority must return the child to the parent as soon as it appears safe to do so. They must review the case every day to make sure the parents and child are not separated for longer than is needed. However, an Emergency Protection Order can last for up to eight days and can be extended by a further seven days if the local authority have applied for it and they go back to the Court for permission to extend the Order. The Court may do this if they have a good reason to believe that the child's circumstances have not or are unlikely to change.

While the Emergency Protection Order is in force, the local authority may decide to begin care proceedings. It may then apply for an Interim Care Order or Supervision Order.

## Police Protection

Under Section 46 of the Children Act 1989, a Police Constable has the legal right to remove a child from accommodation or prevent removal, where they have reasonable cause to believe the child would otherwise be likely to suffer significant harm.

The child may be kept at the Police Station or removed to a suitable accommodation (e.g. relative's home, Foster Care via Children's Services) for up to 72 hours.

There is not necessarily an application as such because there is no court order required in order to for the Police to exercise their powers under Section 46. Their powers are enforced where a constable has reasonable cause to believe that a child would otherwise be likely to suffer significant harm.

Police Protection does not confer Parental Responsibility. However, the designated officer shall do what is reasonable in all the circumstances of the case for the purpose of safeguarding or promoting the child's welfare (having regard in particular to the length of the period during which the child will be so protected).



Police Powers of Protection provides for the removal of the child to accommodation provided by the applicant, or alternatively it governs the prevention of the child's removal from a hospital or other place in which they were accommodated immediately prior to the Police exercising their powers.

The Police Officer must inform the relevant Local Authority where the child resides; Children's Services should undertake enquiries under Section 47 of the Children Act to determine whether an application for an Emergency Protection Order should be made.

The Police Officer must also inform the child's parents, any persons with Parental Responsibility or the child's Carer of the steps which have been taken and the steps which they intend to take.

The Police Officer must also inform the child of the steps being taken and, where practicable, find out the child's wishes and feelings; and allow the parent, any persons with Parental Responsibility or the child's Carer to have a reasonable amount of contact.

## Interim Care Order

The Court can consider whether to make an Interim Care Order which places the child temporarily under the care or supervision of the local authority whilst care proceedings are ongoing. An Interim Care Order will be made where the Court has reasonable grounds for believing the threshold criteria have been met.

An Interim Care Order can last up to 8 weeks on the first occasion and can be renewed for periods of up to 28 days. There is no limit to the number of Interim Care Orders that can be made. The Local Authority acquire Parental Responsibility for the child when an Interim Care Order is in place.

## Care Order

Where a child is made subject to a Care Order (Section 31 Children Act 1989), the Local Authority is given Parental Responsibility and will share it with current Parental Responsibility holders, for example, the child's parents. However, the local authority can exercise their Parental Responsibility above that of current Parental Responsibility holders insofar as necessary to safeguard the welfare of a child.

The Court cannot initiate care proceedings. If the Court believes care proceedings are appropriate in a particular case it can direct that the local authority conduct a Section 37 investigation which may lead to the local authority initiating care proceedings.

For a Care Order to be made, the Court must be satisfied that the child concerned is suffering, or is likely to suffer, significant harm; and that the harm, or likelihood of harm, is attributable to the care given to the child, or likely to be given to him, if the order were not made, not being what it would be reasonable to expect a parent to give to him/her; or the child being beyond parental control.

These are known as the 'threshold criteria'. The duty is on the local authority to show that the 'threshold criteria' has been met. A Care Order cannot be made once a child has reached the age of 17.

# Children's Guardian

Children's guardians represent the interests of a child during legal proceedings. They are appointed by the Court and work for the Children and Family Court Advisory and Support Services. Guardians are qualified Social Workers, and are not employed by Children's Services, as they perform an independent role. Foster Carers will usually have contact with a child's Guardian during care proceedings.

The role of the child's Guardian includes representing the best interests of the child in Court proceedings. The child's Guardian will therefore need to spend time talking and listening to the child so that they can find out what the child's wishes, and feelings are. The Guardian will usually visit the child in the Foster home.

## Special Guardianship Order

A Special Guardianship Order appoints one or more people to be a child's Special Guardian and provides a foundation for a lifelong relationship between a child and their Carer. Special Guardians have Parental Responsibility but unlike an Adoption Order the child keeps the legal link with their birth parents. Although the birth parents retain parental responsibility, they are only able to exercise this in a very limited manner e.g. they must be consulted over issues such as the child changing their name or being taken outside the UK for more than 3 months. Foster Carers wishing to make a permanent commitment to a child may consider applying for an SGO. If you are considering this option, you should discuss this with the child's Social Worker and your Supervising Social Worker. A member of the Family & Friends Team (part of the Fostering service) would then visit you to discuss this further.

For further information about Special Guardianship orders:

Contact Family Rights Group's advice line for further advice on **0808 8010366**.

The operational hours are Monday – Friday 9.30am - 15.00pm.