



# The Lancashire Fostering Service

**Foster Carer Handbook**  
January 2021

[www.lancashire.gov.uk](http://www.lancashire.gov.uk)

**Lancashire**  
County  
Council



# Contents

	Page
<b>Section One</b>	
The Legal Framework.....	11
<b>Section Two</b>	
Everyday Living .....	15
<b>Section Three</b>	
Health.....	23
<b>Section Four</b>	
Health & Safety .....	38
<b>Section Five</b>	
Staying Safe .....	43
<b>Section Six</b>	
Education .....	48
<b>Section Seven</b>	
Religion/Culture/Discrimination .....	54
<b>Section Eight</b>	
Documentation/Confidentiality.....	57
<b>Section Nine</b>	
Structural Arrangements and Meetings.....	59
<b>Section Ten</b>	
Record Keeping/Paperwork .....	100
<b>Section Eleven</b>	
Finance.....	103
<b>Section Twelve</b>	
Support.....	110
<b>Section Thirteen</b>	
Leaving Care.....	115
<b>Section Fourteen</b>	
Children Who Foster .....	118
<b>Section Fifteen</b>	
Useful Family time Details.....	119
<b>Appendix 1 Terminology and orders in the children act 1989</b>	
<b>Appendix 2 Extremism and Radicalisation.</b>	
<b>Appendix 3 Unaccompanied and asylum seekers.</b>	

# Introduction

Welcome to Lancashire's Fostering Service Handbook. We hope that you will find this book an invaluable source of information on matters relating to fostering.

Our aim with this handbook is for it to assist you in your role as Foster Carers. We are indebted to you for carrying out that role and for providing a vital service to Lancashire's looked after children.

As foster carers you make a real difference to the lives of children and young people offering a family for children who really need one. As a local authority we want to ensure that we provide the best possible service to children and young people in foster care and to you as a foster carer. To do this we need to provide you as a foster carer with a high level of support.

For ease of reference and updating the handbook is loose-leaf and arranged in sections with detailed contents pages. It is also available on the internet via Lancashire County Council's fostering website at [www.lancashire.gov.uk/fostering](http://www.lancashire.gov.uk/fostering)

In order for the handbook to continue to be a useful guide, it will be necessary to update it regularly.

Any comments you have about its contents will be welcomed and we would ask you to pass these to the fostering team manager in your area.

Our fostering procedures have been reviewed and updated where necessary to reflect changes in legislation.

As the elected member responsible for Children, Young People & Schools, I would like to thank you personally for becoming a foster carer for Lancashire County Council. By doing so you have made a commitment to providing our children with a safe, secure, stable and above all loving home. This is of critical importance for them on their journey through childhood which has for some already been difficult.

In return for your giving so much of your skills and experience we in turn have a responsibility to support you. We aim to do this by providing you with regular good quality support from our fostering teams, and by giving you the opportunity to develop and improve your practice as a foster carer by offering you opportunities to develop and learn new skills, making use of the courses on offer in our annual learning and development plan.

Lancashire regularly reviews the allowances you receive in order to ensure that we are providing sufficient resources to do what is a difficult and demanding job.

Thank you again for your efforts and commitment, which are greatly appreciated. I also hope to have the chance to meet with some of you at both formal and informal events over the coming months and years.

Best wishes

County Councillor Susie Charles

Cabinet Member for Children, Young People & Schools

## Our Mission:

Lancashire County Council Fostering Service is committed to working in accordance with the National Minimum Standards for Fostering Services and as such shares and embraces the values within:

- 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.
- Stability is essential when promoting a
- With complex needs will be fully recognised and taken into account. child's long term welfare.
- 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
- The significance of family time 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 service to deliver the best outcomes for children; this includes the Government, Local Government, other statutory agencies, Fostering Service providers and foster carers.

# Policies & Procedures

Our Fostering Procedures are reviewed and updated where necessary to reflect changes in legislation, organisational skills and practice.

The supervision process for carers has been developed to include evidence of how carers meet the National Minimum Standards 2011. The Government aims in the standards to promote the following three outcomes:

- The Foster carer as a parenting figure.
- The child as an active agent for change.
- The importance of relationships.

The aim is that every child, whatever their background or their circumstances, has the support they need to:

- Have their wishes and feelings heard.
- Is assisted to have a positive identity and the potential of valuing diversity through individualised care.
- Positive Behaviour and the making of relationships are promoted.
- They have good health and well-being.
- Leisure activities are promoted.
- Success in education is promoted.
- They are kept safe.
- There are structures in place to manage children who are missing from care.

Each supervision visit will now include looking at how these outcomes have been met for each child who has been placed.

The process for the unannounced visit made to carers each year has also been further developed and a separate form produced. Supervising Social Workers will record who was present at the time of an unannounced visit and matters relating to the safety and well-being of the children present.

All carers are to be given a welcome pack at the start of the assessment process to include key documents. This builds on existing good practice. Once approved, carers will receive a specified list of information.

Our fostering website [www.lancashire.gov.uk/fostering](http://www.lancashire.gov.uk/fostering) has been updated with relevant documents and information.

# THE LANCASHIRE FOSTER CARER CHARTER

## The Lancashire Fostering Service's Role

The fostering service aims to provide stable and high quality foster care for children who are valued, supported and encouraged to grow and develop as individuals. To achieve this aim, we recruit, train and approve foster carers and deliver ongoing support to them.

## The Foster Carer's Role

Foster carers are at the heart of the foster care service. They are assessed, trained and supported to look after children and young people in a family environment, providing them with stability, care and an opportunity to grow and develop and to reach their potential.

Our working relationships are based on mutual trust and respect. This Foster Charter explains what we expect from each other. The Charter includes the following sections:

1. Working in Partnership
2. Respect for the Child
3. Information
4. Decisions
5. Support
6. Learning and Development
7. Fair Treatment
8. Communication and Consultation

## 1. Working in Partnership

The Lancashire Fostering Service will:

- Value the skills and expertise of foster carers and how this contributes to providing children in their care with stability, care and an opportunity to grow and develop to reach their potential.
- Recognise that they are the people who live with children every day and know them well.
- Include them in all appropriate meetings that affect them and the children they care for.
- Ensure that the fostering service will meet the standards set out in all legal frameworks related to fostering in the United Kingdom.
- Treat carers with openness, fairness and respect as a core member of the team.
- Respect confidentiality.

Foster Carers will

- Demonstrate their expertise and make use of their skills to ensure that children in foster care reach their full potential.
- Ensure that any child fostered is made to feel part of the family and will have the same opportunities and experiences with them to build their confidence and self-esteem.
- Foster carers will ensure that they know what a child's Care Plan contains and how these proposals are going to be met. They will also know what the current

Looked after Review requires for the child. As foster carers, they will ensure that they are fully prepared to attend meetings on the young people in order to play an active role in working in partnership.

- They will work with all agencies involved with the child such as education, health and religious establishments.
- To work in partnership with birth parents and the child's wider family.
- As foster carers they will meet the standards set out in the Regulations and Guidance and follow all departmental policies and procedures.
- Respect confidentiality and ensure that information is kept secure and safe within the foster home.

## 2. Respect for the Child

Every child and young person should be respected as an individual and be supported in meeting their needs and achieving their aspirations and potential.

The Foster Carer will:

- Respect and promote a child's religious, linguistic and cultural heritage.
- Ensure that they protect and safeguard any child placed in foster care from abuse and neglect. They will comply with the Lancashire Child Protection Procedures as outlined in our Foster Carer Handbook.
- Carers will be involved in developing the service through supporting the Recruitment and Assessment Team engaged in recruiting new foster carers for the Directorate.
- Attending the local support groups, drop in facilities, action sets and workshops.
- Play an active part in developing their Personal Development Plan and ensuring it is kept updated with their supervising social worker.
- Provide a mentoring role for new carers.

## 7. Fair Treatment

We recognise that foster carers have a right to be treated fairly.

The Lancashire Fostering Service will:

- Ensure openness in all our discussions with you.
- Ensure that you are treated with respect and kept informed and provided with emotional support.
- We will offer you independent support should you be subjected to an allegation.
- Have a clear framework and procedure for dealing with allegations.
- Ensure that you know the arrangements for the payment of fees in the event you are not able to foster while the subject of an allegation.
- Provide you with a clear procedure when dealing with complaints about the service, and ensure that you have a timely response to any complaints that are raised.

## 8. Communication and Consultation

In Lancashire we believe that an open and honest dialogue is the key to working in partnership with our foster carers.

The Lancashire Fostering Service will:

- Ensure that your views are sought on proposed changes within the fostering service. This will be done by direct contact with carers and County Fostering Manager, local and County Fostering Forums, mail shots and the Fostering Newsletter.
- Give you constructive and timely feedback following our consultations with our carers.
- Ensure that the service continues to upgrade its electronic systems to provide accurate and appropriate information for carers.
- We will ensure that the views of foster carers are shared with senior managers within the service and the authority.

Lancashire Foster Carers will:

- Respond to both local and county forum representatives to ensure that their views are known about the fostering service.
- Engage with the local team and the wider service to work in partnership in developing the fostering service to a high standard.
- Ensure that any changes in their telephone or emails are reported to the fostering service to ensure effective communication continues.
- To be fully engaged in all consultations about the service in order to play an active part in supporting changes.
- Ensure that they respond to questionnaires from both the fostering service and Ofsted to ensure that a balanced view can be sought from a range of carers.
- They will ensure that all documentation that has been sent to them for signature is returned to the team to ensure accurate records are kept in relation to statutory requirements, for example supervision and reviews.
- Inform their supervising social worker if they are having any difficulties with their placements in order that they can be supported to continue to support the child in placement.

# Section 1: The Legal Framework

The Children Act 1989 is the major piece of legislation which governs our work with children and families.

It is not necessary for foster carers to have an in-depth knowledge about child care law, but it is helpful for them to be aware of the types of court Orders which can be made and the terminology used in working with the legislation. See appendix 1

The basic principles of the Children Act 1989 are:

- The best place for children to be cared for is within their own families. The welfare of the child is paramount.
- Birth parents should, wherever possible, be involved in all planning and decision making affecting their children.
- Legal proceedings should be avoided whenever possible.
- The welfare of the child should be promoted by a partnership between the family and the Local Authority.
- Children should not be removed from their families and Family time should not be ended unless it is absolutely necessary to do so for their wellbeing.
- The child's needs arising from his/her race, culture, religion and language must be taken into consideration.

## Regulations, Guidance or Standards

On April 2011 a revised framework for fostering came into force. This includes the fostering services regulations and related statutory guidance and national minimum standards. These form the legal framework for the running of fostering services and are relevant to every local authority or independent fostering agency, and to the local authority as a commissioner of a placement from an independent agency. For further information or to download any of the Regulations, Guidance or Standards, please go to: [www.education.gov.uk/childrenandyoungpeople/families/childrenincare/regs](http://www.education.gov.uk/childrenandyoungpeople/families/childrenincare/regs)

## Fostering Regulations (England) 2011

These regulations make provision about the way in which fostering agencies (independent fostering agencies and voluntary organisations) and local authority fostering services are managed and run, and in particular about the process for approving foster carers and safeguarding children placed with them.

## National Minimum Standards (NMS) for Fostering 2011

These standards apply to local authority fostering services, independent fostering agencies and voluntary organisations. The NMS are issued for use by Ofsted who take them into account in the inspection of fostering services. The NMS, together with regulations relevant to the placement of children in foster care, such as the Fostering Services (England) Regulations 2011, form the basis of the regulatory framework under the Care Standards Act 2000 (CSA) for the conduct of fostering services. The 31 minimum standards are set out under two headings – child focused standards and standards of fostering service. For further information or to download a copy, please go to:

[www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/192705/NMS\\_Fostering\\_Services.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/192705/NMS_Fostering_Services.pdf)

### **The Children Act 1989 Guidance and Regulations Vol 4: Fostering Services**

The guidance sets out the functions and responsibilities of local authorities and their partner agencies in relation to fostering services. The coverage includes the responsibilities of local authorities and foster carers, how to help ensure the best for children in foster care, the management of the fostering service and approving and supporting foster carers. Local Authority duties extend to children/young persons who have been fostered and are older than 18 and, in certain circumstances, up to their 25<sup>th</sup> birthday.

For further information or to download a copy, please go to:

[www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/274220/Children\\_Act\\_1989\\_fostering\\_services.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/274220/Children_Act_1989_fostering_services.pdf)

### **The Children Act 1989 Guidance and Regulations, Vol 2: Care Planning, Placement and Case Review**

This guidance sets out the functions and responsibilities of local authorities and partner agencies under Part 3 of the Children Act 1989 ('the 1989 Act'), which concerns the provision of local authority support for children and families. In particular it describes how local authorities should carry out their responsibilities. For further information or to download a copy, please go to:

[www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/441643/Children\\_Act\\_Guidance\\_2015.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/441643/Children_Act_Guidance_2015.pdf)

### **The Children Act 1989 Guidance and Regulations, Vol 3 Planning transition to Adulthood and Care leavers including the Care Leavers (England) Regulations 2010**

These regulations and guidance are designed to ensure care leavers are given the same level of care and support that their peers would expect from a reasonable parent and that they are provided with the opportunities and chances needed to help them move successfully to adulthood. For further information or to download a copy, please go to:

[www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/397649/CA1989\\_Transitions\\_guidance.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/397649/CA1989_Transitions_guidance.pdf)

### **Short Breaks Statutory Guidance**

The document brings together into one volume all the existing and new statutory guidance relevant to the provision of short breaks for disabled children and their families. The main elements are: short breaks and the provision of accommodation; assessment, planning, implementation and review cycle for children using short breaks; and the different settings in which short breaks may take place.

### **Family and Friends Statutory Guidance**

This guidance sets out a framework for the provision of support to family and friends carers. In particular it provides guidance on the implementation of the duties in the Children Act 1989 in respect of children and young people who, because they are unable to live with their parents, are being brought up by members of their extended families, friends or other people who are connected with them.

### **Care Planning, Placement and Case Review and Fostering Services (Miscellaneous Amendments) Regulations 2013**

These regulations are amendments to the Care Planning, Placement and Case Review Regulations 2010 with respect to the delegation of decision making about looked after children to their carers.

In fulfilling the local authority's duty to safeguard and promote the child's welfare it is essential that, wherever possible, the most appropriate person to take a decision about the child has the authority to do so, and that there is clarity about who has the authority to decide what.

Lancashire has a policy on delegated authority and this can be viewed on the web site. The policy presents an opportunity to promote the delegation of better and more appropriate decision making by the right person. This will help all carers to carry out their parenting role, take responsibility and become more involved in wider decision making about the children and young people they care for whilst continuing to receive appropriate support. This will enable our children and young people to enjoy a normal childhood and family life and avoid those missing opportunities and feeling any different to their peers.

This policy applies to all children and young people looked after by the County Council regardless of where and whom they may be placed with.

Delegation of authority is discussed at each stage of a child's care planning. It is a live document and is open to change as the child grows and develops.

For further information from the Fostering Network in relation to delegated authority and good practice, please go to:

[www.fostering.net/sites/www.fostering.net/files/public/resources/good-practice-guidance/delegated\\_authority\\_handbook\\_2011.pdf](http://www.fostering.net/sites/www.fostering.net/files/public/resources/good-practice-guidance/delegated_authority_handbook_2011.pdf)

### **The Care Planning and Fostering (Miscellaneous Amendments) (England) Regulations 2015**

The amendment made in 2015 to Care planning and fostering regulations introduces a new definition of a long term foster care placement, and sets out the conditions which must be met. They also allow for a reduction in the frequency of reviews on a case by case basis, after the child has been in the placement for at least one year, and they introduce new provisions on children returning home from care. For further information or to download a copy, please go to:

[www.gov.uk/government/publications/children-act-1989-care-planning-placement-and-case-review](http://www.gov.uk/government/publications/children-act-1989-care-planning-placement-and-case-review)

### **Other Legislation that has amended or Supplemented the Children Act 1989**

#### **The Children (Leaving Care) Act 2000**

The act introduced new requirements on local authorities to plan for looked after children so that they have the support they need as they make their transition to the responsibilities of adulthood.

#### **The Children Leaving Care (England) Regulations 2001**

Regulations introduced to support the Children (Leaving Care) Act 200 that came into force in October 2001.

**The Children Act 2004**

The Children Act 2004 makes provision for services provided to and for children and young people and for the establishment of a Children's Commissioner. Provisions were to create the post of a Children's commissioner for England, enable the government to create an electronic record of every child in England, Scotland and Wales to make it easier to trace children across local authorities and government services, places a duty to cooperate on all services who work to protect children, designed to eliminate the risk of children "falling through the gaps". Services include local authorities, the police, the probation board, the youth offending team, the Strategic Health Authority and Primary Care Trusts, Connexions partnerships, and the Learning and Skills Council, make new statutory bodies called Local Safeguarding Children's Boards responsible for child protection, and require local authorities in England to appoint a director of children's services.

**The Children and Young Persons Act 2008**

This legislation amended the Children Act 1989 Act so that:

Looked after children must not move from accommodation regulated under the Care Standards Act 2000 to other arrangements without a statutory review of their care plan chaired by their Independent Reviewing Officer (IRO).

## Section 2: Everyday Living

If you are planning to move house you should inform both the child's social worker and the fostering supervising social worker as soon as possible. If there are changes to the people living in your household you should also inform your supervising social worker. Any person 16 and over living in your home will require an up to date DBS check which is renewed every 3 years. They will also require statutory checks to be carried out and these are renewable every 3 years. Any Frequent Visitors to your home may be subject to the same procedures as with any adult children who may live away from home temporary for example away at University. Once a DBS check is completed and a certificate of disclosure has been sent to the carer or adult this certificate must be viewed by your Supervising Social Worker or Support Worker to enable the check to be recorded and tracked.

### **Advocacy**

It can be hard for young people who are looked after to speak up for themselves. Advocates work with young people to help them to say what they think, to put forward views and concerns when they feel unable to do so for themselves. In Lancashire there is an advocacy service which provides trained advocates to help young people who are looked after to have their say and to make sure that their voice is heard. If a young person you are caring for feels that he or she would like an advocate to help then family time can be made with the Children's Rights Service (details at the back of this handbook). Alternatively, you, or the young person, could ask your supervising social worker or the young person's social worker to put the young person in touch. (Links to Childrens society and independent visitors)

### **Babysitting and Alternative Care**

Everyone caring for children need a break from time to time and occasionally have to leave their children with relatives, friends or babysitters. As a foster carer, you will have considered your support network as part of your assessment and identified people who are prepared to offer both emotional and practical support, including caring for children when necessary. Following your approval, you will meet other foster carers through support groups, training, and family time between siblings. Many foster carers form relationships which allow them to offer informal support to one another, including caring for children in each other's placements.

The delegated authority given to you means you are able to use your own discretion and judgement as to who may be appropriate and safe alternative carers for any particular child. You will need to be mindful of their particular needs and the babysitter's ability to keep the child safe, be trusted to maintain confidentiality and competent to deal with any emergency or particular behaviours that the child may display.

Lancashire County Council identifies the right placement and right carer for a child. If the foster carer identified is not providing the majority of the care, the care plan for the child may need revisiting and the registration of the foster carer may also need reviewing as continuity of care assists children in forming attachments to their careers.

## Belongings

Foster children may arrive at the home of a foster carer with items of clothing, toys or other possessions which do not seem very valuable. These possessions' are the child's link with their separated family and will be important to them – they should be treated with respect and foster carers should make sure that these, and other possessions, move with the child to any other placement. Photographs are particularly important.

It is important, whatever the circumstances under which a child leaves, that their belongings are moved in appropriate suitcases or holdalls, you will be expected to provide appropriate luggage for when a child moves on, this will then belong to the child or young person, in no circumstances should a child move with their belongings in bin bags or similar containers.

Children should move with all toys and clothing which has been bought for them during the duration of their time with you.

## Behaviour Management and Restraint

A new policy has been developed which offers information and advice to carers about behaviour management.

There are some principles which are important for carers to consider when managing behaviour. These are:

- Seek to reward good behaviour.
- Try to be non-confrontational.
- Work to form good relationships with children based on respect for each other
- Have clear house rules which everyone knows about and which are the same for every child within the home. Please see the Safer Caring section of the hand book.
- Be aware of the life experiences which children bring and understand their effects.
- Only use sanctions when you have to, not routinely.
- Take advantage of training offered which looks at how behaviour develops and how to deal with it.
- Work with others from different agencies as well as Children's Social Care.

Each child is different and must be treated as an individual and the aim is for poor behaviour to be managed positively and consistently. Wherever possible it is better to reward good behaviour than to concentrate on behaviour which is not acceptable. Sometimes other agencies, such as health and education, can help with advice and strategies for managing behaviour. Occasionally it is necessary to use sanctions and carers need to know what they can and cannot use as sanctions.

### The following actions are allowed:

- More house chores, loss of privileges, more supervision or reducing leisure activities.
- Using pocket money or savings to pay for repair of damage or replacing a loss. This can be for all of the loss/repair or some of it but children must not be deprived of more than two thirds of their total spending money for the week.

- Confiscation (temporarily or permanently) of any article or substance if it is felt that this could be potentially dangerous or could injure someone or someone's property.
- Where older children are concerned you may need the advice of the supervising social worker/local authority regarding confiscation of items such as mobile telephones and computer devices that enable communication with third parties and access to the internet.

**The following actions are NOT allowed:**

- You must not use any force as a punishment – including slapping, pinching, squeezing, shaking, throwing missiles, rough handling, punching or pushing in the heat of the moment – even if this is in response to violence from young people.
- Use any punishment or treat a child in any way which is humiliating, including making a child wear different or unsuitable clothing.
- Refuse meals or deprive of food and drinks, deny a child the amounts and range of foods and drink normally available to them (unless this is on medical advice).
- Use accommodation to physically restrict the liberty of a child.
- Restrict family time to and from family and friends – this includes an independent visitor, advocate, any officer appointed by CAFCASS, a solicitor, social worker, independent person for complaints and any person representing OFSTED.
- Intentionally deprive a child of sleep.
- Impose any fines (except where this is to pay for repair or loss – see paragraph above in actions which are allowed).
- Conduct intimate physical searches, although occasionally (not for punishment) you may need to search a child's clothing if for example it is thought he or she may have a weapon. If you think a child may have drugs in his or her possession then you must consider notifying the police, following consultation with the child's social worker.
- Allow other children or young people to consider or administer any kind of punishment to the child.

**Car Safety**

Appropriate car seats or booster seats are required for the children they are caring for and should ensure they use them at all times.

If a Child Looked After is transported by a friend or relative of the foster carer, it is the foster carer's responsibility to ensure that the car is road worthy, has a current MOT and is taxed and insured including business use insurance. The carer must also ensure that the driver has a current driving license. The carer must also ensure that the appropriate car seat is provided in this arrangement.

If you renew or change your car insurance please let your Supervising Social Worker know and provide your certificates to enable the details to be recorded on your records. You should also alert your SSW if you receive any driving offences or driving convictions.

For further information on car seat rules please go to:

[www.gov.uk/child-car-seats-the-rules/using-a-child-car-seat-or-booster-seat](http://www.gov.uk/child-car-seats-the-rules/using-a-child-car-seat-or-booster-seat)

### Changing a Child's Name

Foster children sometimes ask to use the carers' family name. There are a range of reasons for this, some negative e.g. the stigma of being in foster care, and some are positive e.g. a wish to be seen as part of a new family. Another reason may be that the child/young person does not have to explain themselves to people they are meeting for the first time. Foster carers are not allowed to change the surname or the forenames of a child placed with them. It is important that the implications of name change are fully discussed and understood by the child, the child's parents and relatives, the foster family and the social worker.

Foster carers should therefore seek advice from the child's social worker or Fostering Team supervising social worker

### Corporate Parenting Board

When a child becomes looked after the County Council has "corporate responsibilities for parental tasks". This is known as "corporate parenting". The collative responsibility of the Council to priorities the needs of children in care and seek for them the same outcomes any good parent would want for their own children.

The Corporate Parenting Board meet regularly and is attended by councillors children and young people who are looked after, foster carers, adoptive carers, health representatives and managers of the Directorate for Children and Young People.

The Board:

- Works to secure high aspirations and stable relationships for all children looked after.
- Works to ensure the voice of children looked after are heard on both policy and the services they receive.
- Oversees and monitors the performance indicators for health well-being and education of looked after children.
- Considers the outcomes of regulatory visits and inspection reports on provision of children looked after.
- Celebrates the achievements of children looked after and their careers.

### Family time ....Keeping in Touch with those of significance in the children and young people's lives.

Most children you will be asked to care for will still have family time with their parents and other members of their birth family.

Family time may be restricted and supervised if there are concerns about a child's safety/emotional well-being when seeing family members. This can take place away from the foster home supervised by social work staff or foster carers. If there are no significant child protection concerns parents may take children out or have family time at their home. If there are not felt to be any significant concerns, but parents would benefit from seeing children in a more supported environment, foster carers may be asked to facilitate family time in their own home, this is particularly important with a very young child where parents need to be involved in all aspects of their care. Foster carers will **not** be asked to do this if it is felt **any risk** is posed by birth parents.

Parents and other family members may also have telephone family time; this may be monitored or restricted if appropriate.

The Directorate may only withhold the carers' addresses or telephone numbers from parents in exceptional circumstances, for example when there is a definite risk or when directed by a court. Foster carers will be asked to note any significant reactions a child has to family time arrangements or visits with any person.

## **Insurance**

There is no automatic liability on the Council to reimburse foster carers for any loss, injury or damage incurred by virtue of their fostering. In order for the Children and Young People Directorate to be legally liable, it would be necessary for the foster carer to prove that the Council has been negligent in causing the loss, injury or damage. Nevertheless individual cases will be considered sympathetically and help may be provided on an ex gratia basis.

This indemnification does not extend to loss or damage caused by, or arising from fraud, dishonesty or criminal offence. The liability must have arisen when the foster carer was acting in the course of his/her duties as a foster carer.

Lancashire County Council have a clear policy outlined below regarding foster carers claiming from their own insurance cover.

Before the County Council will consider a claim, foster carers will be required to confirm whether or not they have any other insurance in place which covers the same loss or damage. If they do have any such insurance cover, they will be required to submit a claim to those insurers rather than to the County Council. The County Council will not meet any excess payable on such other insurance cover, or meet any increased premiums payable by the foster carer as a result of making a claim.

All foster carers for Lancashire County Council need to have business use cover on their car insurance, the only exception will be vehicles under the Motability scheme although they need to get a letter from Motability confirming they are foster carers and can use the vehicle for business associated with fostering e.g. family time, school transport and attending meetings/training etc. Failure to comply with this may invalidate your insurance cover if you are unfortunate enough to have an accident whilst undertaking tasks relating to fostering.

Insurance details including expiry dates need to be recorded on the FC reviews. They also need to ensure that if their motor insurance includes replacement vehicle cover then the replacement car is the same size as the owners.

All foster carers for Lancashire County Council need to provide their own home insurance cover, foster carers in rented property must confirm their landlord has the appropriate buildings insurance cover.

## Damage to your Property/Insurance

You should inform your insurers of your change of circumstances when you begin fostering this includes car and home insurance. If your property or possessions are damaged by a child placed with you and this is not covered by your own household insurance policies, Lancashire County Council may be able to claim through their own insurers. Inform your supervising social worker if you need to make a claim. Foster carers are required to have fully comprehensive car insurance for any vehicle in which they transport the children placed they must also ensure they have business use on their insurance and will be asked to present this during their annual health and safety check.

Foster Carer's Car Insurance will be checked during the assessment and also at annual reviews. It is also a requirement of the local authority that you inform your insurance company that you are foster carers and your policy covers you for this role. Failure to comply with this may invalidate your insurance cover if you are unfortunate enough to have an accident whilst undertaking tasks relating to fostering.

## Equipment

It is the responsibility of the foster carer to ensure that children have all the necessary equipment and this is clean and safe to use, conforming to British safety standards. All cot mattresses should be replaced in line with Safer Sleep Guidance.

For further information or to download a copy, please go to:

[www.nichd.nih.gov/sts/Pages/default.aspx](http://www.nichd.nih.gov/sts/Pages/default.aspx)

## Holidays

Carers should always inform the Directorate if they intend to take children placed with them on holiday. If the children you are caring for are placed on a voluntary basis - —accommodated (under Section 20 of the Children Act 1989), their parents will also need to be consulted.

If carers intend to travel abroad (**this includes Scotland**) a letter will be required from parents and/or Service Manager giving permission for the carers to take the child out of the country.

If carers are unable to take children placed on holiday with them it is important that they inform the child's social worker/their supervising social worker, as soon as possible, as an alternative placement will need to be identified.

If the child requires a passport the child's social worker will need to make this application. If the child is accommodated under section 20 of The Children Act 1989 a parent will also need to sign the application form.

Passport applications may take a number of weeks or even months to process so it is important that carers notify the child's social worker well in advance.

## Overnight Stays

Lancashire's policy on overnight stays states that decisions on overnight stays should normally be taken by foster carers.

Where a young person aged under 16 wishes to stay overnight at the home of a friend then this can be recorded within Care Plan. Children and young people should, wherever possible, be granted the same permissions as would other children/young people in the community, to take part in normal and acceptable age appropriate activities. Judgements should be based on a reasonable assessment of risks. However, it is expected that you/foster carers get to know the child in placement well before allowing overnight stays and also the family/friend with whom they intend to stay. The child's social worker and parents should also be consulted as to the appropriateness of this. It may be more appropriate to invite a child's friend to stay at your home if you are unsure about them sleeping over.

Where a young person aged under 16 wishes to stay overnight at the home of a boyfriend or girlfriend it will be his or her social worker who will make the decision. Any concerns about agreed overnight stays should be referred immediately to the child's social worker.

The Lancashire policy on overnight stays gives more information about factors such as the process of decision making and different kinds of overnight stays. If you would like a copy, please ask your supervising social worker. A child's visits, including overnight visits to any of his or her family members will be agreed by the child's social worker or a social work manager and not by the foster carer.

### **Life Story Work**

Children who live with their birth families have the opportunity to know about the past events in their lives. Children separated from their birth families are often denied this opportunity; they may have changed families, social workers, homes and neighbourhoods. Their past may be lost, confused and much of it forgotten.

All children are entitled to accurate information about their past and their family. When children lose track of their past, they may well find it difficult to develop emotionally and socially. If adults cannot or do not discuss their past with them, it is reasonable for children to assume that it may be bad.

Life story work helps to give a sense of identity to children separated from their family. Compiling facts about the child's life and the significant incidents and people in it helps them to begin to understand and accept their past and move forward into the future. It is, therefore, especially important to children who are adopted or permanently separated from their birth families.

Many children separated from their families blame themselves and believe they must be unlovable or are worthless, but a suitably worded version of the truth can increase a child's sense of self-worth.

Life story work gives the opportunity to show them why they should be proud of themselves, and this positive attitude should be evident in any life story work. The work can be emotionally demanding for the child, and should not be undertaken lightly. Foster carers can play a significant role in the compilation of a Life Story Book

and can therefore be a source of help to the social worker. The time spent with the foster carer's family is also important and should be included in the book. It is essential that carers collect written and photographic records of events which occur during the placement. Remember to keep safe any items belonging to the child such as certificates, art work, birthday cards, gifts or items from the child's birth family. Some of the above information will also be useful for the child's social worker who prepares a later life letter for children who are adopted.

### **Life Story Book**

Carers are expected to provide a life story book to record the child's time with their foster carers and their family during their placement with you. The foster carer must help the child to reflect on, and understand, their placement history and keep appropriate memorabilia and photographs of the time spent in their care. This information will be the property of the child and will subsequently move with the child when they move on from the foster placement.

Training is available to assist you in this role and information about life story work can be obtained from the child's Social Worker or fostering Team Supervising Social Worker/ Support Worker.

### **Participation**

It is important for children and young people who are looked after to be able to influence the way in which children's social care services in Lancashire are delivered to them. In Lancashire one of the ways in which we aim to help young people to become involved is through the Children in Care Council (Linx).

The LINX group representative may get in touch with the children in your care from time to time to encourage them to talk about their experiences and to make sure they are listened to. She/he can visit young people or they can go to local groups.

The CICC arranges or is involved in different ways of helping children and young people to contribute and put forward their views.

### **Young Person's Panel**

This is a group of young people who meet together to discuss issues that they feel need to be looked at with a view to change or comment. Views from the Panel are forwarded to the Corporate Parenting Board.

### **Youth Groups**

This is a new development which is being progressed and involves the opportunity for children looked after to meet in a small group and get involved in looking at things which affect them. This could be by the use of drama, art or other creative activities. If you know a child or young person who would like to be involved in any of these initiatives please family time the Children in Care Council Officer whose family time details are available at the end of this booklet.

## Section 3: Health

### Promoting Good Health and Well Being

Foster carer's lifestyles must ensure children and young people placed will thrive, develop and grow. The foster carer must be prepared to work with the child's social worker and relevant health professionals to ensure unmet needs prior to placement are considered and addressed. Health Visitors, School Nurses, GPs and the Children Looked After Nurses.

### The Policy Context

Lancashire County Council, as corporate parent, wants the children and young people it looks after to enjoy good health. This means that young people must have access to health care when they are ill and that they should receive health education and advice so they can make informed choices. Young people also have the right to good emotional health and well-being and this is just as important as their physical health for their development.

The County Council and the health service have a responsibility to promote the health and emotional well-being of children and young people who are looked after. This is done by a process of ongoing health assessments and by having a proactive approach to health education. Foster carers play a valuable part in this process by encouraging young people to attend for their health assessment and monitoring the young person's general health needs, also taking part in health care initiatives and health promoting activities.

Sadly, for a number of reasons, health outcomes for some young people who are looked after are generally poorer than they should be. To improve this, the Directorate in partnership with the local health service has developed a role for "Children Looked after Nurses". The primary role of these designated nurses is to promote and coordinate the health care needs of looked after children/young people and make sure that health visitors, school nurses and professionals that come in family time with them have required information about their health and background. The nurses can also make sure that their records follow them and that they don't miss out on specialist appointments because they have moved placement.

The child's social worker may liaise with the nurses to follow up any health issues. The nurses are a useful resource for foster carers who have any queries. The nurses oversee the health assessments that are offered to under 5s twice per year and to 5 – 18 year olds annually.

Young people in foster care have the same entitlement to NHS treatments as anyone else. In the majority of cases all their medical needs will be appropriately met by their GP and dentist, although some young people require more specialist treatments.

Young people who are looked after are seen as a priority by the health service. If your young person's health needs are not being appropriately met, (for example you

cannot get a dentist for a recently placed young person) the young person's social worker should liaise with the Children Looked after Nurse to discuss local dental access.

Our evidence shows that many young people will be suffering from unmet "health needs" on becoming looked after and unless determined steps are taken such needs are not addressed. Young people who are looked after normally receive prompt treatment for acute illnesses but chronic illnesses are often not detected or treated and in many cases follow-up appointments are not taken up. As a foster carer you should be alert to such possibilities and ensure that all your foster child's health related appointments are kept as directed on the child or young person's health action plan.

Foster carers can make a difference to the health and wellbeing of children in their care in the obvious ways of providing security and shelter to cared for children however the attention to detail in promoting a healthy lifestyle makes significant differences in the longer term. The following information may provide some useful ideas regarding healthy lifestyles:

- The Birth to Five Book.  
To download a copy please visit: [www.nhs.uk/Tools/Pages/birthtofive.aspx](http://www.nhs.uk/Tools/Pages/birthtofive.aspx)
- Cared for children and young people benefit from involvement in healthy food choices and food preparation.  
To download a copy please visit: [www.foodafactoflife.org.uk](http://www.foodafactoflife.org.uk)

### **Medication in Foster Care**

Foster carers have a role in ensuring that medication, recording, storage, handling, administration and its disposal, is managed in a responsible way. Records are checked by the supervision social worker to ensure that they are accurate.

### **Intrusive Medical Procedures**

Some disabled young people and children are dependent on complex medical technology. Foster carers, must ensure that they are trained and confident in undertaking this intrusive procedure .this should be accurately recorded.

### **Delegated Consent – Medical and Dental Treatment**

To ensure that cared for children and young people get the medical and dental treatment that they need. As a Foster Carer, you must ensure that your foster child is registered with a General Practitioner and a Dentist. They will either keep their own if their home address is local to you, or you should register them with your own doctor and dentist. You must also ensure that the child has regular dental checks, and regular sight and hearing tests.

### **Following a Life Threatening Incident or Death of a Cared for Child.**

In the tragic event of a child in the care of foster carers dying or following a life threatening incident, the child's social workers will liaise with the child's family,

relevant persons and agencies in accordance with related regulations and procedures. The carer's supervising social worker will support the carers and their family through this time.

For further information please go to:

[www.lancshiresafeguarding.org.uk/media/7178/CDOP-parent-carer-information-leaflet.pdf](http://www.lancshiresafeguarding.org.uk/media/7178/CDOP-parent-carer-information-leaflet.pdf)

## **Other Important Information A-Z**

Foster carers have a role in ensuring that children and young people stay healthy. Further information to support you in this role is set out briefly below. More information is available from your supervising social worker.

### **Accidents and Sudden Illnesses**

Accidents and sudden illnesses can happen, so if a child in your care requires emergency treatment, you should make the necessary arrangements to take them to the GP or local Accident and Emergency Department and family time the child's social worker.

Consent to medical treatment is required, so always have the relevant medical consent form readily available, although if the treatment is urgent the attending doctors will generally treat the child first and then deal with the issue of consent afterwards. Young people aged sixteen years or over give their own consent to medical treatment and some under sixteen may also be able to give or refuse consent if they are considered by the medical staff to have sufficient understanding.

If an accident occurs that is more than a minor injury, always tell the child's Social Worker as soon as you can and keep them informed.

If the accident occurs outside of normal office hours, family time the Out of Hours on: 0300 123 6722. The social worker or Out of Hours worker will inform the child's parents if you have not already done so and may arrange for them to attend the GP/hospital as well if it is appropriate.

Fostering Advice line is also available: 0300 123 6724 18.00 to 23.00 Monday- Friday 08.00 to 23.00 Weekends and Bank Holidays

Accidents and illnesses must be recorded, no matter how small. It is important that you inform your supervising social worker/child's social worker as soon as possible after the event and complete a specific incident form. You must record on your Significant Incidents Form details of the accident, noting how it occurred and what action you have taken. It can sometimes be difficult to remember or explain the signs of an injury weeks later, so do this as soon as you can.

### **Alcohol**

Foster carers should be mindful of how their attitudes towards alcohol may impact on children and young people in their care. Some children and young people have come

from homes where alcohol has been a negative feature in their lives and therefore may be fearful when they see carers drinking. It is acknowledged that, as with many other families, foster families may have alcohol in their homes and drink in accordance with safe limits. For further information, please go to [www.drinkingandyou.com](http://www.drinkingandyou.com)

However, the welfare and safety of children and young people in their care must be the paramount consideration. Carers must ensure that there is at least one carer at all times who can take full responsibility for children in placement. Foster carers should not encourage children/young people to drink or purchase alcohol under the legal age limit. Where carers are aware that young people in their care may be drinking alcohol, they should advise the social worker.

### **Blood Borne Viruses:**

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

Blood borne viruses are spread by direct family time with the blood of an infected person. Certain other body fluids may also be infectious (e.g. semen, vaginal secretions and breast milk.) It should be noted that blood-borne viruses are not spread by normal social family time and daily activities (e.g. coughing, sneezing, kissing, hugging, holding hands, or sharing bathrooms, swimming pools, toilets, food, cups, cutlery and crockery.) All foster carers are expected to establish good routines and safe practices in setting good standards regarding hygiene. This involves taking particular care if they are assisting people who have vomiting or diarrhoea, cleaning and covering wounds, and ensuring that family members have their own towels, flannels, toothbrushes, razors, nail scissors, nail brushes and hairbrushes.

The main blood borne viruses of concern are Hepatitis B (HBV) & Hepatitis C (HCV) and Human Immunodeficiency Virus (HIV) which causes acquired immune deficiency syndrome (AIDS). See sections on these particular blood borne viral infections below.

### **Family time**

Family time with birth family and friends can be important to children and young people's emotional health and there is a duty on the local authority and foster carers to promote family time between cared for children, their parents, relatives and other people who are important to them. The Council supports this process and foster carers play a big part in helping to prepare children for family time and in supporting them before, after, and sometimes during the family time. Family time can be direct (face to face), or indirect via letter, phone, or email. The use of social media brings particular challenges.

For some children whose future is still undecided, family time may be supervised and assessed by a social worker or family service worker. In other situations, a foster carer may be asked to oversee a child's family time where the placement and/or relationships would not be undermined. In all situations, carers are expected to facilitate the child's attendance at family time. They are also expected to transport

children to and from family time. Where journeys or duration of family time are exceptionally long, some negotiation around expectations can take place.

Significant issues relating to family time (including the child's behaviour before and after family time and their wishes and feelings about family time) should be recorded in the child's daily log written by the foster carer and shared with the child's social worker.

### **Cot Death**

Cot death is a term commonly used to describe a sudden and unexpected infant death that is initially unexplained. The equivalent medical term is 'sudden unexpected death in infancy' (SUDI). If a baby in your care becomes unwell, seek medical advice promptly. There are a number of steps that can be taken to reduce the risk of cot death. Please see the latest guidance available from the Lullaby Trust [www.lullabytrust.org.uk/safer-sleep](http://www.lullabytrust.org.uk/safer-sleep)

### **Looked after Children's nurses.**

Designated Nurse are health practitioners with specialist qualifications who work closely with Social Care. Their role is to work strategically to put services in place that address the needs of cared for children, and also to work closely with Social Workers and Foster Carers. They will undertake some health assessments themselves or liaise with other health professionals to ensure these take place. They can be family timeed if you are uncertain about how best to address the health needs of the child in your care and will signpost you to the most appropriate service. The family time email is: [cla.team@lancashirecare.nhs.uk](mailto:cla.team@lancashirecare.nhs.uk)

### **Drug and substance misuse**

Drug abuse is an increasing problem amongst young people and all children can be tempted to take or experiment with drugs and substances, regardless of their home and social circumstances. If you are concerned that a child placed with you could be using drugs or misusing substances you should family time the child's social worker and your supervising social worker to discuss these concerns.

It is often difficult to tell if a child/young person is using drugs, particularly when drug/substance abuse is on an ad-hoc basis. Some possible indications of drug/substance misuse are listed below:

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

Many of these signs are easily confused with those of normal issues of growing up in teenage years and normal adolescent. It is important not to jump to the wrong conclusion and to speak to the child's social worker or supervising social worker if you

are concerned. For further information, please go to [www.talktofrank.com](http://www.talktofrank.com)

Please see below the latest details for the young people's substance misuse treatment services in your area. Please family time these services for further information:

For further details about substances and types of services available for young people see the following website address for your area:

- [www.earlybreak.co.uk](http://www.earlybreak.co.uk)
- [www.youngaddaction.org.uk](http://www.youngaddaction.org.uk)

## Eating Problems

Children and young people have very different eating habits and preferences. Some will have large appetites whilst others are more particular and may have a smaller appetite. These differences are to be expected, and usually should not be a cause for concern although may be more common at the start of a placement. However, some eating problems are serious and can have a damaging effect on physical and emotional health and wellbeing. The most common eating disorders are Anorexia Nervosa, Bulimia and Compulsive Eating Disorder.

Further information on eating disorders can be found at: [www.nhs.uk/conditions/Eating-disorders](http://www.nhs.uk/conditions/Eating-disorders) or be obtained from your child's social worker and/or the Cared for Children's Nurse.

Eating problems, which frequently show during adolescence, should be taken seriously. As well as having an adverse effect on a young person's physical health and wellbeing, eating disorders are often a sign of a significant emotional problem.

It is not always easy for foster carers to spot the signs of eating disorders. Below are some pointers which may indicate or suggest a problem:

- Regularly skipping meals and obsessively counting calories.
- Eating only low calorie or low fat foods.
- Avid interest in buying or cooking food for others.
- Wearing loose clothes to hide the body.
- An obsession with exercise.
- Dramatic weight loss or gain.
- Food missing in large amounts from fridge/larder.
- Disappearing from the table directly after meals (in order to make themselves vomit).

Statistically, eating disorders affect more girls than boys but it is important to remember that boys do suffer from them too. If foster carers are concerned about the eating habits of a child placed with them, they should family time the child's social worker to discuss the matter.

## Emergency Aid and Medication

From time to time accidents happen around the home. You should have a basic first

aid kit available to deal promptly with minor injuries.

It is an expectation that all foster carers are trained in First aid. If you are not already trained in Emergency Aid, Lancashire County Council run basic First aid courses and you are expected to enrol at the first available opportunity.

Safe storage of medication is essential, ideally in a locked cabinet out of sight and reach of children. Under no circumstances should medication or drugs be left in a place where children can get hold of them. You will be expected to complete records when you administer any medication or when there has been a medical incident i.e. hospital admission, consultant/GP appointment.

If a child who is placed with you has particular health or developmental needs, the child's social worker should be able to provide information and give advice on specialist advice or support available. In order for you to accept responsibility to undertake procedures such as administering rectal medication, tube feeding, injections etc., the following criteria should be met:

- The child's parent has given written consent.
- You are willing to do the task.
- You have been instructed in the technique by a qualified nurse or doctor who is satisfied that you are competent and confident to undertake the specific procedure and have provided written confirmation of this.
- This will be recorded within the delegated authority documentation.
- 

### **Emotional Health and Well-being of Cared for Children.**

Many cared for children have experiences of abuse, neglect and trauma that can impact on their emotional health and well-being and their ability to form healthy attachments to their foster carers and others.

Foster carers are asked to complete the Strengths and Difficulties Questionnaires for the initial health assessment and subsequently on an annual basis. The information gathered is used to better understand the emotional needs of cared for children. For those children who score highly, and for others with specific needs for therapeutic support. For further information, please go to: [www.sdqinfo.com](http://www.sdqinfo.com)

Supporting Carers and Young People Together+ (SCAYT+) is a multidisciplinary team of Emotional Health Workers, Social Workers and Clinical Psychologists provided Lancashire County Council a wide service promoting positive mental health and emotional wellbeing for children and young people who are looked after and adopted that Lancashire has responsibility for. For further information, please go to: [www.lancashire.gov.uk/children-education-families/emotional-health-services-for-adopted-and-looked-after-children.aspx](http://www.lancashire.gov.uk/children-education-families/emotional-health-services-for-adopted-and-looked-after-children.aspx)

### **General Practitioner and Dentist Registration**

All children who are looked after must be registered with a General Practitioner and

a Dentist. Foster carers may be asked to arrange this. Children should remain registered with their own GP or dentist if possible. The designated nurses may assist with finding a dentist. Foster carers will be asked to keep a record of a child's illnesses and treatment. This will be in the daily record, and red health book.

### **Haircuts and Hair Care**

Children in your care will require haircuts from time to time and this can be an area where parents wish to be consulted. It is helpful if this is discussed at the Placement Planning meeting along with other areas of Delegated Authority (see section on Delegated Authority) so that it is clear whether a parent and/or social worker is delegating this decision making to you or not. If not, you will need to inform your Social Worker before any haircuts are carried out as parental permission may have to be sought.

You should discourage any child you care for from having an 'extreme' haircut, including unconventional colouring, not least because of difficulties this may cause regarding schooling.

If a child has specific needs regarding hair care, this should be discussed with their social worker and/or your supervising social worker to ensure you know how to provide this.

### **Head Lice**

Head lice can be a common problem (they prefer clean heads), so do not assume it could not happen to your family. Check all family members weekly for head lice, using a 'head lice' detector comb. Head lice can only be caught by head to head family time. All people infected with head lice should be treated immediately. There are a number of treatments available, depending on the age of the child, and this should be discussed with a pharmacist.

### **Health Assessments, Health Care Planning and Consent**

All children in care must have regular Health Assessments (sometimes called medical examinations), and you are expected to accompany your foster child to the appointments if they are under 16 years.

An initial health assessment should be requested by the child's social worker on entry into care. An appointment for initial health assessment will be arranged via the Children's social work team (where possible within 28 days of the child entering care). This appointment will usually be with a paediatrician and include some medical examination. Following this appointment a health care plan will be produced and the foster carer should receive a copy of this.

Review health assessments are completed every six months for children under five years usually by the child's health visitor. Annual review health assessments are completed for children and young people aged five to eighteen years; usually by the school nurse. Following this appointment a health care plan will be produced and the

foster carer should receive a copy of this.

Foster carers cannot sign medical or dental consent forms without this being delegated to them by the person with parental responsibility (this would usually be a parent or social work manager). This signed Medical Consent Form should be provided by the Social Worker when the child/young person first arrives at their home.

There may be some health interventions or treatments that fall outside this delegated consent and it will therefore be necessary for the parent or Senior Manager in Children's Social Care to sign any consent form giving their agreement to such medical treatment.

Where planning is possible, carers should give the Social Worker as much notice as possible so that appropriate consents can be sought. Consent will vary according to individual circumstances. It is good practice to involve all those with parental responsibility in decision making but in an emergency situation this may not be possible. The medical practitioner undertaking the procedure must be clear that there is informed consent.

Young people aged sixteen years or over give their own consent to health assessments and some under sixteen may also be able to give or refuse consent if they are considered by the medical staff to have sufficient understanding.

Foster carers are expected to organise non-emergency medical treatment, including dentists and opticians, with the permission of the person with parental responsibility who has delegated this responsibility to them. If the foster carer feels that the child is not getting the treatment they require and has reason to believe the parent is unreasonably withholding consent, the foster carer should speak to the child's social worker or their supervising social worker.

It is good practice for foster carers to record any medication the child is taking whether it is prescribed by the child's GP or not. When a child arrives at a foster carer's home for the first time they should find out from the child's social worker any relevant information about the child's health needs (e.g. if the child is taking any medication, what it is, when it is taken and how often, if the child suffers from any allergies etc.). This information should be recorded in the Placement Plan which is to be completed prior to placement or within 5 working days where this is not possible.

## **Health Plans**

Health plans are completed by health professionals following the annual statutory health assessment. Copies of the child or young person's individual health plan are sent to the child's social worker, foster carer, GP and birth parent where appropriate, following each health assessment taking place. Its purpose is to ensure that children's health needs are addressed and that key professionals involved in their care are aware of their individual roles and responsibilities.

The health plan will provide current and previous information (initial plans only), about the child's health. It will include significant health conditions, immunisation details and unmet health needs. The health plan is reviewed as part of the child or young

person's review and care plans on a regular basis. Actions will be identified as necessary with the named person responsible.

Health plans should be made available to you if a change of placement occurs within the review period. Should a child/young person cease to be cared for, the health plan will continue to be monitored by the lead health professional, for example health visitor.

## Health Records

When a child is placed with you, they will have a 'Child Personal Health Record', also known as 'The Red Book'. This is a booklet that is intended to record all significant aspects of the child's health needs, such as:

- Family time details for the GP, Dentists, and any other health professionals.
- The child's medical and medication needs.
- Hospital & other medical appointments.
- Immunisations and vaccinations.

As the child's carer, you should make sure that information is recorded and kept up to date. If your foster child moves to another care placement, or to adoptive carers, you must pass these records to the new carers.

## Hepatitis

Up to date information on the different Hepatitis infections can be found at the NHS website [www.nhs.uk/conditions](http://www.nhs.uk/conditions) some of this information is summarised below:-

**How does Hepatitis spread?:** There are two types of Hepatitis infections (B & C – see below), both viral infections and both are spread by blood-to-blood family time with an infected person's blood or other body fluids if they are contaminated with blood. The main routes by which the infections are spread are the same as HIV but there is no proven association between breastfeeding and Hepatitis B & C transmission.

**Hepatitis B:** Hepatitis B is a viral infection that may damage the liver and cause serious long-term consequences. People with acute Hepatitis B infection do not necessarily have symptoms or feel unwell but some do get a short 'flu-like' illness, often with jaundice (yellowing of the skin and eyes and dark urine), nausea, vomiting and loss of appetite. Infection without symptoms and illness without jaundice occurs particularly in children.

Hepatitis B is a viral infection that may damage the liver and cause serious long-term consequences. People with acute Hepatitis B infection do not necessarily have symptoms or feel unwell but some do get a short 'flu-like' illness, often with jaundice (yellowing of the skin and eyes and dark urine), nausea, vomiting and loss of appetite. Infection without symptoms and illness without jaundice occurs particularly in children. Children with persistent Hepatitis B infection should be referred for assessment by a specialist clinician. Drug treatments may be available and Hepatitis infection can be prevented by immunisation.

**Hepatitis C:** Like Hepatitis B, Hepatitis C is a viral infection that may damage the

liver. Many people with Hepatitis C infection have no symptoms and are often unaware that they have been infected. Some people will experience tiredness, nausea, loss of appetite, abdominal pain and flu-like symptoms. They may also develop jaundice but this is rare.

Immunisation against Hepatitis B and testing for blood borne viruses:

**Cared for children:** the need for a child to be immunised against Hepatitis B, or tested for a blood borne illness should be considered as part of their medical assessment before or shortly after placement. Carers need to be mindful of the potential stigma and ensure they maintain confidentiality around this issue.

**Foster carers:** the need to offer immunisation to foster carers should be based on a risk assessment by the local authority making the placement. All carers are expected to practice safe hygiene practices to guard against spread of infection.

**Consent to testing:** Young people should be given age appropriate information and advice so that the nature of the test and the implications of a positive test are well understood. It is for the doctor concerned to decide whether a young person is judged as able to give consent. For younger children and others not able to give their own consent, consent will be sought from a person with parental responsibility (see section on Health assessments and other health appointments). This applies also to HIV below.

## Human Immunodeficiency Virus (HIV)

Up to date information on Human Immunodeficiency Virus can be found at the NHS website [www.nhs.uk/conditions](http://www.nhs.uk/conditions). Some of this information is summarised below:

HIV is also a blood borne viral infection. HIV attacks the body's immune system making it vulnerable, over time, to infections that a healthy immune system would fight off. However, people with HIV do not necessarily have symptoms or feel unwell.

When a person with HIV infection contracts other opportunistic infections that take advantage of the already damaged immune system they may be diagnosed as having Acquired Immune Deficiency Syndrome (AIDS). There is as yet no cure for AIDS but there are anti-retroviral drugs that can improve the quality of life/extend the lifespan of people with HIV as well as prophylactic drugs that prevent them from contracting opportunistic infections and keep them in good health.

The vast majority of HIV-infected children in this country have acquired HIV infection through mother to child transmission. Infection may pass from the mother to the unborn child in the womb during pregnancy, during delivery of the baby or after birth through breastfeeding. Children with HIV will usually be referred to a specialist HIV paediatrician for assessment.

HIV is spread by:

- Sexual intercourse with an infected person without a condom (i.e. unprotected sex).
- Sharing blood-contaminated needles or other equipment for injecting drug use.

- From an infected mother to her baby during pregnancy, while giving birth or through breast feeding
- Unprotected oral sex with an infected person
- Through a blood transfusion where blood donations are not screened for HIV (all blood donations in the UK are screened for HIV)
- Invasive medical/dental treatment using non-sterile instruments/needles
- Tattooing, cosmetic piercing or acupuncture with unsterilized needles or equipment
- Sharing razors and toothbrushes (which may be contaminated with blood) with an infected person

## **Immunisations**

Children placed with foster carers must not be given inoculations without prior consultation with the child's social worker.

## **Medicines (see First Aid and Medication)**

Medicines should be stored safely in the home. Foster carers will need to keep a written record of all medication, treatment and first aid given to children during their placement.

## **Medical examinations (see Health Assessments)**

### **Medical Advisor to the Panel**

The Medical Advisor to the Fostering Panel advises on adult health issues in relation to foster carers, advising on the impact any health issues may have on their suitability to foster. They also have a role in relation to health issues for cared for children.

## **Mental Health Services for Cared for Children**

The mental health needs of looked after children are considered at their health assessments and will form part of the Health Plan. Referral to the Child and Adolescent Mental Health Service (CAMHS) is always considered when a young person's mental health is causing concern.

## **Meningitis**

There are a number of different types of Meningitis but all require prompt action. If you have any reason to suspect that a child has contracted Meningitis, you should seek medical attention immediately. It is therefore important that you can spot the symptoms that indicate the infection may be present. Advice can be found at the NHS website

[www.nhs.uk/conditions/Meningitis](http://www.nhs.uk/conditions/Meningitis)

Septicaemia (blood poisoning) can also occur, and also develop very quickly. The spots or bruises do not turn white when a glass is pressed against them. The rash must be taken seriously and medical attention sought immediately.

## Piercings

It is acknowledged that body piercing is a form of self-expression and that many young people will experiment with it. Each case should be considered on an individual basis but, in general, foster carers should discourage them, pointing out the possible health risks from unsafe materials, needles etc.

There are no legal restrictions on the age at which young people over the age of 16 years can have their ears or other parts of their body pierced, although only young people over the age of 16 years can legally have their genitals or breasts (females only) pierced. However, reputable establishments will ask for parental consent if they feel the young person is too young or immature to reliably consent themselves. As in other matters where parental consent is required, this consent must have been delegated to you as a foster carer by someone with parental responsibility.

It is therefore expected that you will encourage the young person to discuss this with their social worker or refer to the child's Social Worker yourself as they may need to consult with the birth parents and anybody else who has parental responsibility. Whilst carers should under no circumstances undertake or encourage a young person to have a piercing, carers should ensure as far as possible that, if the young person is determined, methods used are as safe as possible (e.g. done by a reputable person).

## Sexual Health

It is expected that foster carers and Social Workers will support cared for young people - including those under 16 – with information on sexual health and contraception. Where you know, or suspect, that a young person you are fostering – even where they are under 16 - is sexually active, or are likely to become so, you should provide them with details of where and how to family time local services for free contraception and advice. Health Professionals can give contraceptive advice and treatment to young people under 16 without parental consent, or the consent of Children's Services if they are on a care order, if they feel that the young person is mature enough and of sufficient understanding.

Cared for young people 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 young people, even when they are subject of Care Orders. However, you must tell the young person that you are obliged to share with their Social Worker any information that they may want to give you in confidence, if this information suggests that they are at risk of abuse.

Cared for young people may need advice and reassurance regarding personal relationships. Foster carers should feel able to offer this or to signpost the young person to suitable services. For further information, please go to:

- [www.nhs.uk/Livewell/Sexualhealthtopics/Pages/Sexual-health-hub.aspx](http://www.nhs.uk/Livewell/Sexualhealthtopics/Pages/Sexual-health-hub.aspx)
- [www.fpa.org.uk](http://www.fpa.org.uk)

## Smoking

Only 15% of the smoke from a cigarette is inhaled by the smoker, the rest goes into the surrounding air and other people breathe it in. Health problems, such as asthma, chronic bronchitis or certain allergies can be made worse by passive smoking. Babies and children who cannot avoid smoke where they live and play are at particular risk. Children and young people in Care have the right to live in houses that are smoke free, and to expect that those caring for them will set a good example by not smoking. If you are a foster carer in a smoking household, no members of your household must smoke in the vicinity of any children or young people who you foster, especially not in the same room as them.

Lancashire County Council operates a 'no smoking' policy in all its workplaces and buildings and council employees are prohibited from smoking on council property. Lancashire Fostering Service is working towards a no smoking policy in all foster carer households.

You are expected to discourage children and young people who you foster from taking up smoking, and to support them to stop if they have already started. Advice and guidance on how best to manage children and young people's smoking is available from your Supervising Social Worker and other health professionals in the borough or you can call the NHS Stop Smoking Service on 0800 328 8534 or visit [www.smokefree.nhs.uk](http://www.smokefree.nhs.uk)

## Tattoos

It is an offence to tattoo anyone under the age of 18 years unless a qualified medical practitioner does this for medical reasons. You should discourage any young person you foster from getting a tattoo. If the young person gets a tattoo, you should report this to the child's Social Worker with the name and address of the where the tattoo was done.

## Wetting and soiling

It is important that any child who is bedwetting or soiling is treated sensitively. If a child starts wetting after being reliably dry, or has never been dry in the day by the age of 4 to 5 years, you need to seek advice. Discuss this with the child's Social Worker or your Supervising Social Worker. Health professionals (school nurse or GP initially) will also be able to offer support in this area and Health Visitors can also provide invaluable advice. Remember to liaise with school/nursery as good practice and in order to decide on a shared approach. For further information, please go to: [www.eric.org.uk](http://www.eric.org.uk)

## Section 4: Health & Safety

The fostering service has a health and safety policy, which should have been explained to you when you were approved. The policy states that applicants will have had an assessment of the home, garden and immediate environment as part of the overall assessment.

Carers are responsible for ensuring that their home is a safe environment and that any actions agreed by themselves and the supervising social worker are addressed.

The Health & Safety guidance is for fostering staff undertaking a health and safety check of prospective foster carer/s, for staff undertaking a health and safety check within foster carer reviews and for foster carers who are undertaking their own initial health and safety assessment of their home. Where a health and safety check is being completed as part of a prospective carer assessment this should be done as soon as possible within the process. The check will be completed with reference to this guidance, the checklist and any other information which may have been made available to the assessor by the Directorate.

Lancashire County Council has developed a checklist for health and safety, to comply with National Minimum Fostering Standards, which is for use within the assessment process for new foster careers.

### Other Aspects of Health and Safety

There are other health and safety issues, which are not covered by the checklist and this guidance. Such issues will include moving, lifting and handling and behaviour management. These should be dealt with within the usual Placement Plan documentation and be included within an individual risk assessment.

Other issues such as First Aid training and Health and Safety Training should be discussed in the context of current training needs.

### General Household Conditions

The following issues should be considered within the assessment and further guidance is available within the Recruitment and Assessment Procedures:

Space within the accommodation Sufficient room for study/quiet time Child's sleeping arrangements

A range of leaflets can be obtained which outline various aspects of health and safety. See for example the:

- Royal Society for the Prevention of Accidents (ROSPA): <http://www.rosipa.com>
- Child Accident Prevention Trust (CAPT): [www.capt.org.uk](http://www.capt.org.uk)
- Food Standards Agency (FSA): [www.foodstandards.gov.uk](http://www.foodstandards.gov.uk)

## Accident Prevention

Most accidents to children happen in the home and many of these could have been prevented. Children are naturally inquisitive and carers have to strike a balance between encouraging a child's wishes to explore and preventing them from hurting themselves. Being vigilant about the physical environment within your home and the level of supervision of children in your care that you offer will help to keep children safe. Useful information can be found at the Royal Society for the Prevention of Accidents (ROSPA) website [www.rosipa.com/homesafety](http://www.rosipa.com/homesafety) to help you to assess and address risk.

Regular monitoring and reviewing of the health and safety checklist, maintaining awareness of the individual children in your care, reviewing your safe caring policy and regular unannounced visits will help to ensure you operate a safe environment for children and young people.

As children get older, they will spend more time outside the home unsupervised. Help them learn to recognise and understand risky situations and how to manage them.

See section on Accident and Sudden Illnesses for what to do in the event that an accident does occur.

## Babysitting and Alternative Care

Everyone caring for children need a break from time to time and occasionally have to leave their children with relatives, friends or babysitters. As a foster carer, you will have considered your support network as part of your assessment and identified people who are prepared to offer both emotional and practical support, including caring for children when necessary. Following your approval, you will meet other foster carers through support groups, training, and family time between siblings. Many foster carers form relationships which allow them to offer informal support to one another, including caring for children in each other's placements.

The delegated authority given to you means you are able to use your own discretion and judgement as to who may be appropriate and safe alternative carers for any particular child. You will need to be mindful of their particular needs and the babysitter's ability to keep the child safe, be trusted to maintain confidentiality and competent to deal with any emergency or particular behaviours that the child may display.

Lancashire County Council identifies the right placement and right carer for a child. If the foster carer identified is not providing the majority of the care, the care plan for the child may need revisiting and the registration of the foster carer may also need reviewing as continuity of care assists children in forming attachments to their carers.

## Car Safety

It is a legal requirement for drivers to ensure that children are restrained by an appropriate car seat when travelling in vehicles. Any child travelling in your car must have the appropriate restraint. Never use a rear facing seat in the front passenger seat if an air bag is fitted that cannot be temporarily disabled by a manufacturers on/off switch. Never use a second-hand restraint. .

Government regulations specify what kind of child restraints are needed for children of different ages, heights and weight. Please see <https://www.gov.uk/child-car-seats-the-rules> or [www.childcarseats.org.uk](http://www.childcarseats.org.uk) for further details and other guidance on car safety.

Foster carers are required to have business use as part of their car insurance. Failure to comply with this may invalidate insurance cover if carers are unfortunate to have an accident whilst undertaking tasks relating to fostering.

If a child looked after is transported by a friend or relative of a carer, it is the foster carers responsibility to ensure that the car is road worthy, has a current MOT and is taxed and insured. The carer must also ensure that the driver has a current driving licence.

### **Emergencies**

If an emergency arises, for example, if a child or young person placed with you has an accident, is missing, is in trouble with the Police, or any incident which you feel requires urgent attention you should family time the child's social worker immediately. If they are unavailable ask to speak to his/her team manager. If this is not possible speak to the 'duty' social worker.

If the emergency takes place out of office hours, family time the Out of Hours Service. Remember to record the event in your daily log and inform your supervising social worker as soon as possible after the event.

### **Firearms/Weapons in the Foster Home**

It is considered that ownership of licensed firearms and shotguns, unlicensed weapons and replica guns can pose a risk to the safety of children in that person's care. However, a balance has to be drawn between the rights of individuals to own licensed guns and other weapons not requiring a licence and the potential risk to children in their care from being injured or killed through accidents or misuse of the weapon.

Therefore, where foster carers or anyone else in the family household have a certificate for the possession of a shotgun or firearm or have unlicensed weapons and replica guns on the premises, a thorough risk assessment of the safety factors for children will be undertaken as part of the assessment of their suitability as carers or as part of their annual foster carer review.

The individuals seeking approval or re-approval will be advised that the safest option is for any firearms, shotguns, and other weapons and their ammunition to be always stored away from the family home.

There must be a good reason for the local authority to consider that the weapons may be stored in the family home. If the weapons are to be stored at the family home they must be kept at all times in a commercially manufactured gun cabinet according to Home Office recommendations. Removal of the weapons from the cabinet must only be during transit to a gun club or for approved activities and must be contained in a secure case.

Examples of good reason for storage of weapons at the family home include situations where the family live and work on a farm, or where someone living in the family home is a member of a gun club that has no safe storage facility.

The carers will be advised that children should not be involved with any activities involving weapons unless they are properly supervised and are part of an organised shooting/sporting activity (e.g. Army Cadets, shooting sports). Foster carers must always seek permission from the local authority before involving children in such activities.

### **Identification of Callers**

If someone calls at your home on business relating to your fostering role, they should always be able to verify their identification. Always check their ID and satisfy yourself that they have a legitimate reason for calling.

### **Identification for Foster Carers**

All foster carers are asked to submit a photograph during their assessment which is used to prepare an ID card on approval. It is recommended that all carers carry their ID card and they will be needed when visiting Council offices. The Foster Carer ID card entitles you to discount from certain retailers further information can be obtained from your supervising social worker.

### **Notifiable events.**

Should any of the following events occur within your household or with the child or young person you are caring for:

- To a child placed with foster parents necessitating calling the police to the foster parent's home.
- Involvement or suspected involvement of a child placed with foster parents in prostitution.
- Instigation and outcome of any child protection enquiry involving a child placed with foster parents.
- Hospitalisation of any child looked after.

You should notify the child's social worker and your Supervising Social Worker and complete a Specific Incident Form giving relevant details. All notifications must initially be made verbally, and confirmed in writing.

In addition, Ofsted require the service to record and monitor the following events that may involve its foster carers or staff:

- Any serious complaint about any foster parent approved by the fostering agency.
- When information is provided to the Independent Safeguarding Authority in respect of an individual working for a fostering service.

## **Leisure Activities.**

Children looked after are to be encouraged to participate in activities within the community. Foster carers will be expected to seek out such opportunities if these will serve to enhance the young person's life experiences.

## **Overnight Stays**

An overnight stay is generally a 'one off' short stay with non-relatives, e.g. birthday parties, sleepovers etc. In considering overnight stays or sleepovers, cared for children should, as far as possible, be granted the same permissions to take part in normal and acceptable age appropriate peer activities as would reasonably be granted by the parents of their peers. In most circumstances, decisions on whether or not to agree to overnight stays will be delegated to you as the foster carer to provide you with the maximum flexibility in taking decisions. Arrangements for such decisions should be clearly written into the Placement Plan, and the Care Plan, properly respecting the views and wishes of the child and birth parents. Only where there are exceptional reasons are either the permission of the responsible authority required or restrictions placed on overnight stays. In planning an overnight stay, you should ensure that:

- You have family time details for the household in which the child is staying.
- You make family time with the household beforehand to assist in assessing the request for an overnight stay and to confirm arrangements, your foster child has your family time details should they want to get in touch whilst at an overnight stay and, the arrangements for, and occasions when a child has overnight stays is clearly recorded in your records.

## **Pets in the Foster Home**

It is recognised that you and your family may keep pets, and any potential risks from these to a child you foster will be considered when a child is placed with you and through your Annual Reviews. Further advice may be sought by the Fostering Service from veterinary professionals in the case of animals that may be regarded as potentially dangerous, such as certain breeds of dog. You will be asked to answer certain questions aimed at establishing that any pets are responsibly cared for and managed.

For further details see [www.thebluedog.org](http://www.thebluedog.org) or [www.rspca.org.uk](http://www.rspca.org.uk)

## Section 5: Staying Safe

It is important that children in our care feel safe and are safe. Foster carers must work with other professionals to actively safeguard and promote the welfare of foster children. The Council has the following policies to help to keep children and young people safe:

### Child Protection

All information about child protection in Lancashire County Council is held on the Local Safeguarding Children's Board (LSCB) website. It is essential that all foster carers familiarise themselves with the signs and symptoms of abuse and understand their responsibilities to take appropriate action to safeguard children in their care.

### Allegations against Professional Carers

It is always important that any allegations about the quality of care are taken seriously and investigated properly. The Local Authority Designated Officer (LADO) coordinates the investigation when allegations are made against professional carers, including foster carers.

If a foster carer is the subject of an allegation that they have harmed a child, it can be extremely distressing for all involved. The supervising social worker will remain in family time with the foster carers and their family throughout the investigation and keep them informed of the process. However, it is acknowledged that the supervising social worker's primary concern must be the safety and wellbeing of the children concerned, and this can make it difficult for them to effectively support the foster carer during the investigation period and subsequent foster carer review. Support will be provided by your supervising social worker and will be offered from an agency independent of the Directorate

Please ask your social worker for a copy of our leaflet 'Managing Allegations' we also provide training in this area.

### Bullying Prevention Policy

Lancashire County Council will be pro-active in preventing bullying and protecting those children and young people who experience bullying. If you learn that a child that you are caring for is bullying other children, or is being bullied, you must inform the child's Social Worker or your own Supervising Social Worker.

For more information on all the policies please go to:

- [www3.lancashire.gov.uk/corporate/web/?siteid=3181&pageid=7731](http://www3.lancashire.gov.uk/corporate/web/?siteid=3181&pageid=7731)

### Behaviour Management Policy for Foster Carers

Children and young people need to enjoy sound relationships with their foster family, interact positively with others and behave appropriately. However, children can sometimes exhibit behaviour that can be difficult to manage. This is often the result of

early formative life experiences and is a way of coping with what the child sees as a difficult situation. It can be one way that a child can try to gain some control over their life. It is important to remember, in managing behaviour that challenges you, that it is the behaviour that is unacceptable, and not the child involved.

The Behaviour Management Policy provides information and positive strategies for foster carers to manage their responses arising from caring for children, particularly where they display very challenging behaviour.

It is the policy of Lancashire County Council that no cared for child should be subject to any form of physical punishment or any other humiliating forms of treatment or punishment.

For more information on all policies, please go to:

[www3.lancashire.gov.uk/corporate/web/?siteid=3181&pageid=7731](http://www3.lancashire.gov.uk/corporate/web/?siteid=3181&pageid=7731)

### **Children Missing from Care**

Children should be helped to understand the dangers and risks of leaving the foster home without permission. The Fostering Service will work with you and alongside the police (where appropriate) to take appropriate action to find children who are missing. The policy and procedure sets out what you will need to do and who needs to be involved should a young person in your care go missing. .

Each Local Safeguarding Children's Board has a written multi-agency protocol regarding children who go missing from home or care. For foster carers living in the *Pan Lancashire Area*. You will be given a copy of the Missing from Home Protocol on approval. The fostering service recognises the link between children who go missing and child sexual exploitation. The Local Authority therefore works proactively with young people, parents and carers and others to address the reasons why young people go missing and attempts to manage these in a way that reduces risk to the young person.

For more information, please go to:

- [www.panlancashirescb.proceduresonline.com/pdfs/joint\\_proto.pdf](http://www.panlancashirescb.proceduresonline.com/pdfs/joint_proto.pdf)
- [www.lancshiresafeguarding.org.uk/media/8933/6-Missing-from-home.pdf](http://www.lancshiresafeguarding.org.uk/media/8933/6-Missing-from-home.pdf)

### **Child Sexual Exploitation (CSE)**

CSE is when a young person is used by being made or tricked into doing something sexual sometimes receiving something in return like love, affection, money, drugs or alcohol.

Foster carers for Lancashire will receive training in respect of child sexual exploitation and ongoing information will be provided to them regarding this aspect of caring for vulnerable young people. For more information, please go to [www.stop-cse.org/saysomething](http://www.stop-cse.org/saysomething) .

### **Complaints or Concerns from Professionals**

Lancashire has a procedure that provides a guide to what should happen when complaints are made by other agencies about services or staff delivered on behalf of Lancashire County Council. It aims to ensure that when concerns are raised, they are acted upon, regardless of who employs the person raising the concern.

### **Delegated Authority for Foster Carers**

Although foster carers look after cared for children on a full time basis, they do not have parental responsibility for them. This stays with the parents, others with legal orders that give it to them, and is shared by the local authority where a court has made a legal order to do so. Foster carers are, however, able to make decisions about and for the child as a result of this parental responsibility being delegated to them.

The Fostering Network have published a Handbook on Delegated Authority which can be found at:

[www.fostering.net/sites/www.fostering.net/files/public/resources/good-practice-guidance/delegated\\_authority\\_handbook\\_2011.pdf](http://www.fostering.net/sites/www.fostering.net/files/public/resources/good-practice-guidance/delegated_authority_handbook_2011.pdf)

The decisions that are delegated to a foster carer in respect of each individual child are agreed when the placement is made and kept under review. It is expected that foster carers will be given the maximum appropriate flexibility to take decisions relating to children in their care, taking account of the placement plan.

### **Disclosure /Allegation of Abuse from a child /young person.**

If a child tells you about abuse that you were unaware of make sure you

- (1) Write down as soon as possible what the child has told you
- (2) Do not encourage the child to go into lots of detail. Reassure the child and let them know you think what they are saying is important and that you are taking it seriously
- (3) Family time the child's social worker or the duty social worker and your supervising social worker.

The social worker will discuss with the Practice Manager and at this point safeguarding procedures will be put into place and appropriate action taken.

For assistance and information you can family time Lancashire Social Care Services on

If the allegation leads to a criminal prosecution carers need to be aware that the statements taken from children and used in criminal proceedings are subject to very strict guidelines. It is important that carers do not prompt the child or ask too many questions about the alleged abuse. Foster carers should always tell the child that they cannot keep secrets 'and that any disclosure will need to be shared with their social worker so that steps can be taken to ensure their safety.

It is important that carer's own children also know they should not keep 'secrets' shared with them by fostered children.

If a police investigation is felt to be necessary following an allegation of abuse, the child may be interviewed by a social worker and specially trained police officer to establish what has occurred and to gain evidence for a criminal prosecution. The foster carer may be asked to be present to support the child during this interview.

## E-safety

The internet is a great source of information and can help children make friends and assist with school projects and homework. However, foster carers should help children in their care understand how to keep themselves safe when using the internet or social media.

There is further information available from:

- [www.thinkuknow.co.uk/parents#](http://www.thinkuknow.co.uk/parents#)
- [www.childnet.com](http://www.childnet.com)
- [www.ceop.gov.uk](http://www.ceop.gov.uk)
- [www.chatdanger.com](http://www.chatdanger.com)
- [www.lancshiresafeguarding.org.uk/media/5660/LSCB-School-Parents-Bulletin-Apr-2015\\_GL.pdf](http://www.lancshiresafeguarding.org.uk/media/5660/LSCB-School-Parents-Bulletin-Apr-2015_GL.pdf)

## Extremism and Radicalisation

Safeguarding from extremism is no different to how foster carers would share a concern about drugs, physical and sexual abuse or any other form of criminality. However, below you will find details of a nationally accredited e-learning and a face-to-face training package which may be helpful:

- [www.lancashire.police.uk/help-advice/safer-communities/counter-terrorism/partner-training.aspx](http://www.lancashire.police.uk/help-advice/safer-communities/counter-terrorism/partner-training.aspx)
- [www.lancshiresafeguarding.org.uk/media/9448/9-Preventing-Radicalisation.pdf](http://www.lancshiresafeguarding.org.uk/media/9448/9-Preventing-Radicalisation.pdf)

## Safer Care

As a foster carer, you will be caring for other people's children in your own home and this makes it necessary to think about how behaviours and routines within your household might impact on and be interpreted by children who have experienced abuse, neglect and trauma. It is important that you understand some key principles for safeguarding children and young people and protecting yourselves from complaints and allegations. A Safer Caring Household Plan is prepared by each household, including foster carers' own children, to consider issues and identify strategies to keep everyone safe.

Every child is different and will require you to adapt the way you care for them to meet their individual needs. A Safe Care Plan will outline how you will care for each child and will be kept under review as their needs and/or your household changes.

Delegated authority supports you to make timely and safe decisions about children in your care and you are encouraged to take a realistic and proportionate approach to risk so that children and young people can grow and learn.

By considering your approach to safer caring, and sharing it on a need to know basis with others, you will be more confident to take your place alongside other professionals in the team around the child.

For more information, please go to:

[www3.lancashire.gov.uk/corporate/web/?siteid=3181&pageid=7731](http://www3.lancashire.gov.uk/corporate/web/?siteid=3181&pageid=7731)

### **Safer Sleeping.**

Over recent years there has been a significant reduction in infant deaths largely due to an increase in evidence based knowledge and practice. Despite this rates within Lancashire remain high and are consistently higher than the National average.

This guidance has been produced in recognition of the fact that unsafe sleeping arrangements are a feature in some infant deaths in Lancashire. Accordingly the emphasis of this document is on safer sleeping arrangements for babies.

For further guidance please click on the following links below:

- [www.lancshiresafeguarding.org.uk/media/7248/SAFER-SLEEPING-GUIDELINES.pdf](http://www.lancshiresafeguarding.org.uk/media/7248/SAFER-SLEEPING-GUIDELINES.pdf)
- [www.lancshiresafeguarding.org.uk/media/8930/5-Safer-Sleep.pdf](http://www.lancshiresafeguarding.org.uk/media/8930/5-Safer-Sleep.pdf)

### **Whistleblowing**

The Council encourages you to report any suspicions or concerns that you have about the conduct of our employees, councillors, partners or contractors that may affect the services we provide or the good name of the Council. This Policy and Procedure tells you how you will be supported by the Council to go about making a whistle blowing complaint in confidence.

Foster carers have a role in ensuring that children and young people stay safe. More information is available from your supervising social worker.

## Section 6: Education

It is recognised that many children who are looked after do not do well in the school system, and too few progress to further education. Foster carers should have a keen interest in their child's education, and support and encourage a range of achievements.

Every local authority has to appoint a Head Teacher for a Virtual School for Children In Care. The Virtual School works with schools, carers and children and young people to help all looked after children to reach their educational potential. The Virtual School provides training for Designated Teachers, Social Workers and regularly attends Foster carers forums.

Carers' involvement in the education of children is vital; they must understand the child's level of ability, interest and talents, and any area of weakness. They must have a relationship with the child's teacher and school, and work with them to support this important aspect of the child's life.

Carers are encouraged to understand how schools work, become involved in school life, and to know the significant people in school who are involved with the child.

All schools, pupil referral units, out of school tuition groups and other educational settings have a designated teacher to act as a resource and advocate for all children and young people who are in care.

They will work with you in ensuring that the child is well supported in all aspects of their education and are not allowed to 'slip through the net'.

Foster carers will ensure all children and young people attend school on a regular basis by:

- Establishing a clear expectation of school attendance, punctuality, uniform and the completion of home learning. They will support the child or young person's attempts to perform and achieve their potential.
- Ensuring attendance is promoted, supported and monitored.
- Making sure the child or young person has all the equipment necessary to participate fully in the life of the school.
- Taking the child or young person to school, if attendance is a problem. If older children do not consent to being taken to school by the carer, guidance from the supervising social worker/local authority must be sought.

The national teaching and advisory service have a booklet available 'Education a Carers' Handbook'. This booklet contains information about different types of school, national curriculum, basic teaching methods, key stages, exams and testing; it will help further relevant basic knowledge for carers who want to learn and have more understanding of the structure of the education system and the various settings which children and young people may attend. For more information, please visit [www.ntas.org.uk](http://www.ntas.org.uk)

## Personal Education Plans

Every child and young person in foster care has a 'Personal Education Plan'. (PEP)

This ensures access to services and support, contributes to stability, minimises disruption and broken schooling, signals particular special needs, establishes clear goals and acts as a record of progress and achievement. The plan ensures school, the Directorate and carers communicate and share information about a child's education.

It lists an achievement record, short term targets for the child/young person and long term plans and aspirations. These issues obviously fit in with the child's overall care plan, and foster carers are key partners in the compilation and review of the child's personal education plan. The carer will meet with the social worker and designated teacher and if appropriate, the child's parents to discuss relevant issues which need to be considered for the child in their education plan. The child is involved in an age appropriate way, and will often lead the direction of the plan.

Currently in Lancashire, all school age children in care, also have an Education Provision Map (EPM), which as part of their PEP. This document provides detailed educational targets, how the school is working to meet those targets and how the carer and social worker will support the child to achieve their targets. It also records how Pupil Premium Grant will be used by the school to support progress.

Personal Education Plans (including the Education Provision Map) need to be reviewed once every school term. It is important that carers have a current copy of both of these documents.

## Changing Schools

Sometimes a child is placed with carers who do not live near to the school attended by that child. While it may be convenient for the carer for a child to move to a school more local to them, it may not be in the child's interest to undergo such a significant change at this time. The decision to move a child's school is obviously an important one, and will not be taken lightly. The child's social worker will consider issues affecting this decision, and communicate with their parents if such a decision is being considered.

## Special Educational Needs & Disability (SEND)

It is wrong to think this term applies only to children with special needs or who have serious difficulties in school. In fact, it covers all children who it is believed need extra support and help with their studies because they struggle to make similar progress as their classmates. Some children who are looked after are deemed to have special educational needs due to physical, learning, emotional or behavioural difficulties which prevent them making reasonable progress. However, it should not be assumed that because a child or young person is in foster care that he/she will have special educational needs. Every school has a special educational needs co-ordinator and they oversee the process of ensuring such needs are identified, and steps taken to address them. Where a special educational need has been identified, it

is vital that necessary supports are in place, and the child's needs are met in a non-stigmatizing way.

The child's personal education plan must detail their needs and the support in place. Some children will require a statutory assessment under the Special Educational Needs & Disability Code of Practice 2014. This will detail an Education, Health & Care (EHC) Plan of their needs, and outline a plan of action with timescales for these needs to be met. Should any delays occur in the assessment process, the designated teacher should alert the child's social worker.

Support will be identified for foster carers throughout the assessment process. Subsequent reviews of the child's EHC Plan are statutory, and the foster carer must be fully involved in this process.

### **Home Learning**

It is recognised that quiet time and space in the house helps to promote the discipline and routine of this aspect of school life. Many children who are looked after will not have previous experience of active support and encouragement in this task, and carers need to develop a household routine to support them in this area.

Your supervising social worker and the child's social worker will make the necessary arrangements and make sure necessary guidance and safe use advice are also available. As the child progresses through school, more time and energies will need to be spent on home learning.

Foster carers are expected to provide appropriate learning environments for children placed. They must ensure a quiet area of the house is available for the purpose of home study. They should provide books, newspapers and other appropriate resources. It is expected a positive ethos about home learning and learning will be developed for the child or young person, and learning opportunities outside the home will also be provided, e.g. library visits. In the event of a child struggling with work it is important they are praised for what has been achieved, and not lose confidence by focusing on areas in which they struggle. Carers should liaise with the school in regard to areas of weakness, and ask for guidance in how best to support the child progress and better understand.

### **Parents' Evening**

Foster carers are expected to attend parent's evening for children placed. It may also be appropriate for the child's parents to attend. The child's social worker will liaise and advise for your child.

### **Exclusions**

Where it is felt necessary to exclude a child or young person in foster care, the school should ensure the issues leading to that decision are discussed fully with the child, social worker and carer. The child's parents will also be informed, and views taken into account. Every effort should be made to try and address the difficulties in order to avoid the need for further exclusion. Wherever possible, no child or young

person in foster care should be permanently excluded without the school first calling a case meeting involving the child, the social worker and the carer.

The Government's Education and Inspections Bill, which came into effect on 1st September 2007, means that children who are excluded should not be found in a public place, even when accompanied by parents. Parents are expected to take responsibility for children in the first five days of an exclusion. After five days other educational provision should be available. Foster carers will need to take responsibility during the first five days for supervising any child they care for. However, in cases where the carers are unavailable due to work commitments or personal appointments, the foster carers should alert the child's social worker and their supervising social worker for assistance and advice.

### **School Uniform**

If a young person is placed with foster carers with inadequate or no school uniform an allowance is available to provide this for logo items only. If the young person changes school or the school changes its uniform requirements assistance is also available to fund this. If Tier 1 carers they will receive full reimbursement for school uniform including non-logo items.

### **Travel to School**

Where possible the Directorate tries to maintain children at their own schools. Children and young people in foster care should experience the normal day to care and good parent would provide. Foster carers are expected to make transport arrangements as would any good parent.

### **Obtaining a National Insurance Number**

When a young person in foster care reaches 16, their social worker or carers will need to apply for their National Insurance Number which will enable them to work or claim certain benefits. More information is available from the National Insurance registration helpline on 0300 200 3502.

### **Support for Young People in Care who go on to University**

All young people who have been in care for more than 3 months will be supported by Lancashire County Council if they attend university. For up to date information please speak to the Child's Social Worker or Independent Reviewing Officer.

### **Consent for School Educational Visits.**

A procedure has been developed to enable foster carers to give permission for most educational trips and activities, as any reasonable parent would. This is included in the Delegated Authority Toolkit which will be completed at the start of placement and reviewed regularly.

If you have any questions about these arrangements please do not hesitate to family time your supervising social worker who will be happy to explain them to you.

All pupils will be offered the chance to go on visits of an educational nature with their school. It is expected that Children Looked After should be allowed to go, unless there are pressing reasons why not. Lancashire County Council will usually finance one educational trip abroad during the child's secondary education. Subject to an assessment of need further trips may be funded if necessary.

When your foster child became looked after, his or her parent will probably have given consent for the child to undertake some routine activities, including going on educational visits. This should be recorded on the Placement Information Record, and the Delegated Authority Toolkit.

If such consent has been given foster carers may give consent for children to go on educational visits, lasting up to 4 nights, organised by schools, provided:

- The visit is within the UK.
- The person with Parental Responsibility, in the case of an accommodated child, has given consent for certain activities.
- If the child is subject to a court order and the person with Parental Responsibility has refused to give consent for certain activities, the approval of the relevant manager is needed. Please family time your child's social worker who will make the necessary arrangements.
- If the child is subject to a court order the foster carer cannot override the directions of the court (for example if the proposed visit clashed with court ordered family time).
- The proposed visit will promote the child's best interests and the proposed visit will not place the young person, or others, at risk. (You should refer to the young person's fostering Risk Assessment for guidance) If necessary discuss the visit with the school and the child's social worker.
- In the case of expensive visits, financial approval will still have to be obtained.

In the event of a proposed school holiday abroad the advice of the supervising social worker/local authority must be taken.

If you are uncertain or uneasy about giving consent please do not hesitate to discuss it with the Child's Social Worker.

## **Holidays in Term Time**

### The Meaning of —Parent within the Education Act 1996

In the Education Act 1996 (which applies to England and Wales) section 576 defines a 'parent' to include anyone who has parental responsibility (PR) for a child, or who has care of them. This means that someone can be a 'parent' for education purposes without having PR for the child in question and may, for example, include a foster carer.

Education law makes such parents, responsible for a child's regular attendance at school. If a fostered child does not attend school regularly, their foster carer may be requested to enter into a parenting contract. If the child's attendance does not improve and the foster carer is unwilling to work with the school or the local education authority to improve the child's attendance, the foster carer may be prosecuted or fined.

Regulation 7, 'Leave of Absence', of the Education (Pupil Registration) (England) Regulations 2013 is the relevant legislation which states who can grant leave of absence (proprietor of the school e.g. head teacher or person delegated by them) and who can request it (parent, carer or corporate parent that the pupil normally resides with e.g. residential social worker). There is no longer a rule that a child can be absent from school for up to 10 days per year. Headteachers may not grant leave of absence during term time unless there are exceptional circumstances and they should determine number of days a child can be away from school if they grant leave.

Sources of further advice/information are:

A. Advisory Centre for Education (ACE) on offers advice on state funded education. Their website address is [www.ace-ed.org.uk](http://www.ace-ed.org.uk) and their general advice line is 0300 0115 142 (Mon-Wed 10am-1pm term-time only).

B. National Education Law Advice Line (run by the Coram Children's Legal Centre). Their website address is <http://www.childrenslegalcentre.com/> and the family time details for the National Education Law Advice Line are as follows 0345 345 4345 (Mon – Fri 9am – 8pm and Sat 9am – 12.30pm).

C. National Teaching and Advisory Service for Looked After Children. They can be family timeed via their website at [www.ntas.org.uk](http://www.ntas.org.uk) or via their advice line service on 0845 373 6886 (Mon – Fri 08:30am – 5pm term-time and Mon – Fri 09:00am – 4:30pm during school holidays).

## Section 7: Religion, Culture & Discrimination

A child's religious and/or cultural beliefs and practices are often an important part of a child/young person's identity and lifestyle. It is essential, therefore, that these are respected and valued by foster carers and their families whilst a child is separated from his/her own family.

On occasions these beliefs and practices may not be dissimilar from the foster carer's own and it may be appropriate for the child to observe the foster carer's own religious practices. However, it would be inappropriate for a child who did not have a religious affiliation to be pressurized to participate in the foster carer's own choice of worship.

When a child's religious faith differs from the foster carer's own it is important to be as informed as possible regarding the child's religious and cultural beliefs. The child's social worker will assist in obtaining appropriate guidance and information in order that the child's placement can meet his/her religious and cultural needs. Although in some respects meeting these needs may involve aspects of care that the foster carer is unfamiliar with, such as preparation of specific foods, observing religious festivals, wearing particular items of clothing, foster carers need to appreciate these differences and their importance to the child and his/her family. Children placed with foster carers may come from families who practice a number of different faiths that may differ from that of the carer's themselves.

It is important that if you care for a child with a different religion to yourself that you understand it.

The BBC site: <http://www.bbc.co.uk/religion/religions/> Offers an over view of all major faiths and links to finding out more.

### Religions

#### Buddhism

This is a philosophy as opposed to a more traditional religious faith. Buddhists usually observe the following rules: no killing, no stealing, no sexually inappropriate behaviour, no telling lies, and no drinking alcohol. Buddhists worship in temples. They have a festival in May called Wesak. They do not have any dietary restrictions although many are vegetarian.

#### Christianity

This is divided into groups (Baptist, Catholic, Methodist, Presbyterian and Church of England, Scotland, Wales) who worship slightly differently from each other, but who largely follow the teachings of Jesus Christ and recognise the accounts of his life gathered together in the New Testament of the Bible. Christians gather in churches to worship. Their holy day is Sunday. There are no dietary restrictions, but some Christians fast on Good Friday.

#### Hinduism

This is not based on a particular teaching or philosophy and practices vary depending on a person's caste origins. Hindus pray twice a day. This usually takes place at home, where a room may be set aside for prayer and include a small shrine. Hindu temples tend to be used for longer celebrations and festivals. Some Hindus fast each

week; this means eating only pure foods such as fruit. Many Hindus are vegetarian. They do not eat beef or pork. Some do not eat eggs or cheese if it is made with animal rennet. Hindus avoid stimulants such as onions, tea and coffee and do not drink alcohol. Women may wear a sari or loose fitting trousers and sometimes a scarf (chador) covering the head.

### Islam

Muslims recognise Mohammed as the most recent and last prophet sent from God. They worship in a Mosque and their holy day is Friday. Their holy book is called the Quran. Muslims pray five times a day and prefer to use a special room for praying. They can, however, pray anywhere, including the open air; the only stipulation is that they do so facing Mecca. They need to wash and follow various rituals before praying. Muslims do not eat any meat taken from a pig (bacon, pork, ham). Other meats should be Halal, this means slaughtered in a manner dictated by Islamic law. This can be obtained from special butchers. Alcohol and drugs are forbidden. Muslims fast from dawn to sunset on the ninth month each Islamic year, this is known as Ramadan. Men are required to be covered up from their navel to their knees, as an absolute minimum for Prayer times. Women are required to be covered apart from their hands and face and, after puberty girls are required to cover their heads. The general guidance is that both men and women dress modestly.

### Judaism

Jews consider themselves both to be a faith and an ethnic group. There are different groups within the Jewish community, Orthodox, Reform and Liberal, all of whom observe the rules set down by Judaism slightly differently. Jews worship in a Synagogue. Hebrew is the language used in prayer and the Rabbi is the Jewish Priest and teacher. The Jewish Holy day is called the Sabbath and starts at sunset on Friday and ends on Saturday evening. Fasting takes place on various Holy days including Yom Kippur. Orthodox Jews are very strict about observing the Sabbath and do not do any kind of work on that day. Some abstain from any unnecessary activity. There are strict rules regarding diet, preparation of food and dress which should be advised upon placement of a child.

### Sikhism

Sikhism is a combination of elements of Islam and Hinduism and originated in the Punjab. The Sikh holy book is called the Guru Granth Sahib. Sikhs worship in a temple. Prayers are said at sunrise and sunset. There are rules regarding diet and a dress code.

If you are asked to care for a child of a different religious faith or ethnic background you may require more detailed information about their needs and should ask advice from the child's social worker and/or parents.

## **Culture**

### What is Culture?

A child or young person's culture is made up of many different factors such as language; racial identity; family attitudes; religion; memories; common experience; and background.

Culture is part of a child's identity and heritage and it is vital that they be given opportunities and encouragement to enjoy and take pride in their cultural heritage. Foster carers should respect and safeguard this heritage; they may need to discuss the child's cultural needs with the child's parents or social worker to ensure that these needs are met.

Updated specific guidance and support will be available to assist carers in understanding and meeting the needs of children from a different heritage or ethnic background.

Your supervising social worker and child's social worker will discuss this with you.

### **Discrimination**

There are many types of discrimination which include age, race, religion, gender, sexuality, disability and being 'in care'. Discrimination is wrong and causes offence, even though many people (often children) do not realise they are doing so. There are different forms of discrimination such as name calling, excluding from an event, offensive language or even physical abuse. Any individual or group can suffer from discrimination but, in the case of children this may often be racially motivated or targeted at an overweight child or a child with a disability.

Local authorities must provide services which give consideration to religion, racial origin, gender, sexuality and cultural and linguistic background. In addition services should be provided to help disabled children to lead a full life.

It is important that differences are recognised and appreciated rather than discriminated against. Carers can help children to respect differences or indeed to cope with any discrimination they experience. There are many practical ways carers can assist in meeting the specific needs of a child. For example, this might be religion, diet, hair care, clothing or language.

Please ensure that any issues relating to discrimination are discussed with the child's social worker or your supervising social worker.

## Section 8: Documentation & Confidentiality

### Security of Documentation

All documentation relating to children who are looked after should be treated as confidential and kept in a lockable drawer or filing cabinet, which can be provided by the Fostering Team. When children move on the documents should be given to the child's social worker or your supervising social worker for disposal or safe keeping.

### Birth Certificate

Carers will not usually be given a copy of the child's birth certificate; this will normally be held on the child's file. If you require a birth certificate for any purpose please speak to the child's social worker about this.

### Health Records

Carers looking after a child under the age of 5 years should be given their "red book" or Personal Child Health Record to ensure that their progress is being properly monitored. This contains information relating to the child's birth details, immunisations, growth charts and general developmental progress. Foster carers are expected to update relevant areas. Your supervising social worker, child's social worker and health visitor will offer guidance and advice.

### Passport

If a child placed with you requires a passport, please notify their social worker as soon as possible as this may take a number of weeks to process. The child's social worker will need to complete the application form in conjunction with the child's parents when accommodated (Section 20 Children Act 1989). Carers taking children abroad on holiday will need to obtain a letter from a Team Manager or the child's parents to take with them, confirming the legal status of the child concerned and the purpose of the trip and that they are Local Authority foster carers. This may be required at customs/border control on re-entry to the UK.

When a foster child is placed, foster carers will need to receive sufficient information about the child's background to enable them to care for the child. This information will be provided by the child's social worker and, in some cases by the child's parents. Much of the information will be personal, including details of the child, his or her family and the circumstances which resulted in him or her coming into foster care. All of this information is given to foster carers in confidence. The child's information is given on trust to the Directorate and to carers. This trust must always be respected.

## **Who does not need to know?**

People outside the immediate foster carer's family do not need to know the child's circumstances or family background. An acknowledgement that the child is part of the foster carer's family, and possibly their first name is sufficient. Beyond that the information is confidential and usually not for discussion.

## **Who needs to know?**

Members of the foster carer's family who are likely to have regular family time with the child will need to have some of the information in order that they can relate to the child. How much the foster carer's own children can deal with will depend on their age, maturity and discretion. All family members will need to consider the importance of confidentiality.

## **Discussion with other foster carers**

Foster carers recognise that support is required from family, the Directorate and other foster carers. Other foster carers may have experienced similar situations so the sharing of support and advice is important. This is not breaking confidentiality so long as the specific details of a child's circumstances are not discussed.

## **Being asked to keep a secret**

There are times when a child or child's family or friends seek to give a foster carer information in confidence. This could be difficult if that information has a bearing on the child's health, safety or welfare, immediately or in the future. Foster carers need to explain before the confidence is shared, that they might not be able to comply with the request. The information therefore, may need to be given to the child's social worker by the child, by the person who is seeking to confide in the foster carer, or by the foster carer themselves.

## **E-mail**

When emailing names and identifying information of children should not be included, service user numbers should be used.

To ensure when emailing that all documents pertaining to the CLA are confidential, you need to ensure you encrypt all emails by entering "Mail Encrypt" in the subject field of the email.

Please speak with your social worker for further information relating to confidentiality and information sharing.

## **Court documents**

Court documents may in certain circumstances be disclosed e.g. medical assessment reports to assist them to care for the child. These must not be disclosed under any circumstances to anyone else without the prior permission of the Court. If they are disclosed the person(s) who have done so could face proceedings for contempt of

Court. If in any doubt carers should family time the supervising social worker or the local authority for advice.

Extreme care must be taken not to publish the identity of, photographs of or any details concerning any court proceedings concerning the child who is being cared for over social media. Breach of this requirement can, in certain instances, amount to contempt of Court. In other cases, it can result in upset to parents and other family members or even compromise the safety of the placement. Carers and other persons living with them should exercise extreme circumspection around the use of social media generally but in particular where the child that is being cared for is concerned.

## Section 9: Structural Arrangements & Meetings

### Structure

The Fostering Service Support Teams have now merged with the Post Adoption Support Team and there are now 4 locality based Support to permanence Teams covering Lancashire. Each Team is made up of a Practice Manager; Supervising Social Workers; Support Workers; and Business Support.

### Foster Care Reviews.

The approval of foster carers will be reviewed at a minimum every 10 months (within a 12 month review period), it is an expectation that foster carers will attend and contribute to their review.

The Review will be conducted by an Independent Reviewing Officer who will gather views and feedback regarding the review period from:

- Children Looked After
- Child Care Social Workers
- Supervising Social Workers
- Foster Carers
- Carers own children
- Any other organisation or agency that holds information on the Foster carers or members of their household.

The Review provides an opportunity to discuss the views of the service, experiences in specific aspects of fostering, training needs and any compliments or concerns.

The Review is an opportunity to consider the carers abilities, achievements, development needs and whether the foster carer's capacity preference should be changed; or, indeed, if continued approval is recommended.

A copy of the completed review will be sent to the Foster Carer for their own records.

The first review following approval will be presented to the Fostering Panel. Reviews held in relation to change of circumstances, allegation or complaint will also be presented to the Fostering Panel.

## **Fostering Panel**

The aim of Lancashire County Council's Fostering Panel is to ensure the provision of a high quality fostering service that safeguards and promotes the welfare of children looked after by the local authority, and children in need.

## **Membership**

The Fostering Panel is managed by an Independent Panel Chair appointed by the Agency Decision Maker and maintains independence from the Fostering Service. Membership of "the central list" for the Fostering Panel is open ended in number, but there will be a core membership and other members who may be included as and when their particular expertise is needed. The number of members present at a Panel will not exceed 10 members, but must include:

An Independent Chair or one of the two vice chairs

A Qualified Social Worker (HCPC registered) with at least 3 years relevant post-qualifying experience.

An independent person if the vice chair is chairing the meeting and is not an independent member

## **Roles and responsibilities of the Fostering Panel**

The Fostering Panel's role is to provide thorough and critical consideration of all cases presented to it and to make sound and appropriate recommendations to the respective Agency Decision Maker. The Panel may defer making a recommendation if it does not consider it has sufficient information to reach a recommendation.

In reaching its recommendation, Panel will:

- act in the best interests of children and young people looked after in foster care, To promote and safeguard their welfare.

The Fostering Panel will make recommendations regarding the following:-

- The full approval, variation of approval, and termination of approval of anyone either seeking to be approved as, or currently approved as, foster carers, who wish to care for children and young people up to the age of 18 years.
- Whether applicants who have had children placed with them under Regulation 24 of the Care Planning, Placement and Case Review (England) Regulations 2010, are suitable to provide foster care on an ongoing basis to a child further to such an arrangement having been made in an emergency and temporary approval agreed by the Nominated Officer.
- All exceptional requests for a Regulation 25, 8-week extension to a Regulation 24 temporary approval and placement.
- First annual reviews of all foster carers to consider whether they should continue to be approved as foster carers.
- Reviews of foster carers' approval, significant complaints, and allegations of abuse or standards of care investigations or significant changes to a fostering household have occurred, or where this is a recommendation of the Independent Safeguarding Chair for foster carer reviews, or where a foster carers' approval has not been considered by the Fostering Panel for a period of four years.

Panel will be notified of:-

- All resignations
- Temporary variations to the terms of approval
- Exemptions from the usual fostering limit for Lancashire County Council foster carers.
- Exemptions from any other Fostering Service providers when the carers live in Lancashire.

The Panel also has a quality assurance function in relation to the Fostering Service. It will be rigorous in monitoring quality standards and will contribute to the development of good practice. The Panel will monitor the standards and quality of assessments and reports and give feedback to the appropriate managers via the Agency Adviser.

## **Foster Carer attendance at Panel**

Lancashire County Council Fostering Service is committed to user involvement and transparent decision-making. Prospective and existing foster carers are always invited and strongly encouraged to attend Panel when their suitability for approval or the terms of their approval is being considered. However, there is no obligation for the foster carer to meet with the Panel. If they decline to do so, this in itself will not be considered as a reason for recommending that they are not suitable.

## **Decision making process**

Once the panel has made its recommendation, the full minutes of the meeting will be forwarded to the Agency Decision Maker who will consider them in reaching the Agency Decision. In cases where there is a change to the terms of a foster carer's approval, the Agency Decision Maker cannot make a decision immediately. They will issue a Qualifying Determination in writing, giving the foster carers 28 days in which to

consider whether they wish to appeal this. If so, they must write either to the Agency Decision Maker or to the Independent Review Mechanism in order to establish their right to appeal to the Cheshire East Fostering Panel or the Independent Review Mechanism respectively. For further information, please see <http://www.independentreviewmechanism.org.uk/>

If no notification of appeal is received, the Agency Decision Maker will make a Decision after 28 days, the foster carer will receive a letter outlining the Decision and the reasons for this.

## **Meetings**

As part of your role as a foster carer you will be asked to participate in meetings concerning the children you are caring for.

### **Placement Planning Meeting**

A placement planning meeting will take place within 5 working days of placement, which will involve the most significant people in the child's life. The meeting's purpose is to ensure carers have all the information they need relating to the child, e.g. health, education, day to day routines, likes and dislikes, that will help them care for the child as well as possible. The meeting will also look at practical issues such as family time arrangements; transport to school; any clothing; and any financial issues.

At this meeting foster carers will get a copy of the delegated authority in caring for the child to allow for flexibility of decision making. This delegation will be agreed and recorded at the Placement Planning Meeting where possible and will be reviewed regularly to meet the developing needs of the child

### **Children Looked After Review**

A review should be held within 20 working days of a child being placed with carers, then after a further 3 months and then every 6 months. The review's purpose is to ensure the child is being well cared for and their needs are being met. It is also to ensure that plans made for the child are being progressed and to look at whether plans need to be changed in any way.

The people involved with the child should attend review meetings, including the child if they wish, their parents, school, health representative and carers. The child, parents and carers will be sent a consultation form in advance of the meeting so that they can express their views in writing.

The review is chaired by a person independent from the local Social Work Children and Family Teams. Carers should receive minutes of any meetings they attend and should treat them with the utmost confidentiality. They should be given to your

supervising social worker for disposal after the child concerned has moved on.

### **Personal Education Plan Meetings**

The child's social worker will organise and be involved in this meeting with an appropriate representative from the child's school. Foster carers are expected to attend, along with the child. Subsequent reviews are held at least once per year generally three times a year. The CLA is entitled to pupil premiums/PEPS, the foster carer should discuss this with their Supervising Social Worker to gain details of figures.

### **Permanence Planning**

When a foster carer agrees to accept a permanent placement, a Child Looked after review is required so that the Independent Reviewing Officer can ratify the placement. A care planning meeting is then convened followed by a Matching meeting/Placement Planning meeting to be presented to the Permanence Panel for the placement to be approved.

### **Bridging to Permanence.**

Foster carers are key in the introduction of new carers or adoptive parents for a child. They will be very much involved in the planning stage and it is expected they will facilitate much of the family time between the child and new carers/ adoptive parents in this process. Your supervising social worker and child's social worker will support and advise you in this important task.

### **Placement ending/Disruption**

Disruptions are unplanned endings to a foster placement. They may happen when a particular problem leads foster carers to ask for the child's removal, where the Local Authority decides to remove the child or where the child insists on leaving. All unplanned endings are painful for children, foster carers and parents. If foster carers feel that a placement cannot continue, this should be discussed with the child's social worker or the supervising social worker as early as possible, in order to avoid the need for sudden action.

If parents or others request immediate and unplanned removal of the child, foster carers should remind them that responsibility for the foster care placement rests with the Directorate, and also emphasise tactfully the effect of a sudden move on the child.

An individual placement may end by mutual agreement or by termination on the following period of notice in writing to the Fostering Service and the child's social worker. All foster Carers are committed to providing prior notice, to not ending a placement without prior discussion or reasonable notice being given. There is an established commitment to giving at least 28 days' notice to ending a placement.

A disruption meeting will normally be held with all parties to discuss the reasons why the placement is not working and to try to prevent further breakdown. If the placement disrupts resulting in a child having to move.

**Meetings about the child that may be held but to which you would not be invited usually relate to the child protection or legal processes. The most common of these meetings are the following:**

***Child Protection Strategy Meetings*** – when concerns are received that indicate a child may be at risk of harm, a ‘section 47’ enquiry is initiated. A discussion with the Police, known as a ‘strategy meeting’, must take place in order to make decisions about how the inquiry should be conducted.

***Legal Advice Meetings*** – The purpose of a legal gateway or planning meeting is for the LA to seek legal advice about a particular case. When social workers have concerns that a child is or remains at risk of significant harm and support to the family under child in need or child protection procedures are not deemed to offer sufficient protection or likelihood of improvement, a legal gateway meeting is held to establish whether thresholds for legal intervention are met. If it is, the outcome may be to enter ‘Pre-proceedings’ (see below) or issue care proceedings in the Family Courts.

***Pre-proceedings Meetings*** – The aim of the PPM is to reach an agreement on the proposed plan between the family and the LA with a view to the risks to the child being addressed. These meetings are arranged when the threshold for legal intervention is met due to a child being at risk of significant harm, but the concerns do not warrant immediate issuing of care proceedings to seek removal of the child into care. A formal meeting is arranged with parents and their solicitors to outline the concerns, set out a contract of expectations and agree a plan to address the risks to the child. Progress is reviewed. Pre-proceedings should not last more than 6 months. The outcome can be to come out of pre-proceedings onto a child in need or child protection support plan or to issue care proceedings if the risk of significant harm is not reduced below the threshold.

***Advocates Meetings*** – this meeting takes place during care proceedings between the legal representatives. The aim of the Advocates’ Meeting is to facilitate agreement between the parties and narrow the issues in dispute. The draft Case Management Order is discussed and prepared to save time in court. Social workers must be available for their legal representatives to consult and take instructions.

***Professionals Meetings*** the local authority employees working on a case may meet with managers to consider the information gathered and assessments completed in order to reach a consensus on the local authority care plan. These meetings may ask for contributions from other agency staff, depending on the issues under discussion. The outcome of such meetings will be shared with children, parents and carers and inform the Care Plan for the child.

***Meetings about you as foster carers*** that may be held but to which you would not be invited usually relate to allegations against you as a professional carer. The most common of these meetings are the following:

***LADO (Local Authority Delegated Officer) strategy meetings*** – these are held if an allegation is made that you may have harmed a child in your care. All allegations of this nature need to be investigated and the investigation is planned at a LADO strategy meeting. Whilst you are not invited to attend such a meeting or any subsequent reviews, your supervising social worker will keep you informed of the progress of the investigation and give you as much information as the process allows. You will be fully involved in any investigation and receive a copy of the report once it has been agreed.

## Section 10: Record Keeping & Paperwork

Within their role, foster carers have access to a wide range of information and records. It is important that you understand the need for record keeping and the implications for data protection. It is particularly important to understand that the record belongs to the fostering service.

The information that foster carers may have covers three main areas:

- Information about fostering in general (such as the handbook and statement of purpose).
- Information about themselves (such as review reports and supervision records).
- Information about children placed in their care (such as the Placement Information Record and the child's school reports).

The information about any child placed with you is to be kept confidential and the Directorate will provide a lockable filing box in which to store this information. The box can be carried and foster carers need to think about how it can be kept safe.

The supervising social worker will check the contents of the box as part of their role. There is a list of documents which you should hold confidentially within this storage box and the supervising social worker will explain to you which documents are on the list.

### Purpose of Records

Records show key events which have happened whilst a child has been in placement. These might include:

- Behaviour prior to and reactions following family time.
- Any illnesses or accidents.
- Special events, celebrations.
- Matters of concern – these could be about a variety of things such as bullying or change of behaviour.

Records can be a useful source of information for review meetings and also in court proceedings. They may help to reduce any risk of misunderstanding affecting the child or foster family for example if a complaint or allegation is made. This is particularly important if allegations/concerns are made known a long time after the event.

### Records for Individual Children

Each child must have separate records. This is to preserve their confidentiality as it would be good practice to share these records with children as they are written (subject to their age and understanding). They should not view other children's records and therefore separate records are needed.

## **Training**

There is a specific course on Effective Communication which includes recording. Details can be found in the training handbook and the course connects to the relevant TSD standard.

## **Advice**

If you have any doubts about what to record, discuss this with your supervising social worker.

## **Foster Carer Agreement**

Once foster carers have been approved by Lancashire County Council's Fostering Panel they are asked to enter into a written agreement with the Directorate. The agreement outlines what is expected of foster carers in terms of how they care for children placed and also changes they should notify the Directorate of. It also outlines what support and training will be offered to carers by the Directorate. Carers are asked to give an undertaking not to use any form of physical chastisement with the children in their care.

## **Foster Carer Review Consultation Forms**

Carers will be sent a consultation form to record their views for their foster carer review. The social workers for the children placed during the review period will also be asked to complete feedback forms which will be considered during the review. Carers will receive a written account of the review for their records.

Foster carers 'children should also be asked for their views and contribute to this review process.

## **Children Looked After**

When children are first placed with foster carers, the carers should receive documentation which will provide them with the information they need to care for the children appropriately. It is essential that carers have these details and if you do not receive them on placement or very soon afterwards family time the child's social worker or your supervising social worker immediately.

## **Placement Plan /Care Plans**

The Placement Plan must be drawn up by the field social worker before the child is placed, or if not reasonable practicable within 5 working days of the start of the placement and forms part of the overarching Care Plan. Information including the child's basic details, GP and health needs, education details, family time with significant persons, religious and cultural needs are contained in it. It should also contain consent to medical treatment signed by a parent, person with Parental Responsibility or by a senior Child Care Manager. Carers should also receive Care Plan Parts 1 and 2 giving further background information relating to the child on or

soon after placement. Foster carers will be requested to sign the Placement Plan agreeing to care appropriately for the child.

### **Children Looked After Review Consultation Forms.**

Prior to a Looked After Children's Review both the carer and the child will receive a consultation document. The foster carer should support the child to put forward their views, wishes and feelings as part of the review process. The foster carer is supported to contribute effectively to the review of the Care Plan which includes the Placement Plan. Once the CLA review has been completed carers and child will receive a copy.

### **Personal Education Plan (PEP)**

All Children who are looked after have their educational needs monitored via a Personal Education Plan. This plan is devised by school, carers, parents and social worker and reviewed annually. Carers will receive a copy.

### **Pathway Plan**

By the time of their 16th birthday or at the latest within 3 months leaving care thereafter a child who is looked after should have a Pathway Plan devised with their social worker. This looks at what needs to be done in all areas of the young person's life (education, health, life skills, accommodation) in order to help them successfully move on to independence.

### **Foster Carer Records**

The foster carers should maintain daily log relating to the child in placement. Significant events can be recorded separately. Medication used regularly and in emergencies should also be recorded on the forms issued to each carer. The supervising social worker will ask for access to these records to sign them off in formal supervision.

These records should be held in the lockable box provided and passed on to the supervising social worker or child's social worker when the placement has ended.

### **Directorate Records**

Information is recorded by the Directorate on all children who are looked after (in foster care) and all foster carers. Social workers record all family time they have with you on your file held in the Directorate office.

If you wish to see your file you should firstly discuss with your social worker the process and procedure that needs to be followed.

This procedure is as follows:

- If somebody wants to access a copy of any personal data about them that is held by the County Council, they need to make a subject access request. This must be done in writing (email is acceptable), and any request should be

accompanied with a copy of the applicant's identity (this is to help ensure personal data is not disclosed to those who aren't entitled to it). By law, the County Council has 40 days following the date the request is received to send a copy of any personal data that is held.

- Email requests should be sent to [dataprotection@lancashire.gov.uk](mailto:dataprotection@lancashire.gov.uk) and written requests should be sent to the Data Protection Team, Lancashire County Council, PO Box 78, County Hall, Preston, PR1 8XJ.

## Section 11: Finance

Lancashire County Councils Fostering Service values the important role foster carers play in looking after and providing safe and nurturing care for our looked after children.

We hope all foster carers feel supported in their role and we wish to ensure carers receive fair and sufficient allowances to enable them to continue in their task.

We are committed to paying all foster carers the Government's recommended Minimum Allowance. Carers will need to demonstrate certain commitment and skills for example committing to attending at least 6 support groups within their fostering review period, to meet other carers and enhance their skills and understanding in order to meet the needs of children and young people they are caring for.

Please see your Supervising Social Worker for current allowances and information regarding the Tier payment scheme. This will ensure you have the most up to date information.

The finance section will provide you with detail of when payments will be made.

### **Fostering Allowances.**

Lancashire County Councils Fostering Service values the important role foster carers play in looking after and providing safe and nurturing care for our looked after children. We hope all foster carers feel supported in their role and we wish to ensure carers receive fair and sufficient allowances to enable them to continue in their task.

We are committed to paying all foster carers the Government's Recommended Minimum Allowance. Additionally we intend to pay some carers fee enhancements calculated on their experience and skill along with the service they provide.

Foster Carers will only receive fostering payments when a child is placed with them, payments cease when a child moves out of the foster placement.

All foster carers are eligible to progress through the payment structure. The payment structure has been approved by the Cabinet Member for Children and Schools.

Foster carers will be paid in a three tier structure dependent on their experience, skills and services.

Additional fees may be paid for some children who have exceptional needs and for Mother and Baby Placements. .

### **Payment Structure.**

Carers can move both up and down the tier payment structure. Progression through the tiers is described below. If you are uncertain about how this works or have any questions please discuss them with your supervising social worker.

Carers will receive a payment slip (remittance advice) via email detailing what payments are to be made and for which child. The slip refers to the basic fortnightly payments for each child (BAS), additional allowances (ADD) payments for travel (TRA) and miscellaneous payments (MIS). It also details when an overpayment has been made due to a child moving on during a payment period. If you are unclear about the payments that you have received, family time your supervising social worker or Children and Families Finance.

### **Birthdays.**

An additional amount is given to carers towards the cost of a child's birthday.

### **Festival.**

Similar to birthdays in that an additional allowance is paid towards the cost of presents, there are two rates as this is age dependent.

### **Clothing.**

The Initial Clothing Grant is provided for essential items and only paid in exceptional circumstances where children/young people are in placement for the first time with insufficient clothing for their needs. An initial cost for clothing will be discussed at the placement planning meeting if needed .A proportion of the fortnightly fostering allowance is intended to cover carers replacing worn out clothes or clothing children have grown out of.

### **School uniform**

If children are placed with inadequate school uniforms or a child moves school then logo items will be refunded by the local authority. Uniforms will be processed via the supervising social worker. Ongoing School Clothing / Uniform needs are provided for within the weekly allowance.

### **Dinner Money**

Carers should provide children in their care with a packed lunch or dinner money. A child is not eligible to receive free school meals when in foster care.

### **Travel Costs**

Carers can claim assistance with the cost of travel. This excludes six miles on any return trip. Foster carers can claim transport costs for taking a child to school, family time, and health appointments. Training costs are paid at a reduced amount and claimed separately.

Mileage claims should be submitted at a maximum of 3 months after the journey, claims submitted that are over 3 months will not be accepted.

### **Holiday Allowances.**

A holiday allowance will be paid to foster carers which is a set amount. This will be requested following a holiday being booked. Under most circumstances evidence of payment will be required.

## **YOUNG PEOPLE AND MONEY**

Young people in care need considerable support from their foster carers to enable them to move on when they are ready to make the transition to independent living. The age at which young people chose to leave care varies and the route they take can also differ, depending on their circumstances, aspirations and maturity. Some young people chose to return to birth family, some move to their own accommodation or supported accommodation, some to supported lodgings, some to higher education and others seek the ongoing support of their long term foster carers beyond the age of 18 until they feel ready to leave what has become their 'home'. For young people with physical or learning difficulties who meet the criteria for support from adult services, responsibility for their support transfers from Children's to Adults Services on their 18<sup>th</sup> birthday.

Preparation for adulthood starts at an early age. It is a lifelong process, which needs to begin a long time before a young person becomes 16 years old. Foster carers will be expected to play a significant part in the process of preparing a young person to make the transition into adulthood and living more independently. This involves helping young people to develop skills so that they can engage in further education, employment or training on leaving school, take steps to get ready for employment, and learn how to live alongside others in sustainable communities, managing their money so that they can access transport, material goods and decent housing.

To achieve this, foster carers themselves need to manage a transition in their approach to fostering, moving from provider of care to supporter of the young person to care for themselves. This can be difficult for those who have made a career out of caring for others and it requires the foster carer to allow the young person to begin to make their own decisions and learn from their mistakes.

## **Money Matters**

### **Pocket money**

Children in care often miss out on opportunities to learn as they use and talk about money as part of everyday family life. All children and young people need to experience and discuss the need to prioritise spending and this can start at a young age through the provision of 'pocket money'. This can help towards preparation to achieve economic wellbeing because:

- Having pocket money is good for the child/young person. It gives a sense of independence and a measure of choice in making decisions about how the money is spent
- receiving pocket money helps children understand the value of money and is the start of developing budgeting skills

Carers will be expected to open a personal savings account (see section on savings). This will be discussed at the placement plan meeting, dependent on the duration of placement. A portion of the weekly fostering allowance paid to the foster carer is intended to be used to provide pocket money for your foster child and must be given. The foster carer and social worker for the child will be responsible for determining the exact amount of pocket money and savings as this will sometimes need to be considered in light of what is reasonable within the fostering family and the child's level of maturity.

Lancashire County Council foster carers provide at a minimum the pocket money amounts below:

Age 0-4 years	£6.50
Age 5-10 years	£7.00
Age 11- 13 years	£8.00
Age 14 – 15 years	£16.00
Age 16+ years	£19.00

Discussion with the child/young person and their parents confirming what the child/young person spends their pocket money on, and enables agreement on what portion should be saved each week towards the cost of presents, holidays and special items. Agreements can be recorded within the placement plan.

The withholding of pocket money as a punishment is not permissible and alternative acceptable sanctions should be used instead. However, it may be appropriate in some circumstances to withhold a part of the pocket money as payment towards the cost of repairs or replacement of items resulting from deliberate damage, advice should be sought from your social work support team.

Where a foster carer is concerned about risks associated with providing a child or young person with pocket money, they should discuss this with their supervising social worker and the child's social worker who will consider ways of addressing the concerns.

### **Introduction of an 'allowance' as the young person gets older.**

The basic weekly fostering allowance contains a 'personal allowances' element which is intended to cover both pocket money and other personal expenses such as cosmetics, deodorants, sanitary protection, shaving equipment, dry cleaning, landline and mobile telephone calls and comics. It also contains an element for 'clothing'.

As young people begin to consider their options for independence, it is an opportunity to consider whether responsibility for buying some of the personal items and clothing should pass from foster carer to young person with a transfer of money to enable them to do this. This enables young people to start to take responsibility for budgeting within their 'allowance' in preparation for living independently. Whilst this will work for some households, others may continue to supply many items as part of the weekly 'shop' or from the general housekeeping pool.

It is important, particularly with older children, to be clear from the start about who pays for what. There needs to be discussion at the outset of the placement, or at reviews for longer term placements, about how much of the personal allowances and clothing element should

be managed by the carer and how much they should transfer to the young person to enable them to make choices about spending.

## Savings

Foster carers are expected to help children to learn about savings as part of Foster carers are expected to help children to learn about savings as part of preparation for adulthood. As part of this preparation, it is important that children have some responsibility for looking after their own money from the age of seven years. Prior to this, children's pocket money should be spent under the supervision of the foster carer or kept as savings.

Guidance on money matters and ideas for helping children and young people to manage money and save can be found at [www.pfeg.org/projects-funding/projects/looked-after-children-junior-individual-savings-account](http://www.pfeg.org/projects-funding/projects/looked-after-children-junior-individual-savings-account)

## Government Saving Schemes for cared for children.

### A Child Trust Fund

A Child Trust Fund (CTF) will have been established for any child born on or after 01 September 2002, and before 02 January 2011. A Child Trust Fund (CTF) is a long-term tax-free savings account for children. If your child was looked after by a local council, they were eligible for a CTF account if both the following applied:

- they were looked after by a local council before 3 April 2011
- they met the other qualifying conditions below (excluding child benefit).

For more information, see HMRC Fact sheet for carers [www.hmrc.gov.uk/ctf/la-info.htm](http://www.hmrc.gov.uk/ctf/la-info.htm)

### Junior ISAs

The Junior ISA for looked after children scheme replaces the support previously provided through Child Trust Funds (CTFs) and is for children born after 03 January 2011, or before September 2002.

A Junior Individual Savings Account (Junior ISA) will be opened for every child (if they do not already have one) who has been looked after for any continuous period of 12 months or more, starting on or after 3 January 2011 and who is not eligible for a CTF. The Government will provide an initial £200 payment to open the accounts. Please speak to the child's social worker to discuss further.

## Overpayments

When children move on from your care it may take a couple of days for the finance department to be informed. You may receive payments for days when you are not caring for a child. If this does happen it is important that you check the remittance slips and contact your supervising social worker to advise of the over payment immediately.

Unfortunately as you might be aware, overpayments do occur from time to time. We

are therefore trying to put systems in place that will minimise this happening and when it does to resolve this as quickly as possible.

With this in mind, if you are aware of a current overpayment, please can you alert you're supervising social worker (even if you have done this before) so that we can look at these individually and try and resolve these.

Going forward, can I please ask that if a placement ends, that you notify your supervising social worker as soon as this has happened, so that the finance linked to this placement can be ended.

### **Adoption Allowance**

Adopting a child means taking on all the associated responsibilities, including financial. However, the County Council does have a discretionary Adoption Allowance Scheme which may assist in some situations.

### **Leaving Care.**

**See section 16.**

### **Special Guardianship Financial Support**

Foster carers applying for a Special Guardianship Order via the courts in respect of children placed may be entitled to financial support following the making of the order. This needs to be agreed by a Manager and the carers and the child need to meet certain eligibility criteria. This financial support may affect carer's entitlement to other benefits and this should be taken into consideration and investigated by the carers. If you think you may be eligible discuss this with your supervising social worker and the child's social worker.

### **Child Benefit.**

Foster carers are **not** entitled to claim Child Benefit, Tax Credits or National Insurance Credits for the children placed. If in any doubt about Child Benefit matters foster carers should family time the Child Benefit enquiry line on 0845 302 1444.

### **Income Tax.**

HM Revenue & Customs treats foster carers as self-employed. You only pay income tax on fostering income which exceeds a set 'qualifying amount'. Your fostering income is unlikely to exceed your qualifying amount. Please contact HMRC if in any doubt.

### **National Insurance.**

You only need to pay Class 2 National Insurance contributions if your fostering

income exceeds your qualifying amount.

You can protect your State Pension and earn extra pension by applying for 'Credits for parents and carers' on form CF411A from HM Revenue & Customs.

### **Information & Assistance**

HM Revenue & Customs produces Helpsheet 236 *Foster and adult placement carers* which is updated regularly. It tells you how to work out your qualifying amount. You can find it on the HMRC website or request a copy by ringing 0845 900 0404.

Lancashire County Council Welfare Rights Service produces a factsheet for foster carers. They can help you make sure you claim the right benefits and tax credits and help you with form-filling. Ring them on 01772 531435.

Or you can write to: Lancashire County Council, Welfare Rights Service, FREEPOST, Preston PR1 8BR. (You don't need a stamp).

.

## Section 12:

# Support to Foster Carers/Support to Children

### Out of hours support

This service has been introduced to provide support to carers out of hours. The advice line gives the opportunity for carers to speak to a Fostering Team worker. The advice line operates in the evenings from 6.00 pm up to 11.00 pm. At weekends and public holidays from 8.00 am to 11.00 pm and is a free phone. The Advice line does not replace The Emergency Duty Team which provides a service to cover all the periods when the office is closed, rather it is complementary to it.

The purpose of the advice line is to provide the opportunity to discuss any concerns the foster carer has and suggest appropriate actions. The social worker will not visit but may advise the carer to family time the Emergency Duty Team if the matter is sufficiently serious and further action is necessary outside normal office hours.

**The Advice Line number is 0300 123 6724**

### Emergency Duty Team

The Emergency Duty Team should be contacted when there are any concerns or emergencies relating to a child looked after who is in your care. They should also be contacted if a child in your care is missing. The service is available outside of normal office hours. The telephone number is: 0300 123 6722.

**Supervising Social Worker and The Team, including regular supervision** each approved foster carer is supported and supervised by a named, appropriately qualified social worker. At the core of the supervision process are regular, face-to-face meetings between the foster carer and supervising social worker during which their support needs, training and personal development, and issues arising in placement are discussed. Foster carers are expected to be active participants in this supervisory process.

Supervision meetings are a formal part of your working relationship with your allocated supervising Social Worker (supervisor). The supervising social worker will visit at least monthly to offer support and at least three monthly to undertake the formal supervision. Placement issues, training and development, care standards and the impact of fostering on your family and any other issues will be discussed within these visits.

Your supervising social worker will have family time with you outside of these supervision sessions to offer support, guidance and to ensure you have what you need to care appropriately for the child in placement with you.

You will be supported by the team at attendance at meetings if required.

### Child's Social Worker

Each child placed has a social worker from one of the local Children's Social Care Teams whose role it is to work closely with the child and their birth family and to ensure the child's needs are met in the placement.

## Social Work Visits

Social workers are required by the Children Act 1989 to regularly visit children in foster placements. These are known as "statutory visits" and should take place once within the first week of placement then 6 weekly during the first year of placement and thereafter at intervals of not more than 6 weeks (3 months if the placement is intended to last until the child is 18 years of age).

If the placement is planned then the social worker must visit every week for the first 6 weeks. If the child is placed with a connected person with temporary approval, social workers must visit weekly until the first review. After this they must visit at intervals of not more than 6 weeks. Social workers are required to speak to the child alone, see their bedrooms and make enquiries regarding their health and well-being.

## Independent Visitors

Some children, who are looked after, have little or no family time with their families or other adult friends who may support them. In such circumstances, the Children Act allows the Directorate to appoint an Independent Visitor for a child, to take on a befriending and supportive role.

Independent visitors are most likely to be appointed where:

- There is infrequent communication between the child and his or her parents
- the parents have not visited the child over the last 12 months.

However, if it is in the child's interests, the above conditions do not have to be met; but an independent visitor cannot be appointed against the child's wishes.

It may be helpful for an independent visitor to be appointed if:

- A child is in a placement that does not reflect the child's race and culture and the independent visitor can provide a link with the child's racial and cultural heritage
- If the child is isolated in their placement because the placement is a long way from the child's home

If you think a child placed with you would benefit from an independent visitor talk to the child or young person and his or her social worker about it.

## Training and Continuing Professional Development for Foster Carers

Foster care is a challenging occupation undertaken by people who may come to it with little or no previous experience or training of caring for other people's children, especially those affected by abuse, neglect and trauma. It is an expectation and a requirement of the National Minimum Standards for Fostering (Standard 20 – learning and development of foster carers) that all carers receive the training they need to carry out their role effectively and equip them with the skills and knowledge for the fostering task. It is also an expectation that all foster carers demonstrate a commitment to their own continuing professional development and their ability and willingness to do this forms part of the assessment of suitability prior to approval. A personal development plan is completed with all foster carers on an annual basis to guide and record their personal development needs and this is reviewed on an annual basis prior to their annual foster carer review. It is also a national requirement that all foster carers complete the Training, Support and Development Standards for Foster Care within the first year (18 months for connected carers) of approval.

The Training programme is based around the following:

- Pre-approval training for prospective foster carers
- Induction for newly approved for carers
- Programme of post approval training available to all foster carers, including those who wish to refresh and update their knowledge and skills.

Your supervising social worker is responsible for overseeing your continuing professional development and completing your personal development plan with you to reflect your learning needs. A programme of speakers at support groups, workshops, foster carer forums and opportunities for e-learning is planned to broaden the range of learning opportunities.

For further information on foster carer training and continuing professional development, and for the latest training programme and application form, please see the website.

<http://www3.lancashire.gov.uk/corporate/web/view.asp?siteid=3825&pageid=41016&e=e>

## Fostering Network

The Fostering Service is a member of the Fostering Network, a national organisation campaigning on behalf of fostering and promoting best practice. We purchase a bulk household membership of the Fostering Network for all our foster carers, giving them access to member benefits such as the Fosterline enquiry line (0800 040 7675 or email [fosterline@fostering.net](mailto:fosterline@fostering.net)), legal protection insurance, subscription to *Foster Care* magazine and access to the magazine online, access to the legal, tax and medical advice helpline available 24/7, a publications starter pack – with six key *Signposts in Fostering* leaflets, access to our information service, access to our Foster Care Resource Centre and members' only website and discounts on all our publications, training and events. You also get membership of an online community in which you can communicate with foster carers and others with an interest in fostering about issues of concern to you. Newly approved foster carers should receive a membership pack following their approval. The family time details for Fostering Network are given at the back of this Handbook.

## Complaint

A foster carer who is not happy about any aspect of their involvement with the Directorate has a right to complain.

Complaints will, wherever possible be resolved informally by a member of staff

directly involved or by their Team Manager or Senior Manager. More information about The County Council's complaints procedures is available from your supervising social worker or can be viewed on the website at [www.lancashire.gov.uk/fostering](http://www.lancashire.gov.uk/fostering)

Foster carers also have the right to refer their complaint directly to OFSTED at the following address:

Office for Standards in Education  
Piccadilly Gate  
Store Street  
Manchester M1 2WDOfsted Family time Centre: 0300 123 1231 or:  
[enquiries@ofsted.gov.uk](mailto:enquiries@ofsted.gov.uk)

### **The Fostering Forums.**

The forums involve carers in Lancashire working closely with staff and elected members of the County Council to ensure that any issues raised by foster carers are addressed and that effective partnerships develop between carers, staff and members.

There are forums established at County and local area level and meetings take place on a regular basis throughout the year. Foster carers are nominated for membership of the forums. A County Councillor and senior member of staff also sit on the County forum and locally based staff sit on the local forums. Issues may be raised via the County and local forums, or on an individual basis through your Fostering Team supervising social worker, or the local foster carer representatives who sit on the Fostering Forums.

Issues may be raised via County and local meetings or on an individual basis through your Fostering Team supervising social worker or local representative on the Fostering Forum.

### **Support Groups.**

Support groups are run in each of the locality teams. You can attend any group you wish across Lancashire. The groups are integral to your support and development. They also provide you with opportunity to meet other foster carers and develop your own support network. Lancashire County Council expects that foster carers attend at least six support groups per review period.

### **Foster Carer Buddies.**

On approval you will be offered support from another foster carer who lives in your locality if required. These relationships have been extremely successful in supporting carers in Lancashire.

## New Placement Support.

For each new placement you accommodate you will be offered weekly support family time at least for the first month. This is reviewed by yourself and your supervising social worker after one month and continued if required.

## L.I.F.T

LIFT is a service offered by the Support To Permanence Teams to that will offer practical advice, mentoring and support to families, foster carers, adoptive parents who are experiencing difficulties. For more information please speak to your supervising social worker.

## Supervision

Your supervising social worker and the child's social worker will provide you with advice and support. You may also be paired up with an experienced local foster carer, who you can phone for a more informal source of support.

### Advice by phone

- Burnley & Pendle 01282 478 418
- Hyndburn, Rossendale & Ribble Valley 01254 220 759
- Lancaster, Wyre & North Fylde 01524 585 939
- Chorley & West Lancashire 01772 530 919
- Central Lancashire 01772 535066

Monday to Friday 8.45am to 5pm

### Advice line (out of hours)

- 0300 123 6724

Monday to Friday 6pm to 11pm

Weekends and bank holidays 8am to 11pm

The advice line does not replace the Emergency Duty Team who provide a service to cover all the periods when the office is closed, rather it is complementary to it.

You can ring the advice line to discuss any concerns you have and a Fostering Team worker will suggest appropriate actions. The social worker will not visit but may advise you to family time the Emergency Duty Team if the matter is sufficiently serious and further action is necessary outside normal office hours.

### Emergency Duty Team

- 0300 123 6722

You should family time the Emergency Duty Team when you have any concerns or emergencies relating to a child in your care, or if a child is missing. The service is available outside of normal office hours.

### Guidance, policies and procedures

- Foster carer handbook (PDF 1.11 MB)
- Tier information: foster carer requirements and skills (PDF 153KB)

- [Guide to National Insurance and tax for foster carers from HMRC](#) (external link)

### Recording sheets and expenses forms

Frequently used fostering forms are available below for you to download and print for ease of use. Alternatively family time your supervising social worker to request additional forms you may need or for printed versions.

- [Carer's daily record](#) (Rich Text Format 608)
- [Carer's recording sheet - significant event](#) (Rich Text Format 632 KB)
- [Foster carer's travelling expenses](#) (Rich Text Format 118 KB)
- [Memory/celebration record \(drawn\)](#) (Rich Text Format 362 KB)
- [Memory/celebration record \(written\)](#) (Rich Text Format 366 KB)
- [Record of emergency non-routine medication](#) (Rich Text Format 702 KB)
- [Record of regularly prescribed medicine](#) (Rich Text Format 703 KB)

### Other support

#### Groups

Most local fostering associations have regular support groups where you can meet local carers and there are support groups and social events for children.

#### Child and Adolescent Mental Health Service (CAMHS)

[SCAYT+](#) is part of the Child and Adolescent Mental Health Service and provides a service promoting positive mental health and emotional well-being for children and young-people who are looked after and adopted.

#### Schools

Schools are asked to give all children from care priority access to schools, which means that a child placed with you should be able to attend whichever school you think best meets their needs. You can find out more about how to apply for a school place in the [schools section](#).

Schools can claim extra funding for previously looked after children called pupil premium. Find out more in the [previously looked after children](#) section.

#### Free early education for two year olds

If a child placed with you is two years old you can take up the offer of a [funded early education place](#). You will need to be referred by a professional like a Children and Family Wellbeing Service (previously children's centres) worker.

#### 30 hours funded childcare for 3 and 4 years

From September 2018, some children in foster care will be entitled to 30 hours funded childcare if the foster family meet the eligibility criteria. To find out more read our [guidance for foster carers](#).

#### Education

You can get [education support](#) for your foster child from the Virtual School for Children Looked After.

#### Young people

The [youth zone](#) has information for young people about [being in care](#) like [LINX](#), Lancashire's children in care council. In October 2018 we added the new [care leavers local offer](#) which includes all the support that we have in Lancashire for care leavers.

[Youth zone](#) also has more general information on issues like jobs, further education, training, health and relationships.

**Special educational needs**

If you think a child may have special educational needs we can help. Visit the [special educational needs and disabilities - local offer](#) to find out [who you can speak to](#) and what support is available.

**National organisations**

Please note that we are not responsible for the content of external websites.

**Fostering Network**

The Fostering Network is the UK's leading charity for everyone involved in fostering. Their website provides advice and information for anyone with an interest in fostering. Members of the Fostering Network can access additional information and services through the members' area on the website.

**Fosterline**

Fosterline is funded by the Department for Education and provides confidential, impartial, advice and information to foster carers and those interested in fostering. Fosterline advisors respond to enquiries by telephone, email and on the Fosterline Interactive Forum.

## Section 13: Leaving Care

The transition to adulthood can be challenging for all children, in particular children who are looked after by a local authority who are likely to make the transition to independence much earlier than their peers and without parental or family support. Children looked after are more likely to have experienced loss, lack of stability and may have less self-confidence, with fewer educational qualifications and will be less ready to cope alone. It is even more challenging for children looked after who have disabilities.

Local authorities have a duty to prepare children looked after for when they leave care and to continue to support them towards independence; in particular, local authorities should:

- delay young people's discharge from care until they are ready to leave
- ensure good quality assessment, preparation and planning for care leavers
- provide high quality personal support and clear financial arrangements for young people leaving care.

### **PATHWAY PLANNING**

Young people who reach the age of 16 and have been Looked After for a specified period at a certain age are entitled to support from the Directorate under the Children (Leaving Care) Act 2000 until they are aged 21 (or up to their 25th birthday in specific circumstances).

At the age of 16 or at least within 3 months thereafter, every child looked after has a pathway plan, this is initiated by the Child's social worker. When drawing up the plan, a number of people will be consulted (as relevant). These include, most importantly, the young person, the young person's parents and other significant people, the foster carer or placement provider, the school or college, Education, Training and Employment Team, IRO and personal adviser. The pathway plan forms part of the care planning process (up to the age of 18) and sets out in detail what needs to happen to prepare the young person for living independently and how they will be supported. The plan covers all aspects of their lives including education, employment and training, where they will live, development of social and independence skills and finances.

In addition to the Pathway Plan and a personal advisor (the personal advisor is an allocated person by the local authority and will not be the same person as the child's social worker), care leavers may be entitled to financial support. Such as the leaving care grant which offers financial support for the Young Person to set up home when they move to independent living. Also the young person may be able to access financial assistance with the costs of planned education, training or employment. Other help may be accessible dependent on assessed need.

### **The foster carer's role**

Foster Carers play an important part in helping a young person in their care move on to independence, therefore the foster carers should be fully involved in the pathway

planning process. The foster carer will work with the social worker and personal adviser to prepare the young person for independence, emotionally and practically. Preparation for leaving care should start as early as possible, with the foster carer encouraging and supporting the young person to take increasing responsibility and make decisions themselves, where this is appropriate.

The age at which a young person ceases to be looked after will depend on a variety of factors including their maturity/ability to cope alone/level of family support and their own and their carer's wishes. This will need to be discussed in some depth. When the care order is discharged on the young person's 18th birthday, many young people will remain with their foster carer under a 'Staying Put' arrangement.

## STAYING PUT

A duty on Local Authorities in England regarding Staying Put came into force on 13 May 2014, in part 5 Welfare of Children (98) of the Children and Families Act 2014. This requires local authorities in England to facilitate, monitor and support staying put arrangements for fostered young people until they reach the age of 21, where this is what they and their foster carers want, unless the local authority consider that the staying put arrangement is not consistent with the welfare of the young person.

A Staying Put arrangement is not the same as a foster placement. The young person staying put, who must be a former relevant child, is no longer a looked after child. They are a young adult and a care leaver. They are entitled to support as a care leaver and will be allocated a Personal Advisor. The foster carer is no longer acting in the capacity of foster carer for that young adult. They are their 'former foster carer'. The foster placement becomes a 'staying put arrangement' and is not governed by Fostering Services Regulations. The 'former foster carer' offering a staying put arrangement may at the same time be offering foster placements to children who are looked after. Such placements will continue to be subject to provisions of the Fostering Services Regulations.

The DfE has updated its [Planning Transition to Adulthood for Care Leavers guidance](#) to include reference to Staying Put in Chapter 7. This will help foster carers plan how to establish a Staying Put arrangement. It also covers important areas such as the support foster carers might require, and advice and guidance that local authorities should provide to young people.

The Department for Education has [updated statutory guidance](#) in line with the new duty. A [Good Practice Guide](#) for the sector has also been developed in conjunction with the Children's Partnership. The average age of leaving home is rising and the transition to adulthood is increasingly becoming more complex and elongated. The "Staying Put" policy framework requires local authorities to set out local arrangements for extending foster placements as "Staying Put" arrangements in order to extend children/young people's transition to adulthood within a family and household supported environment. The intention being to ensure young people can remain with their former foster carers until they are prepared for adulthood, can experience a transition akin to their peers, avoid social exclusion and be more likely to avert a subsequent housing and tenancy breakdown.

Lancashire County Council is committed to preventing social exclusion amongst care leavers and has developed the "Staying Put" policy in order to ensure that they can continue to live with former foster carers after their 18th birthday and make the transition to independent living at a pace that suits their needs.

The policy sets out:

1. The process for extending a foster care placement beyond a young person's eighteenth birthday into a "Staying Put" arrangement;
2. The financial requirements and benefit issues for young people;
3. The financial rates and payment implications for foster carers and "Staying Put" carers;
4. The welfare benefit issues for foster carers and "Staying Put" carers;
5. The income tax and national insurance implications and issues for foster carers and "Staying Put" carers.
6. The social care requirements and practical issues associated with extending fostering arrangements as "Staying Put" arrangements;

This "Staying Put" policy has been developed to address the requirements of the: Children and Families Act 2014;

Care Planning, Placement and Case Review (England) Regulations and Guidance 2010, with additions and revisions in 2013 and 2014;

Planning Transition to Adulthood for Care Leavers (England) Regulations and Guidance 2010, revised 2014;

Fostering Service (England) Regulations 2011 and related Guidance (and amendments);

National Minimum Standards (NMS) for Fostering Services (2011) (and amendments).

Chapter 7, Para 7.19 to 7.59 - Page 66 to 72 of the Planning Transition to Adulthood for Care Leavers Regulations and Guidance 2010 (revised 2014) and Chapter 3, Para 3.125, Page 34 of the Fostering Service (England) Regulations 2011 set out a requirement that each local authority has a "Staying Put" policy and Standard 12.4, Page 26 of the National Minimum Standards sets out the service standard relating to the local authorities' "Staying Put" policy.

This is a brief summary of the service which can be provided. If you would like more information you can speak to the child's social worker.

## SECTION 14: CHILDREN WHO FOSTER.

As a service we recognise the important role that the children of foster carers play in the lives of the children looked after.

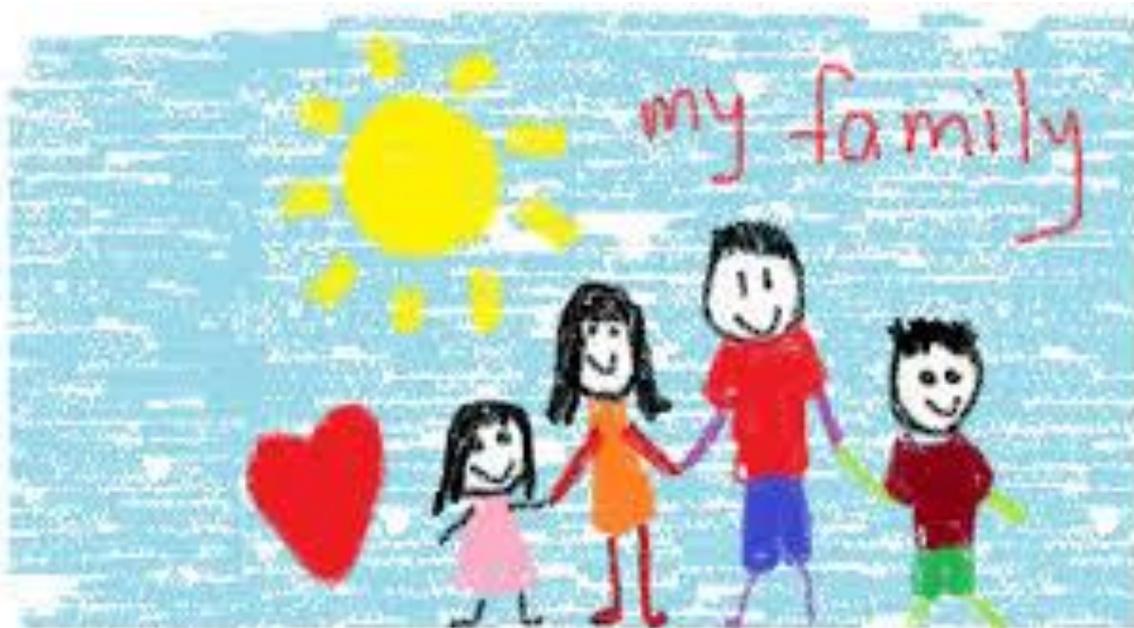
The allocated supervising social worker to your family will make time to see the children of the family and make themselves available if the children request to see them to talk about things that may be going on in their family.

Each locality provide groups for the sons and daughters of foster carers in their areas.

Your local team will be able to advise you of when and where the groups will be held your children will be invited if they wish to attend.

The general aims of the groups are detailed below:

- To offer a safe place for the Sons and Daughters to meet together that is confidential for them to talk about matters pertaining to them.
- To offer specific workshops to the children in order for them to explore their thoughts and feeling in relation to them being part of a family that fosters.
- To work with other partners in exploring with the children how it feels to be part of a foster family.
- To work with the young people on how it feels to be a looked after child in their home.
- To offer a balance of activity that are both fun for them to enjoy as a group along with addressing in separate sessions more serious matters relating to the fostering task.



## Useful family time Addresses and Phone Numbers

**ADVICE LINE:** Lancashire Fostering Service : 08000407998

**ADVOCACY SERVICES:** NYAS is a UK charity providing socio-legal services. We offer information, advice, advocacy and legal representation to children, young people and vulnerable adults through a network of dedicated paid workers and volunteers throughout England and Wales.

**WEB LINK:** [www.nyas.net](http://www.nyas.net)

**BED WETTING AND SOILING:**

**ERIC** : Information and advice on bedwetting and soiling

**PHONE** : 0845 370 8008

**WEB SITE:** <http://www.eric.org.uk/>

**CHILDREN LOOKED AFTER NURSES:**

**EMAIL ADDRESS** :

East Team : [clateam@lancashirecare.nhs.uk](mailto:clateam@lancashirecare.nhs.uk)

Central Team: [CL.Safeguarding@lancashirecare.nhs.uk](mailto:CL.Safeguarding@lancashirecare.nhs.uk)

North Team : [bfw-tr.CLA@mhs.net](mailto:bfw-tr.CLA@mhs.net)

**CHILDREN CENTER:**

**WEB LINK:** [www.lancashire.gov.uk/children-education-families/childcare-and-family-support/childrens-centres.aspx](http://www.lancashire.gov.uk/children-education-families/childcare-and-family-support/childrens-centres.aspx)

**CHILDRENS COMMISSIONER:**

The Children's Commissioner for England makes sure that adults in charge listen to children and young people. You can contribute or find information at:

☐☐ 020 7783 8330

☐☐ [www.childrenscommissioner.gov.uk](http://www.childrenscommissioner.gov.uk)

☐☐ [info.request@childrenscommissioner.gsi.gov.uk](mailto:info.request@childrenscommissioner.gsi.gov.uk)

**CHILD SEXUAL EXPLOITATION.**

**WEB LINKS:** [www.lancashire.police.uk/cse](http://www.lancashire.police.uk/cse)  
[www.trusted2know.co.uk](http://www.trusted2know.co.uk)

**CHILDREN'S SOCIAL CARE OFFICES :**

Pendle Children's Social Care - 325 Burnley Road, Colne, BB8 8JT

Burnley Children's Social Care – Easden Clough, Morse Street, Burnley, BB10 4PB

Rosendale Children's Social Care – Newchurch Road, Rawtenstall, BB4 7QX

Hyndburn & Ribble Valley Children's Social Care, Atlas Street, Clayton- Le-Moors, BB5 5LT

Preston Children's Social Care - Ripon Street, Preston PR1 7LY

Fylde & Wyre Children's Social Care - Rothwell Drive, off Eden Avenue, Fleetwood, FY7 8FF

Lancaster Children's Social Care - Sefton Drive, Lancaster, LA1 2QD

West Lancashire Children's Social Care - Fairlie, Birch Green, Skelmersdale, WN8

6RG

Chorley / South Ribble Children Social Care - Gloucester Road, Chorley, PR7 3HN

Phone number for all: 0300 123 6720.

### **COMMUNICATION DIFFICULTIES:**

**TALKING POINT :**

Website with information on aspects of speech and language development in children and young people. Particularly useful for those caring for children with speech, language and communication difficulties.

**WEB LINK:** <http://www.talkingpoint.org.uk/>

### **CORAM/ BAAF:**

CoramBAAF Adoption and Fostering Academy is the leading membership organisation dedicated to improving outcomes for children and young people in care.

**WEB LINK:** <http://www.coram.org.uk/>

### **BEREAVEMENT CARE:**

**CRUSE BEREAVEMENT CARE:**

**WEB SITE:** <http://www.crusebereavementcare.org.uk>

Young People 0808 808 1677

Email: [info@rd4u.org.uk](mailto:info@rd4u.org.uk)

**WEB SITE :** <http://www.rd4u.org>. UK

### **DRUGS ADVICE:**

**FRANK:**

**PHONE:** 0800 776600 Text: 82111

**WEB LINK :** <http://www.talktofrank.com>

**EARLY BREAK: East Lancashire** Charity offering free information, advice and support for young people and families with substance misuse related issues.

**<http://www.earlybreak.co.uk/>**

**ADDACTION :** Is one of the UK's largest specialist drug and alcohol treatment charities. Central area.

**WEB LINK :** [WWW.ADDACTION.ORG.UK](http://WWW.ADDACTION.ORG.UK)

**EATING PROBLEMS :**

**B-EAT:** UK's leading charity supporting anyone affected by eating disorders or difficulties with food, weight and shape. [Learn about eating disorders](#)

**WEB LINK :** <http://www.b-eat.co.uk/>

### **EDUCATION:**

**SPECIAL EDUCATIONAL NEEDS:**

**WEB LINK :** [www.lancashire.gov.uk/children-education-families/special-educational-needs-and-disabilities/help-for-parents-and-carers/information-advice-and-support.aspx](http://www.lancashire.gov.uk/children-education-families/special-educational-needs-and-disabilities/help-for-parents-and-carers/information-advice-and-support.aspx)

**FOSTERING AND PERMANENCE SUPPORT TEAMS:**

Burnley Pendle and Rossendale: 01282 478418

Central Lancashire: 01772 530919

Hyndburn and Ribble Valley: 01254 220759

Lancaster Fylde and Wyre: 01524 585939

**FOSTERING AND PERMANENCE RECRUITMENT AND ASSESSMENT TEAM:**

Recruitment and Assessment Team: 01772 535196

**FOSTERING NETWORK:**

**WEBSITE** : <https://www.fostering.net/>

Lancashire County Council foster carers have free membership to the Fostering Network and its range of information and advice. The charity campaigns across the UK to improve foster care for children and the families who care for them.

☐☐ 020 7261 1884 – information line, or 0800 040 7675 - Fosterline

☐☐ [www.fostering.net](http://www.fostering.net)

☐☐ [info@fostering.net](mailto:info@fostering.net)

**LANCASHIRE COUNTY COUNCIL FOSTERING WEB SITE :**

**WEB LINK:** <http://www.lancashire.gov.uk/fostering>.

**LANCASHIRE SAFEGUARDING BOARD :**

**WEB LINK** : <http://www.lancshiresafeguarding.org.uk/>

**NHS Direct:**

**WEB LINK:** [www.nhs.uk](http://www.nhs.uk)

**OfSTED:**

Ofsted inspect and regulate to achieve excellence in the care of children and young people, and in education and skills for learners of all ages. A range of information for carers is available from Ofsted.

☐☐ 0300 123 1231

☐☐ [www.ofsted.gov.uk](http://www.ofsted.gov.uk)

**OUT OF HOURS EMERGENCY NUMBER: 0300 123 6720****RADICALISATION AND EXTREMISM:**

**WEB LINK:** <http://www.lancashire.police.uk/help-advice/safer-communities/counter-terrorism/partner-training.aspx>

**TALKING POINT :**

Website with information on aspects of speech and language development in children and young people. Particularly useful for those caring for children with speech, language and communication difficulties.

**WEB LINK** : <http://www.talkingpoint.org.uk/>

**The Who Cares? Trust**

The Who Cares? Trust is a voice and a champion for children and young people in the UK living in care. We believe that every child in care should receive the support, encouragement and opportunities they need to enjoy their life and to achieve.

☐☐ **02072513117**

☐☐ **[www.thewhocarestrust.org.uk](http://www.thewhocarestrust.org.uk)**

☐☐ **[mailbox@thewhocarestrust.org.uk](mailto:mailbox@thewhocarestrust.org.uk)**

### **TRAINING FOR FOSTER CARERS:**

#### **WEB LINK**

**[http://www3.lancashire.gov.uk/corporate/web/view.asp?siteid=3825&pageid=41012  
&e=e](http://www3.lancashire.gov.uk/corporate/web/view.asp?siteid=3825&pageid=41012&e=e)**

### **YOUNG MINDS:**

Young Minds is the UK's leading charity committed to improving the emotional wellbeing and mental health of children and young people.

**WEB LINK <http://www.youngminds.org.uk>**

### **YOUNG PEOPLES SERVICE:**

**WEB LINK : [yps.lancashire.gov.uk](http://yps.lancashire.gov.uk)**

**EMAIL ADDRESS: [talkzone@lancashire.gov.uk](mailto:talkzone@lancashire.gov.uk)**

## A

Accommodated, 134  
 Adoption allowance, 108  
 Advice line, 119  
 Advocacy, 15  
 Alcohol, 26  
 Allegations, 43

## B

Babysitting, 15  
 Bedwetting and soiling, 36  
 Behaviour management, 43  
 Being asked to keep a secret, 58  
 Belongings, 16  
 Birth certificate, 57  
 Birthday allowance, 104  
 Blood borne viruses, 26  
 Buddhism, 54  
 Bullying, 43

## C

Car safety, 17  
 Care Order, 136  
 Changing a child's name, 18  
 Changing schools, 49  
 Child Assessment Order, 138  
 Child Benefit, 108  
 Child Protection Conference, 43  
 Child's death, 25  
 Children in Care Council 119  
 Children in Need, 135  
 Children Looked After Nurses, 119  
 Children Looked After Review Consultation Forms, 102  
 Children Looked After Review, 62  
 Christianity, 54  
 Clothing, 104  
 Complaints, 45  
 Confidentiality, 57  
 Consent form, 52  
 Family time Order, 137  
 Family time, 26  
 Core Group Meeting, 84 – no page 84, can't find in text  
 Culture, 55

## D

Damage to your property, 20  
 Dental care, 24  
 Diarrhoea, 26  
 Dinner money, 104  
 Directorate records, 102  
 Discrimination, 63  
 Discussion with other foster carers, 58  
 Disruptions, 107  
 Documentation, 57  
 Drug use and misuse, 27

## E

Eating disorders, 28  
 Emergency Protection Order, 136  
 Equipment, 20  
 Exclusions, 50

## F

Family Assistance Order, 138  
 Foster carer agreement, 101  
 Foster carer review consultation forms, 101  
 Foster carer review, 101  
 Fostering allowances, 103  
 Fostering Forum, 113  
 Fostering Network, 112  
 Fostering Panels, 60

## G

General practitioner/dentist registration, 30

## H

Haircuts, 30  
 Head lice, 30  
 Health & Safety, 38  
 Health assessments, 30  
 Health care, 49  
 Health of Children Looked After, 30  
 Health records, 32, 57  
 Hep B inoculation, 32  
 Hinduism, 54  
 Hobbies/out of school activities, 42  
 Holiday allowance, 10  
 Home learning, 50

## I

Independent visitors, 111  
 Insurance, 19  
 Interim Care Order, 136  
 Interim Supervision Order, 137  
 Islam, 55

## J

Judaism, 55

## K

## L

Lancashire Children's Rights Service, 15  
 Leaving care allowances, 108  
 Leaving care, 115  
 Life Story Book, 22  
 Life Story work, 21

## M

Mental health, 34  
 Missing from home, 44

## N

National Insurance Number, 51  
 National Minimum Standards, 111  
 Non-intervention, 136

## O

Ofsted, 121  
 Out of Hours Team, 110  
 Overnight stays, 21  
 Overpayments, 108

## P

Parental Responsibility (PR), 134  
 Parents'evening, 50  
 Anticipation, 22  
 Pathway plan, 102  
 Personal education plan (PEP), 49  
 Personal  
 Education plan meetings, 63  
 Pets, 42  
 Piercings, 35  
 Placement Plan, 101  
 Placement Planning Meeting, 62  
 Pocket money, 105  
 Police Protection Order, 136  
 Prejudicial delay, 135  
 Prohibited Steps Order, 138

## Q

## R

Religion, 54  
 Residence Order allowance, 97  
 Residence Order, 12  
 ROSPA 38

## S

Safer Caring, 46  
SCAYT, 29  
School trips, 51 - 52  
School uniform, 104  
Sexual health and relationships, 35  
Sikhism, 55  
Smoking, 36  
Social Work Visits, 111  
Social workers, 111  
Special Educational Needs and Disability; Children and Family Support Team, 49  
Special Educational Needs, 49  
Special Guardianship financial support, 108  
Special Guardianship Order, 108  
Specific Issue Order, 138  
Strategy meetings, 64  
Substance misuse, 27  
Supervision Order, 137

## T

Tattoos, 36  
Tax, 108  
Training, 101  
Travel costs, 105  
Trips, 51 - 52

## V

## W

Who does not need to know, 58  
Who needs to know, 59

## X

## Y

## Z

For more information about this service visit:  
[www.lancashire.gov.uk/fostering](http://www.lancashire.gov.uk/fostering)

This handbook can be translated into Bangla, Gujarati, Punjabi and Urdu.

### Bangla

এই প্রচারপত্র বাংলা, গুজরাতি, পাঞ্জাবী এবং উর্দু সহ বিভিন্ন ভাষায় অনুবাদ করা হয়েছে। আপনি যদি এই তথ্য বাংলায় পেতে চান তাহলে অনুগ্রহপূর্বক 0808 144 2248 নাম্বারে ফোন করুন।

### Gujarati

આ પરિકાનો અનુવાદ વિવિધ પ્રકારની ભાષાઓમાં પણ કરવામાં આવ્યો છે, જેમાં બાંગલા, ગુજરાતી, પંજાબી અને ઉર્દુનો સમાવેશ થાય છે. જો તમને ગુજરાતીમાં અનુવાદ કરેલી માહિતીની જરૂર હોય તો કૃપા કરીને 0808 144 2256 ઉપર ટેલિફોન કરશો.

### Punjabi

ਇਸ ਪਰਚੇ ਦਾ ਤਰਜਮਾ ਕਈ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਕੀਤਾ ਗਿਆ ਹੈ ਜਿਸ ਵਿਚ ਬੰਗਲਾ, ਗੁਜਰਾਤੀ, ਪੰਜਾਬੀ ਅਤੇ ਉਰਦੂ ਸ਼ਾਮਲ ਹਨ। ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਪੰਜਾਬੀ ਵਿਚ ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਇਸ ਨੰਬਰ ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ : 0808 144 2260

### Urdu

اس لیفلٹ کا بنگالی، گجراتی، پنجابی اور اردو زبان سمیت بہت سی زبانوں میں ترجمہ کیا گیا ہے۔ اگر آپ کو ترجمہ کی گئی معلومات اردو زبان میں چاہیے ہیں تو برائے مہربانی 0808 144 2291 پر رابطہ قائم کریں۔

Publication date: August 08  
 Review date: August 2011

For all other languages; information in easy read format for people who have a learning disability; large print; Braille; or audiotape family time:  
 (01772) 534313.

# Appendix 1: Terminology & Orders in Children Act 1989

## Accommodated

If a child is under the age of sixteen he/she may be "accommodated" with the consent of the parents. A Local Authority may provide accommodation for any child within their area (even though a person who has Parental Responsibility for him is able to provide him with accommodation) if they consider that to do so would safeguard or promote the child's welfare. If over sixteen, parental consent is not necessary. A court order is not necessary. If a child is accommodated he or she is said to be a child looked after.

## Parental Responsibility (PR)

This means all the rights, duties, powers, responsibilities and authority which by law a parent has in relation to a child and his property. More than one person may have Parental Responsibility for the same child at the same time.

Parental Responsibility can be held by: The child's mother

- The child's father if: He is married to the child's mother either at the time of the child's birth or subsequently.
- The court may order that the father shall have Parental Responsibility, if he applies to the court.
- The father and mother may by agreement (a Parental Responsibility agreement) provide for the father to have Parental Responsibility for the child.
- A father whose name is on the child's birth certificate was introduced by The Adoption and Children Act 2002.
- An adult with a Child arrangement Order (live with) in respect of the child.
- An adult with a Special Guardianship Order in respect of the child (from 30th December 2005).
- An adopter.
- The Local Authority if the child is subject of a Care Order (Section 31) or is subject to a Placement Order.
- If the child is accommodated the parents have full Parental Responsibility. Parents may by agreement delegate some tasks and decisions to the child's carers and these must be recorded in the Placement Information Record.

Parents only lose Parental Responsibility if their child is adopted - then there is a transfer of Parental Responsibility from the birth parents to the adoptive parents. Parents continue to have Parental Responsibility for their child even if other people acquire Parental Responsibility through a Care Order, Child Arrangement Order or Special Guardianship Order. In these circumstances Parental Responsibility is shared, although in the case of Special Guardianship the birth parents' rights to exercise Parental Responsibility are limited. For Care Orders and Residence Orders birth parents should continue to be consulted on the care arrangements for their child, even if the child is living elsewhere.

For a child who is accommodated the birth parents retain sole Parental Responsibility and must be consulted on all aspects of their child's care.

- Foster carers do not have Parental Responsibility. However they provide day to day parenting in terms of meeting a child's physical and emotional needs and may do what is reasonable in all the circumstances of the case for the purpose of safeguarding or promoting the child's welfare, as may the prospective adopters where the child is placed with them (Section 25 Adoption and Children Act 2002).

Children in Need is the definition found under Section 17 of the Children Act; it includes children who are disabled or whose vulnerability is such that they are unlikely to reach or maintain a satisfactory level of health and development, or their health and development will be significantly impaired without the provision of services.

Significant Harm to a child is the criteria for an application to court for a Care Order or Supervision Order under section 31 of the Children Act. This means that the child is —suffering or is likely to suffer harm and that the harm or likelihood of harm is attributable to

(1) 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;

Or

(2) the child's being beyond parental control. (Extract from the Children Act 1989) Harm means ill-treatment; or impairment of physical or mental health; or impairment of physical, intellectual, emotional, social or behavioural development. For example impairment suffered from seeing or hearing the ill-treatment of another e.g. domestic violence.

The Welfare Principle is applied to all court proceedings and means that the child's welfare is the paramount consideration when reaching any decision about his/her upbringing. There is a checklist of seven features that must be addressed to apply this principle.

- The ascertainable wishes and feelings of the child (in the light of the child's age and understanding).
- The child's physical, emotional and educational needs.
- The likely effect of any changes in the child's circumstances.
- The age, sex, background and any characteristics of the child, which the court considers relevant.
- Any harm that the child has suffered or is at risk of suffering.
- How capable each of the child's parents is, and any other relevant adult, in meeting the child's needs.
- The range of powers available to the court.

### **Prejudicial Delay**

The court must observe the general principle that delays in decision making about a

child's upbringing are likely to prejudice the child's welfare. The court must draw up a timetable for the case to avoid delay and give directions to ensure the timetable is adhered to. There is a statutory timetable of 26 weeks in proceedings for a care or supervision orders, the Court being unable to extend the timetable unless there are exceptional circumstances to justify the same.

### **Non-Intervention - also known as the No Order Principle**

The court should not make an order unless it is satisfied that the Order will positively contribute to the child's welfare. The court should consider whether a child's welfare can be secured by the provision of services, accommodation, a Residence Order or a Special Guardianship Order as an alternative to a Care or Supervision Order.

### **Emergency Protection Order**

This is an Order by which children are removed from a situation in which they are at risk. The Order must be signed by a magistrate. An Emergency Protection Order can last up to eight days with a possible extension up to a further seven days. Seventy two hours after the making of the Order, an application for discharge can be made (if the parents were not present at the granting of the Order) by a parent, person with Parental Responsibility, the child, or anyone with whom the child is living at the time.

### **Police Protection Order**

This is similar to Emergency Protection Order undertaken by the police. It lasts for a maximum of 72 hours.

### **Interim Care Order**

An Interim Care Order (ICO) will often follow an Emergency Protection Order. The court may grant an Interim Care Order under the Children Act 1989 (Section 31 part 2) If it is satisfied that:

- 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; or
  - The child's being beyond parental control.

During this time the parties to the court proceedings will investigate/collate evidence. The court may make a direction that the child should have a medical (physical) or psychiatric examination or other assessment. The child can refuse to consent to such examination if they are of sufficient understanding to make an informed decision. An ICO is normally made for as long as the Court deems appropriate and in most cases for the duration of the proceedings. It is very unusual for parents not to have family time with their child under Interim Orders.

### **Care Order**

The court will make a Care Order if it believes that a child is:

- 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; or
  - The child's being beyond parental control.

The Order will state that the Local Authority must look after the child and provide somewhere for him/her to live. A Care Order gives the Local Authority Parental Responsibility jointly with the parents. The Local Authority can determine the extent to which a parent may meet his or her Parental Responsibility.

The Care Order lasts until the young person reaches the age of 18, or until the child is adopted, or a Supervision, Residence Order or Special Guardianship Order is made, or the court discharges the Order. There is a presumption that parents will have family time with their children whilst in care unless there is a court Order to the contrary. While a Care Order is in force the Local Authority shall not cause a child to be brought up in any religious persuasion other than that in which he would have been brought up if the Order had not been made. No person may change the child's surname or forename's. No person may remove him from the UK for more than a month without either the written consent of every person who has Parental Responsibility for the child or leave of the court.

### **Family time Order**

This Order directs that certain persons should have family time with a child; it will also state how often that family time should take place and possibly what form the family time should take. Most children in care are not the subject of a defined family time order but the local authority is under a duty in the vast majority of cases to promote reasonable family time with the parents. This is usually achieved by agreement with the parents. Other family members may also be afforded family time if this is considered to be in the child's best interests.

### **Child Arrangements Order (child to live with)**

This Order specifies with whom the child must live. Parental Responsibility is then acquired by the person specified in the order (assuming they do not already hold it), and is then shared with the parent. This is not a permanent Order and applications may be made to the courts to request it is discharged.

### **Interim Supervision Order**

This Order may be made for up to eight weeks so that more information can be gathered. This can be extended for a further four weeks if necessary.

### **Supervision Order**

This is granted when a child or young person living at home is required to have a social worker to visit to ensure they are safe. It shall be the duty of the supervisor —To advise, assist and befriend the supervised child. The Order usually lasts for one year, no longer than three years and only up to the age of eighteen years. The Order can cease upon the making of a Care Order or upon the agreement of the court.

**Child Assessment Order**

This is made by the court stating that the parents or those with Parental Responsibility take the child to be assessed or examined, usually by a medical professional.

**Specific Issue Order**

The court is asked to consider and resolve a 'specific issue'. For example, educational or medical matters in the best interest of the child. This order is not made in respect of children in local authority care. It is a private law order made, for example when parents separate.

**Prohibited Steps Order**

This Order states that certain things cannot happen without the court's permission, for example, changing the child's school or moving the child out of the country. This order is not made in respect of children in local authority care. It is a private law order made, for example when parents separate.

**Family Assistance Order**

This may be made after the separation or divorce of the child's parents. A court welfare officer or social worker is appointed to advise, help and befriend the child and their family for a period of up to six months. This order can also be made where other family members have applied for and obtained private law orders.

---

## Appendix 2: Extremism & Radicalisation

The UK has a Counter Terrorism strategy called '**CONTEST**' which aims to reduce the risk to the UK and its interests overseas from terrorism, so that people can go about their lives freely and with confidence.

The strategy has four work streams, each comprising a number of key objectives:-

- Pursue: to stop terrorist attacks;
- Prevent: to stop people becoming terrorists or supporting terrorism;
- Protect: to strengthen our protection against a terrorist attack; and
- Prepare: to mitigate the impact of a terrorist attack.

The Prevent strategy, itself was revised by the Government in 2011, with the aim of reducing the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism.

The strategy has three specific strategic objectives: (the three I's)

- Respond to the ideological challenge of terrorism and the threat we face from those who promote it;
- Prevent individuals from being drawn into terrorism and ensure that they are given appropriate advice and support; (the Channel support programme) and
- Work with sectors and institutions where there are risks of radicalisation that we need to address.

Further information available from: <https://www.gov.uk/government/publications/2010-to-2015-government-policy-counter-terrorism/2010-to-2015-government-policy-counter-terrorism>

## Appendix 3: Unaccompanied Asylum Seeker

A child or young person under the age of 18 who has been forced or compelled to leave their home country as a result of major conflict resulting in social breakdown or to escape human rights abuse. They will have no adult in the UK exercising Parental Responsibility.

Separated Children are children and young people aged under 18 who are outside their country of origin and separated from both parents, and their previous legal/customary primary caregiver. Some will be totally alone - unaccompanied, while others may be accompanied into the UK e.g. by an escort; or will present as staying with a person who may identify themselves as a stranger, a member of the family or a friend of the family. These children will not be cared for by persons who - in the eyes of UK law - have the responsibility to do so. The separated children about whom there will be the most concern will present with an unclear history of their arrival and purpose in the UK. These children will always give cause for concern about their safety and welfare. Separated children, by virtue of being without the appropriate parental care and protection, are vulnerable and may present for help, or be brought to the attention, of a variety of statutory agencies.

Foster care is usually used as a placement for children under the age of 16 (Wade 2005; Chase et al 2008). Hek (2005) writes that where unaccompanied young people have been asked for their views on foster placements they have identified various factors as helping them settle, including:

- A living space that provides safety and support
- A place where their experiences are recognised but they are not pressured to talk about them if they do not want to.
- Somewhere that is appropriate in terms of language, culture and religion.

Young people said that they wanted their feelings to be considered, but some did not want to be asked too many questions about their background which made them feel uncomfortable and also highlighted them as being 'different'.

Several studies have found that unaccompanied minors have high levels of post-traumatic stress symptoms (around 50% in these samples). When controlling for age, this was lower for young people living with family and for unaccompanied young people living in foster care compared to those living in group homes or independently (Hodes 2008).

The majority of unaccompanied minors are aged 14 and over when they arrive in the UK, with the largest numbers in the 16-17 year old age group. Therefore, transitions to adulthood and leaving care provisions are a key issue for these young people.

Wade (2005) notes that many young people reach the age of 18 without having received a final decision on their asylum case. Government guidance advises that social workers need to engage in multi-dimensional or parallel planning with young people to help them consider and prepare for different potential outcomes of the asylum process. These include:

- Long-term planning to prepare young people for life in the UK if they receive indefinite leave to remain
- Transitional planning to meet young people's needs while they are in the UK without a longer-term immigration status
- Return planning to prepare young people for return to their country of origin if all appeals are exhausted or they return voluntarily.

Many young people have identified anxieties associated with their immigration cases as being the most difficult aspect of their lives and having negative effects on their mental health (Chase 2008; Hodes 2008). It is therefore also vital that young people receive high quality legal representation and support during this process. However, a number of studies have highlighted young people's experiences of poor legal advice, poor levels of interpreting and lack of communication on the progress on their cases (Chase 2008).

### References

- Hek (2005) *The Experiences and Needs of Refugee and Asylum-Seeking Children in the UK: A Literature Review*, London: Department for Education and Skills.
- Hodes, Jagdev, Chandra. and Cunniff (2008) 'Risk and resilience for psychological distress amongst unaccompanied asylum seeking adolescents', *Child Psychology and Psychiatry*, 49(7): 723-732.
- Wade, Mitchell and Baylis (2005) *Unaccompanied Asylum Seeking Children: The Response of Social Work Services*, London: BAAF.