**Early Permanence 3 minute guide**

*Discussions with early permanence carers, social workers and supervising social workers have indicated a gap in knowledge and awareness regarding the role of early permanence cares and the role of social workers in such cases. The following list of points* ***MUST*** *be adhered to where working with an early permanence case.*

**What is early Permanence?**

Concurrency (also referred to as best for baby)

• Suitable for children aged between 0-2

• Where there is a high likelihood the child may be adopted (plan B) however alongside this there is the potential for rehabilitation to family (plan A).

• Suitable cases may include where previous siblings have been adopted or are looked after or the family have been known to children's Social Care for some time and positive change has not sustainable

• The majority of children placed in concurrent placements are placed at the outset of care proceedings and are usually placed soon after birth

* • It has also been used where home placements have broken down and care proceedings are again required or where mother and baby placements break down

• Carers are dually assessed, trained and approved as adopters and foster carers

Fostering for Adoption (also referred to as better beginnings)

• Suitable for children of any age range where adoption is considered

• In Lancashire we use this approach where adoption is the only plan for the child (i.e later on in care proceedings where assessment have concluded and are negative)

• Fostering for Adoption carers are temporarily approved as foster carers for a specific child with the potential for it to become the permanent placement. (Reg 25A of the CPPCR, 2010. The Nominated Officer makes a decision about the suitability of the match under Reg 33, AAR 2005 (FFA).

* Where cases are identified as suitable for early permanence, a matching meeting will take place which the child's social worker will attend. They will then be responsible for completing their section of the Reg 25a paperwork . See attached blank form.



* In cases where the child is placed from birth, the child's social worker should lead on the placing of the child with the early permanence carer.
* When the child is placed with the early permanence carer, the child's social worker should request a confidential banner on the child's record – this is done via helpdesk. Guidance is attached on how to complete this task.



* Only first names of carers should be shared with birth parents. **SURNAMES, ADDRESSES AND ANY OTHER IDENTIFIABLE INFORMATION SHOULD BE KEPT STRICTLY CONFIDENTIAL**.
* During CLA reviews and other relevant meetings, professionals in attendance should be pre- warned around the importance of keeping the cares details confidential. For example- Ensuring health do not share the details of the child's GP surgery.
* Similarly paperwork relating to the child should omit carer's personal details and due care and attention should be given when such paperwork is shared with birth parents. This includes the completion of the CPR and the information contained within this which may relate to the early permanence carer.
* Whilst the carers are fulfilling their fostering role they should not be referred to as prospective adoptive parents. Until they are formally matched to the child they are to be referred to as foster carers. Decisions of the court regarding plans for adoption should not be pre-empted or discussed in meetings or communication with the birth parents, carers or professionals.
* Contact should take place in a neutral setting. This should be at a distance suitable for a baby/child to travel but should not be in the area of the early permanence placement.
* Conversations regarding the child's care plan must be conducted sensitively with early permanence carers. Although they are fulfilling a fostering role, early permanence is highly emotive and this should be given consideration at all times.
* There should be tight lines of communication between the child's social worker, the carers supervising social worker and the adoption social worker to avoid drift and delay and to promote effective and robust joint working.
* Payments should be set up correctly to start from the date the child is placed with the early permanence carer. The payments should also cease on the date the placement converts to an adoptive placement. If payments do not cease on the correct date, this may lead to an overpayment of the carer. See attached guidance.



* When the child has been placed in an early permanence placement a Child Looked After Review must take place within 21 days.
* When the child has been placed in an early permanence placement the child's social worker must visit weekly for four weeks.
* When the child's Placement Order has been granted the child's social worker must complete all items listed in the joint working protocol which will enable the transfer to the Children awaiting Adoption Team to progress. If this not completed within the specified timescales the child's social worker will be responsible for completing linking panel paperwork for Lancashire's Adoption Linking panel, which is where the carers and the child must be formally linked. After receiving ADM, the placement will convert to an adoptive placement and the carers will be referred to as the child's prospective adopters. If the case has not yet transferred to the Children Awaiting Adoption Team at this point. The child's district social worker must then conduct further weekly visits for four weeks and then visit as per statutory guidance every 5-6 weeks until the case transfers to the Children Awaiting Adoption Team.