



# Foster Carers Handbook

A Guide for all Foster Carers

**ROCHDALE BOROUGH COUNCIL FOSTERING SERVICE – FOSTER CARER HANDBOOK**Introduction and Welcome

Welcome to Rochdale Borough Council Foster Care Service. We hope that you will find being a foster carer rewarding and satisfying and we look forward to working in partnership with you in looking after some of Rochdale's most vulnerable children and young people.

By working together we will be able to keep children and young people safe, provide them with a warm and caring home and improve their life chances for a brighter happier future. Your supervising social worker will be available for help, advice, and support and will see you personally on a regular basis to undertake supervision visits.

If you are worried, uncertain or do not know the answer to a problem or situation you can telephone your supervising social worker to discuss the situation. If your supervising social worker is not available the fostering team also provide a duty worker service during office hours, they will be able to help or support you.

The Foster Carer Handbook has been devised to be a quick reference guide to try to answer the most frequently asked questions and help you understand some of the requirements of being a foster carer. The handbook can never be all encompassing but, having had feedback and consulted with foster carers, it is hoped that the most important issues have been covered. Any information not in this handbook can be sought from the fostering team.

Children's Social Care which is inclusive of foster care is regularly inspected by OFSTED. Foster care is subject to consideration on how the service and carers National Minimum Standards some of which are detailed in the handbook. These standards are based on the Fostering Regulations and are enforceable by law. Standards and Regulations are there to protect and safeguard both children and foster carers and impose duties on the Local Authority to ensure children and young people placed in foster care are well looked after and are kept safe.

Rochdale Fostering Team wish you an enjoyable and rewarding experience in fostering and remember if in doubt, pick up the telephone or email to contact us.

Adele Ion

Head of Provider Services

Our Cared4Children have a 'Listen Up group' who gave us this feedback ..... Food for thought ....

### Foster Carers

***We asked lots of young people like you these questions; now we've got lots of answers, we would like you to help us put them together to come up with some new house rules to help Foster Carers!***

- 1. If you moved into a new foster home, what would help you to feel happy/safe/comfortable?**

Own Rooms?/ Welcoming Family- make a fuss or special effort?/ Nice people- who else should or shouldn't be there? Pets?/ Treated the same/ equally as other children/ Treated like family?/ personal space?

Getting to know them first before moving in?/ Do something special on the first day?

- 2. What kind of person would the best foster carer be?**

Kind/ Helpful/ 'Normal'/ Very kind and 'gave you nice food' (someone who knows what you like?)/ Helpful/ not strict- or only when necessary?/ Young and nice (Do they have to be a certain age?)/ Understanding & Listens- Makes you feel special/ someone who is passionate (Especially someone not doing it for the money!)/ someone who can spend time with you & will always be there.

- 3. What advice would you give to somebody who is thinking of becoming a Foster Carer? What would be good for them to do, and what would be bad for them to do when welcoming someone to their new home?**

Be patient & helpful/ Be as normal as possible/ Have a room ready/ Always try to be nice/ Be strict only when you have to/ Let them settle in and be understanding/ Expect the Unexpected!/ Make sure you always listen

Don't shout/ don't hurt their confidence/ don't be loud and bossy/ don't be clingy!

- 4. Do you think living with a foster family has changed you as a person?**

I'm happier & settled/ A little bit, not much/ I've become more kind/ I like the routine/ I get on better at school/ Better self-esteem/ It was hard at first, but I feel more comfortable now

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## Accidents

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

If the cared4child placed with you has a more serious accident or sudden illness and requires medical or hospital treatment, consent to treatment will be required, so always have the document which delegates this authority to you readily available.

Young people 16 years or over can give their own consent to medical treatment. Some children under 16 years of age may also be able to give or refuse consent if they are considered to have sufficient understanding. It is important to talk with the child, keep them informed, give reassurance and gain their views.

You must keep the child's social worker and your supervising social worker informed of any organized medical treatment.

If the accident or event occurs outside normal office hours you should notify the Emergency Duty Team on **0300 303 8875**.

## Accommodated / Looked After /Cared4

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

A child who is being 'Looked After' is defined in Section 22 of the Children Act 1989, as a child in the care of the Local Authority, under an interim Care Order or Care Order, or a child who is being provided with accommodation by the Local Authority.

Children have told us that in documents, local authority literature and discussions; they wish to be referred to as cared4 children not as accommodated or looked after.

## Allegations / Complaints

If an allegation is made directly to you about another person's conduct towards a child, you should inform your supervising social worker or the child's social worker. If allegations regarding your conduct towards a child are made directly to a social worker they have a responsibility to report the information to a Senior Manager and you will be made aware of the allegation or complaint.

Allegations and complaints are occasionally made against foster carers and this places foster carers in a difficult and sometimes distressing situation.



Rochdale Borough Council has an investigation and safeguarding procedure which aims to deal with allegations against carers quickly, confidentially, fairly and impartially. This procedure is known as the Allegations Management Process and is commenced when an allegation is made against an adult caring for or working with a child or young person.

- One in six foster carers has a complaint or allegation made against them during their fostering lifetime.
- Carers who have allegations made against them can be new carers or experienced carers
- All forms of abuse that can occur within children's birth families can occur in foster families
- All allegations will be taken seriously and investigated appropriately

In Rochdale after the investigation of any allegation or complaint a decision will be made as to whether the allegation is found to be:

- **Substantiated** – There is sufficient identifiable evidence to prove the allegation. Relevant Conduct has occurred.
- **Unsubstantiated** – This is not the same as a false allegation, it simply means that there is insufficient identifiable evidence to prove the allegation. The term does not imply guilt or innocence.
- **Unfounded** – There is no evidence or proper basis which supports the allegation being made, or there is evidence to prove that the allegation is untrue. It may also indicate the person making the allegation misinterpreted the incident or was mistaken about what they saw. Alternatively they may not have been aware of all the circumstances.
- **Malicious/False** – There is "clear" evidence to prove that there has been a deliberate act to deceive and the allegation is entirely false.

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

To support foster carers through an allegation and investigation Rochdale Borough Council have commissioned the services of 'Foster Talk' a Foster Carers Independent Support Service (FISS) offers locally based, independent Advisors to provide face to face support, advocacy and or mediation for foster families during difficult times such as allegations and complaints. In Rochdale a discussion to access FISS is held at the time of the allegation and initially 10 hours support would be agreed by a fostering manager if additional support is required this is discussed and agreed on an individual basis.

What support can the FISS Advisor give?

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

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

What is outside of the FISS Advisor role?

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

The **contact details** for Foster Talk are: **01527 836 910**

## Agency Decision Maker

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

## Allowances

Foster carer allowances are paid into the carer's bank or building society account fortnightly in arrears. The level of payment is determined by the child's age and the assessed level of the foster carer. The level a foster carer reaches is determined by their skills levels and the evidence that they continue to meet the additional criteria as set out in the Foster Carers Allowance Guide. (The allowance guide should be read in conjunction with the hand book)

The basic foster care allowances are non-taxable since they do not contain any element of reward to the carer. However as the status of the carer is self-employed you do need to register with the tax office find out more at Foster Carers and HMRC

Further information and e-learning regarding tax allowances for foster carers can be accessed at

<http://www.hmrc.gov.uk/courses/syob2/fc/index.htm>

Foster carers cannot claim tax relief, child benefits, income support or free school meals for children in their care. A child with a disability may be entitled to Disability Living Allowances. This allowance is payable in addition to the fostering allowance. If you consider the cared4 child in placement with you is entitled to this benefit, discuss the matter with the child's social worker before approaching the Benefits Agency. DLA should be used to enhance the

quality of life for the particular child/young person and foster carers need to keep accurate accounts of all expenditure from this allowance. These accounts should be available to be seen by your supervising social worker.

Whilst a child is in your care they are entitled to a number of allowances within the financial year (01April-31 March):

#### Holiday Allowance:

This allowance will be paid once per year, the allowance is a set amount of money. The amount payable should be used to provide a holiday or holiday activities for the child in your care.

#### Christmas / Festival Allowance:

This allowance will be paid yearly and the amount payable is dependent on the age of the child. Do make a note of special festival dates for children from differing cultures so that these can be celebrated.

#### Birthday Allowance:

This allowance will be paid yearly prior to the birthday date and is a set amount depending on the age of the child.

#### Mileage Allowance:

Day to day transport and mileage allowances are covered in the general fostering allowance for each individual child in care. Journeys to and from school, GP, Hospital appointments, contact, activities, meetings and training are part of the day to day fostering role and mileage expense covered in the general fostering allowance. High mileage costs for exceptional journeys will be considered and should be discussed with you supervising social worker within the placement plan.

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

## Appropriate Adult

All young people aged 17 and under who are arrested for a suspected criminal offence, are dealt with under the guidance of the Police and Criminal Evidence Act 1984.

This means that they have to be dealt with as young people and not in the same way as an adult offender would be dealt with.

This means that any young person, aged 17 and under cannot be interviewed or processed unless in the presence of an appropriate adult.

The appropriate adult, or AA as it is referred to, must be a person over 18 years of age who is deemed mature enough to consider the welfare of the young person in the criminal justice process at the Police station.

This will involve sitting in during the interview process. The appropriate adult is not there to substitute for a solicitor or indeed offer legal advice.

The appropriate adult cannot be somebody who is co accused in the offence or indeed the victim of the offence.

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

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

A foster carer can act in the role of an Appropriate Adult for a young person they are caring for providing they are not the victim of the offence.

### Baby Sitting / Staying with Friends

The Fostering Service recognises that foster carers may need a break or have a special anniversary or outing planned, and occasionally will have to leave a cared 4 child/children with a relative or baby-sitter. Foster carers are able to use their own discretion and judgment as would any responsible parent in these circumstances.

A cared4child may ask to visit or sleepover at a friend's house. It is the foster carer's responsibility to find out all they can about the people the child wishes to visit. Foster carers are expected to have met the adults, have an address and telephone number and be confident the child will be safe and not at risk of any harm.

It would be advisable for the foster carer to inform the child's social worker of such arrangements as this information may be useful when considering future care planning for the child.

### Behaviour Management

Children can sometimes exhibit behaviour that can be difficult to manage. This may include the use of bad language, throwing objects and refusing to co-operate with simple tasks or instructions. This behaviour is often the result of earlier hurtful life experience and is a way of the child coping with what he/she sees as a difficult situation. Challenging behaviour is sometimes a way of the child communicating their hurt or distress. For many children it is also a way trying to gain some control and order over their lives.

It is important to remember in managing challenging behaviour that it is the behaviour that is unacceptable and **not** the child involved.

Rochdale Borough Council has a 'no smacking' policy within foster care and it is a clear expectation that the foster carer must never physically chastise a foster child.

It is vitally important that any episodes of challenging or threatening or dangerous behaviour, including going missing, are recorded by the foster carer and this information is given to the Childs Social Worker or Supervising

Social Worker. This can often help in identifying 'triggers or patterns' for behaviour and help plan for managing possible future episodes.

All Rochdale Borough Council foster carers receive training in Managing Behaviour to support positive care and control of children in 'fostering changes'. The fostering service has a clear written policy on managing behaviour which includes supporting positive behaviour, de-escalating of conflicts and the use of discipline. Please ask your supervising social worker to discuss the policy and the training with you.

Please remember that as a Rochdale Borough Council foster carer you do not need to deal with everything on your own. Any problems can always be discussed with your supervising social worker; support worker and the child's social worker and you will be given advice and support on how to approach challenging situations. You may be advised to attend the CAMHS drop in to discuss your concerns and seek advice.

## Belongings

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

Remember the child will have been separated from their family and familiar surroundings and placed with strangers and what may seem an unimportant item to you may be a child's most treasured possession and hold some special memories.

It is a good idea to keep an inventory of the child's belongings and add to this when items are purchased.

When a child leaves your care it is essential that their belongings are packed for them in an appropriate luggage bag or suitcase. Please send with them all their belongings, even if they are changing schools, send their existing uniform - they may want to keep it as for life story work.

## Birth Certificate

If a birth has been registered then a birth certificate is available recording the details of the child's birth. As a foster carer you will need to have the child's birth certificate and you should ask the child's social worker or seek advice from the supervising social worker.

## Blood-borne Viruses: HIV and Hepatitis

Blood-borne viruses are infectious agents that some people carry in their blood. They can cause severe disease in some cases, 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.

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

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

Blood-borne viruses are spread by direct contact with the blood of an infected person. Certain other body fluids may also be infectious. It should be noted that blood-borne viruses are not spread by normal social contact and daily

activities eg coughing, sneezing, kissing, hugging, holding hands or sharing bathrooms, swimming pools, toilets, food, cups, cutlery and crockery.

The 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 should be referred to a specialist HIV paediatrician for assessment.

Fostering Network has a leaflet regarding AIDS and HIV, please ask your supervising social worker for a copy if required. We would encourage all our carers to consider immunisation against Hep B, you should approach your GP for this.

## Bullying

Bullying is defined as 'deliberate hurtful behaviour repeated over a period of time when it is difficult for those bullied to defend themselves' (Working Together to Safeguard Children).

Some children in care experience bullying at school, in the local area and sometimes from other children in the foster home.

Bullying can include the following:

- Name calling and teasing
- Threats, extortion and theft
- Physical violence
- Damage to someone's belongings
- Leaving people out of social activities deliberately and frequently
- Spreading malicious rumours
- Bullying by mobile phone text message, email or social network sites

Cared4 Children may become targets for bullies.

- The child feels and/or appears different

School life can highlight differences, for example they may arrive at school by taxi, they may not be able to participate in after school clubs, they may have been withdrawn from some lessons to attend meetings/reviews

- The child may not be achieving as well as others in their class
- The child may have had multiple changes of carer/school
- The child may not have an established friendship group
- The child may not want other children to know they are in foster care
- The child may feel isolated and believe they have no-one to talk to in school

Difficult and distressing life experiences can lead some children to develop poor self-esteem and a corresponding lack of 'coping' strategies.

The damage inflicted by bullying is frequently underestimated. It can cause considerable stress to children to the extent that it affects their health and development, or at extreme causes them significant harm which may include suicide.

Make sure you are watchful for bullying, talk to your cared4 child about bullying and work through how they would respond. Ask about school friends on a regular basis.

Any incidents of bullying should be recorded and reported to the child's social worker and the Head Teacher at school.

Some signs of bullying to watch out for::

- Excuses for not wanting to go to school
- Unexplained bruises
- Torn clothing
- Need for extra money
- Continually losing belongings
- Problems sleeping
- Sudden loss of appetite
- Sudden academic problems
- Sullen or withdrawn behaviour or temper outbursts
- Unusually hungry at the end of school (lunch money being taken)
- Rushing to the bathroom after school (fear of going to the school toilets)

Foster Carers should also be aware of 'Cyber Bullying' and need to exercise vigilance around internet, social network sites e.g. Facebook; Bebo; Instagram etc and mobile phone use.

What to do if you think your child is being bullied or bullying:

- Advise the child's social worker and continue to act on advice from professionals on ways to help build the child's self-esteem
- Help the child to establish a script to use to help explain why they are living with foster carers
- Encourage friendships and invite school friends home. There is strength in numbers and children need to be with a group of friends. Bullies quickly target a child who is alone.
- Build social skills. Problem-solve difficult social situations and practice suitable responses perhaps over a meal.
- Do not reject a child who is a bully; reject the behaviour. Explain how the behaviour makes other children unhappy and help them develop alternative strategies to feel better about themselves and to express their unhappiness.
- Give the child praise each time they are co-operative or are kind to someone.
- Consult with the child's social worker and make arrangements for both of you to see the child's class teacher or year tutor and set up communication and a monitoring system

The School Standards and Framework Act 1998 require all schools to have a behaviour policy that includes anti-bullying measures. Most schools take the issue of bullying very seriously and should work with you to eradicate instances in which children are subject to bullying. For cared 4 children there will be an identified member of staff in

the school who will have responsibility for cared4 children and the child should be consulted and assured that the matter is being taken seriously.

There are many resources on bullying that your supervising social worker will be able to direct you to. The following website is nationally recognized as providing good advice and support on issues relating to bullying. <http://www.bullying.co.uk/>

Do remember your supervising social worker; support worker and the child's social worker are there to help and support you on this complex and distressing area of child care.

## Channel

Channel is a key element of the Prevent strategy (see Radicalisation below) - external link <http://www.homeoffice.gov.uk/publications/counter-terrorism/prevent/prevent-strategy/>

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

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

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

## Changes in Circumstances

If there are any significant changes in the foster carer circumstances or the household then the foster carer **must** inform their supervising social worker. For example, if someone leaves or joins the household, any illness or health matters, any involvement with the police of anyone living, staying at or visiting the foster home, any injury or accident, any change in employment status or new relationships. Discussion with your supervising social worker is necessary when circumstances change.

As soon as possible, preferably in advance you must inform your supervising social worker if someone moves into/joins the fostering household, so the appropriate checks can be made.

## Changing a Child's Name

It is vital for children to be aware of their identity, and their birth name is a major part of their identity.

Foster Carers are not allowed to change the surname or forename of a child placed with them. Where a child is old enough to make this decision and wishes to do so, carers should seek advice from the child's social worker or their supervising social worker.

## Child Abuse



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

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

### Emotional Abuse

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

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

### Physical Abuse

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

### Sexual Abuse

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

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

### Neglect

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

Neglect can be very serious and has long-term consequences for children's physical, emotional and social development.

### Abuse of disabled children and young people

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

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

### Child Protection

There will be rare occasions where a child entering care is subject to a child protection plan. The child protection plan acknowledges children who have been at risk of harm at home and presented at a child protection conference. The child protection conference is a meeting which is called specifically to look at risks to children and agreeing whether a child protection plan is needed. It is usual that once a child is cared for the child protection plan will end and any risks to the child in relation to a return home are addressed through the child's care plan.

### Child Benefit

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

### Children's Care Plans

All cared4 children and young people should have a written plan which clearly states what plans will be made for them in the future. The following are some of the people involved in making plans for a child's future:

- The Child or Young Person
- Social Worker
- Family members
- Foster Carers
- Education Staff
- Medical Advisor
- Supervising Social Worker
- Guardian
- Independent Reviewing Officer

### Children Act 1989

At the heart of the Children Act 1989 is the belief that:

- The best placed for children to be looked after is within their own families.
- The welfare of the child is paramount.
- Birth parents should be involved in all planning and decision making affecting their children.
- Legal proceedings should be avoided whenever possible.
- The welfare of the child should be promoted by a partnership between the family and the Local Authority.
- Children should not be removed from their families and contact should not be ended unless it is absolutely necessary to do so for their wellbeing. When this does happen it should be through a Court Order.

- The child's needs arising from their race, culture, religion and language must be taken into consideration.

## Children's Guardian

Children's Guardians are qualified and experienced in Social Work. They are appointed by the Court to represent the rights and interests of children in the care of the Local Authority. Guardians are independent of Specialist Services and Safeguarding, Courts and everyone else involved in the case.

The Guardian will appoint a solicitor for the child who specializes in working with children and families. The Guardian will write a report to the Court saying what they think would be best for the child. The report must tell the Court about the wishes and feelings of the children.

The Guardian may interview a range of people who know and work with the child, including the foster carers. Information that is given to the Guardian may be used in the report that is given to Court.

Children's Guardians are there to help achieve the best possible outcomes for the children they represent

Children's Guardians work for CAFCASS or may be self-employed and contracted by CAFCASS. They can be contacted at:

Manchester CAFCASS

7th floor

Piccadilly Gate, Store Street

Manchester

M1 2WD

Telephone 0300 456 4000

## Compliments and Complaints

From time to time complaints may arise and a foster carer may wish to make a complaint or compliment. If this is a complaint most issues can be resolved informally through discussion with either the supervising social worker or the child's social worker depending on the nature of the problem. Sometimes the Foster Care Manager or the Social Work Manager may be a more appropriate person to hear and discuss your compliment; complaint or concerns. If a complaint and the matter cannot be resolved in this way the formal Complaints Procedure can be used.

Information about Rochdale Borough Council Complaints Procedure can be obtained from your supervising social worker.

## Confidentiality

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

The second relates to when a cared4 child is placed with you the child's social worker will share full information about the child's background to enable you to care for the child. This information may include details about the child's birth family and the circumstances which led to the child coming into care. Much of the information will be personal and all of it is told to you in confidence.

#### Who else needs to know?

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

#### Who does not need to know?

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

#### Discussions with other carers

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

#### If the child tells you a secret

A Cared 4 child needs a confidant like any other child. However, if the information they share with you is likely to have an impact on their future plans, you should encourage the child to share this information with their social worker and you can offer to help them with this. If the child will not do this it is essential you tell the child that you will have to share the information with a member of staff from Children's Social Care.

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

Never ask leading questions of a child in this situation. You should write down what the child has said at your earliest opportunity in the exact words the child uses. It may be useful to record what was happening at the time of the disclosure and your responses to the child.

## Connected Person

A 'connected person' to a cared 4 child is a relative, friend or other person who has a connection with them. A 'connected person can receive temporary approval as a foster carer for a child in care under regulation 24 of The Care Planning, Placement and Case Review (England) Regulations 2010 and subsequent amends to this in 2013 and 2014. An assessment is undertaken within a 16 week period and if approved via fostering Panel and the Agency Decision Maker they are then known as 'family and friends' foster carers.

## Contact

Contact with birth parents and significant people has crucial role in the Care Plans of cared 4 children and young people in foster care. The Law under which Children's Social Work Services and foster carers work, clearly states that Local Authorities have a duty to promote contact between cared 4 children, their parents, relatives and other people who are important to the child.

Clear expectations on promoting contact are also outlined in the National Minimum Standards for Fostering, foster carers are expected to work closely with the local authority and promote contact for children with their birth families.

Although foster carers have a responsibility to promote contact, guidance on good practice states this is a 'team effort' and the Local Authority has a duty to ensure that carers are in the best possible position to make contact as safe and enjoyable as possible. The role of the child's social worker is essential in terms of providing foster carers with the necessary information including any assessment of risk for those involved in the contact.

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

Research suggests that maintaining links between children and their families increases the possibility of children returning successfully to their family. It also suggests that contact enhances children's sense of identity as well as helping avoid disruptions in foster placements. Promoting and facilitating contact is a key task for foster carers and clear arrangements in regard to contact should be discussed, agreed and recorded prior to the child being placed and at the Placement Planning Meeting so that foster carers are clear what will be expected of them. Regular care planning meetings are held at least one in-between cared 4 children's reviews and issues can also be discussed in this forum.

Contact is usually but in some circumstances does not have to be face to face and can take the form of phone calls, exchanging letters, photographs or cards from holidays or special occasions. Cared 4 Children living away from their birth families often suffer feelings of grief and loss and positive steps should be taken to re-establish relationships if it is appropriate for the child.

### Problems with Contact

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

Contact may also cause distress for children and foster carers are often the people who have to deal with this when a cared 4 child feels confused or disappointed. This can be emotionally difficult for foster carers who feel frustrated that the family are letting the child down.

Children are often 'cared 4' and placed in an emergency when the family is experiencing overwhelming difficulties and loss of control in their lives. Parents may feel guilty or angry their child is living with foster carers if this is against their wishes and they may resent having to comply with plans they do not fully agree with. These reasons and feelings can lead to parents behaving in ways which appear inappropriate during contact. They may feel very emotional, give the children unrealistic messages or promise gifts.

Dealing with the problems of contact arrangements is often hard to manage but understanding the parent's experiences can help to make sense of the situation for the child as well as the family. Planning Meetings involving the foster carers and parents prior to or soon after the child is placed can help parents deal with their fears and clarify how arrangements can work best for the child.

Foster carers can make invaluable contributions to the plans for children by recording behaviour of children in relation to contact. This may identify patterns that can contribute to decision making which may otherwise go unnoticed.

It is important that contact is discussed in the foster carer's formal supervision with the supervising social worker so that problems and issues can be identified, shared and hopefully resolved.

## Corporal Punishment

Rochdale Borough Council does not accept the use of corporal punishment in foster care. This means that a foster carer must never physically chastise a cared 4 child. Remember many of the cared 4 children of the Local Authority have suffered physical abuse and injury, therefore physical punishment merely reinforces the belief that adults can hurt children.

Rochdale Borough Council believes that corporal punishment is not an acceptable or appropriate method of changing a child's behaviour. Foster carers should work with the child to support them to behave in an acceptable way.

If you cannot ignore the child's behaviour that is making you angry, then tell the child, talk to the child, let the child know. Most children will want your approval so telling them you are not pleased, in many cases, will prove very effective particularly if you follow it through with an opportunity to 'wipe the slate clean' and make a fresh start.

If you continue to feel anger or the urge to strike out at a child's behaviour then you should seek help and support. You need to talk to about how you feel and discuss this with your supervising social worker and inform the child's social worker who will offer support to you and the child.

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

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

## Court Appearance

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

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

## Court Orders

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

### Emergency Protection Order (EPO)

This is an order under which children are removed from a situation in which they are at risk of harm. The order must be signed by a magistrate. An Emergency Protection Order can last up to 8 days with a possible extension of up to a further 7 days. After 72 hours from the making of the order, an application for discharge can be made by; a parent, a person with parental responsibility, the child, or anyone with whom the child is living at the time.

### Care Order

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

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

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

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

### Child Arrangement Orders

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

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

### Special Guardianship Order

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

### Culture and Language

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

Foster carers should be aware it is possible that a child whose first language is not English may be placed with them. Language is an important part of a child's identity and culture. Every effort should be made to preserve a child's linguistic and communication skills, otherwise they may lose a part of their culture and feel a sense of grief or loss.

If you need more information about a child's cultural and linguistic needs contact your supervising social worker and the child's social worker and you will be supported.

## Day Support for Foster Carers

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

In specific circumstances when informal arrangements are not possible funding may be provided for foster carers to access day support from another foster carer for their cared 4 child, when your support network identified in assessment are unable to cover these (reasons should be outlined to your supervising social worker) the circumstances are:

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

Foster carers must discuss day support requirements with the supervising social worker prior to the arrangement taking place. Often other foster carers will be approached to provide day support, this can be arranged through the fostering service and payment is in line with the fostering allowance policy.

## Delegated Authority

It is expected that foster carers will be given the maximum appropriate flexibility to take decisions relating to the children in their care, taking account of the placement plan. When a child is placed with foster carers the parent and/or social worker will agree the level of authority that is to be delegated. Foster carers should be given delegated authority to make day-to-day decisions regarding things such as health, education and leisure, unless there are particular reasons cited as exceptions within the placement plan as to why this is not the case. If you do not receive this you must contact your supervising social worker and inform them on the day of the child being placed or the following day. No cared 4 child should be placed without a placement plan outlining this delegation.

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

## Deprivation of Liberty

The Deprivation of Liberty Safeguards (DoLS) were introduced in 2009 (with strong links to the Mental Capacity Act 2005 and Mental Health Act 2007).

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



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

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

Whether or not the person objects to the arrangements, and even though the arrangements may be considered to be in the person's best interest, are irrelevant.

This has more recently been applied to a child in a foster placement where legal status was sought to enable the DoL to be met via 'inherent jurisdiction'. "... the only application the local authority could lawfully make and ruled that the care received by the child did in fact amount to a deprivation of his liberty." This is a very rare occurrence and in this instance the needs of the child were so significant that the court made this decision.

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

## Dinner Money

School dinner money or the cost of a packed lunch should be paid from the foster care allowance for the cared 4 child. Cared 4 Children and young people placed in foster care are not eligible for free school meals.

Please check with the child's social worker whether the child is receiving free school meals when placed with you. You as the foster care must inform the school that the child is no longer eligible as he/she is in your care.

## Disclosure and Barring Service – DBS check

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

The fostering service must undertake a Disclosure and Barring Service checks on all foster carers prior to approval and then subsequently every three years. DBS checks are undertaken on all household members 18 years and over. Foster carers are encouraged to register on the DBS site when they have received their check to enable the process to be easier next time a check is due.

Although rare, it is important to note that should an allegation against a foster carer be proven or remain a significant concern the Local Authority have a responsibility to inform the DBS and they will decide if this warrants the concern to be added to the harm list within DBS. This would mean that in an enhanced disclosure this information would be visible.

## Disruption of Placement

Unfortunately, even in the most experienced foster care placements there can be circumstances which prevent the placement from working and being in the best interests of the cared 4 child or young person. This can lead to a placement breakdown.

Disruption is the word used to describe a placement which ends in an unplanned way or ends outside of the timeframe agreed.

A disruption may occur when Children Social Care have formed the view the placement with you is no longer meeting the cared 4 child's needs, or you decide that you are no longer able to care for the child. The cared 4 child may also 'vote with their feet' and decide to leave the placement.

Whenever possible when it is recognised that a placement may be coming to an end, a plan should be developed to either look at saving the placement (through an additional support plan) or look at moving the child on in a planned and amicable way.

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

It is important that foster carers work with Children's Social Care to move a child on to another placement when this decision has been made. Finding another appropriate placement can take a number of weeks and it is always good practice to ensure a period of introduction is arranged for the cared 4 child to meet the new foster carer and foster family to increase the chances of the new placement being successful.

When placements are disrupted there can be strong feelings about how or why things went wrong. This can be an extremely difficult and upsetting time for all concerned and it can be a frightening time for the cared 4 child. It is important to remain professional and objective to enable lessons to be learned by all involved.

It is not acceptable for a foster carer to demand a child is removed immediately from the placement and in times of difficulty it is a good idea to take some time-out to consider the positive experiences for the carer and the cared 4 child and try with all concerned to work through the difficulties.

Following the disruption of a placement, for any reason, a disruption meeting is called to look at the learning from the situation from all parts of the service to the child that might avoid such disruptions happening in the future. Not sure this is happening at present

## **Drug Abuse**

Drug and alcohol abuse is an increasing problem amongst young people. Young people can be tempted to take or experiment with drugs regardless of their home and social circumstances. Young people from a variety of backgrounds become involved in drug taking.

If foster carers are concerned that a cared 4 child placed with them could be using drugs they must contact the child's social worker and their supervising social worker to discuss these concerns.

It is often difficult to tell if a young person is using drugs, particularly when a cared 4 child/young person only takes them occasionally.

Some possible indicators of drug abuse:

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

Of course, many of these signs can be associated with normal issues of growing up and adolescent behaviour and development.

If a foster carer has any concerns then it is important to speak to the cared 4 child's social worker and your supervising social worker. Further specialist training is available on drug and alcohol miss-use to support foster carers in this area of work. Foster carers may also access to Early Break services for advice and support.

## Eating Problems

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

As the placement progresses you will get to know the cared 4 child more and you will support the child in eating a healthy balanced diet. However you need to be aware that some eating problems are serious and can have a damaging effect on physical and emotional health. The most common of these eating disorders are Anorexia Nervosa, Bulimia and Compulsive Eating Disorder.

If you have any concern about the eating habits of a cared 4 child you should discuss these with the child's social worker and your supervising social worker who will both advise you on any action to take which may be inclusive of a CAMHS consultation.

### Anorexia Nervosa

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

### Bulimia

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

### Compulsive Eating Disorder

People who eat compulsively consume much more food than their bodies need, or use food to comfort or distract them. They may become overweight which can lead to serious medical issues for the future.

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

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

## Education

It has been documented that the educational attainment of Cared 4 Children is well below children who are not in cared 4 /looked after. Some of the significant disadvantage is a result of changes in placement and often changes in school. This lack of consistency is a major factor impacting on poor educational attainment and can have an impact later and into later adult life.

Foster carers have much to do in advocating for the cared 4 children in their family. As a foster carer you will have a vital role to play acting as part of a committed Corporate Parenting team. Carers should be involved and consulted in all aspects of a child's education and should appeal against decisions that are felt not be in the best interests of the child.

Attending school is an important part of everyday life and can provide a point of stability for cared 4 Children who have had their lives disrupted and live apart from their families. It is vital where possible, for the child to remain in their existing school where they have an established network of friends and support. Foster carers will be required to transport the child to and from school and any difficulties should be highlighted at the Placement Planning and Care Planning Meetings.

It is not acceptable for a cared 4 child to be out of education. They should receive priority action by all involved to support their education.

### The Carers Role in Education

Carers play an essential role in supporting children in care with their education. It is crucial that a cared 4 child's educational arrangements are prioritized and discussed with the child's social worker and the supervising social worker prior to placement.

Carers should highlight any difficulties the cared 4 child their care may be experiencing at school or with their education. It is important that the carer maintain good links with the school and the child's social worker in regards to the child's education.

### Carers should be responsible for:

- Recognising the educational strengths and limitations in regards to each cared 4 child
- Keeping school informed of changes and emerging problems
- Helping the child to express their concerns or aspirations and advocating on their behalf
- Encouraging the cared 4 young person to develop their talents and recognize their achievements no matter how small
- Responding quickly to requests from school for discussions or meetings

Carers should ensure attendance at school by:

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

Carers should provide an appropriate learning environment with:

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

Carers should take a positive interest in the cared 4 child's education by:

- Attending parent's evenings
- Supporting school policies on discipline and dress
- Taking an interest in the daily activities of school
- Completing homework diaries etc
- Supporting homework by reading with the cared 4 child, offering advice and making sure the child completes set work
- Supporting school events
- Rewarding achievement no matter how small

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

You will hear PEPs mentioned a lot. PEP's should ensure that every cared 4 child receives access and support to services, they contribute to stability; minimize disruption and broken schooling; signal particular and special needs; establish clear goals and state who is responsible for achieving them, and act as a record of progress and achievement.

The child's social worker is responsible for initiating the PEP but it is very much a joint plan with the designated teacher, foster carer, cared 4 young people and any other person involved in supporting their education. Once initiated these should be held termly.

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

### **Exclusions**

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

Whilst the cared 4 child is excluded the school must:

- Provide appropriate work for them to do at home

- Put in place measures to try and support the child to avoid future exclusions
- Provide carers with the name of a contact person should they wish to discuss or appeal the exclusion
- Be clear about the length of the exclusion and the date and time the cared 4 child should return to school/education.

If the exclusion is permanent the school must:

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

***Valuing and supporting the education of a child in care is one of the most important contributions a carer can make because it is about investing and caring about the child's future and recognising that education is their passport to better chances in life.***

## Emergencies

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

During office hours you should speak to the cared 4 child's social worker and they are unavailable speak to a team manager. If this is not possible speak to the duty social worker. If the area office is closed then you should contact the Emergency Duty Team on **0300 303 8875**

## Enuresis - Nocturnal

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

Displaying annoyance or attempting to punish a cared 4 child will merely add to their distress and may make the issue worse. Rewarding the child for success will work better than punishment for failure, but do not put the child under pressure to 'be good'.

Check if there are any practical barriers, such as the child being afraid to leave their bedroom at night to find the toilet.

If the situation continues the foster carer should discuss with the cared 4 child's social worker or the carers supervising social worker. Persistent bed wetting could be an indication of another problem and a referral to a specialist service may be appropriate.

## Equal Opportunities

Rochdale Borough Council has an Equal Opportunities Policy which will inform practice in the areas of foster care recruitment, child placement and foster carer supervision.

In compliance with Equal Opportunities Policy and diversity issues the Fostering Service and foster carers will need to understand and actively promote of the following:

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

## First Aid

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

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

## Foster Care Agreement (Contract)

When foster carers are approved they are required to enter into a written agreement with the approving Local Authority. The agreement constitutes a statement of responsibilities, requirements and expectations of the partnership between Rochdale Borough Council and the foster carer. The foster carers are expected to comply with the outlined terms contained within the Rochdale foster carer agreement – this agreement is reviewed annually.

The responsibilities of the foster carer are:

To give immediate written notice with full particular to the Fostering Service of:

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

Foster Carers must **not** administer any physical punishment to a cared 4 child. Advice is available from the child's social worker and your supervising social worker to help with alternative strategies.

Foster Carers are expected to:

- To comply with the terms of the cared 4 child's Placement Plan and Care Plan.
- To provide and safeguard the child's welfare and treat him/her as a valued member of your own family
- To notify the social worker immediately of any serious illness or occurrence that affects the cared 4 child/young person placed with you.

## Foster Care Committee/Forum

These are foster carer groups who meet to discuss fostering, current practice and offer support to each other as a group. The Committee then feeds back information to the service to work together to make positive changes to the service provided for cared 4 children in foster care.

These Groups also form part of a consultative group that brings together management, foster carers and related professionals with the intention of discussing policies and resolving issues to improve outcomes for Cared 4 children in Rochdale.

All foster carers are invited and welcome to the Committee and the Forum and dates are planned in advance and will be circulated to foster carers with good notice. Your views on the service and service delivery are welcomed to inform our continuous improvement.

## Fostering Panel

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

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

The Panel role includes making recommendations to the Agency Decision Maker on the approval or rejection of prospective carers. Panel also oversees arrangements for the matching of children in care with long-term foster carers and makes recommendations to the Agency Decision Maker.

Panel has a quality assurance function in which it may consider practice issues which informs service development.

Emergency Panel meetings may be convened between monthly Panel meetings in order to avoid delay for cared 4 children.



## Fostering Service Responsibilities

### Support

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

### Training

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

Some foster care training is mandatory and our annual Foster Care Training Programme covers essential training that must be satisfactorily completed by all approved foster carers. Evidence of Appropriate training for foster carers is a requirement set out in legislation and detailed in the Fostering National Minimum Standards and Regulations.

### Placements

A Placement Plan will be made for each cared 4 child placed with you, this will be inclusive of delegated authority and day to day arrangements required to care for the child placed.

### Complaints

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

### Review of foster carers

Your approval as a foster carer for Rochdale Borough Council will be reviewed yearly and you will have the opportunity to contribute to your review either in writing or face-to-face with an Independent Review officer. Your first review as a newly approved foster carer will be completed within the first year and presented to the Fostering Panel for their consideration. Reviews are subsequently undertaken by the Independent Review Manager with every third review being presented at Fostering Panel.

## Fostering Network

Fostering Network is a charity working in the United Kingdom to promote and improve the quality of the foster care service. Local authorities, foster care associations and voluntary organizations are eligible for membership and individual membership is open to all foster carers, social workers and other interested parties.

Fostering Network provides advice on practical and legal matters, finance and welfare benefits. There is also an insurance scheme covering legal costs that might be incurred by foster carers.

The Fostering Network have an informative website: [www.fostering.net](http://www.fostering.net) and a Helpline: **020 7620 6400**

## Fostering Standards (see Appendix 1 - Summary Outcomes Standards 1-12)

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

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

## Hair Care

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

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

## Health

Fostering services have a duty to promote the physical and mental health and wellbeing of children. In conjunction with the children's social workers, they must make sure that cared 4 children placed with you are registered with a GP and see a dentist regularly, as well as having support including special equipment required for any particular health needs.

Foster carers will receive a summary of any health concerns identified following the cared 4 child's initial medical examination (form C) How the carer will address these needs will be incorporated within the care plan – the carer will contribute to this plan. This planning is important to ensure the carer can provide appropriate care. This information should be provided by the child's social worker.

It is important that as a foster carer all medication administered to a cared for child is in accordance to the prescription and a record is made each time the medication is given.. Foster carers should record administering prescribed and non-prescribed medication. A fostering service also has training in general health and hygiene issues and first aid

When a cared 4 child is placed the social worker must make sure that the foster carer is given appropriate authorisation via the Placement Plan to administer prescribed and non-prescribed medication and to consent to other medical and preventative treatment as written in the care and placement plans.

Foster carers should encourage children to lead healthy lifestyles and to take part in positive activities which contribute to physical and mental health.

## Holidays in the UK

It is an expectation that Cared 4 Children will experience holidays and outings whilst in foster care. A Cared 4 Child should be treated as a member of the foster family and be included in family holidays. To support this holiday allowance is provided.

In some circumstances permission is needed before a Cared 4 Child can be taken away from the foster home for periods of time. Therefore, before foster carers make any holiday or trip arrangements they should contact the child's social worker to discuss their plans.

Children should **not** be taken out of school in term time for holidays.

## Holidays Abroad

If foster carers are considering a holiday abroad with a Cared 4 Child, the carer must give the child's social worker plenty of notice of their plans. The particular legal status of a cared 4 Child will need to be considered by the social worker and permission may need to be sought from the parents or from the Court which can take some considerable time. Obtaining a passport can also be a lengthy process so it is important to discuss your plans in good time so that the child's social worker can embark on making all the necessary arrangements to allow the child to leave the UK.

Children's Social Care will pay the cost of the child's passport. A letter of delegated responsibility will also be needed when taking a child in care outside of the UK.

Do not be put off by this list of apparent difficulties. Many carers and the children placed with them have wonderful holidays abroad, but like most holidays make sure you make the arrangements in plenty of time.

Children should **not** be taken out of school in term time for holidays.

## Immunisation

Children placed in foster care must not be given inoculations that have not been discussed within care planning or excluded within the Delegated Authority. The Child social worker must always be informed.

## Information and Communication Technology

Computer, the internet and mobile phones are highly attractive to young people. They are essential for keeping in touch with friends, for obtaining information and for fun. Communication technology now forms a normal part of a young person's everyday life.

Foster carers have an important role to play in helping and encouraging young people to use communication technology in the safest way. Foster carers do not require an extensive knowledge of communication technology to be able to help. Everyday parenting skills demonstrated by sharing an active interest, supervision and developing the young person's ability to keep safe can be very useful.

Rochdale Borough Council encourages foster carers to support and assist children in developing skills in communication technology whilst taking sensible precautions to protect them from potential harm and exploitation in the rapidly changing field of technology. E-safety training is available on the foster carers training programme

### Dangers of Communication via Technology

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

### Safety Measures and Boundaries

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

### Insurance

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

### Leaving Care

When children reach the age of 18 years the key responsibility for their care planning is transferred to the Leaving Care Service. They will work in conjunction with the Cared 4 Children's Team in providing support to young people who may be 'staying put' or in some circumstances in moving to independence in line with the cared 4 young person's Pathway Plan.

### Preparing For Independence

In Rochdale we advocate the principles of the preparing cared 4 young people for adult Life in place to support young people in living independently and fulfilling expectations.

Objectives:

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

Young people aged 16-21 years of age who are cared 4 or eligible for leaving care services and:

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

Foster carers are offered support and training to complement their role in supporting the Preparing for Independence for cared for young people; this will be introduced when the child is 13 years of age. Foster Carers are encouraged to supporting young people up to the age of 21. Ask your supervising social worker about 'staying put' arrangements.

## Leisure Activity

It is important for cared 4 children to have access to a wide range of leisure activities, which helps them to enjoy their interests and develop self-confidence. Foster carers should encourage cared 4 children to participate in activities in the same way that any reasonable parent would.

Foster carers must be aware of the authority that they have to make decisions about activities, leisure interests and social events, and these must be included in arrangements for delegated authority in the placement plan.

## Life Work

It is important that cared 4 children and young people have a good understanding of their background and foster carers will help this process by engaging in the completion of Life Story Work and Life Books. Life work attempts to give back some of the past to children separated from their family of origin. It involves gathering together information and memories about the child or young person's life. Doing the work is what is important rather than the end product, but having something tangible can help preserve memories. A support worker specifically trained in working with children in regard to life work will provide support to the child and the foster carer in this sensitive and complex area of work

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

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

Life Work is very important to the child and will help them in childhood and in later life gain some understanding of their identity and background and help them understand and recall their life in care.

As the child's carer it is essential that you keep items for the child that can later be used for life story work, such as mementos of special occasions, photographs (including school photos) special clothes or toys.

## Medical Examinations

A child placed in foster care should have a medical examination prior to their first review. The request for the medical examination will be activated by the child's social worker. Cared 4 Children are examined by a Community

Paediatrician so this may not be with the child's or foster carer's GP. Following the request for the examination the foster carer will receive an appointment in writing and the foster carer will be expected to accompany the child at the examination and allay any fears. The outcome of the examination will be sent to the child's social worker who will discuss this with the foster carer and the child where appropriate.

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

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

Foster carers are expected to organise non-emergency medical treatment, including dentists and opticians, with the permission of the person with parental responsibility.

If the child needs emergency treatment then the foster carer should make the necessary arrangements and then inform the child's social worker, their supervising social worker or a social work manager. (see Accidents). If the child requires urgent treatment the attending Doctor will generally treat the child first and then afterwards deal with the issue of consent. It is important that the foster carer has the document with Delegated Authority available at all times.

## Medication Administration

When a child arrives at the foster home for the first time, the foster carer should find out from the child's social worker if the child is taking any medication, what it is, when it is taken, the dosage and if the child suffers from any allergies.

Any medication either prescribed by the child's GP or non-prescribed bought and administered by the foster carer, must be recorded and signed for within the foster care records. This administration of medication will be monitored by your supervising social worker at supervisory visits. This is a legal requirement under fostering regulations.

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

## Matching

Cared 4 Children should be matched with an appropriate foster carer capable of meeting their needs. They should feel welcomed into the foster home, treated and valued as a member of the family, and included in the every-day life of the family. Cared 4 Children should when appropriate leave a placement in a planned and sensitive manner which makes them feel valued.

If there are already cared 4 children placed with the chosen foster carer then the consent of the children's social workers has to be obtained before making the new placement. The purpose of this is to consider if it is suitable for all the children to be placed in the same household, and whether the foster carer will need any additional support to meet all their needs.

A placement should not be proposed unless it can be reasonably expected to meet the child's assessed needs, and the impact on other children has been considered. In an emergency a child can be placed with a foster carer outside of their terms of approval, but for a maximum of 6 days. This is only allowed exceptionally, in unforeseen circumstances. The child must always be moved to a more appropriate placement within six working days.

There may be situation where a match is made for siblings which might require a carer to go 'over numbers' again this is in exceptional circumstance and can only be considered with the Agency Decision Maker's agreement to a fixed period exemption – this usually relates to the requirements of the placement.

## Missing from Care

If a child is missing from care you must contact the child's social worker or their team manager immediately. You will have received the missing from care protocol and must follow this and record each episode under:-

- **Absent:** a person not at a place where they are expected or required to be.
- **Missing from care:** a looked after child who is not at their placement or the place they are expected to be (e.g. school) and their whereabouts is not known. This should be reported to the police as missing and a record of this should be made.
- **Away from placement without authorisation:** a looked after child whose whereabouts is known but who is not at their placement or place they are expected to be and the carer has concerns or the incident has been notified to the local authority or police.

If it is outside of normal office hours you must contact the Emergency Duty Team on **0300 303 8875** and your local Police Station. Be prepared to give a clear description of the child and provide a photograph. You will also need to contact your supervising social worker.

All carers should have a copy of the Pan-Greater Manchester Protocol on Missing Children and Young People protocol. If you do not, please notify your supervising social worker.

## National Minimum Standards for Fostering Services - (see Appendix for summary of standards 1-12)

These standards outline the minimum expectation of foster carers (1-12) and fostering services in conducting their day to day care of cared 4 children and complement the Fostering regulations.

## Ofsted

Ofsted is the organisation responsible for inspecting Local Authorities Children services including their fostering services. Ofsted inspects and evaluates fostering and other services for children in care, against the single assessment framework and evaluation criteria which is inclusive of National Minimum Standards and Fostering Regulations among other legislative requirements.

You can contact Ofsted by:

Email: [enquiries@ofsted.gov.uk](mailto:enquiries@ofsted.gov.uk) By telephone: **0300 123 3153**

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## Parental Responsibility - (PR)

Parental responsibility means all the rights, duties, responsibilities, powers and authority which by law a parent has in relation to his/her child.

Birth mothers automatically have parental responsibility alongside some fathers. In some circumstances other people may acquire parental responsibility.

Birth parents will retain some level of parental responsibility even when their child is Cared 4. Birth parents will only lose their parental responsibility rights when a child is formally and legally adopted.

As a foster carer you do not hold parental responsibility for a child in your care.

## Passports

If you require a passport for a child in your care you must consult the child's social worker. Make sure you raise this issue in plenty of time as there is a process to go through to get the passport for a child in care, and it is likely permission will need to be sought from the parents or the court to enable the child to be taken outside of the UK.

## Placement Plan

Every cared 4 child must have a care plan which includes a placement plan. Placement plans are the key to making sure that everyone concerned is clear about the foster carer's role as part of the team around the individual child. The Plan outlines how the day-to-day parenting tasks will be shared between the carer and the local authority.

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

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

- How the child's day-to-day needs will be met
- Arrangements for health and education
- Arrangements for the social worker to visit
- Contact arrangements, including any decisions to refuse contact



- Arrangements for delegating authority to the foster care
- The name of the child's independent review officer.

## Play and Toys

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

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

Children whose early years have been marked by neglect may be of average intelligence but can arrive at infant school ill-equipped to cope, or unable to pay attention.

The early life experiences of many children in care may have a significant impact upon their ability to concentrate and learn. Their play and interaction with other children may also be affected and they may be withdrawn, unable to share or communicate with other children and adults.

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

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

If you are unsure or concerned about a child's skills in this area or if you feel that child needs some special toys or equipment then contact your supervising social worker who will be able to advise you in this matter.

Rochdale's Fostering Services expects all carers to register at a local Children's Centre for advice and support.

## Pocket Money

Pocket money for the child in care is included in the foster care allowance and is therefore administered by the foster carer. Rochdale Borough Council give guidance on age related pocket money allowance and this is detailed in the Foster Care Allowance Guidance. All cared 4 children are expected to have a savings account (if one does not exist the foster carer should open an account) the foster carer should assist the child in saving regularly – any large amounts of saving should be placed in a child's trust fund.

## Qualifying Determination

This is where the fostering service is considering not to 'approve' a prospective foster carer who has progress beyond stage one to stage two of the assessment (when a brief report is presented to panel) or feels a foster carer is no longer suitable to foster or wishes to vary the foster carers approval status without the foster carers agreement. In the case of receiving a qualifying determination that they don't agree with, prospective and existing foster carers can make representations to the fostering service or they can ask the IRM (Independent Review Mechanism) to review the situation. However, foster carers cannot do both. A qualifying determination is not applicable to the assessment of connected people if the applicants do not agree with the decision in this instance the complaints procedure is to be followed.

## Radicalisation

The Government has defined extremism in the Prevent strategy as:

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

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

It is recognised that the current Government position that Violent Extremism inspired by an Al Qaeda ideology, which advocates a distorted version of Islam, is considered to be the greater threat to the UK by the security services. However, it is recognised that children and young people need protection against the messages of all violent extremism including that linked to a Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and that linked to Animal Rights movements.

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

## Records

Records are kept on every cared 4 child and on every foster family. These records are separate from the records foster carers are asked to keep.

Records – foster carers

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

### Records – the child

All cared 4 children will have a file and a complete set of records which will be kept up to date by the child's social worker.

When a child is placed with a foster carer, the foster care must receive a copy of the following information from the child's social worker:

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

As the placement progresses the foster carer will receive copies of reviews they have attended regarding the cared 4 child. Copies of all these documents must be kept as part of the child's records. The foster carer will also be kept informed of any changes and key decisions which are made.

The child's records must be kept confidential and stored in a lockable box.

### Recording – foster care

It is vital that foster carers keep daily records of the events in the child's life and the household. This will help you provide clear information when you contribute to making plans for the cared 4 child's future. It also may provide useful information for the child in later life. Recording will help assist in considering protection for the child in your care and will safeguard family members from the risk of false allegations. Records could be of use in a Court hearing and may be asked for by Court.

Keep a separate record of each child placed with you.

Rochdale Borough Council provides each foster carer with log sheets for significant events and daily recording which should be completed for each cared 4 child. Your supervising social worker will inspect and sign these records at supervision visits. The child's social worker will also request sight of the records.

The daily record sheets will be retained and may in certain instances be requested by the Court for evidence.

All written information about a child must be returned to Rochdale Borough Council when a child leaves your home. Your supervising social worker will collect your records on the child on a regular basis so that these can be stored on the child's file.

Cared 4 Children and young people and their parents should be made aware that you are keeping records of happenings whilst the child is in your care. This can be explained at the Placement Planning Meeting.

A child may also wish to contribute alongside your record keeping and this should be encouraged where appropriate and after discussions with the social worker.

## When to Record

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

## How to record

- Keep the record simple, legible and clear
- Notes do not have to be lengthy, just the main points
- You should use language with which you are comfortable
- Keep to factual information and do not be judgmental
- Accuracy is important when referring to specific incidents

## What to record

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

Recording is vitally important for the child, the foster carer and the foster family. It is important that you attend Record and report writing Training for foster carers as this will inform and advise you on how to record and the significance of recording in your role as a foster carer.

## Recruitment

Rochdale Borough Council is committed to the continued recruitment of foster carers. The aim of marketing, advertising and recruitment is to draw a good response from potentially suitable applicants who have an interest in fostering cared 4 children.

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

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

## Resignation

In 2013 the guidance surrounding resignation recommends that fostering services advise foster carers considering giving written notice of their resignation, that it automatically takes effect after 28 days even when the notice is withdrawn.

## Retention

Rochdale Borough Council values and are committed to the retention of it's foster carer's and are continually striving to improve services through the valued consultation with carers.

We annually review our allowances; we have an annual award night in recognition of the most recent achievements of our carers; we revised our training programme to accommodate the needs identified by our carers to expand their knowledge. We have considered the needs carers have identified in access to support for emotional wellbeing within our commissioning of services, within the training programme and within workshops.

We value and support a mentoring programme drawn from our more experienced carers for new foster carers.

The fostering service has devised support packages to carers covering different aspects of care that they have encountered and continually reviews ways to involve existing carers involved in the delivery of training from introduction to core training.

In recognition of our carers having completed the core training and refresher training we have negotiated The Qualifications and Credit Framework (QCF) for carers who have completed their TSDS -Training Support and Development Standards) and have been carers for Rochdale for at least 18 months to deliver (QCF) at Level 2 and Level 3

## Religion

It is important that a cared 4 child's religious practices and beliefs are maintained during a period of separation from birth family. Foster carers cannot change a child's religion and should gain an understanding and support the child in his religious practices where appropriate.

Although you may not have strong religious convictions yourself, if religion is part of a cared 4 child's identity and it important you support the child to continue to practice his/her religion as required.

You may have strong religious convictions, whereas the cared 4 child and his family do not, and it would be inappropriate and not acceptable to insist that the foster child practice your religion.

If you are unsure about this aspect of your fostering role, speak to the cared 4 child's social worker. Any religious practice issues should be covered in the placement plan meeting. If you continue to have uncertainties contact your supervising social worker for advice.

## Respite

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

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

## Reviews

A foster carer will be involved in the foster carer review and the cared 4 child's review. All approved foster carers have annual reviews at which their continued approval is considered. During the course of the year your supervising social worker will have undertaken both announced and unannounced supervisory visits in addition to support visits. They will have drawn up a personal development plan (PDP) with you; this will also form part of your review alongside training undertaken; social workers reports and end of placement/child consultation documents. The Review meetings or Panel will then make a recommendation to the Agency Decision Maker based on the review report (which includes your comments)

## Safer Care

One of the most important parts of the work of foster carers is about safeguarding and protecting children in their care. If children are not safe in a foster home, then there is no point in them being placed there.

Some cared 4 children are harmed in foster homes. All forms of abuse occur: physical, sexual, emotional, neglect. Foster carers may abuse children in their care for a number of reasons including; losing their tempers maybe leading to physical or verbal abuse, neglect of a child's basic needs, sexual abuse or exploitation, emotional abuse through lack of skills, knowledge, understanding or respect of the child's issues. There is always a danger that some people will be attracted to fostering because of the opportunities it gives them to sexually abuse vulnerable children.

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

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

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

All Rochdale Borough Council foster carers will produce a Safer Care Policy for their home and family. The purpose of the policy is to ensure that foster carers, household members and visitors to the home know the family rules on how to behave to ensure all children in the home remain safe from harm, and to minimise the risk of false allegations.

Risks can never be eliminated completely and some 'ordinary' things you do at home will need to be done differently when your family starts to foster. This is to make sure that everyone in the home feels comfortable. Some things that are 'normal' to your family may need to change. It is best to avoid difficult situations arising in the first place, wherever possible, and putting some new 'rules' in place can help with this. Safer care must always be at the forefront of foster carers' minds, even at times when boundaries are more relaxed eg, holidays or leisure activities.

Your supervising social worker will assist you in drawing up and adapting your safer care policy to ensure it is appropriate to cover safeguarding and protection of cared 4 children in your care whilst also considering minimizing the possibility of false allegations being made.

## Short Breaks

Some foster carers provide a series of short breaks to help children to remain within their own families. These services are mainly provided for children with disabilities.

If a child is not in care the short break is not a foster placement, and therefore foster carers will need to seek clarification about how any payments they receive are treated for tax or welfare benefit purposes.

When children receive only short breaks their parents retain the main responsibility for planning for them, and therefore some of the standards and regulations do not apply.

## Special Guardianship Order (SGO)

A Special Guardianship Order (SGO) is legal status introduced in the Adoption and Children Act 2000, intending to provide legal permanence for children who cannot grow up in birth families. The concept of Special Guardianship tends to lend itself to children in care but it can equally be of relevance to a non-looked after child who is cared for by relatives.

An SGO gives the special guardian legal parental responsibility for a child which is expected to last until the child reaches 18 years of age. But, unlike Adoption Orders SGOs do not remove parental responsibility from the child's birth parents, although their ability to exercise it is extremely limited.

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

## Stability of Placements for Cared 4 Children

Placement stability is a key part to ensuring that foster care is a positive experience for cared 4 children. Stability of placement helps to ensure that cared 4 children are offered the same opportunities as other children and that they have the individual support necessary to reach their potential. It is from the first foundations of stability and a stable home life that a child can build their ambitions, set their sights high and set out on the road to achievement. Stability is associated with better outcomes and placement instability can be a key barrier to improving educational outcomes.

Stability includes not only the child's placement but other areas of the child's life:

- Stability of placement – besides staying in the same placement, the child in foster care receives reliable support and care from foster carers
- Stability of relationships – the child in care is part of a network of family and social relationships which remain stable
- Stability of community – the child in care remains part of a community or neighbourhood
- Stability of personal identity – the child in care has a sense of knowing who they are, where they belong and what their goals and values are.

Movement within the care system whilst not usually desirable might sometimes be necessary in order to achieve a permanent placement and brighter future for cared 4 children.

### Improving Placement Stability

- The quality of care provided has a crucial effect not just on stability of relationships but also on health, wellbeing and education
- Support and training for foster carers is essential as carers stress and their ability/inability to respond to difficult behaviour can account for a high proportion of placement breakdown and instability for children in care.
- Help for the child's educational outcomes and emotional difficulties can help stabilise a placement.
- Good parenting whether from fostering, adoption, family/friends or residential care is crucial in creating the stability that every child needs to succeed.
- Planned and positive moves of placement can reasonably form part of a child's care plan, however, a continued focus on stable placements is critical in order to achieve better outcomes.

## Substance Misuse

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

Although many young people use drugs only a small minority of them go on to be problem users. Research shows that young people are far more likely to develop a problem with alcohol than with illegal drugs.



Young people will use drugs for different reasons:

- To rebel
- To fit in / peer pressure
- Because they enjoy it
- To relax / chill out
- Curiosity and boredom
- To numb pain (physical and emotional)
- Learnt behaviour / drug use has been normalized

Although the risks are real, most young people who take drugs do so safely and without getting in to trouble. If you talk to a child about drugs you need to approach the subject sensitively as being heavy-handed will often backfire. Giving a child the facts from reliable and credible sources, and telling them in a reasonable manner about the effects and risks of substance misuse, will make them feel empowered and informed rather than chastised.

Risks associated with substance misuse:

- Health - physical, emotional and psychological
- Financial issues
- Social – social isolation, behaviour and personality
- Personal safety

Be sure to talk with the young person about specific drugs, rather than lump them all together. Make the distinctions between the different drugs such as cannabis and heroin. If they see that you have a realistic view of the risks they will be more likely to listen to you – and more importantly to come to you if they have a problem. Training is available to all Foster Carers to provide more information – ask your supervising social worker.

## Support network

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

## Support and Support Groups

Foster carers must receive support and supervision in order to care properly for the children placed in their care.

Rochdale Borough Council fostering service will support placements by providing a range of supports that include:

- One to one support for foster carers
- Emergency duty Team
- Training and guidance for foster carers
- Support groups
- Foster carer day support
- Therapeutic support
- Child and Adolescence Mental Health Services Clinic

- Foster Carer Workshops on relevant topics

### Support Groups

Rochdale Borough Council has a number of support groups and workshop groups to support foster carers in their role:

- Foster Carer Focus Group

This is a support group for foster carers, it is organised by foster carers and meets during the day on a monthly basis. This enables foster carers to receive peer support and share skills and experience.

- Foster Carer Committee

All foster carers are invited and will receive the dates and times of the group meetings, attendance is optional. The committee chaired by a foster carer the group consider the foster care charter and emerging comments/issues regarding the service and consult with the service in respect of these and in relation to service improvement. A member of the fostering service is linked to the group to ensure any issues/comments regarding the service are fed back to the team.

- Children Who Foster Group

Children Who Foster is a support group for the birth children of foster carers. The group is open to all birth children of foster carers between the ages of 6 years and 16 years, and its purpose is to provide opportunities for these children to meet, enjoy activities, have some fun and share their experiences of fostering.

- Family and Friends Group

The group provides support to Family, Friends and Connected People. This group of carers have specific support needs emanating from providing care for a child within their family or for a child who has connection with them. The group meet monthly when the group of carers lives locally.

- Mentors Support Group

This group is made up of established foster carers who have successfully undertaken training to enable them to mentor new carers during their first placement. The mentors provide out of hours support and guidance to newly approved carers. All newly approved carers will be allocated a named mentor who will make contact and can be contacted for support.

- Out of Hours Support to Carers

Out of hours support is provided to foster carers by the Emergency Duty Team or your identified Mentors. Additional support to carers can be planned via the outreach services in incidents where there is an identified support plan in place.

All these groups are to support foster carers in their role in providing care, nurture and safety to cared 4 children in Rochdale. Do discuss the support groups with your supervising social workers and find out which groups will help you develop your knowledge and skills in fostering.

## Termination/Withdrawal of Approval

When people are approved as foster carers their details and information relating to their approval status are kept in the form of a Foster Carer Register.

In certain circumstances it might be necessary for the Fostering Service to initiate processes to request that the carer's approval is ended, for example, if there were concerns about the standard of care being given by the foster carer.

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

Further information about Rochdale Borough Council Fostering Service termination of approval process can be obtained from your supervising social worker.

## Training for Foster Carers

There is a clear framework of training and developments in place in Rochdale Fostering Service. This is used as the basis for assessing foster carers' performance and identifying their training and development needs.

The training needs of individual foster carers are identified by the supervising social worker in consultation with the carer and these are then recorded in the foster carer's personal development plan.

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

Mandatory core training is provided for all foster carers on a rolling programme on an annual basis and elements are reviewed with in the training programme and the fostering allowances documents annually. Foster carers are expected to attend the core training and refresh every 3 years.

The current core training for foster carers is:

- Record and report writing
- Safer care
- First Aid
- Safeguarding
- Diversity
- Managing Behaviour
- E-Safety
- Training Support and Development Standards Foster Carer Portfolio.

In addition to this there is service directed training for specific foster carers to meet the needs of a child placed or to meet the needs of current trends in placement requests or emerging issues raised by carers over the 12 month period.

## TSDS – Training Support and Development Standards

The Training Support and Development Standards (TSD) were developed in order to improve the training and skills of foster carers with the aim to improve the lives and outcomes of children and young people in care.

All foster carers are expected to satisfactorily complete the Standards within 12 months of approval. Family and Friend carers have 18 months to satisfactorily complete the Standards.

The Training Support and Development Standards for foster carers are:

- Standard 1** Understand the principles and values essential for fostering children and young people
- Standard 2** Understand your role as a foster carer
- Standard 3** Understand health and safety and healthy care
- Standard 4** Know how to communicate effectively
- Standard 5** Keep children and young people safe from harm
- Standard 6** Develop yourself

The revised National Minimum Standards 2011 state the requirement to complete the Training, Support and Development Standards (TSDS),

Rochdale Borough Council foster carers should refer to the Foster Carer Training Programme for more information.

A Training program is produced annually for carers including dates of the core training and additional training. Carers should book places on these courses as early as possible to avoid disappointment.

## Glossary

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

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

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

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

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

**Children's services** - part of a local authority that has responsibility for providing services to children and young people, including the provision of foster care.

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

**CIN** - abbreviation used for Child in Need.

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

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

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

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

**Family and friends care** - when a child is living full time with someone who is a family member, friend or was previously known to them. The majority of family and friends care is made up of informal arrangements between parents and relatives, but there are other situations and sometimes legal orders too. Where the child is looked after by a local authority and the family and friends carer is approved as their foster carer, this is known as family and friends foster care.

**Family and friends foster care** - where a child was previously known or 'connected' to their carer and they were approved as a foster carer to look after them, this is known as family and friends foster care. More comprehensive guidance on family and friends foster care in England is given in Family and Friends Care: statutory guidance for local authorities.

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

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

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

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

**Health and Social Care Trust** - A Health and Social Care Trust is the local public authority for your area in Northern Ireland who has a fostering service that places children from that area into foster care.

**IFP** - An IFP (Independent Fostering Provider) is an organisation that places children into foster placements on behalf of the Local Authority. Some are profit making companies while other are charities or not for profit companies.

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

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

**Local Authority** - the local council that has responsibility for children's services, including provision for looked after children.

**Looked after child (Rochdale documentation refers to a Cared 4 Child)** - anyone under age 18 who is looked after by the local authority, either because they are on a care order or they are accommodated through a voluntary agreement with their parents.

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

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

**Parental Responsibility** – this refers to all the rights, duties, responsibilities and powers which the law gives a parent in relation to their child. Mothers automatically have parental responsibility as do fathers if married to the mother

when or after the child was born or by other legal agreements. Parental responsibility can also be given by the courts to others under orders such as special guardianship or adoption.

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

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

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

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

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

**Regulations** - these outline the legal requirements for foster care and all fostering services must comply with them these are linked to The Care Planning, Placement and Case Review (England) Regulations 2010; The Care Planning, Placement and Case Review (England) and fostering (Miscellaneous Amendments) Regulations 2013; Fostering Amends 2014 and the Children and Families Act 2014 . Failure to do so is a breach of the law. You can read all of these on the Government Legislation website.

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

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

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

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

**Statement of purpose** – required by law under the Fostering Services (England) Regulations 2011, the statement of purpose must include the aims and objectives of the fostering service as well as the services and facilities that they offer. The statement of purpose has to be placed on the fostering service’s website if they have one.

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

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



## Appendix 1 - NMS 2011 – Fostering Service, Standards 1-12

<p><b>Standard 1 – <i>The child’s wishes and feelings and the views of those significant to them</i></b></p> <p><b>Outcome:</b> Children know that their views, wishes and feelings are taken into account in all aspects of their care; are helped to understand why it may not be possible to act upon their wishes in all cases; and know how to obtain support and make a complaint.</p> <p>The views of others with an important relationship to the child are gathered and taken into account.</p>
<p><b>Standard 2 - <i>Promoting a positive identity, potential and valuing diversity through individualised care.</i></b></p> <p><b>Outcome:</b> Children have a positive self-view, emotional resilience and knowledge and understanding of their background.</p>
<p><b>Standard 3 - <i>Promoting positive behaviour and relationships</i></b></p> <p><b>Outcome:</b> Children enjoy sound relationships with their foster family, interact positively with others and behave appropriately</p>
<p><b>Standard 4 - <i>Safeguarding Children</i></b></p> <p><b>Outcome:</b> Children feel safe and are safe. Children understand how to protect themselves and are protected from significant harm, including neglect, abuse, and accident.</p>
<p><b>Standard 5 - <i>Children Missing from Care</i></b></p> <p><b>Outcome:</b> Children rarely go missing and if they do, they return quickly.</p> <p>Children who do go missing are protected as far as possible and responded to positively on their return.</p>
<p><b>Standard 6 - <i>Promoting good health and wellbeing</i></b></p> <p><b>Outcome:</b> Children live in a healthy environment where their physical, emotional and psychological health is promoted and where they are able to access the services to meet their health needs.</p>
<p><b>Standard 7 - <i>Leisure activities</i></b></p> <p><b>Outcome:</b> Children are able to enjoy their interests, develop confidence in their skills and are supported and encouraged to engage in leisure activities.</p> <p>Children are able to make a positive contribution to the foster home and their wider community.</p>

**Standard 8 - Promoting educational attainment****Outcome:**

The education and achievement of children is actively promoted as valuable in itself and as part of their preparation for adulthood. Children are supported to achieve their educational potential.

**Standard 9 - Promoting and supporting contact****Outcome:**

Children have, where appropriate, constructive contact with their parents, grandparents, siblings, half-siblings, wider family, friends and other people who play a significant role in their lives.

**Standard 10 - Providing a suitable physical environment for the foster child****Outcome:**

Children live in foster homes which provide adequate space, to a suitable standard. The child enjoys access to a range of activities which promote his or her development.

**Standard 11 - Preparation for a placement****Outcome:**

Children are welcomed into the foster home and leave the foster home in a planned and sensitive manner which makes them feel loved and valued.

Children feel part of the family. They are not treated differently to the foster carer's own children living in the household. The child's needs are met and they benefit from a stable placement.

**Standard 12 - Promoting independence and moves to adulthood and leaving care****Outcome:**

Children are prepared for, and supported into, adulthood so that they can reach their potential and achieve economic wellbeing.

## Useful contact numbers

Service	Telephone No.	Email address
Rochdale Borough Council Fostering Services <sup>1</sup>	0300 303 1000	<a href="mailto:fostering@rochdale.gov.uk">fostering@rochdale.gov.uk</a>
Muliti-Agency Screening Service and First Response Team	0300 303 0440	<a href="mailto:mass@rochdale.gov.uk">mass@rochdale.gov.uk</a>  <a href="mailto:mass@rochdale.gcsx.gov.uk">mass@rochdale.gcsx.gov.uk</a>
Cared 4 Children	0300 303 0440	<a href="mailto:CfCBusiness.Support@Rochdale.gov.uk">CfCBusiness.Support@Rochdale.gov.uk</a>  <a href="mailto:csc caredforchildren@rochdale.gcsx.gov.uk">csc caredforchildren@rochdale.gcsx.gov.uk</a>
Cared 4 Children specialist nurse	0161 716 2835	
Emergency Duty Service	0161 716 1235 0300 303 8875	<a href="mailto:Edt.Emergency@rochdale.gov.uk">Edt.Emergency@rochdale.gov.uk</a>

<sup>1</sup> You will have the direct number of your Supervising Social Worker and their direct email. All the team are there to help and offer support whatever the situation or query do not hesitate to contact the team or duty work in the absence of your named worker.