

## **DORSET COUNCIL FOSTERING SERVICE**

### **GUIDANCE FOR BEDROOM-SHARING ASSESSMENTS**

#### **ROOM SHARE ASSESSMENT – FOSTER PLACEMENTS**

#### **Guidance**

Dorset Fostering Service aims to accommodate all our fostered children safely and in comfort, helping to ensure that they have sufficient privacy, personal space and room for play or study.

Dorset Fostering Service follows the Fostering Services National Minimum Standards (2011). Standard 10.6 states that:

In the foster home, each child over the age of three should have their own bedroom. If this is not possible, the sharing of a bedroom is agreed by each child's responsible authority and each child has their own area within the bedroom. Before seeking agreement for the sharing of a bedroom, the fostering service provider takes into account any potential for bullying, any history of abuse or abusive behaviour, the wishes of the children concerned and all other pertinent facts. The decision making process and outcome of the assessment are recorded in writing where bedroom sharing is agreed.

This additional local guidance sets out how Dorset Fostering Service will ensure this standard is implemented.

Babies / infants may only share the foster carer's room if they are up to 24 months of age.

The Room Share Assessment form (see appendix) should be completed and approved at the Viability Stage to ensure any shared arrangements are appropriate.

---

#### **For room sharing, the following factors need to be considered as a minimum:**

- The size of the room
- The intended duration of the placement i.e., holiday/respite or longer term
- The chronological ages and genders of the children
- The developmental stages of the children
- The known quality of the existing relationship between the children
- Background information provided about the children

### **Background information minimum requirements:**

If the background information indicates that any of the children intended for a room share arrangement have experienced any of the following, then this would indicate likely non approval:

- sexual abuse
- involvement in any sexualised play or predatory behaviour
- any bedwetting and / or soiling
- have any significant behavioural issues
- where bullying has been identified as a concern

### **Personal Space and Privacy:**

Single or 'Box' rooms are only suitable for room share even by siblings for short term stays - possibly only days or weeks (e.g., for holiday cover / respite)

### **Health & Safety & Comfort:**

Bunk beds are more suitable for primary school age children but may not appropriate for the under 6's or for teenagers. Children under the age of 6 should not have access to the top bunk.

---

### **Process for room share assessment and approval:**

- The child's Social Worker is responsible for providing a good quality referral and risk assessment
- Room share assessments are normally undertaken by the Childs Social Worker and Supervising Social Worker (Fostering) in consultation with the children's Social Worker/s and Foster Carer
- If the carers are already approved, the Supervising Social Worker and the Foster Carer need to discuss any presenting issues and make any necessary revision to the foster carer's Safe Care Plan in the event of an agreed room share arrangement
- The Supervising Social Worker must present the completed assessment to the Service Manager of either the Fostering Team or placing Social Work team, for approval
- Copies of the approved assessment should be placed on the foster carer file and subsequently reviewed by the Supervising Social Worker with the foster carer
- A copy of the approved assessment should also be added to the child's file

---

## ROOM SHARE ASSESSMENT FORM

### 1. Name(s), Ages, Gender of the children:

Name:	d.o.b:	Gender: M [ ] F [ ]
Name:	d.o.b:	Gender: M [ ] F [ ]
Name:	d.o.b:	Gender: M [ ] F [ ]
Name:	d.o.b:	Gender: M [ ] F [ ]

### 2. Name(s) / Address of Foster Carer for intended room share:

### 3. Has the Social Worker provided the following background information?

Placement Referral                      Yes [ ] No [ ]

Risk Assessment                      Yes [ ] No [ ]

### 4. Please detail below why this proposed room share arrangement is appropriate including comments in relation to the risk assessment provided:

**5. Names and Designation of staff involved in this assessment** (e.g., Supervising Social Worker / Children's Social Worker)

Name:	Designation:
Name:	Designation:
Name:	Designation:
Name:	Designation:

**6. Approval of Service Manager**

Name: Designation:

Signed: Date: