Foster Carers

Handbook

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Section 1

Introduction

and

Welcome

Welcome to the Fostering Service

You are now an approved foster carer for Argyll and Bute Council and the Family Placement team are here to support you in providing a valuable resource for children who cannot remain with their own family. Fostering really makes a difference to the lives of vulnerable children and we are glad that you are here to help improve the life chances of Argyll and Bute's Looked After children.

The Foster Carer Handbook provides written information for you on all aspects of fostering to help you in your day to day work, as part of the team caring for Looked After children.

Aims of the Handbook

The aims of the handbook are to:

- Inform the development of safe, high quality foster care in accordance with the principles and standards expected throughout Scotland.
- Assist foster carers in the foster care task so that they provide the best possible care to children and young people placed in their care.

Fostering is a regulated role and your work and the work of Argyll and Bute Council as a fostering agency is regulated and inspected against National Health and Care Standards. These standards are referred to in more detail further in the handbook for your information.

The most important contact for you as a foster carer is your supervising social worker. He or she is there to provide you with support throughout all your placements. Your supervising social worker will also talk with you about what we expect from foster carers, and how we can help you to develop your skills, knowledge and experience in fostering.

Each child or young person placed with you will also have their own social worker from one of the children and families area teams who will keep in contact and be responsible for plans for the child's future and their day to day care.

You will probably find as a new foster carer, that you have to learn a lot of different things very quickly. We recognise the very important job done by our foster carers and will do everything we can to assist you in caring for children placed with you. You will be working as part of a team, to ensure that children receive the best possible care.

A glossary of terms can be found here:
https://www.argyll-bute.gov.uk/sites/default/files/glossary.pdf

How the Handbook is organised

The handbook is an electronic resource that can be updated on a regular basis as and when information changes or new information becomes available. If you have suggestions for improving the handbook please speak with your supervising social worker, as we want it to meet your needs and welcome your feedback.

You will notice that section two of the handbook is a list of important numbers which you may need in emergencies and at other times.

Section 2 Important Contact Details

IMPORTANT CONTACT DETAILS

Family Placement Team

The Family Placement Team is managed through Social Work Services and comprises the Head of Service; Patricia Renfrew, Service Manager; Mark Lines, Practice Lead; Lorraine Prentice and the five supervising social workers, as well as an administrative assistant, Shannon McCallum. In order to contact your supervising social worker it is a good idea to make sure that you have a note of their individual telephone number and email address. This information is located in your foster carer agreement.

If you need to contact the fostering service and your worker is not available the team operates a duty system available during office hours. Contact the duty worker by calling the main social work number and ask to be put through to the Family Placement duty worker.

The Family Placement Team Duty Contact Details

Family Placement Duty Service	**Tel:** 01546 605-517
Family Placement Duty Worker	**Email:** fpduty@argyll-bute.gov.uk

Social Work Office Contacts

Argyll and Bute Council has one main number for Social Work Services
Tel: **01546 605-517**.

It is a good idea to make sure that you have the direct extension number, email addresses and the work mobiles of social work staff you are working with. If you don't have direct contact details phone the main social work number and a customer service operator will try and connect you to the staff member you are looking for.

Argyll and Bute Council website is a source of information about social work and local resources. Please check out www.argyll-bute.gov.uk

In An Emergency

Contacting the Social Work Service during Office Hours (9.00am - 5.00pm)

Tel: 01546 605-517

Ask to speak to the child's allocated social worker at the relevant office, or if unavailable, the duty officer or practice lead of the team, and *SAY IT IS URGENT!*

Contacting the Social Work Service *Outwith* Office Hours

Outside normal office hours; in the evenings, weekends and public holidays, the social work service operates an emergency standby service called SWES (Social Work Emergency Service). When you contact this service, confirm that you are a foster carer and explain your problem clearly. You will be put in contact with the SWES social worker covering your area.

Social Work Emergency Service (SWES):

Tel: 01631 566-491 / 01631 569-712

Police Scotland

Police Scotland operates a single non-emergency line.

Tel: 101

Of course 999 is always available for emergencies.

When a Child or Young Person is Missing

(Including being late in returning home):

If a child in your care goes missing, you should report this to the police and also contact the child's social worker or, out with office hours, the emergency out of hours service (SWES).

• It is useful to have the protocol for a missing child at hand as this will help you be clear about the information you need to pass on. A copy of this is available here:

https://www.argyll-bute.gov.uk/sites/default/files/children_missing_from_local_authority_care_protocol_0.pdf

• It is also important that you keep an up-to-date photograph of the child available.

• If uncertain about any of these actions seek clarification from your supervising social worker.

Out of Hours Medical Treatment

The options are the same as available to any child i.e.

- If it is an emergency dial **999**
- For medical advice or to request an emergency out of hours visit or appointment contact NHS 24 on 111.
- Contact your surgery and ask for an emergency appointment.
- Go to accident and emergency at your nearest hospital.
- Go to a minor injuries clinic at your nearest hospital.

1. Tell medical staff that the child is fostered by you on behalf of Argyll & Bute Council, then

2. During office hours notify the child's social worker, practice lead or duty worker, or if the incident occurs outside office hours, please also notify the out of hours social work emergency service (SWES) on **01631 566-491 / 01631 569-712**

Other Important Numbers and Contact details

The Fostering Network (TFN)

The Fostering Network is the UK's leading charity for anyone with a personal or professional interest in foster care. To make sure you have access to information about fostering and independent advice and support, should you need it, Argyll and Bute Council pay for individual memberships for all its foster carers.

The Fostering Network Scotland
Ingram House
2nd floor
227 Ingram Street
Glasgow G1 1DA

Fosterline Scotland
Tel: 0141 204 1400
www.fostering.net

CoramBAAF

CoramBAAF is an independent membership organisation for professionals, foster carers and adopters, and anyone else working with or looking after children in or from care, or adults who have been affected by adoption. It is a successor organisation to the British Association for Adoption and Fostering (BAAF).

CoramBAAF
Coram Campus
41 Brunswick Square
London
WC1N 1AZ

Tel: 020 7520 0300

www.corambaaf.org.uk

Who Cares (Scotland)?

Who Cares is an advocacy service supporting all of Scotland's children and young people in care. They provide a voice by working directly with young people, listening to what they say and speaking out with them. They promote and protect their rights and involve them in decision-making. At the heart of their work is enabling young people in care to enjoy a positive life now and reach their full potential in the future.

Main Office
Who Cares? Scotland
5 Oswald Street
Tel: 0141 226-4441
www.whocaresscotland.org
Email: **enquiries@whocaresscotland.org**

Local Argyll & Bute Who Cares? Contacts are:

Heather Nailard **Tel:** 07769 325 000
Email: **hnailard@whocaresscotland.org**

Pamela Hynes **Tel:** 07739 078 244
Email: **phynes@whocaresscotland.org**

Argyll and Bute Child Protection Committee

The Argyll and Bute Child Protection Committee (ABCPC) brings together all the organisations involved in protecting children in the area. It is committed to ensuring that Argyll & Bute's children grow up feeling safe and protected from harm. They provide the highest quality professional services to children and young people and strive for effective inter-agency working practices.

Susan Cairns Lead Officer Child Protection

Community Services
Kilmory
Lochgilphead
PA31 8RT
Tel: 01546 604-042
Email: Susan.Cairns@argyll-bute.gov.uk

Scottish Child Care Law Centre

The only Law Centre in Scotland that works exclusively for children and young people. They provide services throughout the whole of Scotland. They help children and young people, families, carers and professionals working with children by providing free expert legal advice and information through their advice line, email and text services.

Scottish Child Law Centre
54 East Crosscauseway
Edinburgh
EH8 9HD

Text 'sclc' and your query to 80800
www.sclc.org.uk

Email: enquiries@sclc.org.uk

Advice Line Tel: 0131 667-6333
Under 18's Freephone Tel: 0800 328 897

Scottish Children's Reporter Administration (SCRA).

The job of the SCRA is to facilitate the work of the Children's Hearings.

SCRA
Kilbrandon House
Manse Brae
Lochgilphead
PA31 8QX

Tel: 0300 200 2217
www.scra.gov.uk

Care Inspectorate

The Care Inspectorate, whose formal name is Social Care and Social Work Improvement Scotland (SCSWIS) is the independent scrutiny and improvement body for care and children's services. They have a significant part to play in improving services for adults and children across Scotland. They regulate and inspect care services including foster care services, and carry out social work and child protection inspections.

Compass House
11 Riverside Drive
Dundee
DD1 4NY
Email: enquiries@careinspectorate.com

Tel: 0845 600-9527
www.careinspectorate.com

Tax Offices

The HMRC website contains information and advice concerning tax, national insurance, benefits and self-employment. Please have your National Insurance number with you when you phone.

Tax - 0845 300 0627
National Insurance - 0845 302 1479

www.hmrc.gov.uk/

Hands on Scotland

Hands on Scotland is an online resource for anybody working with or caring for children and young people. The website provides practical information and techniques on how to respond helpfully to children and young people's troubling behaviour and offers advice and activities on how to help them flourish.

www.handsonscotland.co.uk/

Children 1st

They help Scotland's families to put children first, with practical advice and with support in difficult times. They support survivors of abuse, neglect, and other traumatic events in childhood, aiding recovery.

Children 1st
20 Highbank Park
Lochgilphead
PA31 8NL

Tel: 01546 602-504
www.children1st.org.uk

Section 3 The Fostering Service

Policy Statement

Argyll and Bute Council Fostering Service

Vision

Argyll and Bute Council's Fostering Service (Family Placement Team) recognises that substitute family care must be the best alternative care for children and young people who become looked after away from their birth families. We believe that high quality foster care is a care service which protects children and young people, promotes their rights and maximises their life chances; enabling each child or young person to fulfil their individual potential and ultimately find success and happiness.

Aims

We are committed to achieving our vision by providing fostering services and foster care that conform to both the National Care Standards for Foster Care and Family Placement Services; Scotland 2011 and the new Health and Social Care Standards Scotland, 2018. Our fostering service promotes the development of children and young people in line with the National Strategy; 'Getting It Right For Every Child' (GIRFEC) in Kinship and Foster Care. We promote the wellbeing of every child by ensuring that they are Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included (known as the SHANARRI indicators). GIRFEC is the bedrock of all children's services in Scotland. The approach helps everyone working for the child to focus on what makes a positive difference for children and young people and how they can act to deliver these improvements.

The Fostering Service sits within the Social Work Service and contributes to implementing the main duties of Argyll & Bute Council towards children, young people and families, which are to:

- Protect children and young people and uphold their rights.
- Prevent child abuse.
- Make enquiries when a child may be in need of compulsory measures of care.

- Provide and promote a range of service, which help families adequately meet the needs of and sustain care of their children at home.
- Provide high quality alternatives to care at home – such as foster care – when this is necessary.
- Supervise and safeguard children and young people in circumstances defined by regulation and legislation.
- Provide security for children and young people either through being settled with birth relatives or in placement within a permanent substitute family or other suitable placement, or by helping them towards independent living.

To enable us to meet these goals, we:

1. Recruit foster carers on the basis of the needs of the social work service and the children it looks after. We do not discriminate against applicants on the grounds of gender, religion, ethnic origin, cultural and linguistic background, nationality, disability or sexual orientation.

2. Treat our foster carers with respect; recognising that they are a core member of the team around the child with an important contribution to make in planning and decision-making about the child. We also recognise the contribution of foster carers' own children and their extended family in supporting the foster carer role.

3. Recruit, assess, train and supervise our foster carers to understand their role and develop their skills, to promote good outcomes for our children. We expect our foster carers to be open and committed to learning and ongoing development.

4. Work with a range of professionals to ensure that children and young people and their foster carers are provided with the services and support required to meet their needs. This entails partnership working primarily with colleagues in Area Teams, Education, Health, the Scottish Children's Reporter Administration and our partners in the voluntary sector.

5. Listen to children and young people and take their views into consideration. We

believe that foster carers have a particular role in helping children and young people express and have their views heard. This includes encouraging the child/young person to make use of the children's advocacy service.

6. Strive to ensure that each child or young person is treated as an individual and we address his or her needs in terms of gender, religion, ethnic origin, language, culture, disability and sexuality.

7. Recognise and support the role of the Care Inspectorate in inspecting our service to help us develop and strengthen the service we offer to children and young people in foster care and our foster carers.

The Legislative Framework for Fostering Services

The National Practice Model, GIRFEC supports a whole range of policy and legislation designed to improve outcomes for children and young people. These responsibilities are undertaken where possible and appropriate, in partnership with birth families and those who hold parental rights and responsibilities for each child and young person. Social Services often have a lead, but not sole responsibility for delivering services to children and young people; other services such as Health, Education and Housing, together with other agencies, also hold responsibilities for children and young people.

The Children (Scotland) Act, 1995 is one of the central pieces of legislation for the Council's responsibilities to children and young people in need and who are looked after – at home and away from home. In addition, the Children's Hearings (Scotland) Act, 2011, The Adoption and Children Act (Scotland), 2007 and the Children and Young People (Scotland) Act, 2014 are significant pieces of legislation affecting children, young people and their families since the Children (Scotland) Act, 1995.

The Looked After Children (Scotland) Regulations 2009 and the associated Guidance, published by the Scottish Government in March 2011, gives an explicit policy, procedural and practice framework in the implementation of child welfare legislation.

We appreciate that you might want to take a close look at some of the legislation and guidance; therefore, further details can be accessed by clicking on:

www.legislation.gov.uk/ukpga/1995/36/contents
www.legislation.gov.uk/asp/2007/4/contents
www.legislation.gov.uk/asp/2011/1/contents
www.opsi.gov.uk/legislation/scotland/ssi2009/ssi_20090210_en_1
www.gov.scot/publications/2011/03/10110037/0

For further information and advice for foster carers the Fostering Network publishes an information sheet explaining the main implications of legislation relating to children. This can be found at:
www.fostering.net/scotland/legislation

Inspection of Fostering Services and National Care Standards

The Care Inspectorate is the official body responsible for inspecting standards of care in Scotland. Their formal name is Social Care and Social Work Improvement Scotland (SCSWIS) and is set out in legislation so will not change. The Care Inspectorate was formed under the Public Services Reform (Scotland) Act, 2010, and it is within this Act that their functions, powers and duties are defined. The Care Inspectorate, which has taken over the functions of the Care Commission, the Social Work Inspection Agency (SWIA) and the child protection unit of Her Majesty Inspectorate for Education (HMIE), is the independent regulator of social care and social work services across Scotland.

Details of the Care Inspectorate and of how you can contact them, e.g., to make a complaint if necessary, can be found in the Contact section of the handbook on page 18.

The Family Placement Team Fostering Service, as a registered service is subject to annual inspections. All aspects of the service are scrutinised, for example, services provided for children by social workers and carers, and services provided to carers. The fostering agency is required to produce its own self-evaluation of the services it provides and this is used as a basis for the inspection. The self-evaluation should

involve consultations with service-users and other stakeholders. The inspection itself may involve discussions with young people, birth families, workers and carers either individually or through focus groups. Inspection teams will read individual case files, electronic records and other documents such as policies and procedures. When the inspection has been completed, a report is produced which is made publicly available as a Care Service Inspection report and can be accessed online at the website of the Care Inspectorate: www.careinspectorate.com

Individual foster carers are not registered and inspected by the Care Inspectorate, which has the task of inspecting fostering services rather than individuals. This means that inspectors will look at the way the Council recruits, selects, approves, reviews, trains, supports and supervises foster carers; they will look at the way children are matched with foster carers, and at the support and supervision of placements.

The Scottish Government in May 2011 published National Care Standards for Foster Care and Family Placement Services. Furthermore, in June 2017, the Scottish Government published new Health and Social Care Standards, which were implemented by services in April 2018. The Health and Social Care Standards set out what we should expect when using health, social care or social work services in Scotland. They seek to provide better outcomes for everyone and to ensure that individuals are treated with respect and dignity and that the basic human rights we are all entitled to are upheld. All fostering services must comply with these sets of national care standards. They have been developed to make sure that the services they provide are of a high quality. Further details on both sets of standards are provided below.

The National Care Standards for Foster Care and Family Placement Services 2011

These standards cover the following activities:

- Recruiting, selecting, approving, training and supporting foster carers.
- Matching children and young people with foster carers.
- Supporting and Monitoring foster carers.

- The work of agency fostering panels and other approval panels.

The framework of national care standards is as follows:

- Services for children (standards 1 to 4) – these standards are for children and young people who go to stay with foster carers.
- Services for foster carers (standards 5 to 12) – these standards are for people who are or who wish to become foster carers. They also set out how agencies should work to recruit families for children.
- Management and staffing (standards 13) – the standards in this section are addressed to everyone who uses the foster care service. They reflect the importance of knowing that the people who are responsible for the agency have the necessary experience, skills and training.

The standards are underpinned and based on a set of principles. The principles are not care standards but reflect recognised rights. They reflect the strong agreement that your experience of services is very important and should be positive. The principles are dignity, privacy, choice, safety, realising potential and equality and diversity.

Principles

Dignity – the right to:

- Be treated with dignity and respect at all times.
- Enjoy a full range of social relationships.

Privacy – the right to:

- Have your privacy and property respected.
- Be free from unnecessary intrusion.

Choice – the right to:

- Make informed choices, while recognising the rights of other people to do the same.
- Know the range of choices.

Safety – the right to:

- Feel safe and secure in all aspects of life, including health and wellbeing.

- Enjoy safety but not be over protected.
- Be free from exploitation and abuse.

Realising Potential – the right to have the opportunity to:

- Achieve all you can.
- Make full use of the resources that are available to you.
- Make the most of your life.

Equality and Diversity – the right to:

- Live an independent life, rich in purpose, meaning and personal fulfilment.
- Be valued for your ethnic background, language, culture and faith.
- Be treated equally and be cared for in an environment which is free from bullying, harassment and discrimination.
- Be able to complain effectively without fear of victimisation.

We have spent time detailing the National Care Standards for fostering given their fundamental importance. These standards are also referred to in other chapters to illustrate how they fit within the service. We would encourage everyone involved to familiarise themselves fully with these standards. Much of this information must be attributed to the Scottish Government's website and the full standards are available here:
https://www2.gov.scot/Publications/2011/05/16141925/8

The National Health and Social Care Standards 2018

In The National Health and Social Care Standards, 'standards' is used as a collective term to describe both the headline outcomes, and the descriptive statements which set out the standard of care a person can expect. The headline outcomes are:

1: I experience high quality care and support that is right for me.

2: I am fully involved in all decisions about my care and support.

3: I have confidence in the people who support and care for me.

4: I have confidence in the organisation providing my care and support.

5: I experience a high quality environment if the organisation provides the premises.

The descriptive statements, set out after each headline outcome, explain what achieving the outcome looks like in practice. Not every descriptor will apply to every service.

The Standards are underpinned by five principles: dignity and respect, compassion, be included, responsive care, and support and wellbeing. The principles themselves are not standards or outcomes but rather reflect the way that everyone should expect to be treated.

Principles

Dignity and respect

- My human rights are respected and promoted.
- I am respected and treated with dignity as an individual.
- I am treated fairly and do not experience discrimination.
- My privacy is respected.

Compassion

- I experience warm, compassionate and nurturing care and support.
- My care is provided by people who understand and are sensitive to my needs and my wishes.

Be included

- I receive the right information, at the right time and in a way that I can understand.
- I am supported to make informed choices, so that I can control my care and support.
- I am included in wider decisions about the way the service is provided, and my suggestions, feedback and concerns are considered.

- I am supported to participate fully and actively in my community.

Responsive care and support

- My health and social care needs are assessed and reviewed to ensure I receive the right support and care at the right time.
- My care and support adapts when my needs, choices and decisions change.
- I experience consistency in who provides my care and support and in how it is provided.
- If I make a complaint it is acted on.

Wellbeing

- I am asked about my lifestyle preferences and aspirations and I am supported to achieve these.
- I am encouraged and helped to achieve my full potential.
- I am supported to make informed choices, even if this means I might be taking personal risks.
- I feel safe and I am protected from neglect, abuse or avoidable harm.

The full standards can be read online at:
www.gov.scot/publications/health-social-care-standards-support-life/pages/1/

The standards do not apply to the services provided directly by foster carers themselves. The UK National Standards for Foster Care, published by the Fostering Network in 1999, are comprehensive service standards that apply to fostering services provided directly by foster carers, social work services and other agencies involved in the provision of child care services. The 25 standards were launched to provide a blueprint on how to deliver the highest standards of foster care. They are divided into three clear, easy-to-use sections:

- Ensuring that the specific needs and rights of each child in foster care are met and respected.

- Ensuring that each foster carer provides effective and appropriate care.
- Ensuring that each authority responsible for the provision of public care for children and young people offers a high quality foster care service for all who could benefit from the service.

More detailed information with regards to the UK National Standards can be found on the Fostering Network website or sourced by your Supervising Social Worker.

Section 4
The Formal Working Arrangement

The Formal Working Arrangements

This section explains the formal working arrangements for foster carers in Argyll & Bute Council. It helps to explain what Argyll and Bute Council expects of its foster carers and what foster carers in turn should expect from us. We have provided information under separate headings and have included details about the requirements of foster carers, supervising social workers and children's social workers so that you can understand the different roles of the key people involved when a child is placed in foster care.

We don't expect our new carers to meet all of these requirements right away and will help you to develop your skills and understanding of the tasks involved so that at the end of your first year of fostering you can confidently meet these requirements.

The Foster Carer Agreement

The National Care Standards for Fostering and Family Placement Services states: *"You have a written agreement with the agency, setting out the terms of approval and your role and responsibilities as a foster carer and the role and responsibilities of the agency"* (Standard 7).

Foster Care is primarily a partnership between the agency and the Foster Carer. This partnership gives each side a set of expectations and responsibilities which are written into the Foster Carer Agreement. The primary responsibility of all parties is to safeguard and promote the welfare of the child or young person.

Foster Carer Agreements are a requirement of the Looked After Children (Scotland) Regulations, 2009 and every carer will be asked to sign one following their approval by the Approval and Matching Panel. The Regulations specify the areas which must be covered in the Agreement (Regulation 24 Schedule 6). The Agreement ensures that foster carers have a full understanding of their obligations and entitlements following approval. The Foster Carer Agreement must be completed and signed by the foster carer and a representative of the council prior to any child being placed. The foster carer will retain a copy of the agreement and one will be placed in their file. A copy of the standard foster carer agreement is included here:

https://www.argyll-bute.gov.uk/sites/default/files/fostering_foster_carers_agreement.docx

The tasks and responsibilities of local authorities and foster carers will be explained further in the handbook.

Protecting Vulnerable Groups / Disclosure Scotland

In February 2011, the Scottish Government introduced a new membership scheme to replace and improve upon the old disclosure arrangements for people who work with vulnerable groups – this is called the Protecting Vulnerable Groups Scheme or PVG Scheme. Fostering and any work associated with fostering, and kinship care is designated as regulated work and therefore applications to join the PVG Scheme for foster carers is a statutory requirement. Therefore, all new applicants to foster must be PVG checked.

The PVG Scheme should:

- Help to ensure that those who have regular contact with children and protected adults through paid and unpaid work, do not have a known history of harmful behaviour.
- Be quicker and easier to use, reducing the need for PVG Scheme members to complete a detailed application form every time a disclosure check is required.
- Strike a balance between proportionate and robust regulation and make it easier for employers to determine who they should check to protect their client group.

Any individual who is not barred may apply to become a member of the PVG Scheme. The PVG Scheme is administered by Disclosure Scotland and allows organisational employers and personal employers to satisfy themselves that an individual to whom they are offering regulated work is not barred from doing that type of regulated work. The PVG Scheme provides three different disclosure records for this purpose. PVG Scheme members are continuously monitored for new vetting information and any

information which comes to light which may indicate that they are unsuitable to do regulated work will lead to a consideration for listing. This is managed and delivered by Disclosure Scotland, which as an executive agency of the Scottish Government, will take any additional responsibilities. This will include taking decisions, on behalf of Scottish Ministers, about who should be barred from working with vulnerable groups.

What happens when I apply to be a PVG Scheme Member?

- A check will be made to see if you are barred from working with children and / or protected adults. If you are barred, you will be refused PVG Scheme Membership. This means that you cannot work with the workforce you are barred from (subject to certain exceptions).
- A search will be carried out to check for vetting information (e.g. convictions, cautions, children's hearing findings and other relevant information from the police).
- If there is no vetting information or it does not have a bearing on your suitability to do regulated work, your PVG Scheme Membership certificate will be issued.
- If there is vetting information that identifies conduct which has a bearing on your suitability to do regulated work, your application for PVG Scheme membership will be considered further by the Family Placement Team.

What happens once I am a PVG Scheme Member?

All PVG Scheme members are subject to ongoing monitoring (continuous updating). This means that when you are a PVG Scheme member your vetting information is kept up-to-date and if there is new information about you this will be assessed to determine if you are unsuitable to do regulated work with children and / or protected adults.

There are separate forms for prospective carers if they are PVG Scheme members already. This is the Existing PVG Membership form. Please advise your supervising social worker if you are already a member of the PVG Scheme.

Argyll & Bute Council have a policy of updating the PVG Scheme membership of foster carers every two years. Therefore once you have PVG Scheme membership and

have become an approved foster carer you will be required to complete the Existing PVG Membership form every two years.

Other adults living in the foster carer's household

All other adults living in the household aged 16 + should have an Enhanced Disclosure.

Relatives and friends of foster carers not living in the carers' home cannot have an enhanced disclosure check. This means we will not do enhanced disclosure checks for carers' relatives when carers are visiting them.

Further information can be obtained from:
https://www.mygov.scot/pvg-scheme/

Foster Carer Competencies

Clearly a core element of the Fostering Service is the foster carers who provide placements and care for children and young people. The experience, which children and young people have when placed with foster carers, is a paramount concern of the Fostering Service, as is the competency of foster carers to meet the needs of children and young people and improve their outcomes. The assessment of prospective foster carers considers the competencies required by foster carers as part of the criteria for approval. It is worth noting these here as a reference point, not least for the identification of any ongoing areas of development for foster carers and the Fostering Service. The core competencies are set out below:

Caring for Children

The ability to provide a good standard of care to other people's children which promotes healthy emotional, physical and sexual development as well as their health and educational achievement.

The ability to accept the individual child as she/he is.

The ability to provide care appropriate to the individual child as she/he is.

The ability to work closely with children's families, and others who are important to the

child.

The ability to set appropriate boundaries and manage children's behaviours within these, without the use of physical or other inappropriate punishment.

Knowledge of normal child development and an ability to listen to and communicate with children appropriate to their age and understanding.

The ability to understand and promote a young person's development towards adult status.

Providing a Safe and Caring Environment

The ability to ensure that children are cared for in a home where they are safe from harm or abuse.

The ability to help keep themselves safe from harm or abuse and to know how to seek help if their safety is threatened.

The ability to recognise the particular vulnerability to abuse and discrimination of disabled children.

Working as Part of a Team

The ability to work with other professional people and to contribute to local authority planning for a child/young person.

The ability to communicate effectively.

The ability to keep information confidential.

The ability to promote equality, diversity and the rights of individuals and groups within society.

Personal and Professional Development

The ability to appreciate how personal experiences have affected themselves and their families and the impact fostering is likely to have on them all.

The ability to have people and links within the community which provide support.

The ability to use training opportunities and develop knowledge, skills and abilities.

The ability to sustain positive relationships and maintain effective functioning through periods of stress.

Review of Foster Carer Approval

The National Care Standards for Fostering and Family Placement Services states: "*You can be confident that the agency has the necessary review systems in place to make sure that you are able to continue to provide good quality care."* (Standard 11)

All foster carers must have their approval reviewed at least annually, in line with Council Policy and taking into account the National Standards, the National Health and Care Standards and Regulations. In Scotland, reviews must be held within 12 months of the day of approval, within three years of the previous review and also where the agency considers that a review of the foster carer's approval is necessary or appropriate to safeguard the welfare of any child who has been placed with that carer. In Argyll & Bute Council reviews are convened annually and chaired by an independent reviewing officer called a CARO (Care Assessment and Reviewing Officer). Reviews are usually held at foster carers' homes and attended by the foster carers, the supervising social worker and the CARO. The first review must be presented to the Approval and Matching Panel and thereafter every three years the review will be presented to the Panel.

The review will consider the foster carer's continued registration and whether there needs to be any amendments or variations made to their registration and approval. Any proposed changes to the registration will require to be presented to the Approval and Matching Panel and may involve a re-assessment of your circumstances. The review will also ensure all the relevant checks and requirements are being met in compliance with statutory and regulatory requirements. There will be a focus on the foster carers' skills and abilities benchmarked against how they meet the wellbeing needs of the children and young people they care for, as set out in the eight SHANARRI wellbeing indicators, detailed previously in the handbook, and the Foster Care Competencies, detailed above. The ability to demonstrate your individual learning and development, supported by the Family Placement Team, is a very important area within the Foster Carer Review.

There is the expectation that all relevant individuals (child/young person, supervising social worker, foster carer and social worker for the child/young person) will provide written reports for the annual review. All attendees of the review will receive a written record (minute) of the review, which will include the recommendations made. The record of review will be retained in your social work records. It could also potentially be a source for internal or external audit. The carer has the right to disagree with any decisions made at the Foster Carer Review and should put this in writing within 28 days, addressed to the service manager for the Family Placement Team, Mark Lines.

The review will also cover aspects of how foster carers provide a safe environment for the child or young person and their own families and how they manage the wider aspects of their role as a foster carer. For example; attending meetings, engaging with birth parents, contributing to contact arrangements, liaison with other agencies. Working in partnership with the care team around the child is critical in the fostering role.

The Foster Carer Review is an important meeting enabling foster carers, the supervising social worker, the child's social worker, children and young people being fostered and the birth children and young people of foster carers, to take stock and reflect on the child and the foster carers' abilities to meet the child's health and wellbeing needs, evaluating strengths and areas for development. It is also an important opportunity for the fostered child / young person's views to be ascertained usually by the child's allocated social worker, individually or jointly with the supervising social worker. The views of the fostered child or young person of their experiences in foster care, are fundamentally important to the process and enshrined in legislation, policy, best practice, and national / international charters promoting the rights of the child. The foster carer report form can be viewed here: https://www.argyll-bute.gov.uk/sites/default/files/fostering_review_carers_report_1.doc

Supervision and Support to Foster Carers

The National Care Standards state: *"You know that your reviews will always include an assessment of levels of supervision."* (Standard 11)

Foster carers can expect regular contact from their supervising social worker. The frequency of face to face contact will be at a minimum of 4 weekly intervals but is likely to be more intensive for new foster carers, around the time of new placements, or during times of change or unusual stress. Argyll & Bute Council has minimum standards for social work contact in relation to foster care placements. These are that the child and young person and their foster carer must be visited:

- Within one week of the placement being made. This will be by the child and young person's allocated social worker.
- All Looked After and Accommodated children and young people should be visited monthly by their allocated social worker.
- There will be a minimum of one unannounced visit by the supervising social worker each year to foster carers.

Foster carers should not hesitate to get in touch with the service for help and advice if they have any questions or concerns. Family Placement and Children's Area Team staff work in an 'agile' work environment, which should allow carers to easily access their supervising social worker or the child's allocated social worker, either through office phone lines or direct to the worker's individual mobile phone. Foster carers will be given details on how to contact their supervising social worker and who to contact when the supervising social worker is not available, including the Out of Hours Service. Family Placement supervising social workers have a supervisory responsibility (hence the title, supervising social workers) and are involved in the arrangement and matching, continuing support and supervision and ending of placements; they are a first line of professional support to foster carers and their families. Supervising social workers must complete review assessments and identify training needs with foster carers as detailed previously in the section covering the Foster Care Review.

Where a child or young person is looked after by the local authority, there is a duty to safeguard and promote the welfare of the child as paramount.

If the situation is urgent and foster carers cannot contact their own supervising social worker, they should contact the duty worker for the Family Placement Team. Details of how to contact the duty worker are in the contact section of the handbook. If this is not possible then they should ask to speak to the Practice Lead for the Family Placement team. They can also contact the child's allocated social worker within the Area Team.

The Role of the Supervising Social Worker

Below is a list of some of the key tasks and responsibilities of the supervising social worker. This list is not a definitive or exhaustive list but has been detailed to offer clarity of the role:

- Supervising social workers (SSW) ensure the foster carers within their caseload are carefully matched to children who fit their approval and registration status. SSW should be aware of your availability and protect your interests.
- SSW safeguard the welfare of each child / young person in placement by maintaining a minimum of monthly placement visits to children and foster carers, continually evaluating the foster carers' abilities to meet each individual child's health and wellbeing needs. Some visits will be announced (pre-arranged) and others shall be unannounced (a minimum of one each year).
- Outwith placement visit, SSW ensure the best possible communication with foster carers.
- SSW carry out formal supervision of every foster carer utilising best practice tools, including Safe Care Family Policy, Supervision Tool and Health and Safety Assessments and any other assessments required to promote best practice requirements.
- SSW ensure each foster carer understands the importance of their ongoing development by actively emphasising each foster carers' individual learning, development and training, as being fundamental in maintaining approval and registration; thus promoting high quality foster care.
- SSW ensure that each foster carer understands the importance of working collaboratively in partnership with the Child's Plan and the team around the child.
- SSW support foster carers to maintain and safely store records for each child in their care.
- SSW maintain records of all placement visits, communication and assessments of foster carers, while ensuring that the maintenance and storage of all records complies with regulatory, legislative and best practice guidelines including Data Protection.
- SSW ensure that all basic checks in terms of best practice and within legislative and regulatory requirements are complied with and in place at all times as part of the ongoing approval of each foster carer.

- SSW ensure that each foster carer is fully prepared and supported for their annual Foster Care Review, including providing any support required in assisting the foster carer with their report to the Foster Care Review.
- SSW undertake home study assessments of prospective foster care applicants within procedural and best practice timeframes utilising robust assessment frameworks and tools.
- SSW ensure that the whole foster family, including the foster carers' birth children are included, supported and assisted in the fostering task.
- Each supervising social worker must work closely with the multi-agency care team around the child. While it is appreciated that there are differences in roles and distinctiveness in some key tasks, there should, however, be a strong joint approach between the supervising social worker and the child's allocated social worker. Experience would emphasise that when this integrated approach is adopted, positive outcomes for the child are more likely to be achieved.

The Role of the Child's Allocated Social Worker

The role of the child or young person's allocated social worker, based in one of the Area Team localities, is again not definitive, but is provided to give some clarity, as foster carers often ask about the differences between the two roles. This detail shall focus on the social worker's role, specifically with the child who is looked after away from home in foster care, recognising however that children's social workers also have case management responsibility for children who are at home:

- Social workers working in the community, in the same way as supervising social workers, work as part of a team and do not make decisions in isolation. Practice team leaders and service managers are fundamental to the decision-making processes in respect of the case management of children.
- Social workers have a responsibility, within their management team, following best practice, procedures, legislation and regulatory requirements to assess if it is no longer safe for the child to remain at home, and if any multi-agency supports could be put in place to enable the child to remain at home. However, if this is not safe and the child has to be removed, the social worker, practice lead and service manager shall all be involved in that decision and will be clear

as to the most appropriate legal route for accommodation dependant on the circumstances.

- The social worker or practice lead will alert the Family Placement Team of the child's proposed accommodation. The Family Placement Team duty worker will then begin the process of matching the needs of the child with the most appropriate available foster carer.
- The social worker for the child has the key responsibility to ensure that the child's full background is shared and that if available, the child's NUCA (New Universal Child Assessment) report is submitted with background information to assist in not only matching but enabling the foster carer to provide day-to-day care.
- Once a foster carer has been identified it is imperative that there is a very immediate and clear two-way sharing of information between the supervising social worker (in respect of the foster carer) and the social worker (for the child). Foster carers need to understand as much as possible about the needs and experiences of the child to ensure they are prepared for meeting the childs' needs, whether it is an emergency placement or a planned placement. Research highlights a high risk of breakdown when this critical information has not been shared with the foster carer.
- The child's allocated social worker, usually with a second social worker from the area team, have the key responsibility for removing the child, preparing the child, giving as much information in an age appropriate way to the child, to minimise the trauma of removal from birth family. Empathy, honesty, information and reassurance are key to the social worker's task.
- As soon as the matching of the child to a foster carer has been confirmed, the social worker from the Area Team should be in contact with the foster carer to confirm the child's plan and when the child is likely to arrive at the foster carer's home. The social worker, or one of their team colleagues will be asking as much information about the foster home to share with the child to minimise as much as possible, the 'unknown' for the child. This is where a foster carer's written profile or 'welcome to our foster family' album can be valuable.
- Once the social worker has placed the child with the foster carer, the social worker will then set about arranging the multi-agency 72-hour Looked After

Children's Placement meeting, which should be held within three working days of placement. Thereafter the social worker will be responsible for ensuring that the frequency, of what is referred to as, Looked After and Accommodated Child Reviews (LAAC Reviews) are scheduled within regulatory timescales, i.e. 3 days, 6 weeks and 6 months if the child remains accommodated.

- The social worker must prepare a report for the LAAC review meetings, as should the foster carer, assisted by their supervising social worker. Both should be at every review as these meetings pull all key agencies together to set out and agree the Child's Plan following regulatory and legislative requirements to promote the best possible outcomes for each child in foster care.
- The social worker has a very strong focus on ensuring they work directly with the child, visiting within the first week of initial placement and of high frequency in the settling period for the child but visiting the child at a minimum of no less than four weekly intervals. They, as with the supervising social worker, have a strong focus on safeguarding the child who now has additional needs given they are no longer looked after at home.
- The social worker has lead responsibility for ensuring all contacts with birth family are facilitated and arrangements very clearly in place for the child. They assess contact but also require clear information from the supervising social worker and the foster carer as to the child's reactions before and after contact. Foster carers have a responsibility to assist the child with contact given this is a fundamental part of the Child's Plan.
- Social workers rely on gathering the best possible information from the care team around the child. Foster carers and their records of the child during the day-to-day care are critical to this information sharing and thus promoting the needs of the child at the centre of all decision making.
- Social workers have the lead responsibility for preparing a number of key GIRFEC reports including reports to the Children's Hearing. While everyone has a responsibility to the child, the child's social worker has a lead role in preparing the child for their Hearing and ensuring that their views are understood. Supervising social workers have a clear role in supporting and preparing the foster carer for Children's Hearings, although the responsibility

for ensuring the key people are at the Hearing lies with the Reporter from the Scottish Children's Reporters Administration (SCRA).

There are many other individual distinct roles and responsibilities between the supervising social worker and the child's allocated social worker, which are explored further in this Handbook. The key factors to understand are that everyone has a fundamental and overarching principle to promote the welfare of the child and that everyone has a fundamental role to support the child, by working in partnership with the integration of the childs' needs being at the centre of each and every distinct role from across the team around the child.

Carer Availability and Payment of Fees

The general principle for foster carers is that they will be paid for the duration of a child's placement. This means that payment to any foster carer starts on the day the placement starts and stops on the day the foster child leaves the placement for whatever reason. If a foster carer chooses to take more than the allotted 14 nights respite without children during one financial year, their full allowance will be deducted for the period of additional absence.

Due to payments being made 2 weeks in advance, foster carers need to be aware that an overpayment could be made which will require to be repaid.

Matching Children and Young People

The fostering service will always attempt to match planned placements in terms of the child's needs and the approval, circumstances and experience of the foster carer. Foster carers will be expected to accept placements, within the age range and number for which they are approved, which are considered appropriate by the fostering service. Equally however, foster carers have a good understanding of their strengths and limitations and it is therefore important that the matching process is one which is underpinned by collaborative working. There will always be full discussion of information known about a child before foster carers are asked to accept a placement.

The exception to this could be in emergency placements, where little may be known about the child at the time of placement.

Employment Status of Foster Carers

Notwithstanding the above, foster carers are self-employed, and therefore retain the right to choose to be unavailable for placements at any time.

Safer Caring

Keeping everyone safe in your household is a top priority. For this reason we insist that every family adheres to Argyll & Bute's Safer Caring Policy and Procedures, in addition to developing a Safer Care Plan for your household. Please refer to Argyll and Bute's Safer Care Policy and Safer Care Plans, which can be accessed here:

https://www.argyll-bute.gov.uk/sites/default/files/safer_care_policy.docx

https://www.argyll-bute.gov.uk/sites/default/files/safer_care_household_plan.docx

https://www.argyll-bute.gov.uk/sites/default/files/safer_caring_plan_individual_child_amended_blank_template_22.08.16.docx

The task of caring for looked after children who have experienced loss, trauma, and abuse, is difficult and complex. Allegations whether true or false are a relatively rare event, but children and young people do sometimes make allegations against their foster carers.

Some children and young people make false allegations because of their past. It may be that something that has happened reminds the child of past abuse or it could be a way of trying to exert control over their lives. Children who have been abused can also misinterpret actions of others.

It has to be acknowledged too that sometimes carers abuse children. There are a variety of reasons for this and these include losing one's temper and carers who are worn out or not coping for other reasons. We also have to acknowledge that some individuals come into foster care, like other areas of child care, to seek the opportunity to abuse children and young people.

Safer caring is thinking about your fostering practice in a way that will prevent false allegations and keep foster children safe.

Safer caring is a huge subject and involves thinking about you and your family's attitudes, behaviours, communication and routines in order to develop changes which will help keep everyone safe.

As well as keeping your safer care plan under review with all family members you should also keep it under review with your supervising social worker.

The safer care plan must be updated annually or if there are significant changes in your household circumstances.

Training and Development for Foster Carers

The National Care Standards for Fostering and Family Placement Services states: *"You can be confident that the agency is committed to developing, preparing and training foster carers and makes sure that they work within its standards, policies and guidance."* (Standard 8)

Argyll & Bute Council considers its foster carers as vital to the success of its fostering service. The fostering service recognises the increasing complexity of children in foster placements. This means that all carers need access to a wide range of training programmes to develop the core skills and knowledge that best supports them in caring for Argyll and Bute's most vulnerable children and young people.

Argyll & Bute Council will provide training opportunities for all carers regardless of their level of experience. The service is committed to providing carers with a wide range of courses that supports them to keep up to date with all the latest good practice, guidance, research and legislation related to foster care.

Not all learning will take place through formal training as the ongoing supervision and support process will also provide foster carers with signposts to other valuable learning opportunities.

Every year a training calendar is produced, which lists training that foster carers are required to undertake in their first year post-approval, in addition to other training opportunities. By initially signing the Foster Carer Agreement, there is a clear commitment that training will be accessed by foster carers. For carers that do not commit towards their own learning and development this would be raised as a concern, which would be addressed through the Foster Care review process to consider their continued registration.

Foster carers are encouraged to take responsibility for their own learning and development and to discuss their needs and interests with their supervising social worker. Training should not be considered the only source of development and carers are, for example, encouraged to reflect on their experiences with their supervising social worker and undertake personal research online or by reading, or listening and watching relevant programmes on television and radio.

Your individual development will also be discussed annually at your foster carer review. The Family Placement Team is constantly striving to improve the training we offer to foster carers, and every year we gather, evaluate and listen to your feedback to inform the ongoing development of our training programme. We welcome suggestions from foster carers for training courses or opportunities to improve knowledge and skills.

Some foster carers in Argyll & Bute have already gained Scottish Vocational Qualifications (SVQs) for caring for children. We will continue to offer this opportunity to a limited number of foster carers at any time and you may apply through your

supervising social worker. There may be a selection process (and a waiting list) for SVQs.

In the Scottish Government's National Foster Care Review 2013, the importance of ensuring foster carers receive opportunities to learn about different ways to support children and young people and to develop their awareness, knowledge and understanding of the foster carer role is highlighted. In response, the Scottish government asked the Scottish Social Services Council (SSSC) to develop a framework for learning, which has become known as the Standard, which applies to all foster carers and fostering organisations in Scotland. The Standard describes learning expectations for foster carers at different stages of their 'career' as foster carers. Scottish Ministers will consider options for implementing the new Standard in the context of the Independent Care Review when the Chair has announced more details. The Scottish Government will then set up an expert group to consider a cost analysis and agree a realistic plan and timeframe for foster care providers to implement the new Standard into practice.

Confidentiality

As a foster carer for Argyll & Bute Council you will have access to detailed confidential information about children, their families and the social work service. This information must be handled sensitively. Carers must not share confidential documents or information about children in their care with anyone, without the agreement of all relevant people. In terms of the law, you, like everyone else who possess confidential information, are bound by the Data Protection Act. This is an individual responsibility and you must be careful about where you store information, how it is kept and who sees it.

Usually your friends, neighbours or relatives will understand that you are unable to discuss confidential information about a child and will avoid asking awkward questions. However, if people do make inappropriate enquiries you should politely, but firmly, refuse to discuss the matter. Some information may have to be shared with relatives

or close friends but this should always be discussed beforehand with your supervising social worker and be for a good reason.

You should never, in any circumstances, give information about a child in your care to the press or any member of the media. Children in foster care cannot be photographed for publicity purposes without the authority of their parents and the locality manager for the area team involved with the child.

As a carer you will receive a lot of written information about children placed with you. You must keep these papers in the lockable metal container provided by your supervising social worker whilst the child is in your care. When the child leaves your care, the written information you have must be passed to your supervising social worker.

Record Keeping and Confidentiality

As a foster carer for Argyll & Bute Council you will have access to detailed confidential information about children, their families and the social work service. All information must be handled sensitively. Carers must not share confidential documents or information about children in their care with anyone, without the agreement of all concerned.

Everyone working with looked after children and their families are involved in recording in different ways. Recording is an essential part of the service provided to children and families. However, we recognise that record keeping is not an activity that is approached with enthusiasm by many carers and social workers! Nevertheless it is important to understand its importance and that recording supports positive care of children. The following is extracted from the Government's 'Write Enough' online training programme available at www.writeenough.org.uk :

Purposes of recording

Recording for carers and all involved in the care of a looked after child has a number of important purposes including:

- Maintains history for the child – providing a 'coherent narrative'

- Provides continuity for the child when social workers unavailable or change.
- Protects a foster carer from allegations.
- Provides an opportunity to reflect on the placement and learn from mistakes and good ideas.
- Highlights a carer's training and development needs.
- Underlines issues for the child.
- Saves time and energy by providing a future reference for carers and staff.
- Allows analysis of patterns of behaviour and to spot improvements and problems early on.

Key Issues and Events to Record

The following are the key issues and events you should consider recording (it is appreciated you may have others you wish to record):

- Brief day-to-day record
- Improvements and achievements of the child, e.g., learned to swim, ride a bike, etc.
- Any changes or concerns in behaviour or mood – including details of actual behaviour observed, what was happening before it started and your or other people's responses.
- Dates and times child is away from your home – visiting friends, away with birth family, or missing from placement. Refer to the Missing Child Protocol here: https://www.argyll-bute.gov.uk/sites/default/files/children_missing_from_local_authority_care_protocol_0.pdf
- Specific incidents, events or changes in circumstances of family members.
- Disagreements or complaints concerning any birth family members and how you dealt with them.
- Accidents or injuries (even if slight) to the child.
- Dates of meetings, attendance and decisions (sometimes these will be part of the minutes sent out to you).
- Any medical, dental and optician appointments and treatments / decisions from these – you need to inform the child's social worker about statutory medical

appointments and dental checks as s/he has to record this information on the CareFirst electronic record of the looked after child.

- Contacts with school, social worker, birth family.
- Contact visits and child's responses or behaviour before and after.
- Requests for help or assistance.
- Times when alternative care has been given, e.g., babysitters, with details of who they were and what they did.
- Details of any damage or theft by the foster child.
- Involvement with police – reasons and outcome.

You need to ensure you make the child's social worker and your supervising social worker aware of the key events you are recording.

The Fostering Network advises that 5 to 10 minutes per child a day should be all the time you need to spend on recording.

Over time your recording should reveal trends and patterns in the child's behaviour and development. Your recording may well underline the improvements and progress that has occurred and enhance your satisfaction in a job well done.

The strictest confidentiality of your recording should be maintained and diaries / notebooks and other documents you record in should be kept in a secure place such as the lockable, portable container provided to you by your social worker.

If you have difficulty with reading and writing please feel free to raise with your supervising social worker who will advise and provide you with additional support if necessary.

Incidents/Events which must be reported immediately

Any serious incident or accident which involves a child must be reported immediately to the child's social worker, your supervising social worker or a duty worker, or if out

of hours, to the standby worker / SWES. The Fostering Service has a duty to report key incidents to the Care Inspectorate as soon as possible after the event.
A serious incident includes when a child or young person:

- Runs away / is missing
- Is removed without consent from your care
- Commits an offence
- Is hospitalised or requires emergency medical treatment
- Suffers or discloses any incident of abuse. All disclosures of abuse must be reported, even historical accounts.

Dealing with Disclosures

You are required to attend a child protection training course within your first year as a foster carer. It is important that you keep your child protection knowledge and awareness up to date by continuing to attend training.

Should you be concerned about your foster child (or indeed any other child), you must report your concerns to the child's social worker, your social worker or the out of hours standby worker (SWES) as soon as you can. In emergency situations you can of course phone the police. Contact numbers are in Section 2 of this handbook.

Children and young people who have been abused can take time to tell a trusted adult what has happened to them. This is often referred to as a disclosure. Dealing with this sensitive information can be worrying and new carers are often anxious that they will say or do the wrong thing. However, these straightforward principles will help guide you:

Do	**Do not**
Stay Calm	Think it is someone else's job
Listen to the child and show concern	Ask too many, or leading questions
Keep any questions to a minimum, e.g., Can you tell me more about that?	Make false promises
Reassure the child they were right to tell you	Express anger or shock at what they have told you

Just report and record what the child has told you	Interpret what the child is saying to you
Tell the child what you are going to do next with the information they have told you	Delay listening to the child or passing on your concerns
Record what has been said to you in the child's own words	Carry out an investigation into the allegation
Act promptly and report to the child's social worker or your supervising social worker	

The Argyll and Bute Child Protection Committee has an extensive website with lots of resources at www.argyll-bute.gov.uk/abcpc

Separate record for each child

Many carers record in diaries. However, diaries should only be used as a record of dates of activities. The Family Placement Team will provide foster carers with an A4 folder and recording sheets, which should be used for all children's recording. You must keep a separate record for each child in placement.

Computer Records

With the now common use of electronic forms of communication, we recognise that you may identify a need to be in email correspondence with your child's social worker, your supervising social worker and other professionals.

Foster carers are advised to minimise use of emails and instead use phone calls for urgent exchanges of information. If there is a pressing need for use of email then you should be aware that this is not a secure and confidential means of sending information. It is recommended that you use the child's CareFirst number if you know this or their initials only and not their name, in order to keep their identity confidential. You should also avoid mentioning any other personal information that might identify the child, for example addresses, name of school/nursery they attend, age or date of birth of the child and names of parents/siblings, etc.

Hard copies of key emails should be kept in the file you maintain for each child in placement. If you hold children's information on a personal computer you should check with your supervising social worker to ensure it conforms to the requirements of the General Data Protection Regulation (GDPR) 2018, is kept confidential and access to information on the child is restricted to you.

You should use strong passwords which are at least 8 characters long and contain a mixture of text, numbers and other characters, preferably avoiding dictionary words and easily-guessed content such as the name of a pet. You should change passwords regularly and not share them or write them down in a place accessible to others. You should also avoid using the password which protects your computer for other purposes (such as for logging on to a website).

Furthermore, you should ensure that all computers which are used in the home have a reputable security system, which will include anti-virus software. There is information online which can be accessed to inform you of the potential risks to children and young people.

Once a child moves on, the information must be removed from the computer. Any information not already held by social work should be transferred to hard copy and passed to your supervising social worker.

Key Records to Keep

The following are key documents and written information about the child placed with you, which should be kept in the lockable metal container:

- New Universal Child Assessment (NUCA)
- Placement Agreement
- Court Orders / Children's Hearing Orders
- Diary and / or diary sheets/folder (clearly dated and signed)
- Special reports as appropriate such as Educational or Health
- Correspondence with social worker and supervising social worker

- Looked After Review reports
- Any important certificates, awards, school reports and photos
- Health and Safety – accident/injury records
- Medical, dental and optical appointments and outcomes
- Life Story Books do NOT need to be kept securely but should be available to children so that they can use them when they need to. This belongs to the child and follows the journey of the child.

Eight Tips for Effective Recording

1. Before you start, be clear about why you are recording.
2. Record as soon as possible after an event or observation.
3. Use plain language and avoid jargon.
4. Wherever possible stick to the facts.
5. When you give an opinion separate it from the facts and explain why you have come to that opinion.
6. Record in a way that you would be happy for the child or their family to read what you have written.
7. Don't forget to sign and date each record.
8. Completing regular summaries on younger children and with young people can be a good way of monitoring the child or young person's progress.

What Happens to Records When a Child Moves On

At the end of a placement your recording and other documents on the child have to be returned to the child's social worker for the child's file. You should keep a record of the child's name, date s/he arrived and left and of when the information was passed over in case you need to access it later.

Data Protection and GDPR

The Data Protection Act 2018 came into force on 23 May 2018 (it replaced the Data Protection Act 1998) and is the UK's implementation of the General Data Protection Regulation (GDPR) which came into force on 25 May 2018. The Data Protection Act

2018 (DPA 2018) provides a legal framework for all data protection in the UK and has introduced new requirements for how organisations process personal data, as well as expanding the rights of individuals to control how their personal information is collected and processed.

Fostering services across the UK must comply with this legislation, in order to be more accountable for data protection and consider issues of data compliance.

Data protection legislation controls how your personal information is used by organisations, businesses or the government. Fostering services have access to a variety of personal data including sensitive personal data when working with fostering applicants, foster carers, children and young people, birth families, social care staff workforce, fostering panel members and so on.

Everyone responsible for accessing and using data within the fostering system (dependant on your role and responsibilities) has to follow strict rules called 'data protection principles'.

Data Protection Principles

The following principles should apply in terms of data protection:

- Public authorities and fostering services are responsible for what and how they process, record and store personal data.
- Fostering services have a legal responsibility to ensure that all data they obtain is accurate, relevant, up to date, and that it is securely stored for no longer than it is necessary, or in accordance with record retention policies as stipulated by relevant legislation.
- Data protection policies must adhere to individual rights in terms of deleting and sharing data, gaining and managing consent and provision to access data held about an individual in accordance with regulations and set timescales.
- Services must adhere to upholding children's rights and ensure specific protection for this group.
- Public authorities and fostering agencies will need to appoint a Data Protection Officer.

- Public authorities and fostering services have a responsibility to notify the Information Commissioners Office (ICO) to report a breach, as well as individuals where high risk instances will impact on individual rights.

Further Information and Advice on Recording

The Fostering Network has published a booklet entitled 'Record Keeping Information for Foster Carers', which if you have not seen your supervising social worker can obtain for you. You can also visit their website: www.fostering.net or www.writeenough.org.uk
You should feel free to contact your supervising social worker if you have any queries or concerns about recording.

Dealing with Complaints, Concerns and Allegations about Foster Carers

Foster carers occupy a significant position of trust and the partnership which exists between the social work service and foster carers is essential to the provision of high quality services for children who are looked after. However, there are occasions when children, young people or other adults make allegations against foster carers or members of the foster carer's family. It is essential that these allegations are investigated thoroughly to safeguard and protect children and young people. An independent investigation also provides a safeguard for foster carers and their families.

Dealing with potentially conflicting needs, rights and responsibilities of the child or young person and foster carers during an investigation requires a high level of skill, sensitivity and understanding of the different tasks and emotions involved. The importance of safeguarding children who are looked after must be emphasised but the vulnerability of foster carers must also be recognised and they should be supported accordingly.

It is likely that going through the allegation process will have residual effects for the agency, the individual staff involved, the foster carers, their extended families and

most importantly the children in placement. Successfully moving on from this will require ongoing professional support for all involved.

Termination of Approval – Withdrawals and De-registration

Termination of approval is the process by which foster carers officially stop being foster carers. This can happen because foster carers' circumstances change and they no longer wish to foster and so formally withdraw by putting this intention in writing, giving 28 days' notice and signing the withdrawal proforma. In exceptional circumstances, the service may have substantial concerns about a foster carer and decide that it may be necessary to consider termination of approval known as de-registration.

However, when the need to consider de-registration arises, it must be handled with care and in a manner which acknowledges the existing partnership between carers and the social work service.

When supervising social workers discuss the de-registration procedure with carers it could obviously be interpreted as intimidating. The purpose of this procedure is to formalise lines of accountability and support for carers who undertake the difficult task of fostering on behalf of the council.

The process outlined below is primarily designed as a problem solving approach to dealing with difficulties as they arise, which recognises the shared responsibility for resolving such difficulties in working to meet the best interests of children and young people in placement.

However, on the grounds of equity and fairness all carers need to be aware of the de-registration procedure from the beginning of their involvement with the service. They should, however, be aware that if this is initiated by the fostering service due to concerns about foster carers, it is a rare event.

Resignation of a Foster Carer / Withdrawal

Where a foster carer indicates their intention to withdraw from fostering, the supervising social worker should meet with the carers and identify the reasons for this and record these on the carer's file. The carer should submit their resignation in writing to the fostering service giving 28 days' notice of their intention. They must then sign the withdrawal proforma, with both signatures required where it is for a couple. The allowance will cease at the end of this period, or when any child in placement moves, if sooner.

Should the reasons for resignation need additional action by the service this will be raised quickly with the practice lead.

The supervising social worker will prepare a brief report using a pro-forma and submit this to the Approval & Matching Panel. This will be submitted along with the letter of resignation from the carers in order that the reasons for the withdrawal can be formally recorded and the carer's approval terminated. The foster carer will be informed of the date of the panel.

Where there are Concerns about the service provided by foster carers / De-registration

The social work service may have concerns about the service provided by carers and normally these will be dealt with immediately by the supervising social worker. The concerns may arise from a variety of sources including the child's social worker, the child, or in part of the supervising social worker's discussion with the carers. When these are at a low level they will be dealt with as part of the ongoing supervision provided to foster carers.

For more substantial concerns the supervising social worker will meet with the carers and take a written note of the meeting. Agreed action to be taken to deal with the difficulty will be recorded, with signatures of the carers and supervising social worker, showing agreement of identified individual responsibilities.

Any agreement on action to be taken e.g. provision and attendance at training must

be recorded on the carers' file as a means of enabling progress to be monitored. Many of these difficulties can arise from inexperience and this process should be seen as part of the fostering service's normal procedure for providing support to carers.

If this intervention does not prove satisfactory or difficulties increase, this must be discussed with the practice lead, who will meet with the foster carers and supervising social worker to discuss further. A foster carer review may be convened. Written information should be provided by the supervising social worker and the foster carer. If the review should identify historical details of difficulties together with action taken to rectify them and evidence this has not proved satisfactory, the review could recommend certain courses of action for example, further training or a change of registration for carers, etc. This will be recorded and held on the carer's file. Any agreement for action should again be signed by the carer in order to identify agreement/disagreement on the problem and its resolution.

After the foster carer review and presentation to the Approval & Matching Panel, if they recommend de-registration, the decision will be referred to the Agency Decision Maker for a final decision. Should that be the decision of the Agency Decision Maker, the appeals process regarding appeals of the Approval & Matching Panel will become available to the foster carer who will be advised in writing of the process and rights in appealing.

The Agency Decision Maker will also decide whether or not the case meets the criteria that requires the carer to be referred by the local authority to Disclosure Scotland for consideration for listing in relation to vetting and barring for people working with vulnerable children.

During this process foster carers can seek support and advice from a source of their choice. This includes contacting the Fostering Network for legal advice or mediation.

The decision to de-register foster carers will be communicated in writing to the carers by the Council's nominated representative and all relevant documentation will be held on the carer's file.

Co-ordination of this information and any action to be taken to return equipment, confidential paperwork, copy of foster carer agreement, etc., will be undertaken by the supervising social worker.

Argyll & Bute Council Equality Policy

The term 'equality' does not simply mean treating everyone the same. It means understanding and tackling the different barriers to equal opportunities for different groups of people.

Argyll & Bute Council has an Equality Policy in recognition of the importance of equality of opportunity for its citizens and employees. Social work services will ensure that all enquirers, applicants to foster, foster carers and their families are treated on an equal basis, free of discrimination, subject to legal requirements. The Equality Policy's purpose is to:

- Make sure we do not unlawfully discriminate against the Equality Act 2010 protected characteristics of: age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race (including colour, nationality and ethnic or national origin); religion or belief; sex; sexual orientation.
- Oppose and avoid all unlawful forms of discrimination.
- Ensure equality, fairness and respect for all.

Foster carers are expected to be familiar with the Equality Policy and promote this in their practice while caring for Argyll and Bute's most vulnerable children and young people. The Equality Policy is available online to read here: http://intranet.argyll-bute.gov.uk/sites/default/files/approved_equality_and_diversity_policy.pdf

Further information on the Equality Scotland Act 2010 can be found at: www.scotland.gov.uk/Topics/People/Equality

Smoking Policy

Smoking causes 20 to 25% of all deaths in Scotland and smoking in pregnancy is the largest single cause of preventable ill-health. Therefore Argyll & Bute Council are committed to making efforts to encourage young people not to start smoking; support smokers who want to stop and to protect children and young people from the damaging effects of passive smoking. As a responsible corporate parent Argyll & Bute Council is aiming towards a service where none of our foster carers smoke so we can ensure a smoke free environment for all looked after children.

In support of these efforts Argyll & Bute Council has a policy that states children under the age of five years who are placed in foster care will always be placed in a non-smoking household. In order to promote and ensure children and young people's health and wellbeing, the Family Placement team requires all foster carers to develop and implement a smoke-free household policy. This will ensure that the foster home is smoke free in order that children and young people are not affected by passive smoking. Foster carers are also asked to take care that children and young people are not exposed to passive smoking on visits to friends and relatives and when traveling in motor vehicles.

You should not buy cigarettes for young people or allow them to smoke in your home. This can sometimes be difficult to manage and you should talk through your approach with the child's social worker and your supervising social worker.

The full Smoking Policy can be accessed here: https://www.argyll-bute.gov.uk/sites/default/files/argyll_and_bute_council_smoking_policy.pdf

More information about smoking and the effects of second-hand / passive smoking can be read online at:
http://ash.org.uk/information-and-resources/secondhand-smoke/foster-care-adoption-and-smoking/

If you are seeking help, advice and support to stop smoking the following NHS Highland (Argyll and Bute) contacts may be useful:

Health Scotland Contact Smokeline

Telephone: 0800 84 84 84

Website: **www.canstopsmoking.com**

NHS Highland Smoke-Free Service

Telephone: 0845 757 3077

Website: **www.smokefreehighland.co.uk**

General Stop Smoking Contact

Laura Stephenson Tel: 01436655129

Smoking Cessation Coordinator

NHS Highland

A&B CHP

Victoria Integrated Care Centre

93 East King Street

HELENSBURGH

G84 7BU

Fees:

Free Service

Useful website link address: Quitting in Mind website.
http://www.smokefreeminds.com/qim/index.html

Alcohol and other harmful substances

Foster carers have a potentially valuable role in helping children and young people learn about alcohol and its safe use. Many families enjoy a social drink. However you must be aware that many of the children in foster care have been traumatised by adults being drunk or intoxicated around them. This should be discussed with the child's social worker, who will advise you on how to manage this activity when the child is with you. This may include asking you not to use alcohol in the presence of the child

at all. Foster carers may help children make sense of what they may have experienced of alcohol either themselves, or in their family.

Foster carers are expected to act as good role models, this includes foster care practice in relation to minimum alcohol use. Children and young people who are looked after away from home cannot be in a position where they are under the care and supervision of a person who is intoxicated at any time. Argyll and Bute Council will investigate any allegation about alcohol abuse by foster carers, who have children and young people in their care, and abuse of alcohol could lead to termination of approval as a foster carer. You are of course allowed nights off. If you are planning a night out or event where it is likely that you will exceed these limits, we would ask you to make appropriate arrangements for the foster child in your care.

Foster carers should not buy or encourage young people to consume alcohol and be aware of the signs of alcohol abuse. If a child or young person appears to be using alcohol, their social worker should be informed at the earliest opportunity in order to explore if additional professional support is required. It is illegal for young people under the age of eighteen to buy alcohol.

Children and young people who are intoxicated run the risk of choking on their own vomit if they then fall asleep on their backs. Those who smoke secretly in their room while drunk may accidentally start a fire. Foster carers need to be alert to the condition of those in their charge, and must be willing to consult medical and social work services when a young person in their care appears intoxicated.

In relation to drugs or other substance misuse foster carers have a potentially valuable role in helping children and young people learn about the impact of such misuse, including potential legal consequences.

If a foster carer suspects a child is involved in substance misuse, their social worker must be advised as soon as possible, in order to agree an approach. Sometimes specialist advice will be sought. Some behaviour, of which a foster carer must be alert to, that may indicate substance misuse includes:

- Sudden changes in mood.

- Aggressive behaviour which seems out of character.
- Loss of interest in school and friends and changes in the type of friend and associates.
- Secretive behaviour, lying about activities, involvement in theft.
- Poor sleep patterns and reduction or change in appetite.
- Evidence such as powders, tablets, capsules, tinfoil, needles, syringes, plastic bags smelling of glue.

It is important to realise that many of the warning signs associated with drug/substance misuse may be attributable to other pressures, which nonetheless, require to be addressed.

Foster carers have the opportunity and responsibility to steer children and young people away from drugs/substance misuse but should recognise that effecting a change in their behaviour may be a complex challenge for the child. They need to see some benefit and purpose in this decision; consistently wish to change their behaviour; feel understood and supported and when the drug misuse is a response to some trauma (e.g., abuse), have the trauma identified and addressed when they feel ready to acknowledge such experiences.

In relation to substance misuse, a wide range of domestic and industrial products, including aerosols, can be deliberately inhaled to produce intoxication. The effect is sometimes heightened by sniffing inside a plastic bag placed over the head. With or without the bag, inhaling such substances can cause death. More detailed advice and information can be accessed through your supervising social worker and the child's social worker who will, if necessary, seek professional support from specialist drug and alcohol services who work closely with young people. Foster carers need to be careful about storage of relevant domestic products, including alcohol, and ensure that this is stored out of reach of children and young people.

Section 5

Foster Care Placements

Foster Care Placements

This section outlines the key responsibilities and processes involved when a child needs to be looked after away from home.

All those involved in the care of children and young people who are looked after away from home are responsible for ensuring their overall safety and wellbeing and, when

considering their needs, for considering the whole child or young person. That is to say, considering the physical, social, educational, emotional, spiritual and psychological wellbeing and development of each individual child and young person. It is important that these considerations remain at the heart of all activity around looked after children and young people.

The term 'looked after' is a legal one introduced by the Children (Scotland) Act 1995. Children and young people can be looked after at home or away from home. A full definition of these terms is provided in the Act. Children and young people who are placed with foster carers are looked after away from home and become known as 'looked after and accommodated' (LAAC).

Referrals for Foster Care Placements

All requests for placements are made to the Family Placement Team by the relevant social work Area Team. The child's social worker or a duty social worker from the area team completes the initial referral form detailing key information about the child or children. This is passed to the duty worker for the Family Placement Team. In consultation with the Practice Lead, a decision is made as to whether a fostering placement is suitable. This will then allow consideration in respect of the ability of foster carers to meet the needs of the child and improve their outcomes. The family placement worker then contacts the identified foster carer to discuss the placement needs of the child or children.

Some foster carers may agree to be contactable out of hours by the social work emergency service (SWES). When a foster carer receives a phone call asking them to provide a placement it can be useful for foster carers to have a list of questions (allowing for the fact that there may be instances where the child/family is not known to social work and therefore the answers are not yet known). For instance, questions in relation to the following:

- The child's name, date of birth, age and gender.
- Their ethnic origin, religion, culture and language.
- The reason/s for the child needing to be looked after away from home.
- The Child's Plan, if available.

- What the child has been told about the plan.
- Whether the child is in good health, is prescribed medication and has any medical conditions which require treatment.
- Whether the child has any particular behavioural challenges; if yes, any information about strategies that have been successful for the child in this regard.
- What the family situation is, e.g., information about the location of the parent/s, any brothers or sisters, anyone else important to the child.
- The provisional arrangements about contact with birth family and whether there are any restrictions.
- What the child's views are about what has happened.
- What the legal position is for the child.
- Who will bring the child and when.
- Whether any immediate practical arrangements are needed or in place (including, for example, any existing appointments or meetings for the child).
- Who to contact or who will be contacting you in future about the arrangements and the child's plan.

Placements can be made on an emergency basis or they can be planned.

Emergency placements can occur as a result of a serious family crisis or because of a legal process, such as the granting of a Child Protection Order by a Sheriff. In cases where a placement is made in an emergency, and especially when the service has had no previous dealings with the child, the information available about the child may be limited. Nonetheless, for all children and young people placed in foster care, foster carers should receive basic information, including:

- Relevant background about the child, their personality, health, development, education and essential family information.
- A copy of any legal order.
- Written consent to medical treatment.
- Medical Records Booklet (known as 'the blue book').
- Reasons for the need for the child to be looked after away from home and the child's understanding of this, if known.

Types of Placements and Carers in Argyll and Bute Council

Foster Carers

Foster carers are either approved as temporary or permanent carers. Temporary carers can be approved to provide interim, emergency and short break placements. They may also find themselves with a long-term placement. Permanent carers provide permanent placements.

National Placement Descriptors

Placement moves are highly disruptive for children, impacting negatively on their social, emotional and educational development. The Scottish Government is working with its local partners to ensure that all looked after children are secured in quality, permanent placements at the earliest opportunity. These placements should offer children greater stability and consistent, nurturing, long-term relationships, which continue into adulthood.

To achieve this aim Scotland needs to have the right mix of foster carers, and effective decision making and review processes for children. Neither of these is possible without clarity about the types of placement children currently experience. The National Foster Care Review (commissioned by the Scottish Government in 2013) concluded that this required increased standardisation in how local authorities and fostering agencies describe the types of fostering placements they make available. A set of national 'placement descriptors', used consistently by all agencies, would enable local areas and the national government to build up a detailed picture of foster care in Scotland, improve the way the Care Inspectorate reviewed agencies prior to inspection, and facilitate better communication between the various agencies involved in delivering the Child's Plan, and with those involved in monitoring the placement (such as Children's Hearings Scotland). The Scottish Government accepted the recommendation of the National Foster Care Review, and a small working group was established to develop the placement descriptors.

Consequently it became the expectation of the Scottish Government and the Care Inspectorate that all fostering placements are classified and recorded according to this typology.

Permanent Placements

For a child this means the care planning process has concluded that they will thrive best if they are cared for away from home on a permanent basis. A Permanence Order, which is applied for by the local authority through the courts, can provide the local authority, child and carers with the legal security, stability and time for strong relationship bonds and a sense of belonging to develop. Ideally Permanent carers become a 'forever family' for the children in their care and continue to support and help them into adulthood and beyond. Permanent carers are often called upon to help maintain contact between looked after children, their families and friends.

Long-term Placements

Carers may provide long-term placements for children when they have been placed for longer than 24 months and whose placements are not secured by a Permanence Order (this should be an exceptional situation and an indicator that the placement requires close scrutiny). Agencies must differentiate between long-term placements where:

- A Permanence Order with ancillary provisions is being sought.
- A Permanence Order without ancillary provisions is being sought.
- Child's care plan indicates that the placement will be maintained into adulthood (18+ years of age) without a Permanence Order being sought.
- Child's care plan indicates that alternative placements are being sought (including with birth family).
- The child's care plan gives no indication of the placement's objective or expected duration and therefore requires close scrutiny.

Interim Placements

A placement which has been in place for less than 24 months, **not** secured by a Permanence Order. Agencies must differentiate between interim placements which are:

- Part of a concurrency plan.
- Working towards rehabilitation with birth parents or other carers (not part of a concurrency plan).
- Working towards permanent care arrangements with a different foster carer.
- Working towards permanent care arrangements with current carer (see definition above).

For a child this means that the care planning process has not concluded and that they will benefit from spending some time being cared for away from home. There will be a time-linked plan for rehabilitation with parents or an alternative care placement option will be explored. Temporary carers who are providing interim placements are also often called upon to help maintain contact between looked after children, their families and friends and must be prepared to work as part of a team of people including birth family to meet the needs of children in their care according to the care plan which is in place.

Emergency Placements

Emergency placements are unplanned and occur when no other placement type has been identified by the local authority. Such a placement must be reviewed within 3 days, and may be extended for up to 12 weeks. For a child this will mean that there are immediate concerns for their safety and wellbeing and they require to be removed from their home environment as quickly as possible while the care planning process establishes the best option for the child. Temporary carers who provide emergency placements are also often called upon to help maintain contact between looked after children, their families and friends and must be prepared to work as part of a team of

people including birth family to meet the needs of children in their care according to the care plan which is in place.

Short Break Placements

Short break placements are ones which form part of a planned series of short breaks (including emergency placement with a carer who is already providing planned short-break placements to the child or young person). For a child this will mean that because of special circumstances they and their carer will benefit from therapeutic services or periods of respite. Short break carers are usually foster carers who are available on a part time basis to care for children and young people, providing short breaks for children in full time placements with other foster carers. Occasionally short break carers offer the same service to children living at home to help maintain them in their birth family. Short break carers are also often called upon to help maintain contact between looked after children, their families and friends.

Continuing Care Placements

The Children and Young People (Scotland) Act, 2014 introduced a number of important changes for looked after children and care leavers in Scotland. Parts 10 and 11 relate specifically to care leavers. Part 10 introduces extended eligibility for Aftercare assistance for care leavers allowing them to a Continuing Care assessment and support until their 26th birthday. Part 11 introduces the concept of Continuing Care. Continuing Care is a new legal term established by the 2014 Act. It provides certain care leavers with the opportunity to remain in their placements and receive the same package of support they were provided with immediately before they ceased to be 'looked after', up to their 21st birthday.

The policy intention behind the Continuing Care provisions of the 2014 Act is to provide care leavers with a more graduated transition out of care by offering continuity of placement and relationships while the young person manages the challenges of

leaving school, starting work or going into further education and moving towards independent living. This continuity should:

- Provide the young person with stability
- Enable the young person to benefit from continuing to reside with people with whom they have formed a positive emotional relationship
- Ensure they receive the support they require as they transition towards independence.

The importance of involving and consulting the young person in all discussions and decisions underpins the legislation and guidance.

Continuing Care Providers

As the young person in placement approaches the age of 15 years the supervising social worker should begin discussing with the foster carers their willingness and availability to offer a Continuing Care placement to the young person. The supervising social worker should begin these discussions in supervisory visits with foster carers. A formal decision should be noted at a LAAC review. Should the foster carers not be prepared to provide Continuing Care then the young person's social worker should be notified so that consideration of alternative future planning can begin with the young person.

The supervising social worker is responsible for completing a conversion assessment confirming the foster carer as a Continuing Care provider. A foster carer can be registered as a Continuing Care provider as well as foster carer. If the foster carer no longer wishes to provide fostering placements this should be stated clearly in the conversion report. The conversion assessment report will be considered by the Approval and Matching Panel who will make a recommendation to the Agency Decision Maker regarding the carers' approval as Continuing Care providers and, if appropriate, as foster carers.

Continuing Care providers whose registration as foster carers is extended to include Continuing Care, will continue to be subject to the foster carer review process with the Continuing Care role being included in this meeting. Feedback will be obtained from

the young person's Throughcare / Aftercare worker and the supervising social worker's report will include a review of the Continuing Care role.

The review of Continuing Care providers who are registered solely in that role will be undertaken as part of the young person's Pathways Review where the continued suitability of the placement will be discussed as will the training and support needs of the Continuing Care provider. This will be facilitated by the Throughcare / Aftercare team.

Family Support Carers

All foster carers are encouraged to nominate family members as their 'support carers' to help out with babysitting, respite or holidays. Family support carers must be assessed and disclosure checked prior to assuming care of any child placed. More information is detailed in the Family Support Carers Scheme located here: https://www.argyll-bute.gov.uk/sites/default/files/family_support_carers_scheme_guidance_for_carers.pdf

Foster Carers changing their role

The 2009 Regulations require that the approval of foster carers specifies the number and ages of children they will foster. It is possible for changes to be made to the approval at a later date, and there are procedures for doing this. Sometimes foster carers change their role e.g. a temporary carer may become a permanent carer for a child in their care or carers may change their approval in respect to the number or ages of children for which they are registered. Any proposal for change should first be discussed with the supervising social worker. This change will be considered, after reassessment, at an Approval and Matching Panel.

It is important that the implications of changes are understood and thought about - the expectations of different types of carers and placements are obviously different, as is the nature of the support offered. It is also important that the financial implications of

changing status are understood and you should discuss the different payments with your supervising social worker.

This type of change to registration is different from those urgent situations where you might be asked to take a child or young person who is older, younger, or beyond the numbers of children mentioned in your official approval. In these circumstances a designated manager can agree a temporary change of approval (a variation) to facilitate this.

Changes within the Fostering Household

There is a clear expectation that foster carers will share information regarding any changes to their household, i.e. where a single foster carer marries / remarries or has a partner who will be involved in the fostering task; it will then be necessary for the partner to undergo a full assessment with requirements in terms of statutory checks being completed. Any unpredictable changes should also be shared i.e. death of a family member, separation, criminal charges and any sudden illness. Significant changes in circumstances often require immediate notification and further reassessment of the foster carer.

Fostering Placement Limits

The Scottish Government laid in Parliament an amendment to The Looked After Children (Scotland) Regulations 2009, to introduce a maximum foster care placement limit of three unrelated children with exemptions for sibling groups and emergency placements. The amendment Regulations came into force on 29 December 2014. This means that the law does not allow any new foster care placement to accommodate more than three unrelated looked after children. The new law will not apply to placements that were functioning successfully prior to that date. There are however exemptions for sibling groups and emergency placements to go out with the placement limit in exceptional circumstances. In addition, foster carer's birth and

adopted children and those young adults, who were previously fostered, but whose foster carers have made the transition to continuing care providers of the young adult, are not included in the placement limits.

Paid Respite and Foster Carers

The general expectation is that all children in a foster care placement will be included in family holidays wherever this is possible. Any break (respite) taken by foster carers which does not involve children should be planned very carefully. This is necessary to avoid disruption or distress to children in placement. One way to do this is to plan to take a break between placements.

Carers are entitled to 14 nights paid respite per year. The year runs as per the financial year from 1st April to 31st March. Prior to taking their leave, foster carers should consider using their own network of assessed family carers as an alternative to short break carer support. This helps to minimise disruption and distress to children and also helps promote a sense of belonging within the family they are placed. Nominated family carers must be **assessed at least 2 months** prior to the carer's proposed respite dates. If family carers have already been assessed, foster carers must inform their supervising social worker and the child's social worker of their plans to utilise them at least **6 weeks** before their proposed respite dates.

Where it is not possible to use their own support network in this way, foster carers must submit a written request to the fostering service at least six weeks before their preferred respite dates. It is to be noted that there is no guarantee that all dates will be available, particularly during school holidays. Foster carers are therefore requested to consider a range of alternative dates when making their request. Foster carers are requested to avoid making respite requests during school term, where this is going to disrupt the child/young person's schooling due to having to be temporarily placed in another area. This also recognises the position of educational establishments, who don't expect any pupil to miss schooling to facilitate a family holiday.

Respite for the Child

It is important to distinguish between an arranged “break” for a foster carer and the need for planned respite for a child who is displaying particularly difficult or challenging behaviour. Such respite may be required but will always be subject to consideration of the needs of both the child(ren) and carers, subject to the terms of the child’s plan, and be dependent on the availability of an appropriate short break placement for the child. If appropriate, alternative care should be provided within the foster carer’s own network, as per the procedures described previously, and in full consultation with the supervising social worker and child’s social worker, as this maintains a less disruptive situation for the child.

Placement Endings and Transitions

Fostering placements may end for a variety of reasons. In some cases children may be rehabilitated with their birth parents or placed with another family member (kinship care). Young people may reach an age where they decide to return to their families or move to some other form of accommodation. Some children will leave foster placements because a permanent or adoptive family has been identified for them. In some cases a placement has to be brought to an end because it is no longer sustainable and is said to have either broken down or disrupted.

Rehabilitation

Children who have been separated from their families for a lengthy period will need a gradual reintroduction with close monitoring by social workers to ensure that it is safe for the child to return. Depending on the age of the child and the length of time they have been accommodated, this can be a confusing and upsetting experience for the child and it is not unusual for their behaviour to regress. Carers need to be able to support and encourage them, which clearly is far easier if the rehabilitation seems to be a positive move. The most difficult situations are those where carers are uncertain about whether the Child’s Plan is right for the child or have definite concerns about whether the child will be safe. Carers who have such concerns should ensure that they make these known to their supervising social worker and the child’s worker.

Carers who are recognised as relevant persons in the Children's Hearing system have the right to put their views in writing to the hearing.

Carers will also have difficulty when they and their families have formed an attachment to a child and find it hard to let them go. It is fine for carers to acknowledge that they will be sorry to see the child leave, and to acknowledge the child's own feelings, but it is not helpful to the child if they perceive their carers as being ambivalent or even hostile to their birth parents. Children move on most successfully when they have the 'permission' to go by those they trust.

When children return home, their worker should be given all of their belongings, including the clothes in which they arrived and all new clothing and possessions. If the child has a 'memory box' or other mementos and photographs, these should be passed on. Foster carers are often custodians of the child's possessions and memories, therefore, it is vital that they safely store and meticulously collect, preserve and cherish items on behalf of the child.

Leaving Care

Preparation for leaving care can be a frightening prospect for young people, especially those who cannot return to their families and who have little or no support in the community. These young people are some of the most vulnerable, and they are at great risk of homelessness and exploitation. Foster carers have a major role in preparing young people to move on to independent living. This may be in practical ways, such as teaching them the necessary skills of cooking, washing, housekeeping and budgeting, as well as how to make decisions and choices. Another important aspect of this preparation includes discussion about social skills, personal relationships, role modelling and lifestyle choices.

In preparation for independence a young person should be provided with their NI number, birth certificate and bank account information.

The new legislation, the Children and Young People (Scotland) Act, fully implemented in 2015 has a significant impact in relation to new rights regarding young people who are Looked After and Accommodated. The Act ensures better permanence planning

for looked after children by giving all 16 year olds in care the right to stay in care up to the age of 21 and extends the support available to young people leaving care for longer (up to the age of 26).

There is a legal duty to appoint a Pathway Co-ordinator, but before this is done, the views of the young person must be sought and taken into account. All looked after children will be considered for referral to the Throughcare service, at their looked after reviews from the age of 15 ½ years. The Pathway Co-ordinator (a member of the Throughcare Team) must ensure that a Pathway Assessment is completed. This is to ensure that young people are prepared for leaving care and only leave when they are ready to do so at a time that is right for them.

Care leavers should never be discharged from care to homeless accommodation. There are various options for young people leaving foster care if they do not return home:

- Remaining with foster carers who become continuing care providers.
- Transition to new carers who are continuing care providers.
- Supported residential accommodation.
- Supported tenancies.

Permanent Fostering or Adoption – the impact on foster carers when children move on

The feelings of foster carers when children move on will vary, and for many the experience will simply be the culmination of their role with that child, and they will be content to see the child move on with robust child's planning. However, many children will have had lengthy placements during which they and the foster carers will have formed a strong, healthy attachment. Grief, and a sense of loss are the understandable consequences in these situations. Other children in the foster home, whether they are the carers' own children or other fostered children, can feel intense grief and anger when told that a child will be moving on. They may not understand why it needs to happen and the carers may experience a considerable pressure from their children at a time when they themselves are feeling particularly vulnerable.

Sometimes the feelings of foster carers are made worse by the fact the child is very excited about the move and it seems as if they won't miss the carers. It is true that some children may not have the depth of attachment which carers thought they had, but it is also the case with younger children that they can be attracted by the novelty of a new family but do not understand fully what it means, or that the move is permanent.

It is natural for prospective adopters or permanent carers to be excited about the prospect of a child joining their family, and this may be painful for foster carers. Introductions always become easier if the foster carers and the new family strike up a natural rapport. This depends on 'chemistry', and will not always happen. It is especially difficult if the foster carers are not confident that workers have found the right 'match' for the child. However, it is in the best interests of the child for both families to work together and for the child to have a sense that they are in agreement with one another. Children are usually quick to pick up the moods of adults and it will unsettle them if they feel they are at the centre of a conflict.

The supervising worker has a vital role in supporting foster carers and their family in managing their separation from the child. It is important that the emotional impact of the move is discussed, as well as the practicalities. Foster carers have a major role in helping children to make the transition to a new family, and their feelings about the move can be very influential in determining how the child copes with the move.

The supervising social worker will need to discuss with the carers any practical arrangements which need to be made in order to facilitate the introduction. This includes child's planning around any important events which limit the carer's availability. It is essential that carers are able to spend time with the prospective adopters, because they will need to spend increasing amounts of time each day with the child and see them at different times in order to familiarise themselves with their routines. Foster carers with busy households will need to think about ways of ensuring that the adopters have privacy when they visit the child.

In the early stages of an introduction the child will need the support of their foster carer. They need to feel safe, and will only do so if the carer is present. Carers need to be

available to accompany the child at important stages, such as their first outing with the adopters, and the first visit to the adopter's home.

Preparation of the Child

Preparation of the child should be geared towards their age and level of understanding. For older children, there is an expectation that life story work will have begun before a family was identified for them, so that they will have some sense of who they are in relation to their birth family, why they cannot be with them and why they have to move on from their current carers. It is the responsibility of the child's social worker to co-ordinate life story work but foster carers have an equally important role because the child may want to talk when the worker has gone, or there may be behavioural repercussions which the carer needs to manage.

Preparation of younger, pre-verbal children clearly has to be much more limited and immediate. The adoptive family will have the responsibility of helping them with their life story in the future, but will need the information and materials with which to do this from the social worker and the foster carers. This is where it becomes important that foster carers have kept records and photos of important events in the child's placement with them which can be made into an album. It is also important for the foster carers to include themselves and their family in some of the photographs. This will help the child to develop an understanding of who looked after them in their early years.

The worker for the adopters should ensure that they have put together a 'family book' about themselves for the child to whom they are being introduced. The foster carer can begin to use this a few days before the introduction starts, and it will help them to explain that they are going to live with a new family, and what they are like. There may be concerns about whether young children will 'understand' but even some of the youngest will enjoy looking at photos and will recognise people when they meet them. The carers will need to go over the news with them many times, helping them to make sense of it and getting their reactions. Whatever the age of the child, it is better if they are told who they are going to meet by using first names, rather than 'new mummy and daddy', as this can be confusing and may feel to the child as if they are being rejected by their foster carers.

Linking Meetings and Matching Panels

When a permanent or adoptive family has been identified for the child, a formal meeting – a linking meeting – will be held to discuss their suitability. Foster carers will have an opportunity to attend part of the meeting in order to give their view of the needs of the child. They cannot be present for the part which discusses personal details about the proposed adoptive family, but their worker should have shared non-confidential information with them at an earlier stage. If the meeting agrees to link the child with the proposed adoptive family, the case is then discussed at an adoption or fostering panel.

Child's Planning Meetings for Introductions

When the matching has been approved, a Child's Planning meeting will be held, and will include the child's current carers and the new family, together with their workers. This meeting will discuss how and when the child will be told and how they will be introduced to the new family. The intention is to ensure that everyone is clear about the process and what is expected of them. The meeting is also an opportunity for the foster carers to start sharing details about the child's routines and likes or dislikes with the new carers. The meeting will also consider the following:

- Any practical arrangements the carers/adopters will need to make in order to receive the child, for instance in relation to work or provision of equipment. Foster carers will also be asked to think about what items of equipment or toys they will pass on to the adopters.
- Arrangements for the carers and their family to have time with the child and say their goodbyes before they leave.
- Contact – for instance, continuing contact arrangements with the birth family, or post-placement contact with the foster carers.
- Arrangements for social work support.

The Aim of an Introduction

The aim is to make a gradual transfer of the child's attachments from the foster carers to the prospective adopters and from the child's current home to their new placement. It is also a transfer of the parenting role from the foster carers to the prospective adopters. There are some aspects of the process which are common to all

introductions, but there will be variations depending on the age and level of understanding of the child. The paramount consideration is that the child has to feel safe and supported at all times.

The most difficult introductions are those of children aged 1 to 3 years. Any child of that age is especially likely to have difficulty in separating from parent-figures. This is compounded for children who have been accommodated because of their previous experiences of separation, perhaps under distressing circumstances. In addition, there are obvious limitations to how much can be explained to them verbally about what is going to happen to them. However, young children are highly attuned to non-verbal signals, therefore adults need to be very aware of the messages they are giving the child through their body language. It is important for all children to receive consistent, clear and positive messages from the adults around them. Children move most easily if they feel they are being 'given' rather than 'taken', and that they have the permission of their foster carers to make this new relationship. Children who do not experience this may believe that they were 'stolen' by their adopters, with the result that they feel anger, anxiety and grief – all of which may persist into adult life.

Length of Introduction

The length of introduction depends mainly on the age of the child, but some individuals may need longer than others. For very young babies, the process should not take longer than 3 days: a short visit on day 1, followed by a discussion between the couple and their social worker to confirm that they want to proceed. On day 2 they will have a longer visit and the child can be moved on the following day.

Children around the age of 12 months will need a little longer – perhaps 5 days – and toddlers may need about a fortnight. These young children should have daily contact with the new family because their memories and sense of time are very limited. It is important to monitor the child's reactions carefully, because they will usually give signs that they are ready to move. Introductions which go on for too long are confusing and distressing for children because they will be uncertain about where they belong and who is in charge of them. They will also find it very tiring.

Older children may have contact every 2 – 3 days rather than daily, but the introduction will usually be longer than for a younger child.

All introductions should start with a short meeting between the child and the family on the child's home ground. This pattern will continue, with the meetings becoming longer and when the child feels comfortable with the family they will start going for outings. At a later stage, the child will begin visiting their new home and spending longer periods with the new family. Children need the support of their foster carers throughout the introduction, but as they get to know their new family there will be less need for the carers to be physically present.

Patterns of Introduction

Children who have a healthy attachment to their foster carers are likely to be shy at the first meeting and should be allowed to control the pace at which they approach the adopters. It helps if the adopters bring one or two toys with them, which they leave with the child. The visits will get longer and perhaps on the second or third visit will begin to include short outings with the prospective adopters. Again, this has to be at the pace of the child, and with involvement of the foster carers, who can withdraw as they see the child becoming more comfortable. During the visit, the adopters will become more involved in sharing the care of the child with the foster carers. This gives the message to the child that the adopters are people to be trusted, and also that this is a different kind of relationship from that which they have with most visitors to the home.

When the child feels confident with their new family the focus of the introduction will move to their adoptive home, with the foster carers accompanying them for at least the initial visit. These visits will then lengthen until the child is spending as much time as possible with their adoptive family prior to the actual move. During this time, they can begin taking some of their possessions, so that there are familiar things waiting for them when they arrive. Overnight visits are not necessary for toddlers, and can be confusing for them. It is better for them to be familiarised with their new bedroom when they are visiting the house, perhaps by having their afternoon nap there, if that is part of their routine.

Moving the Child

For children who are subject to a Supervision Order a Children's Hearing will be necessary in order to change the place of residence. It is preferable if the child does not have to attend the Hearing, but the Panel may not agree to dispense with their presence. If the child has attended, and the move has been agreed, the child should nevertheless return to their foster home before moving to the adoptive family. Children should never be 'handed over' after a Hearing. They should also not be moved late in the day when they are tired and needing their own bed. It is better that the adopters collect the child early on the following day with only the foster carer and supporting social worker present. The move should be managed quietly and not be protracted, but the adopters should contact the foster carers the next day to let them know how the child has settled.

When the child has moved, it is helpful if there can be a period of contact between the carers. The foster carers can be reassured that the child has settled, and can give some support to the new family. Contact with the child after placement can be very reassuring for the child, who can see that their former carers are alive and well. The timing of these needs to be considered carefully, because some children may think they are moving back to the foster carers. Some carers make strong and lasting relationships which mean that contact for the child can continue. This is ideal, but can only happen if the respective carers are comfortable with one another and clear about their roles in the life of the child.

When the day of the move arrives, a worker should be present to give support if needed.

Placement Breakdowns and Disruptions

The Family Placement Team and the care team around any child have a paramount duty to safeguard and promote the welfare of the child. There is a strong focus on the child's health and well-being needs, as defined in the SHANARRI indicators. Argyll & Bute Council in seeking to deliver a high quality fostering service, strives to ensure that every child secures stability and continuity of care. Placement moves, breakdowns and disruptions in foster care can be distressing and at times traumatic for the child and the foster family. While we can never completely eradicate such

difficulties, it is imperative that continuity of care for every child who enters foster care is highly protected. Ideally, when placements end it should be in a way which is planned and is as positive for the child as possible. The transition should be in keeping with the Child's Plan.

Unfortunately, this is not always the case, and children may move in circumstances, which are far from ideal, sometimes as a result of crisis and emergency. Even in such circumstances the foster carer, supervising social worker and child's social worker have a responsibility to ensure they support the child and minimise potential harm.

Foster carers who decide that they cannot continue with a placement, and wish the child to be removed, are required to give 28 days' notice in writing; enabling further assessment, planning and matching of alternative care and a planned transition. In exceptional circumstances, where it is judged that the child presents a risk to themselves or to others, carers may request that the child be removed immediately.

Any placement can run into difficulties which lead the carers to decide that they cannot continue. This is referred to as a placement breakdown if the placement was a type, which was not planned to be permanent. It includes situations where children have remained on a longer term basis with carers because there was no alternative resource for them. A breakdown in a child's permanent placement is referred to as a disruption.

Any breakdown of care or disruption must be recorded in the foster carer's individual chronology. A chronology is a summary of all significant events in respect of a foster carer to ensure analysis of key events, patterns and trends and the impact they might have on the child and foster carer.

Placement Disruptions

Disruption is defined as the premature ending of an adoption or permanent fostering placement. It could also occur during the introduction of a child to prospective adopters or foster carers.

Disruptions are not isolated events, but part of a process. There will usually have been indicators that the placement was in difficulty, possibly over a very long period of time. Workers and carers need to make sure that they communicate well with one another, because this is the only way to ensure problems are shared and supports put in place. The placement might still disrupt, but it is more likely that people will be able to work together to mitigate the worst effects.

Everyone who is involved in fostering needs to accept that no matter how careful the matching and planning, it is inevitable that from time to time there will be disruptions. It is important to manage the situation as constructively as possible, and to recognise that although there were problems, there may also have been some positive aspects to the placement. Although a disruption means that something went wrong, it does not necessarily mean that the child should not have been fostered, or that the family should not be carers.

There are many reasons why a placement may disrupt. One difficulty is that it is never easy to predict how a child will respond to living in a family, especially if their previous experience has mostly been in residential care. Furthermore, although every effort should be made to gather all available information and share it with the carers prior to placement, there will always be factors which are unknown, or whose importance is under-estimated. Quite often, it is these elements which are at the root of disruption.

It is equally difficult for carers, particularly if they are new, to know how they and their families are going to react to the realities of caring for someone else's child. Once approved, carers may feel that they should be able to cope with all eventualities. However, the truth is that families bring with them many different qualities and everyone will manage certain kinds of children and situations better than they manage others. Any addition to a family will make an impact on the people within that household and on their relationships with one another and this can happen in ways, which are both unexpected and unwelcome. In some cases the outcome might be a disruption.

Families that foster do so with a willingness to support and help children who generally have faced difficulties in their early years. This means that for most carers, one of the

most difficult situations they can face is that of the child who does not respond and who, several years into placement is no closer to the family than the day they arrived. A placement of this kind might end because the carers feel they have reached the limits of what they can do for that particular child.

Sometimes young people decide that they want to return to their birth family, and in that sense the placement will have ended prematurely. However, the relationship between them and the foster carers might still be amicable; therefore the move would not be seen as a disruption.

Disruption Meetings

When a placement has disrupted, a meeting should be held to look at the reasons for it happening. Everyone who was involved in the placement will be invited to the meeting, although the child does not usually attend. The workers will submit written reports, and both child and carers may be asked to complete a form giving their comments about the placement. The meeting should be used constructively, and in a way which helps the child's worker to plan for the future of the child. The minutes of this meeting will be presented to the Approval and Matching (Adoption and Fostering) Panel so that they also will have the opportunity to discuss the placement and the reasons for the disruption.

LAAC Review

Following the disruption meeting there will be a LAAC review for the child to plan for their future. The former carers may be asked to attend especially if they feel able to play a different role in the child's life.

Foster Carer Review Following Disruption

There will also be a Foster Care Review to look at the effect that the placement and subsequent disruption have had on the child, the carers and their family, and to make recommendations about their future as foster carers.

Permanent Care for Children and Young People

For those children and young people where it is assessed that an alternative family setting is the most appropriate environment for them to live, grow and develop successfully, they should be cared for within a safe and nurturing family and have the opportunity to develop security in relationships. This is an aspiration which most good parents have for their children and this is also the Argyll & Bute Council's hope for all children and young people. The service works with children, young people, their families and other partners to help achieve this goal. When a child is looked after, every effort will be made to enable them to grow up within their birth family network or with other adults with whom they have an attachment, where this is possible and in their best interests. The views of children will be respected; their race, religion, linguistic and cultural heritage will be considered in the Child's Plan. The paramount consideration in all decision-making is the child's welfare and best interests throughout life. When it has been assessed as unlikely that the child will be able to return to the care of their birth family network, Argyll & Bute Council has a responsibility to consider other plans for their permanent care.

In order to meet the long term needs of some children and young people, Argyll & Bute Council seeks to recruit adopters and foster carers who are able to provide permanent care for looked after children and young people. This would be in relation to all ages and circumstance but often the most acute need is for permanent carers for those children and young people of more than five years of age; for those who have had traumatic experiences or multiple placements, and for sibling groups. Enquiries from foster carers about the possibility of becoming permanent carers for our children and young people are most welcome.

Child's Planning and Decision Making for Permanent Care

Most children and young people are placed in foster care with a view to being returned home. When assessment has ruled this out, or placement with parents or others have not worked out, children / young people will be assessed in relation to their longer term care. Any recommendation about permanence will be made through a Looked After Child Review and then a Permanence Planning Meeting. The child's social worker and their team leader have to prepare considerable assessment information, detailed in a Permanence report with recommendations as to the best outcomes for the child that would achieve permanence, including exploring in detail all the legal options that

would best meet the childs' needs. Legal services review this report and provide a key report with recommendations in respect of permanence.

The Fostering Panel will then have a role in considering this, making a recommendation about whether a child should be registered for a permanent placement and if so, which legal approach to securing permanent care for the child would be in the child's best interests. The Fostering Panel may make recommendations about the need for adoption for specific children, about the suitability of applicants to adopt and about the matching of specific children with specific prospective adopters. The Fostering Panel can make recommendations about other legal routes to achieving secure, permanent care for children and young people, for instance with foster carers.

The Fostering Panel (Approval and Matching Panel) is composed of a Medical and Legal Adviser and others whose professional or personal experience (for instance as an adoptive parent) allow understanding and a variety of perspectives on these issues. Recommendations from Fostering Panels are passed to the Council's Agency Decision Maker who is responsible for making decisions on these matters.

Fostering Panel recommendations are made on the basis of the report on the comprehensive assessment of the child's current and future needs as compiled by the child's social worker. The views of children and young people and parents must be represented at the Fostering Panel.

When the Agency Decision Maker makes a decision to pursue permanence as the Child's Plan, the Family Placement Practice Lead has the responsibility for implementing the resource finding strategy for each child, young person or sibling group. Any expression of interest from an adult who already knows the child, such as a relative or the current foster carer, is also explored in terms of a possible permanent carer. Many foster carers and their families have successfully applied to look after a child on a permanent basis. This often comes about when it is clear that the child will not be able to return to parental care and a foster carer feels committed to looking after the child, with this commitment based on their experience of caring for that child and their knowledge of and relationship with the child.

For children and young people who have been subject to supervision requirements through the Children's Hearing system a Children's Hearing must consider and give formal advice to the Court (when the application for permanent care arrangements are made).

Permanence and Contact

It will be in the best interests of many children and young people to maintain some direct or indirect (e.g., by letter) contact with relatives or others who have played an important part in their lives. The purpose of contact, when a child is placed permanently away from their birth parents, is primarily to acknowledge their past, promote and enable an understanding of their origins and encourage a positive sense of their ethnic and cultural identity.

Every effort will be made to place sibling groups of children together. Where this is not possible or appropriate, efforts will be made to maintain and promote ongoing contact between them. This includes siblings and half siblings born after the adoption or permanent placement.

As with other permanence decisions, the decision to place or not to place siblings together, or for some exceptional reason not to promote their lifelong relationship through contact, must be made by the Agency Decision Maker or Head of Service.

Legal Options

There are a variety of legal routes to securing permanent care arrangements for children and young people. Factors to consider when choosing the most appropriate route will be:

- Age of the child
- Needs of the child
- Cultural, religious, linguistic heritage
- Current placement
- Childs' views and wishes
- Parents' views

- The best interests of the child

The chosen route will be a decision of a Permanence Review Meeting held under agency Looked After and Accommodated Child procedures (2007). Some of the legal routes to securing permanence are:

- The Council may match children with approved adopters who will then in turn directly petition the court to adopt the child under section 29 of the Adoption and Children (Scotland) Act, 2007.
- The Council may apply for a Permanence Order under section 80 of the Adoption and Children (Scotland) Act, 2007.
- Individuals (e.g., an adult who has taken on the parental role and provided care for the child) may apply for parental responsibilities and rights under Section 11 of the Children (Scotland) Act, 1995.
- The child may continue to be accommodated under a Compulsory Supervision Order (CSO) through the Children's Hearing system under Section 83 of The Children's Hearing (Scotland) Act, 2011. This order must be reviewed a minimum of once per year.
- Although not always deemed a legally secure permanence route, with some children and young people, when there is agreement and consensus between the birth parent and the local authority that the child's long-term accommodation is in their best interests, permanence can be achieved. This consent with the birth parent can promote positive outcomes for a young person based on partnership with parents. Legally this arrangement is contained within section 25 of the Children (Scotland) Act, 1995 and is often referred to as voluntary accommodation.
- Adoption: When parents/those with parental rights and responsibilities are not in agreement with a child's plan for adoption, the Council may apply for a Permanence Order with the authority for adoption under section 83 of the Adoption and Children (Scotland) Act 2007 to dispense with their consent and free the child for adoption. After this, the Council holds parental responsibilities until such time as an Adoption Order is granted.

Older children and young people with significant emotional ties that should be maintained and supported are less likely to be registered for adoption. In adoption of

children of any age, ongoing direct or indirect contact between a child and specific members of their birth family is likely.

The social worker conducting the assessment will provide information about the quality and purpose of contact with birth parents, siblings and/or significant others and make recommendations to the court about any conditions that should be considered when the permanence or adoption order is granted.

Permanent Care – Preparation of Children and Young People

It is the role of the child's social worker, in collaboration with others such as the child's current foster carers, to ensure that the child has adequate preparation for moving on to their permanent placement. Guidance on helping children and young people move on is available for foster carers from social workers, but in any event this work would be part of the Child's Plan, which should make clear the role of the foster carer in any transition work with the child.

Permanent Care – Linking Meetings

This is the term used to describe an early discussion about potential carers for specific children and young people. The meeting involves those responsible for assessment of potential carers for him/her. Linking meetings clarify what further information or preparation is needed with those involved and will make a recommendation as to whether a possible carer has the potential to meet a childs' needs and should proceed to a Fostering Panel for consideration of matching.

Permanent Care – Fostering Panels - Matching

Fostering Panels must recommend whether a specific child should be matched with a specific carer. If the child is registered for adoption, the Fostering Panel will also consider whether the criteria for an adoption allowance are met.

Permanent Care – Financial Assessment and Recommendations

Where adoption is being considered, the child's needs for specific financial support and eligibility for benefits must be considered in their assessment, as will the applicant family's financial circumstances and ability to provide materially for the child.

Part of the assessment of applicants as permanent carers for a child is about the applicant's ability to provide for the child in financial and material terms. In the main, it is expected that those taking on the permanent care of children and young people will be able to do this within their own financial means (including, where appropriate, any financial support available from the Department of Works and Pensions).

However, adoption allowances may be payable on occasion, for example to make it possible for a carer to adopt siblings, and there is in place an Argyll & Bute Council Adoption Allowances Scheme. Adoptive families are eligible to apply for all national benefits such as child benefit, tax credits and support for disabilities, etc.

Permanent Care – Co-ordination of New Placements

A member of the social work service would be identified as the person responsible for co-ordinating the arrangements for introducing the child and carer / carer's family and for early placement planning. This would include confirming any contact arrangements.

Permanent Care - Support

Argyll & Bute Council is committed to responding to the support needs of adopters, permanent foster carers, and the children and young people placed with them. Predictable needs for support and support options should be discussed at fostering panels (those considering the matching), and at co-ordination meetings, and between the carer and the social workers involved.

Permanent Care – Disruption of Placements

When permanent care placements come to an end, this usually involves distress and disturbance for those most closely involved, most notably the child. Argyll & Bute Council expects all carers, permanent or otherwise, to highlight at the earliest stage any difficulties they are experiencing in meeting the terms of the agreement they have with the Council in respect of looking after a child. Where a carer is of the view that the permanent placement they have agreed to is now no longer possible, the expectation is that they will work with the service to ensure the effects of the disruption are minimised for the child and to plan a move on for the child. The Council has a procedure which is followed when disruption occurs and in most cases a Disruption

Meeting will be convened to consider the implications of the disruption. For example, there may be issues which have to be addressed; in terms of the placement itself, e.g., areas of a carer's competency where additional work is needed by the carer; in terms of the Council, e.g., level of supervision or support that had been provided.

The Council expect that when there are signs that a placement might disrupt, or where the level of tension and stress being experienced within the placement suggests help is needed, that assistance would be sought by carers from relevant agencies, including social work, in an effort to avoid disruption where is possible and in the best interests of the child.

Section 6

Children and Young People

Listening to Children and Young People

Those working with children and young people who are looked after away from home must, at all times, remain clear that the welfare of children and young people is paramount in all decisions that affect them, and of the responsibility to seek and have regard to the views of children and young people in decisions that affect them.

The adults making care arrangements however, can at times be preoccupied with the necessary practicalities, procedures and negotiations and this sometimes results in reduced sensitivity to the child's experience and feelings.

Arriving in foster care is a frightening experience, especially if the placement has had to be arranged quickly, without planned introductions. When children/ young people's anxiety is very high due to the move or previous trauma, it may be harder for them to understand what social workers and others involved, have said. It is important that all concerned consider the child's views and feelings about the move. Foster carers have a key role in offering reassurance in a way and at a pace suited to the individual child's level of understanding and emotional needs.

Underlying some children / young people's fear and anxiety may be questions such as:

- Does my mum/dad/sister/brother/gran/granddad know where I am?
- When can I see them?
- Will this family like me?
- What will they do if I'm 'bad'?
- Will there be others here?
- Will anyone here hurt me?
- What happens if I wet the bed?
- Can I stay at my own school?
- Will they leave the landing light on?
- If they don't like me, will I get sent to a children's home?
- Can I see my friends?
- How long will I be here?
- What time do I have to go to bed?

- What do the carers know about me?

If trust, respect and understanding are to develop between children / young people and the foster carers who look after them, the seeds of these must be sewn at the beginning. Alongside the warmth, individual attention, consistency and routine that are essential for children and young people adapting to change, the following are usually helpful:

- Listening carefully to children and young people and letting them talk about their concerns in their own way and at their own pace.
- Giving time and opportunity for the child to talk and ask questions.
- Telling the truth (in age and stage appropriate manner) and not making promises that might have to be broken.
- Helping the child understand what might happen next.
- Explaining what must be written down and why?

Foster carers who produce an introduction sheet or profile with their photos and simple details about who is in the family have often found this can be a great way of alleviating anxiety in children and young people who are about to be placed.

The foster carer, supervising social worker and child's social worker should all ensure the child, dependent on age and stage, has information regarding how to contact their social worker, and Who Cares Advocacy Services.

Initial Planning Meeting

A planning meeting to consider the needs of the child or young person must take place for every child / young person who is received into foster care. This meeting must take place within three working days of the placement beginning. The meeting is known as the 72-Hour LAAC Planning meeting. The meeting will be arranged by the CARO (Care Assessment and Reviewing Officer) and will involve the child / young person (depending on their age / stage of development), their family members, the child's social worker, the foster carers and their supervising social worker. The meeting must consider the following:

- The reason the child is looked after away from home and the child's plan for him/her.
- The legal basis on which the child is placed.

- The role of his/her parent/s, other significant adults and siblings; how they will maintain a role in the child's life; contact arrangements and details of who has parental responsibilities and rights for the child.
- The child's personal history, religious persuasion, cultural and linguistic background and racial origin.
- The child's state of health, need for healthcare, the name of their GP (during the foster placement) and arrangements for medical consent.
- The child's educational needs.
- Arrangements for financial support of the child.
- Arrangements for other activities for which consent needs to be obtained, such as school outings and activities.
- The circumstances where it is necessary to obtain advance approval for the child to stay away from the foster carer's home or for someone other than the foster carer to look after the child.
- Arrangements and frequency of social work visits to the child and of Looked After Child Reviews.
- The work to be carried out and with whom, to enable the placement goals to be achieved.

When siblings need foster care, Argyll & Bute Council always try to place them together, unless there are exceptional, specific reasons why it may not be in their interests to do so. When placement together is not possible, contact arrangements will be established and close co-operation between the foster carers involved is essential in supporting these. Ideally, the siblings should see each other in their placement settings from time to time, not just during contacts taking place formally elsewhere.

A child's needs are often most likely to be fully met in a family that matches their religious, racial, cultural and linguistic background. However, when this is not possible it is essential that foster carers and social workers are aware of this and the child's plan must reflect how their needs will be met.

Children in foster care come from a wide range of cultural backgrounds. This is reflected not only in their race, religion and language but also in the way they have

been brought up. They may have different skin colour, hair, dress or religious beliefs. They speak a different language, or eat different types of food. Foster carers need to recognise, research, respect and celebrate these differences. They may also need to support them in feeling positive about themselves and being proud of their heritage. Carers will be provided with advice and information from the wider care team in relation to promoting diversity.

In all aspects of care, consideration will be given to the child's need for continuity in their important relationships, not only with regards to their family but also in relation to school, heathcare and routine activities.

Where a child needing a placement has a disability, the placement should be suitable to meet the child's particular needs. For instance, where a child has difficulty communicating verbally, foster carers should be found who know or are willing to learn the appropriate sign or symbol language.

For children and young people who have or are likely to develop a chronic or terminal illness, it is important that foster carers are knowledgeable about the likely progress of the illness and any health or treatment issues.

Often, there may be no choice of foster placements available. Foster carers and staff involved must discuss drawbacks in the suitability of the placement for a specific child and Child Plans made to overcome them or compensate for them. For example, there may be practical ways of valuing and sustaining the child's heritage, e.g., adapting the family's diet to include dishes with which the child will be familiar, taking the child to a familiar place of worship, or involving a befriender, if appropriate, from the child's culture.

Child Plans

The Council has a duty to draw up a Child's Plan for every child who is looked after; there is also a duty to review such Child Plans. The person with key responsibility to ensure the Child's Plan is in place is the child's allocated social worker. The GIRFEC

SHANARRI well-being indicators provide the framework for the Child's Plan, which usually follows after a comprehensive GIRFEC assessment.

Whenever possible, the Child's Plan should be drawn up in consultation with the child, their parents, the foster carer and other important individuals or agencies in the child's life. If the Child's Plan is not drawn up before a child is placed it should be drawn up as soon as possible after the child arrives. The Child's Plan includes information on:

- SHANARRI well-being indicators of need.
- Immediate and longer term plans for the child.
- Details of the services to be provided to meet the care, education, health and development needs of the child.
- Responsibilities of Argyll & Bute Council
- The views of the child.
- Any person/s with parental responsibility/rights for the child.
- Foster carer/s including their name and address (except where non-disclosure of address is a condition of a legal order).
- Any other person involved in the Child's Plan.
- Role of the child's parent/s or any other person who has had care of the child.
- Arrangements for involving those people and the child in decision making.
- Arrangements for contact between the child and any important people in his/her life and any reasons why contact with any of those persons is not possible or in the child's best interests.
- Expected length of the placement, what action should be taken – and by whom before the placement ends to support and progress the Child's Plan.

Reviews of Child Plans

As noted above, the Council has a duty to review the Child's Plan for all children and young people who are looked after away from home. The review process is a way of monitoring the various aspects of the Child's Plan that have been agreed for a child, to ensure the detail of the Child's Plan has been progressed and that there is no drift in timescales, to reassess the Child's Plan if required and develop this further to meet the needs of the child.

Regulations define the minimum frequency of reviews of Child Plans for children and young people who are looked after; these have been taken into account by Argyll & Bute Council in setting the standards for reviews of Child Plans. For those children and young people who are looked after away from home review meetings will be:

- When a child first accesses a placement a Child's Planning Meeting must be held within 3 working days.
- An initial review will take place at the 6-week period.
- The second Looked After Child Review will take place within 3 months from the date of the initial review.
- Subsequent reviews must take place within six months from the date of the previous review.

These timescales do not prohibit the arranging of a review in response to significant events or changes, where a review is deemed appropriate, e.g., Child Plans are not achieving outcomes, the child no longer needs to be looked after by the Council.

Objectives of reviews are to:
Consult and take account of the views of the child, their parent/s, any person with parental responsibilities or parental rights in respect of the chid. To assess:

- The needs of the child and current circumstances and how these needs are being met.
- Whether the child's welfare is being safeguarded and promoted.
- The child's development needs are being promoted.
- Whether the placement is suitable for the child.
- The child's educational needs and whether those needs are being met.
- Consider any written reports.
- Agree the future Child's Plan.

The review should make clear the detail of the future Child's plan as well as the multi-agency and parental responsibilities of those involved in the plan. Setting out clear timescales for action are critical to the progression of the Plan.

Reviews of the Child's Plan are carried out through discussion leading up to and at a Looked After Child Review meeting. Information and views are recorded in written reports prepared for the review meeting. Where possible, the child makes their views

known through completing the Viewpoint online tool, or the 'Having Your Say' form, and for younger children Talking Mats can be used to enable them to express their views. The child may choose not to do this; they may wish one of the adults involved in their network (such as their foster carer or social worker) to help with this or to report their views to the meeting on their behalf. They may wish the advice and assistance of another person and may want that person to attend the review meeting with them. This is in line with children and young people's rights and the Who Cares Services.

Foster carers should help children/young people in their care to prepare for the review and in obtaining any advice and support they may need from other appropriate sources. The foster carer and the child's social worker prepare separate written reports for the meeting. If a foster carer finds writing what they want to say difficult, they should seek the advice and guidance of their supervising social worker. The reports should be shared with the child and their family in advance of the meeting.

The person who chairs the review will be a CARO (Care Assessment and Reviewing Officer), an independent chairperson. Amongst other duties, the Chair must ensure that:

- Invitations for the review are sent to all the appropriate people.
- All the relevant looked after children materials are completed.
- The objectives of the review are met.
- The child and parent/s are given the opportunity to take part in a way that is meaningful.
- Decisions and recommendations are understood by all involved.
- Child Plans are realistic and promote positive outcomes for the child.
- An accurate record of the review discussion and recommendations is kept and distributed to all those in attendance.

It is important that a review considers all elements of a child's life and development and that discussion covers matters that need to be addressed (e.g., areas of difficulty or problems that are being experienced by the child, as well as acknowledging areas of achievement and progress with the child and their family.

The review will have an overall focus in terms of placement recommendations and timescales regarding where the child is going to be permanently settled, e.g., birth relatives, by adoption, or in another care setting. In respect of the child's individual development, the SHANARRI well-being indicators from GIRFEC will be used as a frame of reference.

The work and preparation which leads up to the review meeting is crucial, as this ensures the review meeting has all the right information available. This allows further Child Plans to be made and prepares those in advance who will be involved in the discussion.

Section 7

Looking After a Foster Child

What Children and Young People need from those who look after them

Everything in this handbook is about what children and young people who are looked after need from those who look after them. The inspection of the fostering service and the supervision, support and training of foster carers, for example, are about ensuring that children and young people are looked after well and appropriately and that they have the opportunity to be safe, healthy, active, achieving, respected, responsible, included and nurtured.

This section of the handbook provides some information and guidance to assist foster carers to fulfil their responsibilities in relation to the health, education and safety of those they look after. Although these aspects are detailed separately below, it is important to remember that the various aspects can impact on each other, so for example, if a child has a worry about their safety, their health and education could be compromised.

Foster Carer Responsibilities

The scope of foster carer responsibilities is defined in the Foster Carer Agreement, which all foster carers must sign. These responsibilities should be carried out as far as possible in partnership and consultation with those who hold parental responsibility and with a range of professionals, in the main, from social work, health and education services. These professionals are referred to as the care team and networks around the child.

Foster carers are responsible for, and play an important role in the wellbeing and development of the children and young people placed with them. When thinking of the general wellbeing and development of children and young people it is important to remember all aspects including physical, social, educational, emotional, spiritual and psychological. As stated in previous sections the GIRFEC SHANARRI well-being indicators enable a universal understanding of the child's needs.

Of course, foster carers must also look after their own health; if foster carers (or another member of the foster care household) suffer serious physical or mental health

problems, they will be less able to manage the foster care task. Foster carers have a responsibility therefore to let their supervising social worker know of any such problems as soon as possible. If foster carers or their immediate family have or develop health problems, which could affect the care of children and young people placed, update medical checks and reassessment may be necessary.

Health

General health (including oral and eye care)

All children and young people who are placed with foster carers must be registered with a GP and Dentist. Where there is a need, children and young people should also be registered with an optician. In order to provide continuity of care, and where this is possible and practical, the child should retain the same GP, Dentist and Optician with whom they were registered while living with their parents / birth family. The decision about any change of GP should take into account the needs of the child, accessibility and the birth parents' views.

Children and young people who are looked after will often have suffered early disadvantage and may be at risk of ill health because they have not previously had adequate care. There may therefore be a need for sensitive 'catching up' activities, such as regular dental assessments and remedial treatments. Some children and young people may well be depressed, and some may harm themselves and foster carers must be alert to identifying any concerning behaviour which suggests that assessment and treatment is required from child and adolescent mental health services.

Health examinations and assessments

At the point of admission to foster care, the child's allocated social worker should phone the child's own GP practice to advise that the child is going into a foster placement. The social worker should request information from the GP to ensure that the foster carer can provide the appropriate care and support in relation to the child's health needs.

If it is not practical for the child to retain their home GP, the foster carer should register the child/young person with a local GP and arrange an appointment for them (for a general check-up) within two working days of the placement being made. The social worker should ensure the foster carer has the BAAF Health Book (known as the Blue Book) and this should be taken to the GP appointment.

The child's social worker is responsible for arranging the child's health assessment (the medical) as soon as this is practical, unless one has been carried out in the past 3 months. The child will be examined by a doctor or registered nurse. A written assessment will be provided of the child's health and their health needs will be prioritised.

Health Records and Child Plans for children and young people's health

Argyll & Bute Council must ensure that each child in a foster care placement has a Child's Plan which includes aspects which address health care needs. This may include, for example, attention to medical, psychiatric, psychological, dental or ophthalmic needs, and any necessary immunisations.

The Child's Plan for the child's health should be formed and reviewed at the 72-hour meeting and all subsequent Looked After Child Reviews. Essential health care information should be made available to foster carers when or before a child is placed.

Supervising social workers and the health professionals involved in the health assessment and Child's Plan will work to ensure foster carers are confident about meeting the health needs of the child/young person. The child's health visitor or GP is a potential source of guidance for foster carers on related health matters. Foster carers may also have contact with the Nurse Practitioner for Vulnerable Groups (sometimes referred to as the LAAC nurse) as they have duties in relation to Looked After children and young people. Foster carers have a responsibility to give social workers clear information about any illnesses, accidents, injections or health matters concerning the child. Supervising social workers have a responsibility to offer clear guidance on record keeping by foster carers.

Consent for medical examination and treatment

Written consent for a medical examination and for treatment must be obtained, usually from a parent or person with parental responsibilities for the child (this is usually obtained by the child's social worker). Young people of sixteen years or over can give their own consent to surgical, medical or dental examinations or treatment. Children under sixteen may also be able to give consent depending on their capacity to understand the nature of the treatment in terms of the Age of Legal Capacity (Scotland) Act, 1991. Foster carers should hold a record of medical consent, which can be found in the paperwork given to the foster carers at the time of placement. Where Argyll & Bute Council holds parental responsibilities, obtained through a Permanence Order, it is the Director of social work or delegated representative who can give consent and sign the relevant forms. Permanence Orders can invest certain parental responsibilities and rights directly to permanent foster carers, thus giving them the authority to consent to medical treatment.

In emergency situations, foster carers' first duty is to ensure the child has adequate attention. Any doctor treating the child must be told that the child is fostered (or placed with them on a pre-adoptive or respite basis). In an emergency a health professional can treat a child without consent where this is in the best interests of the child. The child's social worker, or manager (or the out of hours emergency service) must be contacted and advised of what has happened.

Prescribed medicines

Where foster carers are expected to administer prescribed medicines to a child placed with them, they must ensure they are clear and confident about the medical instructions in this regard. The foster carers' supervising social worker, in co-operation with those with parental responsibilities and relevant medical staff, will help ensure that the foster carer is confident about the administration of any necessary medicines and has the relevant consent. The Child's Plan should include all essential details about medical needs and ongoing medication. Whenever a child is prescribed a new course of treatment, the foster carer must record the details.

For any medication prescribed, essential details to be recorded are:

- Details of the person who prescribed the medication (GP or Hospital Consultant)

- Name of the medication
- Medication strength (for example 250mg capsules)
- Medication dosage (for example, two capsules to be taken three times daily)
- Total number of pills or volume of liquid medicine prescribed
- Date and times when the child is given the medicine

For any medication prescribed foster carers should ensure that:

- Courses of treatment are finished
- Medicines prescribed for one child are not given to another
- They are present when the child takes the medicine and should record if it refused
- Medicines no longer required are safely disposed of, preferably by return to the pharmacist, but not in a waste or dustbin
- Medicines are kept in a locked cabinet, in their original container
- The maximum dosage is not exceeded

Where the health needs of a child require it, appropriate consultation with medical personnel should be arranged. Where there is lack of clarity about medication or uncertainty about what may be taken in conjunction with any prescribed medication foster carers should consult rather than acting on their own initiative. In some situations parents may have the relevant information and in others it may be necessary to contact the community pharmacist or GP or to ask the child's social worker to liaise with the relevant people.

Foster carers who provide a placement for a child who may need urgent treatment, for example in relation to epilepsy, diabetes, respiratory problems or severe allergic reactions, must have the relevant training before placement.

Non-Prescribed Drugs / Over-the-counter Medicines

Foster carers should ensure they have enough information about a child's medical history to make decisions about the administration of non-prescribed drugs / over-the-counter medication. It is useful for this to be discussed at LAAC Review meetings to make specific arrangements about what is appropriate to give a child or young person for e.g. toothache or period pain.

When it has not previously been agreed then the child's social worker should be consulted. Should they not be available, or if it is out of hours, if there is any doubt that this is appropriate or safe, then it should be discussed with a pharmacist or NHS 24. The child's social worker should be informed as soon as possible.

However, a common sense approach should always be taken regarding the use of over-the-counter medication. Foster carers should always ensure that they follow the manufacturer's instructions regarding dosage. Aspirin should not be given to children under the age of 12.

Alternative medicines, e.g. homeopathic, herbal, Chinese should not be used without prior discussion with both a pharmacist and the child's social worker.

Drug Misuse

Foster carers should immediately notify the child's social worker if they suspect a child or young person is misusing any drug.

Children, young people and disabilities

Like other children and young people, those with disabilities have their own individual needs which are in the same context of all children and young people. That is, needs related to their physical, social, educational, emotional, spiritual and psychological wellbeing and development. As in all cases, the health care needs of children and young people with disabilities should be set out clearly in the Child's Plan. However, dependent on the nature and level of their disability, these children/young people may require additional supports to allow them to access and make use of services and facilities in order to achieve their full potential. The foster carers' supervising social worker and the child's social worker should ensure that any available information about the range of local services and support groups has been provided.

Adaptations or aids may be needed for some children/young people with more complex needs and foster carers may need special training to look after those specific children.

For some children with disabilities, care may include intimate care; where this is the case this should be discussed between foster carers and supervising social workers.

Children, young people and mental health difficulties

Where a child being placed in foster care has a known mental health difficulty, information on this should be included in the overall information passed to the foster carer and any treatment being received will also be noted. There will be times when this is not the case but when, through caring for a child, a foster carer believes that a child may have a mental health problem, e.g., possible depression, the foster carer should discuss the need for a referral to specialist services with the child's social worker and GP.

Scottish research on the mental health of children/young people in foster care (Minnis 2000) underlines that foster carers often need training in looking after children with a range of serious emotional and behavioural problems. Such problems, which often include attachment disorders, are frequently associated with experience of abuse, neglect and separation. Any such training needs should be discussed between foster carers and supervising social workers.

Understanding and communicating with children and young people who have a range of needs associated with poor mental health is skilled and demanding work, requiring reliable long term support and, at time, access to specialist consultation.

Promoting health and Safety

Children and young people learn to value their own health, and learn to keep themselves safe, through role models, adult guidance and education they experience. Some lifestyle behaviours promote or hinder good health and safety. Foster carers have a vital role in promoting those lifestyle behaviours which are beneficial to good health and safety and in generally helping children and young people learn how to keep themselves healthy and safe. The following paragraphs provide some guidance for foster carers around key areas in the promotion of health and safety.

Enuresis, soiling and sleep problems

Some children and young people who require to be looked after away from home experience enuresis, soiling and sleep problems; these are often a response to experiences of loss, fear, lack of care or other trauma, such as abuse. Guidance and support on the care and management of children and young people with these common problems may be obtained through a specialist health clinic. Initial advice about this should be sought through the child's GP. Sleep Scotland may be contacted directly on 0131 651-1392 for advice on the management of sleeping difficulties.

General hygiene, Hepatitis, HIV

Foster carers are expected to provide children and young people with a clean and hygienic home environment and to promote daily hygiene precautions when caring for a child. Good hygiene standards prevent the spread of illness and infection. The risks of cross infection are higher for children moving between homes and these need to be recognised, particularly in relation to young children. A range of minor and major infections can be transmitted via blood and body fluids.

Hygiene standards should be maintained for all children and young people looked after, for example, cuts and sores on the hands should be kept covered with waterproof, adhesive dressings. Hands need to be washed thoroughly before and after carrying out first aid procedures or after contact with bodily fluids. Disposable gloves should be used when carrying out first aid procedures. Good hand-washing is one of the easiest and best ways of preventing cross-infection. This practice should be followed by responsible adults, encouraging children to do the same.

Because the faeces of a baby can carry live traces of the polio virus following vaccination, it is advisable to check with your GP that you are immunised against polio and to maintain thorough hygiene standards after each nappy change.

In relation to hepatitis, it is recommended that all foster carers are immunised against Hepatitis B. Any expenses that are incurred will be reimbursed by Argyll & Bute Council.

Although written for staff working in nurseries, some very useful advice can be found by following this link:
www.documents.hps.scot.nhs.uk/hai/infection-control/guidelines/infection-prevention-control-childcare-2015-v2.pdf

Contraception

Contraception advice is available to young people from GPs, Family Planning Clinics and other centres.

In terms of all medical treatment including advice, the general legal presumption is that if a child or young person is mature enough to understand the consequences of consenting or withholding consent, then they do not need parents or any other adults to do that for them. They can therefore access medical advice and treatment independently. The general presumption is a child of 12 is able to provide their own consent, although of course they may be younger or older. The judgement of maturity and capacity to consent is the judgement of the medical practitioner involved. This includes a nurse or a pharmacist as well as a doctor.

In circumstances where a young person needs help to access contraception services the foster carer should discuss this with the child's social worker or in their absence with their own supervising social worker.

Pregnancy

If a young person in foster care becomes pregnant, she will need help and guidance to decide what to do. Although it is necessary for the social work service to know about a young person in their care who becomes pregnant, confidentiality and the young person's right to make her own decision must be respected at all times.

Counselling and support will be needed in helping the young person explore and balance very difficult decisions. The options around keeping a baby, considering adoption and termination are emotive areas and often arouse strong points of view. Foster carers will need to be sensitive and not allow their own views and opinions to intrude into the situation.

Similarly, should a young person in foster care be facing fatherhood they will require sensitive support.

This is obviously a time when a foster carer will also need support and it would be expected that they discuss their approach with their supervising social worker and the young person's social worker.

Diet and Exercise

Foster carers have a responsibility to help children and young people placed with them to enjoy and appreciate a balanced diet and a range of regular exercise, and to practice good hygiene. If children and young people have special dietary needs, or allergies (such as a nut allergy), or cannot take part in specific activities, this should be clearly stated in their Child's Plan.

Foster carers should check with parents (or those who know the child best) if there are dietary needs relating to their culture and religion; any such needs must be checked out and respected.

Sexual health

Children and young people who are looked after away from home may have changed schools and may have missed sex education or personal and social development lessons. They may not have received any appropriate guidance from parents in terms of personal relationships or sexual health. In such circumstances the child's social worker and foster carer (where possible, in consultation with the child's parents) will be involved in discussing the individual child's needs in this respect.

Where a child is known to have been sexually abused, support and guidance will require careful discussion between those responsible for their care and welfare. Some children and young people may exhibit sexually inappropriate behaviour, for example, acting in sexually explicit ways with other children and young people. Support for children and young people in relation to these matters is available from a number of sources. Information and advice will come from supervising social workers and social workers allocated to the child or young person.

Depending on a child's age and stage of development, advice on practical issues such as pregnancy, contraception and prevention of the spread of sexually transmitted diseases may be necessary. There are a variety of leaflets which may be useful for some young people and there are agencies which specialise in offering counselling in relation to sexuality and relationships. The National Society for the Prevention of Cruelty to Children (NSPCC) has useful information about sexual wellbeing for children and young people:
https://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/healthy-sexual-behaviour-children-young-people/

Safety for Foster Children, Young People and Fostering Households

Preventing accidents

One of the risks to children and young people's safety is that posed by accidents. Evidence tells us that every week in the UK, three children die in accidents. Accidents are more common when adults are stressed or in a hurry and inadequate supervision is often a cause. Children and young people are often absorbed in their immediate interests and may be unaware of dangers. A child's curiosity, bravado, inexperience, learning difficulty or their distress may all contribute to accidents occurring. These are the findings of the Royal Society for the Prevention of Accidents (RoSPA, telephone: 0121 248 2000, www.rospa.co.uk). RoSPA produces useful safety guidance for foster carers of young children. Foster carers must take all possible steps to minimise the risk of accidents to a child in their care.

Another good source of information is the Child Accident Prevention Trust https://www.capt.org.uk/

A Health and Safety checklist, developed by CoramBAAF, is used by the supervising social worker during the assessment process and is reviewed annually or more frequently dependent upon specific circumstances. Foster carers and supervising social workers are required to ensure that placements meet the required health and safety expectations, including compliance of foster carers with the law in relation to

the use of children's seat belts and car seats. Car seats will be supplied to foster carers when needed. A reference source for foster carers is the government road safety website www.think.gov.uk.

Fire Safety

In the process of foster carer assessment and review, supervising social workers will discuss fire safety and check, for example, that foster carers have operational smoke alarms. That electricity sockets are not overloaded and that an exit for the household in the case of fire is in place. They will also check that any building conversions, e.g. access to attic space, have been completed in accordance with building regulations for health and safety reasons. Foster carers are responsible for ensuring that fire safety precautions are in place at all times.

Window Safety

Every year around 2,500 people fall from windows in Britain and on average 55 of these falls are fatal. Around 70% of all falls involve children, and 50% of all falls involve children under the age of five. Blind cords are also a source of danger. While window safety is considered in the foster carer assessment and review processes, foster carers are responsible for ensuring that windows and window dressings meet the requirements for children and young people's safety.

Computers and Internet Safety

Foster carers are encouraged to allow children access to a computer for educational and recreational purposes. However, if children are given access to the Internet, the risks need to be understood and minimised by foster carers. Please also refer to the Social Media Policy here:
https://www.argyll-bute.gov.uk/sites/default/files/social_media_policy.docx

In today's digital age children and young people have access to a huge range of social media applications and devices. Alongside the benefits of these instant communication tools are of course the downsides. For many parents trying to keep up with latest technology is a never-ending struggle. Talking about how to stay safe and letting children/young people know that they can go to you if there is a problem are probably two of the key ways to help them stay safe.

The Child Exploitation and Online Protection Centre has put together useful information about how to stay safe online which can be found at: www.ceop.police.uk.

Some computer and internet safety tips

1. Talk to your children and help them understand that it is not ‘cool’ to give out their personal details to people they do not know in the real world. Explain that giving out personal information on the internet is dangerous and that strangers may be able to find out where they live, what school they go to, who their friends are and the dangers surrounding this.
2. If possible, have the computer or laptop located in a communal area in your home. That way you can keep an ‘eye’ on what the children are doing on the internet in a more casual way.
3. Ask your children to show you how to use the programmes they use — such as Instagram, Twitter, MSN and Facebook. It will make them feel good that they are showing you something. Help them to make sure the security settings are set correctly, such as making sure the image forwarding box is checked so that only friends can see their images and profile and that it cannot be forwarded on without their consent.
4. Use parental software such as Net Nanny. Some browsers offer integrated security applications, such as Firefox. Parental software will not block or solve all the problems that can occur on the internet, but will go a long way to helping you and your children stay safer online, especially for younger children.
5. Explain to children that whatever they post up on the internet — such as photographs, images of friends or any information — may not truly be removed forever when they want to delete them. There is a possibility that anyone on the internet could copy and use anything that is posted on the internet.
6. Talk to your children and explain that they should be very careful about accepting messages, images, or IM messages from people they do not know in the real world. Explain that they can contain viruses and also that people may not be who they say they are online or even look like the image they post on the internet.
7. Encourage your children to be careful about what they say on a ‘blog’ site and not to give personal information away. Friends can call them up for more information if

they need to.
8. Remember that mobile phones now come with a wide variety of communication applications installed, such as the internet and IM, and hold the same dangers. You should discuss these with your child/children as you would for using the internet on a PC.
9. Advise your children to NEVER arrange to meet anyone alone who they meet online. If they feel they must or really want to meet someone, advise them not to go with a friend, but to let you know so that you or another trusted adult can go with them.
10. Enjoy the internet with your child/children — it is a valuable resource and very important communication tool for both education and entertainment.

Potentially dangerous animals

The fostering service has a responsibility to minimise risk to children and young people from any source, including potentially dangerous animals in a foster placement. This section provides advice about the assessment of prospective foster carers who are dog owners and of approved carers who become dog owners. Specific guidance is given on prohibited dangerous dogs. It is important to acknowledge that a small minority of owners of dangerous dogs cannot become foster carers unless they agree to the removal of such dogs. For other prospective carers who are dog owners, a risk assessment is undertaken with the safety of a child as paramount, but also takes account of the potential benefits to a child placed. Matching a child with approved foster carers who are dog owners will obviously need to take account of the child's history, possible fear of dogs or ill treatment of dogs and the child's particular needs.

Prohibited dangerous dogs

The following dogs, which are proscribed by the Dangerous Dogs Act, 1991, are prohibited:

- Pit Bull Terrier
- Japanese Towser or Tosa
- Dogo Argentine
- Fila Barazilliero

Pit bull type dogs can also be called:

- American Staffordshire Terriers (Am Staffs)
- Irish Staffordshire Bull Terrier (ISBT)
- Irish Blue or Red Nose

Also, some kinds of American Bulldogs have been found to be Pit Bulls. If an applicant owns any of the above categorised 'dangerous dogs', you cannot be assessed to become a foster carer (unless the dog is removed from the home). If an approved foster carer acquires one of the above dogs, their approval would be terminated if they were not prepared to cease ownership.

Other potentially dangerous dogs

Special caution should also be observed when assessing households containing the following:

- Alsatian (German Shepherd)
- Rottweiler
- Doberman
- Bulldog
- Or a 'pack' of dogs (more than two dogs)

If, after a risk assessment, the supervising social worker considers a child could be safely placed in a household with one of the above dogs or a 'pack' of dogs, then this should be fully discussed with their manager. If an approved foster carer acquires one of the above dogs, a 'pack' of dogs or their dog ownership has increased from one to two or more, a risk assessment must also be undertaken. The line manager should be consulted prior to obtaining endorsement from the service manager if the foster carer's approval is to continue. BAAF have produced a booklet on dog ownership and fostering and chapter four can be accessed here: https://www.argyll-bute.gov.uk/sites/default/files/dog_pet_assessments-chapter_4.pdf

Firearms and weapons

Where any member of a fostering household keeps or proposes to keep firearms in their home, Argyll & Bute Council must be satisfied that the use and storage of the

firearms is in line with the requirements of the Police. Argyll & Bute Council will need to be assured about the purpose of any firearms and weapons kept by foster carers. Similar care must be taken with imitation or ornamental weapons and other potentially hazardous items.

Working with parents and others to safeguard children and young people

In some circumstances, foster carers may be able to assist parents learn to keep their children safe; where that is the case this would be part of the Child's Plan for the child and be subject to discussion with social workers. Foster carers are responsible for the safety of children and young people placed with them; however, others involved with the child also hold responsibilities for their safety. This includes, for example, parents, social workers, teachers, GPs, who have contact with, and knowledge of the child. It is essential that all work together to keep children and young people safe and free from abuse and exploitation.

Education

This section provides some information on the education of children and young people who are looked after and the role of foster carers to promote the child's individual educational achievement and potential.

The regulation of school education in Scotland is set out in the Standards in Scotland's Schools Act, 2000. Among the Act's provisions are the presumption that all pupils should, wherever possible be educated in mainstream schools and the requirement for schools to make more than token efforts to consult children on all aspects of their learning in school.

The requirements to make provision for children with 'additional support needs' is set out in the Education (Additional Support for Learning) (Scotland) Act, 2004. This act was updated in 2009 and one of the changes requires local authorities to presume that all looked after children and young people have additional support needs unless the authority determines that they do not require additional support to enable them to benefit from school education. Two useful sources of information and practical advice

about the inclusion of looked after children in education are PINS www.pinscotland.org and Enquire www.enquire.org.uk/.

Local authority responsibilities for ensuring the educational needs of children and young people who are looked after are clearly defined in the Children (Scotland) Act, 1995 (as amended) and the Looked After Children (Scotland) Regulations 2009. From April 2015 the Children and Young People (Scotland) Act 2014 came into force. The provisions of this Act include statutory requirements placed on organisations deemed to be corporate parents. As well as local authorities (and therefore schools), corporate parents include colleges and universities. Corporate parenting responsibilities extend to all looked after children aged from birth to when they cease to be looked after. This includes children in foster care, residential care, secure care, 'looked after at home' (on Home Compulsory Supervision Orders) and those in formal kinship care. It also includes disabled children who are 'looked after' during short break provision. Corporate parenting responsibilities also apply to care leavers who were looked after on their 16th birthday (or subsequently) up to and including the age of 25.

Corporate parents are required in law to prepare a Child's Plan outlining how they intend to meet their legal requirements and to review these Child Plans. The Child's Plan should identify how institutions are helping young people from a looked after background to access further and higher education. For more information, see the Inform series of guides on the CELCIS website: www.celcis.org/.

Foster carers have a major contribution to make to children and young people's education and learning opportunities. Foster carers can help in the formation of Child Plans, in identifying when there are difficulties, in encouraging school attendance, supporting homework and recognising progress. They may also play a key role in the resolution of bullying at school.

Working in partnership with the relevant teachers, other education staff, social workers and members of the child's family is essential if children and young people are to achieve their potential. Practically, effective partnership is promoted by the child's social worker explaining the child's circumstances and foster carer role to the relevant education staff and in addition:

- The teacher's understanding of the possible impact of what it means to be looked after away from home, including on the child's abilities to learn.
- The teacher's experience and understanding of the role of foster carers.
- How confident foster carers feel in making links with teaching staff, and advocating for the child's learning.

In most situations, foster carers will play a parental role in relation to school, by taking an interest in the child's learning, providing opportunities to reinforce learning at home, attending parents' evenings and receiving school reports. Sometimes parents will continue to do these things – or there will be an agreement to share the role. It is important that the responsibilities and expectations of the adults are specified in the Child's Plan and discussed at children and young people's Looked After Child Reviews. A useful source of information about the school curriculum and advice about how parents and carers can support children in school is the Parentzone website: www.educationscotland.gov.uk/parentzone.

Additional Support for Learning Needs

Many children and young people in foster care have some level of additional support need. The term additional support for learning was introduced by the Education (Additional Support for Learning) (Scotland) Act 2004. This Act changed the way in which education authorities identify and support the learning needs of children and young people. The Act says that a child may have additional support needs if s/he is unable to benefit from his/her school education without additional support – which means help beyond what is normally given to children or young people of the same age. Children and young people may have additional support needs for a short or long time. There are many things that might act as a barrier to learning and result in a child requiring additional support for learning. Some examples of when additional support might be required could be when a child:

- Is not attending school regularly
- Has mental health problems
- Has communication difficulties
- Has behavioural or learning difficulties
- Is being bullied
- Is hearing or visually impaired

- Is particularly gifted
- Is bereaved
- Is living with parents who are abusing substances
- Is on the child protection register
- Is living with parents who have mental health difficulties
- Has English as an additional language

Not all the above difficulties however will mean that a child will automatically have additional support needs. Additional support for learning is only required when the difficulties prevent a child from benefitting from their school education.

More recently, the 2004 Act was amended by the Education (Additional Support for Learning) (Scotland) Act 2009. Through section 8 of the 2009 Act, children and young people who are looked after are deemed to have additional support needs; this in turn means that there should be an assessment of their needs by the Education service. Only when such an assessment shows that a child is likely to be able to benefit from school education without the provision of additional support, will s/he no longer be deemed to have additional support needs.

The Education Service has a responsibility to establish whether or not a child has additional support needs and, where appropriate, provide support if s/he:

- Attends or is registered with a school under the management of Argyll & Bute Council.
- Receives education in another local authority school under arrangements made by Argyll & Bute Council.
- Is placed at an independent special school or grant-aided school by Argyll & Bute Council.

Argyll & Bute Council's education establishments always aim to work in partnership with parents and other children's services (including Social Work) to try to make sure that a child's needs are met in the most appropriate way. For example, there will be times when Psychological Services and Health are involved, in assessing and, where appropriate, meeting identified need.

Where children and young people are being looked after by foster carers, the foster carers will have a key role to play in this partnership and in working to ensure that the educational needs of our children and young people are identified and met. Under the 2004 Act, parents have the right to ask for a:

- Psychological assessment
- Health assessment
- Social Work assessment
- Specialist assessment from a voluntary organisation

For children and young people looked after away from home, their education will also be part of every Child Plan; therefore any arrangements around additional support needs should be discussed at the Child's Planning meeting and Looked After Child Reviews.

Further information on what is meant by additional support needs and how these are identified and supported in Argyll and Bute schools is available, including leaflets for parents / carers. Foster carers may find these helpful in understanding what supports might be available for children and young people in their care. These can be obtained from the Education service; if there is any difficulty in obtaining these, supervising social workers should be able to assist.

Exclusion of children and young people from school

Argyll & Bute Council has procedures governing the exclusion of children and young people from school. These underline the rights of all students to have a safe learning environment. When considering exclusion schools must also take into account the responsibilities outlined above in relation to looked after children and young people.

For the Education Exclusions Policy please follow this link:
https://www.argyll-bute.gov.uk/sites/default/files/Unknown/school_exclusion_and_violence_sgainst_staff.pdf

Education Guidance re: Looked After Children:

https://www.argyll-bute.gov.uk/moderngov/documents/s138432/CECandYP%20Appendix%201%20Looked%20After%20Children%20Framework.pdf

Contact with Parents / Family / Friends

Part of being a foster carer is about working with parents of children and young people who are placed with you. It is important to bear in mind that most children not only keep in regular touch with their family but also that their parents still have parental rights and responsibilities. This means it is important to think about their parental role in decision making and getting information about their child. Your supervising social worker can help you think this through, as will the child's social worker. It is equally important to think about the role of the extended family including siblings and grandparents in a child or young person's life. For many young people, friends are important and foster carers should do their best to facilitate contact with friends where this is in the child or young person's best interests.

When a child is first looked after away from home there is likely to be a high level of contact with relevant birth and extended family members. With infants, this contact could be daily in certain circumstances. The level and nature of contact will form part of the Child's Plan. For some children and young people contact may be regulated by a Children's Hearing or other legal order. Contact should not interfere with school and nursery attendance, unless under exceptional circumstances.

When facilitating contact for babies and infants outwith their home, foster carers should provide the necessary food, nappies, clothing and cleansing materials which may be required by the child.

Foster carers are expected to keep a daily diary / log, which should include details of the child's reaction before and after contact has taken place. This should refer to the child's behaviour, general demeanour and any changes to appetite and sleep patterns; for all of this, both negative and positive aspects are important to note.

Practical arrangements for contact, for example, venue and the need for supervision by social work staff, will depend on the individual circumstances of the Child's Plan.
The general expectations of Argyll & Bute foster carers in terms of contact for the children and young people placed with them are that foster carers will:

- Facilitate contact as agreed in the Child's Plan. This may include taking them to and collecting them from the contact location. There is a growing body of research that indicates that young children, being taken to and from contact with other people, who are not their primary carers, can cause anxiety and insecurity, compromising their attachment relationships, which are fundamental to their development.
- Support the child to manage contact, in terms of the emotional impact contact may have on them and helping them make sense of what is happening.
- Keep a record (in line with the general requirements of foster carers to record key information about children and young people in their care) of information about contact, including the emotional impact of this on the child, any concerns apparent in relation to contact, including any concerns about children's safety; where concerns are immediate seek advice from the social worker for the child and the supervising social worker.
- Where appropriate, act as gatekeeper and safeguarder in relation to contact which takes the form of telephone calls and / or letters, as agreed in the Child's Plan.
- Keep to contact arrangements, and where this is not possible, foster carers must contact the social worker and supervising social worker to discuss in advance allowing alternative arrangements to be made.
- Discuss with your supervising social worker any difficulties you have in supporting contact.

Under no circumstances should foster carers make arrangements for contact which have not been authorised by the social worker and the supervising social worker as part of the Child's Plan.

At times you may be asked to undertake a variety of tasks beyond the foster carer's agreement. This can include things like working with a child's family, facilitating contact, etc. Whilst it is good that we are offering a flexible, child oriented service, the

family placement team take their responsibility very seriously to ensure that you are protected from inappropriate requests. On this basis, when you are approached by anyone other than your supervising social worker to discuss additional responsibilities, please inform the requester that you will first discuss the matter with your supervising social worker before entering into any agreements. This will ensure you are supported and protected appropriately by the fostering service at all times.

Babysitting / Child-sitters

Decisions on this, as with all fostering tasks, have to combine normal family life within the context of the legal duties and responsibilities carers fulfil on behalf of the social work service, together with the best interests of the child / young person.

No fostered child or young person under the age of 16 should be left unattended. An information leaflet on the law is available from the Scottish Child Law Centre: www.sclc.org.uk

Any babysitting / childcare arrangements for a fostered child, including family and friends, should be discussed with the supervising social worker and the child's social worker prior to any arrangements being made. Family members who offer regular babysitting / childminding services should be assessed by the family placement team and undergo Disclosure Scotland checks.

Overnight Stays

Children and young people in foster care may want to stay with friends, neighbours and relatives occasionally and it may be valuable for them to have these experiences when relationships of some substance have been built up. Such requests from foster children should be treated in a positive way and should be seen as an indication of their involvement in the community and as part of normal family life. No arrangements for overnight stays should be made without prior discussion with the supervising social worker and child's social worker.

When overnight stays are requested by children and young people, as well as the child's social worker making relevant enquiries and safety checks, the following is essential:

- The foster carer must know the name and address of the person with whom the child is to stay, where this is the home of a friend that the child has made since being in placement, the foster carer must know the adults / family concerned.
- The foster carer or social worker must contact the adults at the proposed address to ensure the child is expected and welcome.
- A time for going to and returning from the visit must be agreed between the foster carer and those with whom the child is to stay.
- It must be agreed that the child does not go off and stay elsewhere.
- Existing contact arrangements should not be interfered with, nor should the child's usual routines.

The social worker for the child will discuss all requests for overnight stays with their team manager.

Key questions foster carers should consider when children and young people wish an overnight stay with, or indeed a visit to others, are:

- How old is the child?
- How long have they been friends with the other child?
- Do they know the other child and family well?
- What are the views of the foster child's parents?
- Has the child stayed with these people before and, if so, how did it go?
- Does this child require special care or constant supervision?
- What are the sleeping arrangements? Does the child have their own room?
- Do you have any doubt about the suitability of the family? (If so, saying 'no' to an overnight stay is the safest option).

Guidance published by the Scottish Government 'On Overnight Stays for Looked After Children and Accommodated Children' is available here: https://dera.ioe.ac.uk/7987/

Holidays Abroad

Family holidays abroad, school trips, educational trips abroad are of course possible but foster children must not be taken out of the country without permission of the Locality Manager, Children's Hearing and / or parents who have or retain parental rights in this area.

Within the fostering allowances there is an element to provide for holiday expenses and any holidays planned by foster carers have to be budgeted for from these allowances. No additional funding is available.

You should of course be sure that the foster child has appropriate travel and medical insurance.

Clubs and Activities

A looked after child or young person also needs to take part in activities and hobbies outside of school. Many of the positive advantages of going to school also extend to out of school learning.

Attendance at clubs and activities has particular benefits. This includes scouts and brownies, swimming clubs or any structured activity the young person is interested in. Equally individual hobbies and interests should be pursued as for instance the advantages of a child learning an instrument or new skill has many positive spin offs e.g. in terms of improving concentration, learning to be persistent and finally in terms of self-worth.

When a child is in their care, foster carers need to act at all times as responsible parents, but be aware of the additional responsibilities which come with being a foster carer. Activities, particularly outdoor sports or pursuits, need to be carefully considered and the risks assessed for each individual child, taking account of their age and ability. Before allowing a child or young person to undertake any activity which could be considered risky, you must talk this over with your supervising social worker and the child's social worker.

Understanding and Responding to Children and Young People's Behaviours

Every child – every person – has their own inner world which they carry around with them always. This inner world holds their ideas and feelings about the people in their life, about the things they remember, and about the sort of person they are themselves. Their world is individual and unique to them. Sometimes this inner world is quite different from that which seems real to others.

Previous experiences of abuse or neglect can hinder direct and trusting communication by a child with adults. A child may find it hard to accept or experience what others see as real. This may create a sense of distance, frustration and confusion between the child and those that look after them. In these circumstances feelings such as anger, fear and shame are more likely to be acted out in difficult behaviour and foster carers (and others) may find these manifestations of distress, confusion and anger, challenging to deal with. Sometimes people refer to such behaviour as 'challenging behaviours'. It is essential for all involved in the care of children and young people who are looked after away from home to remember that these children and young people have experienced a range of loss and trauma, including losses to their emotional and psychological development. Children and young people do not always have the capacity to respond in the ways we would want them to – this is our challenge – to find ways of better responding to children and young people in these circumstances.

There is often a pattern, a theme, or a repeated sequence of events before and after problem behaviour. There is also often a pattern to moments and developing areas of positive behaviour. Positives must be openly acknowledged and appreciated. Identifying patterns should help foster carers and children reduce or avoid the problem behaviours. Although it may seem impossible at a time when a child is, for example, being (what appears to be) defiant, it may help the child and foster carer think about why the problem behaviour has arisen. One way of doing this is to think about:

A – Antecedents – what happens before the behaviour?

B – Behaviour – what actually happened?

C – Consequence – what happens as a result?

When thinking about these things, think about them not just in relation to the child or young person's behaviour but also in relation to those involved and present with the child or young person in the lead up to, at the time of, and after the behaviour.

Some of the underlying feelings may ebb and flow constantly. These might include:

- A sense of rejection
- Deep rooted insecurity
- Fear of repeated rejection
- A sense of recurrent failure
- A belief that they are ugly or unlovable
- A feeling of fear for a parent
- Guilt at developing good feelings towards a foster carer

Some of the trigger events may be predictable, such as contact arrangements, reviews, school work they feel unable to do as well as peers, or criticism from someone.

When they are able to do so, children and young people should gradually be encouraged to discuss:

- Their behaviour and the behaviour of others
- Right and wrong
- What is acceptable and what is not
- What control is needed and why
- The rules and forms of discipline in this household
- Their relationships with those they feel frightened of, angry with, impressed by
- The positive goals they can achieve and learn for themselves, now and step by step

It can also be helpful for foster carers to reflect on the event and their role in this, e.g. whether with hindsight they might have responded differently, whether part of their response was not as helpful as intended, in order to learn from the experience and find the problem behaviour less challenging should it occur again.

Children and young people usually feel less safe and less in control of themselves if there is a lack of adult guidance, control and discipline around them externally. They need to know what will happen if they step over the boundaries. Learning limits encourages a child's awareness of responsibility for their own behaviour and its consequences, thus, lessoning the need, with positive parenting, role modelling and maturity, for external controls while the child learns to develop internal self-regulation.

Section 8

Safeguarding Policy and Practice

Safeguarding Policy and Practice in Foster Placements

Child Protection Procedures

In relation to allegations or suspicions of abuse of children and young people, Argyll & Bute Council has Child Protection Procedures that are in line with the National Child Protection Guidance.

Social workers and police officers have a legal duty to investigate when it is suggested that a child or young person may be in danger or is being harmed, may be at risk of being harmed or has been harmed in the past – this is called a Child Protection Investigation. They will work in consultation with health and education services, and indeed with any other service or agency relevant to the welfare of the child. Information will usually be sought from those who have regular contact with the child, such as parents, foster carers, the named person and teachers. In all child protection processes the paramount consideration is the welfare and needs of the child.

Harm or danger for the child may involve:

- Physical injury
- Physical neglect
- Failure to thrive – when the child is not growing or developing as expected and there is no obvious medical reason for this lack of development
- Emotional abuse
- Sexual abuse and
- Sexual exploitation
- Domestic abuse

If foster carers have concerns that a child in their care may be at risk in this way, or the child or another person discloses they have been harmed (whether recently or in the past), they should report this immediately to the child's social worker. In their absence this should be reported to the Children and Families duty worker and the supervising social worker should also be notified. If there is immediate concern i.e. a child's safety is jeopardised then the police should be contacted in the first instance.

No matter the source of the concern, foster carers should report any abusive, harmful or improper conduct regardless by whom so that they can be properly investigated. It is important not to question the child about their disclosure.

Who the Police and Social Workers will want to see

Police officers and social workers who are involved in the Child Protection Investigation will usually talk to the parent(s), the child, and anyone who may have seen or have evidence of the child being harmed. At all stages of the investigation, their first duty is to protect the child's welfare and best interests.

Whether there is the need for the child to be seen by a doctor

Depending on the nature of the allegation, the social worker and police officer may ask for the child to be seen by a doctor. This may be the child's own doctor, or in some circumstances a doctor with special knowledge of child protection. The most important person in these proceedings is the child, and every effort should be made by those involved to consider their feelings and reassure them. The main reasons for such medicals are to check whether there are any injuries, infection or other problem that may require treatment, to ensure that any evidence of abuse is assessed to help the police find out what has happened, and to save the child from the experience of repeat examinations by different doctors. Children and young people's consent to having a medical will be sought, where appropriate to their age and stage of development.

What happens next

This will be influenced by the findings of the investigation and the assessed current risks for the child. Evidence of previous abuse will be assessed, as will the need for any additional support or work with the child; prosecution of the alleged perpetrator may take place. If information suggests that the child may be in danger, there may be consideration of whether the child needs to be moved from their current household to safeguard them from the danger. Where this is the case, arrangements will be made by social work services to safeguard the child. This may require a Child Protection Order – this is explained in the next paragraph. Where it is considered that the child can remain in their current residence, until fuller discussion of the information gathered can take place, a Child Protection Case Conference will be arranged. Parents and those immediately involved in the care and protection of the child will usually be invited.

Through a Child Protection Case Conference, essential information is shared, an assessment of risk is considered and Child Plans are made about any action that should be taken.

The fostering supervising social worker can explain these processes in more detail and support the foster carer in their role in this regard.

Child Protection Orders

These are issued by a sheriff court and allow removal of a child to a safe place – for instance, to a foster care placement. The Sheriff must be satisfied that the child is at risk of harm and needs to be cared for elsewhere. Child Protection Orders can have conditions attached, including conditions that regulate contact.

The Reporter to the Children's Hearings is informed immediately by the child's social worker and a Children's Hearing will be arranged to take place the second working day after implementation of the Order (the Order must be implemented within 24 hours of being granted). The Children's Hearing will decide if the Order should be continued. If it is continued, another Hearing must take place on the eighth working day after implementation of the Order. The foster carer's supervising social worker can provide further information about the Children's Hearings and the part that foster carers may play in these processes. Information published by the Scottish Children's Reporter Administration for foster carers about Children's Hearings is available here: https://www.argyll-bute.gov.uk/sites/default/files/the_childrens_hearing_system_information_for_foster_carers.pdf

What happens to the person who may have harmed the child?

The police will carry out investigations and report to the Procurator Fiscal, who will decide if any further criminal prosecution should be pursued. Civil proceedings and or further risk assessment will be undertaken regardless of a criminal prosecution.

Allegations of Child Abuse made against Foster Carers

In all instances where abuse is alleged or suspected, the Child Protection procedures must be followed. The paramount consideration is the safety and welfare of the child, whatever their current care arrangements.

In addition to the duty to protect children and young people, Argyll & Bute Council has a duty of care towards foster carers. Foster carers about whom an allegation of abuse has been made will receive clear advice about the process and timing, though not necessarily about the detail, of the investigation, which will come at an appropriate stage in the process. Supervising social workers have a role in ensuring foster carers have adequate information about what is happening, and about potential sources of advice and support, such as the Fostering Network. Supervising social workers usually cannot discuss the detail of the allegation.

Detailed records will be kept of all allegations, investigations, findings and outcomes. These will be added to the foster carers' chronology.

Where an allegation of abuse has been made against a foster carer, overall responsibility for managing the way the allegation is dealt with rests within social work; the team leader and service manager from the relevant area team. When a child makes an allegation of abuse against a foster carer the police are automatically informed and may participate in any investigation. The person appointed to co-ordinate an investigation cannot be involved in support and supervision of the foster carer. This person co-ordinating the investigation will, in consultation with others, recommend to senior management any immediate support or protective measures that are necessary, for instance, in relation to children and young people's living arrangements. Children and young people should not have to change placement or lose the support of services they need, unless this is the only immediate solution. While the priority is security for the child involved, this will include consideration of minimising distress and disturbance for them. As part of the coordination of an investigation a multi-agency child protection case discussion may be held and it may be the decision of this meeting that the nature of the allegation can be shared with you.

It is the responsibility of senior managers in social work services to decide, on the basis of the available information, if a foster carer approval should be suspended as a precaution during the child protection investigation. This would be considered, for instance, if there are reasons to believe children and young people might be at risk should the foster carer continue in their role; or if the continued presence of an alleged abuser could impede the ongoing investigation. The situation of a foster carer's own children may also need to be investigated in accordance with the child protection procedures, if it is deemed that they may also be at risk. This may involve contacting partner agencies in your local area to progress this matter.

If it is decided to move any children and young people placed with the foster carers, this can happen immediately and without any period of notice. Should this occur, written confirmation of the decision of the date that the placement ended will be given as soon as possible to the persons and agencies that Argyll & Bute Council is obliged to notify under the Looked After Children Regulations; written notice will be given to foster carers at the same time. As in all Child Protection Investigations, the need for a Child Protection Case Conference will be considered in the initial stages of the process.

After completion of a Child Protection Investigation, unless the allegation has been judged to be completely unfounded, there will be a foster carer review and this will be held at a fostering panel (the Approval and Matching Panel). This foster carer review will consider all the circumstances relating to the foster carer household and make a recommendation. If no foundation for the allegation has been established, the foster carers and children and young people involved in the allegation may receive support to move forward the recommendations reached at the Foster Carer Review. The child's needs would normally be planned through the Looked After Children Review process.

In some instances, after investigation, there may be concerns about the suitability of a foster carer continuing in that role. This would be referred to the Fostering Panel for consideration of deregistration by the Panel.

In certain circumstances the police may bring a criminal charge against a foster carer or member of their household. The absence of legal proof to the level required of criminal conviction does not necessarily mean that abuse has not occurred and this could lead to de-registration as a foster carer.

If the child is known to the Children's Hearing system, or is subject to a supervision order they will be informed of any allegations, no matter the outcome.

The child and or other person who made the allegation will be told of the outcome of the investigation in a manner suited to their age and understanding. The outcome of an investigation will be shared with all parties involved as appropriate including the child, young person, alleged perpetrator, parents and all professionals involved in the child's care.

Information relevant to the foster carers will be retained in their file. Information relevant to the child will be held in his / her file.

For further reference, the Fostering Network produces leaflets and guidance for foster carers regarding allegations and are also available for support and legal advice if required.

Complaints / Allegations / Practice Concerns

Not all reported concerns about a child's foster placement will require a response under Child Protection procedures; in some instances, concerns may be resolved as a practice concern, in other instances they may be dealt with as a complaint dependent on the individual circumstances of each case. Whilst the role of staff within area teams and the family placement team will differ, there are similar responsibilities to jointly assess the information and determine the best course of action. Within the family placement team, all concerns will be routed through the service manager who has a clear overview of:

- Practice concerns
- Complaints
- Allegations

The Scottish Government has produced 'Best Practice Guidance: Responding to Allegations against Foster Carers'. Argyll & Bute Council have incorporated this guidance into its own procedures 'Best Practice in responding to concerns where children are looked after away from home in a family setting' (2014), which can be accessed here:
https://www.argyll-bute.gov.uk/sites/default/files/best_practice_-_responding_to_concerns_where_a_child_is_looked_after_away_from_home_in_a_family_setting.pdf

Children and young people in foster care should be made aware of how they may complain or speak to someone independent. All adults involved in a child's care have a corporate responsibility to ensure that the child does not feel isolated or trapped if they are unhappy about what is happening. Children and young people must be helped to understand they can complain and obtain separate support by a variety of sources and processes, examples of which are mentioned below.

The majority of practice concerns about foster carers can be effectively resolved in local discussion between the foster carers and the family placement team and / or the child's social worker / area team as needed. If a foster carer is dissatisfied with this approach or the outcome of such an approach, they can raise the issues with a more senior manager.

It is the duty of the child's social worker, foster carers and supervising social workers to advise children old enough to understand, of the existence of Children's Rights or Who Cares Scotland. There is written information for children and young people, available from Who Cares Scotland, which helps with this process. However, foster carers can usefully remind children and young people of these officers' roles as independent listeners and potential advocates for the child. Who Cares website can be accessed here: www.whocaresscotland.org.

Looked After Children's Reviews also provide an opportunity for children and young people to be supported in writing down or saying what they are not happy about. Part of the function of Reviews is to ensure that children and young people's wishes and

feelings (including grievances) are taken into account, and that they have trusted, independent people they would feel able to contact if necessary.

There are also people known as Safe-guarders who are, at times, appointed by Children's Hearings; Safe-guarders provide another avenue for representation of children and young people's interests and views. This option may be considered by Children's Hearings for every child referred to a hearing.

Whatever the quality of care, and whatever the good efforts of foster carers and their families, some children and young people may feel isolated with some of their difficult experiences and may need to speak with a person who has no direct responsibility for looking after them. The Looked After Child Reviews have a role in confirming that the child has a named person or persons who they are able to contact for independent help and support.

Safeguarding Children

Safeguarding children is a basic requirement and responsibility for all of society but is reinforced in the National Care Standards for Fostering Services 2011: Standard 2.

The term 'safeguarding children' relates to an acknowledgment that children who are placed away from home, have particular additional needs, which are heightened by the fact that they have been removed from their families and communities of origin. The close supervision, support and contact from professionals with children is absolutely critical to their care and protection. The child's social worker has an important lead responsibility in ensuring that they build a relationship with the child through consistent contact that develops an approach that listens to children about their experiences in their placements. In addition, the supervising social worker also has a responsibility in safeguarding the child working very closely and in partnership with the child's social worker. In short, these two roles are critical in the safeguarding agenda ensuring the close scrutiny of every placement with every child.

The vast majority of children live safely in foster care where their wellbeing needs are nurtured and protected from skilled foster carers. However, a minority of children across the UK do experience harm each year from those responsible for their care.

The research found:

- An estimated 450 – 550 confirmed cases of abuse or neglect in foster care per year.
- Around 22 per cent of an estimated 2,000 – 2,500 allegations per year were confirmed.
- This equates to less than one substantiated allegation per 100 children in foster care.

This research confirms that findings are likely to underestimate the true extent of the problem, for a number of reasons, including the fact that many children do not disclose; if they do so it can be when they leave placements. Moreover, over half of unsubstantiated allegations could not be proven one way or the other. Where clear evidence is lacking in this way, professionals are often presented with significant dilemmas when deciding the most appropriate course of action.

Almost half of the foster carers involved in substantiated cases had been the subject of previous allegations. Allegations related to physical abuse, emotional abuse, sexual abuse, neglect, as well as poor standards of care (Biehal, N et al, 2014). If you are interested in looking more closely at this research you will find it here: www.nspcc.org.uk/globalassets/documents.

To ensure the safeguarding of children who are looked after and accommodated within foster care, Argyll & Bute Council's policy is to undertake a minimum of one monthly visit and also at least one unannounced visit per year. This will be recorded in line with departmental procedures.

The child's social worker is also required to visit the placement at least once a month. During this time there should be the opportunity for the child to speak with the social worker without the foster carer being present. Again, the social worker may carry out unannounced visits to the child.

The family placement team aim to recruit, equip and support carers with the skills and awareness they need in order to provide children in their care with a safe, nurturing and encouraging environment that will enable them to reach their full potential and grow into responsible and fulfilled adults.

It is essential that everyone involved with children / young people work in close partnership and the health, safety and welfare of the child is paramount. To ensure this happens, it is important there is good communication, clarity of role and responsibilities and a commitment to support a child and achieve the outcomes in their Child's Plan. It is essential that any child who is looked after and accommodated has regular LAAC reviews and it is essential that you raise this with your supervising social worker if this is not happening.

Another way of safeguarding children and young people is through regular foster carer reviews. The function of this is to explore and discuss the following:

- The Child's experience of foster care and feelings of safety
- The continued suitability of each foster carer
- The role of the supervising social worker
- Working relationships with area team
- The interplay between all of the above

Key responsibility of family placement supervising social workers in promoting safeguarding is detailed above but in addition they:

- Ensure that the quality and standard of care the children receive in family placement services is to the highest possible standard
- Child's Planning needs are child centred and outcome focused
- Monitor the effectiveness of the placements, which should be an ongoing process and take appropriate action if there are concerns
- Ensure that care and protection is fully promoted and there is evidence of high standards
- Ensure that carers are given adequate, appropriate support and supervision to enable them to achieve all of the above

- The supervising social worker and the child's social worker will carry out joint visits (announced and unannounced) as part of Argyll & Bute's safeguarding commitment to children who are looked after and accommodated away from home.

Safe Caring / Family Policy

To achieve safe care, we have put in place the following arrangements to protect children and young people in foster care and to you as a carer. Safe care is part of a whole system of arrangements that are triggered from the outset with prospective applicants to foster. This fundamentally important agenda remains with the foster carer and the family for the duration of fostering. This handbook and the messages contained in every section are interconnected to safe care.

All the areas must be covered within preparation groups, assessment and post approval training, which cover safe caring. Every supervising social worker has the lead role in ensuring that every foster carer understands the importance of safe care and the fact that you cannot foster a child without the key knowledge, values and skills strongly associated with high quality safe caring. All foster care reviews seek to evaluate the foster carers understanding and application of safe care.

At the time of placement the child's social worker and your supervising social worker should establish whether a child or young person is known to have either experienced abuse or have displayed for example, problematic sexual behaviour. Such information should be shared with you if known.

However, it is common that the experiences children have had prior to them becoming looked after and accommodated is not always known to the department at that time. Information will be shared with you once this is known. Consideration will be given about the impact the child will have on the household.

Your supervising social worker has the absolute lead responsibility to draw up a Safer Caring Family Policy with you. This will be reviewed in light of each child placed, in consultation with you and everyone else in the household and the child's social worker.

This will be undertaken at the assessment stage and will be reviewed at the foster carer review and any other stage the supervising social worker deems necessary.

A safe, healthy and nurturing environment for the child is an integral part of safe caring / fostering. Providing a safe caring environment will include:

- A home that is warm, comfortable, adequately furnished and decorated and maintained to a good standard of cleanliness and hygiene;
- Ensuring each child placed has their own bed and arrangements reflect the child's need for privacy and space;
- Ensuring the home and immediate environment are free of hazards which might expose a child to risk of injury or harm and contain safety barriers and equipment appropriate to the child's age, development and levels of ability;
- Educating the child in relation to hazardous materials, electrical equipment and fire risks;
- Ensuring the child has enough appropriate and well maintained clothing;
- Helping (with the child's social worker) the child to develop self-protection skills and the awareness of dangers from others;
- Reporting all instances of a foster child bullying or being bullied to the child's social worker or your supervising social worker;
- Encouraging and supporting the child in maintaining peer relationships and promoting the social skills required for new friendships;
- Reporting all instances of the child going missing or running away in accordance with the protocol for children missing from foster care;
- Ensuring vehicles are adequately maintained. Ensure that MOT and insurance documents are available for inspection by supervising social workers.

Every family develops its own strategies for day to day living. A first step in developing a family safe caring approach for your own household is becoming aware of your own values and habits. Some habits, which seem ordinary and comfortable within your own family may pose a risk to children and young people or may not be comfortable to that child who is living with you. Working out a family safe caring approach with the whole family and in conjunction with your supervising social worker is essential preparation for fostering. This should not mean changing everything you do. It means thinking about what behaviour could pose a risk. Some sorts of behaviour are never

safe. Some may be open to misinterpretation. The following are examples of everyday situations that require family discussion and agreed rules.

Showing affection: touch may have meant something other than affection to a child in the past. Children and young people may need help to understand they can say no if they do not want physical contact (e.g. if they do not want to be hugged). Foster carers need to be aware that tickling and wrestling games could be misinterpreted by some children and young people and should therefore be avoided.

Physical contact: worry about allegations of abuse may stop some foster carers from using physical contact at all. However, physical contact plays an important part in basic nurturing, not just for younger children in bathing, cleaning and feeding, but also in reassurance, encouragement and guidance for all children. Children and young people who have been deprived of reliable holding or who have been physically abused may need to learn about good physical contact. Some children may be over familiar and seek an inappropriate level of physical contact.

When thinking about what is right for each child, foster carers should consider:

- Does the child reach for or recoil from physical touch?
- Where children and young people freeze or recoil, foster carers should respect this and realise that some children and young people may never accept affection through physical contact. They may have long experience of abuse of physical power.
- What sort of touch does the child seem to seek and from whom?

This is an area where discussion with social workers about each individual child placed is crucial to foster carers responding appropriately.

In the bathroom: children and young people who are old enough, and able, to bath and wash themselves should have privacy in the bathroom. If a child needs adult help or supervision, thought needs to be given about who has this role; for example, where there are two foster carers the child may be more comfortable with the foster carer who is the main carer (e.g. who is not in employment and with them more often). Some

settings will have a particular meaning for a child who may have been abused and foster carers need to be aware of the reactions of each child.

Clothing: children and young people are encouraged to wear age appropriate clothing and to either wear a housecoat or appropriate nightwear. It is therefore important that foster carers are positive role models and also wear appropriate clothing.

Playing: children and young people should not be playing behind closed doors, they need to be supervised to ensure their safety and wellbeing. There will be some children and young people who will require additional specific supervision due to concerns about the possible impact on their behaviour from abuses they have experienced. Where this is the case, and where it is known to the service, social workers will discuss this with foster carers.

Language: non-one in the house should use suggestive, obscene or abusive language nor speak in ways which are humiliating or threatening to children and young people. Action would be taken given this conduct is not acceptable and would be viewed very seriously.

Use of alcohol and other intoxicants: under no circumstances should foster carers be intoxicated in charge of children and young people placed with them. There are many possible risks associated with this including impaired judgment, lack of control and impaired ability to provide care and protection for children and young people. A child may also feel unsafe when adults are drunk or drinking alcohol. Use of alcohol may have disturbing associations for some children and young people. Foster carers need to plan their rest and relaxation in such a way that safety and the child's sense of safety are not compromised.

Foster Carer's bedrooms: letting children into bed to talk, play, listen to stories or be comforted when they are not well may be normal with foster carers own children. However, these types of interactions could present risks for placed children; for example, it may trigger memories of abuse. This should be avoided. Just as children

and young people have a need and right for privacy, foster carers' bedrooms should be seen as the foster carer's private space.

Children's bedrooms: children and young people should not share beds. Anyone who goes into a child's bedroom should ask permission to come in first and should leave the door open. This applies to children and young people as well as adults in the household. Children and young people's known experiences and need for privacy should be taken into account.

Bedtime: the same care should be taken as with bath time and foster carers should leave the door open when putting children to bed and in baths.

Outings: safe supervision arrangements need to be considered with your supervising social worker and the child's social worker, and situations when it is necessary to travel alone with a child should be talked through. It is generally advisable for foster carers travelling alone with children and young people in the car to seat the children and young people in the back.

Photos and videos: if foster carers plan to take photos, videos and other films of children and young people placed, ask their permission first. Let them know who gets to see the photos and check that they have no objections to that. Often foster carers will be asked to ensure they are building and retaining important memories and life story information for the child, which is critical to the child's journey through placement; a clear purpose, focus and rational should be understood in taking photographs, which can be beneficial to the child. In the main children and young people should have their own copies of any images taken of them. In some cases, these are best retained for the child by the service. This should be discussed with social workers. It is important that foster carers are alert to the effect of the process of taking photos. Never take photos of children having a bath, or wearing little or no clothing or on any occasion where privacy is paramount.

Internet, TV, cinema, games consoles, mobile phones and other media: foster carers will be involved in making judgements on the suitability of material and technical equipment that children and young people are allowed to watch or have access to,

and they will need to exercise caution in relation to children and young people's potential access to inappropriate material through home computers and other equipment. Photographs of children should never be uploaded on the internet.

The guidance of the British Film Board censors regarding films must be followed and foster carers must prevent access to computer games and TV, which are deemed to be unsuitable for children and young people.

In relation to computer use, or use of other media, which provides access to the internet, basic government advice for parents on minimising risks of exploitation of children and young people must be followed, e.g. that any internet access is available only in a family or communal area of the home, not in a child or young person's bedroom. All computers and other equipment with internet access should have suitable password and parental controls with robust firewall software so that children and young people cannot be exploited or access unsuitable material. Foster carers have a very clear responsibility in this area.

Education about sex and sexuality: although sex education is provided in schools as part of Personal and Social Development, foster carers need to be able to talk clearly and openly about sexual matters. This may be, for example, to give information, to help children and young people understand changes in their body as they grow older; to help a child work through some confusion or to respond to something a child has experienced and wants to talk about. Language needs to be suitable for the age and understanding of the child and the discussion needs to take place in an appropriate and safe environment.

Children and young people may also need help to avoid risky situations, and in learning to say no to unwanted touch and inappropriate or abusive sexual activity. The timing of any such discussion must be sensitive to the stage and needs of the child. It would need to be explained that such talk is about helping the child to stay safe. Foster carers should be provided with training in dealing with these issues in general and support in dealing with issues particular to each care arrangement; these matters should be discussed with your supervising social worker.

Children and young people may need help distinguishing between privacy and secrecy. All children and young people in the household need to be aware of a 'no secrets' rule; the reasons for this should be explained. All children and young people in the household need to know they can talk about things they find confusing or frightening. Children and young people may need help identifying who they would choose to tell about things that are important or worrying to them. There may be trusted adults outside the foster household. Children and young people should also know they can talk to their own social workers.

Bedwetting and soiling: Some children will show their trauma in this way. It is important not to cause shame or humiliation in response as this can be more damaging. The child and the bedding need changed quickly, with minimum fuss. Advice from specialist services clinics are accessible if required.

Physical punishment: any form of this is not acceptable. Use of corporal punishment would be viewed seriously with action taken. It may reinforce or trigger children and young people's memories of abuse or harsh treatment. Smacking a child or other physical chastisement may also be treated as an assault and lead to a Child Protection Investigation. It is important for the whole household to be clear about the limits of normal discipline and the sort of response that is not acceptable. Punishment, as a concept and terminology, is not acceptable, but discipline meaning, 'to teach' is an essential parenting requirement and important in developing positive parenting alongside other key strategies.

All foster carers, with the support of their supervising social worker, must develop a Safe Care Family Policy and fundamental approach under each of these headings and any other areas. This approach is introduced at the very early stages of assessment with applicants and remains a fundamental approach required throughout approval as foster carers. This should be talked through and understood by all in the household. Safe care will be reviewed in relation to the apparent needs and experiences of each child placed and is a high priority for you and your supervising social worker.

Argyll & Bute Council's Safer Caring Policy can be accessed here: https://www.argyll-bute.gov.uk/sites/default/files/safer_care_policy.docx

Making a Complaint as a Carer

Foster carers who have any concerns or complaints about anything connected to a child in placement or the service they are receiving, should begin by raising these concerns in the first instance with their supervising social worker. If the matter has not been resolved by the supervising social worker, this should be raised verbally or in writing to the Family Placement Practice Lead. If these communications have not concluded or resolved matters then the next stage would be to contact the Family Placement Service Manager preferably in writing;

Mark Lines
Dolphin Hall Annex, Manse Avenue, Dunoon, PA23 8DQ
Phone: 01546 605517
Email: mark.lines@nhs.scot

You should receive an acknowledgment of your complaint, verbally or in writing, within 5 working days. Your complaint will be investigated with a response within 15 working days. This could extend to 28 days or longer, but if the response does take longer this should be communicated and negotiated in agreement with you.

If you are not satisfied with the response from the service manager at the family placement team, you can ask for an internal review by the Head of Service, Alex Taylor.

You can also at any point contact the Care Inspectorate to complain. They have produced a helpful booklet, which you can view on the care inspectorate website. The Care Inspectorate's contact details are:

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

Phone: 0345 600 9527
Email: enquiries@careinspectorate.com
www.careinspectorate.com

Section 9

General Information for Foster Carers

General Information for Foster Carers

This section of the handbook covers a range of matters relevant to foster carers, their families and the children and young people looked after in foster care placements.

The term ‘looked after’ is a legal one introduced by the Children (Scotland) Act, 1995 (the Act); children and young people can be looked after at home or away from home.

A full definition of these terms is provided in the Act (as amended) https://www.legislation.gov.uk/ukpga/1995/36/contents. Children and young people who are placed with foster carers are looked after away from home.

Placements for Children and Young People – the Legal Basis

As mentioned above, children and young people may be placed with foster carers through various sections of the Children (Scotland) Act 1995 (as amended), the Adoption and Children (Scotland) Act 2007 https://www.legislation.gov.uk/asp/2007/4/contents and the Children's Hearings (Scotland) Act 2011 http://www.legislation.gov.uk/asp/2011/1/contents. These include the following:

Voluntary Accommodation – Section 25, Children (Scotland) Act, 1995

Accommodation under this section is voluntary because it has either been requested by the parent or they have agreed to it. The parent continues to hold Parental Rights and Responsibilities, and has a right to be consulted about Child Plans for the child. The parent has a duty to keep social work services informed of their whereabouts and may be required to contribute to the maintenance of the child.

The local authority must return the child to the parent at their request, but if the child has been accommodated for 6 months or more, the parent must give 14 days' notice in writing. If the local authority considers that it would not be in the best interest of the child to return to the care of the parent, they may decide to make an application for a Child Protection Order if the legal test – threshold of significant harm applies. If there are concerns in respect of the welfare of the child, but these concerns are less immediate, the local authority may make a referral to the Scottish Children Reporters Administration (SCRA) seeking a Compulsory Supervision Order by a Children's Hearing.

If a parent arrives at the foster home requesting the carer to return a child to them, the carer must inform the parent that they are unable to do this without consultation with the social worker. They should also encourage the parent to discuss their request with

their social worker. The carer should contact the social worker, or in their absence, the team leader or duty worker, urgently to immediately alert them of the parent's request. It should be noted that such occurrences are rare, and most parents will accept the Child's Plan having been party to the process. It should be understood that parents with parental rights and responsibilities are perfectly within their rights to request their child's return under this section of the 1995 Act. Due process must therefore be followed.

In an emergency the carer should contact the police and the social work emergency service (**01631 566-491 / 01631 569-712)** as a matter of urgency particularly if it is out with hours or they are concerned about the parent's actions.

Compulsory Supervision Order: Section 83 of the Children's Hearings (Scotland) Act 2011

An Interim Compulsory Supervision Order (ICSO) can be made by a Children's Hearing that has been satisfied that Compulsory Measures of Supervision are necessary in respect of the child. This is a temporary measure, which is in place until the grounds of referral have been established or a Safeguarding report has been completed. The requirement may contain conditions, for instance, specifying the child's place of residence; requiring the child to undergo medical or other examination or treatment; regulating contact with the child's family or other persons.

Children's Hearings are organised by the Reporter, whose job is to consider the case of any child referred to them to decide whether grounds exist. If grounds exist they must be detailed and the case must be referred to a Children's Hearing. Anyone may refer a child to the Reporter but in practice, most referrals are made by police, social work and Education. The grounds of referral could include lack of parental care and offences against the child. The child themselves, may have given grounds by being beyond parental control; committing offences; not attending school; engaging in drug or alcohol misuse. If the child and parents do not accept the grounds of referral, or the child is unable to understand the grounds, the case is referred to the sheriff for proof to court.

A Children's Hearing consists of three members of the Children's Panel and the Reporter, whose function is to advise the panel and record the proceedings. Panel members are volunteers from the community who receive training to prepare them for the task. The panel must include both men and women, and one of them will act as chairperson. Before a hearing is held, the Reporter will request a report from the local authority who have a duty to provide this information usually from a number of multiagency sources e.g. health and education. This is referred to as the GIRFEC report.

If the panel decide to make a Compulsory Supervision Order, the local authority is obliged to implement the Order. The requirement can last for a year and must be reviewed at least annually. If it has not been reviewed within a year of being made, it will lapse. Panels may decide to review a case more frequently, and the social worker may ask for a review at any time. A parent or child may also ask for a review, but there are limits to this and they may only make their request 3 months after the Order has been made or reviewed.

The panel have the right to request the Reporter to appoint a Safeguarder to help them decide what course of action would be in the best interests of the child. Safeguarders are independent persons, who usually have legal, social work or an education background. They are usually called upon when it is perceived that there is a 'conflict' usually between social work services and the child's parent. Safeguarders have wide discretion about how they work with a case and who they interview. They also have a short timescale within which to produce a comprehensive report. Foster carers who are contacted by a Safeguarder should give priority to any requests made of them, and should keep the child's social worker informed.

Most of the children in foster care will be subject to either an Interim Compulsory Supervision Order (ICSO) or a Compulsory Supervision Order. When a hearing is due, the social worker for the child will prepare a GIRFEC report for the hearing, and it is important that the foster carer has an opportunity to contribute their observations about the child, and views about what is in their best interests. It is helpful if foster carers submit a report as this contributes towards the GIRFEC Child's Plan. All papers will be circulated to panel members and any other 'relevant' persons who are obliged

to attend the hearing. Young people of 12 years and over also have a right to receive a copy of the papers. Those relevant persons concerned, must receive the papers 7 days before the hearing is due to take place.

A booklet called 'You Matter', explaining the Children (Scotland) Act 1995, is available on www.scotland.gov.uk/justice/familylaw. It is designed to be helpful to children and young people facing separation from one or both parents. In addition, the Scottish Children Reporters Administration's information resource for foster carers can be found at: www.scra.gov.uk/children_s_hearings_system/information_for_parents_and_carers.cfm

Child Protection Order: Section 37 & 38 Children's Hearing (Scotland) Act 2011

Anyone, not just a local authority, may apply to the Sheriff for a Child Protection Order (CPO) under section 37 of the 2011 Act; however, this is exceptionally rare as most CPOs are applied for by the local authority, social work, under section 38 of the 2011 Act. The Sheriff may grant an order if satisfied that the child is being treated in such a way that they have, are, or are likely to suffer significant harm, or will suffer harm if not removed to a place of safety or kept in a place of safety.

Once a CPO has been granted and implemented, if the Reporter has not received notice of an application to the sheriff to terminate or vary the Order, usually by an appeal from the parent(s) legal representative, the Reporter to the Children's Panel must arrange a Children's Hearing to take place on the second working day (after the day on which the child is taken to a place of safety). This Children's Panel must consider, once satisfied, to either continue, vary or terminate the CPO. If the CPO remains in force, the Reporter must arrange another Children's hearing on the 8th working day at which point the CPO will cease to have effect as the Order cannot last beyond the 8th day. If it remains unsafe for the child to return home, which can often be the case, the Children's Hearing will consider legally implementing an Interim Compulsory Supervision Order (ICSO), which will secure the child in a place of safety.

A CPO is a short term emergency Order initiated by the Court and remaining in force by a Children's Hearing until no later than the 8th day, therefore, it is an emergency

Order that can offer immediate care and protection for vulnerable children at risk of significant harm, but there are checks and balances given those with parental rights and responsibilities, usually parents, can appeal the Order at Court and within the Children's Hearing system directly or by instructing legal representation through various stages.

In exceptional circumstances (under section 53 of the 2011 Act) the Principle Reporter has the power to terminate or change directions contained within a CPO if they are satisfied that the conditions for making the Order or any directions within the Order are no longer satisfied. They cannot do this however if proceedings have progressed to the 2nd working day Hearing as detailed.

The police have powers to remove a child at risk of significant harm or thought to be in immediate danger for no more than 24 hours under section 56 (1) of the Children's Hearing (Scotland) Act 2011. These police powers are only used in an emergency when the child is at immediate risk and therefore cannot wait for the local authority to pursue a Child Protection Order. Usually when these police powers are triggered, an application for a CPO is progressed thereafter unless there has been an immediate safe resolution of the crisis for the child.

Permanence Orders – sections 80 & 83 of the Adoption and Children (Scotland) Act 2007.

The effect of a Permanence Order is to vest certain parental responsibilities and rights in the local authority. It is also possible for certain parental responsibilities and rights to be vested in a person other than the local authority, such as a relative, foster carer or some other appropriate person. If granted the local authority always has the mandatory right to determine residence i.e. where the child lives, but other ancillary rights and responsibilities can be vested in a foster carer. It is therefore a flexible provision which can be adapted to meet the circumstances of the individual child. Application for a PO only occurs when the Child's Plan is not rehabilitation or a return home to birth parents. It is an appropriate legal measure if the Child's Plan is long-term fostering (permanence) usually with a foster carer who has been assessed and approved as a permanent foster carer.

Adoption and Children (Scotland) Act 2007

This places a duty on local authorities to provide an adoption service. In practice it is likely that all local authorities will provide their own adoption services, but they may contract with another provider which is a registered adoption service to provide these services.

Further details are available at:
www.legislation.gov.uk.asp/2007/4/notes/division/3/1

Children and Young People (Scotland) Act 2014

This legislation has a significant impact on looked after young people as from April 2015 teenagers in residential, foster or kinship care have new rights to remain looked after up to the age of 21. This Act strengthens young people's rights to continuing care, and aftercare services and support up until the age of 26. The Act is based on the GIRFEC principles. (See Scottish Government website for further details).

The Looked After Children (Scotland) Regulations 2009

The Regulations deal with the responsibilities of local authorities towards children who are looked after. They specify the requirements about making a care Child's Plan for the child (Child's Plan), and for carrying out reviews of the Child's Plan within regulatory timescales.

The sections on fostering set out the requirements for fostering panels, the processes for approving and reviewing foster carers and the making of fostering placements. The Regulations also cover the requirements in approval of Kinship carers and the associated allowances to both foster and kinship carers.

Children's Hearings (Scotland) Act 2011

Relevant Person Status

The implementation of the Children's Hearings (Scotland) Act in June 2011 has brought with it some changes for foster carers. Perhaps the most significant of these is the change to the law relating to relevant person status.

Relevant persons have particular rights and duties under the law. For example, they have a right and a duty to attend hearings, as well as having a right to receive the papers and to appeal decisions made by children's hearings.

Under this Act, foster carers are not automatically considered to be relevant persons, even if they were relevant persons under the old law. Instead, the Act provides a route for foster carers to be deemed as relevant persons by a pre-hearing panel or a Children's Hearing. The test for being deemed a relevant person is that the person has, or recently has had, significant involvement in the upbringing of the child.

The Hearing will consider factors including:

- The nature of the involvement in the child's life, for example is the person fulfilling a parental role in relation to the child – this could be involvement in key decisions in relation to the child, such as education or medical treatment, without necessarily having care of the child.
- The length of time the person has been involved in the child's life.
- Living arrangements, for example, do the child and person live in the same house.
- Where the person and the child do not live in the same house, the level and quality of contact the person has with the child.
- The child's view, if they are old enough to provide it, of the significance of their relationship with the person.

Pre-Hearing Panels are a new type of meeting introduced by the 2011 Act. They involve three panel members meeting in advance of the Children's Hearing to consider one or more matters referred to it. Information to enable the Pre-Hearing Panel to make its decision can be provided in writing (via the Reporter). There is no requirement for foster carers, or for the child, to attend the Pre-Hearing Panel in person, though they have the right to do so.

Where a foster carer has been treated as a relevant person under the Children (Scotland) Act 1995 and the local authority recommendation is that the child continues to reside with them, the Reporter will write to inform the foster carer of their right to seek to be deemed as relevant. Alternatively, a foster carer can ask the Reporter to

arrange a Pre-Hearing Panel if they believe that they meet the significant involvement test. Once relevant person status has been granted, it can only be removed by a hearing if the person ceases to have, or recently have had, significant involvement in the upbringing of the child.

Please note that foster carers who are not deemed to be relevant persons may still be able to attend the Hearing, either as a representative of the child, or at the discretion of the Panel Members.

This change is not intended to diminish or downplay in any way the important role that foster carers play in the lives of the children in their care. Instead, it seeks to strike a balance between ensuring that foster carers can be involved in proceedings and contribute to decisions about the child, with the recognition that not all foster carers wish to take on the responsibilities and legal duties that come with relevant person status. It also recognises that it may not be appropriate to grant that legal status if a foster carer's involvement in the child's life is on a temporary or very short-term basis.

If you have any questions or concerns about your status under the new Act, please speak to your supervising social worker or Reporter, who will be able to discuss it with you. A one-page information leaflet on relevant person status is also available from the Fostering Network.

Court Hearings

Foster carers may be required to attend Court to give evidence concerning a child who is or has been in their care. This may be in relation to action which social work services are taking, such as to secure a Permanence Order. It could also arise from action related to a Children's Hearing if, for instance, the Reporter is trying to establish grounds of referral, or the parent has lodged an appeal against a decision made by the hearing. These court hearings are held in private.

The evidence of the foster carer will be particularly helpful in describing progress which they have made, or difficulties which they are experiencing. It will be very important that foster carers have kept clear and accurate records about the child or children. They should be aware that these records will be made available to the legal teams on

both sides. The Council's Legal Section will be able to give advice about court proceedings and how to present evidence.

Children and Young People as Witnesses

Occasionally children and young people may have to attend court as witnesses. Foster carers will have a role along with the child's social worker, in preparing and supporting them through this experience.

The Scottish Government produce an illustrated booklet – 'Being a Witness' – of which there are two versions, one for children and one for young people who may have to give evidence in court. The Vulnerable Witnesses (Scotland) Act 2004 aims to improve the support measures available to help witnesses who are particularly vulnerable and give the best evidence they possibly can. There are standard special measures for child witnesses under the age of 16:

- Use of a live television link in another part of the court building
- Use of a screen
- Use of a supporter, in conjunction with either of the standard special measures mentioned above

There are further special measures:

- Use of a live television link from another part of the court building or other place outwith that building
- Greater use of prior statements of vulnerable witnesses as evidence in chief (in criminal cases only)
- Taking of evidence by a commissioner
- Use of a screen
- Use of a supporter

The special measures may also be used in combination where appropriate.

The court will normally expect a child under the age of 12 to give their evidence without having to come to court.

The booklets 'Being a Witness' explains the court processes in a way which is easy to understand. The booklets can be downloaded from the Scottish Government website.

Guidance / Advice in a Crisis

Foster carers will develop their own network of practical back-up and emotional support to suit their own needs as well as those of the child placed, notwithstanding that principles of confidentiality must apply regarding personal information about children and young people in foster care and their families. Some crises are opportunities for a child and foster carer to make positive changes in behaviour and relationships. Much depends on the foster carer's ability to keep calm under stress, to recognise what the child feels and needs and to be aware of their own and their family's needs for support.

When contacting the social work services about an emergency situation during office hours, ask for the child's social worker or their team leader at the relevant area office, saying it is an emergency. If both are unavailable ask for the duty social worker or their team leader. (In due course it is also advisable to inform your supervising social worker of the emergency and your subsequent response).

Outside office hours, contact should be made with the Social Work Emergency Service (SWES) on **01631 566-491 / 01631 569-712.**

Emergency Situations

The information that follows provides foster carers with additional guidance on emergency situations.

The child has suddenly become ill or had an accident

Always get medical help first. Tell the doctor or emergency services that the child is fostered by you, giving also the social worker's telephone number. If the child is in need of urgent treatment, the doctor is able to take the decision to treat them. After this, contact the child's social worker or if unavailable team leader, or, out of hours, the social work emergency service.

Foster carers need to be alert to the condition of those in their charge, and must be willing to consult health and social work services when a child or young person in their charge appears intoxicated /under the influence of substances. Information to take

into account when children and young people have misused alcohol or substances or appear to be under the influence of some substance is noted below.

Alcohol

In an emergency, it is important not to panic. If there is any doubt about the condition of the child, contact emergency services and tell them about the child's symptoms, and if known, the extent of the alcohol they have taken. In many instances, no emergency action will be required but it will still be important to monitor the child to ensure their safety. For example, young people who are intoxicated run the risk of choking on their own vomit if they then fall asleep on their backs. Young people who smoke secretly in their room while intoxicated may start a fire.

Drugs / Solvents

In an emergency, it is important not to panic. If there is any doubt about the condition of the child, contact emergency services and tell them about the child's symptoms, and if known, what drugs or solvents they have taken. On phoning for medical help, follow any guidance given by emergency services. In relation to the child:

- If the child is drowsy but conscious, try to keep them awake and alert to prevent them from becoming unconscious.
- Do not leave them on their own.
- If they become unconscious, follow the guidance of emergency services.
- Turn them on their side in the recovery position, so that they do not choke on their vomit.
- Give any tablets, powders or other substances the child may have used to the ambulance driver.
- If they ask for water, give sips of lukewarm water only, unless otherwise medically advised. Move them to a cool place if they are complaining of overheating. You could also use a cool sponge. If they are panicky, try and reassure them that you are with them, and everything will be alright.
- Encourage them to breathe slowly and steadily in time with you.
- Contact social work as soon as possible.

A wide range of domestic and industrial products, including aerosols, can be deliberately inhaled to produce intoxication. The effect is sometimes heightened by sniffing inside a plastic bag placed over the head. With or without a plastic bag, solvent sniffing can cause death. Foster carers need to be vigilant about the storage of relevant domestic products.

The Child Dies: contact emergency services – health and police. Contact the child's social worker or if unavailable the team manager, or, out of hours, the social work emergency service. There are regulations concerning the death of children and young people who are Looked After and social work staff must follow these and will advise of next steps.

The child is in trouble with the police or is suspected of committing an offence: contact the child's social worker or if unavailable the team manager, or out of hours, the social work emergency service. If it is possible for the foster carer to be present when the child is interviewed by police, they may be the most appropriate person to do so. In some circumstances the child's social worker, a duty social worker, or a social worker from the social work emergency service will be involved in the interview.

A parent or someone else wants to remove the child without permission: the Child's Plan will specify who can or should have contact with the child, and whether there are any restrictions to someone with parental rights removing them from placement. No one without parental rights or where there is a legal condition of residence with the foster carer can remove the child and if this is threatened or suggested, social work and / or the police should be called immediately.

Where a parent with full parental rights wishes to remove the child unexpectedly, the foster carer should, if possible, try to negotiate with the person who wants to remove the child, suggesting that he or she can contact the child's social worker, the duty social worker or the social work emergency service.

The foster carer should make a note of the full name, address, telephone number and relationship of the person to the child. If the person is still insisting on moving the

child, the foster carer should contact the child's social worker, the duty worker or the social work emergency service.

If the situation is becoming difficult or the foster carer is concerned for the welfare of the child, or anyone in their household, the police should be called by dialling 999 in an emergency or for advice and information you can call 111.

There is a strong suspicion or disclosure of abuse: when a foster carer suspects abuse of a child (whether due to disclosure of abuse or otherwise), they should contact the child's social worker, or if unavailable, team manager, or if out of hours, the social work emergency service without delay. The process of what happens next can be found in the section about child protection noted earlier in the handbook.

There is a sudden crisis in the foster care home affecting the placement: a sudden illness or other emergency may affect the placement. In such instances the safest possible urgent or temporary arrangement for the child should be made. Ideally, this should be done in consultation with the child's social worker and the supervising social worker. However, there can be occasions when foster carers may have to make their own decision to use a babysitter, another foster carer or a relative until care arrangements can be properly reviewed. On these occasions, it remains essential that as soon as possible – and at the latest, within twenty-four hours – the foster carer advises social work of the crisis and the arrangements made for the child.

In relation to instances where the child:

- Does not return home within a reasonable time and / or you do not know where they are
- Runs away
- Has not returned home from an unsupervised visit to their family

The child's social worker or team manager should be notified as soon as possible (or the social work emergency service) and it will be agreed who will do what, such as phoning known contacts and checking possible locations. Unless there is reason to suggest it is not necessary, the police should also be contacted. Timescales will be agreed for updating circumstances.

Information required from the foster carer of a missing child for the police will include:

- Description of the child, what clothes s/he was wearing and a recent photo
- When last seen and with whom
- Details of places the young person would likely visit – friends and family members
- Mobile phone number and contact details of friends and family
- Do they have any money on their person
- Any circumstances that would increase the risk to the young person
- Previous behaviour patterns
- What was their state of mind
- Details of any family contact

The local authority has procedures and guidance in relation to instances where children and young people who are looked after away from home are missing. These can be accessed here:
https://www.argyll-bute.gov.uk/sites/default/files/children_missing_from_local_authority_care_protocol_0.pdf

Social work staff will follow these procedures when contacted by a foster carer in the above noted situations. These procedures link to Police Scotland's own procedures – Children and Young People Missing from Local Authority Care.

Holidays / Passports

The person/s with parental rights and responsibilities for any child who is looked after away from home, hold the authorisation for that child to obtain a passport, go on holiday and / or leave the country; consent for this should be sought from them. This will be done through the child's social worker. If a parent cannot be found or is adamant about withholding authorisation then this must be discussed at a Looked After Child Review and / or through a Service Manager's consultation. In any event, discussion of this must take place with the child's social worker well in advance of the proposed holiday.

Guidance notes for social work services can be found at:

www.gov.uk/government/publications/guidance-notes-for-social-services-departments-when-applying-for-passports-on-behalf-of-looked-after-children.

Independent Sources of Information for Foster Carers

Foster carers may choose to seek information from sources outwith Argyll & Bute Council. Such sources include the Fostering Network, CoramBAAF and the Centre of Excellence for Looked After Children in Scotland. These organisations publish extensive material related to fostering. Contact details for these organisations can be found in Section 2 of the handbook.

Section 10

Financial Arrangements

Financial Arrangements

Foster carers are considered to be self-employed individuals for the purposes of registering with the Inland Revenue (see more details about this below). Foster carers receive fostering allowances, which are comprised of two elements; the first is an

allowance that pays for the child or young person's upkeep whilst they live with you, and the second is a fostering fee solely for the foster carer/s. The breakdown of the allowances is contained in the foster carer's agreement and requires updating annually.

Fostering Allowances Current Rates 2019/2020 (revisited 1st April every year)

Age Banding	Weekly Rate
0 – 10	273.19
11 - 18	327.82

The Allowance is intended to cover the following:-

Basic Allowance	**£273.19**	**£327.82**
Carer's component (fee)	76.48	87.42
Clothing & footwear	32.78	43.71
Food	32.78	43.71
Household costs	19.13	19.13
Pocket money & leisure	19.13	30.05
Childcare	13.66	13.66
Training & meetings	13.66	13.66
Travel	13.66	13.66
Personal care	7.10	18.01
Insurance/wear & tear	19.13	19.13
Birthday & religious festivals	12.02	12.02
Holidays	13.66	13.66

Payment of Allowances

Foster carers complete a bank mandate form on approval as foster carers. The allowances are paid directly into the foster carer's bank account on a fortnightly advance basis. Rates are reviewed periodically and foster carers will be notified about

updated rates. Foster carers are allowed 14 nights paid respite per year and this will not affect their allowances.

Ending payment of allowances

When a fostering placement ends, the fostering allowance ceases on the day the child leaves the placement. The supervising social worker is responsible for notifying the Finance Section when a placement comes to an end. As payment of fostering allowances are made in advance, there may be overpayments to foster carers, which will be reclaimed by the Finance team, usually through the adjustment of subsequent payments.

Travel Claims

The fostering allowances provide for £13.66 per week to cover travel expenses associated with a child or young person placed with you. This covers the costs of everyday activities such as going to the local brownies, school and dentist, for example. If you incur travel for a child or young person over and above 50 miles the cost of the additional mileage may be claimed for and will be paid at 45 pence per mile.

Emergency Placement Needs – Clothing for children and young people

Children that are accommodated in an emergency may not have adequate clothing. Under these circumstances, it is the responsibility of the child's social worker to ensure that foster carers are provided with money for clothing, which will be made on a discretionary basis. This should only be requested if the child arrives in placement with no clothing and it is clear that the child's clothing and belongings will not be available to the foster carer from the child's parent(s). If you do feel you have to purchase clothing before you have received the fostering allowances, please discuss this with the child's social worker first and it may be agreed that if you can buy clothing for the child, the cost will be reimbursed to you if you provide all relevant receipts.

Once you are in receipt of the fostering allowances it is your responsibility to ensure the child has suitable and sufficient clothing and footwear.

Should you be in any doubt about the clothing that you have to purchase, please discuss this with your supervising social worker. However, the general principles should be:

- The provision of adequate and separate clothing for school, leisure, nightwear and a variety of weather conditions
- Children's feet should be measured before buying shoes of any kind including training shoes.
- Children should not have 'hand me downs' or clothing purchased from charity shops.

When a child leaves placement, it is the expectation that their clothing should at least meet minimum requirements. If the child has been in your care for over three months, they should have a full complement of up to date clothing and footwear, in good condition. Carers need to evidence that all children in their care have plentiful changes of clothing and that children are encouraged to take part in choosing their clothing (where age appropriate).

Hire Purchase

Foster carers should not sign any hire purchase agreements on behalf of teenagers in their care as they may be held responsible for the debt if a young person fails to pay.

Income Tax / National Insurance

Foster carers are treated as self-employed for taxation purposes. Her Majesty's Revenue and Customs expects that all income is declared and foster carers require to register as self-employed with HMRC. The Fostering Network has produced a helpful booklet, 'Income Tax and National Insurance' as part of their Signposts in Fostering range.

HMRC has produced a self-instruction on-line pack through the following link:
www.gov.uk/self-assessment-tax-returns

All foster carers are required to register as liable to pay national insurance contributions within three months of starting work. You may be fined if you fail to do so. Registration does not automatically mean you have to pay National Insurance

contributions, as you may be eligible for an exemption. The tax office will also give you the required information – ask for a leaflet concerning tax and self-employment. However, please note, it is not the responsibility of the tax office to notify your self-employed status to the NI contributions office. They work separately, and it is your responsibility to ensure that you have filled in the necessary documentation for both tax offices.

Home / Car Insurance

Foster carers need to be aware they can be held liable for injury to the fostered child. In extreme circumstances they may require legal representation, for instance, if allegations result in charges being laid against them. Argyll and Bute Council subscribes to the Fostering Network on behalf of all foster carers, and this entitles them to receive free legal advice. They may also benefit from the Fostering Network's legal expenses scheme, which pays costs incurred as a result of any criminal prosecution brought against an individual or family member whilst acting as a foster carer. Civil claims are not generally covered by the policy.

Household Insurance

It is the responsibility of all carers to inform their home insurance provider that they are fostering and to ensure that they have a policy that covers for both accidental and malicious damage caused by a young person within their home. The Fostering Network provides information on providers who offer specific foster care insurance. Argyll and Bute do not provide insurance against risks associated with the placement of young people in carers' households and the service will not be held responsible or liable for any loss, damage or injury resulting from the placement.

The Fostering Network booklet – Insurance and Foster Care is a useful guide

Car Insurance

Foster carers must inform their car insurance company that they foster and arrange suitable cover. The insurance policy must be fully comprehensive and include business use. Foster carers will be required to show their insurance documents, MOT and driving licence to their supervising social worker every year. This is also a requirement of the Foster Care Review.