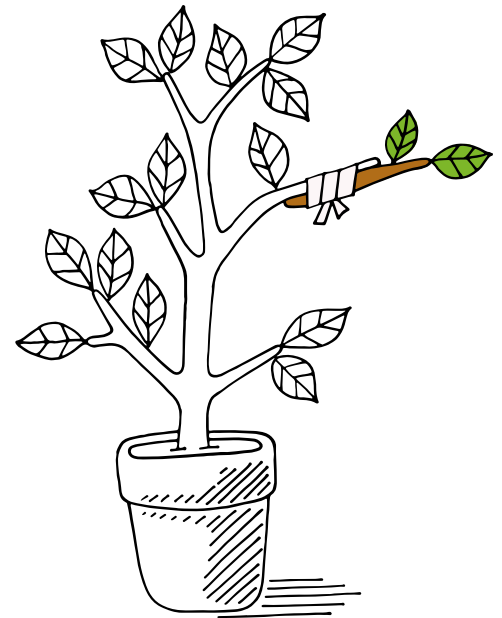




Handbook for Foster Carers

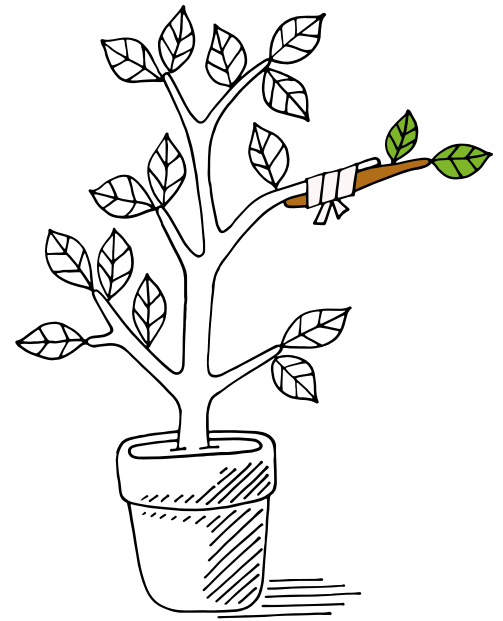
families for children
glasgow cares for their future... could you?





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Welcome and Introduction

This handbook is a source of guidance and reference for approved foster carers, respite carers and shared carers all of whom are registered under the Fostering Regulations. Additionally, it is a source of guidance for Supervising Social Workers and Team Leaders who work with them. We have tried to cover a wide range of issues relating to the practice of fostering which focuses on the needs of the children in your care and the legal and statutory framework that you work within. Not every situation you will encounter will have been covered and this handbook is not a substitute for a good working partnership with your Supervising Social Worker. Each child is an individual with a unique personality and needs, and you will need to respond accordingly to the needs of the individual child and young person.

This handbook will be regularly updated so if you have suggestions for improving it please inform your Supervising Social Worker, as we want it to meet your needs and welcome your feedback.

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 for children and young people placed in their care.

Glasgow City Council (GCC) aims to promote the wellbeing of every child by ensuring that they are safe, healthy, achieving, nurtured, respected, responsible, and included in accordance with Getting it Right for Every Child (GIRFEC) and SHANARRI principles. GIRFEC is the bedrock for all children's services. 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. GIRFEC is being threaded through all existing Scottish Government policy, practice, strategy and legislation affecting children, young people and their families. Foster carers and respite carers have an important role to play in achieving this aim and will be supported by Social Work Services to promote the wellbeing of every child and the highest possible quality of care.

In line with the UN Convention on the Rights of the Child, foster carers have a pivotal role in promoting the following rights:

- Have their say - to have their views listened to and to be involved in decisions that affect them.
- Feel safe - to be kept safe by others and not to be bullied.
- Be looked after properly - to have a comfortable and safe place to live, good food and a choice about clothes
- Contact with family - to have contact with friends and family as

- long as it is safe for the child.
- Information - to information about things that matter to them and decisions about them.
- Education - to go to school and to be encouraged and helped with school-work and peer relationships.
- Be treated fairly - by other children and adults.
- Pocket money - to receive weekly pocket money.
- Play - to do things that interest them as long as it is safe.
- Health - to get the help needed to promote the best possible physical and mental health and wellbeing.
- Privacy - to respect personal information and not give it to others who don't need to know.
- Complain - to make a complaint if not treated fairly and to be supported to do so.

All of the above rights are in conjunction with the Scottish Government's Protecting Children and Young People: Framework for Standards Protecting Children and Young People, the Charter, produced by the Scottish Government, sets out the clear message from children and young people that they have a right to be protected and be safe from harm from others. When we have difficulties or problems we expect you to:

- Get to Know us
- Speak to us
- Listen to us
- Take us seriously
- Involve us
- Respect our privacy
- Be responsible for us
- Think about our lives as a whole
- Think carefully about how you use information about us
- Put us in touch with the right people
- Use your power to help
- Make things happen when they should
- Help us be safe

For further details please visit: www.scotland.gov.uk/Publications/2004/03/19102/34604

The Families for Children (FFC) Fostering and Adoption Service is one of a range of services

provided by GCC to meet the needs of vulnerable children and young people and to improve their outcomes. Like other services provided by GCC, the Fostering and Adoption Service aims to:

- Safeguard children and young people
- Promote the welfare of children and young people
- Ensure that the welfare of children and young people is paramount in all decisions
- Seek and have regard to the views of children and young people and their families in decisions that affect them
- Treat each child, young person and their family with dignity and respect and in a manner that reflects a non-discriminatory approach
- Protect the privacy of each child and create a safe environment through the promotion and development of appropriate physical arrangements, routines, attitudes and general atmosphere
- Assess and respond to the changing needs of children, young people and their families within an appropriate timescale.
- Provide for the physical, social and emotional needs of individual children and young people.

The Handbook has been compiled taking the above aims into account, and also with reference to relevant legislation, national guidance, National Care Standards, GCC and Social Work Services' Policy, Procedures and Practice Guidance.

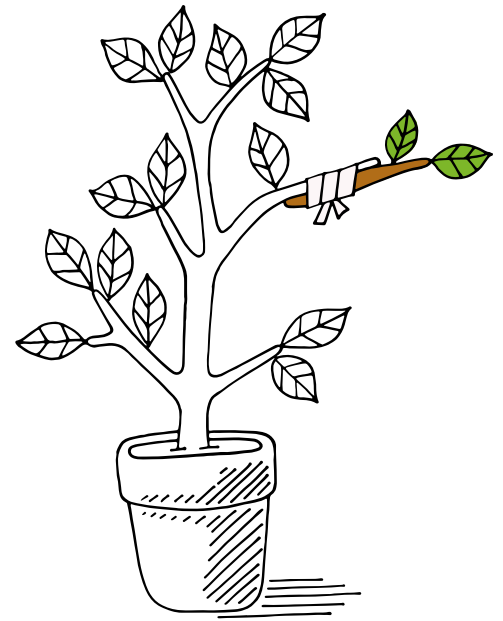
The Handbook contains themes throughout that are relevant to other forms of care e.g. Short Term Care, Permanent Care, Intensive Family Support Care, Respite Care, Multi Treatment Foster Care, Shared Care and Community Based Respite Care.

Sources of further information are noted at various points in the Handbook.

Foster carers and their allocated Social Worker (known as the Supervising Social Worker) may find it helpful to work through this Handbook together, to ensure shared understanding of

the content, and to check if further information or training is required.

Periodically, sections of the Handbook will be reviewed and updated, and the views of foster carers, staff and members of the Fostering Panel will be taken into account in that process. Where appropriate, we will also use the feedback from the experience of children and young people who are/have been looked after away from home to inform the content.



The Fostering Service

Aims of the Service

Glasgow City Council (GCC) Fostering and Adoption Service, Families for Children, (FFC) is one of a range of services provided by GCC to meet the needs of vulnerable children and young people and to improve their outcomes. The Fostering and Adoption Service sits within the Social Work Service and contributes to implementing the main duties of GCC 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 services, 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. It is GCC's policy that children under the age of 12 should not usually be placed in a residential home, unless they have specific needs, which are best met in a small group living environment.
- 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.

The above are corporate GCC responsibilities for which Social Work Services has on some occasions lead – but not sole - responsibility; other services such as Health, Education, and Housing, together with other agencies, also hold responsibilities for children and young people.

The National Practice Model, 'Getting It Right for Every Child' (GIRFEC) aims to improve outcomes for all of Scotland's children and young people and to do this through encouraging a single system of service delivery across children's services. This does not necessarily mean that services are all part of one department or agency, but that those working across children's services see themselves as part of a single system to deliver services to children, young people and their families and have the same overall aim of improving outcomes for children and young people. This means working across organisational boundaries and putting children and their families at the heart and centre of decision making – and giving all our children and young people the best possible start in life.

The GIRFEC approach supports a whole range of policy and legislation designed to improve outcomes for children and young people and ensure that they are safe, healthy, active, achieving, respected, responsible, included and nurtured. These responsibilities are undertaken where possible and appropriate, in partnership with birth families and those who hold parental rights and responsibility for each child and young person.

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 of this can be accessed through 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

Fostering is an arrangement for a child and young person to live with a foster carer who is not their parent, and who does not have parental rights and responsibilities for them. For children and young people who are looked

after by GCC, their Foster carers will always be approved by GCC Fostering Panel to carry out the foster care task in accordance with legislation and Regulations. Foster carers are subject to annual Foster Care Reviews. Further information in respect of the Foster Care Review is contained in Section 2 – Review of Foster Carer Approval.

Families For Children Team

The Fostering and Adoption Service, Families for Children, is managed through Social Work Services. This team is based at 136 Stanley Street, Glasgow, G41 1JH and comprises of the Head of Service, Mike Burns and Cathy Coll and Aileen Shaw, Service Managers.

Over the past few years the number of children looked after in foster homes has risen significantly. To reflect the increased number of children requiring placements the team has grown significantly and now has 3 Assistant Service Managers, 7 Team Leaders, 56 Supervising Social Workers, 3 Senior Learning Development Officers and 2 Senior Recruitment/Information Officers. There is also a large Administration Team, which supports the wider Families for children Team.

The Team is responsible for the recruitment, assessment, preparation, training, support and supervision of Foster carers; it is responsible for ensuring that the legislation and regulatory standards for fostering services are met. The Families for Children team operate a duty system, which takes referrals for foster care from across the GCC area.

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) is set out in legislation and 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 child protection unit of Her Majesty's 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, eg to make a complaint if necessary, can be found [here](#). Families for Children, as a registered service, are 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 agency is required to produce their own self-evaluation of the services they provide, 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.

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 and young people are matched with foster carers, and at the support and supervision of placements. Further information can be found at: www.careinspectorate.com

The Scottish Government in May 2011 published National Care Standards for foster care and family placement services. All fostering agencies must comply with these national care standards. They have been developed to make sure that the services they provide are of high quality.

The 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.

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 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 Governments website.

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 in to 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 the UK National Standards can be found on the Fostering Network or sourced by your Supervising Social Worker.

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 children and young people's needs 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 on-going areas of development for foster carers and the Fostering Service. The core competencies are around:

Foster carers' ability to provide a good standard of care to other peoples' Children in line with Children's Rights and the UN Convention on the Rights of The Child

This includes promoting healthy emotional, physical and sexual development, as well as health and educational achievement. Understanding of the importance of a sensitive response to children and young people's distress and feelings relating to separation and loss is fundamental. Other key components of care include:

- The provision of suitable personal care and promotion of health and self-esteem.
- Application of flexibility in response to a range of needs, and diverse backgrounds.
- An ability to work closely with children and young people's families, and with others who are important to the child.
- An ability to set appropriate boundaries in relation to children and young people's behaviour, without resort to physical or other inappropriate punishment.

- An awareness of their own attitudes in relation to behaviour and values.
- A knowledge of normal child development
- An ability to listen to and communicate with children and young people in a manner, which fits with their age and understanding.

The provision of a safe and caring environment

This includes attention to applicant's health and safety.

- Helping children and young people begin to take responsibility for their own safety, and promote awareness that there are guidelines in relation to safe caring and the protection of children and young people. Each foster carer at key stages will develop with their Supervising Social Worker, or assessing Social Worker, if they are at the pre-approval stage their personal Safe Care Family policy.
- An ability to help children and young people recognise safe and unsafe situations, help them feel able to talk about matters which feel risky to them, and help them cope with adverse or abusive experiences, which may make them vulnerable.

Working as part of a team

This includes skills in:

- Communication - sometimes verbal, on the phone or presenting information in meetings.
- Through a clear written record of observations.
- An awareness of the confidentiality of personal information.
- An ability to work with other professionals and those important to the child in relation to agreed tasks.
- An awareness of the impact of fostering on those close to the applicants.
- An awareness of the rights of diverse individuals and groups.

Foster carers own development

This includes an ability to appreciate how personal experiences have affected them and their families, and awareness of the possible

impact of fostering on their own family. A commitment to training, continued learning and development of a range of supports for each applicant as individuals and for the Foster Care family.

Review of Foster Carer Approval

National Care Standards state: 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)

Approval of foster carers must be reviewed on an annual basis, in line with Council Policy and taking into account the National Standards and Regulations. After being approved as a foster carer your first and third annual review should be at the Fostering Panel. Subsequent annual reviews will be convened and chaired by an Assistant Service Manager from FFC. An early review may be convened at any time if there are any significant changes in circumstances or if FFC deem this necessary to address concerns in respect of approval.

The review will consider the foster carer's continued registration and whether there needs to be any amendments and variations made to their registration and approval. Any proposed changes to the registration will require to be reviewed at a Fostering 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 carer's skills and abilities benchmarked against how they meet the well-being needs of the children and young people they care for, as set out in the 8 SHANARRI well-being indicators, detailed previously in the handbook. The ability to demonstrate your individual learning and development, supported by FFC, is a very important area within the FCR.

There is the expectation that all participants (young person, Supervising Social Worker, foster carer and Social Worker for the young person) will provide written reports for the review. All participants will receive a written record of the review, which will include the decisions. Once everyone has an opportunity to check the record, and agreed, your Supervising

Social Worker should ensure that you sign this document (R6) as it will be retained in your 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 FCR and should put this in writing within 28 days, addressed to the Service Managers Cathy Coll and Aileen Shaw.

The review will also cover aspects of how foster carers provide a safe environment for the child 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 FCR 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 foster carers abilities to meet the child's health and well-being needs, evaluating strengths and areas of development.

It is also an important opportunity for the child's views to be ascertained usually by the child's Social Worker, individually or jointly with the Supervising Social Worker. While there is a specific report for the child within the FCR (R5) there are many tools and templates that can be used to avoid duplication to capture the child's experiences, for example, information used in the Child's Child's Plan, GIRFEC report, Having Your Say, Viewpoint or Talking Mats communication tool.

This suggested list is by no means definitive but the key message is that the child's views 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.

Protecting Vulnerable Groups/ Disclosure Scotland

In February 2011, the Scottish Government introduced a new membership scheme to replace and improve upon the current disclosure arrangements for people who

work with vulnerable groups - the Protecting Vulnerable Groups Scheme (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. Thus, 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 protection 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, which replaces the use of standard and enhanced disclosures for work with vulnerable groups. 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 on additional responsibilities. This will include taking decisions, on behalf of Scottish Ministers, about who should be barred from working with vulnerable groups.

What do Protection Services do when I apply to be a PVG Scheme Member?

They will check:

- Are you barred from working with children and/or protected adults?

- A check is carried out to confirm that you are not 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 with (subject to certain exceptions)
- You are not barred from working with children and/or protected adults.
- 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).
- 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
- There is vetting information which has a bearing on your suitability to do regulated work.

disclosure check. This means we will not do enhanced disclosure checks for carer's relatives when carers are visiting them. Further information can be obtained from: www.disclosurescotland.co.uk/index.htm

If the vetting information identifies conduct which has a bearing on your suitability to do regulated work your application for PVG Scheme Membership will be considered by Protection Services.

What do Protection Services do once I am a PVG Scheme Member?

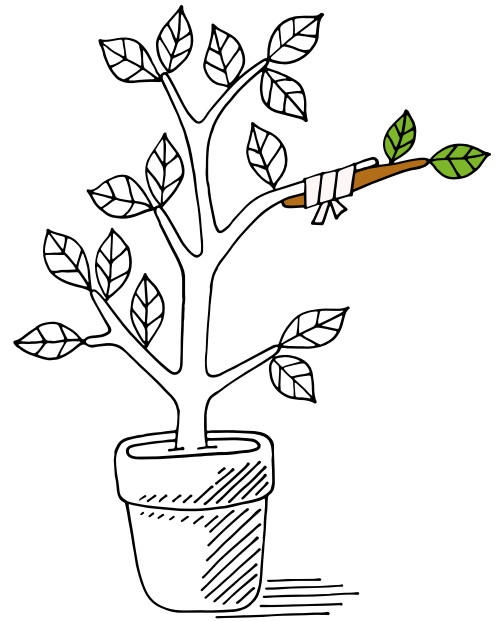
All PVG Scheme Members are subject to ongoing monitoring (continuous updating). This means that when you are a PVG Scheme Member your vetting information is kept up-to-date and if there is new information about you this will be assessed to determine if you are unsuitable to do regulated work with children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

There are separate forms for prospective foster carers if they are PVG scheme members already. As PVG applications cover regulated work with either children or protected adults, it is possible that new applicants have a previous PVG with regards to work with protected adults. Please confirm with Supervising Social Worker.

Other adults living in the foster adoptive 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



The Formal Working Arrangement

- The Foster Carer agreement
- Supervision and Support to Foster carers
- Training For Foster carers
- Information: Confidentiality, Security, Recording
- Complaints
- Withdrawal / De-Registration
- Glasgow City Council Equality Policy
- Glasgow City Council : Smoke Free Care Placement Guidance

Foster Carer Agreement

National Care Standards 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.

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 Fostering Panel. The Regulations specify the areas which must be covered in the

Agreement (Schedule 6 of the Regulations). The tasks and responsibilities of local authorities and foster carers will be explained further in later sections of the handbook. There is a summary of the overall responsibilities of foster carers in the Fostering Code of Practice, further information can be found at www.fostering.net/training-and-events/in-house-training/skills-foster

Supervision and support to Foster carers

National Care Standard states: you know that your reviews will always include an assessment of levels of supervision (Standard 11)

Foster carers can expect regular Child's Planned contact from their Supervising Social Workers. The frequency of face to face contact will be at 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. The arrangements in relation to each placement will be covered in the individual child and young person's Placement Agreement. However, Glasgow City Council – taking into account the legal requirements - 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 Social Worker.

- Good practice would be that one joint visit by the child and young person's allocated Social Worker and the foster carer's Supervising Social Worker on a quarterly basis. There should be one of these quarterly joint visits in the lead up to the child and young person's Looked After Child Review and this should be used in preparation for the Review.
- There will be a minimum of two unannounced visits by the Supervising Social Worker each year to the placement.

Foster carers should not hesitate to get in touch with the Service for help and advice if they have any questions or concerns. Families for Children staff work in an 'agile' work environment, which should allow carers to easily access their Supervising Worker, either through office phone lines or direct to the Supervising Worker's individual mobile phone. Foster carers will be given details on how to contact their Supervising Workers and who to contact when the Supervising Worker is not available, including the Out Of Hours Service.

Families for Children 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 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 Team Leader for their Supervising Social Worker. If this is not possible then they should ask to speak to the duty worker or the duty Team Leader at Families for Children. They can also contact the Child's Social Worker within the Area Team.

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 role:

- Ensure the foster carers within their caseload are carefully matched to children who fit their approval and registration status.
- Safeguard the welfare of each child in placement by maintaining a minimum of monthly placement visits to children and foster carers, continually evaluating the foster carer's abilities to meet each individual child's health and well-being needs. Some visits will be announced and others shall be unannounced (minimum of two each year).
- Out with placement visits, ensuring the best possible communication with foster carers.
- Formal supervision of every foster carer within their caseload 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.
- Ensuring each foster carer understands the importance of their on-going development by actively emphasising each foster carers' individual learning, development and training, as being fundamental in maintaining approval and registration requirements, thus, promoting high quality foster care.
- Ensuring that each foster carer understands the importance of working collaboratively in partnership with the Child's Plan and with the care team.
- Supporting each foster carer to maintain and safely store records for each child in their care.
- Maintaining records of all placement visits, communication and assessments of all foster carers within their caseload, while ensuring that the maintenance and storage of all records complies with regulatory, legislative and best practice guidelines including Data Protection.
- Ensuring 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 on-going approval of each foster carer.
- Ensuring 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.
 - Assessment of prospective foster care applicants within procedural and best practice timeframes utilising robust assessment frameworks and tools.
 - Ensuring that the whole family, including the foster carer's 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 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 Social Worker

The role of the child's Social Worker, usually based in an Area Team locality, is again not definitive, but it is inserted 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 have case management responsibility for children who are also 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 alone or in isolation. 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 children to remain at home. However, if this is not safe, and the child has to be removed, the Social Worker, Team Leader and Service Manager shall all be involved in that decision and to be clear as to the most appropriate legal route for accommodation dependant on the circumstances.
- The Social Worker or Team Leader will alert Placement Services of the child's proposed accommodation. FFC Duty Team will then begin the process of matching the child's needs 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 GIRFEC 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 child's needs and experiences to ensure they are prepared for meeting the child's needs whether it is an emergency accommodation or a planned accommodation. Research links to high risk of breakdown when this critical information has not been shared with the foster carer.
- The child's Social Worker, usually with a second Social Worker from their 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 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 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 home. The Social Worker, or one of their team members 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 the foster carers profile can be valuable.
 - Once the Social Worker has placed the child with the foster carer, the Social Worker will then set about arranging the emergency multi-agency Child's Planning Meeting, which should be held within 3 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 are scheduled within regulatory timescales i.e. 3 days, 6 weeks, 12 weeks and 6 months if the child remains accommodated. If the child has not returned home at the 6 month point the Social Worker has responsibility to arrange a multi-agency Permanence Review Meeting to consider if rehabilitation is safe and viable or not and that an alternative Child's Plan should be progressed.
 - The Social Worker must prepare a report for the Looked After 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 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 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. All key people should be in attendance at Children's Hearings although the responsibility for ensuring the key people are at a Children's Hearing lies with the Reporter from the Scottish Children's Reporters Administration.

There are many other individual distinct roles and responsibilities between the Supervising Social Worker and the Social Worker, which are explored further in this Handbook linked to other sections. 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 child's needs being at the centre of each and every distinct role from across the care team.

Training for Foster carers

National Care Standards 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)

Glasgow City Council considers its foster carers as essential to the success of its Fostering Service. Families for Children recognise that the increasing complexity of children in foster placement 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 Glasgow's most vulnerable children.

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.

All our courses underpin the principles of "Getting It Right for Every Child", The Scottish Code of Practice, UK National Standards, National Care Standards and link to the relevant Scottish Vocational Qualifications (SVQ) where appropriate.

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.

Many foster carers come to Families for Children with both professional qualifications and acquired experiential learning. Experienced foster carers are encouraged to

express an interest in undergoing training to support both preparation and post approval training.

Our commitment to your training means that we try to make it as accessible as possible by setting times convenient to school hours and holidays, providing crèche for the under-fives, providing lunch and refreshments and offering evening courses.

Continuous Practice Development will apply to all Foster carers and be offered as Core Skills Training and more specialised training intended to address the needs of individual Foster carers in relation to the care needs of a specific child.

All newly approved foster carers are expected to complete the Child Protection, Sexual Abuse Awareness, Men in Foster Care, Talk 2 Sexual Health & Relationships programme and Data Protection, Recording and Report Writing in Foster Care within 12 months of approval.

Ten sessions of Post approval Training are part of the Core Programme for carers after they have achieved over twelve months of post approval experience as foster carers.

We also offer more specific interest training in Life Story Work and Understanding Challenging Behaviour, which offers foster carers an opportunity to share the learning experience with area team social workers and supervising workers.

We are 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. Foster carers are encouraged to discuss their learning and development needs with their supervising worker who can access the training calendar and book attendance on specific dates. Your training Child's Plan should be reviewed and agreed at your annual foster care review.

Your Supervising Worker has a responsibility to discuss each carers training needs with the Senior Learning and Development Officers who will provide information about the timing, availability and range of learning/training

opportunities on the training calendar. The carer's newsletter will have details of any new training events.

Families for Children invest heavily in training for carers and therefore it is crucial that carers continually develop knowledge and skills by accessing the training programme which is provided. By initially signing the Foster Carer agreement there is a clear commitment that training will be accessed by Foster carers. For carers who do not commit towards their own learning & development this would be raised as a concern which would be addressed through the Foster Care review process to consider their continued registration.

The Scottish Government National Foster Care Review (2013) is in the process of detailing an implementation plan setting out the mandatory training requirements of all foster carers that must be accessed and evidenced to maintain approval and registration.

National seminars/conferences/courses

As foster carers, you will hear of, and read about, nationally organised seminars, courses and conferences. The Department has a limited budget, and if you are interested in attending any of these, please discuss it with your Supervising Social Worker.

Individual Learning Accounts

Many of our foster carers will qualify for financial support to access the wide range of courses available through ILAs. This support is available to people who are 16 or over and living in Scotland. If you are interested in learning something new or brushing up your skills you can find further information on the courses available on the ILA website. www.myworldofwork.co.uk/content/ila-scotland-funding-for-you

"Knowing is not enough; we must apply, willing is not enough we must do." (Goethe)

Record keeping /Confidentiality

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. This chapter is based on the Government's Write Enough training pack which is used in the Children and Families training programme for foster carers.

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 - 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.
- 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 – friends, away with birth family, missing (please see entry in Handbook on Children Missing from Foster Care).
- 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 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, child's responses or before and after
- Requests for help or assistance.
- Times when alternative care have been given, e.g. babysitters, with detail 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.

You should record accidents and incidents in a separate book, which your supervising social worker on their regular home visit may ask to see.

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 a locked cabinet.

If you have difficulties 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.

Separate record for each child

Many carers record in diaries. The Fostering Network strongly advise you to maintain a separate notebook for each child rather than use a diary, which should only be used as a record of dates of activities. Families for Children expect you to keep a separate record for each child in placement.

Parent and baby carers recording has to be particularly precise, as developmental changes in the child and any change in parental care have to be charted. Parent and baby carer records are part of an assessment, which an appointed Safeguarder may wish to read and copy for use in a hearing. Though attendance at court is rare, parent and baby carers need to be prepared for this and will receive support from the child's social worker and their supervising social worker.

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. GCC social work are exploring ways of making available to foster carers secure email facilities that use encryption to prevent third parties intercepting and reading the messages. You will be advised how to use this facility when it becomes available to you. When available you should only use secure email and stop any use of non-secure email.

Until that time it is recommended that you use the child's Carefirst number 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 Data Protection Act (explained later in this chapter), 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 in 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 on line 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 the child's social worker.

Key records to keep

The following are key documents and written information about the child placed which you should be kept in a secure place:

- Background Information Record
- Child's Child's Plan
- Diary or diary sheets clearly written, dated and signed
- Special reports as appropriate such as Educational and Health.
- Correspondence with Social Worker and Supervising Social Worker
- Copy of LAC reviews
- Specific work done by the foster

child and yourself (this would usually belong to the child)

- Court Orders / Children's Hearing Orders
- Contact details – arrangements and correspondence and meeting minutes
- 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 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 particular opinion.
6. Record in a way that you would be happy for the child or 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

At the end of a placement your recording and other documents on the child have to be returned to the child's social worker. 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 Act (1998)

The Data Protection Act (1998) regulates how personal information is used and protects individuals from misuse of personal details collected about them. It provides a common-sense set of rules which prohibit the misuse of personal information collected without stopping it being used for legitimate or beneficial purposes.

The details of the Data Protection Act are quite complex, but at the heart of it are eight common-sense rules known as the Data Protection Principles. These require personal information kept to be:

- fairly and lawfully processed
- processed for limited purposes
- adequate, relevant and not excessive
- accurate
- not kept longer than necessary
- processed in accordance with an individual's rights
- kept secure
- not transferred abroad without adequate protection.

Organisations using personal information, including the local authority, must comply with these principles.

The Act provides stronger protection for sensitive information about individuals, such as health details.

The Act, with some exceptions, gives individuals the right to find out what information is held about them by organisations.

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 www.fostering.net or www.writeenough.org.uk

You should feel free to contact your supervising social worker or the child in placement's social worker if you have any queries or concerns about recording.

Withdrawal / De-Registration

When carers choose to withdraw from their fostering role they will be de-registered by the Fostering Panel. This may be due to ill health, age or other significant changes in circumstances. The carer is required to write a

letter detailing their reasons for withdrawal from the Fostering Services. The supervising worker will write a report which will be submitted to the Fostering Panel for further discussion.

Although it is not compulsory for carers to attend the panel for de registration, there is an expectation that they will attend to present their views.

There are occasions where the supervising worker may recommend within a written report that the foster carer be considered for de-registration following practice concerns. Where it has been evidenced that foster carers are not providing the level of care which is expected of them, then this may be referred to the panel for further discussion and possible deregistration.

If deregistration was the outcome of the Fostering Panel, this decision would have been reached after a lengthy process during which the issues will have been discussed with the carers in various forums including foster carer reviews. The carers may attend the panel and, if they disagree with the outcome they can ask for a review of the decision.

Glasgow City 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.

Glasgow City 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.

Foster carers are expected to be familiar with the Equality Policy and promote this in their practice while caring for Glasgow's most vulnerable Children and Young People.


Further information on the Equality Scotland Act can be found at:

www.scotland.gov.uk/Topics/People/Equality

If you would like a hard copy of the Council's Equality Policy you can request this through your Supervising Social Worker.

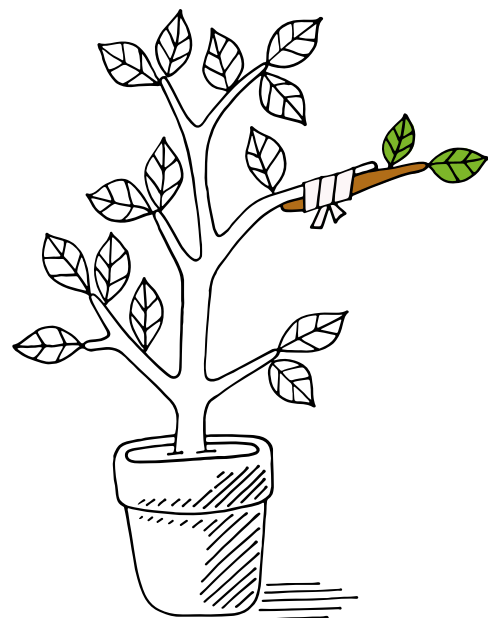
Glasgow City Council : Smoke Free Care Placement Guidance

Smoking is the single greatest cause of preventable ill health and death in the UK. 30% of Glaswegians die from smoking related diseases, therefore efforts must be made to encourage young people not to start smoking; support smokers who want to stop; and to protect young people from the damaging effects of passive smoking.

It is known that looked after and accommodated children and young people have a higher incidence of smoking compared to that of the general population. Therefore, in order to gain a greater insight, NHS Greater Glasgow and Clyde, in partnership with Glasgow City Council, funded a two year pilot project to develop a smoking cessation service for looked after and accommodated children (LAAC). The project have produced a  report [307kb] which identifies how care placements in Glasgow can and must do better in protecting children and young people from the adverse effects of passive smoking.

Glasgow City Council endorses a 'Smoke Free Workplace' policy in all Council premises, including children's residential units. Glasgow City Council do not condone smoking under any circumstances in these premises, and as a result of this report, are actively working towards ensuring a positive, smoke free environment is provided for all looked after and accommodated children and young people in Glasgow.

In seeking to promote and ensure children and young people's health and well being, Families For Children 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 travelling in motor vehicles.



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, considering the physical, social, educational, emotional, spiritual and psychological wellbeing and development of each individual child and young person. From this, it will be clear what individual children and young people need from those who look after them.

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.

Referrals for Foster Care Placements

All requests for placements are made to the Placement Team by the Social Work Area Team. The Placement Team complete the initial

referral form gathering the relevant information. The team pass the referral to the duty worker at Families for Children and in consultation with the duty Team Leader, a decision is made as to whether a fostering placement is suitable. This will then allow consideration in respect of their ability to meet the child's needs and improve their outcomes.

Some Foster carers may agree to be contactable out of hours by the emergency Social Work Standby service.

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 answers are not yet known). For instance, questions in relation to the following:

- The child's name, dob 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 s/he has been told about this.
- 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 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 other immediate practical arrangements are needed or in place (including, for example, any existing appointments or meetings for the child)
- Who to contact or will be contacting you in future.

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 on 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 Record Booklet
- Reasons for the need for the child to be looked after away from home and the child's understanding of this, if known.

National Placement Descriptors/ Placement Limits/Bedroom Sharing

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.

It is the expectation of the Scottish Government and the Care Inspectorate that all current fostering placements are classified and recorded according to this typology. The correct descriptor should be used to define the placement type in all relevant statutory Child's Plans. The Care Inspectorate will request information (through its Annual Return) about placements to be provided on the basis of the definitions below.

Permanent: A placement secured by a Permanence Order.

For a child this means that the care Child's 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 their carer with the legal security, the stability and the time for strong relationship bonds and a sense of belonging to develop.

Long-term: A placement which has been in place for longer than 24 months 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:

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

Interim: 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 Child's Plan
- Working towards rehabilitation with birth parents or other carers (not part of a concurrency Child's Plan)
- Working towards Permanence Order with a different foster carer
- Working towards Adoption Order or Permanence Order with current carer (see definition above)

For a child this means that the care Child's Planning process has concluded that they will benefit from spending some time being cared for away from home and there is a time-linked Child's Plan for rehabilitation with parents or an alternative care placement is being sought.

Emergency: A placement made in an emergency, where no other placement type has been identified by the local authority.

(Under the Looked After Children Regulations 2009) an emergency placement must be reviewed by a local authority within 3 days, and may be extended for a period not exceeding 12 weeks) subject to Looked After Child Reviews within the 3 days and 6 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 child's planning process establishes the best option for the child.

Short Break: A placement which forms part of a planned series of short breaks (including emergency placements with a carer who is already providing planned short-breaks to the child). For a child this will mean that because of special circumstances they and their carer will benefit from therapeutic services or periods of respite.

Family Based Respite

Respite Care is primarily a partnership between Glasgow City Council and the Respite Carer. This partnership gives each side a set of expectations and responsibilities which are written into the Respite Carer Agreement. Respite Carer Agreements are a requirement of the Fostering of Children (Scotland) Regulations 2009 and every respite carer will be asked to sign one when they are approved by the Fostering Panel. The Regulations specify the areas which must be covered in the Agreement.

Family based respite carers offer children and young people short stays in carers' home in order to assist families at difficult times in their lives. Sometimes they may be on a one off occasion. Other families may need regular short periods of respite to assist them in caring for their children. Respite carers look after children and young people aged 0-16 years. Families experiencing stress or difficulties often need extra help and support for short periods of time. Parents, children and young people can all feel much better when they have had a short break from one another and a bit of space to work through a problem. As a respite carer you will meet a huge variety of children and families each with their own individual problems and difficulties.

Family based respite carers often provide an out of hours service for children who require a safe place for a short period, sometimes one night or over a weekend until assessments can be done. This will determine whether the child requires to be fostered or returned home.

When regular respite is required, contract meetings are held which involves the social worker, child and their family with the child agreeing to a Child's Plan for regular respite. These meetings involve the creation of Placement Agreements which are explored later in the handbook. The contract meeting also agrees all the child's planned dates for respite for a six month period, after which a review of the respite placement will occur and if further dates are needed they are then agreed again. Reviews of each child's placement with a respite carer should be every six months.

Family based respite carers are often able to provide support to children and their families which allows for children to remain with their families in their own communities when possible.

Fostering Placement Limits

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 since 29 December 2014 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 Supported Carers of the young adult, are not included in the placement limits.

Bedroom Sharing

Best practice standards would promote that each child should have their own bedroom in the foster home of which they are able to create their own space and personalise their bedroom according to their age and personal choices with the support of the foster carer.

New born babies and infants may need a very high level of reassurance, proximity and supervision from their foster carer; therefore, it would be appropriate given the infant's needs, for them to be in a cot in the primary carer's bedroom. However, the infant must have a bedroom to move into, as their need for close proximity reduces.

Young siblings, of pre-school age, who are used to sharing a bedroom, whose parents are clear that they wish them to share a bedroom, and this is something the child wishes, would have the choice to share a bedroom with their sibling, particularly if this reassured the children and assisted them with the transition from home to foster care. However, these children should ideally be the same gender, and there should be a spare bedroom for one of the children to progress into as they grow in confidence and independence.

It is understood that the position of children having the right to their own bedroom is not a retrospective matter, and therefore, there will be no disruption for some children who might currently be sharing and have been for some time and this arrangement is working well. Nevertheless, FFC in a considered and gradual approach with existing carers, will promote the child's right to space and privacy within the foster home by seeking to ensure they have their own bedroom.

Changing to other forms of fostering and adoption:

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. Any proposal for change should first be discussed with the supervising social worker.

Foster Carer Reviews always consider the carer's registration and this would be the forum for some changes. For instance, a short term carer who wants to change the number or age range of

children they foster should discuss this with their worker and if they agree, it can be put on the agenda for the next Foster carer review.

Certain changes require a reassessment of the carer and presentation to Glasgow City Council Panel for approval and the first stages are based on the Child's Care Child's Plan and usually a foster carer review. In respect of carers who wish to be assessed and approved to offer permanent care or adoption, there are a number of considerations and requirements, whether it's for a child currently in their care or not.

If carers want to offer permanent care or adoption for a child with them currently, this will usually be welcomed for consideration but we encourage carers to realise it is a different type of care and that regulatory and care standard processes must be followed. It should not be assumed to be "automatic" and will always include full assessment of the child's best interest and the need to safeguard and promote their welfare throughout their life, not just at the present time. This includes consideration of age and health of prospective adopters or permanent carers, especially if the child is very young and other families may be available.

Carers who would like to permanently foster or adopt a child in their care should first discuss this fully with their FFC Supervising Social Worker and the child's Social Worker from the area team – they will usually arrange a joint visit and will ensure the carer writes to the Team Leader at FFC once it is agreed to consider this more fully. Thereafter a process will be in place for the adoption and fostering service to carry out a joint assessment, including updated checks, and coordinate this with the child's care Child's Plan and area team staff. This will continue to a formal linking and matching process, and approval at GCC panel if appropriate and will be fully discussed with carers at all stages.

Transfer of a foster care placement to a Supported Care Placement:

Many young people become settled with their foster carers and all involved want the young person to remain with the family in to adulthood. Under these circumstances the Supervising Social Worker prepares a report to present at the Leaving Care Panel recommending that the carers be approved as Supported Carers for the

young person in question. The Pathway Child's Planning Assessment has to be completed prior to this, which focus on the young person's future needs. A designated member of the Leaving Care Team liaises directly with the Supervising Social Worker and foster carers. If the assessment concludes that transition with their foster carers to supported carers, meets the young adult's long-term needs for stability and independence, the foster carer, if approved, may have dual registration status i.e. foster carer (possibly for another child) and supported carer for a specific young adult. They remain subject to the same expectations and standards of all foster carers and would be subject to an annual Foster Care Review.

Changes within family of foster carer

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 their 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.

Ending Placements / Transitions

- Rehabilitation
- Leaving care/Supported Care
- Permanent fostering or adoption
- Placement breakdown and disruption

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. 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 short-term 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 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 carer's 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 returns 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 also 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 for 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.

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

Social Work Services are committed to establishing a 'Pathway Child's Plan' for every young person who is looked after when they reach school leaving age or thereafter. The Child's Plan must be reviewed every 6 months. The local authority has a duty to advise, guide and assist young people. The new legislation, Children and Young People (Scotland) Act, fully implemented in 2015, will have a significant impact in relation to new rights regarding young people who are Looked After and Accommodated. This Act will ensure better permanence Child's 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 extend 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 a Leaving Care service at their LAC reviews from the age of 15 ½ years.

The Pathway Co-ordinator 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.

Preparation for leaving care involves working through sections of 'Stuff' with the young person. 'Stuff' is Glasgow's Life Skills Pack for care leavers and has been devised to help care leavers with their Pathway Child's Plan.

Young people are sometimes reluctant to engage with professional staff as they prefer to work with someone with whom they have a personal relationship. The regulations allow for

a Young Person's Supporter to be appointed to represent 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 if foster carer with their foster carers becoming Supported Carers
- Transition to new Supported Carers
- Supported accommodation
- Supported Tenancies
- Leaving Care Services Supported Accommodation Units

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 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 that the child is very excited about the move and it seems as though 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 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 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 adopters' 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 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.

Timing is crucial in preparing children for a move, and there should be agreement between the foster carers and workers about when and how this is to be done. For children under the age of 8 years, there will be a linking meeting followed by a presentation to the fostering or adoption panel, but for older children there may be a linking meeting only. Where there is a fostering or adoption panel, the child should not be told until this has taken place and the agency decision maker has

confirmed that the placement can proceed.

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 – 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 the 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 visits, 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 with 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

FFC and the care team around any child have a paramount duty to safeguard 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. FFC in seeking to deliver a high quality fostering service, strive 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 it is planned and is as positive as possible for the child. 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, SSW and SW 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 as much notice as possible enabling further assessment, planning and matching of alternative care and the transition that would follow. 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. (See Foster Carer Agreement).

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 suitable 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 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 indications 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 that 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 might 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 been mostly 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 Child's Plan for the future of the child. The minutes of this meeting will be presented to the 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

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 GCC'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, GCC 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, GCC seek 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 Child's Plans 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 child's 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 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 a permanence as the Child's Plan, the Placement Team Leader 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 specific child on a permanent basis. This often comes about when it is clear 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
- child's 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 the 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/ 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 with 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 the child and 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 child's needs and should proceed to an 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 a GCC 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.

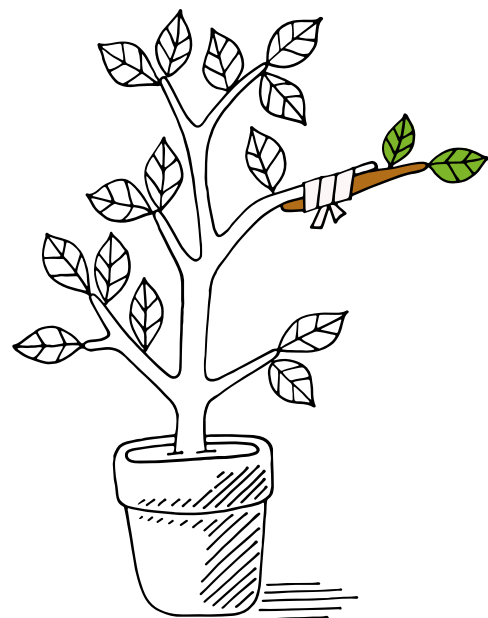
Permanent Care – Support:

GCC is committed to responding to the support needs of adopters, permanent foster carers, and the children young people placed with them. Predictable needs for support and support options should be discussed at Fostering Panels (those considering the matching), 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. GCC 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 this is possible and in the best interests of the child.



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 sown 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 that this can be a great way of alleviating anxiety in children and young people who are about to be placed.

The foster carer, SSW and SW should all ensure the child, dependent on age and stage, have information regarding how to contact their SW, Children's Rights and Who Carers Services.

Placement Agreement and Initial Child's Child's Plan

A Planning Meeting to consider the Child's Plan and to formulate a Placement Agreement must take place for every child. This meeting involves the child (depending on their age/ stage of development) their family members, the child's Social Worker, the foster carers and Supervising Social Worker.

This meeting should take place prior to the placement start date, allowing time for pre-placement visits by the child and/or pre-placement meetings between the child and foster carer. It will only be in exceptional circumstances that it is not possible to have the Placement Agreement Child's Planning Meeting and visits prior to the placement start date. In such exceptional circumstances, this meeting should take place within three working days of the placement beginning.

This Placement Agreement Child's Planning Meeting will consider the Child's Plan for the child, including how introductions to the placement are going to be made. A Placement Agreement must be compiled for each child being placed. This is a statutory requirement and Placement Agreements must include information on 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 rights/ responsibilities 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 G.P. (during the Foster Care 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 home or for someone other than the Foster Carer to look after the child.
- Arrangements and frequency of Social Work Service visits to the child and of Looked After Child Reviews.
- Compliance by the Foster carers with the terms of the Placement Agreements, with their Foster Carer Agreement, and their co-operation with arrangements made by GCC.
- The work to be carried out and with whom to enable the placement goals to be achieved.

When siblings need foster care, GCC's policy is to 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 Child's Plans must be established and close co-operation between the foster carers involved is essential in supporting these. The siblings should see each other in their placement settings from time to time, not just during contacts taking place 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 care 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 may 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 needs for continuity in their important relationships, not only with regards their family but also in relation to school, health care 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 / 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's 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 a child to a familiar place of worship, or involving a befriender, if appropriate, from the child's culture.

The Council has a duty to draw up a Child's Plan for every child who is looked after. When a child is first looked after away from home an initial Child's Plan will be compiled. Further information on this is given later in this section.

Child's Plans for Children and Young People

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's Plans. The person with key responsibility to ensure the Child's Plan is in place is the child's Social Worker. The GIRFEC SHANARRI well-being indicators provides 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. Child's Plans are agreed through a Looked After Child Review (information on Looked After Child Reviews is provided later in the section).

The Child's Plan includes information on the:

- SHANARRI Well-Being Indicators of need.
- Immediate and longer term Child's 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 Glasgow City Council
- The child views.
- Any person/s with parental responsibility/rights for the child
- The Foster Carer/s
- Any other person involved in the Child's Plan for the child.
- Name and address of the Foster Carer/s (except where non-disclosure of address is a condition of a legal order).
- Role of the child's parent/s or any other person in the child's care
- Arrangements for involving those persons and the child in decision making.
- Arrangements for contact between the child and any important people in his/her life and any reason 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 for the child.

Reviews of Child's Plans for Children and Young People

As noted above, the Council has a duty to review the Child's Plans of 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's Plans for children and young people who are looked after; these have been taken into account by GCC in setting the standards for Reviews of Child's Plans for the children and young people looked after by GCC. For those children and young people who are looked after away from home:

- 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's 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 child. To assess:

- The child needs and 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 Child's 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 meetings. 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 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 guidance of their Supervising Social Worker. The reports should be shared with the child and their family well in advance of the meeting.

The person who chairs the Review will normally be the Social Worker's Team Leader who is responsible for the case of the child. Amongst other duties, the Chair must ensure that:

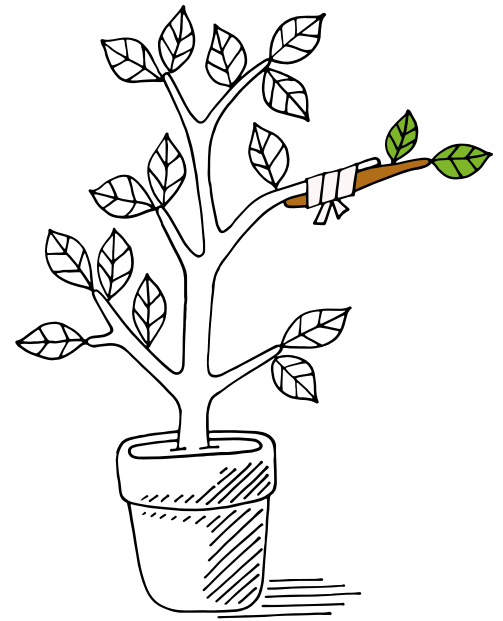
- Invitations for the review are sent to all the appropriate people
- All the relevant looked after children materials are completed
- The objectives of the review are met
- The child and parent/s are given the opportunity to take part in a way that is meaningful
- Decisions and recommendations are understood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

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 SHANARI well-being indicators from GIRFEC will be used as a frame of reference. These have been stated in other sections.

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

Sometimes there may be different parts to the review meeting to enable the child to participate fully e.g. the chair, foster carer and social worker may have a separate discussion with the child. The information from Foster carers about the child and the foster carer's assessment of this is crucial.



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 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 well-being 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 SSW 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 G.P. 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 G.P., 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

It is important that foster carers are familiar with the Looked After Children's Health Team practice guidance notes for social work staff.

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.

The Social Worker should also arrange an appointment for the child with their own GP, within two working days. At the appointment the following documentation should be taken e.g. BAAF Health Book (Blue Book). The GP should be asked to provide information between pages 10 - 13. For pre-school children who are accommodated (under 6 years) the Health Visitor may assist with the process. The allocated Social Worker should complete pages 3 – 6 and ensure that the medical consent page is attached.

The child's Social Worker is responsible for arranging the child's health assessment 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's Plans for children and young people's health
GCC must ensure that each child in a Foster Care placement has a Child's Plan which includes aspects which addresses 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 Child's Planning 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. Such information should be made clear through the Placement Agreement and recorded in that agreement. Foster carers will be given a Foster Carer held Health Record for each child placed with them. The aim of this Record is to support foster carers in their responsibilities, and to ensure the child moves on with a full health history.

Supervising Social Workers and the Health professionals involved in health assessment and Child's Plan will work to ensure foster carers are confident about the purpose and content of these records. The child's Health Visitor or G.P. is a potential source of guidance for foster carers on related health matters. 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 a 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 on the paperwork given to foster carers at the time of placement. Where GCC 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 medical 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 out of hours the emergency West of Scotland Standby Service) must be contacted and advised of what has happened (see section 8 for emergencies).

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 Carer's 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. A child's Placement Agreement and 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 details. Supervising Social Workers will provide the relevant recording forms. If the documentation is not immediately available, details can be noted in the Foster Carer diary or log.

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

- Details of the person who prescribed the medication (e.g. child's GP Hospital Consultant).
- Name of the medication

- Medication strength (for example 250 mg 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 while the child takes the medicine and should record if it is 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 G.P. 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.

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 Carer's 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 their 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 (e.g. through the Placement Agreement, the comprehensive health assessment, the Child's Plan); any treatment being received will also be noted. There will be times when this is not the case but when, through caring for the child, a foster carer believes that a child may have a mental health problem, e.g. possible depression. When this happens the foster carer should discuss the need for referral for specialist services with the child's Social Worker and G.P.

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 times, access to specialist consultation. Health Scotland (telephone: 0131 536 5500) produces free guidance in booklet form on subjects such as bereavement, self-harm, eating disorders, and illnesses such as schizophrenia. See also www.healthscotland.com

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 G.P. Sleep Scotland may be contacted direct 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. This is important at all times and the implications of infections must be understood by foster carers. In relation to hepatitis and human immunodeficiency virus (HIV), the British Association for Adoption and Fostering published a Practice Note (number 39, 1999) on the implications of these infections for Foster carers. The hygiene precautions on page 2 of the Note are applicable in every care situation. The Fostering Network (telephone: 0141 204 1400, www.thefostering.net) revised a booklet for Foster carers on HIV and Aids (acquired immune deficiency syndrome) in 1998.

Safety

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.rospace.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.

A Health and Safety checklist, developed by the Fostering Network, is used by the SSW FFC during the assessment process and is reviewed annually or more frequently dependent on specific circumstances. Foster carers and SSW 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 web site www.thinkroadsafety.gov.uk).

Fire safety

In the process of foster carer assessment and review, SSW 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 accord 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 who are aged under five years. 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 peoples' safety.

Potentially dangerous animals

The 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 and other potentially dangerous dogs. It is important to acknowledge that a small minority of owners of dangerous dogs cannot become foster carer's unless they agree to the removal of such dogs. For other prospective foster 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 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 s/he wishes not to have such a dog in their 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
Firearms and weapons

Where any member of a foster carer household keeps or proposes to keep firearms in their home, GCC must be satisfied that the use and storage of the firearms is in line with the requirements of the Police. GCC 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.

Promoting Health and Safety

Children and young people learn to value their own health, and learn to keep themselves safe, through the 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. (Note: information on child abuse concerns is dealt with in the next section of the Handbook).

Diet, exercise and hygiene

Foster carers have a responsibility to help children and young people placed with them enjoy and appreciate a balanced diet and a range of regular exercise, and to practice good hygiene. Health Scotland produces advice leaflets in relation to diet. 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 Placement Agreement and in

their Child's Plan.

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

If information on food hygiene is required by foster carers, Health Scotland, www.healthscotland.com publishes guidance.

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 and young people placed with foster carers.

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.

Families for Children, in conjunction with the NHS, provide Sexual Health and Relationships Training (Known as Talk2) This provides foster carers with further information and resources

as well as a copy of Glasgow City Council Guidance and Protocol. There is also additional information on sexual issues, relationships, teenage pregnancy, contraception, and sexually transmitted diseases which may be accessed through: Take Care advice and information: www.takecare.co.uk and Health Scotland:

www.healthscotland.com

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. Foster carers may help make sense of what each child may have already experienced of alcohol themselves or in their family. If a child appears to be abusing 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 children and young people under eighteen to buy alcohol.

Emergency advice can be found in section 8 of this handbook. As noted there, 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 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 charge appears intoxicated.

Foster carers are expected to act as good role models, and this includes foster care practices in relation to minimum alcohol use. Children and young people who are looked after away from home cannot be in the position where they are under the care and supervision of a person who is intoxicated at any time.

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 those that can result linked to the 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, 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 friends 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 SSW and the child's SW 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.

Emergency advice concerning alcohol, drug and substance misuse can be found in Section 8 of this Handbook.

For further reference, a pamphlet on Health and Medical Matters has been produced by the Fostering Network. This booklet includes useful additional information for instance, about immunisations, legislation and promoting health. It also includes a list of useful references and contacts.

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, G.P.s, 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 (<http://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 will come 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's Plans. The Child's Plans 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 <http://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's 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 involved 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: <http://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 problems
- Has English as an additional language

Not all of 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 benefiting 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 Glasgow City Council
- Receives education in another local authority school under arrangements made by Glasgow City Council
- Is placed at an independent special school or grant-aided school by Glasgow City Council.

GCC'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 sector organisation.

For children and young people looked after away from home, their education will also be part of every Child's 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 Glasgow 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 for 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

GCC also has procedures governing the exclusion of children and young people from school (Council Procedure Manual no.3/11, Exclusion from School - Revised 2005). 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.

GCC's joint protocol, the Education of Looked After Children (as noted above, and which is

in the process of update) states that where a looked after child is considered to be at risk of exclusion the school should alert the social worker, foster carer and designated education officer (a senior manager in the Education Service) and agree a strategy to try to prevent a permanent breakdown in the child's educational placement. The responsibility for convening a formal Case Discussion rests with the school. Formal Case Discussions should be held prior to any exclusion of any looked after child and the Education Officer (Additional Support for Learning) must be contacted when a looked after child is deemed to be at risk of exclusion. Except in an emergency situation, a child would not be excluded unless their circumstances and alternatives had been previously discussed at the appropriate GCC screening group.

It is crucial therefore, that there is immediate, clear communication between school, the child's social worker and the foster carer/s to ensure all possible efforts to avoid exclusion are made, and that the due process is followed. Further, should there be a decision to exclude a child the Education Service has a duty under Section 14(3) of the Education (Scotland) Act 1980 to make alternative provision for the child. This alternative provision must include provision for a student's additional support needs.

Contact Arrangements

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 out with 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, the need for supervision by Social Work staff will depend on the individual circumstances of the Child's Plan.

The general expectations of GCC 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 will 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 the child's safety; where concerns are immediate seek advice from the Social Worker for the child and the SSW.
- Where appropriate, act as gatekeeper and safeguarder in relation to contact which takes the form of telephone calls, letters, as agreed in the Child's Plan.
- Keep to the contact arrangements, and where this is not possible, foster carers must contact the Social Worker and SSW 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 SSW as part of the Child's Plan.

Understanding and Responding to Children and young people's Behaviours

Every child – every person – has their own inner world which they carry round 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 who 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, anger challenging to deal with. Sometimes people refer to such behaviours 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, or after the behaviour.

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

- A sense of rejection
- Deep seated insecurity
- Fear of repeat 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.

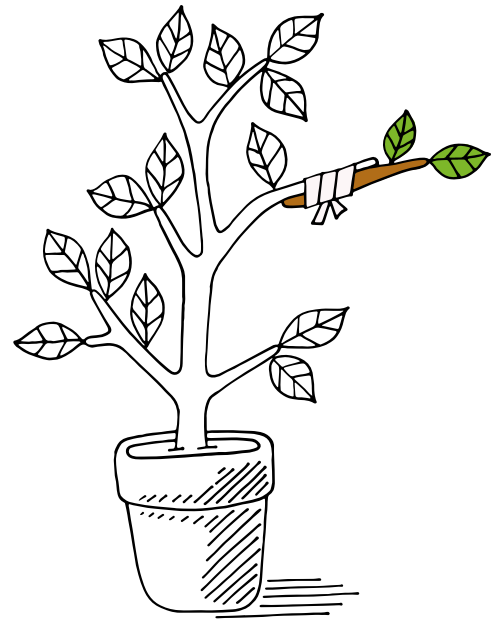
When they are able to do so, children and young people should gradually be encouraged to discuss:

- 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, lessening the need, with positive parenting, role modelling and maturity, for external controls while the child learns to develop internal self-regulation.



Safeguarding Policy and Practice in Foster Placements

Child Protection Procedures

In relation to allegations or suspicions of abuse of children and young people, GCC 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 and Team Leader. In their absence this should be reported to the Children & Families Duty Team and FFC SSW 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 in-proper 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 Child Protection Case Conference, essential information is shared, an assessment of risk is considered and Child's Plans are made about any action that should be taken.

The Foster Carer's 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.

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 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, GCC 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. Families for Children 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 Worker, the Team Leader and Service Manager from Area Services. 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 GCC 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 (see above) 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. 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 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 guidance for Foster Carers regarding allegations 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 Services and Families for Children will differ, there are similar responsibilities to jointly assess the information and determine the best course of action. Within Families for Children 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. FFC have incorporated this Guidance into Responding to Reported Concerns about Children in Foster Care (March 2014).

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 Families for Children team and/or the child's Fieldwork Social Work 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.

www.whocarescotland.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 guardians provide another avenue for representation of Children's 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 acknowledgement 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 well-being 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 carer.

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 the 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 on:

www.nspcc.org.uk/globalassets/documents

To ensure the safeguarding of children who are looked after and accommodated within foster care, Glasgow's policy is to undertake a minimum of 1 monthly visit and 2 of these will be unannounced visits per year again as a minimum. This will be recorded in line with departmental procedures. This document sets out the purpose and process of the visit and the information is necessary for the Supervising Social Worker to observe and document.

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 SW may carry out unannounced visits to the child.

Families for Children 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 SSW 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 Worker
- Working relationships with Area Team
- The interplay between all of the above

Key responsibility of Families for Children SSW in promoting Safeguarding is detailed above but in addition:

- 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 on-going 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 worker and the child's social worker will carry out joint visits (announced and unannounced) as part of GCC 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 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, including mandatory courses, which cover safe caring. Every SSW 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's 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 on the placement of the child will have on the household.

Your Supervising Social Worker has the absolute lead responsibility to draw up a Safe Caring Family Policy with you. This will be reviewed in the 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 SSW 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 Joint Protocol for children missing from foster care;
- ensuring vehicles are adequately maintained. Ensure that MOT and insurance documents available for inspection.

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 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: no-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 judgement, 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 rationale 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 computer 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. SSW should access and ensure FFCs 'Internet Safety Awareness' training course has been completed and if needed updated for all foster carers.

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, 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 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 who must ensure that all foster carers have completed the Talk2 sexual health training.

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 of 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 SSW.

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 in the first instance with their Supervising Social Worker (SSW). If the matter has not been resolved by the SSW, this should be raised verbally or in writing to the SSW's Team Leader (TL). If these communications have not concluded or resolved matters then the next stage would be to contact Families for Children Service Manager preferably in writing:

Cathy Coll and Aileen Shaw
Service Managers
Families for Children
136 Stanley Street
Glasgow
G41 1JH

Phone: 0141 420 5500
Email:
families.children@sw.glasgow.gov.uk

You should receive an acknowledgement 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 Families for Children, you can ask for an Internal Review by the Head of Service, Mike Burns.

You can also at any point contact the Care Inspectorate to complain. They have produced a helpful booklet, which you can view here: [Unhappy about a care service? Find out what you can do..](#) 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

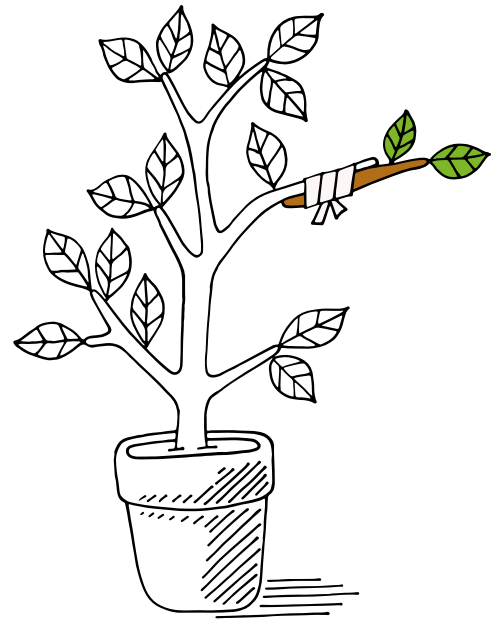
Additionally, if you remain unhappy with the responses from the Families for Children Service, you can contact Social Work Rights and Enquiries Team and ask for the matter to be reviewed. You may also request a formal hearing by the independent Complaints Review Committee of the Council. Contact details are given below. Please note that requests for a committee hearing must be submitted in writing to committee services (not social work) within 28 days of the final response from social work.

Once the matter has been reviewed by committee (or an application for complaints review committee has been rejected) then the Council's complaints process will be completed. You may then refer the matter to the Scottish Public Services Ombudsman.

Rights and Enquiries Team
Principal Officer, Rights and Enquiries, Social Work Services, Commonwealth House, 32 Albion Street, Glasgow G1 1LH

Committee
Committee Services, Chief Executive's Department, Glasgow City Council, City Chambers, George Square, Glasgow G2 1DU

Ombudsman
SPSO Freepost EH641, Edinburgh EH3 OBR (www.spsso.org.uk). Please note you must make a referral to the Ombudsman within 12 months.



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). 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 and the Children's Hearing (Scotland) Act 2011. 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 Responsibilities and Rights, and has a right to be consulted about Child's 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 Panel.

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 responsibilities and rights, 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 Emergency Social Work Standby Service (0300 3431505) as a matter of urgency particularly if it is out with hours if they are concerned about the parent's actions.

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

An Interim Compulsory Supervision Order (ICSO) can be made by a Children's Hearing that have 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 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 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 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 multi-agency 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 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 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 the 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) 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 CPO. 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, 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 long-term 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 new legislation will have a significant impact on looked after young people as from April 2015 teenagers in residential, foster or kinship care will gain new rights to remain looked after up to the age of 21 years. This Act strengthens young peoples' 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 the new 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 matter/s 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 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 Court 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 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 out with 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. Alternatively, contact the Senior Learning and Development Officers at Families for Children.

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 carers 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 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/s).

Outside office hours, GCC has access to an emergency social work service through the West of Scotland Standby Service which can be contacted on 0300 3431505.

Emergency Situations

The information that follows provides Foster carers with additional guidance on some 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. (Further guidance on consent to treatment may be found in Section 5, on Keeping Healthy and Safe). After this, contact the child's Social Worker or if unavailable Team Leader or, out of hours, the emergency Social Work Standby 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 the 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 Team Manager or, out of hours, the emergency Social Work Standby Service. There are regulations concerning the death of children and young people who are Looked After and Social Work staff follow these and 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 Team Manager or, out of hours, the emergency Social Work Standby Service. If it is possible for the Foster Carer to be present when the child is interviewed by the 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 emergency Social Work Standby Service will be involved at the interview.

A parent or someone else wants to remove the child without permission: the child's Placement Agreement and 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 the 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 emergency Social Work Standby 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 emergency Social Work Standby Service for advice.

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 emergency Social Work Standby Service without delay. The process of what happens next can be found in the section about child protection noted later 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 emergency Social Work Standby Service, out of hours) 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 families
- Do they have any money on their person
- Any circumstance 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 are entitled 'Looked After and Accommodated Children and Young People Who Are Missing' and 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.

What safeguards you would do for your own child?

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. No arrangements for overnight stays should be made without previous 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 this with their Team Manager.

Key questions Foster carers should consider when children and young people placed with them 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 "On Overnight Stays" for Looked After and Accommodated Children is available from the Scottish Government website www.scotland.gov.uk and your Supervising Social Worker can provide a copy.

Fostering procedures and Glasgow's position

Outdoor Activities

Adventurous Outdoor Activities - Background

Taking part in adventurous outdoor activities, such as hill walking, canoeing and climbing bring a range of benefits to young people such as protection from a range of illnesses including cardiovascular disease, diabetes and some forms of cancer. In addition, participation in these activities can have a positive impact on mental health by reducing stress, anxiety and depression. Participation in these activities by young people placed in Foster Care should therefore be encouraged. There is though, a degree of risk associated with them.

Serious accidents to young people while taking part in adventurous activities are very rare, but are obviously catastrophic for those involved. Minor cuts and bruises are reasonably common, occasionally, accidents involving slightly more serious injuries such as broken bones occur, but in comparison with participation in team sports such as football these are still rare.

What are Adventurous Outdoor Activities?

Commercial delivery of adventurous outdoor activities is governed by the adventure activities licensing regulations. These regulations define such activities under four headings Trekking (by foot, bike horse or skis), climbing, water sports and caving. Some of these activities can take place in "very sheltered" locations, for example walking can take place in woodland or marked paths, but it can also take place in more remote or challenging mountainous terrain.

There are other activities not covered by the above definition that would still be considered by Glasgow City Council to be adventurous outdoor activities. Examples of these are: horse riding (at stables), high ropes/assault courses, yachting and skiing (mountain or non-mountain).

Young people in foster care can access these adventurous outdoor activities in the three following ways:

- Delivered by a commercial service that is either organised by the

local authority, a third party or by the foster carer (these services will require to hold an Adventure Activities License)

- Delivered by a voluntary organisation such as the Scouts or a canoe club (these organisations do not require an Adventure Activities License)
- Provided directly by the carer as part of recreational activities that the family take part in. (Advice from GCC legal services is that even though foster carers receive payment they are not required to hold an Adventure Activities License).

Guidance on permitting participation

Where activities are provided by commercial provider those purchasing a service can be reasonably assured that as long as the provider has met their obligation to hold an Adventure Activity License that they will provide a service that meets current good practice and legislative requirements. It is sensible to check with the provider that they hold a license for the activity they are providing.

Where activities are provided by a voluntary organisation such as the scouts or a canoe club there is no requirement to hold an Adventure Activity License. Foster carers cannot therefore "assume" that good practice is in place and will need to ask some questions. Most of these organisations will be very familiar with this and will often supply the information in advance in information leaflets. You are looking to satisfy yourself that those supervising the activity are suitably experienced to do so, and are familiar with the environment in which they will be operating. It is also useful to ask how many young people the instructor will be supervising at a time. If they are supervising at a ratio of more than 1:8 then advice should be sought (see details below).

When activities are provided directly by the foster carer that would not be considered to be taking place in a "very sheltered" location (see above) then advice/support should be sought.

Advice/support

It can be difficult to know what questions should be asked of providers when a young person in a foster placement wishes to take

part in an Adventurous Outdoor Activity. If, at any time, you are unsure or feel you would appreciate more guidance, please contact the:

Project Manager
Outdoor Resource Centre
Social Work Services
3 Martha Street, Glasgow G1 1JN
Phone 0141 287 4508

Swimming at outside locations.

In addition to the activities mentioned above an area that needs particular attention is swimming at outside locations. The current position (interim guidance issued July 2008) is that swimming should only take place in life guarded swimming pools or life guarded beaches.

Foster carers have a valuable role in supporting or developing children/young people's interests and skills in new activities. It is essential that the agreement of those with parental responsibilities and/or Social Work is obtained before arranging such activities. They will need to be assured that outdoor activities that involve a measure of potential risk are adequately supervised. Social Workers have access to detailed Council guidance in relation to: outings, holidays, insurance, activity centres, and specific activities such as swimming, fishing, sailing, cycling, and mountain biking, hill-walking, climbing, canoeing, skiing, water skiing and orienteering.

For further information the Scottish Executive has a Good Practice Guide: Health and Safety on Educational Excursions available from www.scottishexecutive.gov.uk

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 holiday. In the case of the child leaving

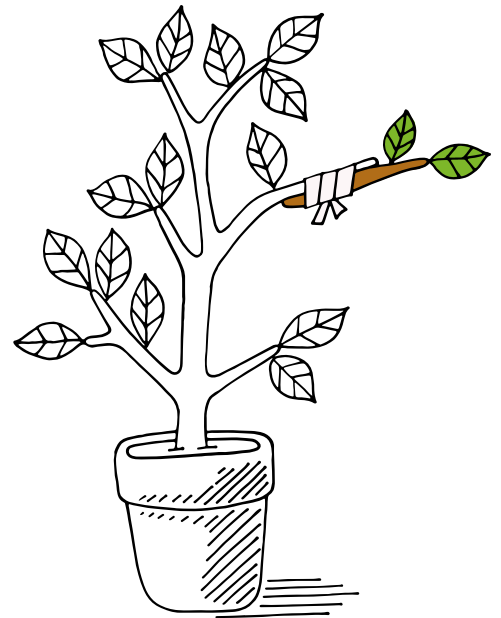
the country, the Social Worker follows the Service's Procedures and Guidance for Looked After and Accommodated Children and Young People Going Out-with the Country.

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 out with GCC. Such sources include the Fostering Network, British Association for Adoption and Fostering and the Centre of Excellence for Looked After Children in Scotland. These organisations publish extensive material related to fostering.



Finance

Families for Children highly values its professional foster carers and offers a package of rewards, training and support that values and recognises our carers' skills and commitment. That is why we have committed to paying our foster carers at the rates recommended by national fostering body The Fostering Network.

All Glasgow City Council foster carers receive a fee plus an allowance for each child/young person placed with them.

Current weekly fostering fees

Main Scheme fostering - per child/young person	£150
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Fostering Allowances

Glasgow City Council (Families for Children) pays the level of weekly allowances recommended by The Fostering Network.

These are accepted as being a reasonable reflection of the cost of caring for a child. In addition to the weekly allowances set out below, four additional payments are paid per year: two weeks holiday, one week Christmas, and one week birthday. From September 2013 the weekly allowances rate is:

Weekly allowance rate 2015/16	
Age	
0 - 4	£137.18
5 - 10	£156.26
11 - 15	£194.53
16 - 18	£236.64

Families for Children, as Scotland's largest provider of foster care, is a busy service and our carers do not as a rule experience waiting times between placements – unless they wish to do so. As the corporate parent for all of Glasgow's children, we will always place children with our own foster carers wherever possible, rather than purchase places from independent providers.

This means that as a Families for Children foster carer, you will have the chance to do the role you trained for – supporting Glasgow’s children on an ongoing basis as part of a busy service.

Terms of payment

Fostering payments are made fortnightly in advance from the date of the placement. The method of payment is direct to the carer’s bank account.

When a fostering placement ends, the fostering allowance ceases on the day the child leaves the placement. Any overpayments will be reclaimed by the Finance section, usually through the adjustment of subsequent payments.

Respite fostering rates

There are two different types of respite carers. General respite carers have been approved by Glasgow City Council. They are paid a nightly rate per child which is a standard rate and not age related.

The current rates for general respite carers as follows:

Overnight	£49.36
Full Day	£30.71
Half Day	£17.26

Specific respite carers are family or friends of the main foster carers, who have had some checks carried out. They are paid pro rata the fostering allowance rate. This is paid at the TFN rate.

The current rates for specific respite carers are as follows:

Overnight	0 - 4	£19.60
	5 - 10	£22.33
	11 - 15	£27.79
	16 - 18	£33.80
Full Day	£16.00	
Half Day	£8.00	

In both cases, the main carer will have the fostering allowance deducted pro rata for each night the child is in respite.

The main carer will retain their entire fee whilst the child is in respite.

Additional payments

Mileage

The fostering allowance rate includes an amount for normal mileage. This covers the costs of everyday activities such as going to the local brownies, school, and dentist. Carers may only claim for exceptional costs such as those arising from specific health problems. For instance, the child may need to be taken very regularly to a hospital some distance from the foster home.

Emergency placement needs

Clothing

Children that are accommodated in an emergency may have inadequate clothing. Under these circumstances it is the responsibility of the Social Worker for the child to ensure that 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).

Babysitting

Babysitting can be agreed for business reasons i.e. training, support groups, when both carers are attending or one attending and the other at work and also for lone carers. Any arrangements for baby-sitting must be prior discussed with the Supervising Social Worker. It is important that carers and Supervising Social Workers have a full discussion to ensure that there are full explanations on the forms for the claim. A maximum of four hours babysitting per session can be claimed.

Loyalty Payments

These payments are made every five years in recognition of the continued commitment of foster carers to providing a service to Glasgow City Council, Families for Children. On completion of 20 years-service a double payment will be made. The payments are usually made twice per year.

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.

to their supervising worker every year. This is also a requirement of the Foster Care Review.

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

Home / Car Insurance

Foster Carer liability

Carers need to be aware that 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. Glasgow City Council subscribes to The Fostering Network on behalf of all foster carers, and this entitles them to receive free personal legal advice. They may also benefit from the TFN legal expenses insurance 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

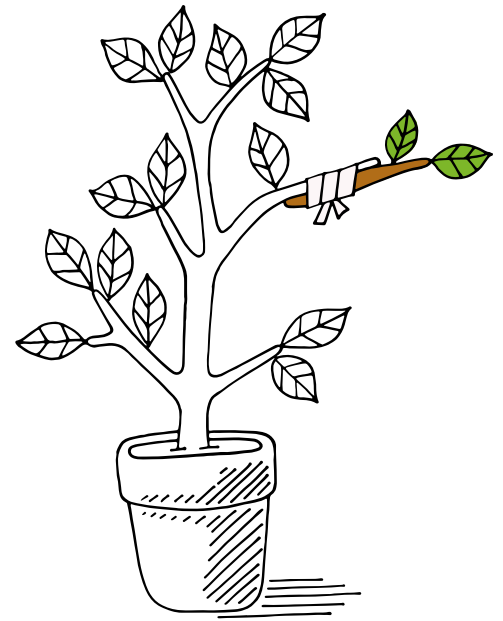
It is the responsibility of all carers to inform their home insurance provider that they are fostering and to ensure that they have a policy that covers for both accidental and malicious damage caused by a young person within their home. The Fostering Network provides information on providers who offer specific foster care insurance.

Families for Children 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



Useful Contacts

Police

Police Scotland

Non Emergency Number 101

Emergency Number 999

Hard of Hearing or Speech Impaired Caller: 1 800 1 101 in a non Emergency call

Hard of Hearing or Speech Impaired Caller: text phone 18000 in an Emergency

Social Work Services

Families For Children

Social Work Services

136 Stanley Street

Glasgow

G41 1JH

0141 420 5555

Email: families.children@sw.glasgow.gov.uk

Web: www.fosterglasgow.org

Leaving Care Services

Martyr Public School

17 Parsons Street

Glasgow

G4 0PX

Phone 0141 302 2800

Glasgow & Partners Emergency Social Work Services

0300 3431505

Children's Rights Service

City Chambers East

40 John Street

Glasgow G1 1JL

Phone: 0141 276 5631

Email: childrensrightsservice@glasgow.gov.uk

Who Cares Services

5 Oswald Street
Glasgow
G1 4QR

Phone 0141 226 4441
www.whocaresscotland.org

ClanChildLaw

5 Oswald Street
Glasgow
G1 4QR

03332 002 436
www.clanchildlaw.org

Legal Services Agency

134 Renfrew Street
Glasgow
G3 6ST

Phone 0141 353 3354
www.lsa.org.uk

The Fostering Network in Scotland

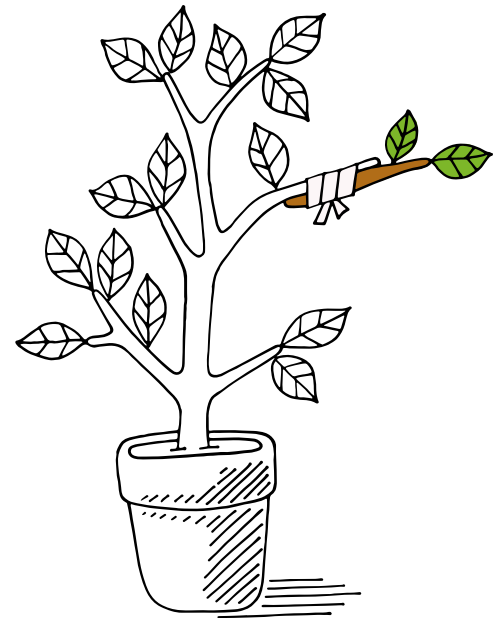
Ingram House,
2nd Floor,
227 Ingram Street
Glasgow
G1 1DA.

0141-204 1400
www.thefostering.net

The LAC Health Team

Templeton Business Centre
Building 3
62 Templeton Street
Glasgow
G40 1DW

Phone 0141 277 7400



Selected references and sources

1 About law

Scottish Office (1997) Scotland's Children.
 The Children (Scotland) Act 1995.
 The Children and Young People (Scotland) Act 2014
 The Looked After Children (Scotland) Regulations 2009
 Guidance on Looked After Children (Scotland) Regulations 2009
 Adoption and Children (Scotland) Act 2007
 Children's Hearing (Scotland) Act 2011
 Equality Act 2010
 Data Protection Act 1998
 Getting It Right for Every Child (GIRFEC)

2 About standards

National Care Standards for:

- Foster Care and Family Placement Services

3 About looking after children and young people – practical learning materials available through Families for Children

The following are distance learning materials, produced by Fostering Network.

- Receiving, giving and storing information
- Preparing family and friends for foster care
- Playing your part in Child's Planning care
- Developing working relationships with children
- Helping protect children from abuse
- Promoting equality, diversity and rights
- Promoting health and social wellbeing
- Promoting educational opportunities and achievements
- Preventing and managing challenging behaviour
- Supporting children through change
- Promoting a positive sense of self and identity

- Supporting young people who are distressed
- Helping children stay in touch – promoting relationships with family and friends
- Supporting children whose care is changing
- Helping young people towards independence
- Teamwork

Additional training courses provided:

- Understanding Challenging Behaviour
- Life Story (See Section 3 for further detail)

4 About fostering

Wheal A (2000) Foster carers handbook. Russell House

5 About relatives as carers

Fostering Network (2000) Family and friends Carer's handbook. London.
Fostering Network: www.thefostering.net

6 About safe caring

Fostering Network (1994) Safe Caring. London
www.thefostering.net

7 About practical approaches to Child Care

Child Development for Child Care and Protection Workers Paperback – 9 Jan 2010
Brigid Daniel, Sally Wassell, Robbie Gilligan

Covers:

- Resilience
- Vulnerability
- Impact of protective or adverse environment
- Different Stages of Development
- Attachment Theory and Impact of Abuse and Neglect on Development

8 About the mental health of children and young people

Richardson J, Joughin C (2002) The Mental Health of Looked - After Children – Bright Futures: Working with Vulnerable Young People London. Gaskell. Royal College of Psychiatrists

This document can be downloaded at:

www.mentalhealth.org.uk/content/assets/PDF/publications/mental_health_looked_after_children.pdf?view=Standard

9 About Physical Health of Looked After Children

Guidance on Health Assessments for Looked After Children and Young People in Scotland First published by the Scottish Government, May 2014

www.scotland.gov.uk/Resource/0045/00450743

10 About Education

Useful sources of information and practical advice about the inclusion of looked after children in education are PINS (www.pinscotland.org) and Enquire (<http://enquire.org.uk/>).

Information about the school curriculum and advice about how parents and carers can support children in school is the Parentzone website provided by Education Scotland (www.educationscotland.gov.uk/parentzone).

11 About Contact

Wassal, S (2013) Review of research and practice Literature/contact

12 Understanding permanence for looked after children

The Centre of Innovation and Research into Child Care and Youth
A review of research the care enquiry (April 2013)

13 About disruption

Smith S (1994) Learning from disruption - Making better placements. London.
BAAF www.baaf.org.uk

14 Sources of further information, research and guidance

The Fostering Network Scottish headquarters is in Glasgow
2nd Floor
Ingram House
G1 1DA
Tel: 0141 204 1400
email: info@fostering.net.

The Fostering Network (T.F.N.) offer customised training, consultancy, advice, mediation and support for Foster carers. In addition, T.F.N. has produced a variety of publications in relation to fostering, including pamphlets on topics of central concern to Foster carers.

15 About internet safety

The following websites provide useful information:

www.parentscentre.gov.uk

www.ceop.gov.uk

www.thinkuknow.co.uk

www.scotland.police.uk

You can find further information on Children's Rights in the following links:

www.sccyp.org.uk

www.whocarescotland.org

www.youngscot.org

www.childline.org.uk

Case Study – Courtney and Ryan

Courtney is 3 years old and her older brother Ryan is 6. They live at home with their parents Moira and John. The children's names are on Glasgow City Council's Child Protection Register under a number of risk indicators. The main indicator is neglect with secondary indicators of substance misuse and non-engaging parents (Section 7 of the Handbook gives more information about Child Protection).

Courtney and Ryan were removed from their parents care in an emergency after a home visit by Courtney and Ryan's Social Worker. The school had contacted the Social Worker to inform that Ryan had not been at school for a number of days and there had been no communication from his parents. This prompted a home visit by the Social Worker, who after some delay in gaining entry to the home, established that the standards within the home had significantly deteriorated, and the children's mother and father were both under the influence of substances and not capable of providing safe care.

The Social Worker tried to explore if there were any safe and suitable family members that Courtney and Ryan could temporarily reside. There were no family members that could be assessed in the emergency.

The Social Worker explained that given the risk factors they would be seeking to place both children together in a foster home. Contact was made with the Team Leader as Social Workers do not operate alone. A Social Work colleague joined the Social Worker at the family home immediately to assist.

It was explained to the parents that there are number of legal options and routes in respect of looking after children away from home. (Section 8 of the Handbook details the legal options). Moira and John after discussion with the Social Worker accepted the significant concerns, and agreed that their children could be placed in a foster home. They were clear that this consent was temporary and it was acknowledged that they could change their minds at any point, and dependent on the circumstances, other legal options would be explored again with them. This joint agreement between the Social Worker and the parents is

legally defined under section 25 of the Children (Scotland) Act 1995.

The Social Worker for the children works as part of a team and does not make the decision to place children away from home without consultation and discussion with their Team Leader and the Service Manager in Area Services. In addition, they will gather information and discuss their plans with other agencies, for example, Health and Education.

Children who are looked after away from home are vulnerable children in need and therefore the Local Authority e.g. Health, Social Work, Education and other agencies all must work together to promote the best possible outcomes for children (In the Handbook there is information regarding the concept of Corporate Parenting). Good outcomes for children are contained within the section covering GIRFEC.

Courtney and Ryan's Social Worker contacted Placement Services to inform of the need for a foster family. The Social Worker has a responsibility to provide detailed information of the children and their needs. Such information is often contained within key reports, for example, the child's individual GIRFEC report, if available, which provides information regarding the child's health and well-being needs. Given the children were also on the Child Protection Register, GIRFEC Child Protection and Care Plans were also shared. The information provided by the children's Social Worker was critical in ensuring Placement Services in collaboration with Families for Children could match both children to available foster carers who could best meet their needs individually and as siblings. (Section 5 gives more information regarding GIRFEC). The foster carer must ensure these records are safely stored with confidentiality being maintained (section 3 details the requirements in maintaining secure and confidential record keeping under Data Protection).

Families for Children Social Workers, known as Supervising Social Workers, identify a suitable match for Courtney and Ryan with foster carers. Every foster carer has their own Supervising Social Worker, and at the point of accommodation, the children's Social Worker and the Supervising Social Worker would share

the fullest of information regarding the children and the foster family.

The Supervising Social Worker and the foster family will have previously completed a child-friendly family profile, which gives any child basic information about who lives in the family and their home environment. There is lots of helpful information that will give Courtney and Ryan a picture of the foster family. This profile is very important to Ryan and Courtney helping them understand where they are going and who will be looking after them. Not to have this kind of information can be frightening for children.

Ryan and Courtney's Social Worker and their parents talk to the children about why they are going to stay with foster carers. If they have the matched foster carer's details, they can begin to share more information about the foster family.

On this occasion it was agreed that the children would go with the Social Worker in their car to the foster home. If the children are able to they will be encouraged to speak to the foster carers on route to the placement. All foster carers in their preparation, training and on-going supervision will have had lots of information in supporting and helping children who are removed in an emergency in crisis. Reducing anxiety and making children feel welcomed into their home, while minimising the trauma of removal, is a fundamental core requirement for all foster carers. (An understanding of minimising the trauma of removal is contained within a number of sections within the Handbook including section 6 What Children and Young People need from those who look after them).

Courtney and Ryan arrive at the foster home and the carer's immediate focus is to reassure and settle Ryan and Courtney. The Social Worker explains that they will be back out to see the children within the next few days. The children should see their Social Worker regularly while they are away from home, however, the minimum requirement for Social Workers and Supervising Social Workers is that they are visited at least once a month. Some children, particularly when they have initially been removed, might need to see their Social Worker much more often. This is also the same for the

foster carer and the Supervising Social Worker (Section 3 in the Handbook provides more detail).

The Social Worker with multi-agency partners will be the lead person who will coordinate Courtney's and Ryan's GIRFEC Child's Plan, which will be in place, but will now have to be updated to reflect the children's changed circumstances and accommodation away from home. Courtney and Ryan when at home were subject to Child Protection Procedures, however, now they are looked after away from home, they will be subject to Looked After and Accommodated Procedures. These important procedures with respect to Care Planning determine that the Social Worker in Area Services with their Team Leader must arrange a Multi-Agency Planning Meeting within 3 days of Courtney and Ryan's accommodation to focus on their immediate health and well-being needs. Thereafter, if they are not returned home, the regulatory timeframe for these important meetings would be 6 weeks, 3 months and 6 months (This information will be found in section 4 of the Handbook). At the Planning Meeting all the key professionals in their corporate parenting capacity will be invited to the meeting to share all the information about Courtney and Ryan while at the same time offering the appropriate support from their service. John and Moira, parents, will also be invited to the meeting. This meeting will essentially detail the children's Care Plan framed in terms of their GIRFEC well-being needs (Section 5 details).

Contact with birth family will also be explored in great detail at this key meeting. Foster carers will be expected to assist with the facilitation of contact dependent on the circumstances of each specific case (section 6 details). Everyone should leave the Planning Meeting with a clear sense of the risk factors that resulted in Courtney and Ryan being accommodated and what needs to be done before they could safely return home. Their needs will be broken down individually in respect of the well-being indicators.

The foster carer should have what is known as the Placement Agreement ideally completed at the 3 day Planning Meeting. This Placement Agreement captures the information of the child's needs and matches those with the foster

family. (Section 5 of the Handbook provides more detail in respect of the importance of the Placement Agreement). The foster carer, the social worker and if agreed by the parents, shall also sign the Placement Agreement.

The care planning process should progress within timescales detailed to ensure timely decisions are made in respect of the children's short and long-term welfare needs. When children are accommodated away from home drift must be avoided given this can be detrimental to development. If the children are not safely returned home within 6 months, the Social Worker and Team Leader have a clear responsibility to arrange a Permanence Planning Meeting with multi-agency partners and the birth parents. There are three key options from that meeting, those being:

- A return home.
- A concurrent plan whereby further assessment and tasks are required of which the parents must complete with a view to the children returning home or a permanence plan away from home be implemented.
- A permanence plan away from home being implemented e.g. adoption with an Adoption Order or long-term fostering with a Permanence Order.

With sincere thanks to Janette Harkin and Joan Colburn at Families for Children for their work on compiling this Handbook.