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# Safer Caring

## 1. Introduction and Legal Framework

The key emphasis within all the fostering legislation and the Children Act is that the welfare of the children is paramount and that they should feel and be safe.

The role of foster carers is to help children and young people who have experienced neglect, abuse and trauma feel safe and help them heal and rediscover the world in a new and positive way. Foster carers need to understand that the trauma that a child has experienced will impact upon their attachment relationships, development and functioning.

Safer Caring is not about absolute safety, it is about recognising, understanding and managing harm and risk. It recognises that risk can be positive and one of the key tasks for foster carers is to provide a safe and secure base for the child from which risks can be taken and through which they can grow and get a better understanding of themselves and the world.

Safer Caring needs to take into consideration the child's needs for emotional nurturing and appropriate physical contact. While doing this foster carers also need to ensure that they and others in their household are kept safe.

Standard 4 of the National Minimum Standards for Fostering Services (2011) is about safeguarding children and states:

4.1) Children's safety and welfare is promoted in all foster placements. Children are protected from abuse and others forms of significant harm (e.g. sexual or labour exploitation)

4.2) Foster carers actively safeguard and promote the welfare of foster children.

4.3) Foster carers make positive relationships with children, generate a culture of openness and trust and are aware of and alert to any signs or symptoms that might indicate a child is at risk of harm.

4.4) Foster carers encourage children to take appropriate risks as a normal part of growing up. Children are helped to understand how to keep themselves safe, including when outside of the household or when using the internet or social media.

4.5) The service implements a proportionate approach to any risk assessment.

4.6) Foster carers are trained in appropriate safer-care practice, including skills to care for children who have been abused. For foster carers who offer placements to disabled children, this includes training specifically on issues affecting disabled children.

4.7) The fostering service works effectively in partnership with other agencies concerned with child protection, e.g. the responsible authority, schools, hospitals, general practitioners, etc., and does not work in isolation from them.

Worcestershire Fostering's (WF) policy and guidelines on Safer Caring are based on the clear recognition that foster care must provide an emotionally nurturing environment for children, and this must include demonstrations of appropriate physical affection. It is most important that safer caring does not prevent children from receiving the nurturing and affectionate care that they need.

This policy should also be read in conjunction with other policies which impact upon safer caring within the foster home. This includes the **Health and Safety, Making Placements, Bedroom Sharing, Countering Bullying** policies.

## 2. Guidance and Procedures

WF seeks to ensure that all efforts are made to keep children and young people safe from abuse within their kinship or mainstream foster home and all members of, and visitors to the fostering household, are protected as far as reasonably practicable from abuse and risk of false allegations.

### 2.1 Assessment

Safer Caring is part of the pre-approval training for both mainstream and family and friends carers. It is also an area for discussion during the assessment. Prospective foster carers should be encouraged to think about how they can ensure the safety of the children they will be looking after, themselves and other members of the fostering household.

Assessing social workers should involve all members of the prospective fostering household, given age and understanding, in drawing up a Safer Caring Household Plan which will form part of the paperwork submitted with their application to Fostering Panel. Below is a list of some areas that should be considered. It is not an exhaustive lists and some prospective households may need to think about areas specific to them.

- ↗ Showing Affection - all children need to be shown affection by their carers.
- ↗ Playing and Supervision - due to their previous experiences it is likely fostered children will need more adult support, supervision and positive intervention in their play, whether on their own or with others.
- ↗ Bedrooms and Privacy
- ↗ Bath times and Intimate care
- ↗ Dress
- ↗ Videos and Photos
- ↗ Transport

Appendix 1 is an example of a Safer Caring Household policy.

The household policy should be reviewed if there are any changes in the household or as a minimum in preparation for the foster carer's Annual Review.

## 2.2 Pre-Placement

When looking to place a child in a fostering household WF will share all the information that they have on the child needing to be placed with the foster carer. This will include the needs of the child and any risk they may pose to themselves or others. WF recognises that some behaviour that children can present in their family homes can be down to that environment and the impact of the parenting they are receiving and so may not be seen in a foster home. This should form part of the discussion along with the foster carer's ability to meet the needs of the child and keep them safe. There also needs to be discussion to identify any impact the child's behaviour may have on other household members including other looked after children. Consideration needs to be given as to whether possible risks can be managed. Having the most wide ranging discussion as possible assists the foster carer and WF to make an informed decision on whether it is an appropriate placement.

## 2.3 On placement of a child

When a child is to be placed or is placed as part of the child's Placement Plan, a Safer Caring Risk Assessment should be completed. As the Placement Plan is drawn up during the placement meeting the relevant people who need to contribute to the child's Safer Caring Risk Assessment should be present. This includes:

- ↗ the foster carer
- ↗ the foster carer's supervising social worker or duty worker if the foster carers own worker is not available
- ↗ the child's social worker
- ↗ The child's parents or anyone else with PR
- ↗ The child if of appropriate age and understanding
- ↗ Any other relevant agency

The Safer Caring Risk Assessment builds on the household policy and looks at the specific experiences, needs and risks of the individual child. It will cover areas already covered in the household policy but will be based on the individual child to be placed. Consideration will be given to:

- ↗ the child's age and understanding,
- ↗ their experiences including their experience within their family
- ↗ Any known behaviours of the child or young person either putting themselves or others at risk

It will also identify areas which need to be considered for an individual child, for example a child who self-harms or goes missing.

The Safer Caring Risk Assessment should set out the strategies that foster carers will put in place to manage risk. These need to be proportionate to the assessed risk and the aim should be to reduce the risk. As such the Safer Caring\Individual Risk Assessment should be revisited on a regular basis with the foster carer in supervision, in preparation for the child's review and at any time that new or increasing risk is identified. Where there is no longer a risk, for example the child is no longer going missing it is important to recognise this and celebrated with the child.

### **3. Delegated Authority**

All foster carers should be provided with delegated authority and be clear about the delegated authority they have for the children and young people that are placed with them. This should be considered at placement meetings and the document regularly reviewed.

As well as delegated authority being important in a very practical way for keeping the child safe, it is also important for the relationship between the carer and the child. Creating a secure base is about building trust, valuing and promoting the child's need to be assertive, effective and competent and be able to explore and learn. This can be achieved much more effectively if there is well considered written delegated authority in place, as a foster carer is able to respond to a child's needs in a timely and direct way. This in turn creates trust for the child that the carer will understand and respond to them and their needs. This builds on the reciprocal relationship between the carer and child.

### **4. Training**

#### 4.1 Training for Foster carers

As noted above Safer Caring training is completed as part of the pre-approval Skills To Foster training and the kinship preparation training. Structured group based Safer Caring training is also available post approval and is part of WF's mandatory Core Training programme for foster carers to complete every three years. This gives an opportunity to build on what has been learned previously and use the experience that carers have gained through fostering.

Other training courses available through WF can also contribute to safer caring e.g. Understanding Mental Health and ADHD awareness. Safer Caring should also be evidenced through completion of the relevant Training, Support and Development (TSD) Induction Standards Portfolio for all foster carers post Approval.

#### 4.2 Training for other Household Members

WF recognises the importance of all members of the fostering household understanding safer caring. Fostering households are all different and members of foster carer's households can vary in age and understanding. WF therefore expects the assessing\supervising social worker to ensure that this is discussed and reviewed with other household members.

During assessment

- the assessing social worker will discuss with every member of the fostering household, taking into consideration their age and understanding, their view of fostering and their understanding of safer caring
- as already stated, every member of the proposed fostering household should be involved in drawing up the safer caring household policy and the assessing social worker should ensure that it is understood depending on age and understanding.

Post Approval

- As a minimum as part of the foster carers annual review process, their supervising social worker will discuss Safer Caring with other household members
- When drawing up Safer Caring Risk Assessment for child to be placed, consideration needs to be given to what information needs to be shared with other household members while respecting the privacy of the child or young person to be placed.

In some situations it may be beneficial for household members to attend the group taught Safe Caring training when they are likely to be involved in supporting the approved foster carer e.g. an adult child who is baby sitting or taking the child out to activities. The supervising social worker should discuss this with the foster carers and book the household member on the training if appropriate.

#### 4.3 Training for supporters of foster carer households

Those involved in providing support as part of foster carer support network should also have access and understand the safer care approach and risk assessment for the children who they may be supporting.

## 5. Recording

Foster carers should keep up to date records on the children they care for which should be reviewed by the supervising social worker on a regular basis. Reflection on these records will be part of supervision and may contribute to changing the family safer caring plan or the individual plan.

There are a number of events which foster carers need to notify WF as soon as possible such as when children go missing or the foster carer has concerns that they be subject to abuse. For a full list of these please refer to the section on Notifications in the **Recording for Foster Carers policy**.

If a foster carer has any concerns regarding their ability to provide safe care for a particular child or if they feel that they, or another family member are at risk of an allegation, this should be reported to the supervising social worker and the social worker of the child or young person immediately and not wait for the next scheduled visit.

## 6. Surveillance

### 6.1 What is surveillance?

Surveillance is defined as ‘the monitoring of behaviour, activities, or information for the purpose of influencing, managing or directing. This can include observation from a distance by means of electronic equipment, such as closed-circuit television, or interception of electronically transmitted information, such as Internet traffic. It can also include simple technical methods, such as human intelligence gathering and postal interception.’

Foster carers should provide a positive environment for children to live and learn; and use their skills and experience to use ways to keep children safe. Therefore the use of surveillance equipment or excessive monitoring of children in their home **is not** an appropriate method of providing safe care and is explicitly not permitted.

The use of surveillance could be considered as a deprivation of liberty for children and therefore use of surveillance in a home where a child lives is only permissible at the direction of a court or to safeguard an individual child’s welfare. It is not acceptable to use surveillance as a default approach to monitoring children’s behaviour, neither should groups of children be subject to indiscriminate monitoring.



The use of surveillance and monitoring devices should be for the protection of the children only, not foster carers (for example where there may be a concern about an allegation).

Online Safety-monitoring of internet safety:

Where there needs to be age appropriate monitoring of the use of digital equipment, then this should be done as part of digital household plans and the consent and explicit discussion around this needs to be made with the young people so that they understand this as part of their care plan where appropriate. For example, a digital safety agreement should include having safety and child safe online settings being used in the home internet and alerts to inappropriate web context being raised through safe internet settings.

#### 6. 2 CCTV for household security:

We recognise that for many families, CCTV in the home is a new and accepted way of ensuring security of homes and in door bell technology. Where this is the choice of a foster carer to use such technology, this must be explicit within the safe care family policy that this is for home security and this CCTV should only be used as surveillance of the security of the home, and should not be used in areas where children are playing or within the home to monitor the household members.

#### 6. 3 Infant monitors:

The use of baby monitor technology is way of ensuring that an infant is safe in the home when the carer is in another room. Many modern infant monitors can include images, which are not recorded but are used for the safe care of small children when sleeping or in another part of the home. These devices are appropriate as they do not record the children; rather than using live and motion activated sounds/images which prompt a care giver when the child is needing attention. These monitors will form part of the household safe care plans.

### **Appendix 1**

#### **Safer Caring – baseline family policy of:**

##### **Use of names**

We would encourage children and young people to call us by our first names.

### **Use of language**

We do not use bad or insulting language and would therefore expect that children and young people we care for would not either. We would explain why it should not be used and try to help them to find other ways of communicating their frustrations, anger etc.

### **Children's/Young People's bedrooms**

Bedroom doors should be knocked and permission given before entering to ensure privacy at all times. We may on rare occasions need to enter the bedroom to check that no dangerous articles are being kept there. We would normally want to do this with the child or young person being present, but may need to do this without them being there.

Doors to children's private space (own children) should be kept open if children are playing in the room.

### **Carers' bedroom**

Children and young people would not normally be allowed into our bedroom, however, where this is necessary the child or young person should knock on the door and seek permission before entering. Bedroom door should be kept closed.

### **Bathroom**

With younger children,.....would usually do the bathing and other personal care tasks. The door would be left slightly ajar. On occasions that..... needs to assist with this the reason why would be recorded. Children or young people who are able to meet their own hygiene needs for themselves would be allowed the privacy to do this. There would be no sharing of baths.

### **Dress**

We as foster carers, foster or our own children, or any guests, would not walk around the house in a state of undress, for example wearing only underwear or nighties. Getting dressed or undressed privately.

### **Showing of affection**

Consideration to be given to child's personal history. We would listen and be led by the child or young person. We would only hug and cuddle if this was comfortable for the child. We would generally show affection and encouragement with lots of verbal praise, facial expressions and by listening carefully when the child or young person talks. Inappropriate contact of child would be kissing.

### **Bedtimes**

Bedtime wherever possible would follow a set routine to help the child or young person to feel secure, happy, and relaxed at this time. For example: bath, and quiet time - for younger children, story downstairs. Bedtimes would be agreed upon with each individual placement. However, children and young people would not be allowed to stay up once we have gone to bed.

### **Playing activities**

We will always want to know where the child or young person is who they are with and what they are doing. Younger children's activities would be supervised by us and for young people times to return home would be agreed beforehand. We would encourage children to play and mix with other children downstairs but if they do play in the bedroom they must leave the door open. We would be happy for children and young people to invite friends into the home, as long as we know who they are.

### **House rules and expectations**

The dogs are not allowed upstairs unless they are with .....and/or

No smoking allowed inside the house.

Child/young person is not allowed to enter work study without permission from the carers.

Generally treat each other and the home with respect, e.g. tidying up after oneself

### **Discipline**

We would not physically chastise children or young people or shout. We aim to use positive forms of discipline, such as praising/rewarding good behaviour and offering encouragement and support. Where bad behaviour does need to be addressed, we would first talk to the child or young person explaining why the behaviour is unacceptable. However, should the behaviour continue, we may need to use some form of sanction, for example grounding or withdrawing of a privilege for a short period

Individual roles of carers (where there are more than one)

.....would normally be the carer available during weekdays. However,..... aims to support with this and would be flexible with work hours as needed.

### **Substitute care**

..... has offered to babysit when needed and where appropriate. In time, we would hope to develop networks with other approved foster carers.

**Visitors to the house**

We would maintain issues of confidentiality with respect to any child or young person placed. We would ensure that the child or young person is safe.

**Unsupervised activities of the child/young person**

We would want to know where the child or young person is going and with whom. We would exchange contact numbers where necessary and agree times for the child or young person to return home.

**Travelling by car**

Children and young people would normally sit in the back of the car wearing seat belts. We would ensure that our car has up to date insurance and MOT.

**Guidance and education about sex and sexuality**

We would be open and honest with children and young people, age appropriately, about these issues. We would talk to the children about appropriate behaviours and keeping themselves safe. We would help them to seek any external support services that may be needed.

**Other matters**

Other people in household....

Sensitivity to situations or circumstances a child reacts to or appears to struggle with.

Photos & videos.....

Not to agree to take any placement offered, and particularly any placement outside of our approval, without taking time to fully consider the implications for our family and our safer care policy.

Action to be taken if policy broken

We would record and notify fostering and/or the child/young persons social worker

<b>Agreed by</b>	<b>Title</b>	<b>Date</b>
	<b>Carer:</b>	
	<b>Carer:</b>	
	<b>Fostering Social Worker</b>	

## Appendix 2

See the **Safer Care Risk Management Plan** document.