

# Safe Caring Policy



## Introduction

This paper has been produced to outline to children, parents, foster carers and social workers Foster Care Link's policy on safe caring in foster homes.

## Aim and Objectives of this Policy

The aim of this policy is to ensure that all foster homes have strategies in place to meet the following objectives:

- To keep children safe from abuse from adults
- To keep children in the foster home safe from abuse by other children in the household
- To keep members of the foster family safe from false allegations of abuse

In addition the policy sets out the procedures to be followed in the event of any allegation of abuse or neglect.

## Statutory framework

Regulation 12 of the Fostering Services Regulations 2011 requires fostering service providers to prepare and implement a written policy which is intended to safeguard children placed with foster carers from abuse or neglect and which sets out the procedure to be followed in the event of any allegation of abuse or neglect. This includes arrangements for parent and child placements.

The National Minimum Standards for Fostering Services no longer requires safe caring plans to be provided by foster carers. Foster Care Link however intends to continue using them.

## Application of this Policy

Safe caring plans must be provided and kept up to date for each foster home.

Assessing social workers should ensure that guidelines are produced, based on this policy, during the assessment process. Social workers should ensure that all members of the household are involved in this process and agreement is reached on the final guidelines.

This process should also be used as part of the preparation of applicants. It will present both the worker and the applicants with opportunities to reflect on their attitude to issues of abuse and how prepared they are to take on board the implications of abuse for both their household and any child they may foster.

A copy of each carer's guidelines should be retained by Foster Care Link on the carer's file and these should be discussed with the child's social worker at the point of referral. Consideration will need to be given at this stage to the needs of the child and implication of the guidelines. In some cases it may be apparent that the proposed match is not suitable and an alternative placement should be identified.

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The guidelines should be shared with the child, in an age appropriate way, as early as possible in the placement. Ideally this will be prior to or at the point of placement, but in all cases must be done no later than the placement agreement meeting. In some cases the guidelines may need to be adjusted because of the specific needs or background of the child and the placement agreement meeting should be used as the opportunity to agree any required changes.

## Review of Guidelines

Safe caring guidelines will need to be revised as the circumstances of the household change.

This should be done immediately if there are significant changes such as someone joining the household or the carers move house. In such cases the revised guidelines will need to be cleared with the social worker of any child in placement.

The guidelines should also be considered at the point of every child's review or placement agreement review to ensure they remain up to date and appropriate.

## The Need for Safe Caring Guidelines

All families have strategies for day-to-day living. These will vary from family to family and will be more or less formal depending on the circumstances and preferences of each family. In most families, such strategies are unwritten and frequently unspoken. Children learn how the family operates as part of their day to day development and generally accept this as the 'norm' as they have limited experience of anything else.

Carers need to be aware of the strategies in operation in their household for three reasons. Firstly they need to consider the impact on the way the family functions of a child joining the household. Adjustments are likely to be needed and carers need to think about the ways of minimising the disruption to family routines.

Secondly, carers need to consider the implications of their existing strategies for children joining the household. Such children will usually already have experience of family life and the strategies used in their own home may be very different than those in operation in the foster home. Some will come from chaotic households where there are few boundaries and adjusting to a more formal structure could be difficult. Others will come from a very rigid and structured background where they have had little control over their own lives and adjusting to newfound freedoms may be problematic.

Thirdly, carers will need to identify behaviour or practices within their own household that might be acceptable to them, but will increase risk in a foster home. Some perfectly acceptable routines in families could put both children and carers at risk in foster homes.

## Developing Safe Caring Guidelines

All members of the household should be involved in agreeing guidelines, in particular children of the household and if applicable the secondary carer.

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While foster care has changed dramatically over recent years, there is still a tendency in couples for one to be seen as the primary carer and one as the secondary carer and the secondary carer is frequently male.

Often the secondary carer may not attend training or support groups and may not be directly involved in planning meetings or reviews for individual children. This means that they might not have up to date information or be aware of all the issues that need to be considered to ensure safe caring.

Similar issues will apply to children of the household, but for men there are additional considerations. While children are abused by women or other children, the majority of abusers are heterosexual men and most allegations are made against male carers. This does not mean that men should pass all responsibility for fostering to female partners, but rather that men need to be fully involved in working out how to provide care safely.

Developing safe caring guidelines should not mean changing everything that carers do. It is about considering which elements of the way the household operates might put children or household members at risk. Once these elements are identified, carers need to develop strategies that minimise this risk.

It is neither desirable nor the aim of this policy for carers to produce a complicated, rigid set of rules for their household. Guidelines do need to be written down so that children joining the household, their parents and social workers understand the way the household operates. These should be as brief as possible however and only include those elements that will enhance safe caring.

## **Potential Elements of Safe Caring Guidelines**

Carers and social workers will need to consider a wide range of issues when developing safe caring guidelines. The following are some of these and how they may be addressed. However, carers and social workers should remember that this list is neither prescriptive nor exhaustive.

### ***The use of names***

Carers should avoid the use of the terms 'mummy' or 'daddy'. They are not the child's birth parents and the use of these terms is likely to confuse the child and can also antagonise or alienate parents. The use of first names, possibly preceded by aunty and uncle is the preferred option.

### ***The use of language***

Most families have words and terms they use to describe parts of the body or bodily functions such as going to the toilet. Carers need to consider the words they use and their potential meaning for foster children. They also need to establish the terms the child uses as soon as possible to avoid any distress to a child who might be finding it difficult to express their needs.

## ***Clothing***

No member of the household should walk around in underwear or nightwear and carers should make sure that all members of the household and fostered children have a dressing gown and slippers as well as appropriate nightwear.

## ***Touching***

The need for affection and reassurance is a basic human need that is of particular importance to children's development. Unfortunately the need to balance this with the risk to fostered children and carers of affection being misinterpreted makes this a difficult area for carers. While a spontaneous hug to our own children fulfils this basic need and serves to strengthen the bond between adult and child, it may mean something very different to the fostered child.

It is safer to agree that no one in the household touches another person's body without that person's permission. Children should always be asked first if they want a hug and they need to be taught that it is perfectly acceptable to say no.

Games that involve physical contact such as tickling or pretend fighting should be avoided when children are first placed and in some cases may never be appropriate.

## ***Bathing***

Children who are able to bathe themselves should be encouraged to do so and be given privacy in the bathroom.

For younger children or other children who have needs that mean they require help in bathing, it is always preferable for a female carer to bathe them. Male carers should not be left alone to bathe or dress children unless this cannot be avoided.

It may be appropriate in some circumstances to ask an older child to wear a bathing costume or under wear if they need help with being washed.

## ***Children's bedrooms***

While sharing of bedrooms is acceptable, each child must have their own bed and space for some privacy.

If a child has been abused or has abused another child, then their needs and the needs of all other children will be assessed and the outcome of this assessment recorded before any decision is made to allow the sharing of bedrooms.

Where children are to share bedrooms, consideration needs to be given to how each child is afforded some privacy, both for their possessions and their need for personal space.

Consideration needs to be given as to when others may enter the bedroom. Except in an emergency, people should be expected to ask permission before entering the room and older children should be given increasing control over who goes into their room.

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Where someone does go into a child's room, whether they are another child or an adult, the door should always be kept open.

Careful consideration is needed before the use of sending a child to their room as a sanction as for some children this will trigger memories of prior abuse.

As for bathing, it is preferable for a female carer or both a male and female carer to be involved in putting a child to bed and the bedroom door should be kept open.

## ***Adult's bedrooms***

Many parents allow their own children to share their bed for a variety of reasons – for play, to read or to be comforted. While fostered children have the same needs, the sharing of carers' beds should be avoided. For abused children, such practices may again trigger memories of prior abuse and for any child the carer will risk leaving themselves open to allegations of abuse.

Carers therefore need to find other ways of providing such times of warmth and affection outside of the bedroom. This might be for example by reading together on the sofa.

If a child is unwell and in need of comfort and supervision throughout the night, the child may, for example, need to sleep on the sofa with the carer in an armchair.

## ***Playing***

Consideration is needed as to where in the house children may play unsupervised.

Carers should ensure that children are kept within earshot and checked on when they go quiet. Children should not normally be allowed to play with other children behind closed doors, although carers will need to balance the need for safety against the need for privacy for older children.

Where children wish to play outside the house, alone or with others, the child's physical safety will need to be considered as well as the potential risks the child may present to others.

The fostered child's greater susceptibility to bullying or being targeted by a potential abuser will also need to be considered.

## ***Transport***

Carers will need to consider the appropriateness of transporting children alone in a car, in particular if the child is known to have been abused. Where possible, this should be avoided, especially for men. If the carer has to travel alone with a child, then the child should sit in the back of the car using an appropriate child's care seat or booster seat.

## ***Baby-sitters and alternative carers***

As for any child, there will be times when fostered children need to be cared for by baby-sitters or other carers while the foster carer is out.

Again, ideally two people should be used to baby-sit or provide alternative care. Supervising social workers should ensure that a Disclosure and Barring Service check is sought for regular alternative carers.

Fostered children should not be left alone in the sole charge of a carer's own child.

## ***Photographs and Videos***

Carers need to be sensitive to the feelings of children and their parents about taking photographs and not assume that is okay.

Many children and adults will object to having their image recorded on film for religious or cultural reasons and their rights should be respected.

In some cases the use of photographs and/or videos will be an important part of the work being undertaken with the child, for example to help prepare an advertisement for a permanent family or as part of life-story work.

In all cases the carer should discuss the taking of photographs and videos with the child's social worker before doing so. The permission of the child should also be sought and no child should be photographed or filmed in the bath, in their nightclothes or underwear or undressed.

## ***Contact***

Contact with birth families and others who are significant to the child is of major importance to looked after children.

There will be occasions when children have contact with people who are known to have abused them and at other times they may have contact with abusers where neither the carer nor the social worker is aware that prior abuse has taken place.

Were it is agreed that contact takes place in a foster home, carers will need to devise strategies to manage this in a sensitive manner, but also in a way that ensures the safety of the child.

Where the contact needs to be supervised, the arrangements for this should be agreed in advance with the child's social worker and clearly communicated to the parents/relatives by the social worker. The foster carer should ensure that they are able to be present during the whole of the contact session and if they are not able to be, to inform their supervising social worker as soon as possible..

Where the contact does not need formal supervision, the carer should nevertheless ensure that they find ways to respect the need for some privacy while at the same time remaining aware of what is going on. Doors to rooms where contact is taking place should be kept open and the child should be kept within the earshot of the carer at all times.

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## Race, Culture and Religion

The needs of both children and carers arising from race, religion and culture need careful consideration.

While this is frequently considered in terms of identity or the physical and dietary needs of children, there are also other issues relating to safe caring.

For example, some carers may say grace at mealtimes or pray as family at other times. This may be of positive benefit to a child who shares the same religion, but potentially damaging to a child who has experienced ritualistic abuse.

Taking of photographs is an innocent part of the day-to-day life of many western families but is seen as offensive to many Muslims.

Attitudes towards gender roles and sexuality will also need careful consideration.

Carers need to ensure that they consider their own attitude to these issues when drawing up their safe caring guidelines and discuss the individual needs of each child placed with the child's social worker.

## Children with a Disability

Carers who are intending to foster children with a disability will need to give particular attention to ensuring the protection of such children.

The need for intimate personal care will have major implications for the child and the carer. The child may find it hard to distinguish this between other forms of touch and the carer may be more vulnerable to false allegations.

Communication problems may make it harder for a child to tell and mobility problems will make it harder for children to run away or protect themselves from abuse.

Signs and symptoms of abuse may be missed and put down to the child's behaviour or medical conditions.

Children with a disability may have less knowledge and understanding about abuse and will find it more difficult to speak for themselves or make a complaint.

## The needs of Carers own Children

Over recent years the needs of carers' own children has come to be increasingly acknowledged.

Fostering has a dramatic impact on all members of the household and the adjustments needed will need to be carefully considered before a family decide that fostering is right for them.

It will be important for carers to find ways to meet their own children's needs while keeping all children in the household safe. For example, while birth children may have to come to terms with the fact that it is no longer possible to share their parent's bed,

the carer should find ways of countering this loss by providing their own children with their own space and time to replace this loss.

*“ Safe caring should not prevent children and young people receiving the care they need. Carers need to find ways of showing care that are not open to misinterpretation or misunderstanding. Experienced carers say that you have to change the way you do things at home and that after a while this just becomes normal and does not stop you leading ordinary lives.”* (Taken from ‘Safe Caring’, first published by National Foster Care Association [now known as Fostering Network] 1994).

## Preparing for a Placement

While potential carers will need to prepare their household guidelines in advance of the experience of a placement, they will also need to consider these afresh (as will experienced carers) in advance of each individual placement.

Some of the issues carers will need to consider are:

- How will they explain to the child what is expected of them and other household members?
- Do they have all the information they need to care for the child safely?
- Is the child known to have been abused?
- Do the particular needs of the child mean that the usual household guidelines need to be revised?
- If so is this achievable and acceptable to all other members of the household?
- What are the most important household rules that must be adhered to and which are less significant?
- How will unacceptable behaviour be dealt with, whoever displays it?

## Allegations of Abuse or Neglect in Foster Homes

Allegations of abuse or neglect in foster placements will immediately be reported to the placing authority and the area authority where the foster carer lives. This may be the same authority, but were it is not, it is usual that the area authority takes the lead for child protection investigations while the placing authority retains case accountability for the child.

Child protection investigations will be carried out under the auspices of the area authority child protection procedures. Regardless of where the child is placed, immediate consideration will be given in all cases to taking any necessary measures to protect the child.

The area authority will be responsible for taking any immediate action to protect the child, although the placing authority may in any event choose to move the child.

Foster Care Link will notify Ofsted of the instigation and outcome of any child protection enquiries.

Written records will be kept of allegations of abuse or neglect in foster homes and of the action taken in response.



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Foster Care Link will encourage staff, foster carers and children to report any concern about child welfare or safety. Such concerns should normally be raised with the relevant manager or social worker. Where staff, foster carers or children wish to, they may raise such concerns directly with Ofsted. Details of how to contact Ofsted are provided to all staff, foster carers and children in the Children's Guide.

Where complaints or allegations are made against Foster Care Link carers that:

- Do not constitute a child protection allegation or
- The area authority have concluded a child protection investigation

The complaint or allegation will be investigated in accordance with Foster Care Link's Complaints Procedure Against Foster Carers.

## Foster Carer Training

Fostering services are required to ensure that foster carer's training covers caring for a child who has been abused, safe caring skills, managing behaviour and recognising signs of abuse and on ways of boosting and maintaining the child's self-esteem. Improving children's own self-esteem is one of the most effective ways to enable children to help themselves avoid becoming victims

Supervising social workers should ensure that they pay attention to the training needs of carers and other members of their household, addressing these in the appraisal of training and development needs which must be documented in the annual review report.

Social workers should encourage carers to make use of any available training opportunities run by Foster Care Link or external agencies.

## Further Information

Fostering Network produce a number of relevant leaflets and an up to date catalogue of their publications can be obtained from:

The Fostering Network  
87 Blackfriars Road  
London SE1 8HA  
Tel: 020 7620 6400

Guidelines for short-break carers on the safe care of disabled children are contained within the Shared Care Network publication 'Safe and Sound'. Further information can be obtained from:

Shared Care Network  
63-66 Easton Business Centre  
Felix Road  
Easton  
Bristol BS5 0HE  
Tel: 0117 941 5361