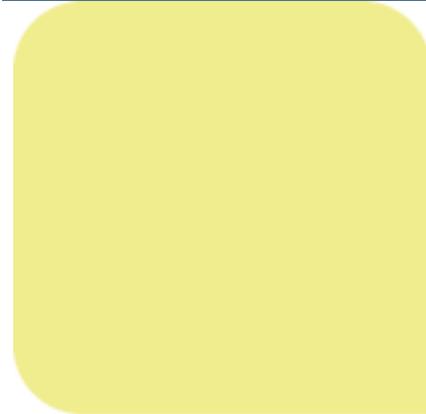# SCIE guide 7: Fostering

November 2004

Introduction

SCIE (October 2004) is designed for foster care practitioners and anyone with an interest in good practice in fostering. The easy-to-use guide is packed with case studies, good practice tips and research summaries and designed to answer any questions foster carers may have on fostering, as well as provide food for thought.

The guide is based on evidence from a number of reports including SCIE Knowledge Review 4: Innovative, Tried and Tested – A Review of Good Practice in Fostering, SCIE Knowledge Review 5: Fostering Success – An Exploration of the Research Literature in Foster Care [1], [2] and two other recent studies [3]. It shows how this evidence can be used in every day practice.

About SCIE

SCIE works with people and organisations throughout the social care sector to identify useful information, research and examples of good practice. Using this information, we produce free paper and web-based publications which bring together existing information about a particular area of social care, draw out key messages for good practice and identify areas where more research is needed to inform good practice. In this way, people can use SCIE's publications as a central point of evidence-based information. Our publications are useful for social care workers, managers, academics, practice teachers, policy makers, service users, carers and others with an interest in social care.

SCIE's work covers the breadth of social care, including services for adults, children and families; participation; human resource development; social work education; e-learning and the use of knowledge in social care.

SCIE also owns and runs Social Care Online, an extensive online resource of free information about social care. It has around 80,000 abstracts of books, reports, research papers, official publications and articles and is a pivotal tool for social work students, managers, academics, front line practitioners and service users.

Link: http://www.scie-socialcareonline.org.uk

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About this guide

Who the guide is for?

This guide is designed for practitioners but will also be useful and of interest to all those concerned with good practice in fostering.

What is the aim of the guide?

The purpose of this guide is to offer quick and easy access to knowledge about foster care practice. It is designed to enable practitioners, carers, teams and services to think creatively about their work to benefit foster children and young people. The guide does this by:

- identifying major areas of importance in current fostering practice
- summarising key research findings
- providing references for the original research
- suggesting practice points
- giving examples and illustrations from practice
- giving definitions and details of relevant legislation, guidance and standards
- providing further information and useful web links
- providing information about current English law and standards.

Coverage

As this guide has been produced using evidence from SCIE knowledge reviews 4 & 5 [1], [2], it does not include in any detail foster care topics outside this remit. But the importance of, for example, family and friends care and adoption by foster carers, is recognised.

What the guide does not cover
The law and standards sections apply to England only. The guide does not include every topic, for example, private fostering and the kinship care of 'looked-after' children.

Structure of the guide

Each topic is divided into the following sections:

Key research findings
An accessible summary of the important research.

Practice points
Where appropriate, an analysis of how these findings have been translated into everyday practice.

SCIE Guide 7: Fostering

Research
An overview of current research with references and some links to the original research.

Ideas from practice
Where available, there are practice ideas and examples showing how agencies have tried to improve practice and solve problems. Some examples, from SCIE knowledge review 4 [1] were evaluated by the researchers, and are referenced as such in the guide, whilst others are self reported and have not been evaluated. We are grateful to agencies for their ideas, acknowledge that other agencies may also be doing similar work, and welcome other practice ideas which could be included.

Law and standards
Relevant legislation, guidance and standards, where it exists.

Note: Not all sections apply to every topic

Author and acknowledgements

The author of this guide is Mary Sainsbury, Practice Development manager at SCIE. We would like to thank all those who contributed to this guide. Particular thanks go to Rob Howells, web development officer at SCIE; Kate Wilson, Ian Sinclair, Claire Taylor, Andrew Pithouse and Clive Sellick at the Universities of Nottingham, York, Cardiff and East Anglia for their work on SCIE's Knowledge Reviews *Fostering Success* and *Innovative Fostering Practice*; Alan Cave and Mary Lane who commented and advised on this work. We would also like to thank all members of the fostering reference group, advisory group and quality assurance group, for their input and insight, and Joanna Adande, Sue Lawson, Gail Goldstone and Pat Fraser who helped with initial testing.

Working with you

SCIE welcomes email or written comments on any aspect of the Guide, which will inform future updates. SCIE is keen to collect examples of translating key research findings and Practice points into practice. You can contact SCIE from the Contact us page on the website.

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Children's views

Key findings

Although there are some difficulties with researching children's views, we can be fairly confident about the general findings, which are true for many children. Children want different things to suit their individual circumstances, but they all desire:

- an 'ordinary' family life, and not to feel 'different'
- to maintain relations with their birth families
- to understand why they're in care, and to have an explanation ready
- to be listened to about where they want to be, and to have an element of control
- to be valued, respected, encouraged (for example, at school) and to be appreciated for themselves.

With some exceptions, foster children generally feel positive about being in foster care.

Practice points

- Remember that children want to enjoy an 'ordinary' family life in their foster family. Ask them and yourself if they are being made to feel different and how you can overcome this together.
- Think about how you arrange reviews, meetings, contact and everyday events like medical assessments.
- Offer to help children work out an explanation that they can give to school and friends about their current family situation.
- Ask yourself how you can help children feel listened to, empowered and in control of their own lives. Ask them the same questions too.
- Think about how you can help children maintain relations with their birth families.
- Encourage children in their pursuits and ask them if they are getting enough encouragement from elsewhere.
- Find out whether the children you are working with feel valued, respected and loved and think about what you can do to promote these positive feelings.

What we know from research

Ask children what they want
It is important to find out what children think about foster care. Many researchers have conducted studies about children's views, but do they really represent the views of children in care [4]?

Often, children and young people may not feel free to say what they really think: for example, they may be worried about upsetting their foster carers and birth families [5], [6] Some studies have had a low response rate and in general it is often easier to find out the views of teenagers and children in permanent foster care than those of younger children and children in temporary care [7], [8].

In spite of these reservations, when children are consulted very similar themes emerge and we can be fairly confident that the views described below are true for the great majority of children [9]. Because of their individual circumstances children and young people do not want exactly the same things, but in the research studies referred to above, they all report similar general needs and wishes.

For many children foster care can be a good experience most of the time. Research studies show [3] that a sizeable majority of children valued being in care, did not want to return to their birth families, and did not think that being in care was the reason for their difficulties.

Help children not to feel different
Children living in foster care want to feel that they have an ordinary family life. They do not like anything that marks them out as different [10]. For example, they do not like statutory reviews interfering in normal life or being conducted in a place that may affect their privacy, such as at school or in the foster family home [9], [11], [12].

Maintain relations with birth families
Nearly all fostered children want to retain a relationship with their birth family and nearly all worry about not seeing their mothers, fathers, brothers and sisters. Many feel that the relationship they have with brothers and sisters can represent what is best about their family. Additionally, many children worry about their birth families while they are away: some children think that their relationship with their own family is threatened by their relationship with their foster family [7], [13-15].

Help them understand and explain why they are in care
Many children are worried about the reasons why they came into care and for how long they are likely to be there. One study 16 shows that about two thirds of children do not know and understand why they entered care in the first place. Trying to produce an account of what has happened which can then be explained to others, particularly at school, preoccupies many children. There is also evidence that children have to accept the reason themselves, otherwise placements are more likely to break down [17].

Listen to where they want to be
Not all children and young people want the same things, but they all want to be listened to and to feel that they have choice and control [7], [18]. Children do not like being moved suddenly and they want to be involved in their own care planning [7], [9], [12], [13], [19-23]. We also know from research [3] that if children are not happy in a placement and are unmotivated to make it work, it will probably break down. If they cannot be where they want to be, they appreciate an explanation of the options.

Value, respect, encourage and appreciate children
Children need to feel that:

- their individual qualities are appreciated and that they are loved for themselves
- they are an equal member of the foster family
- they are encouraged and given the opportunity to do well at school and in other pursuits
- their individuality, choices and privacy are respected, particularly for older children [9].

The relationship between foster carers' own children and fostered children
Research [3] has found a generally favourable relationship between foster carers' own children and fostered children. If there is serious conflict of interest between the two groups of children, or if the carer feels that their own children may be at risk in any way, most foster carers will put the needs of their own children first. This can make foster children feel that they are treated less favourably and trigger a downward spiral, which may result in placement breakdown. It is important to recognise this and intervene early.

Most children feel positive about their foster family
With some exceptions [24] foster children generally feel positive about their care and nearly three quarters of looked after children thought that being looked after had been a 'good idea' [7], [9], [21], [23], [25], [26].

Law and standards

Compliance with Statute and Regulations is mandatory; compliance with Standards is taken into account by the Council for Social Care Inspection, when registering and inspecting fostering service providers.

There are various legal channels through which children can express their views about foster care, and perhaps more particularly, their concerns and complaints.

Children Act 1989 section [1] [3] welfare checklist
'A court must have regard to the ascertainable wishes and feelings of the child' concerned in the legal proceedings.

Section 20 [6]
Before providing accommodation under this section, a local authority shall, so far as is reasonably practicable and consistent with the child's welfare:

- ascertain the child's wishes regarding the provision of accommodation; and
- give due consideration (having regard to his age and understanding) to such wishes of the child as they have been able to ascertain.

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Section 41 Children Act 1989
A Children And Family Court Advisory And Support Service officer [Children's Guardian] must be appointed by the court to safeguard the child's interests in 'specified proceedings' [application for care or supervision order, discharge or variation of these orders, section 34 contact orders etc]. The Guardian's duties include ensuring that the child's views are heard by the court and appointing a solicitor to represent the child in the court proceedings.

Where the child is of sufficient understanding to instruct the solicitor directly, rather than through the Guardian, and the child and guardian do not agree about what should happen, the solicitor will represent the child's views to the court, not those of the Children's Guardian.

Independent Visitors
Children Act 1989 Schedule 2 paragraph 17, and Definition of Independent Visitors [Children] Regulations 1991.

Local authorities must appoint independent visitors [whose role is to visit, advise and befriend] when a child is looked after by an local authority and contact with a parent or other person who has parental responsibility, has been infrequent, she/he has not visited, been visited or lived with any of these people during the last 12 months, and it would be in the best interests of the child.

Complaints and Representations by Children
Children Act 1989 section 26 [3] to [9], and section 59 [4], and Representations Procedure [Children] Regulations 1991, and Fostering Service Regulations 2002 Regulation 18 [Fostering Service Provider complaints procedures].

These all provide ways in which children and young persons can make complaint or representations about aspects of their foster care.

The Advocacy Services and Representations Procedure [Children] [Amendment] Regulations 2004 and Guidance, and Looked After Children [2004] 11
A duty is placed on local authorities with social services responsibilities to ensure that advocacy services are provided for children and young people, making or intending to make a complaint under or section 26 or section 24D of the Children Act 1989.

Review of Children's Cases [Amendment] Regulations 2004
Local authorities must appoint Independent Reviewing Officers, who have powers to ensure the child's views are understood and taken into account at and between reviews, as well as:

- monitor the performance of the local authority in implementation of care plans
- problem-solve on behalf of children
- advise and assist children to complain, make representations and/or take legal action

- have legal action taken for children by others, including Children And Family Court Advisory And Support Service.

Ideas from practice

VIEWPOINT is a computer-based package that provides a strategic approach to consulting with young people about any topic, for example, assessment, reviews, and service quality and to get feedback on services from those young people who receive them.

Viewpoint also engages and encourages young people to participate in the care planning and review process.

Through the use of a Questions and Answers programme, the help of a computer based assistant, young people can give their views and feelings about their care and the services they receive in their own time and in confidence.

Topics that can be covered by Viewpoint include:

- Children In need: what families want
- Looked after children: participating in reviews
- Care leavers: pathway planning
- Young people with disabilities: taking part in reviews and care planning
- Education
- Youth justice

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Meeting foster children's emotional and behavioural needs

Key findings

- Children who are looked after have more emotional and mental health needs, as well as more behavioural difficulties than most children. Their difficulties usually start before they become looked after.
- Research on children who have experienced trauma, in early life, including disrupted attachments, suggests that this may cause neurological damage.
- Research has shown that foster care which offers stability, security and a good relationship, can help young people to develop and mature emotionally.
- Children who return home after long periods in care are more likely to show disruptive and offending behaviour compared to those who remain in care.
- This foster parent-child relationship needs time to develop on both sides [17] , [27], [28]. Children who return home after long periods in care are more likely to show disruptive and offending behaviour compared to those who remain in care [29]. The disruption of their relationship with the foster carer may be a contributory factor.
- Support from social services after a child has returned home can be patchy. A quarter of the children in one study [3] had no contact with a social worker following their return. Those who did said support generally focused on practical issues and 'tailed off' quite quickly.

Practice points

- Remember that children who have been fostered for a long time have often built up a positive relationship with their carers. While some placement moves cannot be avoided, think carefully about the possible emotional damage to the child that could result from the relationship being disrupted.
- If a child returns home, ask yourself what support they and their family will need and for how long. Research shows that effective support for the family following return home is rare.
- Remember that the problems behind a child's difficulties almost always begin before the child becomes looked after. So when you are considering returning children home ask yourself whether the risk factors that caused the child to become looked after have improved. Discuss this with the professional network. Think about the family's willingness and ability to work towards reunification, or to accept permanent alternative care.
- Remember that the parent/s and other adults in the family must be able to recognise and accept the need for change and be willing and

able to work towards achieving and maintaining it. If they cannot they will need to accept that their child is cared for by others.

What we know from research

Children who are looked after have more emotional and behavioural needs than the general population of children. Their problems have usually originated before they become looked after. [9], [26-31]

These difficulties can affect children's behaviour in placement and cause many problems for the child, foster carer, social worker and often later society in general. The problems can continue into adulthood and can have a negative effect on the person's education and work, personal and social life. [32-39]

There is a considerable research on children who have experienced trauma, including disrupted attachments, in early life, demonstrating the neurological damage that this can cause. [40-43]

Link: See 'Attachment' by John Simmonds

Research has shown that, in general, the features of foster care that enable young people to develop emotionally and to be able to control their anti- social behaviour can be summarised by having a carer to offer stability, security, and a good relationship. This relationship is usually with the foster carers and needs time to develop on both sides. [16], [44], [45] Children who return home after long periods in care are more likely to show disruptive and offending behaviour compared to those who remained in care; the important factor here is that the relationship that they have built up with their carer is disrupted. [46]

Support after the child has gone home can be patchy with a quarter of the children having no contact with a social worker following return and support generally focussing on practical issues and 'tailing off' quite quickly.

Law and standards

The Law and Standards sections apply to England only.

A brief indication of how the law will change upon full implementation (September 2004 and September 2005) of the Adoption and Children Act 2002 is inserted in italics.

Compliance with Statute and Regulations is mandatory – compliance with Standards is taken into account by the CSCI when registering and inspecting fostering service providers.

National Minimum Fostering Standard 6
The fostering service make available foster carers who provided a safe, healthy and nurturing environment**.**

Ideas from practice

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REDBRIDGE has a 'specialist retained carer scheme' of time-limited fostering placements for young people with complex and challenging needs. Young people aged between 11 and 16 years are placed with specialist carers rather than with mainstream foster carers, or in residential care. The specialist carers have their own dedicated supervising social worker who is trained alongside social workers in the borough's adolescent resource centre and receives a retainer payment of £300 per week, whether or not a young person is placed with them.

NORFOLK has a specialist fostering scheme, originally funded by savings from reducing out-of-county placements. This scheme places children between the ages of 5 and 15. Foster carers and social workers work closely alongside staff from a local residential therapeutic unit. The support package, fees and the services for children are in line with those of nearby independent fostering providers.

FIND US KEEP US is part of the Sexual Abuse Child Consultancy Services Group. It offers an integrated multi-disciplinary approach with measurable outcomes, consisting of therapeutic parenting, therapy, life-story and placement services to aid recovery from trauma. The programme continues into placement.

The Community Alternative Placement Scheme 1 was set up by NCH Action for Children Scotland in 1997 in response to a need for community-based alternatives to secure care and accommodation. Young people placed present a full range of behavioural problems including aggression, self-harm, prostitution, drug misuse and alcohol misuse. An evaluative study of its effectiveness concluded that "a considerable number (of these young people) can be placed in foster care and some can be helped to turn their lives around in a major way" (Walker et al, 2002:223).

The Wessex Community Projects Remand Fostering Scheme 1 is also provided by the NCH, and HAMPSHIRE, PORTSMOUTH, SOUTHAMPTON and the ISLE OF WIGHT councils commission its services. Young people who might otherwise be remanded in custody are referred for foster placements. Staff estimate that 75 per cent of young people in the project do not commit further offences. The project has also developed a post-custody supported accommodation scheme.

The Genesis Fostering Project 1 in Newcastle is a Barnardo's scheme which provides local authorities in the north east with planned specialist foster placements for young people "who display sexually abusive, or extensive sexualised behaviour, which is causing concern and does, or may, pose a threat to others."

NCH's Caring Together 1 in Lincoln provides a combined family placement and support service. There are foster placements for children with complex medical demands and challenging behaviour arising from their disabilities and families can access support services.

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The needs of foster children from black and minority ethnic background

Key findings

The information in this section mostly comes from the forthcoming *Child Welfare Services for Minority Ethnic Families: The Research Reviewed* by June Thoburn, Ashok Chand and Joanne Procter [30].

The most recent statistics about looked after children from black and minority ethnic backgrounds are available from the National Statistics Office and the Department of Health's: Children looked after by local authorities, 2002 report, which are used in the Thoburn, Chand and Procter study.

The largest groups of looked after black and minority ethnic children have one or both parents with an African Caribbean or African heritage.

Black and ethnic minority children are no more likely than white children to stay in care for long periods of time. But children from some black and minority ethnic groups are more likely to stay longer than other black and minority ethnic children.

Children with both parents from a black and minority ethnic background were more likely to be permanently fostered than to be adopted

Social workers may be more likely to think of temporary foster care as the first stage in compulsory care via when they provide it for black and minority ethnic children.

Placement break down rates for black and minority ethnic children are no different than those for white children, although the break down rates for children of mixed parentage were higher than for white children.

There are no significant differences in placement breakdown between children placed with carers from a similar background to their own and those placed with white families. When black boys were placed with white families, the relationship was less likely to break down, but the opposite seemed true for girls.

Because ethnicity is very important to black and Asian children, white carers face extra challenges in providing them with necessary support.

Because many black and minority ethnic foster carers empathise with parents from their own culture who have struggled with adversity, they want to help both parents and child. They often prefer to offer a permanent foster home than to adopt.

Practice points

Remember that all fostered children from black and minority ethnic backgrounds, wherever they are placed, need support to appreciate their cultural heritage and to face racism and discrimination. Black and minority ethnic carers are often well placed to empathise with birth parents' difficulties and help foster children have a sense of pride and achievement. They are also able to make better sense of their history if they have contact with their families and other black people. Make sure that there are opportunities for these contacts and that identity issues are not being put on the back burner. Ask yourself how you, your team and the foster carer can provide positive help and support to children from black and minority ethnic backgrounds.

Remind yourself to be especially pro-active when planning care for children who are African Caribbean, Pakistani or who have one white and one African Caribbean parent, or are in the 'any other black group'. Research shows that these children are more likely to stay longer in foster care than any children from other ethnic minority groups.

Remind yourself to ask the family about a child's ethnicity and record it correctly because ineffective and inaccurate recording of this information impacts adversely on service development and provision for children.

What we know from research

When comparing the ethnicity of looked after children under 16 in 2002 with the general population of children under 16 in England, black and minority ethnic children are over represented: 17 per cent of looked after children, compared with 13 per cent of the general population, are of a black minority ethnic background.

The largest groups of looked after black and minority ethnic children have one or both parents with an African Caribbean or African heritage. Other large groups of looked after children come under the headings of 'any other mixed background' and 'any other ethnic group'. There are much smaller numbers of children with Chinese, Bangladeshi, Indian and Pakistani backgrounds.

An increasing number of asylum seeking children from Africa and central Europe are beginning to have an impact on the profile of looked after children. Many of these children may have been traumatised and living in very stressful circumstances, which means that they often need more specialist care.

Statistics about looked after children from a black and minority ethnic background

Length of time in foster care
Around 70-80 per cent of children who are looked after will have left care within two years and research [30] found that, taken overall, children from black and minority backgrounds were no more likely than white children to stay in care for long periods of time.

But children from some black and minority ethnic groups: African Caribbean, Pakistani, those with one white and one African Caribbean parent, and those

in the 'any other black group,' were more likely to stay longer than other black and minority ethnic children, that is, over four years.

From the 1980s, adoption has increasingly become the first choice for children needing a permanent placement. As a result, research about permanent fostering has declined. Nevertheless some children and young people are in 'permanent' fostering, even though it may not be defined as such.

One study [30] followed up the cases of 297 black and minority ethnic children placed in the 1980s. Fifteen years later, it found approximately one third had been placed as permanent foster children. An important finding was that children with both parents from a black and minority ethnic background were more likely to be permanently fostered than to be adopted. Interviews with these foster carers found that they were motivated by a desire to give a home to children from their own background and they believed that children should maintain links with their birth families, with whom they were strongly likely to empathise.

Other studies [30] have supported this finding: children with mixed parentage requiring permanency are more likely to be adopted, whilst those with both parents from a black and minority ethnic background are more likely to be permanently fostered.

Black and minority ethnic children in temporary foster care
As mentioned in the guide section on temporary foster care, many parents find that temporary care can be a relief, even when it is offered because of concerns about their ability to protect. However when black and minority ethnic parents are offered this service following child protection concerns or difficulties with teenagers, the researchers [30] were concerned that social workers are more likely to think of temporary accommodation as the first stage in compulsory care. This concern was also noted in an overview of the Children Act by the Department of Health in 2001.

The availability of black and minority ethnic carers
Since the 1980s efforts to recruit minority ethnic foster carersin the geographical areas where they are needed, have generally been successful. One study [31] shows the high importance that social workers give to meeting the child's cultural and ethnic needs. However, other studies [30] indicate that other factors, particularly when the child is in temporary care, can be just as important. For example proximity to home, school, friends and family, and the carers' ability to meet the child's needs.

A 1997 study quoted in Thoburn [30] showed that most African Caribbean and Asian children could be placed in foster families which reflected their ethnic and cultural heritage, but that was not the case where children from other ethnic and cultural backgrounds were concerned. More recently it has been noted that in some London boroughs, the numbers of African Caribbean carers exceeds the number of African Caribbean children needing placement, and there may be a shortage of white carers. Another study [32] found that a majority of carers recruited by independent fostering providers were white.

Placement breakdowns for ethnic minority children
As stated in the section of the guide on placement breakdowns, a child's age is a key factor for children from all ethnic backgrounds. Teenage placements are particularly likely to break down and a general lack of placements for teenagers adds to the problem.

A 2001 study 9 found that the placement break down rate for black and minority ethnic children was lower than for white children. It did not seem to matter whether the placement was with carers from the child's own ethnic background or not.

Another study [30] in 1991 of 1165 placements, followed up by other researchers in 2000, found no difference in the rate of break down between children from a black and ethnic minority background and white children, although the break down rates for children of mixed parentage were higher than for white children. The follow up study ten years later revealed that at least 24 per cent of all the placements had broken down.

These and other studies did not find significant differences in placement break down between children placed with carers from a similar background to their own and those placed with white families. However when gender was also considered, the placement of boys with white families seemed less likely to break down than ethnically matched placements, whilst the opposite seemed true for girls.

Children's views
There are several studies about the views of black and ethnic minority children and young people [30]. Many feel sad when they leave home but also understand the reasons for it. They want the similar things to all children as described in the guide section 'Children's views'.

Link: *Children's views*

Children and young people who feel visibly 'different' want help from carers in dealing with racism and discrimination. They often want to be able to find their own sources of support, they value living in a community where others share their heritage and they appreciate having a social worker from the same background as their own [30].

Qualitative evidence from black and Asian children [3] shows how important their ethnicity is to them and the extra difficulties that white carers experience in providing support for them. Minority ethnic children in one study [3] were able to make sense of their history if they had opportunities for contact with their families and other black people, whilst if they did not, they tended to put the issues on the 'back burner'. The children needed extra help to make sense of their identity and history if they were placed with white carers. Some young people spoke about the strains of being cared for by a white family, a growing sense of alienation and difficulties with social and personal relationships, as well as their mental health.

Most young people, foster carers and foster care staff think being in foster care presents more than enough challenges without the extra one of living in a family with a different ethnicity and culture. Foster children want carers to

value and respect their identity and their past experiences. Maintaining contact with siblings and birth family helps this process, as long as it is a positive experience [3].

Contact with both parents is particularly important for children of mixed race parentage who often feel that they have lost out on one aspect of their background [3].

Carers' views
Carers feel satisfied if they think they are doing a good job and that the agency values their work and supports them. Additionally, carers from a black and ethnic minority background report feeling shocked and saddened that children from their own culture are in care and want to provide a home for them. Many have themselves experienced difficulties and racism and have empathy with parents from their own culture who have struggled with adversity. They want to help both parents and the child and prefer not to take part in the process of 'severing links', as they see it. Instead they often offer the option of a permanent foster home, rather than adoption. They are proud when a child does well and develops a strong sense of cultural pride and this helps them tolerate challenging behaviour and even a lack of affection and trust [30].

Law and standards

Compliance with Statute and Regulations is mandatory; compliance with Standards is taken into account by the Council for Social Care Inspection when registering and inspecting fostering service providers.

The Law and Standards sections apply to England only.

A brief indication of how the law will change upon full implementation (September 2004 and September 2005) of the Adoption and Children Act 2002 is inserted in italics.

Children Act 1989 section [1] [3]
The welfare checklist: a court must take into consideration the age, sex and background of the child.

Fostering Services Regulations 2002 Regulation 11 [b] [ii]
Independent fostering agencies shall ensure, before making and decisions affecting a child to be placed with foster parents give due consideration to his religious persuasion, racial origin and linguistic background.

National Minimum Fostering Standard 7
The fostering service ensures that children and young people and their families, are provided with foster care services which value diversity and promote equality.

Adoption and Children Act 2002 –section [1] -Welfare check list for adoption and placement order proceedings.

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Section 1 [4] [d] – The court and adoption agency must have regard to the child's age, sex background and any of the child's characteristics which the court or agency considers relevant.

Section 1 [5] In placing a child for adoption, the adoption agency must give due consideration to the child's religious persuasion, racial origin and linguistic background.

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Physical health

Key findings

As a result of their experiences, children in foster care are more likely than other children to have physical health problems.

The continuing health care needs of looked after children may be overlooked. When they are in foster care, children nearly always receive treatment for acute health needs but chronic health problems and dental care may be neglected.

Practice points

- Ask yourself if you, the foster carers, or a health colleague, have talked with the child about their health, including their dental health, and problems that may have been worrying them for some time. Remember that they may need extra encouragement and support to be able to discuss personal matters and express preferences and worries.
- Ask yourself how you can ensure that children, who may be apprehensive, can be encouraged and supported to have health checks.
- Children who may be apprehensive are encouraged and supported to have checks with a health professional.
- Remember to ensure that all relevant information about the child's previous and current health is collected and recorded and shared with the child, family and foster carers as appropriate.
- Ask yourself and health colleagues if the child is receiving treatment from the dentist and for chronic health conditions and ensure that a consultant and second opinions have been sought where necessary.
- Consider ways in which you and your team seek advice and make and maintain links with relevant health professionals in your area.
- Make sure that you listen to foster carers' observations about children's health.

What we know from research

Physical health
Looked after children are more likely than other children to have been physically abused, injured and neglected. Often they have lived at many homes before being looked after and, as a result, they may not have received continuity of health care. They are more likely to have physical health problems than their peers and there is often nobody who has an overview of their health needs or history. Whilst they are nearly always treated for acute illness, chronic illnesses and dental care may be neglected [33].

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A significant minority of looked after children have a physical disability and a sizeable proportion, about a quarter, have a learning disability, in a minority of cases a serious one [17], [34], [35].

Law and standards

The Law and Standards sections apply to England only.

A brief indication of how the law will change upon full implementation (September 2004 and September 2005) of the Adoption and Children Act 2002 is inserted in italics.

Compliance with Statute and Regulations is mandatory – compliance with Standards is taken into account by the CSCI when registering and inspecting fostering service providers

FSR 2002 Regulation 15[1] and [2] and [16, and Arrangements for Placement of Children [General] Regulations1991 as amended, and Children Act [Miscellaneous Amendments] [England] Regulations 2002]

National Minimum Fostering Standard 6
The fostering service provider must ensure that it provides foster care services which help each child or young person in foster care to receive health care which meets his/her needs for physical, emotional and social development, together with information and training appropriate to her/his age and understanding, to enable informed participation in decision about her/his health needs.

Health assessments before placement in foster care
A Responsible Authority shall, before making a placement, or if that is not reasonably practical as soon as is reasonably practical after a placement has been made, make arrangements for a registered medical practitioner to conduct an assessment, which may include a physical examination, of the child's state of health. [This does not apply if the child, being of sufficient understanding to do so, refuses to consent to the examination.]

Regular Health Reviews

FSR 2002 Regulation 6 and Review of Children's Cases Regulations 1991 as amended.
The Responsible Authority must make arrangements for a child who continues to be looked after by them to receive a health assessment, which may include a physical examination, and for a written report on the state of health of the child and his need for health care to be made by a registered medical practitioner or registered nurse under the supervision of a registered medical practitioner –

- at least once in every period of six months before the child's fifth birthday, and

- at least once in every period of twelve months after the child's fifth birthday,

- unless the child is of sufficient understanding and refuses the assessment.

Prohibition on corporal punishment by foster parents, and behaviour management Fostering Services Regulations 2002 Regulation 13 [1] and [2]

The fostering service provider shall prepare and implement a written policy on acceptable measures of control, restraint and discipline of children placed with foster parents.

Foster parents are required to agree in writing that:-

No form of corporal punishment is used on any child placed with a foster parent;

No child placed with foster parents is subject to any measure of control, restraint or discipline which is excessive or unreasonable, and

Physical restraint is used on a child only where it is necessary to prevent likely injury to the child or other persons or likely serious damage to property.

Looked after children should be granted the same permissions to take part in acceptable age appropriate peer activities as would reasonably be granted by the parents of their peers. However, where exceptional circumstances mean that this is not possible, the decision should be based on clear reasons and stated in the child's care plan, and where practical the child's views and feelings should be taken into account.

Local Authorities are now expected to review their policies and practices in accordance with this new guidance, and to ensure that carers, staff, children and young people are aware of the situation.

Ideas from practice

DENBIGHSHIRE SOCIAL SERVICES DEPARTMENT has created the post of public health practitioner for looked after children, which aims to promote the health and development of looked after children. The post holder works in partnership with the child, carers, professionals and others to ensure that children are offered appropriate health care, that their records are up to date and that carers receive specialised training.

BOLTON METROPOLITAN COUNCIL AND BOLTON PRIMARY CARE TRUST have worked together to produce a health promotion agenda for looked after children and young people, which aims to improve their physical and psychological health. The agenda includes the creation of specialist posts with specific objectives, for example to improve the take up of immunisations, to ensure that all looked after children are registered with both a dentist and a GP, to address issues that particularly concern young people, and to provide training for foster carers and others.

The four primary care trusts of BRADFORD DISTRICT have worked in partnership with each other and Bradford Social Services, Bradford Hospitals

NHS Teaching Trust, Airedale NHS Trust and Bradford District Care Trust to plan and deliver a sustainable and holistic statutory health assessment service for Looked After Children and Young People.

The service delivery model was developed as a direct result of consultation and involvement of looked after young people who advised they wanted 'someone to trust', which meant a district wide approach was essential to meet the needs of these children and young people. The underpinning ethos of the model is assertive outreach and promoting health and well being underpinned by the provision of a flexible statutory health assessment service.

CHESHIRE SOCIAL SERVICES DEPARTMENT runs a sexual health peer education programme which aims to help foster carers talk to young people about sexual health. The scheme uses 2 trainers to train a dozen carers to become mentors, who in turn provide both formal training sessions and support for other Cheshire carers around sexual health.

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Counselling and therapeutic help

Key findings

Foster carers, social workers and others often provide very valuable informal 'on the spot' support to children by listening and talking to them. This can also help them to engage with formal counselling.

As Farmer and her colleagues [36] point out , counselling for young people can be important. When Sellick and Connolly [32] evaluated one independent fostering provider they stated that:

"Children were provided with regular therapy sessions, had their educational needs championed by an educational liaison officer and could meet their family and friends in a well-equipped contact centre."

What we know from research

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"Children were provided with regular therapy sessions, had their educational needs championed by an educational liaison officer and could meet their family and friends in a well-equipped contact centre."

Findings from the SCIE Knowledge Review 4 [1] suggest that substantial developments have taken place: children and young people are receiving additional educational support, counselling and psychotherapy, and their carers are also receiving specialist help. Foster carers themselves are happier when the children and young people they are looking after receive these services.

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Looked after children should be granted the same permissions to take part in acceptable age appropriate peer activities as would reasonably be granted by the parents of their peers. However, where exceptional circumstances mean that this is not possible, the decision should be based on clear reasons and stated in the child's care plan, and where practical the child's views and feelings should be taken into account.

Local Authorities are now expected to review their policies and practices in accordance with this new guidance, and to ensure that carers, staff, children and young people are aware of the situation.

Ideas from practice

OUTLOOK FOSTERING is an independent fostering provider which promotes child psychotherapy to:

- promote the child's view of their world and experience

- provide information on children's emotional development, behaviour and relationships from birth to adulthood

- promote public and professional understanding of child psychotherapy and access to child psychotherapy services

More information on their approach can be found at:
Link: www.childpsychotherapytrust.org.uk.

HAMPSHIRE has appointed a lead officer who is responsible for the education of children in public care, a dedicated staff group of teachers and a community therapist for looked after children

JIGSAW, an independent fostering provider, has identified the need to provide individual therapy to the children placed with their carers, as well as offering support to foster carers and teachers. It employs qualified staff providing play therapy, day respite care and classroom support

Another independent fostering provider, WOODSIDE, commissions a comprehensive therapeutic assessment from an independent provider, with the agreement of the placing local authority. This is followed by therapy and educational services

WEST SUSSEX has recruited two child psychologists to provide therapy and advice to foster carers with children in permanent placement and this has proved an invaluable support to those caring for children with very challenging behaviour and profound attachment problems. Their 2003 Accommodation Strategy sets out how they will provide additional support and therapeutic assistance to foster carers and children.

ROYAL LIVERPOOL CHILDREN'S TRUST, Alder Hey, in partnership with Liverpool Social Services and the National Teaching and Advisory Service, provide a child and adolescents mental health services fostering innovation. The ROSTA PROJECT is a therapeutic fostering service "with intensive, multi-disciplinary wraparound support for young people with complex needs." Evaluation found that it has been successful in significantly increasing

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placement stability and has achieved real success in reintegrating young people to education and in increasing their attainment

CHESHIRE has an Education Support and Development Team whose aim is to improve educational achievement and opportunity. It consists of an educational psychologist and three teachers who provide direct support and advice to children and foster carers

SOUTHWARK has a Care Link Team of mental health workers providing assessment and therapy and also good links with a local psychiatric teaching hospital. It established a project to deal with non-school attendance, which Southwark found to be a factor of placement breakdown.

School and education

Key findings

Foster children want the same things in life as nearly all children: success at school, a good job, a happy family and children. School and education are very important to them as a first step to achieving these ambitions.

School is much more than an opportunity to gain qualifications. It contributes towards having a structure and a sense of purpose, maintaining contact with friends and previous routines and keeping in contact with those who share their cultural and minority ethnic background. It is a place to make friends and to enjoy new activities and social events and to get in with the 'right' or the 'wrong' crowd. Being happy at school produces better behaviour and adjustment, helps to prevent placement breakdown and may improve life chances.

Children may experience discrimination and stigma for 'being different'. They may have a change of curriculum, have to get to know new teachers and friends and could be missing their old ones. They have to work harder to catch up and may lose motivation.

Nearly all children who need foster care will have some school problems. To help with this, they need stable placements with carers who value and support education. Also more 'joined up thinking' and planning between local education and social services for looked after children will help ensure effectiveness.

Foster carers do not always provide the necessary support and link between home and school: about half of the carers in a teenage fostering study were not involved with the school and were waiting for the school to contact them.

Research has emphasised that placement stability, as well as having a family member or carer who values education, is key to doing well at school [37-39].

Children need help and support when they leave school and go to work or to college.

Factors that may help a child at school:

- encouragement and support from carers
- other children modelling success
- availability of other supports
- help from an educational psychologist.

Practice points

- Remember that foster children will do better at school if they are in stable placements, because this promotes continuity of education. So refer to the relevant practice points in the placement stability section of the guide.

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- Remember that school is integral to the care that the child needs and if the placement is to succeed overall. So ask yourself, the school, the child and the foster carers what you can do together to ensure that the child is happy, and not bullied at school.
- Do not assume that foster carers will make the necessary links with school. Make the links yourself.
- If you offer opportunities for children to take part in enjoyable school activities, this can greatly enhance their self-esteem and resilience. So think about ways that you can work with the school to make these activities accessible for foster children.
  See SCIE Resource guide 4: Promoting resilience in fostered children and young people
- Be proactive. Ask yourself how you can arrange for the young person to be offered work experience, training and other similar opportunities, if they are not going to college.
- Ask yourself how you can find ways of helping young people who have been fostered, into worthwhile jobs, and supporting them when they first begin work.
- Collect data about the achievements of children and young people who are looked after so that trends can be monitored and evaluated; this will help to facilitate the development of good practice.

What we know from research

School is important in several ways. Academic and vocational qualifications, although gained by a small minority of looked after children, are a route to further education, which offers an improved chance of economic and social success. But school is much more than this. Enjoying school and experiencing it as worthwhile is a key feature of children's resilience [2], [40], [41].

See SCIE Resource guide 4: Promoting resilience in fostered children and young people

School gives a structure and a sense of purpose and continuity to foster children's lives and may enable them to maintain contact with friends and previous routines. It may also be a way of keeping in contact with those who share the child's cultural and minority ethnic background, especially if their placement does not reflect it. It is a place to make friends and to enjoy new activities, to join in with social events and to get in with the 'right' or the 'wrong' crowd.

Foster children are no different from other children in wanting successful futures for themselves: success at school, a good job, a happy family and children. School and education are very important to them as a first step to achieving these ambitions (3).

Current educational achievement of looked after children
Children in care have a consistently lower level of academic achievement

than other children. They are much less likely than other children to obtain GCSE's and A levels, or to go on to further education [42].

Data about looked after children's educational achievement is now collected on a national basis and this means that it will be possible to chart trends over time.

Reasons why looked after children do not achieve potential at school.
Studies of children in care, over time, suggest that their educational problems begin before they become looked after, but not nearly enough is done while they are in care to address them [43-45]. This is why raising their level of achievement is a key government policy.

Helping looked-after children achieve at school
Children themselves are very aware that their schooling difficulties began before they entered care and they do not attribute their poor school performance to being in care [3].

Placement stability and having a parent or carer who values education is extremely important [46]. Also more 'joined up thinking' and planning between local education and social services for looked after children is needed: recent findings from Wales indicate that there is often a lack of collaboration between education and social services [47], [48].

Being unhappy at school
Being unhappy at school has a number of underlying causes. Research indicates that whilst some of these relate to disturbed attachment behaviour and feeling anxious about relationships, some causes of difficulty at school may be less deep rooted and therefore more amenable to positive change [3].

Problems children experience at school
Foster children experience discrimination and stigma, with others seeing them as 'different'. They might have a change of curriculum and have to get to know new teachers and friends while missing their old ones. Additionally, they might have to work harder to catch up and could potentially lose motivation [37]. Their name will be different from their carer's and the carer's own children and they might have to explain to others why they are no longer living with their family.

Research has found that [3] between one third and a half of children changed school when they moved from home to foster care. If they stay at the same school it may be possible for them to keep in touch with old friends and teachers. But they may have to travel further to school and use special transport to get there, which marks them out as different [3].

Additionally, high numbers of teenagers in foster care had been excluded from school, needed intensive support, had attendance problems, or had learning difficulties [3].

Sadly, foster carers do not always provide the necessary support and link between home and school: about half of the carers in the teenage fostering study were not involved with the school and were waiting for the school to contact them [3].

Often information about school and education was not recorded on case files [3].

Helping looked-after children at school
Research has shown that the main factors are:

- encouragement and support from carers [46]

- children having 'models' of children who work hard and achieve success [46]

- additional support from school or in the community, such as access to a library and information about rights [46] including help from an educational psychologist [17] where needed

- schemes which have dedicated teachers working with children to help them return to school [49] (evidence from residential care).

Further study and work experience
For a small minority of fostered children, going to university was the next step after school. Local authorities often support care leavers at university, but research shows that alternative methods are needed to help young people find worthwhile jobs. Going to college is not suitable for many young people and project workers in a specialist scheme lament the lack of good work experience placements [3] available.

Law and standards

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Compliance with Statute and Regulations is mandatory – compliance with Standards is taken into account by the CSCI when registering and inspecting fostering service providers.

Fostering Service Regulations 2002 Regulation 16

The fostering service provider shall promote the educational attainment of children placed with foster parents.

In particular the fostering service provider shall –

- establish a procedure for monitoring the educational attainment, progress and school attendance of children placed with foster parents

- promote the regular school attendance and participation in school activities of school aged children placed with foster parents

- provide foster parents with such information and assistance, including equipment, as may be necessary to meet the educational needs of children placed with them.

The fostering service provider shall ensure that any education it provides for any child placed with foster parents who is of compulsory school age but not

attending school is efficient and suitable to the child's age, ability, aptitude, and any special educational needs he may have.

The fostering service provider shall ensure that foster parents promote the leisure interests of children placed with them.

Where any child placed with foster parents has attained the age where he is no longer required to receive compulsory full-time education, the fostering service provider shall assist with the making of, and give effect to, the arrangements made for his education, training and employment.

National Minimum Fostering Standard 13
The Fostering Service Provider shall give a high priority to meeting the educational needs of each child or young person in foster care provider shall assist with the making of, and give effect to, the arrangements made for his education, training and employment.

Compliance with Statute and Regulations is mandatory; compliance with Standards is taken into account by the Council for Social Care Inspection when registering and inspecting fostering service providers.

Child's absence from foster parent's home Fostering Service Regulations 2002 Regulation 13 [3]

The fostering service provider shall prepare and implement a written procedure to be followed if a child is absent from a foster parent's home without permission.

Overnight stays/school trips **for children in foster care Looked After Children [2004] 4**

Statutory guidance on making decisions about overnight stays for looked after children was issued by the government in February 2004.

There is no statutory duty for Criminal Records Bureau checks to be carried out on adults with whom looked after children might stay overnight, for example, a sleepover with school friends, or on school trips.

Responsibility for decisions on overnight stays should be delegated to foster carers with details included in the Placement Agreement as stated in Schedule 6 of the Fostering Services Regulations.

Ideas from practice

The Who Cares Trust has recently launched CAREZONE, a secure online service for children in public care which provides each child with online educational support on www.thelearninglibrary.org.

Link: www.thelearninglibrary.org

SHEFFIELD CITY COUNCIL has a Looked After Children Educational Support Team with the overall aim of raising the educational attainment and outcomes for looked after children. For example, it works to ensure that education for all looked after children is prioritised and that they all have a

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personal education plan. The team works closely with a council-wide group to recognise and celebrate the achievements of Sheffield's looked after children.

DENBIGHSHIRE SOCIAL SERVICES DEPARTMENT has created the post of education liaison officer for looked after children, which aims to improve communication and understanding between all those involved in the education of looked after children, to offer teachers and carers specialised training and to ensure that individual children are offered the support they need, for example in developing and implementing personal education plans.

ENFIELD COUNCIL has a Health & Education Access Resource Team for looked after children made up of teachers, educational psychologists, educational welfare officers and child and adolescent mental health service staff. The team works in a multi-disciplinary way across boundaries to ensure that the education of all looked after children is promoted

HAMPSHIRE has appointed a lead officer responsible for the education of looked after children and a dedicated staff group of teachers and a community therapist for them.

CHESHIRE has a support and development team to promote the education of looked after children, which has produced an information booklet for foster carers about their education.

Contact

Key findings

DIRECT CONTACT means meetings between the child/young person and birth family members and/or significant others, and includes phone calls, texting and emails.

INDIRECT CONTACT means letters and cards from members of the birth family and /or significant others, usually through a third person.

Contact is a key issue for children and they often have ambivalent feelings, both wanting it but feeling distressed at the same time. They often desire more contact with fathers and other family members, such as grandmothers and siblings, as well as with mothers, even if they are happy in their placement and do not want to return home.

Parents also have these ambivalent feelings. Many desperately miss their children, want to have contact and find the experience distressing.

The amount of contact between looked after children and their birth families is increasing.

Developments such as increased placement stability, open communication and improved relationships are often the result of additional interventions, not just contact between birth families and their children alone. However, contact may achieve specific and perhaps more limited and realistic goals, such as reassuring children about what is happening at home.

Current practice assumes a strong principle, supported by legislation, that contact is generally beneficial and should be promoted, unless it is not in the child's best interests. Decisions need to be made on the different aspects of contact, for example contact with family members. Contact must always be 'fine tuned', assessing and taking into account any risks.

If the child has been abused, contact can allow abuse to continue if there is unsupervised direct contact or ineffective scrutiny of letters and cards**.**

Foster carers are generally positive about contact but some report problems associated with it. In some cases these are serious.

Practice points

- Ask yourself if you have explored all opportunities for contact, either direct or indirect. Remember that children in foster care have a legal right to contact with their birth family and most children want to keep in contact, although they find it distressing at times. Also, remember that contact often helps children's feelings of identity: being valued, respected and appreciated.
- Ask yourself if you have 'fine tuned' contact and consulted with the child about all the different aspects of contact, for example, with

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different family members. Remember not to treat it as a 'blanket' event and ask yourself if you have considered all the alternatives to direct contact when this is not possible.

- Remember to ask children about the contact they want to have with their brothers and sisters and other relatives, for example grandparents. You can also consider previous carers. Try and make contact arrangements because this can be very important to them.
- Remember that children who have been abused by their family members should be protected from risks posed by contact and that their rights to contact can be overruled in the need to keep them safe. Ask yourself if you and their carers have talked with them about how safe they feel and remember to look out for non-verbal signs that may indicate that the child does not feel safe.
- Remember that children who have been abused should not have unsupervised contact with family members who are involved in, or associated with the abuse. Ask yourself if you should scrutinise letters and cards. There must be a formal decision about every risk.
- Remember that most parents also want to have contact, although they may find it distressing, so make sure you talk with parents about how contact could be made less stressful.
- Research shows that contact by itself does not result in improved outcomes, for example, settled placements and reunification and you should consider additional interventions to achieve these goals.
- Think about the aims of contact between children and their families and whether they are being achieved. The value of contact may be as much to do with reducing distress, helping keep in touch and to feel valued and respected, as to achieving other outcomes. What can you do to support parents with managing contact?
- Foster carers' needs are also important when making arrangements, so things needs to be discussed in advance to tackle any problems.

What we know from research

Types of contact

Contact can be through meetings, phone calls or letters with specific members of the family. Meetings can be unsupervised or supervised by social workers, foster carers, other professionals and sometimes other family members of friends.

Contact can take place in a variety of venues. Meetings can take place at different dates and times, regularly or every now and then. However, making arrangements that please everybody and are in the best interests of the child can sometimes be complex and difficult.

Children's opinions on contact

Contact is a key issue for children. They often spend a lot of time thinking about their relationship with their family and are often distressed by the thought of contact. Many children think about their families every day [2].

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When children in another study were asked to think of their two most important wishes for their future, a quarter prioritised seeing more of, or being reunited with, their birth family [3].

Children often want more contact with fathers and other family members, such as grandmothers and siblings, as well as mothers, even if they are happy in their placement and do not want to return home. Some want contact with particular family members, and not with others [17], while other children prefer indirect to direct contact.

Decisions need to be made around the different aspects of contact. You will need to consider the child's wishes and feelings on the variety of contact options, such as indirect and direct contact as well as contact with different family members. Contact must always be 'fine tuned', assessing and taking into account any risks. [17]

Many looked after children - between 40- 50 per cent - have contact with a family member at least weekly and only a minority, between one in six or seven children, do not have any contact with a member of their birth family [3].

Birth parent views on contact

Parents often have mixed feelings about having their children in care and this can affect the way they feel about contact arrangements. Feelings can range from relief, shame, and concern that they have 'failed', or can be mixture of all of these. Most parents desperately miss their child, want to have contact, and may often find the experience very distressing [2].

Parents often have difficulty in asking for help when their child returns home because of the associated stigma and the possible risk of losing their child again. When their child is accommodated at their request or as result of the child's difficult behaviour they often welcome it, but they often resent compulsory intervention [3].

Contact and re-abuse

Direct, and even sometimes indirect, contact can allow abuse to continue. One study found that in situations where the child had been abused, and there was unsupervised contact with all family members, placement breakdown was three times more likely to occur, as well as re-abuse [17].

The relationship between contact and improved outcomes

Research [3] argues that contact between birth families and children does not, on its own, facilitate reunification or improve relationships. Additional interventions are also needed. Contact can, however, achieve specific and perhaps more limited and realistic goals, such as reassuring children about what is happening at home.

Other research knowledge [2] on the relationship between outcomes and contact is summarised by a series of linked reviews of studies about contact in fostering and adoption, mainly in the UK [50-53]. When researchers reviewed the studies they did not find a clear relationship between contact and improved outcomes in areas such as placement stability and improvements in the child's mental health. They did not always find that different factors had

been considered in the research and queried whether imprecise definitions of contact and weak measures of outcomes had been used. They noted a failure to effectively consider the quality, purpose and setting of the contact and to use small self-selected samples.

Whilst a certain level of contact is needed if reunification is to be achieved, it is now uncertain whether contact as a factor by itself results in the improved outcomes previously thought to be associated with it.

Good outcomes, such as reduced placement breakdown, improved mental health in children and returning home, may be more a result of factors that preceded placement. Children who have direct contact with birth parents usually already have a good attachment to them, which precedes their placement and because of this they may be better adjusted, more likely to experience a stable placement and more likely to go home to their parents [54]. More research is urgently needed in this area.

Current practice assumes a strong underlying principle, supported by legislation, that contact is generally beneficial and should be promoted as long as it is in the child's best interests and does not increase risk [55]. However in some situations there may often be dilemmas and concerns about contact.

Views of foster carers

Foster carers, whilst generally positive about contact, report some serious problems associated with it. These include drinking, serious mental health problems and violence from members of the birth family. They also express concern about more common problems such as unreliability and have worries about the impact of contact on the behaviour of the foster child, as well as their own children [3].

Law and standards

The Law and Standards sections apply to England only.

A brief indication of how the law will change upon full implementation (September 2004 and September 2005) of the Adoption and Children Act 2002 is inserted in italics.

Compliance with Statute and Regulations is mandatory; compliance with Standards is taken into account by the Council for Social Care Inspection, when registering and inspecting fostering service providers.

The Children Act 1989 (CA 1989) and case law, [decisions of the higher courts] identify contact as a right of the child – birth parents, relatives and others do not have a 'right' to contact, although local authorities have legal duties to provide and promote contact, as set out below, unless it is not in the best interests of the child.

Fostering Services Regulations 2002 [FSR 2002] Regulation 14.
'The fostering service provider shall, subject to the provisions of the foster placement agreement and any court order relating to contact, promote contact between a child placed with a foster parent and his parents, relatives and

friends unless such contact is not reasonably practicable or consistent with the child's welfare.'

National Minimum Fostering Standard 10 'The fostering service makes sure each child or young person in foster care is encouraged to maintain and develop family contacts and friendships as set out in his/her care plan and /or foster placement agreement'

Children Act 1989

Contact for 'looked-after' children [including those not subject to care orders or interim care orders] Schedule 2 paragraph 15 CA 1989:

'Where a child is being looked after by a local authority, the authority shall, unless it is not reasonably practical or consistent with his welfare, endeavour to promote contact between the child and:

- His parents
- Any person who is not a parent but who has parental responsibility for him
- Any relative, friend or other person connected with him.

Contact for Children 'in Care' [subject to care orders or interim care orders] Children Act 1989 section 34
Where a child is in the care of a local authority, the authority shall allow the child reasonable contact with:

His parents [with and without parental responsibility] and any legal guardian, the previous holder of a Residence Order, and any person who had care of the child by virtue of a High Court Order.

Reasonable contactfor children 'in care' includes direct contact between the child and those listed above, but the local authority can decide the frequency and venue of contact, and whether it is supervised or not.

If it is not possible to reach agreement about what is 'reasonable' contact, the local authority or child can apply for a contact order under **Children Act 1989** Section 34 [2] **or section 34 [4]** - **[see refusal of contact below]** or the parents and others listed above, or any person with the leave of court, can apply for an order for contact which is to be allowed **by the local authority** Section 34 [3] Children Act 1989.

Departure from the terms of a Contact Order under section 34.

Contact Regulations 1991 Regulation 3
A local authority can depart from the terms of a contact order if the person named in the order agrees and, where the child is of sufficient understanding, s/he also agrees. Written confirmation must be sent within 7 days.

Permission to refuse contact - CA 1989 Section 34 [4].
The local authority may not refuse contact to a child 'in care' completely, unless an order for permission to do so is granted by the court, on application by the local authority or the child.

Emergency refusal of contact for 7 days maximum CA 1989 Section 34 [6]. A local authority may refuse contact to a child 'in care' for a maximum of 7 days, without a section 34 [4] order if it is necessary to do so to safeguard or promote a child's welfare.

Section 34 Contact Order on Court's own initiative.
The court may make an order under section 34 of its own initiative in proceedings concerning a child in care. Children Act 1989 Section 34 [5]

Contact and children 'freed for adoption'. Adoption Act 1976 section 18 and Children Act 1989 section 8.
There is no legal duty to promote contact between a child freed for adoption and his/her family, unless a section 8 Children Act 1989 Contact Order has been granted. [This is very rare.]

The Adoption and Children Act 2002, when fully implemented, in September 2005 will change the law in relation to contact for some children foster care. When placement for adoption has been authorised for that child, the legal duty to promote contact under section 34 CA 1989 will not apply.

When a child's current foster carers become his/her prospective adopters [by the making of a placement order or section 19 parental consent] the law in relation to contact will governed by section 26 of ACA 2002- contact decisions will be made by courts in the context that an adoption care plan for the child has been endorsed by the court or by parental consent.

Ideas from practice

DENBIGHSHIRE SOCIAL SERVICES DEPARTMENT has appointed designated staff to support contact arrangements. A support co-ordinator organises support workers, while a contact officer supervises contact and finds venues. A family support worker is also used to supervise complex contact arrangements for children and to advise foster carers about contact. Several agencies use similar ideas.

This PDF document was created in December 2005, and will not reflect any changes made to SCIE Guide 7: Fostering since that date.

Please visit our website for the latest version: http://www.scie.org.uk/fostering/

Temporary foster care

Key findings

Temporary foster care is the most commonly used category of foster care.

Temporary placements are less likely to break down than long term or permanent placements, probably because the period at risk is less.

About 80 per cent of admissions into temporary foster care are with parental agreement.

Many parents see temporary foster care as helpful; children and young people are unlikely to want to be in foster care although they will often accept it if their situation improves as a result.

Children in temporary foster care spend on average a year there.

Social work methods that may help prevent or shorten children's periods in care are:

- purposeful and committed social work
- using a multi- agency approach
- using written agreements
- ensuring that contact between parents, child and foster carers takes place.

The effectiveness of therapeutic interventions alone is unclear in preventing or shortening the time spent in care is unclear.

Practice points

- Remember that you may not be able to prevent a child's temporary placement in care and that parents often find it helpful and children may accept it.
- Remember that the circumstances surrounding the way children enter care makes all the difference so ask yourself how you can prepare them and their family for both coming into foster care and moving to a new placement.
- Remember that when you are working to prevent a child being accommodated it is very easy to overlook planning for the likelihood that this may happen. Ask yourself if you have considered this realistically and made plans for it.
- Remember to do all that you can to avoid emergency placements and ask yourself if you have made time to talk to children, to discuss the options with them and to listen to their views.
- Remember that it also helps if the child has a positive time at school and can maintain contact with friends.

- Remember that when you are working to prevent a child coming into foster care or to achieve reunification, four things have been shown to be effective, so ask yourself if you have offered the following:
  - purposeful and committed social work
  - a multi- agency approach
  - the use of written agreements
  - ensuring that contact takes place

What we know from research

Temporary care may be used in an emergency and also while the needs of the child are being assessed. More children are placed in temporary foster care than any other type of foster care.

Why temporary foster care?

Temporary foster care is used for a number of different purposes, and different agencies use different terms to describe it. It can be used in an emergency, for assessment, when a young person is on remand, or as a temporary home when no one else can provide care. It may provide a chance to calm an inflamed situation, to support parents who are at the end of their tether or in a crisis and to enable a risky situation to be assessed and managed. It can also be used to facilitate panning for the future.

Shared care, which is a series of short break placements with the same foster carers, offers a series of short planned breaks often, but not only to, disabled children and their families. Some schemes support parents and teenagers. The overall aim is to keep the family together in the long- term; foster carers sometimes care for the parent and child together and can offer support when the child returns home.

Placement stability

Temporary placements are less likely than permanent placements to break down, probably because the period at risk is less [56].

Parents' views

About 80 per cent of admissions into temporary foster care are made with the parents' agreement, when children and young people are 'accommodated' on a voluntary basis. Research shows that parents are frequently relieved [8], [57], [58] and some parents feel resentful if social workers refuse their request to support them in this way [57].

A study of short break foster care found that parents valued it highly. This scheme also provided good general social work support, which may have been another reason for user satisfaction [59]. Parents do not necessarily see temporary care as a threat to the fundamental bonds of their family, unless court proceedings for a care order are initiated [58].

Not surprisingly parents feel much more negative when their children are compulsorily admitted to care, although this may change in time [57].

Children's views

Children are less likely than their parents to want to be in temporary foster care. Research findings tell us that they may accept the situation and this will depend on their circumstances and whether their situation improves [59]. They do not like sudden moves into care and moving placement without preparation. Like their parents they do not necessarily fear for the fundamental bonds of their family [58].

Ensuring temporary foster care remains 'temporary'

Research shows that parents may welcome temporary care and children can accept it. However, it has recently been found that children placed in so called 'temporary' or 'short term' foster care spent on average a year there [17].

This may be for a number of reasons. Usually the delay is caused by the need to resolve court proceedings or to decide if a permanent placement, rather than reunification, best meets the child's needs. Sometimes the social worker is waiting to match the child to a more suitable placement.

There are now national standards and forthcoming guidance that insists that permanent plans for all children are made after four months, at the time of their second Looked After Child (LAC) review.

How to prevent children becoming 'accommodated' and facilitating reunification

Studies [60-62] suggest that the features likely to create successful reunification are:

- purposeful and committed social work, which includes support to parents and carers, and using a multi-agency approach before, during and after placement
- the use of written agreements between social services, parents and children, as appropriate
- ensuring that contact between parents, child and foster carers takes place.

Research has not shown clear results about the effectiveness of offering therapeutic intervention to prevent or to shorten the time children spend in care. One study examined whether prevention and reunification could be achieved by offering intensive work based on learning, crisis and/or family therapy theories [63]. The inconclusive results may also be because an appropriate intervention was not used, the intervention was not given effectively, or that the nature of the family problems were not solvable in the given time e.g. problems of substance misuse [64], [65].

Law and standards

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Compliance with Statute and Regulations is mandatory; compliance with Standards is taken into account by the Commission for Social Care Inspectorate, when registering and inspecting fostering service providers

National Adoption Standards require that permanency plans for all looked after children [adoption, reunification or other forms of permanency] must be made by four months after becoming looked after at the time of their second looked after children review.

Review of Children's Cases Regulations 1991

Review of Children's Cases [Amendment] [England] Regulations 2004

Guidance to 1991 Regulations: DoH, and Independent Reviewing Officers Guidance DFES -
The Children and Family Court Advisory and Support Service [Reviewed Case Referral] Regulations 2004 SI 2004 2187

From 27th September 2004 , local authorities must appoint Independent Reviewing Officers to review all looked after children. They will have a specific legal duty to 'progress chase' care plans which are at risk of drifting, or not being implemented at all, take a proactive role in resolving problems on behalf of the child, including helping the child access advice to take their own legal action, and as a last resort, may make a referral to The Children and Family Court Advisory and Support Service for legal action to be taken on behalf of the child, to secure or preserve their human rights.

Placement stability

Key findings

Placement breakdown is defined as the placement not lasting as long as planned; placement moves are planned.

Frequent moves can badly affect children.

Breakdowns, or unplanned moves, are much less likely in younger children. In comparison, 'teenage' placements have a 50 per cent chance of breaking down.

Five factors appear to cause frequent placement moves:

- a change of social worker
- over- optimistic expectations
- placement breakdown, particularly for teenagers
- any policy or practice which generally discourages children from remaining fostered after the age of 17
- the child's level of emotional disturbance and motivation to remain in the placement also appears to be a key factor.

It is not fully understood whether placement moves themselves produce poor outcomes for children or whether this is due to children's previous experiences and difficulties.

For individual children, placement stability and having a parent or carer who values education is key to helping them achieve at school.

Although research shows that children crave stability, for an individual child in some circumstances, a move may be best.

Research suggests that if a child is moving it helps if:

- the carer is positive and encourages the child to be positive in practical ways e.g. admiring the child's new bedroom
- the carers tell the new carers about the child's likes and dislikes
- contact is maintained with the previous carers at first, gradually tapering off.

Practice points

Placement moves and foster children

Frequent moves, planned or not, can badly affect children. Although generally its best to avoid moving them, ask children for their views and analyse the 'costs' and 'benefit' of the move.

Remember that wherever possible you should enable children to be involved in decision making. Even if it is not possible to take account of their views on

whether they should be in care, think about all the ways in which you can maximise their participation.

Ensure that children and young people take favourite personal possessions when they leave home and/or change placements.

Think about ways in which your team could lessen the effect of social workers leaving. Mental health services have developed an assertive outreach system using a team approach: all team members get to know the service user well, so if one worker is unavailable they are still able to offer an effective service. Could this or similar approaches be adapted to your service?

Ensure the risks that may be associated with reunification are carefully assessed and work is undertaken to address them. Consider what has changed what still needs to change and ask yourself if the family and child accepts the need for change and can work towards this?

Placement moves and foster carers

Think about ways to help foster carers feel supported when they are facing difficulties. Research indicates that foster carers often feel like giving up altogether during difficult times.

Allow carers to exercise choice. If they are 'persuaded' to take children, this is more likely to lead to break down. It is also important to recruit carers who are flexible in the children they can take.

Consider what you and your team can do to make sure that all social workers working with children and families understand and value the work of foster carers.

What we know from research

Numbers of placement moves
Many fostered children move quite quickly from one foster home to another. One study (66) showed that in the first year, many children move placements at least once, twice or even three times. In this study 'planned move' was given as the reason for not only the first move, but second and third moves as well.

Many children have periods at home interspersed with periods in care, often not in the same placement. This means that, in effect, the child is in long term foster care which results in a great deal of uncertainty and generally poor outcomes [3].

The reasons for placement moves
Research shows that several factors appear to cause placement moves:

> A change of social worker causes disruption to the child and family and seems to be a trigger for a planned or unplanned move [66].

Social workers may be too optimistic that children will be able to return home which may result in children moving from home to foster care and back again.

- Research shows that one third of children entering care will have been in care before. One study [17] looked at 16 year olds in care, who had first entered care at the age of 5 or below: on average they had three periods at home during their childhood. Another study [67] of care leavers indicated that on average this was more likely to be four periods.
- The breakdown of teenage placements is high and is a major cause of placement instability. It is estimated that around half of teenage placements breaks down before the young person reaches 18 [68, 69]. Research shows that placement instability reduces for older teenagers, perhaps because, given their age, placements for older teenagers are not planned to last as long [3].
- Research shows that less than 20 per cent of young people stay with foster carers after they reach the age of 17 [17], [69], although this may now be changing as a result of requirements that require support to be given to young people beyond this age.
- While foster care may be able to provide permanence for foster children in the same way that adoption does, long stays with the same foster carers are unusual and this rarely happens [69].
- Placement disruption is much less likely if the child is aged less than 10 years. It is unusual amongst very young children aged 0-5 and comparatively rare from the age 5-11, even when the placement has been ongoing for some time [3].
- The child's age, emotional disturbance and motivation appear to be key factors in placement breakdown. Gender, ethnicity and disability do not appear by themselves to play a significant role in placement breakdown [3].

What promotes placement stability?
In a recent practice survey local authority fostering staff were clear [70] about what they thought would promote placement stability:

- Restructuring services around specialist looked after children's teams.
- Providing carers' respite and targeted support.
- Providing high quality assessment and planning.
- Better retention of experienced carers.
- Better liaison and more provision between education and child and adolescent mental health services.

Other factors [3] that make success more likely are:

From a carers perspective:

- Having adequate information about the child's needs and long term plans.
- Knowing how long the young person is likely to stay with them.
- Knowing that the young person is the gender they requested.

From a young person's perspective:

- Feeling engaged with their carers and social workers about decision-making.
- Feeling motivated to stay and to make the placement work.
- Feeling that the placement is 'right' for them.

However, placement stability does not always mean the relationship between the child and carer is happy or that the carers are satisfied. Sometimes, especially for younger children who are more likely than teenagers to have stable placements but less able to express their views, this is not the case.

Early indications of placement stability are important: if carers feel that children are 'settled' from the start of a placement they are more likely to remain content.

Risk-taking behaviour in teenagers, such as alcohol and drug misuse, can often be an indication of a deteriorating relationship with carers. A downward spiral may develop where carers exercise less control, leading to an increasing acceptance of the behaviour which can initiate placement breakdown in itself [3].

Impact of placement moves on children
Research shows that generally children crave stability and that disruption may undermine their well-being and feelings of self worth [17], [39]. Nevertheless, a placement move may be in the child's best interests at a certain time. In some cases children may want to be moved and some moves may be necessary for other reasons. Not all moves cause and are caused by serious disruption [71].

Research has not fully explained whether placement moves themselves produce poor outcomes for children, or whether they are the result of children's previous experiences and difficulties. Some research suggests that instability itself leads to poor outcomes [33], [72], [73], and one study [74] found that children who did not demonstrate any behavioural problems before being in care were badly affected by placement moves.

Other researchers [17] have found that it is what happens as a result of the move, rather than the move itself, which has a negative effect. Furthermore, the association between placement moves and poor outcomes disappear if an allowance is made for the child's difficulties before being fostered. At present this remains an area for professional judgement and demonstrates why performance indicators should not be the only criteria for making a decision [16], [75].

Research has emphasised that placement stability, as well as having a family member or carer who values education, is key to the child doing well at school [37-39].

Helping children move to a new placement
Research from children who have moved or are moving to adoptive placements suggest the following makes for a satisfactory and stable move:

- That the carer is positive and encourages the child to be positive in practical ways e.g. admiring the child's new bedroom.

- That the carers tell the new carers about the child's likes and dislikes.

- That contact is maintained with the previous carers at first, gradually tapering off [3].

Children who return home

Children often say there is a lack of support from social workers when they return home [3]. About half the children maintain some contact with their former carers, which they valued but did not always consider very supportive.

Many children and carers thought their placement ended too soon and often did not understand the reason why. Some children returned home when there seemed to be little or no change in the overall situation. For instance parents who had erratically visited their children during their time away from the birth home still had poor attachment with them.

In some cases, both the child and parents wanted the placement back at home, but this was at risk of failing without additional social work intervention. Additionally, many carers and young people felt 'pressured' to move to independence before they were ready.

Children who returned home at any stage were more likely to be re-abused, to do badly at school and to have 'difficult' behaviour. Social workers were much more likely to think that children who were fostered or adopted were safe and that the placement was meeting their needs compared to when they were living in independent accommodation or back at home [3].

Law and standards

The Department of Health introduced performance indicators to measure the placement stability of looked after children. Placement moves are now monitored in order to set targets which aim to reduce moves and promote stability. The reasonable assumption is that frequent moves, planned or not, will adversely affect children in a number of ways, including their ability to make attachments and friendships and to enjoy continuity of education and health care.

Ideas from practice

Southwark 1 has a 'Care Link Team' of mental health workers providing assessment and therapy and also good links with a local psychiatric teaching hospital. It established a project to deal with non-school attendance, which was found to be associated with placement breakdown.

The placement of siblings

Key findings

Placing siblings together is not straightforward and there are many factors to take into account. In practice social workers try to keep siblings together but, for many different reasons, it is not always possible.

For children, contact with siblings is often very important and represents what they value most in family life.

There is insufficient evidence to suggest that placing siblings together always produces better outcomes for children, but overall it does not appear to produce any worse outcomes.

There are complex issues when consideration placing a child apart from their siblings when they have been rejected, neglected or abused at home.

Practice points

Remember that if possible siblings should be placed together, especially if this is what they want, but also ask yourself if you have balanced this with using your professional judgement and 'fine tuning' for individual children's needs.

- If you cannot place siblings together ask what this means for them and do all that you can to facilitate the contact they want.
- Remember there are complex decisions to be made about placing children apart from their siblings when they have been rejected, neglected or abused at home.

What we know from research

For many foster children, the relationship with their brothers and sisters is what they value most about their family and contact is very important [7], [13-15]. One 15 year old said [2]:

'I've got two (siblings) that are adopted and the only time I get to see them is right between Christmas and New Year…. I helped my mum bring my little sister up and my two brothers…I had that bond… and now I get to see them for two hours every year. I don't know what's harder. I mean having somebody there and never seeing them, or somebody being dead… When you know they're still out there it pisses you off so much.'

Placing siblings together in the same foster family is not always straightforward. Brothers and sisters may have various relationships. Some get on well together and want to be together, others do not and there may be jealous tendencies. Children from sibling groups can present a wide range of needs, which some foster families find hard to meet. Furthermore, there is generally a shortage of foster carers able to take sibling groups.

Research does not provide consistent evidence that placing siblings together improves outcomes on average [50], [56], [76-78]. One study [79] found that children placed alone had poorer outcomes than those placed with their siblings, but this could be explained because they had more needs than the siblings who remained at home.

However, another study found successful outcomes in the cases of emotionally close siblings who were placed together [80].

Research has indicated some clear-cut results that suggest that:

- children placed away from their siblings are more likely to have experienced rejection at home, (for example, neglect and abuse)

- children who have siblings remaining at home are more likely to have a disrupted placement than those who do not

- children who have been rejected and placed apart from their siblings are less likely to have stable placements than if they had been placed with them

- relationships between siblings can have both a positive and negative effect on their placements [3].

In practice, social workers try to keep siblings together but it is not always possible. There is also a need to make judgements in individual circumstances, for example one study argues against placing children from sexually abusive families together [77].

Law and standards

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Compliance with Statute and Regulations is mandatory – compliance with Standards is taken into account by the CSCI when registering and inspecting fostering service providers.

Children Act 1989 section [1] [3]
The welfare checklist: a court must take into consideration the age, sex and background of the child

Fostering Services Regulations 2002 Regulation 11 [b] [ii]
Independent fostering agencies shall ensure, before making and decisions affecting a child to be placed with foster parents give due consideration to his religious persuasion, racial origin and linguistic background.

National Minimum Fostering Standard 7
The fostering service ensures that children and young people and their families, are provided with foster care services which value diversity and promote equality.

Adoption and Children Act 2002 –section [1] -Welfare check list for adoption and placement order proceedings.

Section 1 [4] [d] – The court and adoption agency must have regard to the child's age, sex background and any of the child's characteristics which the court or agency considers relevant.

Section 1 [5] In placing a child for adoption, the adoption agency must give due consideration to the child's religious persuasion, racial origin and linguistic background.

Ideas from practice

DERBY CITY, DERBYSHIRE, LEICESTER CITY, LEICESTERSHIRE, LINCOLNSHIRE, NOTTINGHAM CITY and NOTTINGHAMSHIRE 1 commissioned Barnardo's to assist them in recruiting foster carers in that region. They have also worked together to construct service level agreements with a small number of independent fostering agencies involving agreed inspection and accreditation arrangements to increase placement choice, quality and value for money.

SOUTHAMPTON 1 CITY COUNCIL'S HEALTH AND SOCIAL CARE DIRECTORATE commissioned tenders from independent fostering agencies for ten foster placements. They found that the previous spot purchasing arrangements were expensive, uncoordinated and lacking in any quality assurance mechanisms.

SEDGEMOOR independent fostering provider was selected following an extensive process of scrutiny of policy and procedures, and interview. This process was driven by considerations of quality, cost and partnership working. Joint staff groups manage and deliver the service and local authority staff have been seconded to the agency.

CHRYSALIS CARE 1, an independent fostering agency, has entered into an agreement with one London Borough and is negotiating with another to recruit independent fostering agency foster carers in those authorities, which will then be available to offer local placements. This initiative was developed to avoid London children from the two local authorities being placed long distances from home.

WALTHAM FOREST and WESTMINSTER 1 are among those authorities which have negotiated the pricing, and procurement, of placements outside the local authority provision.

The Community Placement Scheme 1 is a specialist fostering project for teenagers in Belfast. It was established in 1997 as a joint initiative between SOUTH and EAST BELFAST Health and Social Services Trust and Barnardo's. It offers an alternative to residential care for young people displaying seriously challenging or offending behaviour. It offers intensive support to its foster carers, and its social work staff set out to "try to make things work and grease the wheels". The scheme sees carers as partners in this process and treats them with respect.

Creating placement choice

Key findings

Partnership working and joint commissioning is a developing area and many independent fostering providers and local authorities are developing specialist schemes, partnership arrangements and service agreements within their own agency and with others to increase the number and suitability of available placements.

Local authorities and independent fostering agencies and in some places voluntary child care organisations, are replacing 'spot purchasing' of placements with service level and partnership agreements.

Children and young people placed in these schemes include those with particularly challenging and difficult needs.

Practice points

Ask yourself if you and your service can do more to identify the needs of looked after children locally and to predict their future needs.

Consider how to create new partnerships, service level agreements and other working arrangements with other agencies nearby to meet the current and future needs of fostered children in your region.

What we know from research

Partnership working and joint commissioning is a developing area. Many independent fostering providers and local authorities are developing specialist schemes, partnership arrangements and service agreements within their own agencies and with others to increase the number and suitability of available placements.

Local authorities, independent fostering agencies and voluntary childcare organisations, are replacing spot purchasing of placements with service level and partnership agreements. Some are extensive, involving large numbers of agencies where costs, services and standards are agreed and monitored.

Children and young people placed in these schemes include those with particularly challenging and difficult needs, such as young offenders, those with learning or physical disabilities, those in sibling groups or those who require long term foster carers [1].

Law and standards

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Compliance with Statute and Regulations is mandatory – compliance with Standards is taken into account by the CSCI when registering and inspecting fostering service providers.

The foster care services of local authority and independent fostering providers operate within the same legal framework provided by:

- The Children Act 1989
- The Fostering Services Regulations 2002
- The Arrangements for Placement of Children [General] Regulations1991 as amended
- The Children Act [Miscellaneous Amendments] [England] Regulations 2002]
- The Review of Children's Cases Regulations 1991
- The Review of Children's Cases [Amendment] [England] Regulations 2004

All fostering services are registered and inspected by the Commission for Social Care Inspection, in the context of compliance with Regulations and the Fostering Services National Minimum Standards.

Where children are in foster care provided by independent fostering providers, the relevant local authority [the 'responsible authority'] remains legally responsible for them and they remain 'looked after'.

National Minimum Fostering Standard 8

Fostering service providers ensure that they offer carers only if they represent appropriate matches for a child for whom a local authority is seeking a carer

Delegation of fostering duties by local authorities to independent service providers:

PARTNERSHIP ARRANGEMENTS

Regulation 40 [4] Fostering Service Regulations 2002
Independent service providers can undertake fostering duties on behalf of partner local authorities as detailed in a written agreement - Regulation 40 [4] -which sets out:

which of its duties the local authority proposes to delegate in accordance with this regulation; [Most independent service providers do not wish to have the supervision *of the child* in placement under Regulation 35 ,delegated to them by the LA]

- the services to be provided to the local authority by the registered person;
- the arrangements for the selection by the local authority of particular foster parents from those approved by the independent service providers
- a requirement for the registered person to submit reports to the local authority on any placement as may be required by the authority
- the arrangements for the termination of the placement

Particular child placements with independent service providers ['spot purchases']

Regulation 40 [5]

Where a local authority proposes to make an arrangement with an independent service provider in respect of a particular child the local authority shall enter into an agreement with the registered person in respect of that child which sets out:

- details of the particular foster parent with whom the child is to be placed
- details of any services the child is to receive
- the terms (including as to payment) of the proposed foster placement agreement
- the arrangements for record keeping about the child, and for the return of records at end of the placement
- a requirement for the registered person to notify the local authority immediately in the event of any concerns about the placement
- whether and on what basis other children may be placed with the foster parent.

Ideas from practice

DERBY CITY, DERBYSHIRE, LEICESTER CITY, LEICESTERSHIRE, LINCOLNSHIRE, NOTTINGHAM CITY and NOTTINGHAMSHIRE 1 commissioned Barnardo's to assist them in recruiting foster carers in that region. They have also worked together to construct service level agreements with a small number of independent fostering agencies involving agreed inspection and accreditation arrangements to increase placement choice, quality and value for money.

SOUTHAMPTON 1 CITY COUNCIL'S HEALTH AND SOCIAL CARE DIRECTORATE commissioned tenders from independent fostering agencies for ten foster placements. They found that the previous spot purchasing arrangements were expensive, uncoordinated and lacking in any quality assurance mechanisms. SEDGEMOOR independent fostering provider was selected following an extensive process of scrutiny of policy and procedures, and interview. This process was driven by considerations of quality, cost and partnership working. Joint staff groups manage and deliver the service and local authority staff have been seconded to the agency.

CHRYSALIS CARE 1, an independent fostering agency, has entered into an agreement with one London Borough and is negotiating with another to recruit independent fostering agency foster carers in those authorities, which will then be available to offer local placements. This initiative was developed to avoid London children from the two local authorities being placed long distances from home.

WALTHAM FOREST and WESTMINSTER 1 are among those authorities which have negotiated the pricing, and procurement, of placements outside the local authority provision.

The Community Placement Scheme 1 is a specialist fostering project for teenagers in Belfast. It was established in 1997 as a joint initiative between SOUTH and EAST BELFAST Health and Social Services Trust and Barnardo's. It offers an alternative to residential care for young people displaying seriously challenging or offending behaviour. It offers intensive support to its foster carers, and its social work staff set out to "try to make things work and grease the wheels". The scheme sees carers as partners in this process and treats them with respect.

Profile of foster carers

Key findings

Who are the carers?

In most studies the majority of foster carers are married couples who have school age children, but there are considerable variations between and within agencies. Campaigns which target certain groups, such as minority ethnic carers, can be very successful.

Successful foster parenting includes:

- A parenting style which combines boundaries with warmth.
- An expectation that the relationship with the child will survive.
- An emphasis on the relationship and on flexible problem solving within it.
- Facilitating contact with birth parents and avoiding criticism.
- Flexibility and not being easily upset.
- Encouragement about education and school.

What young people want

Young people want carers to listen, to be caring, and to encourage them. They resent harsh discipline, so foster carers must draw a fine line between this and providing them with boundaries.

Practice points

Research shows that children want carers to listen, spend time with them and to offer encouragement. Ask yourself if this is true for the children you work with?

Ask yourself whether the foster carers in your service do the main things that children want and if they are able to combine setting boundaries with warmth and being encouraging. Think about ways in which you and your team can recruit, train and support carers to develop these positive parenting characteristics.

Ask yourself how you can facilitate discussion and training for carers, to which children can input, about setting boundaries and discipline.

What we know from research

Who are the foster carers?

Most foster carers are married couples and most have school age children. There are fewer single carers, working mothers and families with children under five years old. This is true for carers working for local authorities and independent fostering providers and does not appear to have changed much over the years [81-84].

In a national study of independent fostering providers in 2002 [85], the great majority of the total number of 1819 carers surveyed were couples (1416), and most of these were married couples (1268). Comparatively few were single carers (403), and unmarried couples (134), and very few were same sex couples [13].

The majority of carers in this survey were white. There are, however, considerable variations between and within agencies. In one study half the carers were single 86 and in another current research study [82], the proportion of carers in different agencies from an ethnic minority background varied between 0-75 percent. The success of schemes targeted at certain groups, for example black and minority ethnic carers [87], means that recruitment campaigns which target certain carers can be successful.

Successful foster parenting
A central characteristic of successful parenting is providing guidance and control without appearing to be rejecting and undermining self-esteem. Theories suggest that some parenting styles, particularly a style which combines setting boundaries with warmth, work better than others [3].

When children and family and placement social workers were asked to rate carers along a number of dimensions used to measure this parenting style, the carers who scored highly were much less likely to have placement breakdowns.

Research from the specialist fostering schemes suggests that successful carers concentrate on the relationship with the child and on solving problems flexibly within it. They expect their relationship with the young person will survive and they avoid criticism of birth parents and promote contact. Key qualities are the capacity to provide clear limits with empathy and to ensure that the child does not feel rejected [3].

Other research has described the characteristics of successful foster carers in similar ways [17], [27]. Carers need to be:

- clear, firm, and able to combine warmth and understanding with guidance and control
- child orientated
- warm and responsive
- flexible, and not easily upset
- tolerant, able to carry on
- able to handle disturbed 'attachment behaviour'

Link: See 'Attachment' by John Simmonds

The section on education and school shows that in order to achieve and to enable children to have a positive school experience, foster carers must support and encourage the child's schooling [46].

Young people's views about foster carers:

- Young people expect foster carers to listen [7], [9], [12], [13], [20-23], [88].

- Demonstrate that they care and that they enjoy their company (for example, by talking, taking them out and going on holiday [9], [13]).
- Encourage them by having high expectations [9], [13].
- Children hate what they regard as too harsh discipline: so, although foster carers must be able to set boundaries and provide guidance, they need to walk this line carefully [3].

Law and standards

The Law and Standards sections apply to England only.

A brief indication of how the law will change upon full implementation (September 2004 and September 2005) of the Adoption and Children Act 2002 is inserted in italics.

Compliance with Statute and Regulations is mandatory – compliance with Standards is taken into account by the CSCI when registering and inspecting fostering service providers

Fostering Services Regulations 2002
The legal restrictions on people who may become foster carers, are:

1. **Regulation 20 [6]** A fostering service provider may not employ to work [in any management social work or other professional position] for the purposes of the fostering service, a person who is a foster parent approved by the service or a member of the household of such a foster parent.[unless that employee was already employed prior to 1/4/02].

2. It follows that an employee of fostering service providers cannot be approved as a foster carer by the same FSP.

3. **Regulation 27 [5]** Prohibits from approval [with some exceptions] those who have criminal convictions or cautions recorded against them for specified offences - A person cannot be approved as a foster carer if he or any member of his household aged 18 or over:

   a. has been convicted of a specified offence committed at the age of 18 or over; or

   b. has been cautioned by a constable in respect of any such offence which, at the time the caution was given, he admitted.

4. The fostering service provider may regard a person to whom paragraph (5) would, apart from this paragraph apply, as suitable to act or to continue to act, as the case may be, as a foster parent in relation to a particular named child or children if the fostering service provider is satisfied that the welfare of that child or those children requires it, and either:

   a. the person, or a member of his household, is a relative of the child; or

   b. the person is already acting as a foster parent for the child.

   c. In this regulation "specified offence" means:

i. an offence against a child

ii. an offence contrary to section 170 of the Customs and Excise Management Act 1979 in relation to goods prohibited to be imported under section 42 of the Customs Consolidation Act 1876 (prohibitions and restrictions relating to pornography) [where the prohibited goods included indecent photographs of children under the age of 16]

iii. any other offence involving bodily injury to a child or young person, other than an offence of common assault or battery, and

1. the expression "offence against a child" has the meaning given to it by section 26(1) of the Criminal Justice and Court Services Act 2000 [except that it does not include an offence contrary to sections 6, 12 or 13 of the Sexual Offences Act 1956 (sexual intercourse with a girl aged 13 to 16, buggery, or indecency between men)[in a case where the offender was under the age of 20 at the time the offence was committed.

Regulation 27 and Schedule 3 – information about prospective foster carers

The following information must be obtained about a prospective foster carer and other members of his family:

d. His full name, address and date of birth.

e. Details of his health (supported by a medical report), personality, marital status and details of his current and any previous marriage or similar relationship.

f. Particulars of any other adult members of his household.

g. Particulars of the children in his family, whether or not members of his household, and any other children in his household.

h. Particulars of his accommodation.

i. His religious persuasion, and his capacity to care for a child from any particular religious persuasion.

j. His racial origin, his cultural and linguistic background and his capacity to care for a child from any particular origin or cultural or linguistic background.

k. His past and present employment or occupation, his standard of living and leisure activities and interests.

l. His previous experience (if any) of caring for his own and other children.

m. His skills, competence and potential relevant to his capacity to care effectively for a child placed with him.

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5. The outcome of any request or application made by him or any other member of his household to foster or adopt children, or for registration for child minding or day care, including particulars of any previous approval or refusal of approval relating to him or to any other member of his household.

6. The names and addresses of two persons who will provide personal references for the prospective foster parent.

7. In relation to the prospective foster parent, either:

   a. an enhanced criminal record certificate issued under section 115 of the Police Act 1997 including the matters specified in section 115(6A) of that Act; or

   b. where any certificate of information on any matters referred to in sub-paragraph (a) is not available to an individual because any provision of the Police Act 1997 has not been brought into force, details of any criminal offences:

      i. of which the person has been convicted, including details of any convictions which are spent within the meaning of section 1 of the Rehabilitation of Offenders Act 1974and which may be disclosed by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 or

      ii. in respect of which he has been cautioned by a constable and which, at the time the caution was given, he admitted; and

      iii. in relation to each member of the household aged 18 or over, details of any criminal offences such as are mentioned in sub-paragraphs (i) and (ii) of paragraph 13(b).

Assessment of foster carers

Fostering Services Regulations 2002

National Minimum Standard 6

The fostering service makes available foster carers who provide a safe, healthy and nurturing environment.

Regulation 27

The fostering service provider shall carry out an assessment of any person whom it considers may be suitable to become a foster parent, in accordance with this regulation.

If the fostering service provider considers that a person may be suitable to act as a foster parent it shall:

- obtain the information specified in Schedule 3 relating to the prospective foster parent and other members of his household and family, and any other information it considers relevant

- interview at least two persons nominated by the prospective foster parent to provide personal references for him, and prepare written reports of the interviews
- subject to paragraph (3), consult with, and take into account the views of, the local authority in whose area the prospective foster parent lives
- having regard to these matters consider whether the prospective foster parent is suitable to act as a foster parent and whether his household is suitable for any child in respect of whom approval may be given
- prepare a written report on him which includes the matters set out in paragraph (4)
- refer the report to the fostering panel and notify the prospective foster parent accordingly.

Paragraph (2)(c) does not apply where the fostering service provider is a local authority and the applicant lives in the area of that authority.

The report referred to in paragraph (2)(e) shall include the following matters in relation to the prospective foster parent:

- the information required by Schedule 3 and any other information the fostering service provider considers relevant
- the fostering service provider's assessment of his suitability to act as a foster parent
- the fostering service provider's proposals about the terms and conditions of any approval.

Approval of foster carers – Fostering Service Regulations 2002

Assessments of prospective foster carers must be considered, and recommendations made about approval or not, by fostering panels established by the fostering service providers. The decision about approval or not, is then made by the fostering service providers decision maker.

Regulation 28

A fostering service provider shall not approve a person who has been approved as a foster parent by another fostering service provider, and whose approval has not been terminated.

A fostering service provider shall not approve a person as a foster parent unless:

- it has completed its assessment of his suitability
- its fostering panel has considered the application.

A fostering service provider shall in deciding whether to approve a person as a foster parent and as to the terms of any approval, take into account the recommendation of its fostering panel.

No member of its fostering panel shall take part in any decision made by a fostering service provider under paragraph (3).

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If a fostering service provider decides to approve a person as a foster parent it shall:

- give him notice in writing specifying the terms of the approval, for example, whether it is in respect of a particular named child or children, or number and age range of children, or of placements of any particular kind, or in any particular circumstances.

- enter into a written agreement with him covering the matters specified in Schedule 5 (in these Regulations referred to as the "foster care agreement")

If a fostering service provider considers that a person is not suitable to act as a foster parent it shall:

- given him written notice that it proposes not to approve him, together with its reasons and a copy of the fostering panel's recommendation

- invite him to submit any written representations within 28 days of the date of the notice.

If the fostering service provider does not receive any representations within the period referred to in paragraph (6)(b), it may proceed to make its decision.

If the fostering service provider receives any written representations within the period referred to in paragraph (6)(b), it shall:

- refer the case to the fostering panel for further consideration make its decision, taking into account any fresh recommendation made by the fostering panel.

As soon as practicable after making the decision referred to in paragraph (7) or (8)(b) as the case may be, the fostering service provider shall notify the prospective foster parent in writing and

- if the decision is to approve the person as a foster parent, comply with paragraph (5) in relation to him

- if the decision is not to approve the person, provide written reasons for its decision.

Establishment of fostering panels

Regulation24

Subject to paragraph (5), the fostering service provider shall establish at least one panel, to be known as a fostering panel, in accordance with this regulation.

The fostering service provider shall appoint to chair the panel either:

- a senior member of staff of the fostering service provider who is not responsible for the day to day management of any person carrying out assessments of prospective foster parents

- such other person not being an employee, member, partner or director of the fostering service provider, who has the skills and experience necessary for chairing a fostering panel.

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Subject to paragraph (5), the fostering panel shall consist of no more than 10 members including the person appointed under paragraph (2) and shall include:

- two social workers employed by the fostering service provider, one of whom has child care expertise and the other of whom has expertise in the provision of a fostering service

- in the case of a fostering agency:
    - if the registered provider is an individual, that individual
    - if the registered provider is an organisation, at least one of its directors or the responsible individual
    - if the registered provider is a partnership, at least one of the partners
    - in the case of a local authority fostering service, at least one elected member of the local authority
    - at least four other persons (in this regulation referred to as "independent members"), including at least one person who is, or within the previous two years has been, a foster parent for a fostering service provider other than the one whose fostering panel is being established.
    - will act as chair if the person appointed to chair the panel is absent or his office is vacant ("the vice chair")

A fostering panel may be established jointly by any two but not more than three fostering service providers, and if such a fostering panel is established:

- the maximum number of members who may be appointed to that panel is eleven

- each fostering service provider shall appoint two persons to the panel, one of whom falls within paragraph (3)(a), and the other of whom falls within paragraph (3)(b) or (c), as the case may be

- by agreement between the fostering service providers there shall be appointed:
    - a person to chair the panel
    - at least four independent members including at least one person who is, or within the previous two years has been, a foster parent for a fostering service provider other than any of those whose fostering panel is being established
    - a member of the panel who will act as chair if the person appointed to chair the panel is absent or his office is vacant ("the vice chair").

A fostering panel member shall hold office for a term not exceeding three years, and may not hold office for the panel of the same fostering service provider for more than two consecutive terms.

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Any panel member may resign his office at any time by giving one month's notice in writing to the fostering service provider.

Where a fostering service provider is of the opinion that any member of the fostering panel is unsuitable or unable to remain in office, it may terminate his office at any time by giving him notice in writing.

A person shall not be appointed as an independent member of a fostering panel if:

- he is a foster parent approved by the fostering service provider

- he is employed by the fostering service provider

- he is concerned in the management of the fostering service provider

- in the case of a local authority fostering service, he is an elected member of the local authority; or

- in the case of a fostering agency, he is related to an employee of the registered provider, or to any person concerned in the management of the fostering agency.

For the purposes of paragraph (9)(e), a person ("person A") is related to another person ("person B") if he is:

- a member of the household of, or married to person B;

- the son, daughter, mother, father, sister or brother of person B; or

- he son, daughter, mother, father, sister or brother of the person to whom person B is married.

Meetings of fostering panel
Regulation 25.
Subject to paragraph (3), no business shall be conducted by a fostering panel unless at least five of its members, including the person appointed to chair the panel, or the vice chair, at least one of the social workers employed by the fostering service and at least two of the independent members, meet as a panel.

A fostering panel shall make a written record of its proceedings and the reasons for its recommendations.

In the case of a joint fostering panel, no business shall be conducted unless at least six of its members, including the person appointed to chair the panel, or the vice chair, and one social worker from each fostering service, meet as a panel.

Functions of fostering panel

Regulation 26.
The functions of the fostering panel in respect of cases referred to it by the fostering service provider are:

- to consider each application for approval and to recommend whether or not a person is suitable to act as a foster parent

- where it recommends approval of an application, to recommend the terms on which the approval is to be given
- to recommend whether or not a person remains suitable to act as a foster parent, and whether or not the terms of his approval remain appropriate:
    - o on the first review carried out in accordance with regulation 29(1); and
    - o on the occasion of any other review when requested to do so by the fostering service provider in accordance with regulation 29(5); and
- to consider any case referred to it under regulation 28(8) or 29(9).

The fostering panel shall also:

- advise on the procedures under which reviews in accordance with regulation 29 are carried out by the fostering service provider and periodically monitor their effectiveness

- oversee the conduct of assessments carried out by the fostering service provider

- give advice and make recommendations on such other matters or cases as the fostering service provider may refer to it.(3) In this regulation "recommend" means recommend to the fostering service provider.

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Recruiting foster carers

Key findings

Recruiting and retaining foster carers is key to delivering an effective fostering service. Although there is a shortage of foster carers, there is a great deal of information from research about effective recruitment and many fostering agencies are using this knowledge in their practice.

Local schemes, especially word of mouth and articles in the local press are most successful, and a consistently high local profile is required in order to recruit more foster carers. One–off, unsystematic campaigns are less effective and ongoing publicity achieves more, for example: about the need for foster carers and the benefits of the task.

Recruitment campaigns should use young people who are, or who have been fostered, and they should also use foster carers and their networks to attract potential recruits.

Campaigns should focus on the professionalism of the task; the opportunities for training and qualifications, the opportunities to diversify into other child care work, and the financial rewards. Successful campaigns are likely to have the following features:

- Good knowledge of local area.
- Systems in place for following up enquiries: fostering agencies must respond in a timely, and business-like manner to sustain the interest of potential foster carers, because only about 20 per cent of enquiries lead to applications.
- Using the local media.
- Ongoing recruitment - not just one-off drives.
- Use of foster carers' own networks

Practice points

- Ask yourself how to keep the profile of fostering in your locality consistently high, perhaps using branding and specialist marketing techniques. Remember that local schemes such as word of mouth and articles printed in the local presswork best. Some fostering agencies give financial rewards to those who introduce carers. Remember to use the skills and experience of children and foster carers in recruitment campaigns.
- Remember that you have an important role to play to maximise every opportunity to make local people more aware of the need for foster carers, and their important work. It is also important to think about ways of enabling foster carers and foster children to participate in recruitment campaigns.

- Targeted campaigns and information such as finding carers for children from specific black and minority ethnic backgrounds, can be very effective. So think about ways in which you can emphasise the positives about fostering: the professionalism of the task, and the opportunities for training, qualifications, and to take-up related childcare work.
- Remember that about 80 per cent of first enquiries come to nothing, so think about ways to actively follow up these enquiries to see if this can be reduced. In order to maximise and increase numbers, some agencies are also giving carers a financial reward for introducing a new carer. Could your agency do something like this?
- Explain what the financial rewards are to prospective carers: they should all know what they could earn.

What we know from research

Currently the demand for foster carers outstrips supply. Successful recruitment and retention policies among fostering agencies are essential if we are to deliver an effective fostering service.

The shortage of foster carers

At present there are difficulties in recruiting and retaining sufficient foster carers in order to provide placement choice. Published accounts from organisations such as the ADSS [89] and Fostering Network 90 demonstrate the significant difficulties faced by local authorities. It may be easier for independent fostering providers to recruit, and one study [32] found that five times as many foster carers were joining the [55] independent fostering providers in their survey, as were leaving.

Effective recruitment campaigns

There is a great deal of information from research about effective recruitment. A key message throughout is that success is often related to the use of local schemes, especially through word of mouth and brief articles in the local press.

One study [87] which focused on local authorities in Scotland, although making useful comparisons with England, found that a higher profile of fostering is needed if more carers are to be recruited. It found the low profile of fostering, compared, for example to child protection in many Scottish local authorities, badly affects service development including recruitment. The authorities needed to produce more publicity about the need for foster carers and concentrate on positive messages such as celebrating their success with children and young people. Long-term strategies linked to targets were required because recruitment campaigns were generally on- off's and unsystematic. Local recruitment drives were found to be the most successful.

Campaign content is also important: targeting local people is beneficial, but an underlying message that 'anyone can foster' is unhelpful. The campaigns in the study did not focus enough on the professionalism of the task, the possibilities of training and obtaining qualifications, and the financial rewards.

Researchers were critical of campaigns which were 'ad hoc' and relied on inexperienced staff [3] .

Successful campaigns are likely to have the following features:

- Good knowledge of local area.
- Close collaboration with experienced carers.
- Systems in place for following up enquiries.
- Using the local media.
- Ongoing recruitment drives - not just one-off's.

A majority of foster carers [87] were attracted to fostering because they had spoken to existing foster carers, seen or heard a description about fostering in the local media or both. Foster carers thought that if they played more of a central role in recruitment they could address commonly held public fears and stereotypes about fostering and social work.

Higher levels of pay is also an important factor that can influence recruitment levels [91], [92] [93]. One foster carer in a consultation group said [2]

'We might not do it for the money, but I wouldn't do it without the money. '

Fostering Network www.fostering.net takes the view that no-one should be out of pocket as a result of fostering. Each year, the Fostering Network produces a minimum recommended fostering allowance and a survey, which keeps track of the allowances paid by fostering services throughout the UK.

External link: www.fostering.net

The British Association of Adoption & Fostering (www.baaf.org.uk) believes the current foster care system is in need of a radical overhaul in order to retain and recruit more foster carers. Changes need to be made to transform it from an essentially volunteer-based service that is often regarded as the poor relation within children's services, to a modern, highly skilled, child centred service that places foster carers at the centre of the professional network that cares for children.

External link: www.baaf.org.uk

Foster carers think [3] that their own networks should be used to increase recruitment. They generally think that potential carers:

- are unaware of the need for foster carers

- worried that they would not measure up

- lack confidence in being able to parent a foster child

- have a poor image of foster children

- distrust social workers

- they also said that fostered young people should participate more in recruitment campaigns.

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If applicants knew that carers supported and helped each other they might be more willing to come forward, and as one foster carer in a consultation group said [2] :

"If prospective foster carers could meet...with more than just a couple of people they can see that we actually support each other. I think that if new people coming in realise that they don't have to do it by themselves, because foster carers talk to each other that is helpful."

Sinclair and his colleagues [94] discovered that as many as 20 per cent of registered foster carers across the seven local authorities were not currently fostering at the time of their study. Sellick [32] has evidence of these dormant foster carers being recruited by independent fostering providers.

Targeting specific groups of carers can be very effective, for example to match the needs of individual or groups of children, such as children from certain minority ethnic backgrounds, or to increase the numbers of carers in a particular geographical area, such as a neighbourhood where carers are needed but few are available [31], [87] . Fostering agencies have been urged by government to attempt to recruit as widely as they can, from previously untapped pools of foster carers.

However, there is some evidence to suggest that it may be the demands of fostering, particularly the difficulty of combining it with other paid work, which influences the pool of potential foster carers, rather than ineffective recruitment campaigns [2]. But effective campaigns are extremely important and many fostering agencies are 50 developing innovative ways of recruiting foster carers.

One study usefully summarises the research messages about recruitment [83] and notes that to be effective, fostering agencies must respond in a timely, efficient and business-like manner to sustain the interest of potential foster carers. One study (see RIP doc p 98) found that only 20 per cent of enquiries resulted in an application to foster. It is important not to lose potential carers at this early stage, especially as they may have overcome initial anxieties about applying in the first place.

The SCIE Knowledge Review 1 found that many agencies currently use a range of initiatives to help them recruit and retain their carers, and many now employ a specialist worker, often with marketing and media experience to:

- design and implement a recruitment strategy
- design marketing material
- develop and maintain relations with the local press
- develop and deliver information packs.

Link: SCIE Knowledge Review 1

Research tells us that it is also essential to follow-up expressions of interest within a stated time frame, so that potential carers are not lost [95]. In order to maximise and increasing numbers of agencies are also giving carers a

financial reward for introducing them to a new foster carer [(1)]. Many fostering agencies are responding in line with the research findings.

Law and standards

The Law and Standards sections apply to England only.

A brief indication of how the law will change upon full implementation (September 2004 and September 2005) of the Adoption and Children Act 2002 is inserted in italics.

Compliance with Statute and Regulations is mandatory – compliance with Standards is taken into account by the CSCI when registering and inspecting fostering service providers.

Human Rights
Potential foster carers have the right not to be discriminated against on the basis of age, disability, race, gender, or sexual orientation.

National Minimum Fostering Standard 7
The fostering service ensures that children and young people and their families, are provided with foster care services which value diversity and promote equality.

Fostering Service Regulations 2002 - Regulation 26 [6]
A fostering service provider may not employ a foster carer or member of the household of a foster carer approved by that fostering service providers – subject to certain exceptions [Regulation 20 [7] and 50[7].

Regulation28 [1]
A foster carer cannot be approved by two different fostering service providers [local authority or independent] at the same time.

If a foster carer wishes to transfer from one fostering service provider to another s/he must request that their approval by their existing fostering service providers be terminated.

Transfers of Foster Carers between fostering service providers
The Fostering Network has a protocol for transfers, which is intended to ensure continuity for children in placement, minimise the length of time taken in the transfer process, and agree finance arrangements to ensure carers do not suffer a loss of income as a result of the transfer process

External link: www.thefostering.net

Ideas from practice

The use of word of mouth by existing foster carers as recruiters, and local campaigns, has been supported by:

SOUTHAMPTON, which pays foster carers £20 for introducing a potential foster carer and a further £200 once they have been approved and a child has been placed with them.

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CHRYSALIS CARE which pays foster carers £150 for each new approved carer they have introduced to the agency.

WOODSIDE which pays the introducing foster carer £200 once a child has been placed.

KINGSTON places advertisements for foster carers in the jobs column of the local press.

FOSTERING PEOPLE also does this and specifies the amount paid in fees to foster carers in order to appeal to working people, who may consider fostering as an alternative job.

DUDLEY'S use the local Training and Enterprise Council.

READING includes a publicity leaflet with every council tax bill.

ESSEX, a beacon Council for adoption, has applied the lessons learned from developing adoption services to its fostering services. It provides a free phone number for callers interested in fostering, and social workers try to be as informative as possible in these in-depth phone calls. Explanation about suitability, such as health and criminal records, as well as full information about fostering, is given, in order to minimise the time taken in subsequent and time-consuming activities such as home visits. Information packs are sent out afterwards. As a result referrals to assessing social workers are more productive.

CHESHIRE COUNTY COUNCIL has re-launched its website with the aim of promoting the image of fostering and to improve recruitment of foster carers and adopters. It challenges stereotyped images of fostering and, based on research with existing foster carers, uses strong headlines and images. Cheshire has also produced a CD ROM and electronic postcards for the same purpose.

The website also has a password protected section, available only to Cheshire's approved foster carers and adopters, which is being developed to provide useful information about policies and procedures, events and training material, useful forms, contact details for staff, a message board facility, and profiles of children who are waiting for placements.

ENFIELD produced a four-page special about fostering for the free local magazine.

BIRMINGHAM's fostering agency has opened a recruitment centre in the heart of the city. 'The shop' handles personal callers and telephone enquiries from the general public about fostering. Staff members are available during usual working hours, maintaining a presence when the city is at its busiest – including late opening on Thursday evenings and on Saturday mornings.

This innovation, whilst not new (GREENWICH, for example, has used a similar approach), gives high public visibility to BIRMINGHAM's fostering service and its need for more carers.

COMMUNITY FOSTER CARE, an independent fostering provider in GLOUCESTER, has an innovative approach to the recruitment of carers.

Potential fostering families are targeted from the Gloucestershire area, including socially and economically disadvantaged areas and account for around three quarters of their existing carers. This approach brings social and economic regeneration to the area, and jobs and training for many previously socially excluded people, as well as ensuring children remain in their local environment. The agency is a registered charity and was a Social Enterprise of the Year award winner in 2002.

One agency in the voluntary sector – TAITH NEWYDD, Newport NCH, obtained a grant from the European Social Fund to support a foster carer recruitment campaign. This funding and its application were particularly innovative, and the fund was awarded for the development of employment opportunities throughout Wales. Taith Newydd emphasised fostering as a possible career for users of National Children's Homes family centres in parts of Wales where there were few foster carers available to look after local children. This recruitment approach therefore brought together two messages: firstly, the importance of local people fostering local children and secondly, the potential of fostering as a career. There has been a very good response, and as a result the agency has made a further application for European Union funding.

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Training foster carers

Key findings

Preparation training before approval as a foster carer is now universal.

After approval, nearly all agencies across the public, independent and private sectors provide NVQ training. Some agencies have further developed their programmes and provide specialist training in the areas that foster carers request such as:

- managing contact between foster children and their birth families
- managing children's behaviour
- supporting education and liasing with schools.

To be effective foster carers and social workers must know and use the same approach to training.

Foster carers appreciate training and can often point out the gaps. Many agencies are developing opportunities for foster carers to become mentors and assessors for other carers.

Some carers report difficulties in attending training because of childcare and work commitments. Experienced carers sometimes think that the training they get is not sufficiently stimulating.

Information technology has helped training developments.

Practice points

- Think about the training that your agency provides, what works well, and what could be improved. Ask yourself and the carers if there is a need for training which is not currently provided. Managing contact, managing children's behaviour and supporting education are particular areas foster carers are keen to learn more. Experienced carers also need more advanced training.
- To be effective, practitioners need to know and use the approach taken in foster carers' training and use it in their own practice. Ask yourself if this is true for you and your team.
- Think about ways in which you and your team could use the expertise of foster carers, children and social workers.
- Ask yourself how can you maximise the use of computers, the internet and online learning?
- Examine how you and your agency can provide extra support for carers who are working and have young children so that they can access training.

What we know from research

Preparation training
The training of foster carers has become an established part of fostering practice, and preparation training before approval as a foster carer is now universal. In Sellick and Connolly's national survey of independent fostering providers [32], 100 per cent of agencies provided preparation training.

Ongoing training
Nearly all agencies across the public, independent and private sectors provide NVQ training after approval. Research studies [54], [94], [96] have identified three key areas in which foster carers want training:

- managing contact between foster children and their birth families
- dealing with 'difficult' behaviour
- supporting education and liaising with schools.

Training by itself is not sufficient to create and retain experienced carers. Also training should be integrated into the service as a whole and not just limited to foster carers. For example, if carers receive training in using a particular approach to children's difficulties, social workers must also know and use the same approach [2].

A clear relationship between the level of training provided and placement success has not been demonstrated, and more research in this area is needed. However, there is plenty of evidence that suggests carers appreciate training and they are often able to point out the gaps in this area. Foster carers find it difficult to attend training if they are working, have children and foster children under school age and if they are lone carers. Some experienced carers also reported that the training is insufficiently challenging [3].

Agencies are using research to develop practice: the training of foster carers has become an embedded and integral part of the overall service. Many agencies have developed training so that foster carers are becoming mentors and assessors for other carers [1].

Information technology has also assisted developments.

Law and standards

The Law and Standards sections apply to England only.
A brief indication of how the law will change upon full implementation (September 2004 and September 2005) of the Adoption and Children Act 2002 is inserted in italics

Compliance with Statute and Regulations is mandatory – compliance with Standards is taken into account by the CSCI when registering and inspecting fostering service providers.

Fostering Service Regulations 2002 - Regulation 17

Support, training and information for foster parents
The fostering service provider shall provide foster parents with such training,

advice, information and support, including support outside office hours, as appears necessary in the interests of children placed with them.

The fostering service provider shall take all reasonable steps to ensure that foster parents are familiar with, and act in accordance with the policies established in accordance with regulations 12[1] and 13[1] and [3].

The fostering service provider shall ensure that, in relation to any child placed or to be placed with him, a foster parent is given such information, which is kept up to date, as to enable him to provide appropriate care for the child, and in particular that each foster parent is provided with appropriate information regarding:

- the state of health and health needs of any child placed or to be placed with him; and

- the arrangements for giving consent to the child's medical or dental examination or treatment.

National Minimum Fostering Standard 23
The fostering service ensures that foster carers are trained in the skills required to provide high quality care and meet the needs of each child/young person placed in their care.

All training fits within a framework of equal opportunities, anti discriminatory practice and is organised to encourage and facilitate attendance by foster carers.

Ideas from practice

An independent fostering agency, Kindercare Fostering in Kent, in partnership with the University of Surrey, has developed two additional qualifications: the Certificate in Professional Practice in Foster Care and a follow-on Diploma. Kindercare's analysis of their foster carers found that around one third of them already had a higher qualification. The NVQ route seemed ineffective for this group especially as they already had accumulated years of experience as foster carers. The Certificate of Professional Practice in Foster Care offers additions to NVQ level competence-based learning, and the Diploma offers a route for those carers who wish to enhance their training still further.

A modular programme has been designed. The course will be available via the web, and includes home-based learning as well as workshops and tutorials. The qualifications will retain, and add to, the essential features of the NVQ. Key subjects will be studied: for example, child development, trauma and dysfunctional development, and managing challenging situations. In the future, Kindercare is keen to develop a degree-level qualification with the university.

Lambeth's Children Looked After Mental Health Service provides a quick response to placements at risk of breakdown, offering direct assessment and

intervention to children and carers. In addition, this scheme offers training on the psychology of children's behaviour, and advice and support to social workers.

An independent agency, Families for Children (FfC) has also developed a range of innovative vocational and professional education and training opportunities. It publishes brochures for foster carers and social workers, listing training events throughout the year. The 2003 brochure includes sessions on contact with birth families, challenging behaviour, and the education of looked after children, which are all in line with research messages about effectiveness. This training programme prepares foster carers who are embarking on an NVQ course.

Progression to a sponsored Diploma in Social Work course is another option at FfC, and five foster carers have qualified and returned to work as social workers, having been guaranteed jobs when they qualified. A service level agreement between FfC and Chichester University College includes the provision of student placements and employee access to social work training.

Warwickshire is one of many local authorities to offer the NVQ Award 'Caring for Children and Young People' Level 3 to carers. In order to deliver the training it has established a specialist NVQ Training Centre staffed by a team of four. Twenty places are available each year, starting in the spring or autumn. Distance learning opportunities, supported by ICT, are available and being developed further. The authority meets all fees and expenses, including those for travel. It has also developed further opportunities for those who have obtained this qualification to become mentors and assessors.

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Retaining foster carers

Key findings

Experienced carers are valuable and satisfied carers will attract new ones.

Foster carers can find themselves de-motivated if they are in a difficult situation. For instance, if a placement breaks down and the child leaves, the carer may take the opportunity to stop fostering altogether.

When 'spot purchasing' (purchasing individual placements) was undertaken by the fieldwork service with responsibility for the child, the service was seen as less responsive to foster carers' needs, because payments were often late or incorrect. At the same time purchaser/provider systems for managing the budget did seem to produce greater flexibility and budget awareness.

What keeps foster carers fostering

- Training, support and the chance to meet and get support from other foster carers.
- Being treated as a member of the team and the opportunity to work with social workers.
- Adequate information about the child.
- Good out of hours and general support, including access to specialist help and advice.
- Guaranteed respite.
- Good levels of remuneration, realistic and well-managed payment systems, which ensure that they get paid on time.
- Carers who feel supported whether by social workers, their family, including their children, and friends, are more likely to provide successful placements.

Information technology has also helped developments that support foster carers.

Remuneration levels are also a very important factor in retention and many local authorities have developed payments for skills schemes.

The SCIE knowledge review 4 [1] found evidence of local authority specialist and mainstream fostering schemes providing foster carers with key supports, using methods in line with those recognised by research.

Practice points

- Ask yourself how you can set up payment systems capable of making prompt and regular payments to foster carers?
- Ask yourself if you and your agency provide the type and level of support that will retain carers, and encourages them to introduce their friends, family, and other contacts into fostering.

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- Think about ways in which carers and their networks can be supported, particularly at stressful times. Support can come from family, including the carers' own children, and friends, as well as the agency. When carers experience stressful situations, they need a support network, so think of ways in which you can help them access extra time, discussion, and support.

What we know from research

A 1997 study [91] showed that, when 'spot purchasing' (purchasing individual placements) was undertaken by the fieldwork service with responsibility for the child, the service was seen as less responsive to foster carers' needs because payments were often late or incorrect. At the same time purchaser / provider systems for managing the budget did seem to produce greater flexibility and budget awareness.

The reasons for foster carers leaving

There is research evidence that the number of carers who leave is quite low; about 10 per cent a year or less. Nevertheless, more can always be done to retain foster carers. Experienced carers are particularly valuable and satisfied carers will attract new ones.

What keeps foster carers? [28], [36], [83], [94], [97]

- Training, support and the chance to meet and get support from other foster carers.
- Being treated as a member of the team and the opportunity to work with social workers.
- Adequate information about the child.
- Good out of hours support and general support, including access to specialist help and advice.
- Guaranteed respite.
- Good levels of remuneration, realistic and well-managed payment systems, which ensure that they get paid on time.

Carers who feel unsupported are more likely to feel under strain and difficulties with a child can increase as a result. This perception of a lack of support, and criticism of the type of support they get, can allow a downward spiral to develop.

Carers who feel supported by social workers, and their family - including their children and friends - are more likely to provide successful placements and to be considered by social workers to show warmth and to meet the needs of the children in their care.

Foster carers can find themselves de-motivated if they are in a difficult situation. For instance, if a placement breaks down and the child leaves, the carer may take the opportunity to stop fostering. Other stressful events such as allegations of abuse, tensions between the foster carers and the birth

family, disputes with the local authority and other placement breakdowns not handled effectively, can also have foster carers heading for the door.

Findings from SCIE Knowledge Review 4 [1] found evidence of local authority specialist and mainstream fostering schemes providing foster carers with key support methods in line with those recognised as effective in the research.

Information technology has also helped developments in foster carer support, and the TUNNEL LIGHT project in Lincolnshire, described in the guide, is one example.

Many local authorities have developed payment for skills schemes. These require that foster carers demonstrate relevant childcare and other skills, usually by obtaining an NVQ. Having done so they are entitled to payment at a higher level.

Ideas from practice

FAMILIES FOR CHILDREN, is one of the few fostering agencies to have established an opt-in pension scheme for foster carers to which the agency contributes. Secondly, as a reward for long service, families who have fostered for five, and ten years, receive the sum of £1,000 each time. Also, the agency emphasises the importance of looking after carers by providing personal knowledge and support.

Well-equipped and planned centres for foster carers have been established in both the local authority and independent sectors. For example, OUR PLACE is a centre for foster and adoptive families in Bristol set up in 1998. A core team, consisting of an educational psychologist, researcher, art, play, music, dance and occupational therapists, and social workers, staff the centre with sessional staff. It is a non-profit making trust which provides a wide range of organised and informal activities for all family members in "a community that understands and accepts the joys and the difficulties that arise from looking after and adopting children of all ages." There is a full programme of workshops, after school and summer activities, and a range of groups for the centre's different users. OUR PLACE is open throughout the week and some evenings and Saturdays. All activities are free. It aims to provide a therapeutic environment, and encourages families to meet and support one another. The multi-disciplinary staff group enables families to have access to a wide network of therapeutic, educational, social work and other professional advice and support within the centre, and in the community by connecting with health, education and social service agencies.

BEXLEY provides foster carers with a 'buddying' scheme of fellow carers, and BEXLEY, SOUTHAMPTON and LEEDS provide its carers with loyalty payments and certificates.

FOSTERING NETWORK, Northern Ireland, has four regional advisers who are themselves foster carers. They provide independent information, support and advice to other foster carers on a sessional basis.

In order to assist carers as their foster family grows, STOCKPORT has an allocated budget to provide financial help, in exceptional circumstances, to extend their property.

ENFIELD has offered foster carers group support to explore the emotional challenges of parenting looked after children. Enfield carers also have direct access to child psychotherapists and a senior teacher with responsibility for looked after children.

DERBYSHIRE links new foster carers with an experienced carer who provides them with 'buddying' and mentoring. It has also developed an out of hours helpline for all Derbyshire foster carers which supplements the 'emergency out of hours' service. Specially trained and experienced carers run the helpline.

NORTH WEST FOSTER CARE ASSOCIATES offer stress management and aromatherapy sessions.

WOODSIDE provides a full range of alternative therapies, from art and music therapy to reflexology.

The children of foster carers have been recognised not only because fostering agencies have a responsibility to protect their interests, but also because their welfare has a major impact on whether or not their parents carry on fostering. Several agencies have developed innovative services for these children such as:

- the Sons and Daughters group in BUCKINGHAMSHIRE.

Dudley's 'Children Who Foster' group is run by the birth children of foster carers, offering support, social and leisure activities for these "siblings" of fostered children.

FOSTERING NETWORK IN NORTHERN IRELAND is developing a peer-mentoring scheme for the children of foster carers.

Creating job satisfaction for foster carers

Key findings

Creating job satisfaction by career choice

Less research evidence exists in this area: many practice initiatives are recent and have generally not been independently scrutinised by researchers. One study [98] of short term fostering found that many carers had developed child care careers for themselves which included child minding and work in family centres, as well as fostering, and that they were generally satisfied with managing their own career in this way.

Findings from the SCIE practice review 1

There are several practice examples of agencies attempting to provide career choices within or connected to fostering, as we illustrate below.

A number of agencies reported that they are hindered by the Fostering Service Regulations (Department of Health 2002), which do not allow carers to take on more than five hours paid additional tasks for the same agency that employs them as carers. In response the Department of Health states the restrictions apply only to foster carers working within the fostering service that employs them as carers; they would therefore be able to pursue a management or social worker role within another fostering service, if available to them.

Practice points

Think about how you and your agency can enable foster carers to use and develop their skills in as many flexible ways as possible.

What we know from research

Creating job satisfaction by career choice

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management or social worker role within another fostering service, if available to them.

Ideas from practice

BRADFORD provides a part-time, flexible fostering service called SUPPORT CARE, set up in 1996. It aims to prevent family breakdown by offering families support from foster carers for planned, time limited periods. It was developed as a response to a shortfall in provision identified by field social workers. Traditional foster placements risk the long-term full time removal of young people from their families. Such placements can be insufficiently flexible to meet the needs of families, especially single mothers struggling alone to cope with their adolescent, where there are difficulties related to family conflict, school problems, behavioural difficulties, mental health, drugs and alcohol. The aim of this scheme is to meet the needs of children and their families in a flexible way, and in so doing it provides opportunities for foster carers to gain job satisfaction by widening their skills and expertise.

SUPPORT CARE has given a new role to foster carers who can offer befriending, advocacy and family support as well as caring. The scheme has been widely publicised through training events led by a team comprising the scheme co- ordinator, foster carer and parent as well as by publications (see for example, Howard, J. (2000).

CAMBRIDGESHIRE has developed the role of 'Fostering Service Family Worker', which was set up with the aims of maintaining placement stability, preventing fostering breakdowns and assisting in planned moves for young people. The family workers, some of whom are experienced foster carers, help carers to manage challenging behaviour and support young people with their education, often through providing one to one work with them. This scheme, which was funded from a local public service agreement, has been positively evaluated by young people and foster carers as well as by social workers.

KINGSTON UPON HULL has a short break fostering scheme, which has developed the role of carers by encouraging them to be family group conference organisers and convenors, as well as advocates and 'buddies' for young people.

REDBRIDGE operates a Flexi-Carers Scheme informed by the need to encourage recruitment and retention, provide support and facilitate training, and to widen the opportunities for carers' job satisfaction. Those with spare capacity are paid by the hour to relieve other foster carers attending training sessions, and to provide respite. Two carers also staff an evening help and recruitment line for foster carers. This provides advice and support, and information about fostering. It was reviewed in light of experience, and the operating hours have been reduced to exclude weekends, because the key period of use is from 7pm to 11pm, Mondays to Fridays.

User evaluation of fostering services

Key findings

Children and young people
Many local authorities have promoted the participation of children and young people in service development. Evidence from this review shows that their views are increasingly influential. Several agencies made explicit reference to the United Nations Convention on the Rights of the Child, including the right to participate in decisions about themselves.

This guide contains imaginative methods that can be used to bring the views of young people to the attention of managers and members.

Foster carers
Many agencies have encouraged carers to participate in and evaluate many aspects of the fostering services affecting both themselves and the children they foster, and they are major respondents and witnesses in many research studies. They often use questionnaires and interviews and these are often related to actual placements to give specific feedback.

Parents and birth family members
Research has found very few examples of the parents and other relatives of fostered children being brought into the participation and evaluation systems.

The role of information communication technology in user participation
Information communication technology is playing a major role in the development of user communication, participation and evaluation for young people and their foster carers.

Practice points

- Ask yourself if foster children participate in as many aspects of the fostering service as possible. Are there systems in your organisation to ensure that children's views are fed back to senior managers and elected members?
- Consider ways in which senior managers in your organisation can get back to the 'shop floor' to listen to the views of practitioners and carers. Thinking about creating opportunities for looked after children to have their say with managers and local councillors.
- Remember to involve foster carers as much as you can in the recruitment, training and support of other carers.
- Think about how you and your team can enable birth parents to participate in the way fostering services are delivered.
- Ask yourself if you routinely gather the views of birth parents about the service they receive. How do you use this information?

What we know from research

This guide considers the users of fostering services in three groups: fostered children and young people, foster carers and their families, and birth parents and other relatives.

Children and young people
One study [26] in three local authorities found that foster children were encouraged to participate in decisions affecting their lives. However, their views were very rarely communicated to policy makers at either senior management or elected member level.

Foster carers
Carers are encouraged to participate in many aspects of the fostering services and they are major respondents and witnesses in many research studies.

Parents and birth family members
A 2003 study [96] found that 50 per cent of care plans, where children were to be fostered permanently did not specify the parents' role in decision making. In 75 per cent of cases the care plans did not say how disagreements should be resolved, despite the fact that parental responsibility remained shared between the birth parents and local authority.

Findings from the SCIE practice review 1
T here appears to be marked differences in practice between how carers, children and relatives are brought into the participation and evaluation systems of fostering agencies.

Children and young people
Many local authorities have promoted the participation of children and young people in service development. Evidence from this review shows that their views are increasingly influential. Several agencies made explicit reference to the United Nations Convention on the Rights of the Child, including the right to participate in decisions about themselves.

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Many agencies encourage carers to participate in and evaluate aspects of the fostering service affecting both themselves and the children they foster. They are often major respondents and witnesses in many research studies. Questionnaires and interviews and usually used and these are often related to actual placements to give specific feedback.

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Ideas from practice

By children and young people

NORFOLK has a 'Kids In Care Together' group of looked after young people "who are trying to improve the life and name of those already in the care system." It has an innovative web site, www.kic t.norfolk.uk/kict, which contains helpful details for looked after children and young people. The group provides consultation and advice to the department, and has a direct impact on policy and practice evaluation and change. Members of the group participated in a review monitoring the implementation of a survey about the views of Norfolk looked after children. It has produced two publications, 'The View From the Front Revisited' *and* 'Moving On Up: Young People's Views on Leaving Care in Norfolk.'
External link: www.kict.norfolk.uk/kict

CAMBRIDGESHIRE has a 'Just Us Group' of looked after children, which meets monthly and operates in three localities. They were consulted during the Best Value Review and contribute to designing staff training and information for other looked after children.

WESTMINSTER has produced a video of fostered children talking about their experience. It is used to inform foster carers, social workers and managers and local authority members.

KINGSTON has a website that enables fostered children to contribute to their 'Looked After Children' review forms as well as emailing messages to their social workers.

By foster carers and their own children

CAMBRIDGESHIRE has a system in place for senior managers to go back to the 'shop floor' by spending periods alongside foster carers and social workers.

WEST SUSSEX foster carers are asked to comment on what works after a child has been in placement for two years.

LEEDS conducts exit interviews "to give foster carers who have recently left an opportunity to provide feedback on their former fostering experience."

WESTMINSTER has produced a video of foster carers talking, which is used for training and informing all levels of social work staff. The authority has also undertaken a questionnaire with foster carers, seeking their views on the type of support they value.

NORTH WEST FOSTER CARE ASSOCIATES has also completed a 'meeting the needs of foster carers' questionnaire with their carers.

Some agencies have established formal and representative meetings between foster carers, social workers, senior managers and, occasionally, local authority members.

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BEXLEY has a Foster Executive.

WARWICKSHIRE has a Foster Care Development Group.

LEEDS has a Foster Care Liaison Group, consisting of the director and assistant director and other managers alongside foster carer representatives. The director chairs the group and a foster carer is the vice-chair. A range of topics are considered, for example, issues for Asian carers and payments for skills. Group members believe that this work has "led to a greater understanding on both sides."

Foster carers are members of the Board of Directors in some independent fostering providers, for example, Community Foster Care and East London Foster Carers.

By parents and birth family members

Family Rights Group was commissioned by three London boroughs to undertake interviews with parents of looked after children as part of their best value reviews. Parents from a range of backgrounds were interviewed and their views and messages to service providers informed the review. Copies of the collected messages and views of all the parents interviewed are available from the Family Rights Group.

CHESHIRE included an evaluation exercise for "people with parental responsibility", in addition to separate exercises with looked after children and foster carers, as a part of its Foster Care Review. Parents and others were asked by means of a questionnaire to specify areas of satisfaction and dissatisfaction with the fostering service and their responses informed a review of the service.

Some agencies have incorporated parents in the training of foster carers and social workers such as:

- BRADFORD's Support Care.
- The former LOTHIAN REGION SOCIAL WORK DEPARTMENT included parents of looked after children in preparation training sessions for foster carers, which was considered helpful in developing "working relationships based on understanding and listening to one another. This in turn anticipates the kinds of negotiation and advocacy skills which will assist parents and carers alike in the formal meetings which consider and review the needs of children" (Sellick and Thoburn, 1996:47).
- KINGSTON includes the contributions of parents for the annual review of foster carers.

Using Information Communication Technology

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The Who Cares Trust has recently launched CAREZONE, a secure online service for children in public care, with the aim of encouraging local authorities to use technology to create joined up, online services that work seamlessly across social services, health and education. Within CareZone each user is given secure access to their own individual CareZone virtual world, where there is information and support from a wide range of resources, access to a secure community of other CareZone users, and secure online storage for personal information. There is also a CareZone grid for learning, which provides each child with online educational support.

The Tunnel Light project 1, set up in April 2001 by LINCOLNSHIRE SOCIAL SERVICES, harnesses the internet to strengthen contact between Social Services staff (Family Placements Service - Lincolnshire) and Foster Carers, Adoptive Parents, Children Looked After and the general public. The creation of a website, www.family-lincs.org.uk, has been the centrepiece of the project and the delivery platform through which communication has been maintained.

External l ink: www.family-lincs.org.uk

The project has been a cross-agency partnership - local authority with the not-for-profit sector. 'Advice Lincs' has provided consultancy on project implementation and hosts the site on their servers. They are a pan-county advice and support service.

The aims of the project were:

- The creation of appropriate e-support between families and Lincolnshire's family placement service.
- The establishment of 'e-communities' between foster families and looked after children.
- To provide alternatives to traditional education and training opportunities, the development of management policies as part of the local authority's e-government agenda and to provide the general public with information regarding access to fostering and adoption services.
- To establish an alternative means of communication in what is a large rural county.

Lincolnshire wanted to make sure young people in public care have safe access to the Internet by providing them with the necessary technology so they have the same educational and recreational opportunities other children have in their own families.

The project initially engaged with 15 'pioneer' foster families. Selection was based on 'novice' computer users and each family was issued with a laptop computer, a web-cam, a printer and software. Participative strategies have been adopted to inform project design and roll out by engaging foster carers and young people in the design, story boarding and implementation of web-based services and overall evaluation of the project.

The involvement of foster carers and young people throughout the process provided a very valuable dimension to this local authority's thinking in terms of

presentation of information to the general public, the sort of resources carers require, and their training needs.

One young care leaver was provided with the opportunity to develop their information communication technology skills through a NVQ training scheme in conjunction with Advice Lincs. This was intended to provide a springboard for new career opportunities.

Email enabled one child to maintain contact with her carers. As a Tunnel Light Project member has noted:

"One of our [Lincolnshire's] foster children spent many years with a foster family who returned to Uganda. It was such a wrench for this little girl but they can keep in touch by e-mail, it's just brilliant!"

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