**Health and Safety in the Foster Home**

(A working document that incorporates best practice)

REGULATIONS AND STANDARDS

The Fostering Services (England) Regulations 2011

Regulation 26 - assessment of prospective foster parents

Fostering Services: National Minimum Standards

STANDARD 13 - Recruiting and assessing foster carers who can meet the needs of looked after children

STANDARD 10 - Providing a suitable physical environment for the foster child

SCOPE OF THIS CHAPTER

This chapter explains what needs to be in place when assessing a foster carers' home in relation to health and safety issues around the home.

A child or young person should not be prevented from learning and developing naturally but they need to grow up in a safe environment protected from unnecessary harm. This requires a combined approach through education and training for foster carers who are involved in caring for children, safe product design and modifications to the environment.

RELATED CHAPTERS

Risk Assessment and Planning Policy

Assessment of Pets Policy

Transporting Children Policy

Smoking Policy

Alcohol, Drugs and Solvents Policy

Medication and First Aid Policy

Sections

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**1. Introduction**

The National Minimum Standards for Fostering Regulations 2011 require fostering services to make available foster carers who provide a safe, healthy and nurturing environment. The Agency requires foster homes to be safe, secure, provide a comfortable environment for children and protect children from harm or the risk of harm.

To enable this process and as part of the foster carers approval, all agencies need to be satisfied that their foster carers provide suitable accommodation that is safe and nurturing to care for children and young people they support. The social worker is required to complete a Health and Safety checklist during the assessment process.

This checklist should be updated as part of the annual review of approved foster carers. The Health and Safety checklist should form part of a wider assessment and ongoing supervision of the foster carers. The Health and Safety checklist should be updated when any structural work, or changes to the existing property are made. If foster carers move, then a new Health and Safety checklist should be completed.

Supervising social workers should complete the recommendations and actions following the completed Health and Safety assessment with foster carers.

There is also a duty for supervising social workers to consider the Health and Safety Standards of any second homes including holiday homes and caravans if a child or young person is using these facilities.

Health and Safety Matters

More accidents happen when people are in a hurry, under stress, or in unfamiliar surroundings.

Falls are the most common cause of accidental injury to children and young people. Many accidents can be prevented by moving or removing dangerous objects out of a child's reach. Many childhood accidental injuries occur at home and in the garden. Ponds pose a particular risk for babies, toddlers and young children. Even a small amount of water can pose a risk to a small child.

95% of burns happen at home. Burns and scalds particularly affect babies and very young children, with scalds from hot drinks being the most common cause.

Children grow and learn new skills rapidly. It is important that the foster carers who care for them know what risks each stage brings. It is impossible to childproof a home but knowledge of the potential for accidents and of effective safety measures can reduce the risk of serious injury.

Choking or poisoning risks for younger children needs to be considered. It is important for foster carers not to leave anything lying around which could be a choking or poisoning including hazards such as button batteries, e-cigarettes and small magnets. Children can also suffer strangulation from ribbons and cords that they get tangled in.

See Child Accident Prevention Trust website, click here <https://capt.org.uk/>

The Risks to Foster Children

There are number of reasons why children in foster carer are particularly at risk of accidents. Foster carer's own children will be aware of the potential hazards in their house, as they will have grown up with them. Most foster children joining the household will wish to investigate their new surroundings and the absence of good safety measures will increase the risk of injury.

It is important to know the child and ask about any risks before the child is placed. These risks should be detailed in the placement plan. A child or a young person placed may not have had much guidance around health and safety matters so it is imperative the foster carers keep a close eye on the child or young person initially to keep them safe from harm. Chronological age is not always an indicator of a child's abilities – other factors need to be considered around health and safety such as developmental delay, hyperactivity etc.

Any issues around self-harming should also be addressed in the placement plan with clear guidance around what items should be locked away such as medication, knives etc. See also Self-harm and Suicidal Behaviour Procedure.

**2. Safety in the Home**

There are a number of precautions which should be in place. The following is a basic guide:

Fire Precautions

• Install a smoke alarm on each floor of your home;

• Every foster home should have a fire evacuation plan in place and this should be discussed with any child or young person in placement. The Agency is responsible for monitoring this and keeping this up to date;

• Exit routes should always be kept clear of obstacles and keys should be accessible;

• Fire and rescue services can complete fire safety checks for foster carers and are a valuable source of information;

• Attic rooms with one exit can be difficult and may need a smoke alarm;

• Does everyone know what to do in the event of a fire and no exit is possible- go into a room, shut the door, put a blanket at the door and call for help;

• Practice fire escape plan regularly.

Carbon Monoxide

Carbon monoxide (CO) cannot be seen, smelt or tasted so you do not know when it is present. Carbon monoxide is a poisonous gas that is produced by fossil fuel such as gas, coal, oil or wood burners. A build up of carbon monoxide can be extremely dangerous and cause a variety of symptoms, or even death. Foster carers must have a carbon monoxide monitor/s present in their home in the correct places such as near the cooker, gas fire. Foster carers must ensure that all heating and cooking appliances are serviced regularly, and a Gas Safety certificate is in place. LAF check that this is in place at a minimum during unannounced visits conducted at least annually and make a record of findings.

Gardens and outside play

Good supervision is important when a child or young person is outside. Age and disability have to be considered in this judgement.

• All accessible areas should be safe and secure for all children and young people within the household. Garden exits should be secure. Garden sheds should be locked, and greenhouses and cold frames should be made of toughened glass to avoid injuries;

• All hazards should be reduced and appropriate storage for garden equipment and insecticides should be locked away.

• Water butts, ponds, hot tubs, swimming pools or streams should be netted, covered or fenced off;

• Extreme caution must be exercised when using barbecues; these should never be left unattended ;

• Washing lines should be out of reach of children who this could be a hazard for;

• Any poisonous plants or trees should be safeguarded and the child or young person supervised around them or taught not to handle them or they should be removed from the garden;

• Foster carers need to ensure that good supervision takes place in the garden areas, including play equipment such as trampolines, sand pits etc. All equipment should be safe and age appropriate.

**3. Car Safety**

See also Transporting Children Procedure.

It is the driver's responsibility to ensure that all passengers in the car use seat belts or appropriate child restraints. It is also the responsibility of the driver to ensure that passengers are carried safely and vehicles should not be overloaded.

Cars must be well maintained, regularly serviced, adequately insured and covered by a current MOT certificate if the age of the car requires it. It is the responsibility of the Agency to check the foster carer's documentation initially. Adequate insurance should be in place for transporting children. The Agency will complete regular checks around car safety.

Car keys should be stored safety to avoid a child or young person taking the foster carers' car or losing the keys.

**4. General**

• Matches, lighters and sharp knives should be stored safely.

• Bleaches, disinfectants, aerosol sprays and other dangerous substances must be kept out of the reach of small children or locked away. Cupboard locks should be used - age appropriate.

• Medicines, tablets, cigarettes and alcohol should also be securely stored in a locked cupboard or cabinet.

• Stair gates must be fixed securely where appropriate.

• Windows should be fitted with lock restrictors and keys should be kept at hand in case of emergencies.

• Pull cords on window blinds can be a hazard to children. New blinds with looped cords must have child safety devices installed at the point of manufacture or sold with the blind. However, blinds installed earlier may not have these features and your fostering household could be affected. If you have older blinds: Fit a tidy, tensioner or a cleat: tidies and tensioners should be firmly fixed to an adjoining surface so that the cord or chain are permanently held tight. Cleats should be positioned out of children’s reach on an adjacent surface, at least 1.5 metres from the floor. Cords should be fastened in a figure of eight after every use of the blind, making sure all the spare cord is secured on the cleat. Move furniture away from windows. Children love to climb, so keep furniture clear of window blinds. This includes cots, beds, highchairs and playpens.

**5. Hygiene**

Standards around hygiene, cleanliness and infection control should be maintained by the foster carer. LAF will make sure of this as part of the assessment and by ongoing monitoring that this is the case.

The foster carer should advise LAF if there is an issue around infection control within the household such as Covid-19 or scabies, and the Agency should seek advice about whether this needs to be reported to the Health Protection Agency to seek further advice around treatment and isolation.

If a foster carer or child or young person has Hepatitis B then measures need to be put in place to prevent the spread of it such as not sharing towels, care needs to be taken when cleaning wounds, use of gloves.

**6. Diet and Nutrition**

Foster carers should support a child and young person with healthy eating and offer a varied and balanced diet. Good hygiene standards are particularly important with food hygiene.

**7. Building and Contents**

Foster carers are expected to keep their homes in good repair, adequately insured and safe and hazard-free for children and young people. The foster home should be warm, adequately furnished and decorated.

All fixtures and fittings should meet regulated standards. All glass that can be reached by children should be toughened to relevant British Safety Standards or fitted with protective safety film.

Electrical equipment such as portable heaters should be well maintained and in good working order.

Gas fires, boilers and all other gas appliances should be regularly serviced by an appropriate qualified person.

Foster carers must ensure they have adequate household insurance and notify their insurers they are fostering. Insurance companies will generally provide the same cover as for any other member of the household, but this will usually exclude cover for deliberate acts of damage by children. If such damage occurs and is not covered by the foster carers' insurers, then advice should be sought from the Agency and/or the child's social worker to see if any of the costs can be reimbursed.

Other properties

Health and safety checklists should be in place for foster carers who have second homes including holiday homes and caravans if a child or young person is also staying there.

Foster carers who live on a farm

For foster carers that live on farms there are additional risks to consider. Agriculture has one of the highest fatal injury rates of any industry in the UK.

There is an additional section of the Health and Safety checklist which needs to be completed for foster carers that live on a farm or small holding, this checklist is based upon the Prevention of Accidents to Children in Agriculture Regulations (PACAR) 1998, and the HSE Leaflet, 'Keep Children Safe on Your Farm'.

As with any Health and Safety Checklist, it is not an exhaustive list and there may be other hazards that foster carers or supervising Social Worker has observed and needs to address.

**8. Accommodation, Bedroom Space and Sharing**

The foster carers' house should have enough bedroom space for each child placed and should be able to comfortably to accommodate those who live there. The accommodation should reflect the child's assessed need for privacy, space and specific needs of a child who has disability. Consideration must be given to whether they need a downstairs room for access, adaptable bathroom etc.

Every child over the age of three should have their own bedroom. If this is not possible this arrangement needs to be agreed by the placing Local Authority and a risk assessment needs to be in place considering the child's history, their wishes and feelings and any other factors that seem pertinent. The Agency should complete this with the child or young person, children's social worker and any other relevant party such as the child's parent.

**9. Reducing the Risk of Cot Death**

The Lullaby Trust (formally The Foundation for the Study of Infant Deaths (FSID)) and the Department of Health and Social Care offer advice to reduce the risk of cot death. Up to date advice is available from the Lullaby website, or from the health visitor or midwife.

**10. CCTV in the Household**

The Data Protection Act has significant implications for anyone already using or thinking of installing a Closed-Circuit Television (CCTV) System and it is important that foster carers discuss this with their Supervising Social Worker before arranging to have CCTV installed as this should be brought to the attention of the Agency Manager. The regulations and guidance relating to CCTV are covered by the General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018 (DPA18). This legislation is regulated by the Information Commissioner's Office (ICO) and foster carers must ensure that any CCTV system is operated within regulatory guidelines.

The use of CCTV in a foster home must be considered necessary, proportionate and known to all those living in, or coming to the home. Everyone should be aware it is in place.

CCTV should not be sited in a bedroom, bathroom or toilet and anyone living in the home, or responsible for a child placed with the carer, should be shown where the cameras are sited. At no time should CCTV be an alternative to carers providing supervision or oversight of children and young people.

The Health and Safety checklist should note that CCTV is in place and information should be recorded around who has been consulted and the reason why CCTV is in place. This should be reviewed regularly by the Agency.

The Information Commissioner's Office (ICO) also publishes guidance, e.g. Guidance on the Use of Domestic CCTV and Guidance for People Being Filmed by Domestic CCTV.

**11. Foster Carer and Firearms**

Prospective foster carers must disclose if they hold or have access to firearms. The family placement supervising social worker must see where all guns and ammunition are stored. Firearms must be stored securely, and children or young people should have no access to or be involved in activities involving firearms in any way.

As part of the foster carer's approval and review of approval, the security of arms and ammunition and the ownership of a current firearms certificate will be verified. The Agency should inspect the storage of firearms as part of any unannounced visit.

There is an additional section on the health and safety checklist which must be completed by the Agency if a foster carer possesses a firearm or other weapon.

**12. Training and Support around Health and Safety**

The Agency will ensure that foster carers have adequate training and support around health and safety issues to carry out their role. Bespoke training should be provided if needed for a child such as moving and handling.

Any concerns should be addressed with the foster carers and if the situation cannot be resolved then the Registered Manager and the panel should consider what action to take.