

GUIDANCE on RECORDING FOR FOSTER CARERS

Operational from: February 2024

Agreed by: CYPS Policies and Procedures Group

Version Number: 1.3

Equality Impact Assessment: TBA

Document Author: Suffolk Fostering Service

Responsible Service Area: Suffolk Fostering Service

Review Date: September 2027

PURPOSE OF THIS GUIDANCE

Foster carers are required to keep records about the children in their care as set out in Standard 26 of the Fostering Services: National Minimum Standards (DFE, 2011).

This guidance is for all Suffolk Foster Carers and fostering service practitioners. It explains the requirements and expectations of Suffolk Children and Young People's Services (CYPS) on all foster carers, in all aspects of recording.

It aims to promote good practice and ensure recording, and the handling of information, about a child in care are compliant with relevant legislation.

If requested, we will translate this policy, or particular parts of it, into other languages and formats, so that everyone can use and comment upon its content.

Version Control

	Reason for revision and summary of changes needed	Date
1.2 1.3	Standard Review – change of title to show Guidance not Policy and inclusion of new section on Recording and Information Sharing for Staying Put Arrangements	18.08.26 and 15.09.26

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1. Introduction

Foster carers play an enormous and valuable part in gathering and using information about a child in their care. Carers often have a lot of knowledge about a child's habits, likes and dislikes, current worries and wishes for the future because they live with them, and over time develop close nurturing affinity with the child / young person.

Like any caring parent who keeps information about their children for them to use in later life, carers are in a unique position to record important milestones. In the same way as parents keep their children's early pictures, school reports, photos etc. and remember their children's achievements and major events, foster carers also need to act as a parent to our foster children/ young person in keeping their memories safe. This helps the child in care to avoid having gaps in their knowledge or personal history.

Foster carers must keep records as they are required:

- As a record of a child's life in foster care.
- To monitor and measure change in a child.
- To aid assessment and reports for reviews and care planning,
- To help in the event of a disclosure or reportable incident.
- As a record of the family time that a child in care will have with their parents and connected network.
- As a record of significant events; like school achievements, birthdays, or anniversaries.
- To assist in life story work.
- To provide evidence in Court Proceedings if required.

2. General Data Protection Regulation (GDPR)

The Data Protection Act 1998, the Department of Health Caldicott Standards, the Freedom of Information Act 2004 and the General Data Protection Regulation (GDPR) 2018 require all those involved in the handling of information to safeguard the integrity and confidentiality of information they hold, whether it is in electronic or paper form. Information about a person must not be accessed or shared by any other person, unless there is a risk to any person if it is not disclosed, or unless it can be lawfully justified.

Agreed sharing systems need to be in place. Where capable, the person who the information is about will have given consent to their information being shared. As

all foster carers are in a trusted position, they have access to personal information about the child / young person in care and their families, all of which is confidential.

The foster carer will share information with the child's social worker and their fostering supervising social worker, and will ensure that:

- Any information given to the carer by Suffolk's Children's Services about a child/ young person in paper form is kept secure in the home using the equipment given by Children's Services (lockable box). This includes any paper records produced by the carer e.g. diaries or recordings.
- All carers should protect the information held in their Children's Services Online account (also referred to as the Portal) (Foster carers need to refer to the Foster Care Agreement signed by the foster carers).
- The carer needs to know which other members of the team are working with the child/ young person and who needs to have access to the information they keep - usually this will be their supervising social worker and the child/young person's social worker.

3. Confidentiality, Responsibility and who has Access

Confidentiality is important in the role as foster carer(s) because:

- Carers agree to it when they sign the Foster Carer Agreement after approval as a foster carer(s)
- It is part of undertaking a professional role.
- Information in the wrong hands can cause immense difficulties for the child /young person, their family and to the reputation of Suffolk County Council.
- Many of the children/young people, and sometimes the families that foster carers work with, tell the foster carer very private things and the foster carer needs to make sure that is secure and only passed on to the correct people.
- It shows that foster carers respect the child/young person and the families they are working with.
- Everyone has the right to privacy and dignity.
- Foster carers may be subject to a complaint if they disclose information to the wrong people.

Good Practice Advice in Managing Sensitive Information

- When using the Children's Services Online account (also referred to as the Portal) in which foster carers have received mandatory training to be set up on the portal, foster carers must ensure that they always lock their computer when leaving it. Foster carers must not leave it unattended.
- Passwords to accounts must always be kept secure.
- Putting confidential papers away safely after using them is essential.
- Foster carers should not discuss matters which are personal to a particular child/young person or family in groups with other people.
- Guiding children/young people gently away from talking about private or personal matters in public.

- All information received about the child is confidential unless the person sharing it tells you otherwise. This would not apply where the information relates to the safety or wellbeing of the child and must be disclosed under safeguarding procedures.
- Foster carers must not repeat, to relatives or others not involved in the care of the child, anything that child/young person may have told them about private matters.
- Ensuring that there are no other people present, who do not have a role in caring or supporting the child, when meetings, visits, or conversations are held virtually (e.g. via Microsoft Teams)

Who Needs Access to a Child's Information.

An important aspect of confidentiality is checking people's identity and why they want the information before the foster carer allows them access. If the foster carer has any concerns, they must ask their Supervising Social Worker or Team Manager.

The people to whom foster carers need to regularly disclose information will be known to them and will usually be your Supervising Social Worker and child/young person's Social Worker.

Sometimes a foster carer may be asked to supply information by, for example, lawyers and children's CAFCASS Guardians. It is important for foster carers to check out with their fostering supervising social worker, the child's social worker or their managers if information can be shared with any other specifically named person. They can advise on the right information to share.

4. The use of social media:

Social networking sites (such as Facebook, Twitter, Instagram, WhatsApp, Snapchat, Tumblr, internet forums and message boards etc.) are a popular way for adults and children/young people to communicate and they provide an opportunity for users to share information with existing friends and find new friends with shared interests.

However, there are many potential risks involved in the use of social media that foster carers must be aware of:

- Information posted on the internet is accessible everywhere and however private a foster carer thinks it may be, in the virtual world very little is completely private.
- Information might be disclosed, whether inadvertently or intentionally, which could reveal information about a child in care.
- Social media sites can also provide opportunities for the sexual exploitation and grooming of children/young person where gifts or rewards may lead to meeting a potential abuser offline.
- A young person in care may pass information to either family members or strangers through social media sites which might lead to harm.

Good Practice:

- Foster carers should be mindful to make clear that any views posted are their own and not those of the local authority and make sure that any comments they make do not bring the Suffolk County Council (SCC) into disrepute.
- Confidentiality – matters relating to the organisation and children/young person in care should never be discussed or referred to on social network sites.
- Foster carers should consider carefully whether to add children/young person as friends on their own social media profiles and before doing so discuss with their supervising social worker and the child/young person's social worker.
- No images or recordings of children in care should ever be placed on social networking media sites such as Facebook or Twitter.

Use of Information Technology in Record Keeping:

- Foster carers are required by SCC to provide written accounts/reports relating to the children/young person in their care using Children's Services Online account. The documents are the property of SCC and the responsibility for their safe-keeping and protection rests with SCC.
- If foster carers do not have a SCC device, documents can be created and completed by the foster carer using their own IT equipment these documents must be encrypted whilst saved on the device but deleted as soon as it is no longer needed.
- It is preferred that foster carers use laptops provided by the service as these laptops have a high level of security built into the device.
- IT files that are created as a part of normal family life (photos, videos etc.) should only ever be stored on IT equipment in the foster home that the foster carer is able to share with the child/young person in their care. Encryption of these files is not necessary, but consideration should be given as to where they should be stored, taking into account the looked after child's wishes and feelings and remaining sensitive to the relationships in the foster family.
- Foster carers must never transfer electronic files they store regarding the children/young person in their care to any other party (parent of child/young person or other family member, other foster carer, any other colleague, social worker) using information technology systems (personal Email, iCloud, Drop Box, One Drive, Google Drive etc.). These systems do not have the correct levels of encryption to keep the files safe and secure. Foster carers will need to speak with their supervising social worker or the child social worker if files need to be shared or transferred where a secure route will be agreed.

5. Records can take several forms, as detailed below.**Contact Communication Book**

Contact communication books are usually set up by the foster carer where children regularly have family time with their parents and family, this is very often with babies and very young children. This allows foster carers to communicate and share information with birth parents/family and vice versa if the foster carer is not having direct contact with the child's family. This is an important line of

communication between foster carers and birth parents and helps to ensure that the child receives consistent care, and that key information is shared appropriately.

Record of Contact

Foster carers will be provided with a Record of Contact via the portal which will allow for facts and observations to be recorded each time the child has family time with their birth parents or other relatives. This record should include a brief summary of how the child was before and after the event and any particular issues that arose. These records may be used within Court Proceedings but will also provide a picture of any patterns in the child's behaviour or emotional responses in relation to contact.

Records of contact will be submitted via the online Suffolk children's portal, which foster carers are registered and trained to use upon being approved. This is to ensure that the information is received more swiftly and is held and shared much more securely. Information submitted via the portal go directly into Liquid Logic, and an alert is automatically sent to the child's social worker, as well as the fostering social worker.

For a small number of foster carers hard copy forms are still in use, this system is not as secure as it involves paper copies being processed by the papers moving around offices. Suffolk's preferred and secure way is via the portal.

Logs and Diaries

Foster carers may keep information within a diary or family log that documents the daily events of the child/s life, this could be keeping in touch with birth family times, social groups they attend etc. Any information about the child should be kept secure and locked away in the same way as if it were stored on an electronic device which would be kept locked and password protected. This information should not be visible to anybody but the foster carers.

Medication Record

Medication record reports are on the portal as a standalone form. These allow an accurate and clear record of when a child has required medication; why it was needed, what it was, dosage, frequency and how long it was required for. Both medications prescribed by a GP and over-the-counter medication should be recorded. When caring for a child with multiple complex needs the service provide the carer with a book of medical forms, these forms will be recorded on by the carer and then sent into the allocated social worker of the child so these can be stored on the electronic file.

6. How and What to Record

- Keep the recording simple, clear, and legible.
- Notes do not need to be lengthy, just the main points.
- Keep to factual information and avoid making judgements.
- Where opinion is expressed make it clear that this is the case.

What to Record

Remember to include positive as well as negative events. The following list is not exhaustive but is meant to give some ideas about the expectation of information to be recorded:

- Details of family time visits with the child's family, child's reaction to family time (observations of the child before and after);
- Details of any other forms of family time – telephone calls, letters, birthday cards etc.;
- Details of visits, meetings with social workers or other professionals and the child's reaction if any.
- Dates of medical appointments and any treatment given. Includes dates of cancelled or rearranged appointments.
- Dates and details of medication given, both prescribed and over the counter medication like paracetamol or Calpol.
- Dates and types of immunisations;
- Date, type and length of illnesses.
- Details of any accidents or injuries, however slight. Describe what, when, where and how it occurred. Name any witnesses and any action taken. Record the time, date, and the name of the social worker to who the incident was reported.
- Any comments the child makes that give you cause for concern. Always record using the child's own words.
- Details of the child's behaviour and any changes noted, positive or negative. Note their actual behaviour, what happened before it started and how it was responded to.
- Any positive improvements, achievements, and happy events for the child.
- Dates when the child is away from the foster home – with family, friends, school trips, introductions to new carers or if they are missing from home.
- Details of times when the child is with alternative care givers such as babysitters and who they were.
- Any significant contact with the school or nursery such as comments about the child's behaviour or parent's evenings.
- Any involvement with the police.
- Details of any specific incidents, events or changes of circumstances in your household.
- Any significant milestones in the child's development such as their first words or first steps. Some of these details may be recorded separately, for example on parent held medical records, school reports, assessment and action records or life story books.
- Any other significant event or information.

Significant Incident Sheets

These sheets are for incidents that require more details, are more concerning or serious in nature and where it is important that detail is not lost. Under Schedules 6 & 7 of The Fostering Services (England) Regulations 2011 the local authority has a statutory duty to report incidents relating to children in care. If the foster carers are in any doubt please seek advice from your supervising social worker,

but if you think that an incident might need this then you are probably right!

These sheets must be completed to record:

- **Accident/injury/illness** – where the child needs to attend hospital or urgently see a doctor. This would also apply if the injury is self-inflicted. The social worker for the child should be informed as soon as possible if an accident has occurred.
- **Involvement with the Police**
- **Behaviour or conversation of concern** – This would include where a child does or says something that worries or concerns you, feels unusual, is out of character or mentions events that seem odd. Similarly, if a child tells you of physical/sexual abuse occurring now or from the past. Wherever possible record the actual words used. If abuse is disclosed listen carefully, reassure the child, and seek advice from the child's social worker or supervising social worker as soon as possible. Do not probe or ask lots of questions.
- **Child missing from home** – this includes where missing and reported to the police or missing for a concerning period of time.
- **Incidents involving physical restraint.**

Significant incidents can be submitted via a form on the Suffolk Children's portal. However, if the incident requires an urgent response, we ask that you additionally send details by email to your fostering social worker, to ensure it is flagged as a high priority communication.

7. Storage and Retention of Records

During the course of a placement, foster carers must ensure that information is kept secure and cannot be accessed by anyone else. This should be in a locked file or cabinet, or secure use of a SCC computer (locked and password protected).

At the end of a placement, any reports or other records provided to the foster carer or kept in respect of the child must be returned to the child's social worker or their supervising social worker.

If the foster carers want to retain any information, they have kept on a child this needs to be discussed with their supervising social worker and an agreed plan on timescale and reasons written within the foster carer's supervision record.

Other information, such as diaries, should be retained securely by the foster carer and then passed to Suffolk County Council via either their supervising social worker or the child's social worker.

If foster carers cease to foster, any documentation will need to be disposed of via a confidential route. The foster carers must discuss this with their supervising social worker.

8. Recording and Information Sharing for Staying Put Arrangements

For foster carers who transition from caring for a fostered child to supporting them as a young adult through a Staying Put arrangement, there are important changes to recording and information-sharing expectations.

Once a young person reaches the age of 18, they are no longer a Child in Care and are recognised as an adult in their own right. As a result, the approach to recording and information sharing must reflect their right to privacy, confidentiality, and autonomy.

In most circumstances, Staying Put carers will no longer be expected to complete foster carer recordings relating to the young adult, including medication records, unless there is a specific and agreed reason for doing so. Consideration should also be given to how information is shared with professionals and services involved in supporting the young adult.

This change reflects the young adult's rights under data protection legislation, including UK GDPR, and aims to achieve an appropriate balance between respecting the young adult's privacy and ensuring carers remain supported to share information that is necessary to promote safety and wellbeing.

We recognise the significant commitment made by carers who continue to support young adults through Staying Put arrangements. Effective communication between the Staying Put carer, the Next Steps Team, and the allocated Staying Put Supervising Social Worker remains essential, particularly where there are safeguarding concerns, welfare issues, risks within the household, or other matters requiring professional support or intervention.

When sharing information, carers may wish to refer to the young adult by their initials. Supervising Social Workers may also reference the young adult's Liquidlogic identification number where appropriate. This approach enables information to be shared proportionately while maintaining the young adult's privacy and confidentiality.

Recording and sharing concerns in this way helps to ensure that:

1. Relevant safeguarding and welfare information is recorded on the young adult's record rather than within the foster carer's personal recording system.
 2. Information is accessible to the professionals responsible for supporting the young adult.
 3. Confidentiality and data protection requirements are appropriately considered.
 4. The privacy, rights, and independence of the young adult are respected.
 5. Risks to the young adult, other household members, and any children living in the fostering household can be identified, assessed, and responded to appropriately.
- This approach recognises the important role Staying Put carers continue to play in identifying and sharing concerns, while ensuring that information is recorded in a proportionate manner that reflects the young person's status as an adult rather than a Child in Care.

Key Principle

Staying Put carers should continue to share significant concerns, safeguarding issues, welfare matters, and risks with the appropriate professionals. However, information relating to the young adult should ordinarily be recorded and managed within the young adult's own record and support pathway, rather than through foster carer recordings.