

Bedroom Sharing Policy for Fostering

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About This Document

| Title | Bedroom Sharing Policy for Foster Carers |
|---------------------|---|
| Purpose | Guidance and policy regarding children and young people sharing bedrooms in the fostering household |
| Updated by | Rosemarie Cronin, Fostering Panel Advisor |
| Approved by | Fostering Board |
| Date | September 2022 |
| Version | 8.0 |
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Version Control

| Date Issued | Version | Summary of Changes | Created by |
|----------------|---------|---|------------------|
| September 2015 | 5.0 | Review of document, no changes required | Rosemarie Cronin |
| Noveber 2015 | 6.0 | Included information regarding babies sharing a foster carers bedroom | Rosemarie Cronin |
| October 2016 | 7.0 | Update of some terms but no significant changes required | Rosemarie Cronin |
| September 2022 | 8 | Reviewed. No significant changes other than the development of the risk assessment tool being created on mosaic. In the interim the current agreed tool has been added as an appendix | Rosemarie Cronin |

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1. Legal Context

- 1.1 This policy is based on the 2011 National Minimum Standards (NMS), Fostering Regulations and Statutory Guidance for Fostering Services and Family and Friends Care: Statutory Guidance for Local Authorities.
- 1.2 Standard 10.6 (NMS) states "In the foster home, each child over the age of three should have their own bedroom. If this is not possible, the sharing of a bedroom is agreed by each child's responsible authority and each child has their own area within the bedroom. Before seeking agreement for the sharing of a bedroom, the fostering service provider considers any potential for bullying any history of abuse or abusive behaviour, the wishes and of the children concerned and all other pertinent facts. The decision-making process and outcome of the assessment are recorded in writing where bedroom sharing is agreed".
- 1.3 Statutory Guidance for Family and Friends Care 5.30 states "Children living with family and friends foster carers have the same rights to privacy and suitable sleeping accommodation as other looked after children, but these should be viewed as part of the total assessment of suitability, to be balanced against other factors. A child who would be unhappy to share a bedroom with a child unknown to them may not mind sharing with another child who is a relative and who they know well. They may already be living in the carer's home and happy with the overall situation. In approving the foster carer, the fostering service will need to be satisfied that there is adequate space to a suitable standard, as set out in Standard 10.6 of the NMS or if this is not the case, set out proposals as to how it will be met in the future. The wishes and feelings of the child will be an important factor in helping the social worker to assess the suitability of the accommodation."

2. Essex Fostering Service Policy and Procedure regarding bedroom sharing for children in care

- 2.1 Foster carers can have children, up to the age of two, in their bedroom. After the child's second birthday it is expected that they should have their own bedroom unless there are exceptional circumstances or needs. If this is case the social worker should undertake an assessment of the risks and issues and ensure this is recorded on the foster carer record.
- **2.2** Where possible, the fostering service will aim for all looked after children over the age of three to have their own bedroom.

- 2.3 If children will be expected or would prefer to share a bedroom, a risk assessment must be carried out for each individual child prior to the children sharing a bedroom. This should be done in conjunction with the child's social worker(s) and must include the wishes and feelings of all the children who would be involved in this arrangement. The template is currently a word document (See Appendix 1) but is currently being reviewed and will be created as a form on the foster carer electronic filing system.
- 2.4 The risk assessment should be kept on the foster carer's file. If it is concluded that sharing a bedroom is the best way to promote the child's welfare and keep them safe this should also be recorded by the assessing or supervising social worker on the foster carer record.
- **2.5** If there is a change in the circumstances of any of the children who are sharing a bedroom which will impact on the welfare or safety of that, or any other child, the risk assessment must be updated and reviewed.
- **2.6** If foster carers are taking children away on holiday and the accommodation requires children to share a bedroom, if there is not already a completed risk assessment this must be completed.
- 2.7 Any bedroom sharing and the conclusion of any risk assessment must be recorded on the Placement Plan for all the children involved. This should be reviewed as part of the care plan in the child's statutory review.
- **2.8** If children are sharing bedrooms this should be considered and recognised within the foster carer's family safe care plan.
- 2.9 If children are sharing bedrooms it should also be considered as part of the annual review of approval for carers to ensure that this is still an appropriate arrangement.

Appendix 1 – Risk Assessment Template

Name of Carer:

Name of Assessing or Supervising SW

| | NAME OF CHILDREN WHERE SHARING IS PROPOSED | D.O.B. | Name of child's social worker contributing to this assessment |
|---|--|--------|---|
| 1 | | | |
| 2 | | | |

| 1. Background History | Comments | Comments |
|--|----------|----------|
| | Child 1 | Child 2 |
| Brief family history | | |
| Significant placement history if applicable | | |
| Historical information of abuse being a victim or perpetrator and how this has impacted on the child or young person. | | |

| Issues around violence | |
|------------------------------|--|
| Issues around allegations | |
| Issues around offending | |

| 2. RISK FACTORS | How will this be managed to reduce or minimise the risks Child 1 | How will this be managed to reduce or minimise the risks Child 2 |
|--|--|--|
| 2.1 Risk to self | | |
| Self-harming behaviour | | |
| Health risks | | |
| • Missing | | |
| Mental health issues | | |
| Previous concerns raised | | |

| • Ability to expressed wishes and feelings | |
|--|--|
| 2.2 Risk to others | |
| | |
| Risk from | |
| violence | |
| | |
| Aggressive | |
| behaviour | |
| Denavioui | |
| Communication | |
| skills and | |
| difficulties | |
| | |
| Substance abuse | |
| | |
| Sexualised | |
| behaviour | |
| | |
| Challenging | |
| behaviour | |
| Schutiou | |
| Gang affilliation | |
| _ | |
| | |

| How does the child get on with other children Ability to share belongings and toys. | | |
|--|----------|----------|
| Previous | | |
| allegations against foster | | |
| carers or staff | | |
| 3. Child or Young person's views. | Comments | Comments |
| Current or previous foster carers views | | |

5. ANY OTHER FACTORS TO BE CONSIDERED (BEDROOM SHARING)

- Bedroom layout enough personal space and privacy
- Individual specific requirements e.g. night lights, bedroom routine, door left open etc
- Medication and night waking
- Is there enough storage space for meet all children's needs
- Safer carer plan to updated to include self-care
- How would the room be personalised for all children sharing
- Does an O.T assessment need to be completed for any child sharing a bedroom
- Can the bedroom accommodate any specialist equipment <u>COMMENTS</u>

6. Summary and Analyis : SSW should complete this in consultation with all child care social workers and foster carer.

Agree review timescale

Recommendation

Have IRO's been informed Yes/No/Not applicable

Assessing or Supervising Social Worker Print Name

Signed

Date Completed _____