

Health

Description

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<https://sparksfostering.org/wp-content/uploads/speaker/post-6147.mp3?cb=1730223087.mp3>

[Previous Page](#)

[Next Page](#)

Promoting the health of children

Promoting the health of children and young people in foster care is very important so that the children can grow into happy, emotionally stable, well balanced adults.

Many children have poor health when they first become looked after, and Sparks Fostering has a duty to promote the health and development of children placed with foster carers. Attention must be paid to both their physical, emotional and mental health. Foster carers must provide a healthy environment, where children's good health and wellbeing is promoted, their health needs are identified and services are provided to meet their needs.

Foster carers, with support from Sparks Fostering staff, health professionals and the child's social worker, are responsible for the day to day health of children placed into our care.

Specific responsibilities of foster carers should be set out in the child's health plan and the placement plan.



Promoting wellbeing

Key principles of caring for children's health include:

- Children's physical, emotional and social development needs are promoted.
- Sparks Fostering and its carers always place the well-being of individual children at the centre of their practice.
- All children's achievements are celebrated and appropriately rewarded, to promote children's wellbeing and motivation.
- Their day-to-day needs are met, such as routine, privacy, personal space and nutritious meals.
- Children exercise choice in the food that they eat and are able to prepare their own meals and snacks, within the context of the child's abilities, foster family's decision making and the limits that a responsible parent would set.
- Members of the fostering household aim to role model how to live a healthy lifestyle.
- Children are encouraged to participate in a range of positive activities that contribute to their physical and emotional health. See Sparks Fostering policy 'Leisure'.
- The care and help provided assist the children in our care to develop a positive self-view and to increase their ability to form and sustain attachments and build emotional resilience and a sense of their own identity.
- The care and help also help them to overcome any previous experiences of neglect and trauma.

Delegated authority

Foster carers should receive confirmation of delegated authority either before the child is placed in the fostering home, or at the latest at the placement planning meeting. The signed form should confirm if the child placed has allergies, what medications can be given to the child, if over the counter medication can be used, that the child can be registered with a local GP, dentist and optician, if immunisations can be carried out, and any other relevant issues. Sparks Fostering has a template to record delegated authority if the child's social worker doesn't provide the form.

Health assessment

The first health assessment should take place and the written report be completed before the child is first placed by the local authority. If this is not reasonably practicable, then the assessment and a written report should certainly be complete before the first review of the child's case.

Health assessments should take place:

- At least once every six months in the case of children aged under five; and
- At least once every 12 months in the case of children aged five and over.

When a health need is identified, the carer and social worker must be proactive in ensuring that the need is met appropriately and in a timely way. Identified needs and actions taken should be recorded on the child's records.

Access to services

Foster carers must make sure that each child is properly registered with a GP, preferably their own prior to being looked after, or if that is not possible, with a local GP. They must make sure that each child sees a dentist regularly, is referred where necessary to an optician and is provided with any aids or equipment required by particular health needs or disability. These responsibilities should be undertaken in conjunction with the child's social worker.

All children in our care should have access to local health services when they need them, including specialist services (in conjunction with the responsible authority), when they need these services. Foster carers and agency staff develop effective relationships with health professionals to promote good health.

Children who have significant struggles with their emotional and mental health may be referred to CAMHS (Child and Adolescent Mental Health Services). CAMHS helps children and young people with their mental health and well-being and is usually provided by a multi-disciplinary team of mental health professionals. If there are delays in a referral being accepted by CAMHS, suitable alternatives (or temporary arrangements) should be explored by the child's social worker with the team around the child.



Medication and equipment

Children are given medication, support, aids, and equipment needed to manage their health needs. Arrangements for managing medication are safe and effective and promote independence whenever possible. Medicines kept in the foster home are stored safely and are accessible only by those for whom they are intended. When it is required, foster carers are trained in the management and administration of medication. Prescribed medication is only given to the child for whom it was prescribed, and in accordance with the prescription. Children who wish to, and who can safely keep and take their own medication, do so.

Where children have specific health issues or conditions, they should be supported to manage them and to avoid any potential embarrassments or difficulties. Whilst children should be supported to keep and administer their own medication, care must be taken to ensure that they are responsible enough to do so, or will be able to do so with adequate support and oversight.

Where a child needs additional input to promote their health, foster carers and staff of the fostering service need to work with the social worker to ensure they have proper and immediate access to other medical, psychological or psychiatric support needed. This should be identified by the health assessment and set out in the health plan.

Arrangements should be in line with those that any good parent would make, taking account of the individual needs and capacity of the child. Foster carers keep a written record of all medication, treatment and first aid given to children during their placement.

Smoking, alcohol and drug use

Any alcohol or tobacco in the home should be stored securely in a locked cabinet, so that children are not able to access them.

It is against Sparks Fostering policy for a child under the age of 5 to be placed in a home where a member of the household smokes cigarettes or vapes. Further information about smoking in the foster home is provided in the 'Safer care policy'.

If a young person has drunk alcohol, smoked tobacco, or used any substances, their health must be monitored until they are fully recovered. They should be offered plenty of water or other fluids. 111 should be called if there is any uncertainty about the young person's health, and 999 should be called if there are serious concerns about the child's health. Greater precautions should be used for young children and/or children with additional needs. A comprehensive write up of the incidents will be required for the child's records.

The child's social worker and supervising social worker are notified (by the foster carer and/or supervising social worker) on every occasion that a child smokes, drinks alcohol or uses alcohol. The child's plans are amended to put appropriate safety plans in place to support the child.

Personal, Social, Health and Economic (PHSE) Education

Children and young people receive PHSE education at school and foster carers may be required to further explain the topic to children when at home. Foster carers are expected to attend any workshops or information sharing sessions that are offered by the child's school, and to read any supplementary information provided by the school. Further support can be provided by the child's social worker and/or the Sparks Fostering social worker. See 'Education Policy' for further information.

First Aid

All staff and foster carers are expected to read through the first aid information provided by the NHS on their website – [click here for access](#).

Staff and foster carers are also encouraged to attend face to face '[Paediatric First Aid](#)' training, which can be arranged through St John's ambulance (the fee is reimbursed by Sparks Fostering). Another option for a first aid provider is '[Mini First Aid](#)'.

Empowering children and young people

Children are supported to understand their health needs, how to maintain a healthy lifestyle and to make informed decisions about their own health.

Children's wishes and feelings are sought and taken into account in their health care, according to their understanding, and foster carers advocate on behalf of children.

Foster carers are mindful of supporting the children to develop their independence so that they are able to make good choices after they leave the placement as young adults.

Recording health updates

It is crucial to the role of foster carers that any use of medication and any health problems (and support provided) are recorded on the child's records. Foster carers should also carefully review this policy and record any relevant information and actions outlined within it.

Additional resources (optional)

Attachments and relationship-building

[Video Interaction Guidance \(VIG\)](#) -Vig is a brief, evidence-based intervention that helps two people in any sort of relationship to build their bond and understanding of each other. By using a strengths-based and experiential approach, VIG can enhance carers' confidence in their skills. VIG promotes sensitivity, attunement and mentalization in relationships. VIG uses real footage of a carer and child interacting together to look closely at what is going well. After analysing together what is already working, the practitioner will help the carer to apply these strengths and ideas to other areas which may be more challenging for the carer and child. Over 3 or 4 sessions, the carer is encouraged to make changes and review how this is helping them work towards their goals.

Child development

Brain development: Our brains develop from before birth and into adulthood (Siegel and Bryson, 2012). But there are key 'sensitive periods' during early childhood and adolescence where children and young people's brains are more affected by positive or negative experiences (Shonkoff et al, 2008). What happens in a child or young person's life during these periods can have a significant effect on their brain development? [Read more on the NSPCC website.](#)

Continence issues: All children develop differently. Some may achieve bladder and/or bowel continence quickly, while others might find it more challenging to develop the skills they need. [Read more on the NSPCC website.](#)

Emotional and mental health

[Child mental health: learning from case reviews.](#) Briefing from NSPCC.

[Free meditation resources.](#) By 'Teaching Positive Connections'.

[Free mindset lesson plan.](#) By 'Teaching Positive Connections'.

[Free wellbeing curriculum samples.](#) By 'Teaching Positive Connections'.

[Kooth](#) – Free online emotional and mental health support for young people.

The '[Happy Confident Company](#)' provides resources to help children to develop self-belief, resilience and compassion.

[Hearty app](#) offers pre-selected ideas for spending quality time with kids who are developmentally age 4 to 10. These activities are good to build attachments between the child and carer.

[How a soothing box can help your child feel safe or calm.](#) An article by Action for Children.

[How can I help my child to share their worries with me?](#) Useful tips from Action for Children.

[How can I help my child with their self-esteem?](#) An article by Action for Children

[How can I help my child share their worries with me?](#) An article by Action for Children

[How can I help when my child feels anxious?](#) From Action for Children.

[How can I support my child's emotional literacy?](#) An article by Action for Children.

[How to practice mindfulness at home with children.](#) By Action for Children.

[Interactive tool teaching how to speak with men struggling with emotional health](#) – by 'Movember Conversations', developed by mental health experts. Movember is the leading charity changing the face of men's mental health.

[Konan – Trapped in trauma: UNTOLD.](#) Rapper Konan gives intimate access to his own therapy

sessions as Untold's exclusive data analysis reveals more than 300,000 16 to 24-year-olds are struggling with PTSD, many of whom are undiagnosed.

[List of self-care activities](#) – by Anna Freud (a world-leading mental health charity for children and families)

[Mindful Mazing](#) – Social/emotional tools (worksheets) for children.

[Mini Minds Matter](#) – is a daily dinosaur themed approach that supports the mental health and wellbeing of children. It incorporates mindfulness, affirmations, meditations and encourage a growth mindset. The approach has been specifically written and tailored for children by an Early Years Specialist and a qualified Paediatrics Nurse who specialises in Neurology.

[Mood and anxiety disorders in the children of depressed parents](#) – a podcast by The Association for Child and Adolescent Mental Health.

[My Happy Mind](#) – Helping schools, nurseries and families create a culture of positive mental wellbeing. (Backed by NHS)

[Parenting advice from child mental health experts](#). A number of articles (including videos) by 'Parenting Smart'.

"Reframing Your Thoughts toolkits – helping children to understand and manage their big emotions and feelings; think about and approach things in life in a way that promotes their confidence, happiness and resilience; and navigate a wide range of different scenarios. They have a [6-12 toolkit](#) and a [teenage version](#).

[Stress and mental health presentations in secondary school-aged young people](#) – a recording by The Association for Child and Adolescent Mental Health.

[Taking care of your mind lesson plan \(year 4/5/6\)](#). By 'Teaching Positive Connections'

[Teenagers anger management printable bundle](#)

[The Internalising Paradox – Youth Anxiety and Depression Symptoms](#). A podcast by The Association for the Child and Adolescent Mental Health.

[The self-regulation workbook for kids: CBT exercises and coping strategies to help children handle anxiety, stress, and other strong emotions](#).

[The Sunflower Network](#) provides support, connection and specialist training in the field of child mental health.

[Foetal Alcohol Spectrum Disorders \(FASD\)](#)

[FASD \(Foetal Alcohol Spectrum Disorder\): Understanding the diagnosis](#). Podcast by The Association of Child and Adolescent Mental Health.

[Foetal Alcohol Spectrum Disorder](#). A summary by the NHS.

Foetal Alcohol Spectrum Disorders (FASD) are linked to poor impulse control; difficulties with emotional regulation; issues in retrieving and storing information; issues in receptive language; poor auditory functioning; and specific facial features (in around 10% of cases). Read [this short article](#) by the National Association of Fostering Providers to learn more. Also, see further information on the '[FASD Network](#)' website.

Healthy eating

[6 tips for cooking culinary delights for foster children](#) (an article by 'Elle Blonde').

[Tips for when your child is a fussy eater](#). A short article from Action for Children.

Sexual health

'[Brook](#)' has a range of publications which may be helpful in supporting young people with their relationships and sexual health.

Sleep advice

[Helping a child who is struggling to sleep](#). By 'Teaching Positive Connections'.

Sleep advice from Action for Children

[Activity: Wind down before bed to fall asleep faster.](#)

[How can I help my teenager sleep better?](#)

[What can I do if my child has nightmares?](#)

[What can I do if my young child won't sleep?](#)

[When and how should I move my baby out of my bedroom?](#)

[Why won't my baby settle?](#)

Smoking, vaping, drugs and alcohol use

[Disposable vapes banned to protect children's health](#) – Press release from government.

[Drug addiction: getting help](#). On the NHS website.

[Drugs and alcohol: A guide for parents and carers](#) – by 'Young Minds'

[Talk to Frank](#) – information about all substances.

Misc.

[30 day social emotional learning challenges](#). A different challenge for every month of the year. By The

American Coaching Academy.

[How do I use a sleep diary with my child?](#) Action for Children advises how to use a sleep diary for children who are between six months and five years old and are have disturbed sleep from time to time.

[Safeguarding children with disabilities and complex health needs in residential settings.](#) A briefing from the NSPCC.

[Safeguarding d/Deaf and disabled children and young people.](#) By the NSPCC.

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