**Individual safer caring plan for:**

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| **Child’s name** | **DOB** |
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| **Foster carer’s name** | **Foster carer’s name** |
|  |  |
| **Date form completed:** |  |
| **Date of last review of plan:** |  |
| **Names of those consulted in writing this plan:** |

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| **Name** | **Relationship to Child** |
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| **Has a full history and chronology of the child been received?**  | Yes ☐ No ☐  |
| **Action required:** |
| **Brief summary of child’s care history, including any previous allegations or significant incidents (e.g. experience of abuse, being harmful to others, placement breakdowns):** |
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| **Additions to the family safer care plan in LCS required for this young person are as follows (note if no changes required e.g. “**as per family plan**”):** |
| **Showing affection or displeasure:**  |
| **Managing behaviour:**  |
| **Stopping bullying:** |
| **Bathroom and toilet use:** |
| **Dress:** |
| **Language:** |
| **Activities in the home:** |
| **Activities outside the home (and level of supervision):** |
| **Bedrooms:** |
| **Going out:** |
| **Travelling:** |
| **Photographs:**  |
| **Sex and sexuality:**  |
| **Sharing information with our/my supervising social worker:**  |
| **Smoking/vaping and alcohol:**  |
| **First aid and medication:** |
| **Household pets:**  |
| **Does the young person present sexually harmful behaviour toward others?** |
| **Describe behaviour and risk** | **How is this best managed in and outside of home** |
|  |  |
| **Is the young person at risk of sexual exploitation?** |
| **Describe behaviour and risk** | **How is this best managed inside and outside of home** |
|  |  |
| **Is the young person at risk of radicalisation?** |
| **Describe behaviour and risk** | **How is this best managed inside and outside of home?** |
|  |  |
| **Is the young person at risk of going missing?** |
| **Describe behaviour and risk** | **How is this best managed inside and outside of home?** |
|  |  |
| **Does the young person self-harm?** |
|  **Describe behaviour and risk** | **How is this best managed inside and outside of home ?** |
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| **Does the young person pose a risk of violence to others?** |
| **Describe behaviour and risk** | **How is this best managed inside and outside of home?** |
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| **Any other safer caring issues: please include how the child is best comforted when distressed, including night time routines.** |
| **Describe behaviour and risk** | **How is this best managed inside and outside of home?** |
|  |  |
| **Provision of intimate care:** |
| **Describe the care need** | **How will this be undertaken, where, and by whom (please consider and record the young person’s expressed wishes regarding this)** |
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| **Is there an impact from the needs of this child upon the carers’ own children and other children living in the household?**  |
| **What is the impact?** | **How is this being mitigated?** |
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| **Signed *(f*oster carer 1)****Date** |  |
| **Signed (foster carer 2)****Date** |  |
| **Signed (supervising social worker)****Date** |  |
| **Signed (child’s social worker)****Date** |  |