**Early Permanence Placement**

**Matching Report Draft**

The Early Permanence Matching Report is to be presented to the Agency Decision Maker and read in conjunction with the following documents.

* Adopters AAR / PAR
* Adopters ADM decision and any reviews
* Adopters approval panel minutes
* Child CPR (where available)

**The Child(ren)**

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| **First Name (proposed)** | **Surname** | **Date of Birth** |

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| --- | --- |
| **Ethnicity** | **Religion** |

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| **Current Legal Status** | **Date of decision to progress to care proceedings** |

**Birth Mother**

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| **First Name** | **Surname** | **Date of Birth** |

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| **Ethnicity** | **Religion** |

**Birth Father/Putative father**

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| **First Name** | **Surname** | **Date of Birth** |

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| **Ethnicity** | **Religion** |

**Details of siblings of the child being considered**

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| First Name: | Surname: | Date of Birth: | Ethnicity: | Is sibling to be placed in EP placement? |

**Prospective Early Permanence Carers/Adopters**

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| **First Name(s)** | **Surname** | **Date of Birth** | **Gender** | **Ethnicity** |
| **First Name(s)** | **Surname** | **Date of Birth** | **Gender** | **Ethnicity** |

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| **Children in the family** | **Date of Birth** | **Gender** | **Ethnicity** |

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| **Date of Approval Panel** | **Name of family’s agency (if relevant)** |
| **Date of EP training attended** |  |
| **Details of DBS** | **Carer 1**  **Name:**  **Date received:**  **Reference number:**  **Any concerns:**  **Carer 2**  **Name:**  **Date received:**  **Reference number:**  **Any concerns:** |

**The child**

*To be completed by the Child’s social worker*

1. Describe the child’s pre-birth story as best you can e.g. how did the birth mother experience the pregnancy with regard to her health and wellbeing and her emotional and social situation at that time, did she receive prenatal care?

For children already born, describe the reasons for them coming into care as best you can e.g. how did the child experience life at home in the care for parents/extended family?

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1. Describe the child’s physical characteristics, ethnicity, birth information, health and general wellbeing.

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1. Describe the child’s personality, likes and dislikes if applicable (for slightly older children).

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1. Have you consulted with the legal department and are Cafcass aware of the early permanence plan? If so, what are their views?

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1. Have discussions taken place with the IRO and wider care team? If so, what are their views?

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1. What are the current/anticipated legal timescales and court timetable for the child?

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**Siblings**

Please give a full description of each sibling including their age, current placement, personality and characteristics, health and wellbeing and development. Please be clear if the child in need of an Early Permanence placement is to be placed with any of these siblings.

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**Birth Parents**

1. Brief description of the birth mother, including her personality, health, social and emotional well-being and if there are any concerns, for example mental health issue, learning disabilities, any family history in relation to this.

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1. Brief description of birth father/putative father, including his personality, health, social and emotional well-being and if there are any concerns, for example, mental health, learning disabilities, any family history in relation to this.

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1. Brief description of the birth parents relationship including the current status of the relationship.

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1. Summaries of the assessments (including any initial or pre-birth assessments) which have been completed and the reasons why the Local Authority believes the child cannot be safely cared for within their birth family at this time.

This should outline why an Early Permanence Placement is needed.

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1. Clearly state what the birth parents are required to do to evidence their ability to care for the child safely in the future.

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1. What are the birth parents wishes and feelings of the proposed Early Permanence placement? How have they been supported to understand what this means for their child?

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**Birth Family/Connected Persons**

Have any birth relatives/connected persons been considered and/or assessed? If so, please outline the assessment.

This should include details of any outstanding family members yet to be approached and the timescales for when they will be contacted.

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**Family Time plan**

Has a meeting taken place or is a meeting planned between the birth parents and early permanence carers?

NAMES are willing to take part in a face to face meeting with birth parents. This meeting would be facilitated by the child’s social worker and RAA adoption social worker.

Please describe the proposed frequency of contact during proceedings and what is expected of the early permanence carers.

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| **Name** | **Relationship** | **How often does Family time take place?** | **Where does the**  **Family time take place?** | **Who transports the baby/child to family time** | **Is the family time supervised? If so, by whom?** |
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What post adoption contact might be considered in this situation e.g. if face to face keeping in touch will be or is likely to be sought with sibling/s or a birth family member should a plan of adoption be the local authority’s final care plan and ratified by the Court.

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**Early Permanence Carer(s)**

*To be completed by the Early Permanence Carer’s social worker*

1. Any changes to the early permanence carer/s circumstances since the writing of the PAR. This must include any changes or updated heath information.

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1. Describe what has led you to decide that these particular early permanence carers are the right match for this child.

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1. Are you satisfied these particular early permanence carer/s understand the particular uncertainties in relation to this Early Permanence placement and the possibility of the child being rehabilitated with a birth parent/family member.

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1. What information has been provided to the Early Permanence carer/s about the child and in what format?

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1. Date information shared with carers

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**MATCHING CONSIDERATIONS**

*Detail under the following headings how the proposed early permanence (EP) carer/s can meet the needs of the child identified for placement.*

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| **Child needs in relation to the following areas**  *To be completed by Child’s Social Worker with responsibility for the child* | **How will the EP carer/s meet these needs** *(give reference, experience, abilities and skills, personal qualities and any other considerations)*  *To be completed by EP carer/s Family Placement Social Worker* |
| **Basic Care Need / Child Development** | |
| *Basic core needs of child i.e. baby care needs* | *How will carers meet these needs* |
| **Health** | |
| *Any particular health needs, ongoing appointments etc.* | *Register with GP, who will attend hospital/medical appointments.*  *Have relevant health professionals been informed of the plan and provided with the health professionals information leaflet e.g. hospital staff, health visitors, midwives etc.* |
| **Identity** | |
| *Child’s racial and cultural background, religion/cultural wishes of parents* | *How will carers meet this need* |
| **Emotional & Social Needs** | |
| *Attachment/nurturing needs* | *How will the family invest in building attachments with child given the uncertainty of the placement.* |
| **Any other** | |
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**Summary of Strengths and Vulnerabilities of this placement**

*To be completed by the Child’s social worker and Early Permanence Carers social worker*

(Please list)

**Strengths**

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**Vulnerabilities**

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**Part 4 - SUMMARY OF SUPPORT PLAN**

**Financial and Practical Support**

Early permanency Carers are eligible for a fostering allowance per week. This will be paid from the start of the placement up until the child is rehabilitated to birth family or placed under Adoption Agency Regulations at point of adoption match decision.

If applicable give details of any additional financial support agreed.

**Support Needs of Early Permanence Carer(s)**

*It is important to acknowledge that as this is likely to be the first foster placement with a new foster carer a high level of support will be required.*

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| **Basic Support Services** | **Provided by** | | |
| **RAA Insert Agency**  **adopters agency** | **Child’s Social Worker** | **Supervising social worker** |
| **Social work visiting requirements** | The Early Permanence Carer/s Adoption Social Worker will visit the EP carer/s weekly for the first month of placement until the first LAC review. | The child’s social worker will visit weekly for the first month of placement until the first LAC review. This can be shared with the Adoption Social Worker.  The child’s social worker will be expected to liaise regularly with the EP carer/s and the adoption social worker. | The supervising social worker will visit weekly for the first month of placement, or up until the first LAC review. This will be to offer support regarding the EP carers role as a foster carer. |
| **Support at meetings and reviews** | Adoption social worker will attend all meetings and reviews with the EP carers and will ensure they feel supported.  This may include supporting the EP Carers to join virtual meetings. | The child’s social worker will assist with support at meetings and reviews.  They will attend meetings with the EP carers if the adoption social worker is not attending or if it is more appropriate for the child care social worker to be present.  The Child’s social worker will arrange Care Team Meetings if required. | The Supervising social worker will arrange and chair the Placement Planning meeting for the child.  Subsequently, the Supervising Social Worker will attend meetings to support the EP carers in their role as a foster carer. |
| **Support at appointments e.g. medical/hospital/with guardian** |  | The child’s social worker will attend hospital appointments with the EP carers if required. |  |
| **Support group/buddy/arrangements for peer support** |  |  | Supervising social worker may buddy the EP carer with another experienced foster carer if felt needed.  Supervising social worker to sign post to any Foster Carer training the EP carer wishes to attend, e.g. allegations and recording training. |
| **Any additional support required** | **Include** who will discuss and support the carers to discuss and manage transport for supervised family time if appropriate  Discuss support and discuss | As this is an Early Permanence placement it is important that placement details are kept **confidential** and the EP carer’s surname or contact details are not divulged to birth parents.  Child’s social worker to update all care team members that the child’s placement is now under Early Permanence Regulations and ensure shared confidentiality is understood.  The child’s social worker to support the carers to manage transport for supervised contact if appropriate. | Supervising social worker to set up EP carers as foster carers and trigger Fostering Allowance payments. |

**Support Needs of Early Permanence Carer(s)**

Please state what additional support will be offered should rehabilitation become the agreed plan for this baby/child.

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**Training For Early Permanence Carers**

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| **Training** | Topics covered |  | **Date completed** | **Linking to Skills to Foster Training** |
| **Adoption Preparation Training** | * Who are the Children * Matching considerations * Backgrounds/birth family * How abuse and Neglect impacts on children’s development * Attachment * Trauma * Keeping in touch * Promoting identity * Family Finding * Introductions/   transitions   * The impact of loss * Safeguarding * Explaining adoption & Life Story Work * Post Adoption Support & Support Network * Guest speakers * Therapeutic Parenting |  |  | **Skills to Foster Training**  **Session 2:**  **Identity and life chances** Separation and Identity  Discrimination  **Session 5:**  **Understanding and caring for children**  Understanding Development  Attachment  Managing Behaviour  **Session 6:**  **Transitions**  Life work and Story books |
| **EP Training 2 day course** | * What is Early Permanence * The Legal Context * Being a Foster Carer – roles and responsibilities   + Includes   + Foster carer roles and expectations   + Delegated authority   + Sharing info with SW   + Supervision meetings   + Recording information   + Weekly/daily reports * Allegations and safeguarding * Understanding the perspectives of those involved in Early Permanence * Managing Family Time * Reunification of children and managing uncertainty * Consensual Adoption * The Importance of Support and Support network * Considering the needs of children that need Early Permanence * Placements and referral process * Benefits and Challenges of Early Permanence |  |  | **Session 1:**  **What do foster carers do?**  Why children come into care  Law about children in foster care  Health and safety  **Session 3:**  **Working with others**  Working in partnership with families  Working with professionals and the team around the child  **Session 4:**  **Safer Caring**  Abuse and Neglect  Safer caring  **Session 6:**  **Transitions**  Good goodbyes  Life work and Story books |
|  |  |  |  | **Session 7: Children of foster families**  Look at in assessment |
| Paediatric first aid training | To be completed pre placement |  |  |  |
| Practical parenting | Topics covered   * Bathing * Preparing a bottle and feeding * Weaning, including safety with baby led weaning and high chair ( not being strapped in) * Safer sleeping * Nappy changing * Teething * Potty/toilet training * Safety in the home * Car safety -car seats/travel seats/travel safety * Administering medication * Health visitor checks * Immunisations * Understanding ages and stages |  |  | **Section 4**  **Safer caring** |
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| **Post approval training** | **Once Early Permanence carers are approved within Reg 25a as temporary foster carers it will be the individual fostering agency who will have the responsibility of completing their individual Personal Development Plan hold the responsibility to undertake that training.**  **The PDP plan should recognise that Early Permanence carers will have a limited time as approved foster carers.**  **TSD workbook to be considered between 6-9 months of placement**  Each individual LA fostering service may have additional training that they would want carers to complete. |  |  |  |
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**Signature Page**

**Child’s Social Worker**

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| **Print Name:** | **Sign Name:** | **Date:** |

**Child’s Social Worker Team Manager**

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| **Print Name:** | **Sign Name:** | **Date:** |

**Adoption Social Worker**

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| --- | --- | --- |
| **Print Name:** | **Sign Name:** | **Date:** |

**Adoption Team Manager**

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| **Print Name:** | **Sign Name:** | **Date:** |

Agency decision

**Agreement to Placement under Regulation 22C(9B)(c)/Temporary Approval as a Foster Carer (Reg 25a)**

* **Having considered the supporting information in relation to the care planning for *name of child,* I am satisfied that placing *name of child* with foster carers who are also approved adopters under Regulation 22C(9B)(c) is the most appropriate placement for the child**,
* **I approve *name of applicant/s* as foster carers for a temporary period in compliance with Regulation 25A of the Care Planning, Placement and Case Review Regulations (2010).**

In accordance with Regulation 25A(3), the temporary approval will be terminated when any of the following situations apply:

• the local authority terminates the placement of the child with the prospective adopter/s;

* + the prospective adopter’s approval to adopt is terminated;
  + the prospective adopter/s is fully approved as a foster carer under the 2011 Regulations;
  + the prospective adopter/s gives notice to the local authority that they no longer wish to be temporarily approved as foster carer for the child;
  + the child is placed for adoption with the approved prospective adopter/s in accordance with the Adoption and Children Act 2002.
* **I am satisfied that placing *name of child* with *name of carer/s* is the most appropriate placement for the child, and it is in the child’s best interests to be placed with them;**
* **I am satisfied that the carer/s are suitable to care for *name of child* as a foster carer; and**
* **I consider that placing *name of child* with *name of carer/s* will safeguard and promote the child’s welfare and meet the child’s needs as set out in their care plan.**

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| **Signed** |  |
| **Print name** |  |
| **Position** |  |
| **Date** |  |

Agency decision – Continued

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| Comments and reasons for decision by Agency Decision Maker | |
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| Name: | Date: |

**Please sign the report below**

(Please note that you are signing an undertaking that you will keep information provided about this child safe and that it will not be shared with anyone else)

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| **Early Permanence Carer/s Name:** | **Early Permanence Carer/s Name:** |
| **Signature:** | **Signature:** |
| **Date:** | **Date:** |