

## HEALTH CARE AND DIET

Local Authorities should act as good parents in relation to the health of looked after children. Children in their care should be provided with good health care, including dental and optical care. This will include registering the child with a registered general medical practitioner and a dentist. It also involves ensuring that a child's emotional and social development is properly addressed.

When a child is placed with you their full medical history should be made available to you as soon as possible.

**Registration** It may be that the child placed with you will have a doctor/dentist/optician in the vicinity that they can continue seeing. If, however, the child is some distance from home, they can be registered with your own doctor. **Do not register the child with a doctor until they need to see the doctor.** A foster child can only be registered with your own doctor as a temporary patient for three months. If you register them as soon as they are placed the three months start ticking away. Once the three months are up their medical notes will be transferred to your doctor. For some children this can mean that their medical notes are permanently in transit.

Foster carers should let the child's social worker know of any serious illnesses or injury and should keep a record of childhood illnesses (mumps, measles etc.) and of immunisations. **Ask to have the child's red book.** This is the book held by all young children; it should have their immunisation record in it and other significant health information. If you receive a red book make sure it is passed on to the next carer

### Health Assessments

The Local Authority, as far as it is able, should before a placement is made, and if that is not possible, as soon as practicable after the placement is made:

- (a) Arrange for the child to be seen by a medical practitioner; and
- (b) Require the doctor undertaking the health assessment to make a written assessment of the state of health of the child and his need for further medical care. **You should receive a copy of this health care plan**

If this has taken place within the three months before the placement is made there is no need for the child to be seen again. This medical evaluation will be carried out by a Paediatrician. It is important that you attend the appointment with your foster child.

After the first medical evaluation reviews are carried out by health visitors or school nurses depending on the age of the child.

**Young people of sixteen and over give their own consent to medical treatment.**

**Children under sixteen may also be able to give or refuse consent**, depending on their understanding of the nature of the treatment - it is for the doctor to decide this. Children who are considered able to give consent **cannot** be medically examined or treated without their consent. The social worker and foster carer for the child should draw the young person's attention to his rights in this matter.

Do note however that a medical evaluation does not necessarily include an examination. Many young people have a lot of health concerns but they do not want to be examined. **Do encourage them to see the doctor.**

The placement with you can still be made even if the young person refuses a medical evaluation. It is, however, considered to be part of the foster carer's task to help and encourage young people to understand the importance of good health care.

After the initial placement medical evaluation there is a programme for future medicals. Children under the age of five should have their medical evaluation reviewed every six months until they reach the age of five. Children over five should have their medical evaluation reviewed on an annual basis.

The department will let you know when the medical is due. All charges for medical, dental and optical examinations within the National Health Service are met by the department.

If you are caring for a child less than five years of age, either the child's own or your Health Visitor will offer advice and support. For a child over five years the school Health Service will be involved. Should a child with disabilities be placed with you a range of support from the Community Health Team and specialist hospital services will be available to assist you.

If you have any concerns at all over the health of the child placed with you, do discuss it with their social worker.

## **MENTAL HEALTH**

It is important to promote good mental health in young people who often have a very low opinion of themselves. Try to identify small ways in which a young person can achieve some success and then praise them for the achievement. Do not belittle a child or their family even though you may be feeling very angry towards the child's family. A healthy diet and good sleep patterns can do a great deal towards promoting a child's sense of well being.

Despite all this some young people can present with disturbing or distressing behaviour. They may appear very depressed, have no appetite, have disturbed sleep patterns or suffer from extreme nightmares. Other young people might display extreme behaviour patterns. The Children and Adolescent Mental Health Services (CAMHS) have recognised the vulnerability of looked after young people and have created a specialist looked after young people team. The team offers specialist advice to foster carers and carries out assessments on young people. They also offer training courses for foster carers. If you have a particular concern about a child do ask about a referral to the CAMHS team.

## SEXUAL HEALTH

Many children and young people come into care because of sexual abuse, some will have been abused, others will have abused others, and some young people will have been inappropriately involved in sexual activity. A young person, even one who presents in a sophisticated way may have little, no or very inaccurate knowledge of the facts of life. Over half of young women are mothers within 18-24 months of leaving care. As part of our responsibility to promote the health and well being we have responsibility to promote their sexual health and well being. This involves not only preventing pregnancy at an early age but also helping young people to recognise the dangers of sexually transmitted diseases and of exploitive sexual relationships.

What can I do?

- If a young person is in or about to start a sexual relationship actively encourage them to attend the local contraception and sexual health service.
- Help young people to develop negotiation and assertiveness skills to assist them in resisting unwelcome sexual relationships
- Help young people to obtain emergency contraception if they have had unprotected sex.
- Go with them to the clinic if they want you to accompany them
- Have information about sexual health in the young person's bedroom ( we will provide this)
- Remember that this advice applies to young men as well as young women.

## SMOKING

The health risks from smoking tobacco are well documented. In England, more than 250 people die each day from smoking related diseases. Although the majority of these deaths occur in smokers, several hundreds of deaths may occur in non-smokers who have been exposed over time to tobacco smoke.

Government policy is to reduce the damage caused by smoking. This includes a target for substantial reduction in teenage smoking and a commitment that non-smokers should be protected from the environmental effects of tobacco smoke.

We are encouraging people to give up smoking, or at least not to smoke in front of the young people for whom we are legally responsible. We ask you to respect this commitment on behalf of the authority. We are also asking that you work with young people on strategies to give up smoking, take them to discuss the issue with health advisers where possible and do not allow them to smoke in your home. (see attached guidance from BAAF)

## ALCOHOL

Sustained drinking can lead to health risks and in extreme cases to alcohol dependence. Also, intoxication can lead to uncontrolled, disorderly or dangerous behaviour. Young people are more susceptible to the effects of alcohol and are more likely to succumb to peer-group pressure, than adults. The government is committed to reducing incidents of

alcohol related harm in young people and has issued the following advice to carers of young people:

3.13

- Children under 16 should be dissuaded from drinking alcohol
- Young people between 16 and 18 should be allowed to consume alcohol only when it has been bought for them and they are under the supervision of a responsible adult.
- Carers should bear in mind the need for health education about the use of alcohol and the consequences of its misuse.
- Young people should be encouraged to remain within the sensible limits for drinking as advised by the government, namely 7 units per week for girls and 11 units per week for boys (half of those recommended for adults)

## DRUGS

If you are concerned that any young person placed with you is misusing drugs discuss this with the social worker. There are a number of sources of support and information that can help you to come to a reasonable and informed decision about how best to deal with this situation.

The department has a substance misuse officer Ann Bouazzaten, Ann works with both social workers and foster carers, she can offer both assessment and advice.

Ann may be able to help with the following issues; -

- Assessments of young people's substance misuse issues, both drugs and alcohol
- Information and advice as to possible treatment options and about a referral to the community drugs team if relevant and appropriate
- Accurate factual information about substance misuse, its risks and dangers.
- Approaches to reduce harm and risk associated with substance misuse
- Support to foster carers who are caring for young people involved in substance misuse.
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Ann can be contacted at the Bassett Street Office ☎ 0116 2759 333

## THE HEALTH CARE OF FOSTER CARERS

As approved foster carers you will have had a full **medical examination** and report as part of the assessment process. The department wishes to promote positive health care amongst foster carers. Health plays an important part in people's lives and deteriorating health may affect your capacity to act as a foster carer. Each year at your annual review you will be asked to complete a **health declaration** and, at least, every five years to agree to your GP completing a **medical declaration** about your health. We may ask you to agree to a health declaration being completed before the five-year period has expired if there have been any particular health issues. The Department will meet any financial costs. The completed medical form is forwarded to our medical adviser who will interpret

the information and if necessary, (with your consent), contact your GP or occasionally yourself for discussion.

Remember to arrange an immunisation against hepatitis B. This is available free to all foster carers through their GP.

You will be given training in health care and First Aid.