



**UNISON Scotland response: The  
Future of Foster Care  
February 2025**

**Introduction**

UNISON is the trade union for social work staff. As Scotland's largest trade union with more than 150,000 members across the public, private and voluntary sectors, our members work throughout children's services, and in all the areas important to the delivery of The Promise.

This includes front-line workers in all areas of social work, all grades of staff, and all roles including social care workers, social work paraprofessionals (family support workers, social work assistants etc), occupational therapists and administrative staff as well as registered social workers.

For this response we consulted directly with UNISON members who work in local authority foster care services and in Children and Families social work teams in different areas of the country. We quote

**Scottish Government Vision**

**What are your views on our vision for foster care?**

No practitioner would disagree that this child-centred vision is what we want for our children and young people needing alternative family care.

As noted in the consultation paper, several elements of the 'flexible' approach set out have been tried and had some success. The question we need to be asking is why did they fall by the wayside? What were the barriers to continuing and developing them? As the Independent Care Review already acknowledged, the answer is staffing resources and finances.

'People' is one of the five foundations of The Promise; achieving change for the workforce is recognised and accorded central importance for achieving change for infants, children, caregivers and families. "The workforce needs support, time and care to develop and maintain relationships. Scotland must hold the hands of those who hold the hand of the child." (2020:20).

Unfortunately, this foundation is not reflected in the consultation document, which mentions the workforce only obliquely. Once, in referencing the plans for a National Social Work Agency, and once again, as one of 'many factors, including housing, education...' impacting on "how the Promise is delivered" (both p.8).

This suggests little thought has been given to the role of social workers and support staff even though it is front and centre to recruiting, assessing, and achieving well prepared, well supported foster carers, able to take on caring for children and young people with a wide range of needs and challenges. We would be concerned if these 'workforce issues' – which were also skirted by The Promise Change Programme - are being compartmentalised or 'relegated' as a matter for a future National Social Work Agency.

## **Social work members practising in this area say the following challenges must be overcome to implement the Scottish Government's vision:**

- Insufficient social work staff to enable consistent relationship-based practice.
- Caseloads too high and capacity (time) too little.
- The excessive demands of paperwork taking time away from face-to-face relational work.
- A lack of resources and services to support foster carers and the children they look after, particularly access to therapeutic input and mental health services.
- Insufficient numbers of foster placements for the numbers of children needing care – precluding the possibility of matching based on skills and need.

These are all issues which were identified in The Promise. The Framework paper on “Social Work Perspectives” states, “One area of challenge raised by almost 40% of survey respondents was the capacity of the workforce. Respondents described the impact of perennial staff shortages and high turnover on increasing caseloads, increasing levels of paperwork (electronic records) reduced the time for supervision and reflection.”

“Many posts, which had disappeared during the past decade, were the administrative and respondents reported on the loss of this support within teams. The combination of increasing caseloads and less administrative support were felt to impact significantly on social workers with increased levels of stress and anxiety and reduced the time available to spend with children, young people and their families.”<sup>1</sup>

It is therefore disappointing that given the centrality of the social work role to the fostering service, none of this has been acknowledged or taken into account in this consultation, nor any effort made to address these issues.

### **Flexible fostering approach**

#### **What are your views on the proposed flexible fostering approach?**

Our members fully support a flexible fostering approach and the seven different elements of the vision. However, they see it as unrealistic unless there is investment in the staff who are critical to delivering it.

*“Without staff and resources, how do we accomplish this?”*

As a first step, we suggest a thorough analysis is conducted of the staffing needed to deliver the flexible fostering approach at local levels.

Currently workers are under huge pressure delivering the status quo of current day to day work of recruiting, assessing, training and supporting foster carers and supporting the children in their care. Moving to the new approach will create additional challenges in terms of staffing. The consultation paper acknowledges (again obliquely) “current challenges in the social work and social care” affecting the delivery of a flexible fostering approach (p.13) and the intention to work collaboratively with the sector on conclusion of this current consultation “to consider any implications” for how this work is carried out. UNISON’s Social Work Issues Group is ready to participate in that discussion when the time arrives.

Important questions which could usefully have been asked in the consultation are “What implications does a Flexible Fostering Approach have for the workforce in social work children & families and foster care services?” and “What needs to be put in place for staff to enable a Flexible Fostering Approach to succeed”?

---

<sup>1</sup> [Social Work Perspectives Social work perspectives and experiences of the ‘care system’ in Scotland](#) p.1517

**These are the views of the UNISON social worker members with whom we consulted:**

**More core revenue funding for additional staff so that caseloads can be reduced to enable relationship-based practice in line with social work values.**

Understaffing and high caseloads mean time must be prioritised. **This has a negative impact on children and young people:**

- Members repeatedly stressed that this often results in children and young people in foster care being **de-prioritised** for visits as they are deemed to be “safe”.
- Improving staffing and reducing caseloads is essential for social work staff to be able to get to know and build all important relationships with children in foster care. Without this, children lack a relationship in which they should be able to safely disclose, should they need to.

*“Children find it more difficult to express their thoughts and feelings around their care arrangements and social workers find it more difficult to assess how children feel given the lack of relationship. This is particularly harmful where there are placement breakdowns and the child finds they do not have a strong relationship with the only consistent adult in their life.”*

The importance of homely, inviting family rooms and places in the community for social workers to meet and spend time with children and young people and work with them therapeutically was constantly stressed. The impact of councils closing buildings due to budget cuts resulting in a lack of appropriate space e.g. for training foster carers or doing therapeutic work with children and young people in foster care was repeatedly made.

*“We want to provide prospective carers with a positive view of the service which can be difficult when offering prep training in a shabby, poorly heated room with tech that doesn’t work.”*

**Action is needed to streamline and reduce the volume of paperwork required of social workers; to free up their time so they can use their skills and training for the purpose intended.**

- Tackling over-bureaucratisation was one of the key recommendations of the landmark 2012 Munro Review of child protection in England.<sup>2</sup> Munro saw this as a crucial step in creating the type of child-centred system aspired to in The Promise.
- Continuing issues of excessive bureaucracy were reported by members in our consultation. Action is needed to reduce or eliminate what workers regard as over-regulation and duplication. Many say it feels unnecessary and disproportionate.

Meantime, better administrative support is needed for social work staff to mitigate the current high demands of paperwork and bureaucracy. The value of support staff was also recognised to undertake such tasks as supporting contact, with calls for more support posts to be in place.

**Recruitment of carers for specific roles** is supported by our members but again this is likely to be staff intensive and would require additional social workers. We would point out that many local authorities have already had specialist fostering schemes for different groups of children and young people, but these have disappeared as budgets have been cut.

*“Social Work resources have been stripped. To build relationships with traumatised adults and children is labour intensive. Due to volume of referral and litigious nature of the job and competing demands, this makes this role very difficult. As children in foster placements are considered safe, social workers are dealing with crisis which impact on time to build relationships with care experienced young people.”*

**Lack of time caused by staff shortages and high caseloads** means that family placement workers can’t provide the time needed to support foster carers to manage challenging behaviour in a safe and

---

<sup>2</sup> Department for Education (2011) [The Munro Review of Child Protection: final report](#).

caring way. Where social workers are trained to deliver therapeutic interventions, they are often unable to use these skills, or to maximise their potential, because of time restrictions.

*“There is never enough time to appropriately support the carers given the challenges they are faced with which results in workers working lengthy unpaid hours to ensure they can provide the support the foster families require. We try to ensure this has a minimal effect on the carers as we are aware of the very complex care they provide and the need at times for intense support.”*

**Not enough opportunity or time for communication and joined up working between family placement and Children & Families staff** – several workers in both Children & Families and family placement teams raised the need for more joined up working. Both carers and children need ongoing input from practitioners who understand the challenges and who can provide a framework of support. This is amplified if workers and carers are able to work together in partnership.

### **How can the Scottish Government, working with you, support the delivery of the flexible fostering approach?**

The Government’s primary responsibility is to make sure local authorities are provided with sufficient resources to deliver the approach. The Local Government Benchmark Framework Overview Report 2022-23 highlights the extent to which councils have attempted to prioritise spending on areas like child protection and support for care experienced children, but at the expense of considerable real terms cuts to other local services.<sup>3</sup>

### **How can the Scottish Government support local authorities with resource planning of foster carers, including building an evidence base and data on placements, including those outside local areas?**

The key to this is a proper assessment of what kind of resources are needed in different areas being carried out. There must be resource planning

## **Recruitment of Foster Carers**

### **What more can the Scottish Government and local authorities do to recruit foster carers?**

While improving recruitment is vital, the staffing implications of the proposed national approach to recruitment (and retention) must be considered and planned for. This is absent from the consultation paper.

A lack of investment means that the social work workforce that is central to recruiting, assessing, training and supporting foster carers and the children in their care has been cut as the numbers of foster carers has decreased. Workers no longer have the considerable time required to build relationships with foster carers throughout the assessment process and support them properly following approval; or to support looked after children in the way they would wish.

The wider costs in staff resources of recruitment, assessment, training and support of additional foster carers must be recognised. Trying to do more when social work staff are already on their knees coping with existing demands just won’t work. Workers tell us about the difficulties delivering training and support to foster carers in teams which sometimes have multiple vacant posts and recruitment freezes due to cost cutting.

---

<sup>3</sup> Improvement Service (2024) [Local Government Benchmarking Overview Report](#).

**There needs to be a proper assessment of the staffing needed** both in family placement/alternative family care teams and in Children & Families services if the numbers of foster placements is to be increased effectively and in a way that meets the needs of the children and young people needing family based care.

*“We require additional foster carers to provide families for older children who can support them onto independence. This will require additional financial support.”*

*“We also require lifelong supported placements for young people who, due to their early life experiences, will never be able to live unsupported.”*

Our members are fully supportive of recruiting a range of foster carers to meet the needs of specific groups of young people, such as older teenagers, children with challenging behaviour, care leavers, asylum seeker young people; mother and baby placements etc; and also of upskilling foster carers to take on a wider role with birth families, support contact etc.

However, we would not like to see foster carers used to cover for a lack of social work and support staff. It would need to be carefully managed and foster carers fully skilled up and supported by social workers with the time and the expertise to do this.

This will require careful and time-consuming assessment, preparation, training and support, all of which are an additional pressure on workers' time and will require additional investment in staff. Workers commented on the key importance of stringent assessments and preparing foster carers for the complex needs of the children coming into care and ensuring they are trained and able to make a commitment to these children.

*“I have witnessed foster carers who call an end of placements due to their inability to provide support for children they have made a promise to. Too many children/young people are further traumatised and self blame because of the placement failure. Enduring foster carers are fully prepared to undertake such a different but rewarding job is key”*

*“Foster carers should be made aware of what is expected of them, particularly if they are outwith the local authority area. Foster carers should be able to communicate with parents. If children are to be a part of the foster carer's family, treated with respect, consideration for their respective difficult experiences that led them to be in foster care.”*

*“Foster carers to be confident to look after the children in their care and to be able to manage difficult behaviours that may present themselves rather than giving up and submitting notice.”*

*“Further training for foster carers, more stringent assessments of foster carers”*

## **Retention of Foster Carers**

### **What other practical support would help foster carers?**

*“There are some very complex and challenging children in foster care currently. Need greater respite/short break services. Need better specialist training for staff and carers and interventions for children. Actually deliver some of the promise rather than just change language and focus disproportionately on family connections at the expense of other matters.”*

The consultation paper (p.20) mentions foster carers asking for a range of things, including more consistent reflective supervision, peer support, mentoring, informal training, therapeutic intensive support.

**The social workers we consulted with who work in foster care services and children and families social work teams said the following were a priority:**

**Better provision of therapeutic supports** for the young people in care and also for foster carers and birth families.

Concerns were expressed about the vicarious trauma experienced by foster carers supporting deeply traumatised young people and the need for supports for carers too in carrying out the very demanding work of supporting children with complex needs. Social workers do their very best to deliver this, but there is just not enough capacity.

*“We are so stretched that we don’t give a good enough service any more. We do only what is needed and then we move onto the next young person. There is no therapeutic/holistic support anymore which is badly needed as for many of our young people we are the only support they have.”*

**Ensuring access to CAMHS** – the lack of access to CAMHS provision was highlighted by social workers as a serious problem with a call for a proper resourcing of adolescent mental health services and access to counselling and other emotional support for children in foster care. Lack of access is a common problem affecting very many children and young people. However the incidence and severity of mental health difficulties in looked after children is particularly high and yet there is good evidence that they face **additional systemic** barriers to accessing clinical help.<sup>4</sup>

The failure to provide mental health services **intensifies the pressures on foster carers** stretching their ability to cope and leading to placement breakdown. Social work members stress that the provision of specialist LAAC CAMHS must be invested as an essential *preventative* service. One said:

*“there are young people becoming involved in addiction, offending behaviours and taking their own lives because there is a lack of appropriate resources at an early stage to ensure children are protected from and supported to recover from trauma.”*

Social workers identify the need for a range of tiered support to be available and accessible in different locations including schools. Specialist CAMHS services for looked after children exist in some areas, including Lanarkshire and Dumfries & Galloway, but are not available across the country. NHS Greater Glasgow and Clyde, for example, set up a specialist LAAC CAMHS service in 2003, but this is now lost with workers dispersed to local CAMHS teams.

In the words of foster care services workers:

*“We require appropriate therapeutic support for the children who generally all experience significant trauma and for their carers who experience vicarious trauma whilst supporting the young people within their family home.”*

*“An expansion of CAYP and CAMHS is vital, as well as, support services aimed at preventing children coming into care or supporting parents to meet requirements for reunification back home”*

---

<sup>4</sup> [Care in Mind - Paper 1 - Rejected Referrals - 2019\\_0.pdf](#)

*“We need an interim supported resource or foster care funding extended to 25-year of age to recognise the impact of early trauma on young people's emotional and psychological development. We also require lifelong supported placements for young people who, due to their early life experiences, will never be able to live unsupported.”*

*“More funding (should be) available to allow children to access therapeutic services required to manage the trauma they have experienced or an upskilling of the current workforce to allow them to offer this therapeutic input”*

*“More available mental health services such as CAMHS but without the long waiting list of a year.”*

*“Access to good quality therapeutic resources and training is essential. Ability to offer practical and financial support of needed.”*

Lack of access to mental health assessment, support and treatment for looked after children and young people is a well-known and long-standing problem.<sup>5</sup> Previous inquiries have identified the reasons for the disproportionate rejection of referrals to CAMHS for looked after or care experienced children and young people.<sup>6</sup> The 2018 Children and Young People's Mental Health Taskforce Delivery Plan sought to address the issues.<sup>7</sup> 'Vulnerable' children who had experienced abuse and trauma were designated a distinct priority group within the Delivery Plan.

However, 7 years later the same problems persist in accessing services for children and young people in foster care. That is despite the Independent Care Review for children and the commitments made in The Promise 5 years ago. Social workers in Children & Families teams point out that CAMHS will often say the child needs to be more stable for any input to take place. However, this is often a Catch 22 situation as this often won't happen due to trauma. All issues identified years ago but which persist.

**Service rules for local CAMHS teams need to change** to remove systemic barriers and guarantee children in foster families timely access to services.

### **Other practical support needed for foster carers**

UNISON's foster care service members also highlight the need for **other resources and supports** both **to enable foster carers to meet the needs of the children** in placement and **to improve retention of foster carers**.

These include types of support already provided by social workers but where under staffing and lack of capacity – all the issues already noted - means not enough is being provided.

*“Having more time for more meaningful work with carers results in better outcomes of retention of carers and better outcomes for children.”*

*“There is never enough time to appropriately support the carers given the challenges they are faced with, which results in workers working lengthy unpaid hours to ensure they can provide the support the foster families require. We are very aware of the very complex care they provide and the need at times for intense support.”*

- **Improved funding for peer-to-peer support, activities and events for foster carers**

---

<sup>5</sup> Sanders, R. (2020) [ESS Outline: Care experienced children and young people's mental health](#). Iriss.

<sup>6</sup> [Care in Mind - Paper 1 - Rejected Referrals - 2019\\_0.pdf](#)

<sup>7</sup> Scottish Government (2018) [Children and Young People's Mental Health Taskforce: delivery plan](#).

- **Specialised teams that foster carers can access for support** based on the age and stage of the child, with the ability to provide good quality accredited therapeutic supports and consultations for foster carers and the children they look after.

*“Feedback from foster carers has consistently been positive about any therapeutic service provided by social work. The only negative feedback being that there is not enough.”*

- **More support for birth children to understand the impact of trauma**
- **Dedicated skilled therapeutic support available within schools** for children who have experienced/are experiencing trauma and loss
- **Young people’s counsellors** available to foster care services and family support hubs
- **Better educational support** for children and young people in foster care
- **Foster carers being heard and having their views valued and respected** was also cited as a type of support for foster carers that can help retention.

*“They are often excluded from discussions. Decisions are often made that impact on their family life therefore this should be done in partnership wherever possible.”*

The need for **more respite care** for foster carers was also raised by social workers. However, we know that this is contentious as it conflicts with the aim of foster care, to provide children with as typical as possible an experience of family life and family-based care.

## **Infants in Foster Care**

**What, if any, specific support might be needed to ensure that foster care in Scotland is attuned to the unique and specific needs of infants and very young children?**

This is an important issue. A fifth (20%) of all children who become looked after through the Children’s Hearings System are under 12 months old.<sup>8</sup> Half of all children (51%) who enter care in Scotland were first looked after when they were less than a year old.<sup>9</sup>

**Key things needed are:**

**Consistent access for young children (under 3 years) in foster care, their foster carers and birth parents, to specialist infant mental health (IMH) services in line with the Programme for Government commitment of 2019-20.<sup>10</sup>**

Young children removed from the care of their birth parents are those most likely to have experienced or be at risk of impaired development due to significant adverse experiences. These services provide specialist attachment-focused therapeutic support for the infant-carer relationship, as well as training and consultancy support to social workers and other children’s services workers. Five NHS boards now have specialist IMH services (Fife, Lothian, Greater Glasgow & Clyde, Highland and Lanarkshire).<sup>11</sup> These were established recently with fixed-term government funding under the direction of the Perinatal and Infant Mental Health Programme Board, with other boards asked to develop plans. Currently there isn’t

<sup>8</sup> Cusworth, L. et al (2022) [Born into care in Scotland: circumstances, recurrence and pathways](#) Edinburgh: Scottish Government. p.10

<sup>9</sup> Cusworth, L. et al (2019) [Permanently Progressing](#). Children looked after away from home aged five and under in Scotland: experiences, pathways and outcomes. Stirling: University of Stirling. p.4.

<sup>10</sup> Scottish Government. (2019). [Protecting Scotland’s future: The government’s programme for Scotland 2019-20](#).

<sup>11</sup> McFadyen, A. (2022) [Wellbeing for Scottish Wee Ones: developing infant mental health systems in Scotland](#).



equal access across Scotland for young children in foster care and their carers. Additional sustainable funding from government is needed for NHS boards and their partners to deliver this.

**Training and support in infant attachment for all those caring for young looked after children,** including foster and kinship carers and adoptive parents, residential and early years staff. The importance of this was underlined some years ago.<sup>12</sup> It means equipping social workers with advanced practice skills. However, for this training to be embedded in social work practice also requires workers to have sufficient time and resources for the very complex and demanding relationship-based work.<sup>13</sup> It also depends upon the consistent provision of reflective supervision. All things which are prevented or undermined by under-resourcing of social work services.<sup>14</sup>

## **The SSSC ‘Standard for Foster Care’**

Social workers highlight that the SSSC Standard is not always routinely used in their services. It is seen as a useful resource but one that needs updating to take account of recent developments, for example, the report of the Independent Care Review (‘The Promise’), the increase in Unaccompanied Asylum-Seeking Children entering foster care and local authority cost savings.

## **Financial Support**

### **Do you think there should be national approach to fees for foster carers?**

There desperately needs to be a new national approach with a significant uprating in fees. A national approach can be effective providing the fees and allowance (1) properly reflect the value of the role undertaken by foster carers and (2) provides them with financial security.

Social workers in foster care services stress the financial hardship their foster carers are experiencing because of the low level of fees and the fact that in many authorities these have barely risen over the past few years while living costs have spiralled. They give examples of carers struggling with financial stress and the impact this has on the children in their care, e.g. on the responsiveness of carers in times of crisis, being unable to afford family holidays etc.

*“They are paid a pittance in relation to the national minimum wage despite there being a cost of living crisis”*

*“The system is being held up by these people”.*

However, some social workers stress that increasing fees must be accompanied by much clearer accountability arrangements for foster carers being set out by the Scottish Government.

*“While most carers adhere to procedures and national standards, further scrutiny may oust out people who are less dedicated to the children.”*

**Improving financial security for carers** through a system of retainers is important. Many do not feel the income is sufficiently secure to get by if, for whatever reason, they don’t have a child or children placed with them. If a child in their care has complex needs, for example, a foster carer may not be allowed to care for as many children as their approval allows, and this carries a financial penalty.

---

<sup>12</sup> Furnivall, J, (2011), *iriss insight 10. Attachment-informed practice with looked after children and young people*. Iriss.

<sup>13</sup> [NSPCC Scotland \(2023\) Keeping the Promise to Infants](#)

<sup>14</sup> [UNISON Social Work Manifesto](#)

## **Should there be a national approach for Continuing Care allowances and fees?**

For most young people leaving care this has not worked because there is no money available. The resources required were not thought through or planned for.

*“We require resources to support the young people transition from foster care/continuing care to independence as very few are ready for independent living at 21. We need an interim supported resource or foster care funding extended to 25 years of age to recognise the impact of early trauma on young people’s emotional and psychological development. We also require lifelong supported placements for young people who, due to their early life experiences, will never be able to live unsupported.”*

## **Should there be a new national learning framework for foster carers which could also be a pathway for continuous development?**

Yes, this would be welcome. A new national learning framework could be linked to a national approach to foster care fees based on an incremental scale, thereby linking fees to continuous learning and development, qualifications, experience and quality of practice as well as the complexity of the needs of the children cared for. This would hopefully help incentivise engagement with learning and development and, by improving recruitment and retention, make it possible to improve the accountability of foster carers.

*“...in general, foster carers don’t engage well in training and learning until they need to e.g. coming up to annual review or they will do the bare minimum...but we’ll never be able to impose a consequence or limit their approval ..because we simply don’t have enough foster carers.”*

*“There is no incentive to do better”*

## **Allegations**

### **Should the Scottish Government update its guidance on managing allegations against foster carers?**

We want to stress again the importance of social workers being able to see and spend time with children in foster care face to face, so they can build a relationship. Without this children and young people cannot open up about how they are feeling or what is happening in their home. We explained earlier why lack of staff, high staff turnover, high caseloads and the urgent pressure to prioritise within case loads too often prevents this from happening unless social workers devote their own personal time to doing so. It can only be resolved through resourcing.

**Lilian Macer**  
**Scottish Secretary**  
**UNISON Scotland**  
**14 West Campbell Street**  
**Glasgow G2 6RX**

For further information contact:  
Susan Galloway  
Bargaining & Campaigns Team  
UNISON Scotland  
s.galloway@unison.co.uk