



Fulfilled Lives, Supportive Communities:

Delegated Authority for Foster Carers

Good practise guidance ensuring that children and young people in foster care are able to enjoy the same opportunities as their peers to have a fulfilled childhood and foster carers are given enough autonomy to make everyday decisions about the children in their care.

March 2011

Foreword

The Children's Commissioner endorses the publication of this guidance:

"I welcome this process of clearly establishing what authority is to be delegated to foster carers as one that will bring clarity and enable looked after children to feel that their day to day experience is more in line with that of their friends and peers.

Many children and young people in care have told me that it makes them feel different and upset that they are not able to do many of the normal things that their peers do such as going on a sleep over or attending activities or events without a lot of prior notice because of the permission issue. I trust that this process will deal effectively with both of these issues and allow foster carers to feel confident that they have the authority to make these decisions and that the accountability is clear.

The key to success of this process is that all parties including, of course, the children themselves are allowed to express their views and that the agreement is well understood by all."

Regulatory Framework

This guidance supplements the provisions in the Fostering Services Wales Regulations 2003 (Part V, regulations 34(3), 40 and Schedule 6 paras 3,4,6, 7 and8) (SI 2003 / 237 (W.35)). Regulation 4 of The Placement of Children Wales Regulations 2007 (SI 2007 / 310 (W.27)) and Key Topic 4 - Securing and Promoting Welfare, of the National Minimum Standards for Fostering Services (2003 ISBN 0 7504 3147 4).

Introduction

The Welsh Assembly Government recognise the tremendous contribution foster carers and their families make in caring for more than three quarters of the children and young people who are being looked after in Wales. Fostering offers children and young people the chance to experience family life without which the future might be bleak for them. In order to provide the children and young people that they care for with a normal family experience foster carers must be able to take day to day decisions as any parent would.

Delays in obtaining parents' and local authorities consent to everyday activities can be a bar to looked after children feeling part of the foster carer's family and experiencing a full family life.

Sustainable Social Services for Wales: A Framework for Action articulates our vision for the future improvement in social services and illustrates the need for a whole service approach to respond to the needs of both children and their families. Foster carers have an essential part to play in making a reality of our aspirations for social services, providing vital care for our looked after children. Quality and sustainability of foster care is invaluable and, as the bedrock of our caring community, foster carers are to be supported to meet the identified needs of the children placed with them from the outset in order to secure better outcomes for our looked after children.

This guidance provides clarification around the areas to be considered when delegating authority to foster carers, ensuring that the children and young people they care for are able to enjoy the same opportunities as their peers to have a fulfilled childhood.

High quality foster carers through great dedication, commitment, and sheer resourcefulness make a real difference to children and young people in Wales and the best interests for these children and young people must be at the heart of all decisions.

Key Principles

We are aware of the tireless work of foster carers in Wales, we are also aware that young people in foster care are much more likely to achieve their full potential when their carers have high aspirations for them. Helping carers to do this by giving them proper authority, support and recognition for their work is crucial.

The Key Principles underpinning this guidance are:

- **Children and young people must be able to express their views and have them heard.** The best interests of the child or young person will determine all decisions*.
- Delegated authority to foster carers will be individually agreed for each child and young person in their care. The extent of the delegation will vary depending on: the type of placement; the legal status; the rights, entitlements and opinions of the child or young person and their parents; and the skills and competence of the foster carer.
- The foster carers will be exercising the authority on behalf of the Local Authority (LA) and the responsibility rests with the LA.

Good practice requires that:

- A foster carer's delegated authority to take decisions is discussed and agreed with the carer and the child or young person's parents at the start of the placement as part of the placement planning process.
- Where there are positive working relationships with the birth family, routinely securing parental consent is to be encouraged.
- The wishes and feelings of the foster carer should also be considered and recorded.

Local Authorities Role

Local authorities should ensure that every day decisions about the care of children and young people are delegated to the foster carer unless there are clear reasons why this would interfere with the local authority's statutory duty to 'safeguard and promote' the welfare of looked after children, or there are well-founded and legally binding objections from the child or young person's parents.

Foster Carers Role

Foster carers will be responsible for keeping the child or young person's social worker informed about decisions taken under delegated authority; this can be done during routine visits unless there is need for immediate consultation. This should be covered in the foster care agreement.

* United Nations Convention On The Rights of The Child (Article 3); Best Interests of the Child; All organisations concerned with children should work towards what is best for the child. (Article 12) Children have the right to say what they think should happen when adults are making decisions that affect them and to have their opinions taken into account

Areas to be considered when delegating authority to Foster Carers:

Social Care Issues

1. Overnight stays:

Foster carers should be able to make decisions about the children and young people they foster as if they were their own child and act as a supportive parent would.

The National Assembly for Wales Circular NAFWC 50/2004 lists the issues that a foster carer should consider when giving permission for overnight stays. The guidance clarifies areas of responsibility, a clear process of risk assessment and gives recommendations regarding the frequency of visits.

<http://wales.gov.uk/publications/circular/circulars04/NAFWC502004?lang=en>

2. Holidays:

Most holidays will require consultation with Social Services and discussion of contact arrangements. All holidays of more than 5 days duration should be agreed in advance and this should include discussion and as appropriate agreement with parent/s.

3. Organised Activities:

Foster carers should be able to give consent for children and young people to attend an organised activity as if it was their own child.

4. Haircuts:

Although there is no formal restriction on the authority of foster carers with regard to haircuts, this can be an issue of contention for parents and can be an important aspect of a young person's developing sense of identity. Good practice would be to include parents who are actively involved in their child's life in decision making in this area. This should be discussed and agreed at a LAC review and any cultural issues or likely objections taken into account.

5. Body piercings:

Unlike tattoos there is no legal age limit on when children or young people can give consent to body piercing. There is a general consensus that a young person should understand the implications of making such decisions. It is an area that should be discussed with young people as and when the issue arises.

6. Visiting friends:

As with overnight stays the foster carer should be able to act as a good parent in these decisions.

Health Care Issues

7. Routine medicals:

Foster carers should sign consents for routine medicals for example school or LAC medicals. They should record details of medicals and inform the child or young person's social worker.

Although immunisations can be considered 'routine' many foster carers may have concerns regarding consenting to these given the controversy

surrounding the issue. They should therefore be considered separately from other routine medical consents.

8. Non routine medical treatment:

The issue of non routine medical treatment is more complicated. Signing for surgical procedures is something that many foster carers do not want to do and yet to bring “strangers” to a bedside may be distressing. Foster carers will need to assess risks in relation to emergency medical treatment and give consent where necessary, for example in the case of an accident resulting in a fracture, a delay in obtaining consent may not be in the child or young person’s best interests. Carers need to be aware of the implications of the Gillick principle in relation to a young person’s giving their own consent to medical treatment:

As a matter of Law the parental right to determine whether or not their minor child below the age of sixteen will have medical treatment terminates if and when the child achieves sufficient understanding and intelligence to understand fully what is proposed. Lord Scarman

The question of consent to more invasive procedures should be discussed on a case by case basis as some children/ young people may have longstanding medical conditions which require frequent medical intervention. In many circumstances the procedures requiring a general anaesthetic will be planned and will therefore allow for prior discussion and agreement as to who will sign the consent form.

9. Optician:

Foster carers should be able to sign consent for routine examinations and spectacles.

10. Dentist:

Foster carers should be able to sign consent for routine examinations and treatment.

Education

11. School day trips:

Foster carers should be given delegated authority to approve day trips through school.

12. Trips abroad:

Trips requiring funding from the local authorities, and/or involving hazardous activities for example skiing, must be agreed in consultation with social services. Foster carers will then be able to sign the necessary consent forms.

13. Change of school -post primary transition:

The choice of post primary school will be discussed and agreed at a LAC review prior to transfer and foster carers should then be able to sign the consent form.

14. Change of school in other circumstances:

If the foster carer decides to move house or would like the child/ young person to attend another school, this will need to be agreed at a review meeting

taking into account the impact of this decision. The birth parents should be consulted. The foster carer could then be authorised to complete the practical steps to implement the agreed actions.

15. Meeting with School staff:

The foster carer should normally be the person to meet with school staff to discuss progress and share appropriate information with staff once the placement is longer than one year. The foster carer should report on school issues to the social worker and the LAC review.

16. Accessing Educational initiatives:

The foster carer should access any educational initiatives for the child/ young person, such as Fostering Achievement, and keep the social worker and LAC review informed.

17. Sports activities/organisations:

Foster carers should be able to give consent to children/ young people participating in these activities whilst taking into account the religious and cultural background and identity of the child/ young person. If appropriate the views of parents should be considered.

Other areas

18. Photographs:

Decisions on the type of photographs to which a foster carer can give consent should be formally agreed at a LAC review.

(a) School photographs

Foster carers should be enabled to give consent for formal school photographs. They should be encouraged to ensure children/ young people have school and group photographs taken as part of their life history.

(b) Wider media activity

Many children/ young people love to be able to take part in activities that may lead to publicity in the media. In most cases foster carers should be able to give permission for this to happen. Any restrictions, such as using only the first name, should be specified on the delegated agreement form. Foster carers need to be aware of confidentiality and sensitivity as issues may arise if such events or attendees are linked to different backgrounds or cultures. This is a difficult area and should be treated with the upmost caution and sensitivity.

19. Church and Religious ceremonies:

Foster carers have a responsibility to promote a child/ young person's religious and cultural needs and ceremonies which form part of this will be important to the child or young person and their family.

20. Participating in hazardous activities:

There is recognition that it is difficult to define "hazardous" activity and people's individual views will vary and the age and ability of the child/ young person will be of relevance.

The foster carer will be expected to act as a good parent and also ensure that the child or young person has the correct safety equipment, training and is using a recognised tutor or organisation etc. More unusual requests should be discussed at a review.

21. Sex education:

Ideally this is something that foster carers should be providing to the fostered child/young person as any good parent would. The content can be discussed and agreed at the LAC review and the foster carer's personal views taken into account. They should be encouraged to work with the schools.

22. Mobile telephones:

Foster carers should be responsible for making decisions regarding the possession and use of mobile phones as they do for their own children. They should receive clear guidance and agreement regarding the young people's use of mobile phones and any particular restrictions should be specified at the time of placement or if concerns arise at a later stage.

Areas where foster carers cannot legally give consent

23. Passport:

Young people can apply for their own passport at age sixteen. Prior to this the local authority would have to apply.

24. National Insurance Number:

Local authorities should ensure that all looked after young people receive their national insurance number without delay and that the information is given to both the young person and the foster carer. Useful information can be found on the website below.

www.hmrc.gov.uk/manuals/nimmanual/nim39310.htm

Withdrawal of Delegated Authority

There should be a clear process by which delegated authority can be withdrawn if concerns arise about the foster carer's capacity to discharge these functions. Any decision to withdraw delegated authority should be considered under the care planning review process and a formal review of the carers continuing registration should be initiated.

Local authority children's social services and independent fostering providers may wish to review their existing arrangements in light of this guidance.

Delegated Authority Summary (Aide Memoir)*

The following table summarises the areas of delegated authority which should be considered for each child or young person in foster care. The overriding principles are that:

- All decisions must be made in line with the Care Planning process.
- In the case of an emergency or where an unexpected opportunity arises the foster carer should act as a reasonable, prudent parent.

Foster carers should generally hold delegated authority for:	In particular circumstances and following discussion they may hold delegated authority for:	Local Authorities will generally be responsible for:
Routine medical visits to GP subject to the Gillick Principle	Immunisations	Passports
Overnight stays	Body piercings	Decisions regarding contact
Holidays within the UK	Non Routine medical treatment including general anaesthetic subject to the Gillick Principle	Alcohol use
Organised Activities	Holidays/trips abroad	
Haircuts	Change of school	National Insurance Number
Visiting friends	Wider media activity (Dependent on individual circumstances)	Use of contraception (dependent on capacity of young person)
School medical	Church and religious ceremonies	
Optician	Participating in hazardous activities	
Dentist		
School day trips*		
Meeting with school staff		
Sports clubs/organisations		
School photographs*		
Sex education		
Mobile telephones		
Consent to educational initiatives		
* Responsibility for these areas should be delegated as soon as possible after placement		

* Laminate so it can be used as a handy reference tool for the foster carer.

Children Looked After

LOCAL AUTHORITY TO DELEGATE CONSENT

Name of Child/ Young Person: _____

Date of Birth: _____

Information System Number: _____

Legal Status: _____

Placement Address: _____

Name of Current Carer: _____

I (parent or local authority Representative with parental responsibility) authorise: _____

Who is (status of Person): _____

To give consent for: _____
(name of child/ young person)
in the following areas:

Overnight stays (Up to 3 consecutive nights)	Yes	No
Organised Activities	Yes	No
School day trips	Yes	No
Longer school trips in UK	Yes	No
Longer trips abroad with school	Yes	No
Using computers in school	Yes	No
Change of school	Yes	No
School photographs	Yes	No
School doctor	Yes	No
Permission for school to give Paracetamol, etc	Yes	No
Meeting with school staff	Yes	No
Medical consents (as discussed)	Yes	No
Optician appointments/tests/glasses	Yes	No

APPENDIX 2

Sports or social clubs/organisations	Yes	No
Joining religious organisations	Yes	No
Participating in hazardous activities, e.g. rock climbing, Skiing	Yes	No
Haircuts	Yes	No
Body piercings	Yes	No
Photographs for publicity	Yes	No
Other, please specify	Yes	No
Agreed by parent:	Yes	No

Parents' Signature & Date: _____

Foster Carers' Signature & Date: _____

Child/ Young Person's Social Worker Signature & Date: _____

Recommended by IRO
Signature: _____

Date of LAC Review Meeting: _____

Authorised by Head of Service/Nominee
Signature: _____

Date: _____

Copies sent to:

School	Yes	No
GP	Yes	No
Parent	Yes	No
Foster Carer	Yes	No
Supervising Social Worker	Yes	No
Child/Young Person	Yes	No

Other, (please specify): _____

