



Scheme of Delegated Authority

DOCUMENT HISTORY			
Version number:	1	Status: (draft/ final)	final
Date Written	October 2023	Dates of Issue for consultation	Nov 2023
Equality Impact Assessment			
Supporting documents			
Authorised by: Head of Service Children/ Adult Management Team	Date: Dec 2023	Ratified by: J Llewellyn Council	Date: Jan 2024
Lead Responsibility: Joe Rhys Jones	Author: Laura Roberts	Implementation Date: March 2024	Review Date: March 2025
Outcome of Review:			

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Policy Statement

Merthyr Tydfil County Borough Council Children and Families Services aim to ensure that all children placed with foster carers are able to enjoy a full family life experience. This scheme of delegated authority policy outlines the principles by which foster carers are able to make decisions about the day-to-day care of children, on behalf of the local authority.

Principles

Children and young people who live with foster carer/s are clear that they wish to have the best possible experience as they can. To enable this to happen foster carer/s must be able to make day to day decisions as any parent/carer would.

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

This guidance provides clarification around the areas to be considered when delegating authority to foster carer/s, ensuring that the children and young people they care for are able to enjoy the opportunity to have a fulfilled childhood.

Legal Context

This policy takes into account Welsh Government guidance and amendments to the Local Authority Fostering Services (Wales) Regulations 2018.

Care Planning, Placement and Case Review (Wales) Regulations 2015 1818 (W261) – specifically regulations: 4-15; 22 -30; 25 – 28 and 8-9.

Social Services and Well-being (Wales) Act 2014 Part 6 Code of Practice (Looked After and Accommodated Children).

This Social Services and Well-being (Wales) Act 2014 (Act) introduced a new code of practice regarding placements (Under section 145 of the act). A Code of Practice on the exercise of social services functions in relation to Part 6 (Looked After and Accommodated Children) was issued. Chapter 2 of the code sets out the arrangements for foster carer's delegated authority.

The 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

Background

Merthyr Tydfil County Borough Council recognises the contribution foster carers and their families make in caring for children and young people who are looked after in the Authority. Fostering offers children and young people the chance to experience family life. In order to provide the children and young people that they care for with the best possible experiences; foster carers must be able to take day-to-day decisions as any parent would. Delegated authority gives children looked after the same opportunities as other children.

Merthyr Tydfil County Borough Council is committed to minimising possible delays in obtaining consent for a range of everyday activities so enabling children and young people placed with Foster Wales Merthyr Tydfil foster carers to enjoy feeling part of the foster carers family and experience a full family life.

In order to ensure that delays are minimised this policy outlines the activities and process by which foster carers may be given authority to take everyday decisions, so ensuring that the children and young people they care for are able to enjoy the same opportunities as their peers.

Principles

The following principles should apply in terms of day-to-day decision making:

- 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 carer/s 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/s.
- The foster carer/s will be exercising delegated authority on behalf of the Local Authority (LA) as 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 foster carer/s and the child or young person's parents at the start of the placement, as part of the placement planning process and reviewed at each Child Looked After (CLA) Review.

- 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/s should be considered and recorded.
- Fostered children and young people should, as far as possible, be able to take part in everyday and acceptable age-appropriate activities as would reasonably be agreed by the parents of their peers.
- Foster carers should be empowered to take all day-to-day decisions about the child in their care unless stated otherwise, and to exercise a significant role in longer term decisions.
- Foster carers should be provided with sufficient training and support from supervising social workers and children's social workers to understand the principles of delegated authority in order to be enabled to use delegated authority as and when it is agreed.
- A shared understanding of the wide range of decisions, whether relating to day-to-day matters or specific one-off issues made in a child's life, is crucial, so that all parties involved can establish and agree the extent to which authority to make decisions is delegated to foster carers.
- Any decision about delegation of authority must consider the views of the child and, where appropriate, a child of sufficient age and understanding should be supported to make decisions themselves.

Key points

The needs of children and young people, their views, age and understanding must be at the heart of matters connected by delegated authority.

Foster carers do not hold parental responsibility. However, the government is clear that foster carers should be able to make everyday decisions about their foster children, wherever possible unless there is a valid reason not to do so. Foster carers should be able to do this competently and confidently.

Foster carers should be provided with sufficient training and support from supervising social workers and children's social workers to understand the principles of delegated authority in order to be enabled to use delegated authority as and when it is agreed.

Children and young people who are fostered have themselves expressed a wish that they live as 'ordinary' a life as possible within a family. They do not want to feel different from their peers or to feel embarrassed or stigmatised because they are fostered. Nor do they want to miss out on activities and trips because a lack of clarity about who has responsibility results in delays in decision making.

Decisions about the delegation of authority must be made within the context of the child's care plan and the legal framework for parental responsibility. The placement plan and any updated delegated authority form should record who has the authority to make particular decisions about a child. Foster carers should be actively involved in these decisions.

Role of Merthyr Tydfil County Borough Council Children and Families Services

Merthyr Tydfil County Borough Council Children's Services will ensure that everyday 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.

Role of Merthyr Tydfil County Borough Council Foster Carers

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.

The foster carers will be exercising the authority on behalf of Merthyr Tydfil County Borough Council and will do so in a reasonable manner.

According to the code of practice, the issue of who can make decisions about a child should be agreed (where possible) before the placement begins, communicated to all parties and be subject to regular review. In agreeing decision making authority foster carer/s should:

*"be given the maximum appropriate flexibility to take decisions relating to children in their care, within the framework of the placement plan and the law governing parental responsibility. Except where there are particular identified factors which dictate to the contrary, foster carers should be given delegated authority to make day to day decisions on matters such as **health, education and leisure**. (para 248 Code of Practice)*

Where a child is looked after with the voluntary agreement of the parents, agreement must also be reached about what decisions the parents will delegate to the local authority and the foster carer/s.

Where a child is subject to a Care Order, Interim Care Order or Emergency Protection Order, the local authority can limit the extent to which the parents can exercise their parental responsibility if this is necessary to safeguard or promote the child's well-being. However, parents should continue to be consulted and have their views taken into account.

Where a child is placed out of hours by Police, using their Powers of Protection, this document will be completed fully by daytime services during the next working day.

Foster carer/s must be informed of their delegated responsibilities in relation to each child in their care. The agreement must be discussed in the placement planning meeting, discussed in detail within the first CLA Review meeting and reviewed during every CLA Review. The plan must set out any circumstances where the foster carer/s must seek the approval of the authority or the parent of a child. The Delegated Authority document will highlight which activities a foster carer can consent to, and which decisions should be communicated with the local authority. As much as possible, the foster carer/s and child or young person should be informed about why decisions have been made taking into consideration their age and understanding.

Delegated authority may change over time and decisions about a child or young person's long-term placements should be subject to particular scrutiny, in order that attachments between foster carer/s and the child or young person are developed.

Where a child or young person is placed with an independent provider or another local authority, these agencies should be consulted about the issue of delegated responsibility. Information should be provided promptly, and decisions made in a timely manner.

The principles behind the code are set out most clearly in paragraph 253:

“Looked after children should as far as possible be granted the same permissions to take part in normal age-appropriate peer activities (such as sleepovers) as would reasonably be granted by the parents of their peers.”

“Foster carers should be expected to make similar judgements as parents when it comes to deciding if there are risks to staying in a particular household or visiting relatives. Decisions should be based on a reasonable assessment of risks. In all cases foster carers should be made urgently aware of any individuals, addresses or areas which may place a child at risk, and this should also be included in the placement plan.”

This document sets out which factors should be considered when making decisions about a child or young person going on a school trip, staying overnight or having a holiday with friends or relatives of theirs or their foster carer/s. These factors are set out in full below:

- Whether there are any relevant restrictions contained in the child's placement plan
- Whether there are any Court Orders which restrict the child from making a particular overnight stay, visit or holiday.
- Whether there are any factors in the child's past experiences or behaviour which would preclude the overnight stay, visit or holiday.
- Whether there are any grounds for concern that the child may be at significant risk in the household concerned or from the activities proposed
- The age and level of understanding of the child
- What is known about the reasons for the overnight stay, visit or holiday?

- The length of the stay

It is also important to ensure the following safeguarding measures are taken by the foster carer/s:

- Ensure they have contact details of the household where the child is staying.
- Make contact with an adult in the household before the visit.
- Assess the request and confirm arrangements first.
- Ensure the householder has contact detail of the foster carer/s

We would also add that it is the responsibility of the foster carer/s to ensure that the adults in the household are aware of any medical conditions that the child or young person has where treatment may be necessary, or medication given. The management and administration of medication for children looked after policy, must be followed.

The code makes it clear that DBS checks should not normally be sought in these situations. The person looking after a child or young person, away from their foster placement does not need to be approved as foster carer/s as the child remains formally placed with their foster carer/s.

The code also states that, if the foster carer/s have any doubts about a decision, then the local authority should be consulted first.

Procedure for Delegated Authority to Merthyr Tydfil County Borough Council Foster Carers:

1. When a child or young person is placed with a Merthyr Tydfil County Borough Council foster carer, the foster carer's delegated authority to take decisions will be discussed as part of the placement planning process. Agreed delegated authority will be discussed by the child's social worker with the foster carer and the child or young person's parents.
2. The child's social worker, foster carer and supervising social worker will complete **the Delegated Authority Consent details on the Placement Plan** which will outline what authority to consent has been agreed as appropriate, taking into account the individual needs of the child and legal status. This can be amended on the Delegated Authority Form as required.
3. Where there are positive working relationships with the birth family, routinely securing parental consent will be encouraged.
4. The wishes and feelings of the foster carer should also be considered and recorded.
5. The Delegated Authority Consent Form should be reviewed on a regular basis, in line with the CLA Review timetable, to ensure that the delegated authority enables

the child to enjoy the same opportunities as their peers to a family life and activities.

6. Good practice recommends that reviews of the Delegated Authority Agreement should also be discussed 3 months after the 1st review following placement involving those in No. 2 above.

Withdrawal of Delegated Authority

1. Where there are concerns regarding a foster carer's capacity to appropriately delegate consent to activities this will be discussed by the child's social worker, supervising social worker and foster carer.
2. Any changes to the delegated authority for a foster carer will be discussed as part of the CLA Review process.
3. It may be necessary to withdraw delegated authority to a foster carer if it is felt that the foster carer has inappropriately consented to activities which were not agreed as part of the delegated authority.
4. Where a carer is felt to have inappropriately exercised consent a meeting will take place with the foster carer, child's social worker and supervising social worker to discuss the breach of authority. A record will be made of the reasons why and a review of the foster carer's approval status will be deemed necessary where a carer has not complied with the Delegated Authority arrangements. This must be recorded in the next carer review.
5. A review of approval report will be presented to the Foster Panel to consider the continued approval of the foster carer.

Issues to consider when delegating authority to Foster Carers:

Social Care Issues

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. For further guidance, refer to Part 6 SSWA page 45.

In summary the following principles should be adhered to:

- There is no statutory duty for Disclosure Barring Service (DBS) checks to be carried out on adults in a private household where a looked after child may stay overnight. DBS checks should not normally be sought as a precondition of an overnight stay.

- Decisions on overnight stays should in most circumstances be delegated to foster parents and arrangements for such decisions written into the Placement Plan. Foster carer/s 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. It may also be helpful to identify from the start of the placement (ideally during the Placement Planning meeting) any people the child or young person might be allowed to stay with, without the need for further permission. Planned overnight stay duration should be clarified, in advance and decisions recorded by both the child's social worker and the supervising social worker. If an unplanned overnight stay is required, in an emergency, there is an expectation that the child or young person's social worker and supervising social worker is notified as soon as possible.
- Looked after children should as far as possible be granted the same permissions to take part in such acceptable age-appropriate peer activities as would reasonably be granted by the parents of their peers.
- Only where there are exceptional reasons, should the permission of the local authority be required for overnight stays or restrictions be placed on overnight stays for children in foster care.

Babysitting/Support Care

When choosing a babysitter, consideration should be given to the following in relation to an individual child or young person:

- How long the child/ young person has been in placement
- How well the child/ young person knows the proposed babysitter
- The age and experience of the babysitter
- The complexity of the child/ young person's needs
- How vulnerable the child/ young person is, including any factors as outlined within the child/ young person's care and support plan
- How vulnerable the sitter will be caring for the child/ young person.
- Any risks the child/ young person may pose.
- The child/ young person's own wishes and feelings
- The views of the child/ young person's parents (if appropriate)
- Any health needs of the child/ young person.
- CLA should not babysit other CLA including their siblings.

Within the foster carer/s recording logs, there is an expectation that dates and times where a child or young person is with a babysitter/support care are clearly recorded, as well as details of the babysitter. Diary logs are regularly signed off by the supervising worker and any further information established and any concerns discussed with the foster carer/s.

Holidays

Most holidays will require consultation with the child's social worker and discussion of contact arrangements.

Prior to booking a short break or holiday, abroad or within the UK, consultation with Children's Services is required, to include discussion about contact arrangements. Holidays should not be booked without confirmation that the child/young person has a valid passport to travel, as the Local Authority cannot be held responsible for cancelled holidays if this process is not followed. It is however, imperative that the Local Authority does not cause any delay in the application for a passport which could disrupt care arrangements for the young person.

Once the above has been confirmed, a copy of the child's passport, full details of travel arrangements, proposed accommodation and insurance certificate will be required prior to the holiday being authorised. A consent letter will be provided to the foster carer/s. All holidays should be agreed in advance and this should include discussion and where appropriate agreement from parent(s).

Looked after children cannot go on holiday during school term time unless agreement is given by Head of Service.

Organised Activities:

Children Looked After should be actively encouraged to engage in extra-curricular activities, including sports clubs, homework clubs. There is no expectation that foster carers notify Children's Services of these activities. Any high-risk activity should be discussed and agreed with the child's social worker in advance eg. Canoeing/ skiing. Foster carer/s should be able to give consent for children or young people to attend an organised activity, as if it was their own child.

Participating in hazardous activities

It is difficult to define "hazardous" activity and people's individual views will vary. The age and ability of the child or young person will be of relevance. The foster carer/s will be expected to act responsibly and ensure that the child or young person has the correct safety equipment, training and is using a recognised tutor or organisation. Requests to engage in unusual/ high-risk activities should be discussed at a CLA review.

Haircuts:

Although there is no formal restriction on the authority of foster carers regarding 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 CLA review, and any cultural issues or likely objections taken into account. Cultural issues regarding hair cutting or treatments should be taken in to account

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. For intimate areas such as genital and nipples (in females) children/young people must be over 16 years of age as under that age they are unable to legally consent to have piercings in these areas.

Consent to body piercing must be given by the child's social worker in consultation with the childcare Team Manager.

The Tattooing of Minors Act 1969 makes it illegal for anyone to tattoo you if you are under the age of 18 years; the offence is with the person who carried out the procedure rather than the person who asked for the tattoo.

Visiting friends:

As with overnight stays, the foster carer/s should be able to make appropriate decisions, in the child's best interests. Overnight stay duration should be clarified in advance and decisions recorded.

Health Care Issues

The child or young person's foster carer/s needs to know their role in safeguarding and promoting the child's well-being and this should be discussed in depth, within the Placement Planning Meeting. They will need to know about the child or young person's health, any additional health needs and their role in implementing the child's health plan.

Where a child or young person has a care plan, as a result of complex health needs, the care plan must be agreed and shared with the foster carer/s during the Placement Planning Meeting. The foster carer/s must receive any additional training and equipment required in advance of the placement commencing.

This health information provided to foster carer/s must include crucial information about allergies, current medication and the treatment of any health conditions, as well as practical details, such as forthcoming dates of appointments with specialists.

Routine medicals:

Foster carers should sign consents for routine medicals for example school or CLA 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. Consent for immunisations should be given by a Principal officer or parent(s).

Non routine medical treatment:

The issue of non-routine medical treatment is more complicated. Where a child or young person requires emergency medical treatment, foster carer/s are not able to consent. 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. Foster carer/s need to be aware of the implications of the Gillick principle in relation to a young person giving their own consent to medical treatment.

The Gillick competency applies mainly to medical advice, but it is also used by practitioners in other settings. For example, if a child or young person:

- would like to have counselling or therapeutic support but doesn't want their parents or carers to know about it
- is seeking confidential support for substance misuse
- has strong wishes about their future living arrangements which may conflict with their parents' or carers' views.

Medical professionals need to consider Gillick competency if a young person under the age of 16 wishes to receive treatment without their parents' or carers' consent or, in some cases, knowledge.

The question of consent to more invasive procedures should be discussed on a case-by-case basis as some children or 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, although this is the Head of Children's Services or Principal Officer who is required to sign for planned operations, involving general anaesthetic.

Prescribed/ Non-prescribed Medication Administration

At the Placement Planning Meeting and at each CLA Review, in consultation with the child or young person (where age appropriate), birth parents, foster carer/s, the child or young person's social worker should assess whether the child may retain and administer their own medication. If the child or young person is permitted to do so, the arrangements must be set out in the child's plan and reviewed regularly, including suitable arrangements for the storage of the medicines and recording by the child or young person of when he or she administers the medication.

Please see the management and administration of medication for children looked after policy for further guidance and expectations placed upon you as foster carer/s.

Optician:

Foster carer/s should be able to sign consent for routine examinations and spectacles. If non-routine, permission is to be sought from the child or young person's social worker.

Dentist:

Foster carer/s should be able to sign consent for routine examinations and treatment eg, fluoride treatment and standard fillings. If an appointment is non-routine, permission is to be sought from the child's social worker/team manager. Examples of this are tooth extractions, braces and root canals.

Education

School day trips:

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

Trips abroad:

All trips abroad must be agreed by the Principal Officer for Permanence who gives the authority for a child/young person to leave the country.

Trips requiring funding from the local authorities, and/or involving hazardous activities for example skiing or paragliding, must be agreed by a Principal Officer. Foster carers will then be able to sign the necessary consent forms.

Change of school -post primary transition:

All school changes except for normal transition will need agreement from the Head of Service.

The choice of post Primary School will be discussed, and agreed at a CLA reviews and foster carer/s can sign the consent form.

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 by the Head of Service. The birth parents should be consulted. The foster carer could then be authorised to complete the practical steps to implement the agreed actions and then inform the social worker when this has been completed.

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. The foster carer should report on school issues to the social worker and the CLA review.

Accessing Educational initiatives:

The foster carer should access any educational initiatives for the child/ young person, such as Letterbox Club, CLA Achievement Awards, University Open days and keep the social worker and CLA review informed.

Use of computers in school:

It is recognised that computers are a valuable tool used to contribute to a child or young person's learning and development. Foster carer/s have delegated authority to sign the relevant school consent forms. Any concerns about an individual child or young person's use of computers should be discussed during Placement Planning Meetings and in CLA Reviews.

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

Photographs:

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

This is a difficult area and should be treated with the utmost caution and sensitivity.

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 consent 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.

No child or young person should be identified as being looked after.

Church and religious ceremonies:

Foster carer/s 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/young person and their family. A child/young person should not attend church or other religious ceremonies that are not part of their own family's culture, without prior discussion and agreement from their family.

The cultural and religious needs of all children/ young people should be discussed at the Placement Planning Meeting to ensure that the foster carer/s have an awareness and are committed to promote and meet these needs.

Sex education:

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

Mobile telephones:

Foster carer/s should be responsible for making decisions regarding the possession and use of mobile phones as the parent would for their own children. They should receive clear guidance and agreement regarding the child or young person's use of mobile phones and any particular restrictions should be specified at the time of placement and reviewed at CLA reviews or if concerns arise.

Areas where foster carers cannot legally give consent

Passport:

The Local Authority would apply for passports in respect of a child aged under 16 years of age. A young person can apply for their own passport from the age 16 and should be supported to do so. It should not be assumed that all CLA have passports and any requests made for a passport should be made well in advance as this is a process that takes some time. Once a passport for a CLA is received, the Local Authority must be provided with a copy of the passport.

National Insurance Number:

Local Authorities should ensure that all children looked after are supported to obtain their national insurance number shortly before their 16th birthday. Their National Insurance Number should be given to both the young person and the foster carer/s. Useful information can be found on the HMRC website.

Summary of areas where delegated authority should be considered

The following table summarises the areas of delegated authority which should be considered for each child or young person in foster/residential care. Within the Placement plan a delegated authority agreement should be completed outlining the areas which the foster carer may consent to.

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.
- If the child is subject to a Care Order the Authority has greater parental responsibility.
- If the child is subject to an Interim care Order or accommodated under Section 76 Social Services and Wellbeing Act a greater consideration should be given to parents views and wishes.

Foster carers should generally hold delegated authority for:	The following are subject to specific agreement	Local Authority) will generally be responsible for:
Routine medical visits to GP	Immunisations	Use of contraception (dependent on capacity of young person)
An overnight stay	Holidays over 5 day's duration	Decisions regarding family time
Holidays within the UK	Holidays abroad	Passports
Organised Activities	Participating in hazardous activities	Alcohol use
Haircuts	Change of school	National Insurance Number
Visiting friends	Wider media activity (Dependent on individual circumstances)	
School medical	Non Routine medical treatment	General anaesthetic
Optician		
Dentist		General anaesthetic
School day trips	Church and religious ceremonies	
Meeting with school staff		Changes of school outside of normal transitions
Sports clubs/organisations		
School photographs		Publicity of photographs
Sex education	Body Piercing	
Mobile telephones		
Consent to educational initiatives		

Appendix 1

LOCAL AUTHORITY TO DELEGATE CONSENT

The following should be completed as part of the placement planning meeting, in conjunction with the Delegated Authority for Foster Carers policy. It should be reviewed at each Child Looked After Review and updated as circumstances require.

Name	
Name of Child/ Young Person:	
Date of Birth	
WCCIS ID	
Legal Status:	
Placement Address:	
Name of Current Carer	

I (parent or local authority Representative with parental responsibility) _____ authorise (Name of person) who is (Role) 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 (normal transitions)	Yes	No
School photographs	Yes	No
School doctor	Yes	No
Permission for school to give Paracetamol, etc	Yes	No
Medical consents (routine)	Yes	No
Optician appointments/tests/glasses	Yes	No
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 (specific to young person and detailed below):	Yes	No
Agreed by parent	Yes	No
Child/Young Person's Signature and Date (if appropriate):		
Parents Signature & Date:		

Foster Carers Signature & Date		
Child/ Young Person's Social Worker Signature & Date:		
Reviewed by IRO (Name):		
Date of Child Looked After Review:		
Authorised by HOS/Nominated Officer (signature and date)		

Copies sent to:	Yes (date)	No
Child/ Young person (if appropriate)		
Foster Carer		
School		
G.P.		
Parent		
Supervising Social Worker		
Other (please specify):		

[illegible]