



**Children's Safeguarding and  
Social Work**

Corporate Parenting Service  
Delegating authority to foster carers

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## 1 Purpose and scope of policy

Decision-making around the care of looked after children can be an area of conflict between foster carers, social workers and parents and this can sometimes impact adversely on the quality of care given and the child's experience of being looked after.

It is important that at the start of every placement, everyone involved is clear about what authority to make decisions has been delegated to the foster carer and those decisions that have been retained by either CSSW or parents.

This policy explores the issues that can arise out of decision-making and sets out how these can be resolved through placement planning processes in a manner that promotes a high standard of care for CLA and good working relationships between foster carers, parents and social workers.

### 1.1 Reasons for introducing delegated authority

Failure to adequately address the issues around delegated authority can lead to disruption of placements and an inability of carers to forge good relationships with and care adequately for children.

- Children in foster care are often marked out as different from their peers because decision-making for their care is more complicated, with carers often having to seek permission from social workers for ordinary activities like school trips. On occasion, this can lead to children missing out on activities because permission cannot be sought in time.
- Because of the split in decision-making between parents, foster carers and social workers it is not always clear who is responsible for what decision. This can lead to conflict between the parties and is likely to have a negative effect on the care of the child.
- Foster carers may feel that either they are being left to cope alone or that they are excessively restrained by the need to constantly seek permission to carry out basic caring responsibilities.
- Parents may feel that they are being locked out of decision-making and may be unclear about who is taking decisions about the child's care. This may lead them to refuse to delegate authority and thus undermine the placement.
- Social workers often have different styles of working, with some delegating more authority than others and this can lead to

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inconsistencies of practice, especially where there is a change of social worker.

### 1.2 Aims

- Where possible and appropriate, decisions on the child's day to day care will be delegated to their carer.
- Delegated authority is fully discussed, agreed and recorded at the start of every placement and that foster carers, social workers, parents and children (where appropriate) have an opportunity to contribute to this process.
- A robust framework of delegated authority is in place for each looked after child that clearly states what decisions foster carers are able to take themselves and those for which further instructions must be sought from the social worker.

This is to:

- safeguard and promote the welfare of the child
  - enable foster carers to provide high quality care for the child
  - reflect the wishes and feelings of parents where this is consistent with the child's welfare and recognise their continued role in the child's life
  - facilitate the implementation of the child's care plan
  - enhance the relationship between the child and the foster carer
  - promote good working relationships between foster carers, CSSW and parents
  - speed up decision-making processes so that the child can have a normal family life whilst in foster care.
- Decision-making for looked after children will be a consistent practice that balances the need for continued parental involvement, CSSW oversight of placements and flexibility for the foster carer to provide care for the child.
  - Decisions on delegation of authority will be on a case by case basis and will take into account the child's needs and the best manner in which these can be met within placement. Clear arrangements for seeking permission where required will be agreed in advance.

## 2 Legal framework

### 2.1 Parental responsibility and parental consent

Parental responsibility (PR) is a concept that was introduced by the Children Act 1989 and is defined as “all the rights, duties, powers, responsibilities and authority which by law a parent of a child has in relation to that child and his property”.

This covers the child’s care and upbringing and the right to make long-term decisions about the child’s future, and it is aspects of PR that are delegated to foster carers for the duration of the placement.

Only those who hold PR for the child will be able to delegate authority to foster carers but ultimately they will remain responsible for the child:

- A child’s mother will **always** have parental responsibility
- Fathers will share parental responsibility with the mother if:
  - he was married to the mother at the time of the birth or they subsequently marry
  - through a court order
  - by entering into an agreement with the mother to share parental responsibility
  - for children born after 1<sup>st</sup> December 2003, where he jointly registers the child’s birth with the mother.
- If a father does not hold parental responsibility, he will still be considered the child’s parent for the purposes of the Children Act and will be entitled to be consulted on any plans for the child and to have reasonable contact. However, he will not be entitled to remove a child from voluntary accommodation.
- Local authorities do not acquire PR for any child who is being accommodated by voluntary agreement; parents must specifically delegate authority for matters such as consent to medical treatment as part of the agreement to accommodate.
- Local authorities share PR with parents for any child who is the subject of a court order and should consult with parents on delegating authority and aim to follow their wishes but only where this is consistent with the child’s welfare.

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- Where parents do not engage Camden may still take all reasonable decisions on the child's care in order to safeguard and promote their welfare.

### 2.2 Consent by the child

The views of the child regarding delegated authority should be sought by the social worker. Please refer to the *Consent and children and young people* policy for details of when children are considered competent to give consent. <https://ascpractice.camden.gov.uk/media/3376/consent-and-children-and-young-people.pdf>

## 3 Types of decisions

Foster carers must have authority to make decisions for the child delegated to them by the child's parents or social worker, but by law, anyone who is caring for a child can do what is reasonable at the time to safeguard and promote the child's welfare. This means that in an emergency, foster carers can take decisions without authority being delegated in order to protect the child as long as Camden is notified of the event immediately after.

The type of decision will determine the level of delegation that can be given:

- Where possible, day to day decisions on the child's care should be delegated the foster carer; where any decisions are retained by the parent or CSSW this must be recorded;
- Longer-term decisions on the child's care such as which school they will attend should be taken in partnership between carers, social workers and parents;
- Decisions on significant issues such as surgery should be retained by parents for children accommodated under section 20 or CSSW where the child is subject to a care order.

The following decisions **may not be delegated** and may only be consented to by those holding PR.

- changing the child's name
- bringing the child up in a different religion to their own
- taking the child out of the UK
- consenting to the child's adoption.

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For the purposes of the Education Act 1996, “parent” includes anyone who has day to day care for the child so foster carers are able to fully engage with schools on the child’s behalf and will be legally responsible for their attendance and behaviour.

All delegation of authority and those matters that are retained by the local authority or parents must be fully discussed and clearly recorded in the child’s placement plan prior to the placement starting. Any required changes to delegated authority should be considered at the child’s statutory CLA review.

### 3 Planning processes

#### 3.1 Roles and responsibilities

Children’s social workers should:

- lead the discussion on delegation of authority
- seek the views of parents and children
- ensure parents sign their consent to delegating authority on the consent record
- record agreements on the delegated authority record available at; <https://ascpractice.camden.gov.uk/media/3197/delegated-authority-checklist.docx>
- provide parents, carers and supervising social workers with information on the legal aspects of delegating PR
- ensure arrangements remain flexible and seek changes where necessary.

Supervising social workers should:

- be part of the discussion on delegated authority
- ensure foster carers are aware of what agreements have been made and that they have the right skills and training to carry out the agreed tasks
- monitor the foster carer’s use of delegated authority and discuss any difficulties
- liaise with the CLA social worker around any difficulties or in negotiating any required changes to delegated authority.

The IRO should:

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- be consulted on arrangements for delegated authority where required
- review all arrangements for delegating authority at each statutory CLA review
- make recommendations on changes to arrangements where this is in the child's best interests
- as part of the review process, meet with the child and parents prior to reviews to seek their views on delegated authority arrangements
- ensure arrangements are able to meet the child's needs and help Camden to meet corporate parenting responsibilities.

### 3.2 Prior to placement

Parents should be given a copy of the division's information sheet for parents of CLA (link below) and social workers should explain the nature of the decisions that need to be delegated to foster carers and to discuss parental consent to this. This is to ensure parents are able to make informed decisions and to encourage them to engage with the process.

<https://ascpractice.camden.gov.uk/media/3674/looked-after-children-information-for-parents.pdf>

Where children are of sufficient age and understanding, social workers should also include them in any discussion of delegated authority as they may have their own views regarding who should make decisions about their care.

Following these discussions, it should be clear what the main areas of contention may be and where agreement can be reached. Social workers should also discuss with their supervisor whether any key decisions about the child's care must be retained by CSSW, depending on the child's needs and circumstances.

Social workers should discuss the matter of delegating authority with the foster carer's supervising social worker to look at any issues around the carer's level of experience, the specific needs of the child and what areas of delegated authority are likely to be covered at the Placement Agreement Meeting.

Social workers should have particular regard to delegation of authority where the child is living with a family and friends carer. There may already be an agreement in place between the carer and the parent on issues around the child's care and these should be respected where they are consistent with the child's welfare.



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### **3.3 Placement agreement meeting**

This meeting should be used to finalise and record agreements on delegated authority. Sharing information and a discussion on the child's routines that takes place at the meeting should allow participants to identify what areas of decision-making are likely to arise during the placement and will need to be formally delegated to foster carers.

As far as possible, agreement should be made on any issue that is likely to arise so that the child's experience of care can be as normal as possible. Tasks agreed within the placement plan should have corresponding authority delegated.

### **3.4 Statutory review**

The statutory CLA review will be crucial to ensure that the agreed framework of delegated authority is able to meet the child's needs and support the placement and care plan. The IRO should check each agreed delegation to see if it remains relevant or whether changes are needed.

It is likely at the first review that issues that had not been anticipated at the start of the placement have since arisen, requiring a decision; IROs must ensure that these matters are raised and discussed and agreed at the review meeting.

### **3.5 Recording**

Decisions relating to delegated authority should be recorded on the child's placement plan and the delegated authority toolkit which can be used as a checklist to ensure all relevant areas are covered.

Specific parental consent to matters such as medical treatment must be signed on the consent record. Any extra consent required for individual children should also be recorded on this record.

Immediate changes to delegated authority that take place between CLA reviews in response to emergencies should be recorded in the case notes on the child's case record and discussed at the following CLA review meeting.

Changes to delegated authority that are agreed at the statutory CLA review should be recorded by the IRO in the minutes of the review meeting.

### **3.6 Changes to delegated authority**

As children's circumstances change, so will the nature of the decisions about their care, and consequent changes to delegated authority need to be discussed and agreed at the child's statutory CLA review. Changes are likely to be required in the following circumstances:

- As the child gets older, and is preparing for adulthood and leaving care, responsibility for some decisions will need to be passed to them.
- Where a short-term placement becomes more long-term or permanent, more responsibility for day to day tasks and decision-making should be passed to the carer to reflect their increased involvement in the child's life.
- Where parent's roles are changing, for example if rehabilitation is likely or a move to permanence is decided on, there will need to be a corresponding change in how they share responsibility for decision-making.

## **4 Decisions for delegation**

### **4.1 Manner of delegation**

There are different levels of decision-making for CLA ranging from routine decisions around daily care to major decisions such as medical interventions. For some children, decision-making processes may be complicated by matters such as their legal or immigration status or specific medical needs.

Signed, explicit consent is needed from those with PR for activities such as medical treatment and interventions or applications for passports and must be signed by parents or social workers. Signed consent for matters such as school trips can be delegated to foster carers.

Other aspects of care have implicit consent based on the placement agreement and care plan that sets out the regime for caring for the child, but agreement on these must be recorded on the placement plan or delegated authority record.

Most daily decisions will be taken by the foster carer, but it must be made clear when new situations arise whether the foster carer will need to refer back to the social worker for a decision and how this process will be carried out in a timely way.

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There should also be agreement on how foster carers will keep social workers and parents informed where they have had to make emergency decisions in order to safeguard the child.

### 4.2 Health

- Staff should refer to the division's policy on care planning for health for further information regarding consent to medical treatment.  
<https://ascpractice.camden.gov.uk/media/3214/health-care-planning.pdf>
- Foster carers should be given a signed consent record from parents for routine medicals, immunisations, dental, optician and general treatment.
- If the child is subject to a care order and parents do not sign the consent record, it may be signed by the CLA Head of Service on behalf of CSSW.
- If the child is accommodated under section 20, parents must sign the consent record so that routine medical checks and treatment can take place. If parents cannot be persuaded to sign the consent, this should be reported to the CLA Head of Service.
- Only the Director can give consent for non-routine treatment for children who require specialist medical interventions and are subject to care orders.
- Foster carers may consent to any emergency treatment as the person who has care of the child but must try to gain consent in advance if possible and inform Camden of any consent given immediately after.

### 4.3 Education

- Staff should refer to the division's policy on care planning for the education of CLA for further information on delegation of tasks relating to the child's education.  
<https://ascpractice.camden.gov.uk/media/3217/education-care-planning.pdf>
- Decisions on what school the child attends and whether they should change schools can only be taken within the statutory care planning process.

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- Foster carers should be able to engage fully with the child's school and take routine daily decisions in order to make the child's education as normal as possible. Carers should have authority to sign consents for school trips and out of school activities, attend meetings, sign Home/School agreements and to maintain contact with the school and discuss the child's progress.
- School trips abroad or that involve hazardous activities should be discussed with social workers and parents first.

### 4.4 General decisions

- In order to ensure CLA enjoy a normal childhood, decisions on overnight stays and visits to friends should be delegated to foster carers where appropriate and in line with the division's policy on overnight stays for CLA.  
<https://ascpractice.camden.gov.uk/media/3198/overnight-stays-for-CLA.pdf>
- Holidays should be discussed with parents and social workers in advance as these may affect contact arrangements. If the child requires a passport, staff should refer to the divisional policy on passport applications for CLA. CSSW should be notified of any proposed holiday dates and anyone with PR must consent to the child being taken abroad.  
<https://ascpractice.camden.gov.uk/media/3199/guidance-on-passports-for-CLA.pdf>
- Where possible, foster carers should have authority to organise the child's haircuts but this must be discussed in advance with parents as there may be religious or cultural aspects that need to be taken into account.
- Foster carers should be able to take photographs of the child so that there is a record for the child of their time in placement. However, authority needs to be delegated to the foster carer to consent to other photographic or media activity, for example school photographs or publicity materials for clubs etc. When deciding on this, social workers must have regard for any safeguarding aspects that may be compromised in respect of the child. This should be discussed at the outset of the placement.

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- It is important that decisions about allowing the child access to mobile phones and social networking sites is discussed and agreed in advance in the context of e-safety and the child's history and presenting problems. Foster carers may need to limit a child's use of mobiles or social networking sites in order to implement house rules or due to safeguarding concerns. In general, longer term foster carers will be delegated more responsibility to make these decisions for the child

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