

Who should give consent?

Practitioners may also need to consider whose consent should be sought. A child or young person who has the capacity to understand and make their own decisions, may give (or refuse) consent to sharing. Sufficient understanding is presumed in law for young people aged 16 and older, and younger children may also have sufficient understanding.

When assessing a child's understanding you should explain the issues to the child in a way that is suitable for their age, language and likely understanding. Where applicable, you should use their preferred mode of communication.

Even if you assess that the parent or carer should provide consent rather than the child, children should be included in discussions with parents/carers about how their information will be used, as far as is possible, as this will help them to gain in understanding. It will also help the parent/carer to understand that there will be a time when they cannot make these decisions for their child.

You should consider consent on a case by case basis taking into account the maturity

of the child or young person. Where a child or young person is deemed capable of giving consent, it is unlikely that parental consent will override the decision made by the child. However, practitioners should always encourage children under 16 to involve their parents/carers wherever possible.

Where parental consent is required, the consent of one person is sufficient. Where family members are in conflict, the practitioner will need to consider carefully whose consent should be sought. If the parents are separated, the consent would normally be sought from the parent with whom the child resides. If a care order is in force, the local authority will share parental responsibility with parent(s), and practitioners should liaise with them about questions of consent.

If the child or young person and/or their parent or carer refuses consent for the CAF to be started, the practitioner should note this in the child's file and on the eCAF system for future reference. Where consent is given, care should be taken to respect the wishes of the child or young person and family regarding any confidential information given to the practitioner that they do not wish to be recorded on the CAF form or shared with other services.

eCAF and Information Sharing

A brief guide for practitioners



Consent and eCAF

The CAF is a voluntary assessment process and, as such, a child or young person and/or their parent/carer must give their consent for the assessment to take place in the full knowledge of what will happen to the information, for example that it will be stored electronically and who can access it.

In undertaking a common assessment, the practitioner must:

- obtain *informed* consent at the outset for undertaking the CAF and for recording the information
- work with the child, young person and/ or parents/carers to agree how information is recorded, used and shared
- obtain informed and explicit consent for sharing information detailing exactly what consent is for and in what circumstances it will apply. Consent should be written, ie. a signature on the Slough permission form and preferably another on the final, merged CAF.
- use the electronic CAF system to record initial consent, and to record updated consent if other professionals need to be involved at a later date

Once the assessment has been undertaken, and all supporting practitioners' contributions have been merged, the child or young person and/or their parent/carer should ideally sign the finalised CAF assessment in the appropriate place on the printed form.

Practitioners should ensure that any information shared is accurate and up-to-date, necessary for the purpose for which you are sharing it, shared with those people who need to see it and shared securely.

Practitioners must normally only record and share CAF information with the explicit consent of the child, young person or parent/carer. This should not be a significant barrier if the practitioner and child, young person and family are working in partnership. Practitioners should also provide accessible copies of relevant documents to the child or young person and parent/carer as appropriate.

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Confidentiality

There are some circumstances where sharing confidential information without consent will normally be justified in the public interest. These are:

- where there is evidence that the child or young person is suffering, or is at risk of suffering, significant harm
- where there is reasonable cause to believe that a child or young person may be suffering, or is at risk of suffering, significant harm
- to prevent significant harm arising to children and young people, or serious harm to adults, including through the prevention, detection and prosecution of serious crime
- In cases where the practitioner decides to share information without consent, they should record the reasons for doing so. Practitioners should always record decisions about information sharing - with or without consent and whether the decision is to share or not to share.

There is more guidance on these matters in *Information Sharing: Guidance for practitioners and managers*. If you are unsure, you should seek advice from your line manager for support. For NHS staff, the Caldicott Guardian may be helpful.