



**Effective Support for Children, Young People, and Families in North Somerset**

**Appendix 2 – Informed Consent**

**THIS GUIDANCE DOES NOT COVER CONSENT FOR MEDICAL TREATMENT**

For additional support for children and young people to be effective it must be undertaken with the consent of the child, young person and their parents or carers.

It should take account of the child, young person’s wishes and feelings wherever possible, their age and level of understanding, family circumstances and the wider community context in which they are living.

Consent must be re-sought for each episode of work that a practitioner undertakes with a family, for example: if work with a family has finished and then reopens, consent must be regained. Practitioners must be aware that parents can withdraw consent at any time.

In most cases it is appropriate to seek consent. However, there are some cases where it is not. Consent should not be sought if doing so would:

* Place a person (the individual, family member, worker or a third party) at increased risk of significant harm (if a child) or serious harm (if an adult)
* Prejudice the prevention, detection or prosecution of a serious crime – this is likely to cover most criminal offences relating to children
* Lead to an unjustified delay in making enquiries about allegations of significant harm (to a child) or serious harm (to an adult)

In cases where consent is not given for an Assessment, practitioners should consider how the needs of the child might be met. If at any time it is considered that the child has suffered significant harm or is likely to do so (as defined in the Children Act 1989), a referral should be made immediately to Children’s Social Care. This referral can be made by any practitioner.

Where consent is not sought the decision and rationale should be clearly recorded on the child’s file within the agency making the referral.