**CONSENT FOR INITIAL and REVIEW HEALTH ASSESSMENTS – Looked After Children**

The purpose of a health assessment is to contribute to the improvement of health outcomes for all Looked After Children, to ensure their health needs are assessed and addressed.

An Initial Health Assessment is undertaken when a child comes in to care. A follow up Review Health Assessment is conducted every 6 months (for children under 5), or 12 months. Onward referrals to specialist services will be made where appropriate.

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| Full (legal) name of young person | Date of Birth |
| Legal Status\* | Date into Care |
| LCS Number | NHS Number |

*\*where the legal status of a child changes, the social worker should consider whether this form needs to be updated and re-signed*

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| **BOX 1 Consent for health assessment** The following may give consent:* a child under 16 of sufficient age and understanding ([Gillick competency/Fraser guidelines](https://www.nspcc.org.uk/preventing-abuse/child-protection-system/legal-definition-child-rights-law/gillick-competency-fraser-guidelines/?_t_id=1B2M2Y8AsgTpgAmY7PhCfg%3d%3d&_t_q=gillick+competence&_t_hit.id=Nspcc_Web_Models_Pages_TopicPage/_aff42e87-87ef-4383-9a88-612b6cecf5b3_en-GB&_t_hit.pos=1))
* a child over 16 where they have the capacity to do so ([Mental Capacity Act 2005](http://www.legislation.gov.uk/ukpga/2005/9/contents))
* any person with parental responsibility, providing they have the capacity to do so ([Mental Capacity Act 2005](http://www.legislation.gov.uk/ukpga/2005/9/contents))
* the Local Authority when the child is the subject of a Care Order, Interim Care Order or Placement Order. In such cases the Social Worker can sign on behalf of the Local Authority.

**I do / do not (delete as appropriate)** give my consent for an Initial Health Assessment and subsequent Review Health Assessments to be undertaken for the above child/young person in accordance with the [Statutory Guidance](https://www.gov.uk/government/publications/promoting-the-health-and-wellbeing-of-looked-after-children--2) on promoting the health and wellbeing of Looked After Children (2015). **Name** (Print) **Relationship to child/ young person if signing on their behalf** **Signature Date** |
| **BOX 2 Consent to obtain and share health information** (consent can be given as per the bullet points in box 1 above)Appropriate information sharing between professionals will help achieve good outcomes for children and young people. It is vital that the LAC Health Team has good information about the child / young person to properly inform the Health Assessment. **I do / do not (delete as appropriate)** give consent for: * professionals to share information with the LAC Health Team about the child / young person named above in order to inform the health assessment
* the health assessment to be shared with relevant professionals where this will support outcomes for the child / young person named above.

This information will only be shared with people directly involved in the care of the child / young person. The health assessment, summary and health care plan will be shared with the GP. Information will also be shared with the Social Worker, Independent Reviewing Officer, Foster Carer or care provider (as appropriate), to ensure they can support the health needs of the young person. During the assessment, a member of the LAC Health Team will talk to the young person and their carer about what information will be shared and with whom. **Name** (Print) **Relationship to young person if signing on their behalf****Signature Date** |