



Consents and decisions

for family-based
carers of children
and young people
under the Guardianship
of the Minister



Government
of South Australia

Department for Education
and Child Development



Consents and decisions

for family-based
carers of children
and young people
under the Guardianship
of the Minister

© 2012 Government of South Australia.
Department for Education and Child Development
Families SA

Adelaide, South Australia

Published August 2012

www.families.sa.gov.au

In addition to images protected by intellectual property rights owned by the State Government of South Australia, certain intellectual property rights of third parties may exist in respect of images contained in this material.

Whilst the State Government has obtained the necessary licences to reproduce the intellectual property rights of the third parties, further reproduction is not permitted.



Government of South Australia

Department for Education and
Child Development

Families SA

Contents

Consents and decisions

for family-based carers of
children and young people under
the Guardianship of the Minister



Introduction	1
Background	2
Decision making framework	3
Approvals	3
Decisions requiring the Minister's or Executive Director's approval	3
Decisions requiring Families SA supervisor approval	4
Decisions requiring parental approval	4
Responsibilities	5
Role of the child, the carer and the case manager in decision making	5
Role of birth parent(s) and family in decision making	6
Decision to remove the child from a care placement on an emergency or permanent basis	6
Guidelines for decision making	7
Education	7
Enrolment	7
Individual education plan	7
School Card	8
Child care	8
Emotions/behaviours	9
Missing persons	9
Missing persons – media campaigns	9
Family and community relationships	10
Family contact	10
Marriage	10
Sleepovers	11
Finances	12
Opening a savings account	12
Pocket money	12
Birthday, Easter and Christmas gifts	13
Health	13
Medical	14
Day-to-day medical treatment	14
Consent for general anaesthetic, medical procedures and end of life decisions	15
Immunisation	15

Health - <i>continued</i>	13
Dental	16
Allied health	16
Medicare cards	16
Health care cards	16
Ambulance cover	16
Identity	17
Body piercing and tattoos	17
Haircuts	17
Change of name	18
Change of religion/religious instruction	18
Cultural	19
Aboriginal and Torres Strait Islander children and young people	19
Culturally and linguistically diverse children and young people	19
Legal	20
Victims of Crime Compensation	20
Police interviews	20
Public Trustee funds	21
Life skills	21
Driver education and training/drivers licence	21
Employment	22
Preparing for adulthood – referral to services	22
Recreation, camping and social interests	22
Camps and sporting activities	22
Camps/activities in South Australia	23
Camps/activities not in South Australia	23
Carer, case manager and supervisor responsibilities	24
Overseas travel and passport applications	24
Photographs/media/internet	25
Social networking sites	26
Death, organ donation and funerals	27
Cultural impact	28
Aboriginal and Torres Strait Islander communities	28
Culturally and linguistically diverse communities	28
Other documents	29

Introduction

This document outlines the decision making responsibilities of different parties, including the foster carer, Families SA and the child. It covers different circumstances including 12-month care and protection orders and orders under Guardianship of the Minister until 18 years old.

This document also outlines the duties and powers of the Minister for Education and Child Development and the delegation requirements for exercising these duties as per Section 80 of the *Family and Community Services Act 1972* and Section 57 of the *Children's Protection Act 1993*.

The provision of care for a child under the Guardianship of the Minister is a partnership between the Minister and the child's carers.

Where the child is placed under a 12-month Care and Protection Order, it is expected that the birth family would be involved in decision making while reunification possibilities are assessed.

In longer-term, stable care situations many decisions will need to be made by the carer as a natural part of the parenting process. This reinforces the child's place and belonging to the carer's family.

The day-to-day care of the child and the associated decisions and consents are based on the best interests of the individual child.

“Children and young people are at the centre of everything we do”

Background

A child placed under the Guardianship of the Minister requires stability of care and a sense of belonging and connectedness. In addition, they should take part in everyday activities that offer the normal childhood experiences and family life. They need opportunities to develop safe and positive relationships with carers, who support their connection to their birth family, community, peer and social networks, and encourage their involvement in education, cultural and recreational activities.

Prompt and efficient decision making supports a child's right to activities that are important to them and improves their ability to access key services.

Sometimes, the boundaries of decision making can be unclear. A clear case plan will ensure all parties have their views and wishes taken into account and decisions documented. This process can be used to authorise a child's carer to make certain decisions and to access relevant services or supports for the child in their care.

When a complex or sensitive decision needs to be made, carers should discuss the matter with the child's case manager who will consult with their supervisor, principal Aboriginal consultants, principal social workers and principal clinical psychologists as required.

This will make sure that sensitive decisions are made by the appropriate person, all options are considered, and the decision is well documented.





Consents and decisions

for family-based carers of
children and young people under
the Guardianship of the Minister

3

Decision making framework

Decision making framework

Approvals

The ability of all parties to make decisions or provide consent will largely be determined by:

- the individual needs and best interest of the child
- the Minister's legal responsibilities under Section 51 *Children's Protection Act 1993*
- opinions of other relevant parties including birth parents, family, carers, the child, case managers and relevant experts in their field
- who has the delegation to provide the required consent
- the length and type of the order and any specific instructions on it
- any agreements reached between relevant parties in relation to case management through case planning
- relevant policies, procedures, guidelines or agreements

- the needs of Aboriginal and Torres Strait Islander children and their families and communities
- the needs of culturally and linguistically diverse children, young people and their families.

The types of decisions made about the care and wellbeing of a child in care generally fall into the following broad categories:

Decisions requiring the Minister's or Executive Director's approval

There will be times when case managers and the child's carer must seek the consent of the Minister or the Executive Director prior to making a decision for the child.

Decisions for Ministerial approval include:

- any matters where there is risk to the life of the child including significant medical procedures
- marriage.

Decisions for Executive Director approval include:

- overseas and interstate travel
- financial approval for overseas travel
- publication of a photo or image identifying the child as being under the guardianship of the Minister
- approval to use funds belonging to a child or young person held by the Public Trustee.

Decisions requiring Families SA supervisor approval

There are powers under the *Children's Protection Act 1993* that are delegated to Families SA supervisors and above. They cannot be delegated through the case planning process to the child's carer. They include:

- medical procedures requiring general anaesthetic
- decisions that have financial implications for Families SA.

These decisions are based on an assessment that is in the child's best interest. An example is the consent for Families SA to financially support the child to attend private school.

Decisions requiring parental approval

There are a number of situations where the consent of the birth parent(s) is required in relation to a child, regardless of the type and length of an order. They include:

- child's application for a passport to travel overseas. However, if parental approval is not possible, the Executive Director is able to approve the application on behalf of the Minister
- official name change for the child
- funeral and burial rights. Where the child dies whilst under the guardianship of the Minister, funeral and burial rights belong to the child's next of kin, in order of seniority, beginning with the birth parents
- organ donation. Following the death of the child, the child's birth parents have the right to override decisions for or against transplanting the deceased child's organs.

Families SA will make every attempt to engage with the birth family and advocate for the carers involvement in these decisions.

Decisions on day-to-day parenting issues

When a child is placed with carers, the Minister authorises carers to make the decisions for the day-to-day care of the child.

Although the day-to-day responsibilities of care are placed with the carers, this does not remove or reduce the ultimate Ministerial responsibility for the child's safety and wellbeing.

The Minister may also delegate some official guardianship powers to carers if a child has been in their care for more than three years. These decisions include:

- transporting the child across state boundaries
- the child's education
- medical treatment for the child.

This delegation must be from the Minister to the carer and should be sought from the Executive Director.

On occasions where the birth family do not engage with the foster carer or Families SA staff on these decisions, Families SA will attempt to represent the carer's involvement with the birth family.



Responsibilities

Role of the child, the carer and the case manager in decision making

All children and young people have a right to participate in decisions about day-to-day issues and plan for their future. They are active members of family and community life and have their own opinions, values and unique understanding of their world. Dependent on their age and developmental level they should be increasingly involved in day-to-day and long-term decisions.

Carers have a first-hand understanding of the child in their care and make numerous decisions on a daily basis about the child's general care and well being. Carers are in an ideal position to identify issues arising such as health, education or development and promote the needs or wishes of the child.

Carers and case managers can support the child to communicate their thoughts and needs through a positive and respectful relationship built on trust and understanding of the child and their needs. Respect of their cultural, spiritual, social, physical and emotional development and needs is very important.

Case managers and carers are encouraged to involve the child in formal decision making processes. Such decisions could involve case planning meetings and annual reviews. A child can make the decision to join CREATE Foundation and should be advised of this by the carer or case manager.

The case manager is responsible for developing the case plan with the carer to provide clarity and responsibility for making decisions.

In addition the case plan outlines actions a carer can take in circumstances where the case manager is unable to follow through on agreed actions.

Role of birth parent(s) and family in decision making

It is **important** for a child to maintain their connection to their birth family, cultural/community family. Involvement of birth parents and family in decision making should be based on the permanency of the child's place in the carer's family.

Where reunification is being sought it is **important** for birth parents and family to be involved in decisions that affect the child.

However, their involvement should be commensurate with the permanency to the carer family, who will take on more responsibility for making decisions.

It is **important**, providing it is safe to do so, to keep the child's birth family, extended family or community members informed of major decisions made in the child's life.

Involvement of birth parents and family in decision making should be based on the permanency of the child's place in the carer's family.

Decision to remove the child from a care placement on an emergency or permanent basis

The decision to remove children from the families they are living with is a critical decision for a child.

Decisions of this magnitude must be based on comprehensive assessment of the circumstances and the needs of the child, including maintaining their immediate safety and preventing risk of harm.

Families SA will make the decision to remove a child from care after extensive consultation with experts including the principal Aboriginal consultant, principal social worker and principal clinical psychologist.



Guidelines for decision making

Education

All young people aged between six and 16 years are legally required to participate in full-time schooling.

Between the ages of 16 and 17 years old, young people must participate full-time in an approved learning program. A learning program can include education or training delivered through a school, university or registered training organisation, an apprenticeship or traineeship, or a combination of these.

The school leaving age is 16.

The Minister for Education and Child Development, or a delegate, is able to exempt any child conditionally, or unconditionally, from attending school. The supervisor must sign the relevant form to enact the request for exemption and send it to the Minister for Education and Child Development.

Enrolment

The case manager, in consultation with the child and their carer, is responsible for ensuring the child is enrolled in school. They are responsible for making sure the appropriate documentation is signed and sent to the school or preschool.

Individual education plan

Supporting children and young people to engage in education provides them with both immediate and future opportunities to develop the skills and abilities needed for personal, social and future accomplishment. An Individual education plan (IEP) is required to ensure that the child's developmental, cultural, social, psychological and educational needs are taken into account and adequately met.

The Department for Education and Child Development (DECD) interagency behaviour support coordinator is responsible for facilitating the process of developing the IEP in conjunction with input from the child, their carers, case manager and professionals involved in providing key services for the child.

This provides an opportunity to document who to contact for decisions in relation to school activities, excursions or concerns that arise. In most cases, carers will have the authority to consent to school activities and excursions as documented in the case plan.

Supporting children and young people to engage in education provides them with both immediate and future opportunities to develop the skills and abilities needed for personal, social and future accomplishment.

School Card

Government schools:

An application form does not need to be completed for children and young people in care enrolled in a public school as the student's name will be collected centrally and automatically approved.

Non-government schools:

An application form needs to be completed for children and young people in care enrolled in a non-government school.

The case manager is responsible for ensuring the child is registered for a school card, however, this is generally undertaken by the carer as a normal part of their interaction with the school.

The carer obtains from the child's case worker or school the *School Card application form – Form F* (specific to the current school year) and completes and signs the form.

The form must include documentation to verify custody/ guardianship or status of the child.

One document of the following is required:

- a letter from Families SA
- a copy of the guardianship/ custody Court Order
- a copy of the student's Centrelink Card which shows 'FO' indicating they are in foster care
- the applicant's (could be carer) Centrelink Card which lists the student as a dependent.

The guidelines and application forms are also available on the Department for Education and Child Development website – www.decd.sa.gov.au.

Child care

To be eligible for Child Care Benefit, the carer must apply in their name (not the agency) and accept liability for paying the cost of child care. Families SA will pay the gap between the Child Care Benefit and the total cost of child care once the criteria for the Families SA Ready Reference 2 have been met. Refer to Alternative care support payments on DECD website – www.decd.sa.gov.au.



Emotions/ behaviours

Children who are removed from the care of their birth families are considered vulnerable as a result of their experiences of abuse, neglect and separation. They may be at greater risk of experiencing social, psychological and emotional distress.

Where the child is experiencing emotional or behavioural difficulties, the carer is encouraged to discuss their concerns with the case manager to develop an assessment or therapeutic intervention plan.

Missing persons

It is the responsibility of supervisors, delegated to case managers in partnership with carers, to actively follow up on a missing child.

The timeframe for reporting a child as missing will be dependent on an assessment of risk and urgency, including, age, vulnerability factors and perceived risk of injury or harm. The case manager will lodge a missing persons report with the South Australia Police and update the

child's details on the missing persons register on the Connected Client Case Management System (C3MS).

In some cases, young people under a Care and Protection Order may also have a Youth Justice Order specifying conditions such as their place of residence and people the young person may contact.

As a missing person, the young person may be in breach of the conditions stipulated on their order. The care and protection of the young person is the responsibility of Families SA, while compliance with the conditions of a youth justice order is the responsibility of the Department for Communities and Social Inclusion. The agencies work together for the best interest of the young person.

Missing persons – media campaigns

Permission can only be given by the Executive Director if police request authorisation of a public media campaign, which may include a photograph of the child.

Family and community relationships

Family contact

The case manager will create a contact plan that will be documented in the child's case plan and developed in line with the relevant court order.

The conditions for contact may be legally specified. In addition to face-to-face contact, contact can include telephone calls and the exchange of photographs and letters.

A number of principles guide a child's contact with their parents, siblings, grandparents, cultural/community family, significant others or ex-carers.

These principles include:

- the child's safety
- that contact decisions are child centred
- that contact is culturally appropriate
- that contact is a purposeful activity that is planned and coordinated

- the child's views are heard and considered
- that decisions are made collaboratively and inclusively.

Carers are ideally placed to observe the impact of contact arrangements and share this information with the case managers.

The impact on the child could include changes to their behaviour or emotional state before or after family contact, concerns with transport arrangements and extreme weather conditions.

Decisions about contact will be made in partnership with the child, birth family and carers and documented in the case plan. Important information to consider for contact arrangements include, the time and venue for contact, transport, specific needs of the child and carer or issues arising on the day that require a decision to be made by the carer.

Marriage

Consent for a young person 18 years of age and under a Guardianship Order to marry is the responsibility of the Minister.

If a person under 18 marries and is under a Guardianship Order, the Minister's legal responsibility and obligation remains, unless overturned by an application to the Youth Court to discharge the Guardianship Order.

Decisions about the contact will be made in partnership with the child, birth family and carers and documented in the case plan.



Sleepovers

Attending sleepovers is important for children and young people in our community, particularly those aged 8-14 years. Sleepovers can have a positive impact on the self-esteem of children and young people and help them to make and maintain friendships.

Attending sleepovers is supported by Families SA, subject to a child's safety and supervision being assured. Ideally, day-to-day activities such as sleepovers will be discussed as a part of the normal carer family life.

Carers are authorised to make the decision to allow a child to attend a sleepover after considering the safety and wellbeing of the child.

Things to consider may include the following questions:

- What is known about the host family?
- What standards of behaviour are acceptable in the host family? Are these behaviours consistent with the standards of the carer family?
- What supervision will there be at the sleepover and for how long? Is the supervision adequate for the number of people attending?
- Who will be attending the sleepover? Will older siblings/ extended family members or other people also be attending the sleepover?
- What does the child think about attending the sleepover?
- What activities are planned for the sleepover eg, DVDs, games, etc? Are these activities age-appropriate?
- Ensure the child knows that it is okay to contact the carer at any hour of the day or night or have a back-up plan should they feel uncomfortable or scared.

The carer will need to advise the child's case manager of the sleepover arrangements if there are

concerns about the sleepover. The case manager can help the family to deal with the issues or concerns identified, taking into consideration the age and vulnerability of the child. Some of these options may include:

- speaking with the child to determine their thoughts about the sleepover
- discussing the concerns with the host family supervising the sleepover
- discussing with the child a strategy for ensuring their safety and wellbeing should they feel uncomfortable while attending the sleepover eg, encouraging the child to ring the carer if they have a mobile phone or alternatively to ask the host family to contact the carer.

If it is decided that child should not attend the sleepover due to safety and wellbeing concerns, it is important that this decision is conveyed to the child in a sensitive manner. The case manager and carer may need to discuss beforehand who will talk to the child to ensure that they understand the decision has been made out of care and concern for them.

Finances

Opening a savings account

All children and young people in care should have their own savings account and learn money management skills. Carers can discuss this with the child's case manager if they do not already have a savings account and support the child to open an individual account.

Different types of identity documents are required for a child to open a savings account. A 100 point ID check will be required for the child to open a savings account. The case manager is responsible for providing the original documents that provide identity and completing any relevant forms. Further information regarding ID checks can be obtained from Australia Post.

Young people aged 15 years and over, living in the metropolitan area, should be referred to Families SA Youth Support Services by their case manager for an assessment of life

skills, including money management skills. Financial Counselling and Support Services may also be useful in supporting a young person to learn money management skills.

Pocket money

Families SA does not pay pocket money directly into the bank accounts of children. The fortnightly carer payment has been calculated to include pocket money for the child. Ideally, the amount of pocket money provided will match the amounts paid to other children in the home including the carer's own children. This is encouraged to help the child feel a normal, accepted and appreciated member of the carer's family.

A guide to the amount of pocket money paid is provided in the Carer handbook that essentially matches the age of the child (eg, 7 years = \$7 per week pocket money).

Carers do not need to provide pocket money for young people aged 16 years and over if they receive a Centrelink Youth Allowance.

Birthday, Easter and Christmas gifts

Carers are expected to cover the cost of presents for birthdays, Christmas, other religious festivals or special events, birthday parties and special parties for the child.

In acknowledgement of the Minister's role as guardian, the case manager will also purchase a birthday and Christmas present (or appropriate alternative) for the child. In addition, Families SA will contribute toward the cost of gifts from the child to birth parents or siblings for birthdays and special occasions, where this is assessed as being desirable, especially during a period of reunification.

Health

Children in care may experience significant health problems as a result of their experiences of abuse and neglect and in many instances the difficulties encountered by their birth family in supporting their health and developmental needs. They may have had limited co-ordinated or responsive access to health care in the past.

In order to strengthen access to services for the child, health standards for children and young people under the guardianship of the Minister was released in 2007. Case managers have access to guidelines and practice standards to support priority access to healthcare.

Medical and dental practitioners are guided by the provisions within the *Consent to Medical Treatment and Palliative Care Act 1995*. They have discretionary powers regarding emergency situations and the provision of medical treatment to children and young people.

Medical

In relation to decisions for assessment and treatment of minors:

- a young person aged **16 years and over** has the same rights of consent, or non-consent, to medical treatment as an adult. This means that a young person, aged 16 years and over, can consent to their own medical treatment
- medical practitioners are provided with discretionary powers regarding medical treatment for young people **less than 16 years** where an opinion is supported in writing by (at least) one other medical practitioner who has examined the child before treatment is commenced. For example, this may be used for a young person, **less than 16 years**, in relation to sexual health issues such as prescribing contraception or the termination of pregnancy. In such circumstances the medical practitioner must be confident that the child understands the treatment and associated implications and the child consents.

- In an emergency situation for the child or young person:

Young people 16 years and over:

If the young person is unable to consent, the medical practitioner is able to administer treatment if the treatment is necessary to meet an imminent risk to the life or health of that young person. This opinion must be supported by the written opinion of another medical practitioner who has personally examined the young person, (unless it is not practicable to obtain that opinion) and the young person must not, to the best of the medical practitioner's knowledge, have refused consent to treatment.

Young people under 16 years:

In addition to the requirements of a supporting opinion and an imminent risk to life and health, if the **child's parent or guardian is available** their consent must be sought.

However, medical practitioners are provided with discretionary powers to administer treatment if it is deemed to be in the best interests of the child's health and wellbeing.

Day-to-day medical treatment

For day-to-day medical treatment of the child or young person, carers can provide verbal consent. Examples include:

- making an appointment with a medical practitioner
- buying over-the-counter medicines when the child is sick
- seeking treatment for a minor injury such as a sprain or cuts requiring sutures
- administering prescribed medication for children and young people following the advice of the treating medical practitioner.

Ongoing medical treatment of the child or young person

Where the child has a medical condition requiring ongoing treatment it is recommended that the course of treatment is noted in the child's case plan and the authority to consent is placed with the carer. For example, where the child has been diagnosed with a chronic illness such as asthma or a developmental disability and they require a series of medical or allied health appointments.



Consent for general anaesthetic, medical procedures and end of life decisions

For the administration of a general anaesthetic and medical procedures consent of the supervisor or above is required. If the supervisor responsible for the case is not available, another social work supervisor or the manager of the relevant Families SA office can approve the treatment. After hours, supervisors at the Crisis Response Unit (CRU) on telephone **13 16 11** can provide consent for emergency treatment.

Where the supervisor provides consent for medical treatment for children **under 16 years of age** the case manager will consult with the child's carer both prior to and following treatment.

The Minister provides consent for matters pertaining to or where there is risk to the life of the child and medical procedures of a significant or final nature, such as non-resuscitation procedures or similar for children under 16 years.

Immunisation

Carers can provide consent for a child or young person to be immunised as this is viewed as a normal and expected requirement to ensure a child or young person's health and well being. This includes immunisation through school programs and vaccines required for travel, training or employment.

Where possible, the Families SA case manager will provide relevant details about a child or young person's medical history, including any information regarding allergies and allergic reactions to previous vaccines.

Dental

Case managers have the responsibility to ensure the child is registered with a school dental clinic. The case manager also has the responsibility to inform the school and school dental clinic of a child's change of address, or if their guardianship status ends. Treatment plans should be noted in the child's case plan. The authority to consent is placed with the carer.

In order for a carer to properly care for a child, carers are able to provide consent for minor dental treatment. Carers are also able to provide consent for the following dental treatment including:

- local anaesthetic
- routine dental treatment including dental fillings
- diagnostic procedures required for orthodontic assessment.

The consent of the supervisor or above is required for the administration of a general anaesthetic, medical procedures and orthodontic treatment.

Allied health

Allied health refers to health professionals who are not medical practitioners like doctors but who are qualified by specialist training to work in support roles in the health care field. These occupations include but are not limited to, occupational therapist, speech pathologist, dietician, social worker, physiotherapist, mental health worker and podiatrist.

Consent for initial allied health treatments, where required, will be provided by the case manager in consultation with the referring health professional and the child's carer. Ongoing consent for treatment will be determined during the case planning process and it is expected that the authority to provide ongoing consent will rest with the carer. This will be clearly set out in the case plan.

Medicare cards

Foster carers are eligible to apply for a child's Medicare card. Approval for the application rests with the supervisor. More information is available on the Medicare Australia website at: www.medicareaustralia.gov.au or by contacting general enquiries on telephone **132 011**.

Health care cards

All children under guardianship are entitled to receive a Health care card. The case manager is responsible for ensuring that all children in care have a Health care card and Families SA is responsible for approval of the application. Approval for the application rests with the supervisor. More information is available on the Centrelink website at www.centrelink.gov.au or by contacting the Family Assistance Office on telephone **13 61 50**.

Ambulance cover

Children and young people in care are covered for costs associated with emergency ambulance attendance and transport.

Identity

Body piercing and tattoos

Under the *Summary Offences Act 1953* it is an offence to tattoo a young person under 18 years except where the tattoo is performed for medical reasons by a legally qualified health practitioner.

At present, there is no legal limit or guidelines for the appropriate age for body piercing. Parental consent is not required for a young person to have their body pierced. Some salons may use their discretion and may for example pierce the ears of a child under 18 without parental consent but request parental consent for the piercing of other body parts.

Young people wanting some form of body piercing should be supported in their decision making by their carer and/or case manager and family (where appropriate). Collaborative decision making is encouraged which takes into account what is culturally

appropriate, their age and ability to understand and maintain the implications of such actions on their bodies.

As they mature, young people should have a greater role in decision making about the style, number and form of piercing they wish to have.

Haircuts

The child's views on haircuts, colour and styling should be taken into account when making these decisions. Where reunification is being pursued, it is important the birth parent(s)/family is included in this decision and that their wishes are taken into account. Where the child is in long term care, the child and carer should jointly make these decisions.

Change of name

The decision for a child to change their name is a major one as a person's name forms an important part of their identity and culture.

Families SA promotes maintaining a child's identity and contact with their birth family and community of origin. For most children, it is appropriate that while they live in alternative care, they retain their own family name.

The child's guardian is responsible for ensuring their original identity is supported while encouraging a sense of belonging and stability in long-term care.

However, some children express a clear wish to change one or more of their names (given or family) for various reasons and as part of this may request to legally change it.

Should the child request a legal or official change of name, Families SA will make an assessment. The decision to make an application to legally change a child's name will be made in consultation with a number of other professionals such as

psychologists and principal Aboriginal consultants where appropriate, as well as with the child and their carers.

The decision to make an application to change a child's name has been delegated to supervisor level and above, in consultation with a principal social worker and principal clinical psychologist where appropriate. The principal Aboriginal consultant must be consulted where the child is Aboriginal and/or Torres Strait Islander.

The decision for a child to change their name is a major one as a person's name forms an important part of their identity and culture.

Change of religion/ religious instruction

Changing religion does not have the same legal requirements for consent as a change of name. However, consultation with the young person, their carer and birth parents should be sought wherever possible.

Where the child's change of religion is contrary to the beliefs of the birth family, the supervisor is responsible for approving the change.

A decision will be made considering the reasons for the request, the age and maturity of the child, cultural identity, impact on relationships and most importantly, the best interests of the child and their unique needs and circumstances.

Cultural

Aboriginal and Torres Strait Islander children and young people

Families SA aims to place Aboriginal children with their family and community to strengthen the Aboriginal child's sense of identity and connection as an Aboriginal person and ensure their links with their families, clan, kinship, skin groups, community and culture are maintained. Often, Aboriginal people also face barriers such as language, culture, education, unfamiliarity with mainstream systems and difficulties accessing services.

The Aboriginal identity planning guide assists case managers to identify people who are culturally appropriate supports for Aboriginal children, and the cultural rights and needs of the child to inform case planning and case work practice. Families SA acknowledges the integrity and significance culture plays in the positive growth and development of the child within their family, culture

and wider community. Carers are able to further support an Aboriginal child's identity by ensuring the child develops and maintains an Aboriginal life story book.

Case managers and carers actively support the child's attendance and engagement in activities that enhance their connectedness to their cultural group. This can be supported by documenting decisions in the child's 'cultural plan' section within their case plan.

Supervisor level or above is required for approving the costs associated with cultural connection camps or activities for an Aboriginal child.

Culturally and linguistically diverse children and young people

Children of refugee backgrounds often have specific service needs especially during the early years of their settlement. They can also face barriers such as language, culture, education, unfamiliarity with mainstream systems and their ability to access services in their new country.

Young people settling in Australia may experience conflicts in relation to cultural identity. Case managers and carers actively support the child's attendance and engagement in activities that enhance their connectedness to their cultural group. Supervisor level or above is required for approving the costs associated with cultural connection camps or activities for culturally and linguistically diverse children and young people.

Support and advice in relation to engaging with families, communities and culturally appropriate service providers is available through Families SA - Refugee Services and Multicultural Youth South Australia.

Legal

Victims of Crime Compensation

Families SA has a moral and legal obligation to consider making applications for statutory compensation on behalf of a child who has been the victim of crime. That is, the child has the right to be believed and have their trauma acknowledged by society and within the criminal justice system through the provision of compensation.

Where applicable, it is the case manager's responsibility to ensure that Victims of Crime statutory compensation applications for the child are made prior to leaving care, or information in relation to their eligibility is provided to them when they leave care.

Police interviews

If a child needs to be interviewed by police, the carer is required to advise the case manager or supervisor. After hours, calls can be made to the Crisis Response Unit (CRU) on telephone [13 16 11](tel:131611).

Carers may be asked to observe, support and/or advocate for the child. If a carer feels uncomfortable or unable to be present at the interview, they are able to refuse the request and police must provide an approved alternative person.

The alternative third party can be a legal representative – carer, relative or suitable friend nominated by the child, but must be over the age of 18. In the event that the young person does not nominate someone, or where the nominated person is not available, it is the responsibility of police to secure an appropriate person to represent the views of the young person.

Public Trustee funds

It is highly unlikely there will be a call on funds belonging to a child in care prior to the age of 18 because, as legal guardians, Families SA is responsible for providing for the child's financial requirements while they are in care.

The Office of the Public Trustee has waived the establishment fee of trust funds for a child in care, based on the agreement that calls will not be made on the fund while the child is in care. Should the fund be required due to exceptional circumstances, approval from Families SA Executive Director is required.

Life skills

Driver education and training/drivers licence

Carers are generally best placed to support young people to obtain their Learner's Permit and attend driver education training. Families SA may provide financial assistance for young people to attend driver education and training.



Employment

Many young people embrace the opportunity to participate in paid work. This can provide a good opportunity to support young people to develop negotiation and time management skills, gain some financial independence and broaden their social skills.

If part time employment is not detrimental to the young person's health and development, and does not conflict with their schooling, they should be supported in finding and participating in suitable part-time employment.

This decision should be made between the young person and their carer. The ability to maintain a good balance between, work, school, homework, family and recreation activities is important to consider when making the decision to start work.

Preparing for adulthood – referral to services

The case manager will facilitate discussions with the young person and their carer to support a smooth transition from Guardianship of the Minister. The case manager will refer the young person to the Youth Support Service and Financial Counselling and Support services when they reach 15 years of age to help them learn and develop important life and financial management skills.

Recreation, camping and social interests

Camps and sporting activities

Camps are particularly beneficial as they can provide children and young people with opportunities to experience different environments, participate in new activities that can involve teamwork and to develop their cultural, social and physical skills and friendships.

Camp attendance is encouraged and supported by Families SA. Similarly, involvement in sporting activities promotes physical and psychological well being as well as improving self esteem and social confidence.

Camps/activities in South Australia

Camps, excursions and other recreational activities coordinated by government and non-government schools, or non-government agencies such as the YMCA, and held in South Australia follow rigorous guidelines and processes.

Support for the child's participation in these types of activities can be incorporated in the case plan and approved by the carer.

For day excursions and other recreational/cultural activities conducted by external agencies within South Australia, approval can be given by the child's carer once they have checked safety and supervision issues.

Camps/activities not in South Australia

Approval for a child to attend interstate camps or excursions must be obtained from the Executive Director. The case manager is required to prepare a written request outlining details of the child's travel plans and activities.

Support for the child's participation in these types of activities can be incorporated in the case plan and approved by the carer.

Carer, case manager and supervisor responsibilities

- Prior to the child attending the camp, the carer should inform the child's case manager of their desire to attend the camp. Ideally, this will be identified during the case planning process involving the child, the carer and the case manager. It is expected that the carer will have adequately checked out all supervision and safety issues related to the camp and informed the case manager of these details.
- Transport and other arrangements for the child attending the camp can be negotiated between the carer and the case manager.
- If such activities will impact on family contact arrangements, the carer must inform the case manager prior to the child attending. An alternative contact time will need to be organised.

In some cases, Families SA may be able to provide financial assistance for some of the costs incurred. The supervisor will need to approve any funding required.

Overseas travel and passport applications

All requests for a child in care to travel overseas, accompanied or unaccompanied, ie, student exchange, must be approved by the Families SA Executive Director before any arrangements are made.

The child's case manager is required to prepare a briefing to the Executive Director and approval must be sought as early as possible prior to the planned departure date.

No confirmation of travel bookings or funding commitments is to be made until Families SA approves the travel request and the passport application.

Photographs/ media/internet

Where a child **is not** identified as under guardianship of the Minister:

- Inclusion in school photos, award ceremonies, newsletters and videos such as recordings of the school play and inclusion in award ceremonies are an important part of a normal childhood. Carers can approve this participation and with the child's case manager, promote the child's involvement, unless there are safety concerns to not to do so.
- Photographs for public release i.e. for media purposes, requires supervisor approval. The case manager is responsible for ensuring the recommendations are communicated to the child, the carer, the media representative, staff members and other key people involved.

Where a child **is** identified as under guardianship of the Minister:

- All media coverage of a child that is identified in a publication, photograph, DVD or media coverage as being under the guardianship of the Minister must be approved by Families SA Executive Director.

Inclusion in school photos, award ceremonies, newsletters and videos such as recordings of the school play and inclusion in award ceremonies are an important part of a normal childhood.

Social networking sites

A range of communication tools and social networking sites are readily available which greatly increases opportunities to connect with other people. Children and young people may unwittingly share personal information online without being aware that they could put themselves at risk of identity theft, contact from undesirable persons, or damage to their reputation.

It is important that children and young people are provided with guidance, information and supports to ensure that they are able to communicate online in a positive and safe manner.

Carers are encouraged to use these tips and guidelines to discuss, monitor and support online activities including:

- establishing family rules for safe and respectful use of the internet
- monitoring online use and locating computers in open family areas
- installing programs to block access to unsafe sites
- being familiar with contemporary online activity and use.

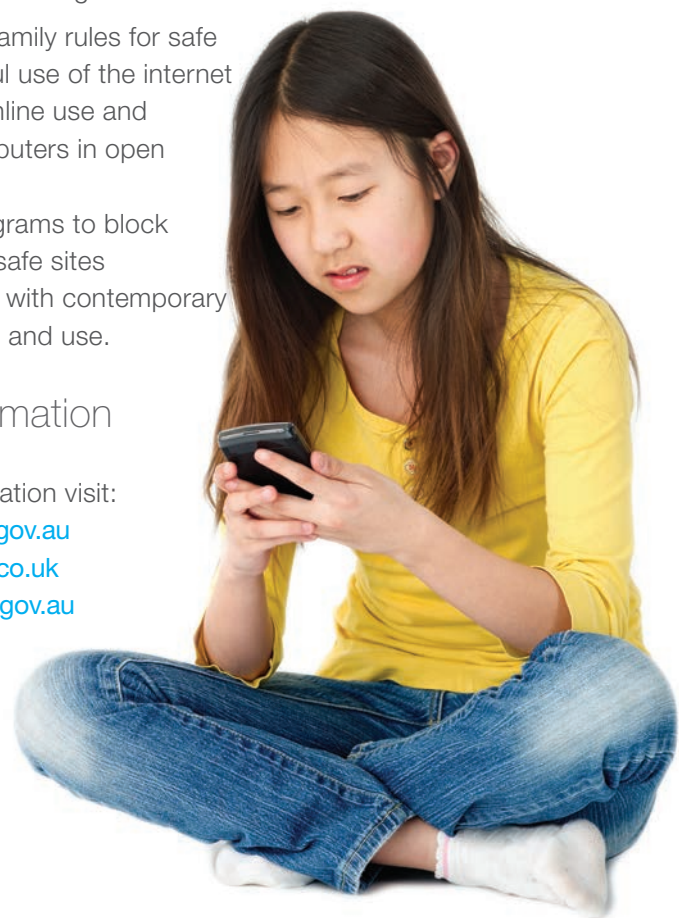
Further information

For further information visit:

www.cybersmart.gov.au

www.thinkuknow.co.uk

www.forwardit.sa.gov.au



Death, organ donation and funerals

In the tragic circumstances where a child in care dies, Guardianship orders end and the *senior available next of kin* are responsible for decisions about organ donation and funeral arrangements.

In relation to a child, the *senior available next of kin* means:

- (a) in relation to a child, the first in order of priority of the following persons who is available at the time:
- (i) a parent of the child
 - (ii) a brother or sister, who has attained the age of 18 years, of the child
 - (iii) a guardian of the child.

The death of a child or young person in care is a difficult and traumatic time for all involved. It affects family and non-family members in different ways.

Decisions about funeral and burial arrangements should be managed in partnership between Families SA, foster carers and birth families. Families SA believes the involvement of carers is vital in these decisions and will always advocate strongly on their behalf.

Decisions about funeral and burial arrangements should be managed in partnership between Families SA, foster carers and birth families. Families SA believes the involvement of carers is vital in these decisions and will always advocate strongly on their behalf.

Cultural impact

Aboriginal and Torres Strait Islander communities

Families SA recognises the importance of grief and loss within Aboriginal and Torres Strait Islander communities and in doing so ensures that the cultural aspects related to the funeral and ‘sorry business’¹ is sensitively managed with the child’s biological family and kin.

Families from Aboriginal and Torres Strait Islander communities may have culturally specific ways of dealing with grief and loss, including special requirements for who is involved and for the location of the burial or cremation. The principal Aboriginal consultant is available for consultation to support case managers to respond in a culturally appropriate manner.

Culturally and linguistically diverse communities

Refugee Services in Families SA can provide advice and support for burial ceremonies and customs for children from culturally and linguistically diverse communities.

¹ The period of mourning for deceased Aboriginal or Torres Strait Islander is commonly known as “Sorry Business”.

Other documents

- [Care planning policy](#)
- [Charter of rights for children and young people in care](#)
- [Duty of care policy and practice guide](#)
- [Foster carers' charter](#)
- [Guardianship and alternative care manual of practice](#)
- [Other Person Guardianship position paper](#)
- [Health standards for children and young people under the Guardianship of the Minister](#)
- [Keeping them safe – in our care](#)
- [Rapid response: Whole of government services](#)
- [Standards of alternative care in South Australia](#)



© 2012 Government of South Australia.
Department for Education and Child Development
Families SA

Adelaide, South Australia

Published August 2012

www.families.sa.gov.au

In addition to images protected by intellectual property rights owned by the State Government of South Australia, certain intellectual property rights of third parties may exist in respect of images contained in this material.

Whilst the State Government has obtained the necessary licences to reproduce the intellectual property rights of the third parties, further reproduction is not permitted.



Government of South Australia

Department for Education and
Child Development

Families SA