## Children Act 1989 as Amended by S.44 of the Children Act 2004 The Children (Private Arrangements for Fostering) Regulations 2005



### **Somerset County Council**

## PRIVATE FOSTERING NOTIFICATION OF A RESIDENTIAL GROUP ARRANGEMENT

If you are intending to or have already made private fostering arrangements for a group of young people, under 16 (under 18 if the young person is disabled) for 14 days or more, you **must** let Somerset County Council know. Please count the arrival day as day one.

You should notify the council at least 6 weeks (and not more than 13 weeks) **before** the arrangement starts and if the arrangement has already started e.g. if the young person arrived at short notice, you must let the council know within 48 hours

### 1. Agency Details

Name and address of the Agency Boarding or Language school making the arrangement.	
Name and contact details of the agency's key worker making the arrangement.	
Phone	
Email	
Name and address of the residential setting where the young people will be staying.	
Expected number of young people staying in the arrangement	A separate Child and birth family information sheet is required for each young person (see below) with birth parents' signature if possible. (pp by the Agency is acceptable)
Date the arrangement starts and finishes.	

2. Private Foster Carers Details
Please use one Private foster carer detail sheet for each adult with overnight care of a privatel fostered young person (under 16 or 18 if disabled for 28 days or more)
Additional information
If you have any difficulties completing this form or need more information please contact the Somerset Direct on 0300 123 2224 and ask for Private Fostering
Or email: <u>privatefostering@somerset.gov.uk.gov.uk</u>

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# PRIVATE FOSTERING NOTIFICATION (Private Foster Carers Details)

Name						
All previous						
names						
Date of birth						
Phone			Email			
number(s)						
<b>Current Address</b>						
Name and						
address of GP/						
Medical						
Practice						
DBS						
Disclosure						
Number:						
Date:	(UK Adults need a DBS check less than 3 years old )					
Record of Good						
Conduct	Yes		No			
	`		Record of Goo	od Conduct less		
Notionality.	than 3 years o	ola)				
Nationality						
Ethnic origin	White	White	Any other	Traveller of		
	British	Irish	White	Irish Hertiage		
			background			
	Gypsy/Roma	Mixed -	Mixed -	Mixed White		
		white &	White &	& Asian		
		Black	Black			
		Caribbean	African			
	Any other	Asian	Asian	Asian		
	mixed	Indian	Pakistani	Bangladeshi		
	background					

	Any other Asian background	Black or Black British	Black Caribbean	Black African
	Any other Black background	Other ethic group	Chinese	Declined to answer
First Language				
Name of the agency and residential setting.				

Please note: All Private Foster Carers / Adults with overnight care of a child are required to bring their DBS disclosure form / Record of Good Conduct dated within the last 3 years to the residential setting for verification by a Local Authority social worker.

#### Declaration.

I understand that it is necessary for Somerset County Council to make enquiries regarding my circumstances. This may include enquiries of my G.P, the local authority in which I live and any other local authorities in which I have lived for the last five years, and the Probation Department if applicable. I understand that information about my medical history and present medical condition may be required by Somerset County Council, the above named agency. I consent to a medical report and to any further enquiries deemed to be necessary by the agency's medical advisers or by my General Practitioner.

Do you have a criminal conviction?

Yes/No

I give permission to Somerset County Council or the Agency I am working for to initiate a DBS check on any convictions or cautions that may be recorded against me.

#### **Declaration regarding suitability to Foster Children Privately**

Section 70(a) of the Children Act 1989 provides that a person who makes any statement in this notice or information which he knows to be false or misleading, shall be guilty of an offence and liable on summary conviction to a fine not exceeding level 5.

Have you ever:-

Applied to a Local Authority to be a child minder, day care provider, foster carer or adopter?

Yes/No

Been convicted of any offence against a child?

Yes/No

Had a child removed from your care by the order of any court?

Yes/No

Had registration as a child minder, or other provider of day care, refused or cancelled?	Yes/No
Had your rights and duties with respect to any child vested in a Local Authority?	Yes/No
Had a prohibition imposed on you by the Local Authority prohibiting you from fostering privately?	Yes/No
Been disqualified from acting as a Local Authority foster parent?	Yes/No
Been disqualified in any capacity, or subject to disciplinary proceedings involving the care of children?	Yes/No
If you have answered Yes to any of the above questions please supply dates (please use an additional sheet if necessary)	and circumstances:
Access to Medical Reports Act 1988	
I have been informed of my statutory rights under the Access to Medical Report I do / do not wish (delete as applicable) to see the medical report and agree the Somerset County Council.	
I declare that to the best of my knowledge the information I have supplied is co	rrect and accurate.
Signature:	
Date:	



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# PRIVATE FOSTERING NOTIFICATION (Residential Group) Child and Birth Family Information

In the UK there are regulations to safeguard young people under the age of 16 (or 18 if the young person is disabled) who are living away from their families for 28 days or more in a private arrangement. These are known as Private Fostering Regulations. The Agency making arrangements for your child/ young person while they are here in England, is required to **Notify** the Local Authority of the arrangements it has made, giving the name and date of birth of the child/ young person and birth family contact details.

Please note that an Officer from Children's Services may visit privately fostered young people in residential settings to ensure their welfare.

Please enter the Child and Birth Family contact details below and sign to confirm that parental consent has been given for this young person to be in this arrangement.

Child's Full Name				
Known as (if different from above)				
Male/female		Date of E	Birth	
Place of birth (City and Country)		•		
Nationality		Religion		
Ethnicity (please circle appropriate description)	White British	White Irish	Any other White background	Traveller of Irish Hertiage
	Gypsy/Roma	Mixed – white & Black	Mixed – White & Black	Mixed White & Asian
		Caribbean	African	
	Any other mixed	Asian Indian	Asian Pakistani	Asian Bangladeshi
	background			

	Any other Asian background	Black or Black British	Black Caribbean	Black African
	Any other Black background	Other ethnic group	Chinese	Declined to answer
1 <sup>st</sup> Language spoken				
Does the child have a disability?	If yes, please	give details		
Parents' name Address				
Phone number Email				
Dates the arrangement is due to start and finish.				
Name of Agency / residential setting.				

Signature	 	 	
Date:			