



VOLUNTARY AGREEMENT BETWEEN [LOCAL AUTHORITY] AND

[PERSONS WITH PARENTAL RESPONSIBILITY] FOR THE

ACCOMMODATION UNDER SECTION 20 OF THE CHILDREN ACT

1989

**THE RELEVANT PERSONS**

The children: [names]

The persons with parental responsibility: [names]

The local authority: [name]

Date: [date]

THE AGREEMENT

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| **Agreement**   * This is an agreement between [local authority] and [persons with parental responsibility]. * The agreement is that [children] will be placed in [say, foster care] by [local authority]. * In legal terms, that placement is happening under [sub-section … of section 20 of the 1989.   **The placement and the children’s wishes**   * The purpose of that placement is [purpose]. The current plan is that [current plan for children’s return home] and that the [children] will remain accommodated by the local authority for a period of [X weeks / months]. * It [has / has not] been possible to find out the [children’s] wishes and feelings. [The children’s] wishes and feelings are [wishes and feelings].   **Agreement of the persons with parental responsibility and right to remove**   * + [The persons with parental responsibility] do not at the moment object to [the children] being placed in [say, foster care].   + [The persons with parental responsibility] may at any time remove [the children] from the [say, foster care].   + [The persons with parental responsibility] [has / has not] had legal advice and has the right to continue to seek independent legal advice.   **Reviews**   * + [This is / this is not] an agreement for the accommodation of a new-born baby or child under six months. / It is an agreement for the accommodation of a new-born baby or child under six months, and the exceptional circumstances requiring the use of s 20 are [exceptional circumstances].   + [The local authority] intends to review this placement every [X weeks] and the persons with parental responsibility will, after each review, be updated by the local authority on its plan moving forward.   + Additional reviews may be requested in response to any changes. |

**SIGNATURES**

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| **Signature**:   * Signed and dated: * [The persons with parental responsibility] * [Local authority]   **Where required to be translated into a foreign language:**   * This document has been written in English and translated into [foreign language]. The [persons with parental responsibility] have read it in [foreign language]. * Signed and dated in [foreign language]: [“*I have read this document and agree to its terms”*]. * Signed and dated by [named interpreter].   **Where an advocate or intermediary has assisted**   * The [person with parental responsibility] has been assisted by [name; advocate / intermediary]. * I [advocate / intermediary] confirm that I have read this document with and explained it to [person with parental responsibility] and I am satisfied that the [person with parental responsibility] understands its contents. * [Signed and dated by advocate / intermediary]. |

**Check list for local authorities**

* Have you taken every person with parental responsibility carefully through this agreement?
* If the persons with parental responsibility are not native English speakers, has the agreement been translated into their native language?
* Are you satisfied that the persons with parental responsibility have capacity to consent?
* Are you satisfied that the persons with parental responsibility have consented?
* Have the relevant persons with parental responsibility signed a consent form for medical treatment/examination or disclosure of the child’s medical records.