



## WORKING AGREEMENT

(no) \_\_\_\_\_ Date: \_\_\_\_\_

1. This document is a formal record of an agreement to cooperate between  
Walsall MBC Children's Services  
and  
Parents/Carers/Significant Others

.....  
.....  
.....

In order to promote the welfare of:

Child(ren

.....  
.....  
.....

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2.1 The purpose of this Written Agreement is to achieve the following outcome(s):

2.2	Actions	Who	By When	Checked
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- a
- b
- c
- d

2.3 The child will be seen by a Social Worker

weekly	monthly	other (specify)
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3.0. All parties should be given an opportunity to seek legal advice about the agreement if they wish to do so. Any changes or adjustments should be agreed within five working days. The Working Agreement will stand whilst advice is being sought and changes will only be accepted if all parties agree.

4.0. Failure to cooperate with this agreement will cause Walsall MBC to consider whether action is needed to protect this child(ren) and / or whether a meeting with the family is necessary to achieve the above mentioned outcome.

4.1 Should parents/carers break the agreement Walsall MBC will consider whether legal protective action is required. If other parties break the agreement parents/carers may wish to seek advice about making a complaint to the agency involved.

4.2 This Written Agreement will be reviewed with the carers and the Social Worker on (date) .....

4.3 The terms of this agreement are agreed by and will be adhered to by the following undersigned individuals:

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Agreed and signed

Name: (PRINT) .....  
Signed: .....  
Relationship to named child(ren):.....  
Address: .....  
Telephone No: .....Date.....

Name: (PRINT) .....  
Signed: .....  
Relationship to named child(ren):.....  
Address: .....  
Telephone No: .....Date.....

Name: (Child)/ren) .....  
Signed: .....  
Address: .....  
Telephone No: .....Date.....

Named Social Worker responsible for this agreement

Name: (PRINT) .....  
Signed: .....  
Relationship to named child(ren):.....  
Address: .....  
Telephone No: .....Date

The named child shall reside at:

Address: .....  
Telephone No: .....  
Primary Carer: .....

This agreement has been confirmed by Team Manager .....  
on (date) ..... work address .....  
telephone no .....