



Annex A

Cedars Family Activity Request Form

Part One: Family details

	Full name	Gender	DOB	Nationality
Adult wishing to undertake activity:				
Adult wishing to undertake activity:				
Children wishing to undertake activity				

Case references:	
Activity requested:	
Date and time of request:	

Part Two: Parental consent (if not accompanying the children):

I..... hereby give my consent for my child/ren listed above to leave Cedars accompanied by an approved companion in order to undertake an activity outside of the centre.

I confirm that I have instructed my child to follow the instructions of any companion accompanying them on an activity.

I hereby give parental consent for the remote supervision of my child/children:

Signed	
Print name	
Date	

In the event of an accident or illness which requires emergency medical treatment (including general anaesthetic as considered necessary by the medical authorities) every effort will be made to contact you, and where relevant take you to the hospital or medical centre where your child has been taken.

I do /do not give consent for a companion to consent to emergency medical or surgical treatment for my child/young person on my behalf, should it be necessary and I cannot be contacted. This emergency medical or surgical treatment is to be within the following limits:

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I am willing for information on this form to be shared with third parties on a strict need to know basis.

Signed	
Print name	
Date	

Part Three: Parental Responsibility Agreement (if accompanying children)

Name of parent(s)	

I/We confirm that:

- **I/We will remain responsible for the supervision and welfare of my/our children during the activity;**
- **I/We will only undertake the activity for which approval has been given;**
- **I/We will meet the costs of any expense associated with the activity not agreed in advance with UKBA;**
- **I/we will stay with and follow the instructions of the staff accompanying my family throughout the activity and behave in a responsible manner throughout the activity;**
- **I/we will advise the companion immediately of any incident affecting any family member during the activity.**

I/We understand that all family members participating in the activity remain detained and in the custody of UKBA at all times and that we must all return to Cedars at the end of the activity as agreed or as instructed by the staff accompanying my family.

Signed	
Print name	
Date	

Signed	
Print name	
Date	

Part Four: Risk Assessment

Barnardo's

	Details
Parent/guardian has been spoken to and confirmed understanding of service and responsibilities?	
If appropriate, has the child been spoken to and confirmed understanding of service and responsibilities?	
Contact phone number for parent(s)	
Any additional information provided by parent/guardian?	
Any safeguarding or welfare concerns?	
Names of companion(s) to accompany:	
Details of transport arrangements:	
Activity risk assessment attached?	

Signed	
Print name	
Job title	
Date	

Healthcare

Medical in confidence form signed and attached?	
Are there any health issues that may affect the child's/family's ability to take part in the activity? If so, can these be reasonably managed? If so, how?	
GP/consultant details	

Signed	
Print name	
Job title	
Date	

Social worker (where there has been involvement with the child or family)

Are there any safeguarding or welfare issues which may affect this child's suitability to participate in an activity outside of Cedars? If so please provide details and if there is a way of managing these?	
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Signed	
Print name	
Job title	
Date	

Any other relevant professionals involved with the child or family

Name of Organisation	
Are there any safeguarding, welfare or other issues you are aware of which may affect this child's suitability to participate in an activity outside of Cedars? If so please provide details and if there is a way of managing these?	
Any other information relevant to the risk assessment:	

Signed	
Print name	
Job title	
Date	

Name of Organisation	
Are there any safeguarding, welfare or other issues you are aware of which may affect this child's suitability to participate in an activity outside of Cedars? If so please provide details and if there is a way of managing these?	
Any other information relevant to the risk assessment:	

Signed	
Print name	
Job title	
Date	

Activity requested	
Languages spoken	
Proposed date and times of activity (departure from and return to Cedars)	
Removal directions set for:	
Anticipated collection time from Cedars for removal:	
Any scheduled interviews or other events the family is required to attend:	
Is there any information or intelligence which indicates the family is likely to seek to abscond?	
Please list previous compliance by the family and child to report to UKBA as a condition of temporary admission and/or bail (if applicable)	
Behaviour of family and child since arrival or in previous engagement with UKBA/other agency	
Does any family member have a criminal record that may indicate a risk to the public?	
Does the case owner have any objections to the family participating in the activity?	
Any other factors?	

Risk assessment summary (to be completed by UKBA)	<i>Narrative leading to conclusion</i>
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Risk assessment conclusion:

1. Activity approved *(circle as appropriate)*

Comments	
Family advised <i>(time, date, by whom)</i>	

Signed	
Print name	
Job title	
Date	

2. Activity not approved *(circle as appropriate)*

Family advised	
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Signed	
Print name	
Job title	
Date	

Part Three – Preparations checklist (to be completed by UKBA)

	Details	Name	Job title	Time and date
Police advised of planned details of activity and children taking part?				
Names of companions accompanying the child				
Planned time of departure and return to centre				
Details of the activity to be undertaken				
Barnardo's confirm family have met the companions?				

Part Four – day of activity checklist

	Details	Name	Job title	Time and date
Barnardo's confirm companion has fully charged mobile phone, contact details for centre and understands their responsibilities; family has contact number for carer				
Pocket money given to child? Amount				
Companions accompanying child				
Time of departure from centre				
Time of return to centre				



Activity Request Decision letter

	Full name	Case references
Adult requesting activity:		
Adult requesting activity:		
Children requesting activity		
Date and time of request		

To

I am writing to advise you that the UK Border Agency has considered your request to undertake an activity outside of Cedars.

1. Your request has been considered by the UK Border Agency and approved. We will let you know as soon as the arrangements are confirmed. *(circle as appropriate)*
2. After full consideration, the UK Border Agency has not approved your application for the following reasons:

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Review of decision

You can ask for this decision to be reviewed by a UK Border Agency Senior Executive Officer. If you wish to do this, please speak to the UKBA team. If you remain dissatisfied with the decision, you may submit a formal complaint in line with the UKBA Detention Services Complaints procedures using one of the complaint forms available in the accommodation.

Signed	
Print name and job title	
Date	