**Building Relationships for Stronger Families Programme**

**Participation Agreement**

The Building Relationships for Stronger Families Programme is for parents who are experiencing difficulties in their relationship with their co-parent, whether they are together or separated.

On this program you will take part in:

• activities that aim to help you to address the relationship difficulties you have identified; and

• research to find out how to best support parents who are experiencing relationship difficulties.

Support available through this programme is paid for by Department for Work and Pensions (DWP) who are working with your local authority and Tavistock Relationships and a limited number of places are available for parents who meet the eligibility criteria.

The information you give us will help us to make sure you are eligible for the programme.

**Eligibility Criteria:**

I am a parent. This means at least one of the following:

I am a parent of at least one child aged 18 years or younger

I am a parent of a disabled child (under the Equality Act 2010) aged 25 years or younger

I or my partner/ex-partner are expecting a child and a MATB1 form has been issued

I live in one of the boroughs listed below (please tick one):

Westminster Brent

Lambeth Hammersmith & Fulham

Camden Kensington & Chelsea

Croydon

I am experiencing difficulties in my relationship with my partner / ex-partner.

I am happy to complete a Referral Stage Questionnaire which will assess which activities will help me.

I understand that the information collected from me will be shared with the DWP and its Partners to enable them to monitor the performance of the contracts and evaluate the success of the programme.

Part of the research for the programme will investigate what support works best for families in different circumstances. For that reason, please tell us if you live in a household where:

No one is in work someone is working

**What will you do with the data you collect about me?**

We will use the information that you give us to decide how to support you to address your relationship difficulties. We will also use your information to measure how effective the support you will receive has been. We will share this information with the programme evaluators, IFF and Tavistock Institute of Human Relations (TIHR). The results of the research are expected to form part of a DWP research publication. Individuals will not be identified in the research. The data will be kept by DWP until 2025.

To find out more about our purposes, how we use personal information for those purposes and your information rights, including how to request a copy of your information, please see [www.gov.uk/dwp/personal-information-charter](http://www.gov.uk/dwp/personal-information-charter) and [www.westminster.gov.uk/fair-processing-notice](http://www.westminster.gov.uk/fair-processing-notice)

*Please read and complete the next section to progress your referral*

**Statement of Participation**

* I understand that personal information is held about me by DWP and its Partners and will be used to assess the success of the programme.
* I have had the opportunity to discuss the implications of sharing or not sharing information about me.
* I understand that during my participation in the programme I will be asked to complete a questionnaire at the start and the end of the programme so that the success of the programme can be evaluated.
* At the end of the programme I may be contacted by IFF and TIHR (via phone) so that I can give further feedback about the programme. If contacted, I may decline to participate although I understand my feedback will be appreciated.
* DWP maycontact me to ask me some questions about the programme so that they can make sure the payments they make to Tavistock Relationships are accurate.
* To provide me with this support DWP will share the information I have given with their delivery partners. The delivery partners are DWP, Tavistock Relationships, Westminster Local Authority and the Provider in your area.
* Tavistock Relationships needs your information to ensure that you are on the best programme for you/your partner or ex-partner. They will use your information to tailor support for you.
* DWP are sponsoring this support as part of a trial. They need your information to see which of the types of support are most effective and so they can pay for the support. DWP may make use of information already held about you and your family by DWP and other public bodies, such as ‘The Department for Education’ and ‘The Children and Family Court Advisory and Support Service’, to help them do this. They will not use the information you give us as part of this trial in any other way.
* If your partner/e-partner is taking part in the programme, DWP will link your information together.
* The person who gave you this form will receive information back from Tavistock Relationships. This is so they know what support you are being given and whether you have completed the programme.
* Westminster Local Authority are helping DWP to administer the trial. They will not use your information for any other purpose.
* I understand my participation in this Programme is entirely voluntary and I may withdraw from it at any time.

I agree to a referral being made to Tavistock Relationships to support my needs as part of the Building Relationships for Stronger Families Programme. I understand that DWP/ Westminster Local Authority may hold information gathered about me from the various agencies and as such my rights under the Data Protection Act will not be affected.

**Name** **…………………………………………………………………..…………….…………………………………………………………………**

**Address ………………………………………………………………....................……………………………****…………………………………**

**Post code ………………………………………………………… National Insurance Number ………………****…………..…………**

**Signature ………………………………………………………………. Date ……………………………………………………………**

Should you have any questions about this process, or wish to stop getting the support at any time, please contact the person who supplied you with this document.

*To be completed by referring professional:*

*I have explained the eligibility criteria for the programme to the parent and can confirm that they are eligible for the programme.*

*I realise that DWP may contact me about my experience in administering this programme.*

***Signature of Practitioner ……………………………………………………….…………………………………………………………………………***

***Print name ………………………………………………………………………….…………………………………………………………………………***