Please ask for:

 appendix 3 c

Direct Fax No

Our Ref

Your Ref:

Date

Medical Advisor

Children’s Services

Bridge Park Plaza

Bridge Park Road

Thurmaston

Leicester

LE4 8PQ

Dear Doctor,

Prospective Special Guardians have completed a declaration of health. This has been seen by the G.P. and comments are attached. As medical Advisor (Fostering) could you please comment on the “health history of the special guardian including details of any serious physical or mental illness, any hereditary disease or disorder or disability” (Regulation 21, The Special Guardianship Regulations 2005).

Yours sincerely

Social Worker,

Completing the Special Guardianship assessment.

Please return to the above worker: Team: