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| Family-led decision making (FLDM) model – Practice guidance |
| Version 2 – 20 November 2021 |
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 <https://www.cpmanual.vic.gov.au/advice-and-protocols/advice/case-planning/family-led-decision-making-program-guidelines>

##### Language used in this document

The term Aboriginal used in this document refers to both Aboriginal and Torres Strait Islander peoples.

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# Introduction

Since 1994, family group conferencing (FGC) has been a feature of Victoria’s child protection decision making and planning processes, including the implementation of the Aboriginal Family Decision Making (AFDM) program in 2002, later known as Aboriginal family-led decision making (AFLDM).

In recognition of the value of both FGC and AFDM processes, *The Report of the Protecting Victoria’s Vulnerable Children Inquiry* 2012 recommended that the department use voluntary FGC as a matter of practice and that the AFLDM program be used as the preferred decision-making process for Aboriginal children who have been substantiated as having suffered, or likely to suffer, abuse or neglect.

To implement the strengthening and expansion of FGC and AFDM processes in Victoria’s child protection program, the Department of Health and Human Services developed the family-led decision making (FLDM) program in 2012. The program built upon the previous process and applied the fundamental philosophies of FGC, including private family time.

In 2018, following a restructure in the child protection program, the FLDM program ceased to exist as a distinct program and FLDM convenors were incorporated into the child protection program in the new role of Practice Leader Case Planning. This new role can use the FLDM model, where appropriate, to develop case plans with children and families, as can other practitioners within child protection.

The AFLDM program continues as a distinct program for all Aboriginal children who have had protective concerns substantiated. Information on the AFLDM model and process can be found on the child protection manual.

**Who should read the guidelines?**

These guidelines outline the principles, policy and practice of the FLDM model. It is based on a meeting being facilitated by a convenor, such as the practice leader case planning or team manager. However, the model can be modified if the allocated child protection practitioner choses to follow the model and convene a meeting following the substantiation of protective concerns for children.

# FLDM model principles

The following core principles underpin and provide guidance for the FLDM model. These principles are additional to the legislated best interests and decision-making principles and build upon the Best Interests Case Practice Model and the SAFER Children framework.

* Family is recognised as having a pivotal role in the care and protection of the child and is supported and empowered to lead decision-making in partnership with Child Protection.
* A child’s connection to family is critical and wherever possible should be maintained.
* FLDM is a collective decision-making process.
* Culture is respected and integrated into the FLDM program. FLDM provides a safe environment to engage in discussions of culture and supports family traditions.
* Children have the widest possible family group around them.
* The family group is entitled to information about what has happened to the child and family because of their decision-making role. FLDM is a transparent process with all information necessary for planning for the child’s safety, wellbeing and development being shared with the family group.

### Legislated principles

The *Children Youth and Families Act 2005* (CYFA), sections 10 and 11, includes specific principles that decision makers or service providers must have regard to when making any decision or taking any action under the CYFA. It is important for anyone using the FLDM model to have a thorough knowledge and understanding of these principles.

### Best interest principles

Section 10 of the CYFA states that the **best interests of a child must always be paramount** when making a decision or taking any action. When determining whether a decision or action is in the child’s best interests, there are several needs that must always be considered including:

* + The need to protect the child from harm.
	+ The need to protect the child’s rights.
	+ The need to promote the child’s development (taking into account their age, stage of development, culture and gender).

### Decision making principles

Section 11 of the CYFA details a set of decision making principles, which emphasise the desirability of consultation, collaboration, fairness and transparency. Critically, decision-making processes need to assist the child or young person, parents and other family members to participate in a meaningful way.

Section 11 has specific direction regarding the provision of information in the appropriate language, the provision of interpreters and attendance of cultural supports during the decision-making process. It stipulates that the views of all persons directly involved must be considered.

# What is the aim of the FLDM model?

The principle aims of the FLDM model is to:

* empower families to make decisions and plans in relation to the development, safety, wellbeing and care of their children
* be inclusive and respectful of the family’s culture
* provide consistent practice across Victoria when engaging with families to develop case plans
* result in better outcomes for children, young people and their families.

# What does the FLDM model include?

**Relationship based - child centred and family focussed**

Building good relationships with children, young people, their families, community members and other services, enables more informed assessments and is the cornerstone of good case practice. The model is based on the relationship that practitioners develop with children and families to engage them in a process of change.

The strongest determinant of good outcomes in practice with families is the quality of the relationship between the practitioner, the child and young person and the family members.

**Empower children, young people and families**

The aim of any intervention is, whenever possible, to empower the family to protect their child from harm, protect their rights and to promote their development. Practice with children and young people should aim to empower them to find their voice and speak out about their experience in a safe environment and participate in decisions that affect them.

Partnership with the child, family, community and other services produces the best outcomes for children, as opposed to a fragmented response where services act independently.

**Strength based - solution focussed**

A strength-based approach acknowledges the positive aspects of the family and looks for exceptions to problem focused descriptions.

The goals of the intervention are to be developed with the immediate and extended family and it is critical that they are concrete, behavioural and measurable. Parents need to know when they have been successful, and practitioners need to engage them in meaningful ways which build confidence.

A strength-based approach in the FLDM model is solution focussed and engages the family in providing a safe environment for the child. A relationship that seeks to understand, and invites responsibility rather than blame, will always yield a better assessment and case plan, and therefore better outcomes for children and young people.

**Responding to cultural diversity and developing cultural safety**

The FLDM program recognises the importance of culture within core principles and is founded on decision-making and planning practices that recognise and respond to the family’s cultural identity and kinship structure.

**Culturally competent**

Culturally competent practice is relevant to working with children from culturally and linguistically diverse families, and all children and families in Victoria. For all children, in the context of FLDM, culture includes the patterns of behaviour, beliefs, values, custom and institutions that are associated with ethnicity, nationality. race, sexual identity, class, religion and language.

**Cultural safety**

Culturally safe practices include actions which recognise and respect the cultural identities of others, and safely meet their needs, expectations and rights.

# What is the process of the FLDM model?

The FLDM model process is as follows:

1. Preparation
2. Scheduling the meeting
3. Convening the meeting
4. Follow-up

### Preparation

Preparation is a key element in the success of FLDM. The preparation phase includes identifying the widest possible group of family members, engagement and preparation of participants and planning the meeting.

**Defining family and widening the circle**

Who the family group is becomes a negotiated process, based on ruling in rather than ruling out. It is important that the child or young person is involved in this process to ensure that their views of who is family is included, especially those people who the child or young person sees as supportive and important in their lives.

Family may include:

* maternal and paternal relatives
* stepchildren
* half-siblings
* friends, community supports
* neighbours
* elders
* religious leaders
* other supporters who have a significant relationship with the child, parent or other family members.

Having clarified who is in the family group, the convenor decides who is to be invited. Parents may wish to exclude some family members. Their views should be thoroughly explored and respectfully considered. However, it is the convenors responsibility to decide, based on the child’s bests interests and needs, who is to be invited.

Exploring requests for exclusions may provide the convenor with relevant information on the nature and functioning of relationships and historical information.

Convenors should explore each participant’s motivation in attending the meeting and clarify their role or potential role in the meeting and whether their participation will be helpful to the child and the process. Convenors can then use this information to assess any potential risks, including, physical harm, emotional harm and harm to the process.

**Family violence**

Family violence is a common risk factor for families that are involved with child protection. Although there needs to be careful consideration of holding a meeting where there is a history of family violence, it does not necessarily preclude a meeting from being held or the perpetrator being excluded from the process.

Everyone must have an opportunity to provide input about the way forward.

Where family violence is a concern, the safety of adult and child victim survivors must be considered paramount. In these circumstances where safety is a concern, bringing a perpetrator and adult or child victim survivor together for a FLDM would not be appropriate.

There are several safeguards that convenors can implement to ensure that children and survivors are supported and safe in the meeting, including:

* being guided by the MARAM risk rating and risk management.
* victim survivors to nominate a support person to attend the meeting
* the inclusion of an advocate to share information at the meeting about effects of family violence
* seating arrangements to ensure that the survivor feels comfortable and safe
* staggering attendance at the meeting if there are non-contact or family violence intervention orders in place
* development of a safety plan for private family time
* providing the option of a split meeting, where the survivor and the perpetrator attend separate meetings with family members

These options should be explored in consultation and supported by the child and/or the victim survivor. Consultation with the Specialist Family Violence Practitioner will also provide guidance on the best way forward to ensure all parties are involved and to mitigate the risk of family violence. The involvement of the perpetrator may also be determined by court order conditions. This should be confirmed with the victim survivor.

**Information sharing in the preparation phase**

Convenors need to be mindful of what information needs to be shared with participants in the preparation phase. Information sharing should be in the child’s best interests so that participants can make informed decisions and for there to be no surprises at the family meeting.

Information relating to the protective concerns is shared with all those invited to the meeting so that they can begin to think about and discuss options before the meeting. The convenors need to have a thorough understanding of the protective concerns prior to preparing for the meeting with the family and have a confirmed understanding of the concerns.

Convenors should provide all participants with an information privacy sheet, which describes what information can be collected and shared during preparation and the meeting.

This can be found on the Child Protection Manual at <http://www.cpmanual.vic.gov.au/advice-and-protocols/information-sheets/privacy-notices>

For detailed information relating to information sharing and privacy please refer to the Child Protection Manual at <https://www.cpmanual.vic.gov.au/our-approach/information-sharing>

Children, young people and their parents must be informed of the internal review processes and their entitlement to a review of decisions prior to the FLDM process. The internal review process applies to all significant child protection decisions.

This process is under review and due to be formalised in late 2021, for the current internal review process, please refer to the Child Protection Practice Manual <http://www.cpmanual.vic.gov.au/> ttps://www.cpmanual.vic.gov.au/policies-and-procedures/case-planning/internal-review-decision

Preparing family members

Preparing families for the meeting will result in better outcomes in the child’s best interests and reduce the potential risk of conflict for all participants.

Preparation with family members should include:

* + the reasons for the meeting, including the child protection concerns
	+ information on how the meeting will be conducted and who else will be invited
	+ what information they would like to share at the meeting
	+ expectations in relation to outcomes
	+ exploration of other possible participants
	+ the meeting rules
	+ cultural needs of the child and family
	+ required supports to ensure that members feel safe and comfortable at the meeting
	+ tools for assisting members to think about and articulate the information they want to share, such as noting questions for the meeting
	+ exploration of any reservations about attending the meeting, including strained family relationships, fear of exposing information to other family members or shame.

**Involving children and young people**

It is essential that children and young people are involved in decisions that affect them, even if they choose not to attend the meeting. Giving children a voice in planning and decision-making is at the heart of the decision-making principles of the CYFA, the Best Interests Case Practice Model and the SAFER Children framework. Convenors are required consider ***how*** children will be involved, not whether they should be involved.

Thorough preparation with the child or young person should include age appropriate information on the meeting process, who will be at the meeting, how they can participate, what supports they may need and what they will do if they wish to leave the meeting. It may be appropriate that children are involved in certain parts in the meeting if there are concerns that their presence may not be in their best interests.

The child may not be present at the meeting if it is assessed that this is not appropriate due to age and stage of development or there are significant safety concerns, or the child chooses not to participate in the meeting. In these circumstances the convenor will need to ensure that the child’s voice is heard in the meeting in some other way. Even where the child or young person participates in the meeting, they are likely to require support.

There are many tools and creative ways that convenors can use to encourage children’s participation, including:

* practice tools for working with children- ‘Children and their Families’ Best interests case practice model- Specialist practice resource. These tools can be located on the Child Protection Practice Manual via <http://www.cpmanual.vic.gov.au/our-approach/best-interests-case-practice-model/children-and-their-families>
* making a tape recording of the child to be played at the start of the meeting
* asking the child to draw a self portrait to put on the wall during the meeting
* organising for a teleconference so the child can listen to the meeting from a separate location and participate in the discussion or read out something they have written down (it might be creative writing or a statement of wishes)
* use of a whiteboard and engaging children through drawings.

**Role of support people**

Any family member may choose a support person to attend the meeting. A support person may be another family member, a friend, neighbour or service provider. Support people play a minimal role in the meeting to ensure that family are the main participants. As part of the preparation process, both the family members and their nominated support person need to understand their respective roles in the meeting and limitations of their support role during private family time.

**Legal representatives**

It is not appropriate for legal representatives to be part of the meeting as their presence alters the dynamics and detracts from the family-led decision making and planning. Convenors are to advise family members of their right to seek legal advice before and after the meeting. If family members wish to access legal advice during the FLDM meeting, a break should be convened in order for this to occur.

**Preparing foster carers**

Kinship carers are to be involved and prepared as they are family members. The inclusion of foster carers and or foster care agency representative should be considered on a case by case basis and convenors will need to discuss their involvement with the child and family.

Foster carers are not invited to family private time unless in circumstances where the child or young person has been in the out of home care placement for an extended period and the overall case planning direction is for non-reunification.

Foster carers have an important role in supporting the child before and after the meeting including the management of any anxieties or concerns the child may have about attending and participating at the meeting.

**Preparing other professionals and agencies**

Identify any relevant professionals or services (such as counsellors, teachers or school support staff) who are currently supporting the family or who may be a potential resource and should therefore be invited to the meeting.

Their role is to support and assist to implement the plan in relation to the service they agree to provide. If they are to support the family, they need to be full participants in the agreed plan.

The convenor(s) need to meet with professionals prior to the meeting so they are briefed about the process and intention of FLDM.

### Scheduling the family meeting

The date and time of the meeting is negotiated with participants. It is important for participants to understand the importance for the meeting to occur in a timely way and attendance is given priority.

**Meeting location**

The location should be neutral for all participants, such as a community centre, church halls or other community-based agency. Consideration also needs to be given to any technology requirements, particularly if teleconferencing/video conferencing is required for parents or other family members, to address safety concerns or who live interstate, are incarcerated and residing in a facility.

The convenor should know which Aboriginal land meetings are held on and acknowledge that land at the commencement of all meetings.

**Time between referral and meeting**

The meeting is to be held within 21 days after the substantiation decision. This timeline is consistent with the legal requirement to prepare and provide a case plan following substantiation. Given that these meetings occur at a point of crisis for families and may require urgent decisions such as placement decisions, there may not be enough time to locate and fully prepare the widest possible family group. In these situations, another meeting may be possible to include the broader family group, depending on the circumstances.

### Convening the meeting

The key process elements in the FLDM meeting are based on the New Zealand Family Group Conference model, which include: information sharing, private family time and agreeing plans. The model provides a framework that assists participants moving from what has happened (history) and where we are now (present) to making plans for what will happen (future). The convenor(s) role in the meeting is to establish and maintain the meeting process, to guide and support participants and to ensure that the integrity and values of the process, including respect, culture and partnership, are not compromised.

In the meeting, convenors are required to support all participants and facilitate appropriate participation, as well maintaining a safe (physical, emotional and cultural) environment that results in robust plans for the future care and protection of children.

Each family comes with its own unique history and relationships requiring a process that recognises and responds to these differences. Maintaining the integrity of the process will result in better outcomes for children and families and assist in the development of shared convenor skills, knowledge and experience.

**Room and seating arrangements**

It is good practice for the convenor(s) to arrive at the meeting location early enough to prepare the room before participants arrive. Seating arrangements should be considered in the preparation phase. It may be appropriate for family members to choose who they would like to be seated next to or the convenor(s) may wish to manage seating closely, depending on the circumstances. For safety reasons, survivors of family violence or abuse may wish to be seated near an exit if they feel unsafe.

To encourage open communication and assist with participant’s comfort, it is preferable that participants sit in a circle. A table may be used; however, consideration should be given as to whether this may impede equal participation by resembling traditional bureaucratic decision making meetings.

Consideration should also be given to the inclusion of cultural items in the meeting such as flags that recognise and respect the family’s culture.

**Welcome and acknowledgement**

The convenor:

* introduces themselves
* acknowledges country
* pays respect to Aboriginal and Torres Strait Islander people in the room
* pays respects to Elders – past, present and emerging
* welcomes everyone to the meeting.

Some families may open the meeting with a cultural or traditional song or blessing.

**Meeting procedures and meeting agreement**

The convenor outlines the meeting process and clearly states the purpose for the meeting. The meeting agreement is also discussed and may be written on a whiteboard or posted on a wall as a visual reminder throughout the meeting on agreed expectations about appropriate behaviour and responses if the rules are not adhered to.

Details relating to meeting practicalities should be explained, such as location of toilets, setting mobile phones on silent and how participants can indicate a break is required. Convenors are required to discuss confidentiality and refer to the privacy information sheet provided to participants during the preparation phase and have printed copies available at the meeting. Convenors will need to discuss the process for requesting a review of a child protection decision.

Convenors may use a guide to outline the meeting process and include prompts for asking questions and negotiation tools. The use of guides may be especially useful for inexperienced convenors.

**Introductions**

Family members introduce themselves before professionals. Family members are asked to state their relationship and connection the child or young person, whilst professionals and service provides are asked to explain their role in relation to the child or family. All participants are asked about their hopes and wishes for the day, which can be written up to reflect upon during the meeting.

**Information sharing phase**

The role of the convenor during the information sharing phase is to assist family members to share their story, ask questions, to ensure participants are provided with an opportunity to speak and to keep the process on track and moving forward. As a rule, the convenor’s voice should be minimal, encouraging family participation and discussions with the whole group rather than members directing their information towards the convenor.

The child’s voice should be heard first. If the child or young person is not present at the meeting, the convenor may read a statement made by the child or present drawings or photos of the child to the meeting.

The order of information sharing may be established in preparation or at the meeting. It is usual for the child protection practitioner to share information relating to child protection’s concerns and intervention that is limited to what is necessary to secure the safety and wellbeing of the child and promote their development. The family then have an opportunity to respond with their story, ask questions in relation to the information provided or request further information so that they can develop sustainable plans in the child’s best interest in private family time.

**Information shared by the child protection practitioner**

Information provided by the child protection practitioner should include information shared in the preparation phase to reduce the likelihood of presenting new information at the meeting. The practitioner may wish to read a written summary. The information should be provided in plain English and exclude bureaucratic jargon and acronyms. The information shared by the practitioner will have been discussed with the convenor prior to the meeting.

Information provided by the practitioner should include:

* + the concerns reported to child protection
	+ the outcome of the child protection investigation, including rationale for the substantiation decision and permanency objective. This should include the family’s strengths and intervention that is limited to what is necessary to secure the safety, wellbeing and development
	+ any court orders/conditions in place for the child, including protection orders, Family Court orders, family violence orders or other relevant orders in relation to other family members
	+ any legal or practice time frames relevant to the plan
	+ any information that the practitioner believes the family may require to develop a plan that will provide for the safety, stability and development of the child or young person.

**Information shared by family group members**

Family group members are encouraged to share their stories about their understanding, involvement and connection to the child and family’s history and current concerns. Family group members need an opportunity to clarify or seek further information from child protection prior to private family time.

The information being shared may be confronting for family group members and feelings of shame, remorse and guilt may need to be acknowledged by the convenor.

**Information shared by other professionals**

Families need to know what formal resources are available for them to access so they can be considered in the plan where appropriate. The convenor may ask professionals to provide certain information that was provided in the preparation phase.

**Concluding the information sharing phase**

The convenor needs to ensure that all participants are provided with the opportunity to share information and are encouraged to do so. This will enable inclusive decision making and planning process.

Private family time

The convenor explains to the family group members their role and practicalities such as how to seek assistance from the convenor, practitioner, or other professionals during private family time.

Family are advised to take time to deliberate during private time and are provided with any equipment such as pens, paper or whiteboard makers to assist with their planning.

Private family time is significant for promoting family participation and ownership of the plan. Creating the opportunity for private time is a core aspect of the FLDM model of decision making and is one of the key features that sets it aside from traditional child protection case planning meetings.

The purpose of private time is for the family to consider the options and to develop a plan for the child or young person. This is a critical component in empowering families to take responsibility for their child/children.

Professionals attending the FLDM are not to participate in private family time.

The family may choose to take breaks from private family time. For example, they may invite a professional to answer a question or provide resource information or assistance during private time. Private family time will resume when the professional leaves again.

Family group members may find it helpful to use a case plan and actions table template in private family time, which includes headings such as:

* + case plan for the child or young person
	+ goals - what needs to be done to achieve the plan
	+ tasks - what needs to be done to reach the goals of the plan
	+ who’s responsible - who is going to undertake the tasks
	+ timelines - when do the tasks need to be completed.

**Empowering the family to take the lead**

FLDM is about shared decision making and responsibility for the care and protection of children and young people. Families may be reluctant to take the lead as decision makers given the complexity of issues and seriousness of concerns, however, given the right tools, encouragement and support, families often demonstrate a high level of motivation and resourcefulness in making plans. Good preparation with families should include discussions on how private family time works and how family members can contribute and assist in keeping the child or young person safe.

Family members may wish to identify a spokesperson for the group, who can come in and out of private family time to clarify information with professionals, the convenor or the child protection practitioner. The family spokesperson can advise the convenor when the family has agreed on a proposed plan.

Re-convening the meeting - reviewing the plan

Family members invite the other participants back into the room when they are ready to finish private family time. Any questions, differences of opinion and issues relating to their plan are tabled for discussion with the convenors and other professionals.

Where the family has found it difficult to develop goals and a plan, the convenor’s role is to encourage the family to consider other options, possibilities and exceptions, and to build upon their strengths. For example, the convenor can ask what already happens in the family, what works well and what rules are already in place. The proposal should respond directly to the identified concerns for the child and how these will be addressed.

The convenor then facilitates the discussion between the family group, the child protection practitioner and other service providers, so that the plan is developed in detail, in a way that respects the integrity and intent of the family’s plan. If it appears that the decisions made by the family are being significantly changed, it may be appropriate to adjourn for further private family time. The convenor supports all participants to reach consensus about the plan through a flexible negotiation process.

All participants need to agree on timelines, responsibilities and how support will be provided by family members and services to ensure the plan should be implemented successfully. The departmental actions table template can be used to document the goals and tasks.

The aim is to produce a case plan that is in the best interest of the child, the goals required to meet the case plan, as well as the tasks, responsibilities and timelines.

For the plan to meet legislative requirements of a case plan, it must include:

* the permanency objective for the child
* all significant decisions made by the department for the child, including placement and contact
* a review date.

To ensure compliance, the departmental case plan template must be used to document the plan that was agreed at the meeting.

**No consensus reached**

If there are unresolved issues or a decision cannot be made at that time, participants may agree to reconvene a meeting at a later date. This can be stated in the plan to the extent that can be agreed on the day. If there is no possibility of reaching consensus, consideration will need to be given to the next steps. The family will need to be informed of possible options, including other child protection decision making processes such as a family meeting or traditional case planning meeting. The child protection practitioner will need to clearly articulate possible outcomes such as applying for a court order should that be necessary to promote the child’s safety. This should not be used as a threat but for the family to be aware of possible options following the FLDM program.

To agree to any proposed plan, the child protection practitioner will need to be satisfied that the plan is sufficient to address their fundamental concerns in relation to the child’s need for protection. For a convenor there is also a responsibility to be satisfied that the plan is sufficient to address the child’s need for protection.

**Endorsement of the plan**

The convenor endorses the plan on the day of the meeting, confirming that the plan was made by consensus and developed in the spirit of the FLDM program. If the convenor does not have the sufficient delegation, the plan should be endorsed by the case planner (typically the team manager of the allocated child protection practitioner).

The convenor’s endorsement constitutes exercising case planning delegations relating to the preparation of a case plan pursuant to section 167 of the CYFA.

**Provision of the plan to the family**

Where possible, a copy of the plan should be signed by all participants and provided with copies on the day of the meeting. The plan can be hand written and in dot point format.

**Closing the meeting**

Prior to closing the meeting, it is important for the convenor to make sure the family is aware of what to expect following the meeting. This includes sharing information on:

* + the role of the child protection practitioner, for example, child protection’s ongoing involvement or ceasing their involvement.
	+ the role of the convenor
	+ distribution of the plan
	+ the responsibilities and actions of all participants of the agreed plan
	+ responsibilities and actions of all participants if the plan becomes unworkable, or there are significant changes in circumstances
	+ scheduling of any additional FLDM meetings
	+ final thoughts and hopes of the family.

### Follow up

**Recording the agreement or plan**

Recording the plan on CRIS is the responsibility of the convenor of the meeting.

It is not appropriate to take minutes of a FLDM meeting. However, it may be agreed by the meeting to note different ideas and perspectives expressed at the meeting.

**Monitoring the plan**

Monitoring implementation and effectiveness of the plan is the responsibility of the allocated child protection practitioner and their team manager should child protection intervention continue. The convenor involvement ceases following the meeting and recording of the plan on CRIS.

# Complaints and internal review process

Participants must be provided with information on how they can resolve concerns they may have about decisions made in the FLDM or following the FLDM, including who they can contact to take the matter further if required.

The internal review process is being updated and due to be finalised in late 2021, please refer to the Child Protection Manual for the current internal review process.

If a child, young person or their parents are unhappy about the outcome of a meeting, the convenor should firstly consider whether another meeting is appropriate to address the issues raised.

Child protection internal review process provides for the review of a case planning decision by a senior officer. If the person seeking the review remains unhappy after the internal review process they will be advised of their recourse to VCAT.

Children, young people and their parents must be informed of the internal review processes and their entitlement to a review of decisions prior to the FLDM process. The internal review process applies to all significant child protection decisions.

For further information refer to the Child Protection Practice Manual at <http://www.cpmanual.vic.gov.au/>