

PRACTICE GUIDE

Practice panels

What are practice panels?

A practice panel is a facilitated process of engaging Child Safety staff, and at times partners and critical friends, in a structured case discussion. The aim of the practice panel is to elicit key information and increase critical thinking through analysis and reflection at key decision making points to inform outcomes for children, young people and families.

The practice panel process is an internal departmental forum – an authorising environment for making critical decisions or recommendations about case plan direction. Information gathered from the child, young person and family, their safety and support network, stakeholders, key partner agencies and case consultations or other processes will inform the discussion at the practice panel.

A practice panel may include invited partners who are also working with the family and would ideally include an internal or external critical friend who has not worked with the family to provide independence and a “fresh eyes” perspective.

A facilitator will support the case worker to present a summary of the case, their assessment and recommendations to the practice panel, and will facilitate panel members’ participation in discussion focussing on clarification, analysis and action planning. The Collaborative Assessment and Planning (CAP) tool is useful for the discussion.

The facilitated process helps workers map their information, and develop and refine their assessment. Using visual mapping can bring clarity and practice depth to support the discussion to remain focussed on the child or young person’s best interests – safety, wellbeing and belonging.

Purpose and benefits of practice panels

The practice panel process provides a consistent, collaborative approach to decision making, which allows consideration of different perspectives. This ensures that objective, balanced assessment and professional rigour is applied to key case decisions.

A practice panel will:

- organise information to make best judgements
- increase confidence and capacity in critical thinking
- strengthen child protection practice and expertise
- facilitate efficient and organised planning in the lead up to key case decisions
- increase responsive case management
- facilitate shared decision making
- provide a shared responsibility for complex decisions

The benefits of the practice panel activity include:

- recognition of workers’ knowledge and skills
- appreciation of each other and collective work
- building shared experiences and creating learning opportunities
- encouraging creative solutions
- enabling staff to document clear direction and next steps

Referral criteria

Referrals will be made by the Child Safety Officer (CSO) responsible for the case. A matter must be referred to a practice panel:

- prior to any child protection order expiring, regardless of whether another order, extension, revocation or variation is being recommended (refer to the Practice Guide: Decision making for expiring child protection orders)
- in cases where reunification is being considered or planned

There is an opportunity to broaden the use of practice panels, and service centres may use a practice panel for other key case decision making, for example:

- when considering the most appropriate type of ongoing intervention;
- when making a decision to close an Intervention with Parental Agreement case

Practice panel members

- Manager (for any complex cases or to provide endorsement for permanency planning recommendations such as nominations of a suitable person for long term guardianship orders to a suitable person or for a permanent care order)
- Senior Practitioner
- Senior Team Leader (STL) responsible for the child or young person
- CSO responsible for the child or young person
- Child Safety Support Officer or other departmental officer working with the child or young person
- Cultural Practice Advisor (for all Aboriginal and Torres Strait Islander children)
- Where appropriate, workers from other government services or community agencies who are working with the child, young person and family
- Where appropriate, a professional with specialist knowledge or expertise, for example, disability, domestic and family violence, drug and alcohol, mental health.
- Critical friend – independent departmental or another government service or community agency third party, who has had no previous involvement in decision making regarding the child or young person. An Aboriginal and/or Torres Strait Islander critical friend is strongly recommended for Aboriginal and Torres Strait Islander children and young people.

For Aboriginal and Torres Strait Islander children and young people there will be cultural representation from one or more participants during practice panel discussions.

Practice panels are often facilitated by the senior practitioner, however can be facilitated by any experienced staff member including the Cultural Practice Advisors.

Office of the Child and Family Official Solicitor attendance at practice panels

It is considered best practice to separate legal advice from practice decisions about the best interests of a child or young person. The practice panel process is tasked with applying the best child protection practice expertise of the group to decision making. The application of a legal framework at this time could steer the conversation in a certain way or limit thinking, as well as compromise legal privilege.

Legal advice provided by legally qualified OCFOS officers is subject to legal privilege (confidential and protected from disclosure). This privilege is waived if any third party is present when the advice is given. A third party is anyone not employed by Child Safety.

OCFOS staff could attend practice panels to educate/inform themselves about a matter, but it is not a forum for their contribution. Following the discussion within a child protection framework and after any external parties have exited, OCFOS could then provide legal advice about whether there

is sufficient evidence to support the assessed course of action and what more could be done to secure evidence to support the case direction.

Practice panel process

Preparation

A practice panel referral form is not required, however written information (CAP tool, genogram, external assessments etc.) is provided in advance for panel members to consider before the meeting.

Consider the practice panel membership and identify any particular representation which is required, for example:

- cultural representatives, for example Cultural Practice Advisor, Aboriginal and Torres Strait Islander Regional Practice Leader, nominated Elder, staff member from an Aboriginal and / or Torres Strait Islander organisation, or other identified staff member
- a delegated officer
- previous worker with case history; and/or
- a worker with specialist knowledge or expertise, for example, knowledge in the field of disability, domestic and family violence, drug and alcohol, mental health

Prior to a practice panel being convened the CSO is to complete the CAP tool – with the family, and their safety and support network where possible, and in supervision or case consultations to develop critical thinking and analysis, and identify gaps and proposed direction.

It is important to remember that the practice panel will provide the CSO, in conjunction with their STL, with an opportunity to present their assessment and recommendations. To make the process as effective as possible, the practice panel environment needs to be a safe environment. Using appreciative inquiry questioning techniques is a useful way to demonstrate curiosity and ensure rigour in the process.

What information needs to be brought to practice panel?

The CSO needs to have a clear understanding of the purpose of the practice panel, and what key decisions are being considered. These matters will be identified and agreed upon by the CSO and STL prior to attending the practice panel. The CSO, supported by the STL and other staff involved with the case, will be prepared in order to provide a professional case presentation, which logically summarises the below details:

- child and/or young person's details
- family's details, including siblings
- cultural identity and relevant information about tribal/language group and country
- extended family (maternal and paternal) and network details
- genogram
- current case status – I&A, IPA or Child Protection Order (type and expiry)
- relevant information regarding health/disability diagnoses, education/training, extra-curricular activities
- placement details (including if the child is not with kinship carers, what efforts have occurred regarding exploration of family options and what do ongoing efforts look like)
- current family contact arrangements, including assessment of the quality of contact to date
- summary of case plan / cultural support plan
- summary of child protection history / departmental involvement
- summary of interventions provided to child and family
- overview of current assessment information – I&A, CAP - what are we worried about (harm - complicating factors – from SDM Safety Assessment and Family Risk Evaluation) and what is working well (protection/belonging - strengths/resources), Safety Assessment, Family Risk Evaluation, Child and Parental Strengths and Needs, Family Reunification Assessment, case plan review

- views of the child or young person
- views of the child or young person's family and safety and support network
- information from other professionals involved
- if it is proposed to seek a Long Term Guardianship Order to a suitable person or a Permanent Care Order, the relevant assessment of the person's suitability for endorsement at the panel
- proposed recommendations for consideration by the practice panel

Facilitated meeting stages:

- introductions and roles, clarifying purpose, group agreements
- clarification/questions
- formulation (analysis/hypothesis) – reaching a proposed direction by incorporating relevant
- action plan – next steps, and recommendation or decision
- feedback regarding process/close

See the attached prompt sheet which provides a suggested dialogue structure for facilitated meetings which shows the detail of these meeting stages.

Administration of practice panel meetings

Practice panel times will be set in the workgroup calendar every week or fortnight depending on volume. Each service centre may have different referral and coordination processes in place.

Documentation

The practice panel discussion and recommendations, decisions and actions must be recorded in the relevant event in ICMS. Service centres will plan for who will attend the practice panel and who will be responsible for completing the recording and documentation.

Where a practice panel has been held for the purpose of determining the case direction for an expiring child protection order, and a decision is made to recommend a further child protection order, the practice panel minutes or notes from the discussion are required to be provided to DCPL when the referral is made. The practice panel minutes may be attached to the initiating affidavit when seeking another child protection order but if there are any concerns about confidential or sensitive information, a consultation will occur with OCFOS and the DCPL.

Lack of agreement

Where it becomes clear that a matter might not be ready for full practice panel consideration, it may be decided to reconvene at another date, to enable further case work, consultation or information gathering to occur.

In other cases where consensus cannot be reached in the practice panel, the matter will be referred to the Manager for consideration and decision making.

Continuous quality improvement

Regular processes for reflecting, reviewing and measuring the functioning and effectiveness of practice panels need to be in place in each service centre. Some examples are:

- a four domains of inquiry discussion following practice panels at regular intervals (for example twice a year);
- review of practice panel documentation;
- regular feedback from participants at each practice panel or at set intervals to gauge the effectiveness of the process; and
- Senior practitioners to be a critical friend on other service centres' practice panels so ideas and skills can be shared.

Version history

Last reviewed: September 2019

SUGGESTED FACILITATION PROCESS AND DIALOGUE STRUCTURE FOR PRACTICE PANEL

...don't always do all of these all of the time, but do most, most of the time, which leaves less to chance...

PROCESS	DESCRIPTION	SCRIPT SUGGESTIONS
WELCOME AND INTRODUCTIONS	Acknowledgement of country. Introduce participants and clarify roles.	General acknowledgment: I would like to respectfully acknowledge the Traditional Owners and Custodians of the land on which we meet, and acknowledge Elders past, present and emerging.
PURPOSE	Clarify overall purpose for the meeting. Describe concretely why the meeting is being held.	Why are we meeting today? What is the critical decision or recommendation that needs to be made at this point in with this case?
DESIRED OUTCOMES	Elicit overall hopes. Explain who the delegate is and how decisions will be made.	What are we hoping to accomplish in this discussion? What do we want to walk away from this meeting with (for example, a plan, recommendation, decision)
STAKEHOLDERS / NETWORKS	Ensure the right people are present.	Is everyone here who should be here? Do we have cultural representation from one or more participants? Should there be other people here? What is the best way to get people's perspective or update/brief them?
CONTEXT	Check what might pull attention away from the meeting's focus, such as time available, work pressures, urgent matters, and current emotional wellbeing of participants.	What do we need to be mindful of/thoughtful about/aware of for people here today? Is there anything participants need to let us know?
GROUP AGREEMENTS OR COMMITMENTS	Develop a group working agreement. Set a time frame for meeting. Allocate roles, for example, the voice of the child, the voice of SDM, the voice of culture. Agree who will facilitate, time keep, scribe. Key reminders can be put on the board: <ul style="list-style-type: none"> Evidence based (robust / rigour) Respect for the family who are not present Confidentiality Working With and Across Difference – Have people commit to checking their privilege, 'try on' others ideas and feelings, maintain an awareness of intent and	How are we going to work together? What agreements do we need to make with one another to ensure this process is successful? What will help us get through this process in a way that allows us to achieve our purpose? Because we have someone on the phone, we need to pay attention to how to ensure they can fully participate (can give people a role to notice non-verbals and pause the meeting to check in, say your name before speaking). We are having a meeting about the family without them – how do we do this respectfully? If we have a difference of opinion about the way to proceed, how will we manage this?

PROCESS	DESCRIPTION	SCRIPT SUGGESTIONS
	impact.	Do you authorise me as the facilitator to bring us back if we get off track?
CONTENT	<p>Presentation of case by workers most involved with the family</p> <ul style="list-style-type: none"> Start with background information – who is in the family (genogram), safety and support network, cultural identity and cultural considerations, guidance provided by the SDM Safety Assessment and Family Risk Evaluation tools and brief summary of departmental involvement up to the current time. Then (in no order) the top four quadrants of the CAP framework tool - <i>what are we worried about</i> (harm/complicating factors – from Safety Assessment and Family Risk Evaluation) and <i>what is working well</i> (protection/belonging and strengths/resources) Identify grey areas that need follow up Mapping (visual – whiteboard or paper) and sorting as you go 	<p>We acknowledge that it takes courage to present your case to a group of people.</p> <p>Please write down questions until the case worker has finished presenting, as they may answer your questions as they continue talking about the family. Any unanswered questions can be discussed after the worker's initial presentation.</p>
CLARIFICATION	<p>Questions by facilitator first, then the panel members, to facilitate analysis.</p> <ul style="list-style-type: none"> Notice competency Ensure the family's views are incorporated or highlight what additional work needs to be done to elicit family member's views Ensure a cultural lens is applied Ask about problem exceptions Elicit potential solution strategies 	<p>What would the child and family say?</p> <p>What does the voice of SDM say?</p> <p>How does this align with the Child Placement Principle?</p> <p>Have there ever been times when (exception to the problem, for example, when dad didn't use alcohol as a coping mechanism when times were tough? When mum was demonstrating warmth and interest towards her baby?) If we don't know about these exceptions, have we explored them with the right people?</p>
FORMULATION (ANALYSIS/HYPOTHESIS)	Reach a proposed direction by incorporating relevant safety and risk assessments, identification of harm, parent willing and able, evidence base/expertise.	
SAFETY AND WELLBEING SCALE	<p>Determine how much safety there is currently for each child – Notice differences for each child.</p> <p>Ask eliciting questions about what has participants scaling as high or as low regarding safety.</p> <p>All panel participants to scale.</p>	On a scale of 0 to 10, where 0 means the situation for this child is so bad they need to be removed immediately and 10 means there is enough safety and wellbeing for the children to close the case, where would you rate the situation right now?
ACTION PLAN	<p>Focus on the future safety, wellbeing and belonging of each child.</p> <p>Identify next steps and tasks, contingencies, "what ifs", and plan B.</p> <p>Can be completed in the bottom section of the CAP framework – worry statements, goal statements and action steps.</p> <p>List action items and who is responsible to do what and by when.</p>	<p>What steps do we need to take from here to ensure the safety, wellbeing and belonging for each child?</p> <p>Who does what? By when? Is another meeting needed? How will we review/follow up?</p>

PROCESS	DESCRIPTION	SCRIPT SUGGESTIONS
CHECK FOR UNDERSTANDING AND THEN AGREEMENT	<p>Building consensus. (See end of document: 'Gradients of agreement tool' by Sam Kaner). Everyone must be at least a 2 to move forward:</p> <ul style="list-style-type: none"> • 1: Veto – I won't do that plan • 2: Reluctant but willing – I don't like it / not comfortable but I am willing to try it • 3: Neutral – no strong feelings either way / could go either way • 4: Supportive – I like this plan • 5: Endorsement – I love this plan <p>Scaling. For willingness/confidence/capacity regarding safety or progress towards goals, for example, to assess a group's confidence in the safety of the child if they proceed with the plan discussed. Everyone must be 10 to proceed – upgrade the plan to get everyone to a 10.</p> <p>Some people might want to hear all perspectives first, some might need to go away and think about it first.</p> <p>Default to people closest to child, people most informed, and / or people who spend most time with the child and family.</p>	<p>Tell me what has you at a one? What can we do to move you to at least a two? (Gauge a whole room or a meeting just asking people to show their number with a hand- fist is 0, open hand is 5).</p> <p>You're at a seven regarding your confidence in how safe you think the child will be if we proceed with this plan. What do you need to see happen with this plan to move you up to a ten?</p>
POSITIVE REFLECTION	<p>Help the worker identify and reflect positively on their good practice.</p> <p>Amplify the details of good practice.</p> <p>Acknowledge and compliment good practice and anything the worker has done which has contributed to progress on the case.</p>	<p>As we draw to a close, let's take a moment to focus on your practice – What do you feel most proud of in your work with this family so far?</p> <p>What has been your most important learning in your work with this family?</p> <p>You've managed to achieve so much with the family in the midst of all the complexity. How were you able to do this?</p>
FEEDBACK	<p>Seek participants' feedback about the process.</p> <p>Consider participants sharing one regret and one appreciation regarding the process.</p>	<p>What worked during the process?</p> <p>What could we do differently next time?</p>
APPRECIATION, THANKS & CLOSE		

Building Consensus

"Gradients of Agreement"
—Sam Kaner of Community at Work

