

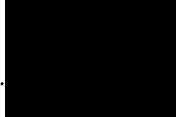
**IN THE MATTER OF THE ROYAL COMMISSION  
INTO FAMILY VIOLENCE**

**ATTACHMENT BA-15 TO STATEMENT OF BETH ALLEN**

Date of document: 13 July 2015  
Filed on behalf of: State of Victoria  
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This is the attachment marked '**BA-15**' produced and shown to **BETH ALLEN** at the time of signing her Statement on 13 July 2015.

Before me: .....  .....



**An Australian Legal Practitioner within  
the meaning of the Legal Profession Uniform Law (Victoria)**

Attachment BA-15

## Information gathering in best interests case practice

Date of Advice: **5 November 2012**

Advice no: **1587**

**This advice is endorsed by the:** Assistant Director, Child Protection Policy, Practice and Planning.

This Advice is current **only** if the date of Advice in this document matches the date of Advice in the online version. Check the date of Advice on line before relying on this printed copy.

### Introduction and purpose

This advice provides Child Protection practitioners and managers with information and practice requirements regarding information gathering in the context of the Best Interests Case Practice Model (the model) specifically for Child Protection case practice. The model provides the foundation for case practice in Child Protection, as well as for family services and placement services.

Information gathering is one of the stages of practice in the model. Each stage is addressed in a separate piece of practice advice, however it is important to remember that the stages of practice are intrinsically linked, can overlap, and are components of a cyclic process.

The legislative obligations relating to information gathering are addressed, as well as broader program requirements and considerations. While this advice does not include any standards, links to related advice and standards pertaining to information gathering are provided.

This advice should be read in conjunction with the 'Best interests case practice model - Summary guide' and with the other pieces of practice advice regarding best interests case practice in Child Protection – see Related content for links. Refer more widely in this manual for advice and guidance regarding particular practice topics.

## Legislation

**Note:** Use the Legislation link on toolbar to access full text versions of the legislation.

Any sections of an Act noted in this Advice are partial references only and should not be relied on. Practitioners should refer to the Act for full details.

### Children, Youth and Families Act

*Children, Youth and Families Act 2005 (CYFA)*

There are numerous clauses and sections within the CYFA that relate directly or peripherally to information gathering, and information management. From the Child Protection point of view the most pertinent sections are:

#### Part 1.1 - Introductions.

- 3 Definitions – Information holder

#### Part 1.2 - Principles

- s. 10 Best interests principles
- s. 11 Decision-making principles
- s. 12 Additional decision-making principles
- s. 13 Aboriginal child placement principle
- s. 14 Further principles for placement of Aboriginal child

#### Part 3.2 – Concern about wellbeing of child

- s. 28 Report to Secretary about child
- s. 29 Report to Secretary about unborn child
- s. 35 Who may the Secretary consult?
- s. 36 Who may the community-based child and family service consult?
- s. 37 Disclosures protected
- s. 38 Consultation with Secretary
- s. 39 Record of disclosures

#### Part 4.1 – Children in need of protection

- s. 162 When is a child in need of protection?

#### Part 4.2 – Responsibilities of Minister

- s. 165 Central register

#### Part 4.4 - Reporting

Division 2 – Report to protective intervener

- s. 183 Report to protective intervener
- s. 184 Mandatory reporting
- s. 185 Report on child in need of therapeutic treatment
- s. 186 Ground for belief
- s. 188 Record of report

## **Part 4.5 – Disclosures of information**

### Division 1 – Voluntary disclosure of information

- s. 192 Secretary may request provision of information
- s. 193 Disclosers protected

### Division 2 – Compulsory disclosure of information

- s. 196 Authorised officer may require disclosure of information
- s. 197 Refusal or failure to comply with requirement
- s. 200 Medical or professional privilege does not apply
- s. 201 Offence to give false or misleading information

## **Part 4.6 - Investigation**

### Division 1 – Investigation of protective intervention report

- s. 205 Investigation by protective intervener
- s. 206 Record of investigation
- s. 208 Protection of givers of information

### Division 2 – Investigation of therapeutic treatment report

- s. 210 Investigation by Secretary
- s. 211 Record of investigation
- s. 212 Protection of givers of information

## **Part 4.8 – Protective Intervention**

s. 240(2) Action by protective intervener

### **Health Records Act**

*Health Records Act 2001*

### **Information Privacy Act**

*Information Privacy Act 2000*

### **Freedom of Information Act**

*Freedom of Information Act 1982*

### **Charter of Human Rights and Responsibilities**

*Charter of Human Rights and Responsibilities Act 2006*

All employees of the Department of Human Services have responsibilities created by the Charter. The particular responsibilities will vary depending on work role, however all departmental employees are expected to be familiar with the Charter and their consequent responsibilities, and should actively:

- encourage actions which are compatible with the Charter
- support others to act compatibly with the Charter
- respect and actively promote the Charter to clients, external service providers and departmental staff.



It is essential for Child Protection practitioners and managers to include consideration of human rights in decision-making for children and families. This applies to all aspects of Child Protection work and all decision-making regarding children and families. See Advice number 1568- 'Human Rights and Child Protection' (refer to Related content).

## Standards and procedures

### Best interests case practice model

#### Information gathering stage of practice



Information gathering is the stage of practice that is undertaken first when contact with a child begins. As involvement continues, further information gathering will follow the reviewing the outcomes stage. Throughout involvement with the child new information will be gathered and recorded, prompting fresh analysis.

#### Aim of information gathering

Information gathering is a dynamic, incremental and ongoing process that builds throughout Child Protection's involvement with a child. Gathering information enables the Child Protection practitioner to identify and analyse risk, validate existing information and record new information on a child and family. Information gathering is the fundamental building block that supports analysis and planning, actions and reviewing outcomes.

Information gathering needs to be targeted and purposeful. More information does not necessarily result in better analysis. According to Munro, 'human beings have a limited ability to process data, so that increasing the quantity they are expected to process can lead to deterioration, not improvement, in their reasoning skills' (Munro 2005).

In best interest case practice, information is sought from a systemic and ecological perspective. To look systemically at the child means to develop a picture and understanding of the child within the family system, rather than as an isolated individual. Gaining an understanding of the family patterns of relationships, and significant events that have occurred and therefore influenced the life of the family, will assist practitioners to make sense of the system that the child lives within and is influenced by.

An ecological perspective looks at the child and family within their broader social and environmental context and assists practitioners to develop a picture of the inter-relationships between the child, their family and the community that surrounds them. An ecological perspective takes into consideration the services, resources and community networks (formal and informal) that are available to and accessed by the child and family.

The model asks practitioners to gather information with an open mind, in order that information is not interpreted prematurely before all available facts are known. Information is gathered to inform, to build a picture of what is and how it came to be, rather than to prove a view or a point. Information that does not 'fit the picture' can be vital; this will then prompt further hypothesising and exploration of what is really going on for the child and the family.

Relationship building and engagement with children and families is an integral part of the information gathering stage. Engagement is dependent upon ongoing and skilled communications and requires commitment from all parties. Practitioners need to clearly identify the concerns and their role and responsibilities whilst engaging families through open discussions and shared decision making.

### **Life of the child**

Information is gathered to develop an understanding of the child and family's lived experience and enable the assessment of risk and needs. Ongoing gathering of information about the child and their circumstances assists practitioners to develop an evidence base for subsequent assessment. The body of known information builds as new information is added to what is already known about the child.

### **Identifying concerns, strengths and protective factors**

Best interests case practice uses a strengths based approach, which acknowledges the positive aspects of the family by enquiring and remaining open to receiving information about family strengths. Assessments need to be balanced, and families respect the fairness shown through the practitioner's genuine interest in the positive aspects of their lives. This ensures that the information gathered does not lead to an unbalanced and poorly considered analysis.

To guard against over optimism and to ensure that the child's safety is not lost sight of within the needs and functioning of the family, it is vital that Child Protection practitioners remain forensically astute. Strengths of themselves do not ensure safety. Safety is ensured through appropriate change being demonstrated and sustained over time.

### **Privacy and confidentiality**

The CYFA, Information Privacy Act 2000 and Health Records Act 2001 regulate the gathering and sharing of information in Child Protection practice. The use and recording of personal and sensitive information relating to children and families should always be treated with care to ensure that their privacy is respected and maintained as prescribed by law and policy. For detailed practice advice regarding requirements in relation to privacy and confidentiality refer to the 'Confidentiality, privacy and information management' section of the manual as well as Advice numbers 1203 'Gathering information from other sources at initial investigation' and 1403 'Information sharing in out of home care' - see Related content for links.

### **Types of information**

Child Protection gathers a variety of types of information. It is important to differentiate between fact and opinion. This can be difficult as the provider of the information may consider something to be fact, which is instead their interpretation of what they have observed. For example, a doctor's report may describe 'four small round bruises down side of child's face'. This may be considered factual, however, a doctor's report that states 'non-accidental bruising to the face, as a result of being slapped by an adult using significant force' may be considered a combination of fact and opinion/hypothesis.

Information received and sought by Child Protection practitioners generally falls into two categories: identifying and contextual information, and safety and development information. Both current and historical information will be relevant. Historical information will include family history and previous involvement with child protection services in Victoria and elsewhere, as well as the child's history.

### **Identity and context - Safety and development**

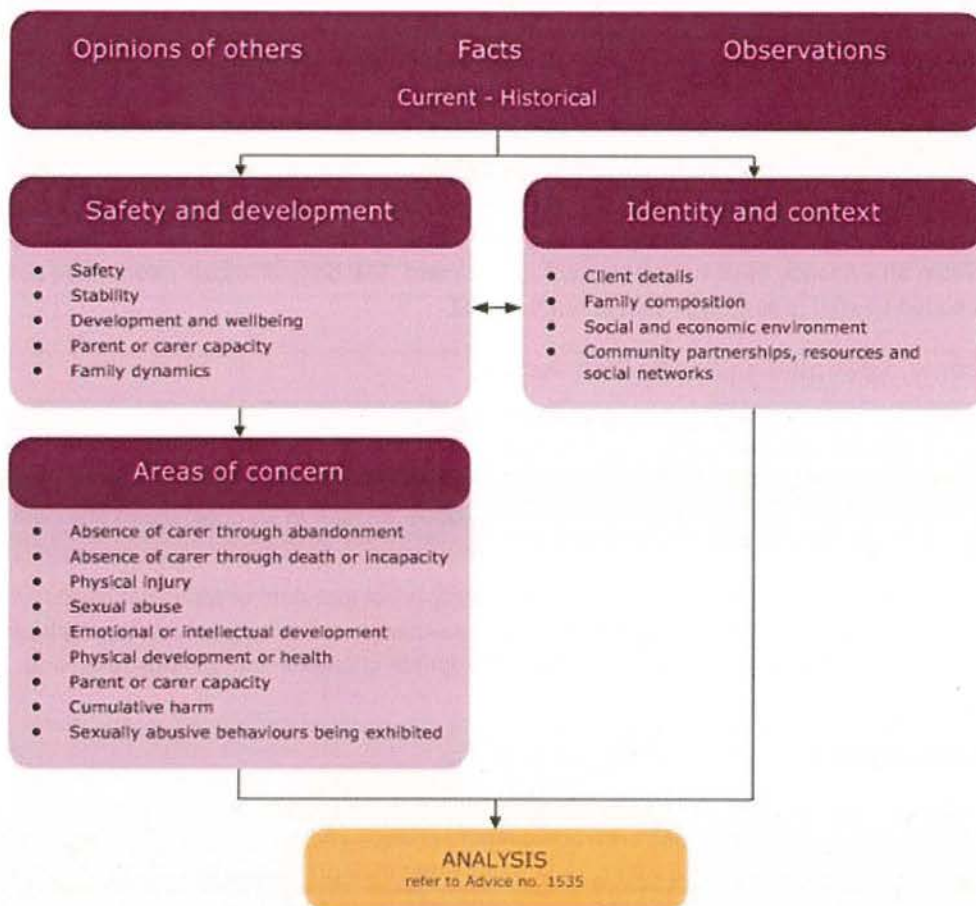
Identifying and contextual information includes factual personal, family, social and community details such as age, culture, gender, address, relationships, social and economic situation, networks and so on.



Safety and development information relates to the risk to the child and their needs, and family functioning and potential. This type of information includes facts, direct observations and the opinions of others (noting that the practitioner's own opinions constitute analysis).

This following diagram summarises information gathering in Child Protection, on which analysis is based.

Diagram 1: Information gathering in Child Protection



### Information gathering domains

Information gathered in relation to the child and family is categorised in the model into seven key domains:

- child's safety
- child's stability
- child's development and wellbeing
- parent or carer capability
- current family composition, dynamics and family history
- social and economic environment
- community partnerships, resources and social networks.

Gathering information in these domains assists the practitioner with ensuring that information relevant to areas of risk and needs is available.

Information will change as the child's and parents' circumstances change, and the level of detail of information will build as the Child Protection involvement progresses.

### **Child's safety**

A significant proportion of information gathered during Child Protection involvement relates to the child's safety. Key considerations for gathering information in this domain include:

- Type of alleged or actual harm - abandonment, parents dead or incapacitated, physical abuse, sexual abuse, emotional or psychological abuse, significant harm to the child's development or health
- Level of care provided to the child, such as food, shelter, warmth
- Parent's understanding and prioritisation of the child needs before their own
- Sources of harm (what and who)
- History of Child Protection involvement with the child and family members
- Impact of harm on the child; fear of harm, frequency and duration of harm
- Consistency of protection
- Level of primary carer's or mother's safety
- Opportunities for harm (does the alleged or actual perpetrator have current, prior or future access to the child?)
- Previous or current contact with other agencies or services.

### **Child's stability**

Stability refers to the ongoing connections that children have within their surrounding environment, which is a vital component of every child's wellbeing and development. Key considerations for gathering information in this domain include:

- Connection to primary caregiver
- Connection to family, siblings and extended family
- Connection to school, childcare, friends
- Connection to community
- Connection to culture
- Trans-generational patterns, impact on the child and family, of individual, family community and historical trauma
- Child's ability to make key connections.

### **Child's development and wellbeing**

Children's development can be significantly affected by neglect and abuse. Children require opportunities, encouragement and support through their childhood to develop to their full potential. Key considerations for gathering information in this domain include:

- Child's wellbeing
- Health and physical development
- Family and social relationships
- Emotional and behavioural development
- Opportunities for play, learning and education
- Opportunities for leisure, recreation and rest
- Opportunities to practice chosen faith
- Opportunities to gain support from cultural community
- Identity, including Aboriginal or other cultural, spiritual and sexual identity



- Social presentation
- Self care skills (age appropriate)
- Gender.

### **Parent or carer capability**

Assessing parenting capability is a core task, which involves assessing parent or carer capability to protect children from harm and enhance their developmental experiences. Key considerations for gathering information in this domain include:

- Parental or carer attitude to the child
- Parent or carer capability to meet the child's changing needs:
  - previous history of parenting
  - providing basic care
  - ensuring safety
  - emotional warmth and responsiveness
  - guidance and boundaries
  - consistency and reliability
  - stimulating learning, development and wellbeing
- Parental history of abuse or neglect
- Parental or carer attitude to the actual or alleged harm
- Patterns of family and community interaction
- History of violence
- Intellectual or physical disability
- Psychiatric or psychological illness
- Substance abuse.

### **Current family composition, dynamics and family history**

Family composition and dynamics refers to who is part of the family and how they relate to each other. Composition and relationships can change over time and can have a significant impact on children. Key considerations for gathering information in this domain include:

- Who forms family for this child
- Who forms community for this child and family
- Family cultural connections
- Role of gender and power in family dynamics
- Role, contribution and influence of absent parent
- Potential role of extended family, as well as disengaged or absent members
- Transgenerational patterns
- Parents family of origin history.

### **Social and economic environment**

A family's social and economic environment can have a detrimental impact on vulnerable children.

- Housing - stable, sufficient, suitable for children
- Employment patterns
- Income - financial pressure, impact on the provision of basic care
- Informal community networks; family's involvement in the local community

- Cultural connectedness - family's involvement with extended family and social networks.

### **Community partnerships, resources and social networks**

A family's participation within their local neighbourhood and wider community relates to social inclusion and the feeling of acceptance in the community of all family members. Socially excluded families may experience discrimination or harassment to the detriment of their children and are less likely to use community resources and supports. Key considerations for gathering information in this domain include:

- Networks, including engagement with support services and family's social integration
- Available community resources, including sports
- Connection to universal services, for example maternal and child health services, child care, school or a library.

### **Areas of concern**

From the information gathered it is essential in the Child Protection context to identify areas of concern – what is worrying – in relation to a child.

While Child Protection has responsibilities in relation to the wellbeing of children (prevention) and, where a need for protection has been established, for their supervision or care, a child's need for protection is central to Child Protection involvement.

The CYFA provides the basis for the areas in which Child Protection concerns may exist:

- absence of carer through abandonment s. 162 (1)(a)
- absence of carer through death or incapacity s. 162 (1)(b)
- physical injury s. 162 (1)(c)
- sexual abuse s. 162 (1)(d)
- emotional or intellectual development s. 162 (1)(e)
- physical development or health s. 162 (1)(f)
- sexually abusive behaviour being exhibited s. 244

### **Type of harm and actions leading to harm**

For each of these areas of concern the type of actual or likely harm to the child and the actions leading to that harm should be identified. For a list of types of harm and actions causing harm Attachment 1: Areas of concern - detailing harm.

### **Verifying information**

Child Protection involvement usually begins with the receipt of information alleging concern about a child. Through the course of Child Protection involvement, the Child Protection practitioner may either receive information containing additional allegations or have their own concerns for the child.

Assessment needs to be based on evidence. Taking information at face value can result in poorly informed analysis and in some instances may place a child at further risk of harm. The quality of information provided by reporters will vary, and parents and children will commonly minimise or deny abuse and neglect.

Child Protection needs to ensure that critical information is verified or corroborated through seeking further information from other relevant sources. Establishing the validity of information also protects children and families from unfounded or malicious allegations.

As child protection involvement progresses the basis for alleged concerns needs to be tested and the veracity or otherwise of the concerns established so as to build a picture of the valid concerns for a child to guide analysis.

In the verification process information may be categorised as:

- Alleged

- Verified
- Confirmed
- Disproved
- Unable to verify

### Verification category definitions

**Alleged** – uncorroborated information.

Alleged information:

- has been asserted or declared, but not tested or verified
- may be a sufficient basis for investigation depending on the nature of the concern
- may become known at intake or at any other phase of child Protection involvement
- may be raised by an external person or the Child Protection practitioner.

**Verified** – information corroborated or supported by another party, or from a highly trusted source; suggests that the concern may be valid.

Information may be verified:

- on the basis of the quality of the information and its source - for example a mandatory reporter from a hospital may provide information with sufficient detail to be considered verified on its own merit
- on the basis of additional information gathered through intake consultation provided for in s. 35, CYFA
- during intake or any other phase of Child Protection involvement
- following investigation, but this will not in itself be a sufficient basis for substantiation.

**Confirmed** - compelling evidence in the form of the practitioners own observations or known facts or from another professional that, on the balance of probabilities, the concern is valid or true.

Confirmed information:

- is based on direct investigation (so not at intake)
- is a basis for substantiation.

**Disproved** - compelling evidence in the form of the practitioners own observations or known facts or from another professional that an allegation is invalid, or not true. The view that an allegation is disproved should be formed with caution.

Disproved information

- is based on direct investigation (so not at intake)
- is a basis for not substantiating a concern
- reflects the current assessment at the time
- should not be used to discount any new allegation or report (which should be assessed on its merits).

**Unable to verify** - investigated but neither confirmed nor disproved

Information that cannot be verified

- is based on direct investigation (so not at intake)
- allows for unsubstantiated allegations to remain live in the current assessment
- indicates a lack of compelling evidence that would serve to either confirm or refute the concern
- is a basis for not substantiating a concern
- may be resolved in future with the receipt of new information which serves to verify, confirm or disprove the concerns.



Refer to Advice numbers 1535 'Analysis in best interests case practice' and 1213 'Substantiation, responsibility for harm and risk' for further information regarding weighing up evidence, and the substantiation decision.

### Sources of information

It is critical to gather information from multiple sources and to develop a rich description of the life of the child and family from multiple perspectives. This also assists with validating, clarifying or corroborating information, leading to more informed, comprehensive and accurate analysis and assessment. For more information relevant to the investigation phase, refer to Advice No. 1203 'Gathering information from other sources at initial investigation' – see Related content for a link.

### The child

Observe and interact with the child in a manner consistent with the child's age and stage of development in order to assess the child's presentation. Always try to engage with and speak to the child. If the child is pre-verbal, detailed information can be gained from observing the child, including their behaviour patterns and responses, or lack of response, with each parent or caregiver, siblings and significant others. For further information refer to Advice No. 1192 'Conducting the first visit' - see Related content for a link. Engagement is enhanced through the use of age appropriate language and mediums that are easier for the child to relate to, such as drawings, puppets, games and stories (for more detailed information on child development, refer to the 'Child development and trauma guide'- see Related content for a link.

Seeking the child's views and opinions, where age appropriate, will help the child to feel safe, supported and listened to, as well as providing relevant information. This legislative requirement (s. 10 (d) of the CYFA) is also essential to building a trusting relationship with the child.

### Family and extended family

Seeking and sharing information with a family assists the practitioner to develop a clear picture of the child's lived experience. A detailed family history identifies patterns of behaviour and abuse, relationships, significant events and a deeper understanding of how the family functions. Practitioners should also observe the interactions in the family and be aware that the strengths and types of relationships between family members can sometimes affect the validity and accuracy of the information provided.

It is essential for practitioners to seek out accurate information about the values and child rearing practices of the cultural group to which the child belongs. Practitioners need to actively ask about cultural norms.

Contact with non-custodial parents should be made unless their whereabouts are unknown, with the aim of engaging them in the Child Protection involvement with their child and gathering and validating information provided by the custodial parent and others.

Child Protection practitioners should be proactive in locating a non-custodial parent even when the custodial parent may deny knowledge of their whereabouts or involvement in the child's life. If the Child Protection practitioner, in consultation with their supervisor, decides not to make contact with the non-custodial parent, the reasons for this decision should be clearly articulated and recorded on the client information system.

Where there is evidence that the relationship between the parents was violent or abusive, consultation with a supervisor is required to identify possible risks to the family, and to determine how the contact will occur to ensure the safety of all parties.

### Specialists

Consider seeking the opinion of an external expert where specialist information is required, such as from medical (including the Victorian Forensic Paediatric Medical Service), maternal and child health or mental health practitioners and so on. Where there is sexual assault or family violence, practitioners should consider consulting with specialist family violence or sexual assault services.

Experienced staff in specialist roles within Child Protection, such as a Practice Leader, Aboriginal Family Decision Making (FDM) convenors and Principal Practitioners, are a rich source of detailed knowledge, and can assist with identifying gaps in the information about a child.



## Agencies and significant others

Professionals who are, or have been involved with the child or family can provide a broad range of information from different perspectives. Contacting and maintaining contact with agencies such as schools, childcare centres, family services and health services assists with gathering information on specific incidents and the cumulative impact of ongoing harm, clarifying their current role with the child and family, and identifying progress or continuing issues that affect the child's safety, stability and development.

It is important for practitioners to remain mindful of possible implications of using information provided by agencies who have an ongoing working relationship with the family. Practitioners should discuss any issues with professionals at the point of receiving or using the information.

When a child is placed in out of home care, the parenting responsibilities are usually shared by the care team, which is made up of a number of different people, including child protection practitioners. It is essential that members of a care team use and disclose information about a child in a way that ensures that good quality care is provided to the child and at the same time, the privacy of the child and family is protected. The Looking After Children practice framework for children in residential and home-based care (excluding kinship care and permanent care) facilitates the sharing of essential information amongst the child's care team. Refer to Advice No. 1403 'Information sharing in out of home care'- see Related content for a link.

When working with a family, it is preferable to gain the consent of the parents and of the child, when seeking information from a third party. However, information can be gathered from classes of people authorised under the CYFA in specific circumstances without consent from the child or family, including intake assessments and during an investigation. Refer to Advice numbers 1090 'Information sharing in Child Protection practice', 1203 'Gathering information from other sources at initial investigation' and 1192 'Conducting the first visit' - see Related content for links.

## ACSASS

Child Protection must consult with the Aboriginal Child Specialist Advice and Support Service (ACSASS) in respect of all reports, investigations and subsequent significant decisions across all phases of Child Protection practice where Aboriginal children are reported or subject to Child Protection intervention. Contact with a local Aboriginal community controlled organisation or other programs within VACCA does not replace the requirement to consult with ACSASS.

There are several mandatory standards regarding Aboriginal children and consultation with ACSASS. These can be found in Advice number 1059, 'Responding to Aboriginal children and young people', - see Related content for a link.

## Ways to collect information

Information may be elicited through a range of procedures or forums such as phone calls and visits to the family or case conferences, however the quality of that information can be maximised by the way practitioners present to and engage with children and families; and others, showing interest, curiosity and respect, and acknowledging existing strengths.

As well as cultural and social factors, engagement requires understanding of how trauma impacts on the child and family (refer to the Child development and trauma guide – see Related content for a link).

## Oral information

In the initial contact with the child and family, it is good practice to start slowly, actively listen and build rapport, whilst remaining forensically astute and carefully observing interactions and noting any inconsistencies in the information and explanations that are provided.

Practitioners need to 'start where the child is at' and be mindful that parents and carers may also be traumatised or fearful of Child Protection involvement when providing or responding to information. This will often be expressed in anger and the information may have to be repeated at a later date as the family is initially often in crisis and can experience a state of shock.

**Arrange for an interpreter if required**

Clarity about the child and family's language preferences is essential to gathering high quality information. Every effort should be made to enhance their participation. English may not be the best language for a child or family members to process complex information, or memories and feelings associated with traumatic events.

Cultural consultants and supports should be invited into the process if the family prefers this assistance.

Refer to Advice number 1523 'Use of interpreters'. For advice in relation to interviewing children and families refer to Advice number 1192, 'Conducting the first visit' - see Related content for a link.

**Written information****Read existing records**

Client files, both the electronic and paper, contain a rich history of the child and family as well as of Child Protection involvement. Reading files will inform practitioners on pattern and history, past and present relationships, services involved in the family and previous types of interventions and outcomes. It will also reduce the likelihood of repeating ineffective interventions and will identify previous actions that lead to successful outcomes for the child and family.

When it has been identified that someone else in the family (such as a sibling or parent) has a child protection history it is important for practitioners to obtain and read these related records or files to assist in the development of a comprehensive understanding of pattern and history.

It is expected that Child Protection practitioners will have a thorough knowledge of their allocated cases. This will include a detailed knowledge of the child's and family's electronic and paper files. It is the shared professional responsibility of the Child Protection practitioner and their supervisor to ensure that decisions are informed by the known history of the case as documented on the files.

**Written reports**

Written reports from other professionals can assist the Child Protection practitioner to clarify verbal information and can provide more detailed information, especially in relation to specialist assessments. Practitioners need to ensure that information contained within written reports is recorded in the client information system.

If written records are provided to the child or family, practitioners should consider whether support is required to assist with their understanding of, and reactions to, the information contained within the report.

**Observation**

Direct observation of the child and family provides practitioners with good insight into the nature of family roles and how they impact on the child.

Practitioners need to observe children and families within the home environment to find out about behaviour patterns and to carefully observe and record parent or carer-child interactions. These interactions should be observed over a period of time, if possible, to ensure accuracy and reliability of the information, whilst being mindful of the setting and circumstances.

Contact with the child and family can occur on a formal and informal basis, from supervised access visits to assisting the family with attending a medical appointment. Activities enhance engagement and can provide good opportunities to gather information in a more relaxed and non-threatening environment for the child and family.

**Case conferencing - including FGCs, FDMs, and other family meetings**

Formal and informal case conferences and family meetings can provide an opportunity for the child, family, and significant others to provide and be provided with critical information as an integral part of the information gathering process. Refer to Advice number 1296 'Family decision making' – see Related content for a link.



### Joint visits with the police

There are a number of circumstances in which Child Protection and Police may undertake joint visits with children and families. These circumstances include joint investigations, to ensure safety, or for the execution of a Children's Court search warrant. There are specific protocols, processes and procedures for gathering information during these visits. Refer to Advice No. 1184 'Joint visits with the police' - see Related content for a link.

### Presenting and recording information

#### Genograms and eco maps

Genograms and eco maps identify family members and connected supports and services, and also the strength and quality of relationships between family members and of connections between the family and the community. They are visual reminders to think and act systemically.

They can be effectively used at any stage and ideally will be developed early in the information gathering process. Genograms and eco maps are also powerful tools when exploring family history and dynamics with the family and can elicit more discussion with people who are more visually orientated and those with a history of trauma.

A genogram provides a visual representation of the child's current and extended family system, helping practitioners and families by:

- identifying intergenerational family patterns and roles
- providing a chronology of important family events
- providing a multigenerational context for exploring family problems and finding solutions.

Genograms are beneficial in identifying placement options within a family when a child is in need of alternative care and can also highlight gaps in knowledge about a family. The Child Protection practitioner should create a genogram during the initial investigation that is as complete as possible, including immediate and extended family members.

Eco maps are a pictorial representation of the child's social relationships within their family and social environment at a particular point in time. An eco map demonstrates the connections of the child and family to other people and systems and describes the strength, impact and quality of each connection. The map enables a consistent and structured process for gathering information and supports the engagement of the family and rapport building. It describes relationships, interests and activities of all the family members and assists with identifying supports and gaps in support.

Reviewing and updating the genogram and eco map should occur periodically during Child Protection involvement to ensure accuracy and relevance. For further information on how to use genograms and eco maps, please refer to Advice No. 1175 'Use of genograms in initial investigations' - see Related content for a link.

#### Chronologies

Chronologies are an effective way to pull together information that can demonstrate pattern and history. Chronologies can be used by Child Protection practitioners for different purposes such as court reports and case reviews. Helpful chronologies include:

- Development of the child
- Educational history
- Court appearances
- Child protection history – periods of involvement; key decisions
- Contact with service and support systems
- Medical history

- Placement history
- History of access

### Entering information on the client information system

Practitioners are required to record the information gathered about a child on the client information system in a manner that will:

- reduce the likelihood of duplication or inconsistency of the information recorded; and
- enhance accessibility by ensuring that information intended to be entered in a field in CRIS is not hidden within a document.

Any significant information relating to the child and family should be identified as such and analysed in relation to how the information impacts on the current assessment.

There are specific policy and legal requirements relating to case recording and maintenance of case records. Refer to Advice number 1094 'Case recording' - see Related content for a link.

### Maintaining information

Children's and families' situations will change overtime. Information recorded on CRIS, and assessment of the information, should reflect these changes.

Revision of information should be undertaken periodically to ensure accuracy and to identify any gaps. Practitioners need to be open to changing their initial views rather than interpreting new information in a way that supports a pre existing opinion of a child or family. Supervision is a key activity for revision and critical reflection.

### References

- Munro, E. 2005, 'What tools do we need to improve identification of child abuse?' *Child Abuse Review*, vol. 14, pp. 374-388.

### Considerations for good practice

For this Advice, there are no specific considerations for good practice.

### Contact for further procedural advice

- Supervisor
- Team Manager
- Practice Leader
- Child Protection Manager

### Related content and external links

**Note:** Advice, Protocols and Policy Documents directly related to this Advice are listed below. To access the full range of Protocols and Policy documents use the Protocol and Policy links on the Home Page.

#### Related Content:

1059 - Responding to Aboriginal children

1090 - Information sharing in Child Protection practice

1094 - Case recording

1154 - Receiving and processing reports

1175 - Use of genograms in initial investigations

1184 - Joint visits with the police  
1192 - Conducting the first visit  
1203 - Gathering information from other sources at initial investigation  
1282 - Planning in best interests case practice  
1296 - Family decision making  
1403 - Information sharing in out of home care  
1481 - Best interests case practice model  
1535 - Analysis and Assessment in best interests case practice  
1537 - Actions in best interests case practice  
1568 - Human rights and Child Protection  
1588 - Reviewing outcomes in best interests case practice  
Child development and trauma- specialist practice resource  
Confidentiality, privacy and information management section  
Protocol between Child Protection and Victoria Police [PDF, 402.6 KB]

#### External Links:

For this Advice, there are no specific external links.

#### Checklist of required standards

For this Advice, there are no required standards