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| --- | --- | --- | --- | --- | --- |
| **REVIEW LEGAL PLANNING MEETING MINUTES**  **(Including privileged legal advice)** | | | | | |
| **Date of Meeting** | |  | | | |
| **Name(s) of Child(ren)** | |  | | | |
| **Pre-proceedings start date (obtain from Legal):** | | | **Pre-proceedings end date (obtain from Legal):** | | |
|  | | |  | | |
| **1a.** | **Chair – attendees and titles (including Business Support)** | | | | |
|  | | | | | |
| **1b.** | **Chair - apologies** | | | | |
| N/A | | | | | |
| **2.** | **Social Worker / Team Manager – update / additional information since last meeting** | | | | |
|  | | | | | |
| **3.** | **Chair - review of actions from last meeting:** | | | | |
| **Actions (Business Support insert from last minutes):** | | | **Current position (Social Worker / Legal):** | | |
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| **4.** | **Legal advice in the light of the information shared and the proposed care plan (original or updated): Threshold and what evidence requirements remain outstanding** | | | | |
|  |  | | | | |
| **5.** | **Chair – Head of Service decision made at Review LPM** | | | | |
| **Outcome** | | | **Dates/Details** | | **Cross (X)** |
| **Continue pre-proceedings** | | | | |  |
| Date extended to (if required): | | |  | |
| Full reasons for extension: | | | Insert at paragraph 6 | |
| **End pre-proceedings** | | | | |  |
| At RPPM or by letter: | | |  | |
| Schedule of Expectations by: | | |  | |
| **Issue Care Proceedings** | | | | |  |
| Evidence to Legal by: | | |  | |
| **Actions agreed at Review LPM**  **(inserting/deleting rows)** | | | **By whom** | **By when** | |
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| **Chair – Head of Service approval of minutes** | | | | | |
| **Name:** | | | | | |
| **Date:** | | | | | |