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| **INITIAL LEGAL PLANNING MEETING MINUTES**  **(Including privileged legal advice)** | | | | |
| **Date of Meeting** | | |  | |
| **Name(s) of Child(ren)** | | |  | |
| **1a. Chair** - attendees and titles (including Business Support) | | | | |
| Shelley Caldwell (SC) – Head of Service, Family Support and Safeguarding and Chairperson | | | | |
| **1b. Chair** – apologies (or N/A) | | | | |
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| **1c. Chair** - confirmation of documents sent to attendees | | | | |
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| **1d. Chair** - confirmation whether or not parents and any others with PR are aware of today’s meeting | | | | |
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| **2.** | **Social Worker** – brief overview of LPM Request and any updating information | | | |
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| **3.** | **Team Manager** – comments further to LPM Request and Social Worker’s update | | | |
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| **4.** | **Chair to explore:** strengths and existing safety, safety plan, any changes made or can be made to mitigate risk factors, issues concerning capacity and understanding, suspected or identified learning difficulties, cultural differences and inequalities, whether an advocate or interpreter is required | | | |
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| **5.** | **Legal** – any questions to inform legal advice | | | |
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| **6.** | **Social Worker** – outline proposed care plan to include: should the children remain where they are, if not where should they live, newborn considerations, support and work to be offered to the family | | | |
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| **7.** | **Legal advice:** legal threshold, grounds for threshold, advised legal process, assessments and evidence required (including any queries or discussion following the legal advice being given) | | | |
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| **8.** | **Discussion following legal advice being given (if any)** | | | |
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| **9.** | **Chair – Decision:** | | | |
| **Outcome** | | | | **Insert X** |
| **No legal action** | | | |  |
| **Further evidence** | | RLPM date: \*\*\* | |  |
| **Pre-Proceedings** | | Timescale: 16 weeks maximum | |  |
| **Care Proceedings** | | Evidence to legal by: \*\*  Issue by: \*\* | |  |
| **10.** | **Chair** - if decision differs from legal advice, set out clear reasons for not following advice (or N/A) | | | |
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| **11.** | **Chair** - Confirm the care plan - with whom the child(ren) should live, including contact if relevant and/or any legal orders to be sought | | | |
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| **Actions, reports, disclosure & assessments** (amend as agreed, inserting/deleting rows) | | | **By whom** | **By when** |
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| **Chair – Head of Service confirm approval of minutes** |
| **Name:** |
| **Date:** |