**Child protection Conference Parental Feedback Form**

We would like to hear your views about the child protection conference process as we are always looking for ways to improve our service.

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| --- |
| CP Chair to complete this section |
| **Chair`s name** |  |
| **District Conference held in**  |  | **Date held** |  |
| **Type** |  | **Family name** |  |
| **Who completed this form?** * Mother
* Father
* Child
* Other Carer – please state
 |
| **1. Did the Social Worker share their report with you?** | * Yes
 | * No
 |
| **Initial Conference - 2 Working Days before meeting****Review Conference - 5 Working days before meeting**  | * Yes
 | * No
 |
| * Yes
 | * No
 |
| **2. Did you get copies of all the reports before the meeting?** | * Yes
 | * No
 |
| **3. Did the Chairperson see you before the meeting to explain what was going to happen and who would be present?****If not, why not?**  | * Yes
 | * N0
 |
|  |
| **4. Although you may not agree with some decisions that were made:** |
| **Do you feel you had the opportunity to give your views?****Do you feel you were listened to?****Was attending the Conference as worrying as you expected?** | * Yes
 | * No
 |
| * Yes
 | * No
 |
| * Yes
 | * No
 |
| **5. If you were worried about attending the Conference, did the Chairperson and Conference members help to make you less anxious?** | * Yes
 | * No
 |
| **6. Did the Conference help you understand what people are worried about?** | * Yes
 | * No
 |
| **7. Is the plan made at the meeting clear? And so you understand what changes need to be made for your child/children?** | * Yes
 | * No
 |
| **For Review Conferences :** |  |  |
| **8. Has the Child Protection Plan helped you make positive changes within your family?** | * Yes
 | * No
 |
| **What else would you like to tell us which might help us improve the experience of parents at a Child Protection Conference?** |