**WHAT IS A CASE DISCUSSION AND WHAT IS A CARE PLANNING MEETING?**

* There is a distinction between care planning meetings and case discussions.
* Conversations in supervision or held as a single agency are ***case discussions*** and cannot be viewed as Care Planning which ***must take a multi-agency approach***.
* A Care Planning Meeting is a ***multi-agency forum*** held between the range of services that surround and support a child and their family (within SEND these type of meetings may also be referred to as multi-disciplinary team or MDT meetings where a number of health professionals are involved or where there are significant health professionals, for example, a child with complex health needs or mental health needs. These meetings may be health or social care-led).
* Agencies that may be involved in a Care Planning Meeting include, Fostering and Adoption, YOT, the child's Guardian, school, housing, police, health visitor, probation, mental health services, drug and alcohol services, specialist health professional, amongst others.
* Prior to calling a multi-agency meeting (Care Planning Meeting), practitioners should have made an assessment of the child/young person’s needs and considered what their own agency/service can do to improve outcomes for them. They should also have considered whether specialist input from within their own agency/service could be used to support the child.
* The Social Worker is likely to have had a ***case discussion*** with their Practice Manager, prior to the multi-agency Care Planning Meeting, to agree the position from Children's Social Care
* The Multi-Agency Care Planning Meeting is arranged by the Social Worker and, usually, chaired by the Practice Manager. In complex cases the meeting may be chaired by the Team Manager or Senior Manager.
* To ensure Care Plans are reviewed and updated regularly, Care Planning Meetings should be held at intervals of approximately 4-6 weeks.
* Care Planning should take into account and consider the ***unique and individual knowledge and experience*** each service have in relation to the child and their family. In this way we build an holistic picture of what life is like for the child within that family (the lived experience of the child)
* This range of information should be used to develop a multi-agency plan to address the unmet needs of the child and family, drawing on the range of resources available across the agencies.
* Care Planning must have a ***child centered focus***, which ensures that practitioners actively seek and listen to the views, feelings and wishes of young people within their own working environment.
* Risk Sensible assessments should be ***"acturial"*** (a collective assessment by collating information from a range of sources). In line with this ***SMART Care Plans*** should be formed via multi-agency collaboration and facilitation.

Full details can be found in the Care Planning protocol- see Local Resources.