

An Information Sheet to Support the Implementation of the Victorian Family Violence Multi-Agency Risk Assessment and Management Framework (MARAM) and Information Sharing Schemes

Working collaboratively with children, young people and families in the context of the Information Sharing Schemes and MARAM

The Child Information Sharing Scheme (CISS), Family Violence Information Sharing Scheme (FVISS) and the Family Violence Multi Agency Risk Assessment Management (MARAM) Framework represent a significant cultural shift in information sharing practice to improve family violence risk assessment and management and to support child wellbeing and safety. The reforms are aimed at improving family violence risk assessment and management and to support child wellbeing and recognise child and family services and other prescribed or Framework organisations from allied service sectors as having responsibility for the wellbeing of children and young people.

This information sheet focuses on how to work collaboratively with children, young people and families. It highlights why it is so important to seek their views and wishes and includes techniques for engaging with children and young people when information needs to be shared about them.

Question:	Practice Considerations
<p>1. Why is it important to work collaboratively with children, young people and their families?</p>	<p>It is important to work collaboratively with children, young people and their families as children and young people affected by family violence are victim survivors in their own right; with unique experiences of family violence and its impacts. Each individual child and young person should have their family violence risk independently assessed at the brief, intermediate and comprehensive MARAM risk assessment stages. These risk assessments should then be considered alongside the risk being experienced by the protective parent/carer so that all the information collected about children, young people and their families can collectively inform any determination of the level of risk for each family member.</p> <p>Working collaboratively with clients means working in ways that enable their perspectives and wishes to be captured to guide subsequent decision making about their safety and wellbeing. Communicating clearly and openly with children, young people and families about information sharing, including the purpose and likely benefits of sharing, can promote trust and positive engagement with services, draw out additional considerations, and enable professionals to gain a holistic view of the child, young person and their family's circumstances and needs.</p> <p>Children and young people are often well placed to understand their needs and risks. Seeking their views and wishes about information sharing might influence the type of information shared and with whom the information is shared, or if it is appropriate to share the information at all. The more practitioners can work collaboratively with children and young people and sensitively seek their views and wishes in relation to information sharing, the more positive outcomes are likely to be. It is important to support the self-determination of children and young people who often struggle to have their voice heard. For example, children and young</p>

	<p>people affected by family violence often have knowledge and strategies about what keeps them safe.</p> <p>Working collaboratively with affected parents to be safe and access supportive services is an important part of helping children to be safe. Any family violence screening and identification requires a child lens to make sure that children and young people receive appropriate service support.</p> <p>Collaborative engagement with children, young people and families also requires a sound understanding of trauma-informed practice and intersectionality.</p>
<p>2. What does it mean to work collaboratively to seek the views and of children, young people and their families?</p>	<p>Whether an Information Sharing Entity (ISE) should seek the views of the child's relevant family members might depend on the nature of the relationship between the ISE and the child or young person. If an ISE works directly with a child or young person without parental participation, it might not be safe or reasonable for a family member to be involved. Alternatively, if parental participation is a key component of the service delivery (or if a service is primarily provided to adults), it might be more appropriate for the ISE to continue to involve parents.</p> <p>Where a child and their parents disagree about information sharing, ISEs should use their professional judgement to balance different points of view and take these perspectives into account when determining what would best promote the child's wellbeing or safety.</p> <p>The Information Sharing reforms require practitioners to seek the views of children if it is age- and stage- appropriate and where safe and reasonable to do so. Children and young people might have additional insight into the issues affecting their own health, wellbeing or safety and preferences in relation to how these issues are disclosed. Including their views and wishes about sharing information, can empower them to contribute to their own wellbeing and safety. It can also assist the information sharing entity to avoid unintended outcomes.</p> <p>Professionals should provide support for children and young people capable of expressing their views about information sharing to do so. This might include using different communication techniques (such as pictures or simple language) or providing additional support for younger people such as practitioners who specialise in working with children.</p> <p>Seeking the views of the child or family member each time information is shared under the CISS might also assist the professional to assess the dynamic wellbeing and safety needs of children and young people.</p> <p>Practitioners should apply an intersectional analysis to their client's particular circumstances. Applying an intersectional lens when assessing wellbeing or risk means understanding that a person might have experienced a range of structural inequalities, barriers and discrimination throughout their life. These experiences will impact on their experience of family violence, how they manage their risk and safety, and their access to risk management services and responses.</p> <p>When working with Aboriginal communities, it is also important to recognise the impact of current and historical child removal policies including family separation, and disconnection from culture and country, including the ongoing impact of institutionalised abuse and neglect suffered by many removed children that continues to impact on Aboriginal people, families and communities. Practitioners need to 'check in' on the cultural safety of the client and inquire if there are cultural</p>

	<p>preferences that need to be attended to. At point of intake, all clients, including children, should be asked if they identify as Aboriginal and, if so, should be offered the option of seeking support from an Aboriginal service.</p> <p>Families from culturally and linguistically diverse (CALD) backgrounds might also have faced discrimination and disadvantage in their country of origin or experiences of racism and discrimination in Australia and have reservations about engaging with authorities or services due to past experiences or current fears and misconceptions. Practitioners need to ‘check in’ on the cultural safety of CALD clients. Appropriately trained and appropriately trained bi-cultural workers could also be an option to work with CALD clients.</p> <p>Members of the LGBTIQ community, sometimes known as ‘rainbow families’ might also have experienced institutional discrimination, due to misunderstanding of common patterns of violence against LGBTIQ people, and how to respond/refer. They might also have experienced interpersonal abuse which has led to a distrust of the service system. It is important to recognise barriers to their help seeking. In Victoria, organisations are encouraged to get Rainbow Tick Accreditation.</p> <p>When engaging with children, young people and their family members with a disability, it is important to seek the appropriate expertise and support, including through referral or secondary consultations with organisations specialising in working with people with a disability. Professionals can be guided by a social model of disability, which recognises that disability is not simply a person’s condition but the result of disabling social structures, attitudes and environments. Professionals should have a general awareness of different types of disability and ask individuals with a disability about any support requirements or adjustments they need.</p> <p>Undertaking secondary consultations with professionals who have expertise in working with diverse communities can greatly strengthen collaborative engagement with clients.</p>
<p>3. When is it appropriate to talk about and seek consent or the views and wishes of children, young people and their families?</p>	<p>Professionals should inform the child or parent that information has been shared, unless doing so would place the child or their parent who is not a perpetrator at further risk if there is an experience of family violence. Keeping the client informed is part of best practice case management and helps to maximise client engagement. The child or parent must be supported with safety planning and other necessary services, whether they have agreed to information sharing or not.</p> <p>Generally, children, young people and their families are well placed to understand their needs and risks. Before requesting and disclosing information, ISEs should inform children, young people and their families of their obligation to share information and use their professional judgement to determine if it is safe, appropriate and reasonable to do so. These important conversations usually occur as part of the intake process. Practitioners need to talk about information sharing in a manner that will not lead a client to disengage.</p> <p>If it is not safe, reasonable or appropriate for you to engage directly with a child and seek their views and wishes, think about whether there is another professional in the child’s life who could seek their perspective and views.</p> <p>However, at all times the safety of the child is the number one priority – if a professional considers it would be inappropriate, unsafe or otherwise not in the best interests of the child to seek the views of the parent who is not a perpetrator, FVISS permits any person’s information to be shared without consent to assess or manage</p>

	<p>risk of family violence for the child. However, relevant safety planning for other family members that are not perpetrators must also be done.</p>
<p>4. How to have difficult conversations with children and young people and their families to seek their views and wishes about information sharing?</p>	<p>Using open-ended questions can help a practitioner see things from the perspective of a child, young person or family member. Being upfront and clear about the information sharing obligations can also assist with transparent and respectful engagement.</p> <p>Some examples of how to have a difficult conversation include:</p> <p><i>I'm concerned about your safety, and the safety and wellbeing of your children. I need to investigate further to make sure you and the children are safe. I want to do this in a way that makes clear what information I need to share, who I will share this with, and what the next steps are. Can we talk about this together and please advise me about any worries you may have, and I'll do my best to address these.</i></p> <p><i>We spoke about how your child is possibly not meeting the developmental milestones they should. I need to talk with some other practitioners about how we can best support you and your child. This means I need to share the information you've given me and that I have noticed. Please let me know what information you are most concerned about me sharing so we can discuss how I can do this respectfully and in a way that supports your safety and the safety and wellbeing of you and your child.</i></p> <p><i>Because I support children's wellbeing and development, I am obliged by law to share information when I am concerned about a child's wellbeing or safety. I need to share some information. Can we discuss this so you are clear about the reasons I am sharing information and what the next steps might be?</i></p>
<p>5. How to document conversations about consent or views and wishes when a request has been received, when making a request or when disclosing information voluntarily</p>	<p>When sharing information about any individual under CISS or FVISS, either voluntarily or in response to a request, an ISE must record:</p> <ul style="list-style-type: none"> • who requested the information, what information was requested, the date the request was made • what information was shared, who the information was shared with and the date the information was shared • a relevant family violence risk assessment and safety plan in respect of a victim survivor about whom the information relates, including if they are a child, and any other family members who are at risk of being subjected to family violence. <p>When sharing information about adult victim survivors and third parties ISEs must also record:</p> <ul style="list-style-type: none"> • if consent was provided, a record of consent whether written, verbal or implied • if information is shared without their consent: ... the reason why consent was not obtained (i.e. there was a serious threat or the information was to assess or manage risk for a child victim survivor) ... whether it sought and obtained the

views of the person and, if not, the reason why ... whether the individual was informed that their information was shared without their consent.

When sharing information about a child victim survivor, ISEs must also record:

- whether it sought and obtained the views of the child or their parent (who is not an alleged perpetrator or a perpetrator), and if not, the reason why
- whether the child victim survivor or their parent (who is not an alleged perpetrator or a perpetrator) was informed that the information was disclosed.

Respectful, non-discriminatory, culturally sensitive, accurate and sufficiently detailed information should always be recorded in case notes and written records. Quotes are very powerful in conveying what has happened in a meeting or a client interview and are useful in conveying a client's feelings or state of mind, especially those of a child or young person. They should also be accurately captured alongside a professional's conclusion or interpretation.

Note: Where a child is involved, no consent is required from anyone under the CISS or FVISS, however practitioners should seek and take into account the views and wishes of children and young people if reasonable and safe to do so.

Remember:

- Working collaboratively with children, young people and their families means working with them, not for them.
- Communicating clearly and openly about information sharing builds trust and strengthens collaboration.
- Applying an intersectional lens – consider a person's whole, multi-layered identity and life experience, and one's own bias to be able to respond safely and appropriately in practice.
- Secondary consultations can support better engagement with children and young people and with families from diverse backgrounds
- Documenting conversations about consent or views and wishes is an important element of record keeping requirements.

For more information about the Information Sharing Reforms and MARAM, along with training opportunities go to: www.vic.gov.au/information-sharing-schemes-and-the-maram-framework