



Tools, processes and practice guidance Decision making Practice Paper

1. Introduction

This practice paper explores complex decision making in a child protection context. It supports the Department for Child Protection (DCP) practitioners to understand the importance of decision making processes being:

- child centred
- underpinned by high quality and holistic assessment
- consistent with legislation, departmental policy and practice guidance
- collaborative and family led (as appropriate)
- procedurally fair.

Decisions must be made in consideration of the children and young person's circumstance.

In this practice paper, the term 'DCP practitioners' is used to describe all DCP staff who have responsibility for or are involved in decision making in relation to children and young people, their families and carers.

This practice paper must be read in conjunction with the [DCP Practice Principles: The six pillars of our practice](#) and the [DCP Assessment framework](#).

2. Decision making in child protection practice

At various points throughout a case, DCP practitioners are required to make decisions about children and young people. Decision making in child protection practice is often challenging and complex and must be underpinned by high quality and holistic assessment processes. DCP practitioners are required to make decisions about a wide range of issues. Providing specific guidance that addresses every decision faced by practitioners can be difficult. However, all decisions must carefully consider the child or young person's unique needs and circumstances and must be informed by (as appropriate):

- [Children and Young People \(Safety\) Act 2017](#) (CYPS Act)
- [DCP Practice Principles: The six pillars of our practice](#)
- [Aboriginal and Torres Strait Islander Child Placement Principle](#)
- [Culturally and linguistically diverse child placement Policy](#)
- [Family Led Decision Making for Aboriginal families Framework](#)
- [DCP Assessment Framework](#) including correctly applied Structured Decision Making tools (including the [Screening and Response Priority Assessment](#), [Safety Assessment](#), [Initial Risk Assessment for abuse and neglect](#), [Risk Reassessment](#) and [Reunification Assessment tools](#)).

Consistent with the 'Accountability' element of the [DCP Practice Approach](#), decisions must be evidence based, defensible and the best option in the circumstances. Consultation with relevant DCP and other professionals





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supports optimal decision making. It is important to note that assessment is a continuous process and new information may become available that affects case direction and associated decisions. DCP practitioners must ensure decision making reflects the current circumstances and assessment of the case.

All decisions must be made in a timely manner as per section 10(1)(a) of the [CYPs Act](#) and informed by the Assessment framework. Timely decision making and concurrent planning is particularly relevant to reunification cases and DCP practitioners should refer to the [SDM Family Reunification Assessment Policy and Procedures Manual](#) for guidance regarding decision making in reunification.

3. Quality assessment and collaborative decision making

The Department has legislative obligations set out in section 8(1)(a) and 10(1)(b) of the [CYPs Act](#) which states children and young people must be heard and have their views considered. The DCP Practice Principle 'Child centred' also supports children and young people's participation in decision making that is about them. Depending on the individual circumstances, it may be appropriate for the child or young person to be present during decision making processes. Where this is not appropriate, DCP practitioners must ensure the child or young person's views are sought and given due weight. The [Supporting the participation of children and young people in decision making Practice Paper](#) outlines how to best support children and young people to be heard and participate in decision making.

Additionally, section 13 of the [CYPs Act](#) prescribes that the Guardian for Children and Young People must prepare and maintain a Charter of Rights for Children and Young People in Care. A copy of the Charter should also be provided to the child or young person, where developmentally appropriate to do so. The Charter also acknowledges the right of children and young people to be listened to and have a say in decisions that affect them. For more information about supporting children and young people to understand their rights, see the [Support the child or young person to understand their rights](#) step in the Supporting children and young people in care chapter of the Manual of Practice and the [Charter of Rights for Children and Young People in Care](#).

The Aboriginal and Torres Strait Islander Child Placement Principle aims to recognise and protect the rights of Aboriginal and Torres Strait Islander infants, children and young people, their families and communities in child protection matters. The Aboriginal and Torres Strait Islander Child Placement Principle Practice Paper provides practitioners with guidance about best practice for child protection practitioners and departmental policy which may promote active efforts beyond what is required by the [CYPs Act](#). For further information regarding applying the Aboriginal and Torres Strait Islander Child Placement Principle, refer to the [Aboriginal and Torres Strait Islander Child Placement Principle](#) Practice Paper. When making decisions for Aboriginal and Torres Strait Islander infants, children and young people, practitioners must ensure the Aboriginal and Torres Strait Islander Child Placement Principle (section 12 of the [CYPs Act](#)) is applied. The participation of family members and other relevant people is a critical element of the Aboriginal and Torres Strait Islander Child Placement Principle. Family Led Decision Making (FLDM) for Aboriginal families also supports a rights based approach. For more information about strategies to enable FLDM across all types of child protection interventions and decision making, refer to [Family Led Decision Making for Aboriginal families Framework](#).

Wherever possible and in addition to considering the views of the child or young person, it is important to consider the views of the members of the child or young person's care team, including their family and carers. Consideration should be given to involving the child or young person's carer (where appropriate) in consultations where significant decisions are being made. We know that children and young people





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experience better outcomes across their life domains when they are safely cared for within their family and community and when family are able to actively participate in the decisions that affect them. Protecting children and young people requires a highly collaborative approach and working in partnership with children and young people, families and carers is essential if we are to achieve lasting change that ensures the safety of children and young people. This is consistent with family led decision making and the DCP Practice Principles ‘Strengthening families’, ‘Supporting carers’ and ‘Participation and collaboration’. DCP practitioners may also be required to prepare for decision making by accessing information from agencies who hold information about the child, young person or family and ensuring this information is shared with those involved in the decision making in accordance with sections 152 and 164 of the [CYPS Act](#). Such information may be a verbal update or a written report depending on the circumstances of the case.

There may be occasions where DCP practitioners are required to make decisions in accordance with the [CYPS Act](#) where other parties are not in agreement (for example, decisions about removal). Collaborative decision making facilitates the consideration of comprehensive information about the different aspects of the child or young person’s life to inform the best decision. Refer to the [DCP Assessment framework](#) for further information about assessment in the context of children and young people’s unique needs. It is important that people understand the limits to collaborative decision making and their relevant rights to review decisions.

Decision making must consider all relevant information to support a well-informed case conceptualisation. This may involve children and young people, family members, carers or professionals participating in the decision making process. The involvement of family members in the care team and decision making promotes family led decision making. Decision making should be shared or delegated where this is appropriate. This could include Family Group Conferencing. Refer to the [Refer for a family group conference](#) key step in the Ongoing intervention chapter of the Manual of Practice for further information.

For further information about the decisions that may be made by carers about the child or young person in their care, refer to [Who Can Say OK?](#). In addition, section 76 of the [CYPS Act](#) provides that the Chief Executive may by instrument in writing delegate additional powers to an approved carer to enable them to make certain decisions about the child or young person. An instrument of delegation may provide for a carer to take on greater decision making responsibility in a range of areas, including – education, health and travel. For further guidance regarding delegating additional decision making powers to an approved carer, refer to [Work in partnership to make decisions about the child or young person key](#) step in the Supporting children and young people in care chapter of the Manual of Practice.

In addition to the members of a child or young person’s care team, there may be occasions where consultation with a practice or cultural expert is required to support assessment and decision making processes. Depending on the needs of the child or young person, consultation may be pursued with any of the following DCP practice experts:

- Principal Aboriginal Consultants and Aboriginal Lead Practitioner
- DCP Multicultural Services
- Practice leaders and Lead Practitioner
- Chief Practitioner
- DCP Psychological Services
- DCP Disability and Development Program
- High Risk Infant Workers





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For more information regarding consultation, refer to the [Practice and cultural consultation Practice Paper](#).

4. Ensuring procedural fairness and providing information about review or complaint options

It is critical that DCP practitioners support procedural fairness by:

- involving and consulting people about a decision that affects them
- informing those people of the proposed decision
- considering any additional information provided by them before finalising and communicating the final decision.

People aggrieved by a decision should be informed by the DCP practitioner of their rights to seek a review of the decision or to make a complaint as necessary. Refer to the [Complaints and Feedback Management Procedure](#) for steps to manage complaints and feedback, [Respond to grievances and complaints](#) key step in the Raising and responding to care concerns chapter of the Manual of Practice and the [Work in partnership to make decisions about the child or young person](#) in the Supporting children and young people in care chapter of the Manual of Practice for further information.

All decisions made under Chapter 7 of the [CYPs Act](#) (excluding Part 4 of that Chapter being decisions about contact arrangements which is reviewed by the Contact Arrangement Review Panel (CARP)) and decisions made under section 25A of the [Births Deaths and Marriages Registration Act 1996](#) are reviewable decisions and can be subject to an Internal Review. For further information regarding Internal Reviews, refer to the [Internal Review Procedure](#). Decisions can also be reviewed by external oversight bodies such as the South Australian Civil and Administrative Tribunal (SACAT), the Ombudsman or the Commissioner for Aboriginal Children and Young People. This highlights the importance of decisions being transparent and rationales being clearly articulated and recorded in C3MS.

5. Recording decisions

DCP practitioners must ensure that decisions are recorded appropriately using a Consult or Decision Record note in C3MS. Refer to the [Consult or Decision Record Procedure](#) for further guidance.

6. Reflective practice prompts

DCP practitioners are supported to develop their skills when they engage in reflective practice. DCP practitioners are encouraged to seek feedback about their performance in decision making and to reflect on and discuss this feedback in supervision.

The following reflective practice activity is offered to encourage reflective practice among DCP practitioners.

Think about one of your cases where a significant decision was made and consider:

- How were the views of the child or young person sought and considered in the decision making process? How else could this have been done?
- How were care team members involved in the decision making process? How could they have been better involved?





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- How did you explain the reasons for the decision to the child or young person? How effective was this to ensure the child or young person understood the decision?
- How did you explain the rationale for the decision to others (families, carers or other agencies)?
- How was the Aboriginal and Torres Strait Islander Child Placement Principle applied to the decision made for Aboriginal infants, children and young people? Was this decision family led?
- Were the people affected by the decision provided with procedural fairness? Were they informed of the options for review or to submit a complaint if they were dissatisfied with the outcome?
- Knowing what you know about the decision now, would you make the same decision again? If not, what would you do differently?

Document control

Reference No./ File No.			
Document Owner		Lead Writer (position)	
Directorate/Unit: Office of Professional Practice		Practice Leader, Office of Professional Practice	
Accountable Director: Chief Practitioner			
Commencement date	11 June 2025	Review date	6 June 2028
Risk rating Risk Assessment Matrix	Consequence Rating	Likelihood	Risk Rating
	Minor	Unlikely	Low

REVISION RECORD		
Approval Date	Version	Revision description
5 June 2020	1.0	Final
19 February 2021	1.1	Minor revisions to update hyperlinks
21 February 2022	1.2	Minor revisions to include Ombudsman recommendation
28 May 2024	1.3	Merged content from Consult and Decision Record Procedure regarding decision making, reviewed content and minor revisions and removed Reflective Practice Bubble
6 June 2025	2.0	Reviewed as per policy review cycle and minor amendments to language to ensure accuracy and ease of reading.

