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Senate Standing Committee on Community Affairs
References Committee Secretariat
PO Box 6100
Parliament House
CANBERRA ACT 2600

Dear Ms Radcliffe

**Re: Senate Standing Committee on Community Affairs, Inquiry into
Out of Home Care.**

I refer to your correspondence dated 29 May 2015, inviting the South Australian Department for Education and Child Development (DECD) to make a non-publication request, if applicable, in respect of South Australia's submission to the Committee's inquiry into Out of Home Care.

I advise that DECD has no objections to the publication of this response including the attachments.

Yours sincerely

Tony Harrison
CHIEF EXECUTIVE

12 June 2015



CE2015/01945

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Dear Ms Radcliffe

I refer to your correspondence dated 30 April 2015, inviting the South Australian Department for Education and Child Development (DECD) to provide a response to questions for state and territory statutory child protection departments.

DECD may wish to seek non-publication directions in relation to some or all of this response and respectfully requests the opportunity to be heard in relation to this if the Senate Standing Committee intends publishing any of the material.

Please find enclosed DECD response to the questions provided.

Yours sincerely

Tony Harrison
CHIEF EXECUTIVE

12 May 2015

DEPARTMENT FOR EDUCATION AND CHILD DEVELOPMENT
FAMILIES SA

**SENATE STANDING COMMITTEE FOR COMMUNITY AFFAIRS
REFERENCES COMMITTEE
INQUIRY INTO OUT OF HOME CARE**



**Government
of South Australia**

Department for Education
and Child Development

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Document control

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1. PURPOSE

The Senate Standing Committee on Community Affairs (the Committee) has written to the South Australian Department of Education and Child Development, Chief Executive, Mr Tony Harrison, seeking responses to thirteen questions relating to their inquiry into Out Of Home Care (OOHC), **Attachment 2.1**. This document provides the response to those questions.

2. TERMS OF REFERENCE

On 17 July 2014, the Senate referred OOHC matters to the Community Affairs References Committee for inquiry and report. The terms of reference for the OOHC inquiry include:

- a) drivers of the increase in the number of children placed in out of home care, types of care that are increasing and demographics of the children in care;
- b) the outcomes for children in out of home care (including kinship care, foster care and residential care) versus staying in the home;
- c) current models for out of home care, including kinship care, foster care and residential care;
- d) current cost of Australia's approach to care and protection;
- e) consistency of approach to out of home care around Australia;
- f) what are the supports available for relative/kinship care, foster care and residential care;
- g) best practice in out of home care in Australia and internationally;
- h) consultation with individuals, families and communities affected by removal of children from the home;
- i) extent of children in out of home care remaining connected to their family of origin; and
- j) best practice solutions for supporting children in vulnerable family situations including early intervention.

3. INTRODUCTION

The causes of child abuse and neglect are complex and are affected by a wide range of social determinants. Addressing these complex and diverse causes is everyone's business. This means that the care and protection of children in our society requires action by Governments, community, families and individuals.

The South Australian child protection system is oriented towards those children and young people who are at significant risk of harm or where their families are unable or unwilling to protect them. Families SA is the statutory child protection authority within the Department for Education and Child Development. The agency is co-located alongside the state's public education and early childhood development services, as well as some of the state's early childhood health services. This positioning is unique in Australia and provides unparalleled opportunities to strengthen families and safeguard children.

The recent public hearings of the Commonwealth Royal Commission into Institutional Responses to Child Sexual Abuse, Case Study 24, demonstrated the variation in jurisdictional approaches to OOHC.

Jurisdictions agree on the national importance of a high quality foster care system in Australia, including the arrangements in place to support:

- foster carers; and
- the complex needs of children and young people in foster care who have suffered significant trauma or abuse.

Government has a vital leadership role in protecting the state's most vulnerable children from abuse and neglect. The community reasonably expects Government to act on its behalf where community and family networks are not keeping children safe.

A proactive system involves having universal supports available for all families (for example, through health and education) with more intensive prevention interventions provided to those families identified early on as needing additional assistance. This proactive goal has set the direction for numerous State Government reforms over the past decade, including the current Department for Education and Child Development (DECD), Families SA, Redesign Programme, and underpins the Government's vision for the care and protection of children.

4. RESPONSES TO QUESTIONS

Every effort has been made to comply with this request. However, due to limitations in the Department's data management systems and the short time frames, a detailed response to all questions has not been possible.

4.1. EXPENDITURE BY TYPE OF CARE

4.1.1 For 2013/14, what was the total expenditure on out-of-home care services?

4.1.2 What proportion of expenditure was spent on:

- foster care;
- relative/kinship care;
- residential care; and
- other types of care?

4.1.3 What was the expenditure per child for:

- foster care;
- relative/kinship care;
- residential care; and
- other types of care?

RESPONSE

4.1.1

Total Expenditure on out of home care was \$144.172 million comprising expenditure on Non-Government (NGO) contracted services \$67.101 million and expenditure, including subsidies and commercial care, on Families SA delivered services was \$77.071 million.

4.1.2

Families SA expended:

- \$17.582 million, including subsidies, on foster care;
- \$18.214 million, including subsidies on relative/kinship care;
- \$38.765 million, including commercial care on residential care; and
- \$2.510 million on other types of care.

Table 1 summarises the value of NGO contracted services:

Table 1.

Year	Foster Care & Respite Services (includes Specialist Foster Care) (\$'000)	Residential Care Services (Includes Specialised Residential Care & Independent Living) (\$'000)	Family Support Services (includes Intensive & Non-Intensive Services) (\$'000)	Support Services (Includes Advocacy) (\$'000)	Total (\$'000)
2013/14	27,009.2	27,465.03	10,686.0	1,940.7	67,100.9

4.1.3

Information is not available on the cost per child for each type of care.

4.2 ALLOWANCES FOR CARERS

4.2.1 What are the available annual care allowances/reimbursements for:

- relative/kinship carers;
- foster carers; and
- non-statutory informal carers?

4.2.2 What are the differences in care allowances/reimbursements between general, intensive and complex levels (or other levels as applicable)?

RESPONSE

Foster and Kinship Carers are paid a range of allowances, including:

- Special Needs Loadings based on the assessed needs of the child;
- start payments at the commencement of the placement;
- educational grants based on the age profile of the child or young person;
- an Activity Grant,
- Remote Areas Loading for carers in remote locations
- Refugee Loading for carers with refugees.

Special Needs Loadings compensate carers for extra expenses associated with caring for a child or young person with special needs. The loading varies depending on the child's level of special need, the level of which is determined by the child's case worker.. Special Needs Loadings can range from 25% through to 300%.

Annual care allowances/reimbursements for non-statutory informal carers are not paid in this State.

4.3 ABORIGINAL AND TORRES STRAIT ISLANDER (ATSI) CHILDREN

- 4.3.1 In 2013/14, what proportion of Aboriginal and Torres Strait Islander children were placed with Aboriginal and Torres Strait Islander carers, consistent with the Aboriginal Child Placement Principle?
- 4.3.2 What proportion of departmental out-of-home care staff are Aboriginal or Torres Strait Islander?
- 4.3.3 What role do Aboriginal organisations play in the placement and supervision of Aboriginal and Torres Strait Islander children in out-of-home care? How does the relevant department engage with Aboriginal organisations?
- 4.3.4 What programs currently operate that aim to specifically reduce the number of Aboriginal and Torres Strait Islander children in out-of-home care? How is the effectiveness of such programs measured?

RESPONSE

4.3.1

As at 30 June 2014, 67.2% (this includes placement with kinship carers and Aboriginal foster carers) of Aboriginal and Torres Strait Islander children were placed with Aboriginal and Torres Strait Islander carers.

4.3.2

It should be noted that in compiling these figures we are reliant on self-identification to collect this data.

As at 1 May 2015, 100 Families SA staff identified as Aboriginal or Torres Strait Islander. Eighteen of those staff provide direct OOHC.

4.3.3

In South Australia the *Children's Protection Act 1993* (the Act) provides the legal framework required by Families SA when scoping placements for Aboriginal and Torres Strait Islander children.

Section 5 of the Act requires that:

no decision or order may be made under the Act as to where or with whom an Aboriginal or Torres Strait Islander child will reside unless consultation has first been had with a recognised Aboriginal or Torres Strait Islander organisation, this includes consultation for relative or kinship care placement.

These recognised organisations are declared and published in the Government Gazette and are commonly referred to as Gazetted organisations.

The Gazetted Organisation plays an advisory or consultancy role in relation to both the Youth Court and any other person who has to make a decision about an Aboriginal or Torres Strait Islander child or young person. It ensures that issues relating to Aboriginal or Torres Strait Islander children and their families are addressed in a culturally appropriate manner.

Section 5(1) of the Act prohibits those administering the Act, including the Youth Court itself, from making decisions regarding an Aboriginal or Torres Strait Islander child's residence unless consultation with the appropriate recognised organisation has taken place.

Gazetted Organisations only play a role in the placement of Aboriginal or Torres Strait Islander children they do not have a role in the ongoing supervision. Supervision of Aboriginal or Torres Strait Islander children in out-of-home care is the responsibility of Families SA.

Non-government organisations (including Gazetted Organisations acting in a different role) are funded to provide ongoing support to Foster Carers.

The Department maintains close working relationships with all organisations working in the child protection system through a variety of formal and informal meetings to discuss performance, funding requirements, emerging issues and opportunities to better meet the needs of Aboriginal or Torres Strait Islander children, young people, their families and their Communities.

4.3.4

Families SA offices have been restructured to better meet the needs of children, families and carers. This is based on the foundation that safety and wellbeing of the child is the first and foremost consideration at all times. A new case management practice model, Solution Based Casework (known as SBC), is also being implemented. SBC strengthens casework practice by promoting greater engagement with families and carers. By using SBC, workers will be able to help families focus on patterns and actions that create threats to child safety and keep families accountable for making the changes needed to create safety and reduce risk to the child. The model is currently being adapted to work with Aboriginal and Torres Strait Islander families.

Effectiveness of the model will be measured by rate per 1,000 of children in out of home care.

In addition, in 2005 Families SA implemented the Kanggarendi program in the northern metropolitan suburbs. The Kanggarendi model is an Aboriginal and Torres Strait Islander family targeted early intervention initiative, with a key focus of reducing the aggregate demand for emergency and statutory services by Aboriginal and Torres Strait Islanders children and their families.

Using a proven effective model of practice, the teams aim to enhance the safety and wellbeing of children by strengthening vulnerable Aboriginal and Torres Strait Islander families where there are child safety and wellbeing concerns. These early intervention teams provide intensive assistance to Aboriginal and Torres Strait Islander families in the Adelaide metropolitan area who require various levels of support.

This practice model also provides additional assistance for Families SA staff to appropriately engage with these families by developing and refining existing models of service delivery to accommodate the needs of Aboriginal and Torres Strait Islander families and children.

The success of the model has seen another Kanggarendi team established in the southern metropolitan area.

This model of practice is also under consideration for adaptation and implementation in Families SA country locations.

4.4 NON-GOVERNMENT ORGANISATIONS

4.4.1 What is the role of non-government bodies (if any) in the delivery of out-of-home care services?

4.4.2 At 30 June 2014, how many non-government organisations were responsible for delivering:

- relative/kinship care;
- foster care; and
- residential care?

4.4.3 Where non-government organisations are responsible for delivering out-of-home care services, what is the role of government in administering:

- relative/kinship care;
- foster care; and
- residential care?

RESPONSE

4.4.1

Families SA provides grant funding to the not for profit, non-government sector, to deliver a range of services including, foster care, respite, residential care, family support services and advocacy services.

Families SA continues to increase the capacity of the OOHC sector, through the introduction of placement targets in all general foster care agreements, as well as a placement growth funding clause to stimulate growth.

Currently in South Australia, Out of Home Care includes:

Foster Care:

Family based voluntary carers provided and supported by NGO's.

Kinship / Relative Care:

Relative and kinship carers are people who care for children who are either related to them (blood relations) or who have a relationship with the child, their family or community.

In South Australia, relative / kinship care is managed and supported by Families SA.

Residential Care:

This falls into three categories:

Families SA Residential Care - relates to residential care facilities that are operated by Families SA staff.

NGO Residential Care - relates to residential care delivered by grant funded NGOs. Contracted NGOs must be licensed and on the Families SA Provider Panel. NGOs and DECD have a Service Agreement that outlines a number of factors including the model of care, staffing and training requirements and key performance outcomes.

NGO residential carers are responsible for supporting children and young person in areas such as engaging in education, community based activities and developing independent living skills. Commercial Care - Families SA holds a contract with each provider that requires them to appropriately care for children and young people in short term commercial care on a fee for service arrangement.

Families SA purchase a direct care service that includes supervision to ensure that the child or young person remains safe until a longer term option such as family based care or residential care becomes available.

4.4.2

In 2013-14, twenty three (23) NGOs received grant funding to deliver OOHC and FSS services (Table 2).

Table 2

1. Aboriginal Family Support Services Incorporated	2. Lutheran Community Care SA
3. ac.care	4. Novita Children's Services-(as from 1/07/2014)
5. Anglicare SA Incorporated	6. Relationships Australia (SA) Incorporated
7. Baptist Care (SA) Incorporated	8. Service to Youth Council
9. Centacare Catholic Family Services	10. The Australian Centre for Social Innovation
11. Centacare Catholic Family Services Country SA	12. The Salvation Army
13. Community Accommodation and Respite Agency	14. Time for Kids Incorporated
15. CREATE Foundation Limited	16. Uniting Care Wesley Country SA
17. Junction Australia	18. Uniting Communities
19. Key Assets SA Limited	20. West Coast Youth & Community Support Inc - (ended 29/11/2013)
21. Leveda Inc	22. Intellectual Disability Services Council Inc (MOU with DCSI)
23. Life Without Barriers	

4.4.3

All Families SA grant funded programs for OOHC, including foster care and residential care, are administered through Service Agreements (**Attachment 2.2**), which set out the minimum statutory and policy requirements of service delivery.

All contracts require the Service Provider to provide Quarterly Service Data Reports in a prescribed format..

The Service Provider must participate in a formal service monitoring process that occurs each quarter. This may include: discussions on services, outcomes, key performance indicators, outputs, data, target group, use of allocated funds, quality, financial viability of the Service Provider, management and organisation structure relevant to the Service Provider, Service Provider's Staff, linkages and partnerships, management of care concerns, implementation issues and other relevant issues.

As required, the Service Provider must participate in the evaluation of the Service,.

The Standards of Alternative Care in South Australia (2008) (**Attachment 2.3**) aim to promote consistency and quality of care for children and young people across the OOHC sector and are applicable to all government and non-government agencies providing family based and residential care and their caregivers. These standards set a benchmark for quality care provision and ensure consistency of outcomes for safe and secure living of children in OOHC. They include the core elements of governance, quality improvement and planning and standards for recruitment. This includes safety screening and assessment of carers and the care environment, registration and approval, support, training of carers and their annual review. All case management service remains with Families SA.

4.5 ASSESSMENT AND TRAINING FOR CARERS

4.5.1 What is the recruitment and assessment process for:

- relative/kinship carers;
- foster carers; and
- residential care workers?

4.5.2 What training is required (by legislation or policy) to be undertaken by:

- relative/kinship carers;
- foster carers; and
- residential care workers?

RESPONSE

All contracted OOHC services are required to ensure all their staff, carers and carer household members undergo child-related employment screening and background checks.

Child-related employment screening is conducted by the Department for Communities and Social Inclusion (DCSI) and incorporates the following:

- National Criminal Record History Check, provided by the Commonwealth CrimTrac Agency
- information from South Australian government databases such as child protection information
- publicly available information sourced from professional registration bodies relating to persons disciplined or precluded from working with children or vulnerable people
- information from South Australian police, courts, prosecuting authorities including information about charges for offences alleged to have been committed (regardless of the outcome of those charges), and
- expanded criminal history information obtained from other jurisdictions, including spent convictions, pending charges and non-conviction charges and, importantly, circumstances information around charges or convictions.

In addition, background checks are conducted by non-government services on carers (inclusive of foster carers, kinship carers and NGO residential carers) and staff as part of their standard employment and recruitment processes i.e. this is inclusive of referee and previous employment checks.

Carers and staff cannot work with children or young people unless they have met all the screening requirements. Screening is monitored by the NGO's and the DECD. NGOs are required to provide DECD with copies of the screening clearance letters for staff, carers and carer household members. Foster Carers are also subject to annual reviews to ensure that carers have current screening clearances.

In accordance with the DECD *Screening and Suitability – Child Safety Policy* (**Attachment 2.4**) all carer household members over the age of 18 years are required to have a DCSI child-related employment screening check.

Assessment / Recruitment of carers

Recruitment and assessment of carers within the NGO sector is undertaken by the respective NGO.

Foster care assessment recommendations are quality assured and recorded by the Carer Registration Team in DECD, in accordance with the principles set out in section 42 of the *Family and Community Services Act 1972* ("FaCS Act") and using the Step-by-Step Competencies¹ and Standards of Alternative Care in South Australia (2008) (**Attachment 2.3**).

Assessment of NGO residential carers (staff) is conducted by each NGO. DECD ensures, in partnership with the NGO, that all staff have the required Child Related Screening as referred to earlier.

Kinship carers are assessed by the Families SA Placement Services Unit using a psycho-social assessment which assesses the carers' motivation and capacity to care for a specific child who, in the main has already been placed with the relative. The psycho-social assessment process complies with the Standards of Alternative Care in South Australia (**Attachment 2.3**).

Assessment / Recruitment of Families SA residential care staff

To become a Child and Youth Worker (OPS3) and Child and Youth Support Worker (OPS2) successful applicants are required to undergo a comprehensive screening process which includes a DCSI Child-Related Criminal History Check (prior to being employed and every three years thereafter), psychometric testing and a pre-employment medical assessment.

As part of the recruitment process potential applicants are invited to attend information sessions that are held across metropolitan Adelaide and Country locations (this was re-implemented in August 2014). These information sessions are designed to assist the applicant/s in the completion of their application, whilst also offering them the opportunity to ask questions or seek clarification from representatives from the Families SA Residential Care.

Applicants are required to submit their application via an on-line recruitment tool. In submitting their application, applicants have the opportunity to demonstrate their skills, knowledge and experience by addressing the Behavioural Based Questions (300 word limit), which are based on the Capabilities listed in the Role Description. A number of other screening questions are also asked through the application process.

A Selection Panel is convened to shortlist suitable applicants to progress to the next stage of the selection process. The Selection Panel is comprised of a:

- Chairperson, a Senior Manager from Residential Care
- Peer Panellist from Residential Care
- Workforce Co-ordinator, and
- Organisational Psychologist.

Those applicants who are successful in being shortlisted to the next stage of the selection process are invited to attend a suitability assessment. The purpose of the suitability assessment is to determine an applicant's suitability to work in the role based upon an assessment of their psychological profile. The tool used is SafeSelect, provided by the Australian Institute of Forensic Psychology Pty Ltd ABN 14 108 824 586.

Once all suitability assessment reports are received, the selection panel reconvenes to consider the reports and shortlist suitable applicants for the next stage of the selection process.

Those applicants successful in being shortlisted from the suitability assessment are invited to an interview where the selection panel ask a series of questions which will be directly

¹ This can be accessed via a web link that is password protected.

relevant to the role/s and responses previously given by the applicant as part of their initial application and as part of their Psychometric Test responses.

Applicants who are invited to an interview must provide the details of two referees, one being a previous or current line manager/supervisor. Applicants are also required to bring with them to interview a completed DCSI Child-Related Employment Screening form sent to them as part of the invitation to interview.

At the conclusion of the interview process those applicants considered by the Selection Panel to have met the essential minimum requirement of the role/s are invited to attend a Pre-Employment Medical. At this stage the applicants DCSI Child Related Employment Screening form is forwarded to the DCSI Screening Unit for processing.

A panel report is written, which includes the Organisational Psychologist's assessment. This is sent to the delegate (Deputy Chief Executive, Office for Child Safety) for approval. Once the panel report is formally approved successful applicants are offered employment subject to satisfactory DCSI Child Related Employment Screening and satisfactory medical assessment. Each applicant must also have a current Applied First Aid Certificate.

Successful applicants will be supported by professional development and training. This includes an initial six week full-time block of training and mentoring, both in classes and the workplace, presented by qualified and professional facilitators and supported by experienced staff in the workplace.

As part of the six week training, some accredited training modules from Certificate IV in Child Youth and Family Intervention will be delivered. Effective 19 January 2015, as a condition of their employment as a Child and Youth Worker and Child and Youth Support Worker new appointees will be required to complete the remaining modules over the coming 12 month period as a condition to their employment.

4.5.2

The Schedules to Service Agreements with Family Based Foster Care Services (**Attachment 2.2**) and Non-Family Based Emergency Care Services (Residential Care) (**Attachment 2.5**) set out compulsory training that Service Providers must provide to carers and staff.

Residential carers

The Schedule to the Residential Care Agreement provides that:

'The Service Provider will provide competency based training to their staff on various topics, including but not limited to:

- *induction / orientation to the role*
- *child development*
- *behaviour management, including adolescent behaviour (**addresses identifying signs of sexual abuse**)*
- *grief, loss and attachment*
- *mandated notification – Child Safe Environments: reporting abuse and neglect (**addresses identifying signs of sexual abuse**)*
- *dealing with aggressive and potentially violent behaviour*
- *the effects of abuse and neglect on Children and Young People(**addresses identifying signs of sexual abuse**)*

- *Where the Service Provider provides care for infants (0-2 years), the Service Provider will provide mandated training to staff on various topics, including but not limited to:*
 - *safe caring practices towards infants, sleeping, feeding, including advice against using U or V-shaped pillows*
 - *bathing*
 - *prevention of scalds and burns, drowning, falls, choking and poisoning*
 - *detailed safety checklist for households with up-to-date information on safety products, and*
 - *current legislation and safety information relating to transporting Children in cars and safe travel.'*

Staff and Carers

In addition, all OOHC Service Agreements (refer to "Specialised Training Section" in Schedules to Service Agreements) provide that:

"The Service Provider will provide training to its Staff and Carers on Child sexual abuse prevalence, tactics used to silence Children, protective behaviours and caring for a Child or Young Person who has been sexually abused, per Recommendation 17 of the Children in State Care Commission of Inquiry."

Foster Carers

Service Agreements also stipulate that:

The Service Provider provides competency based Training to Carers on various topics covered in the Shared Stories Shared Lives South Australia Training Package which include:

- *foster care in context;*
- *bonding and attachment;*
- *grief and loss;*
- *abuse and trauma;*
- *identity and birth family contact;*
- *responding to challenging behaviours;*
- *team work;*
- *maintaining cultural connections; and*
- *the story continues (life story work, concluding placements and dealing with the demands of being a carer).*

Mandated Training includes:

- *The Service Provider will provide mandatory training for all carers about Mandatory Reporting – reporting Child abuse and neglect.*
- *Where the Service Provider provides care for infants (0-2 years), the Service Provider will provide mandated training to carers on various topics including:*
 - *safe caring practices towards infants, sleeping, feeding, including advice against using U or V-shaped pillows;*
 - *bathing;*
 - *prevention of scalds and burns, drowning, falls, choking and poisoning;*
 - *detailed safety checklist for carers households with up-to-date information on safety products; and*
 - *legislation and safety information relating to transporting children in cars.*

Families SA receives quarterly data from the NGO's on training provided to carers. This is tracked against the training contractual requirements.

Relative / Kinship Carers

Relative /Kinship care is managed and supported by the Department. Training is provided by the Department, through the Kinship Care Program, at no cost to the carers.

Training of carers also occurs on a one to one basis through individual support from the relative/kinship care worker.

Mandated Training:

- Infant care (Safe Sleeping for Infants) where carers care for an infant child.
- Child Safe Environment training n placement.

Voluntary Training:

The following training is offered to kinship carers by the Kinship Care Program:

- First Aid;
- Parenting network resources – information and skills regarding accessing community services;
- Effects of Trauma on the Brain and Brain Plasticity;
- Mental health first aid (for carers);
- Sleep Psychologist - Skills in parenting strategies to assist sleeping patterns and behaviour in children;
- Exploring respite options;
- Safety for children – regarding appropriate use of car seats and restraints;
- Grief and Loss;
- Financial counselling advice; and
- Housing SA – how to advocate and access services.

In 2015 it is proposed to offer:

- Child development;
- Therapeutic Parenting.

4.6 ONGOING SUPPORT SERVICES FOR CARERS

4.6.1 What ongoing support services are available for:

- relative/kinship carers;
- foster carers; and
- residential care workers?

4.6.2 What proportion of support services are delivered by government or non-government bodies?

RESPONSE

An ongoing challenge experienced by all jurisdictions is providing appropriate supports to carers so that they remain engaged and committed to their role in the out-of-home care system.

4.6.1

Relative/Kinship Care

Kinship care workers provide key support to relative/kinship carers. A kinship care workers' role is to explore safe family placement options, provide support such as home visits, input re managing children with challenging behaviours, transport, carer forums/groups, financial assistance to support the placement, information and facilitate referrals for carers to access therapeutic services.

The Kinship Care program provides support for carers to attend training. Where carers are reluctant to undertake training this can be provided individually by the kinship worker. The quality is dependent upon the skills of the kinship workers who in this State are support workers rather than trainers.

Carers attend workshops and forums organised on a regional basis in conjunction with local Families SA Hubs and Offices. These include information about care concerns, new policies and procedures, and local resources.

The Kinship Care Program has further increased its focus on working at the earliest point of intervention, by scoping safe family care options and assisting Social Workers with Initial Registration of carers. Kinship Care Workers provide training, information and practical support and intervention to maximise placement stability during this critical period. By intervening at the earliest possible point, the chance is increased of children being placed within their family, community or clan/cultural groups.

Foster care

Contracted NGOs are funded to provide support to carers. The Service providers are required to provide a support worker per carer. The support worker must provide at a minimum, monthly face to face contact visits with the care. NGOs are funded to provide an after-hour's on-call support person to manage urgent care issues.

Foster Carer support practice criteria:

- The service provider ensures each carer is allocated an appropriately qualified Placement Support Worker for supervision and support.
- The service provider visits the carer's home on a minimum eight weekly basis for support and supervision. Home visits will increase in frequency if required by the carer, service provider agency or Families SA. Monthly contact is promoted.

- The service provider ensures that during the home visit the following topics are discussed and actions are identified:
 - child or young person's life domains cultural considerations;
 - and special needs;
 - care environment, personal circumstances and interpersonal issues;
 - adequacy of carer support, critical incidents;
 - relationships with birth family and the impact of contact;
 - partnership with the Department and other agencies.
- The service provider ensures that the Placement Support Worker observes the child or young person on a regular basis and is in an informed position to comment on the relationship between carer and child.
- The service provider documents all home visits and provides a copy to the carer.

Residential Care (Families SA)

Families SA Residential Care staff are supported by professional development and training. This includes, on employment, an initial six week full-time block of training and mentoring, both in classes and the workplace, presented by qualified and professional facilitators and supported by experienced staff in the workplace.

As part of the six week training, some accredited training modules from Certificate IV in Child Youth and Family Intervention will be delivered. Effective 19 January 2015, as a condition of their employment as a Child and Youth Worker and Child and Youth Support Worker, new appointees will be required to complete the remaining modules over the coming 12 month period as a condition to their employment.

The Office for Child Safety, DECD has an ongoing commitment to the performance and development of all staff. To achieve this, staff are provided with regular supervision, informal feedback and are supported to have a current annual performance and development plan, which is aligned to business and strategic priorities. These tools also form the foundation for identifying and responding to individual and organisation training needs and performance issues.

4.7 ONGOING SUPPORT SERVICES FOR CHILDREN

4.7.1 What ongoing support services for children are offered by:

- government; and
- non-government organisations?

RESPONSE

Children and young people in out of home care are supported on a day to day basis by their foster carer, kinship carer or residential care worker.

Residential care workers develop daily routines and care plans for the children in their care. Case workers identify the longer term goals to respond to children's health, education, identity and will seek services for children including therapeutic services.

Foster and kinship carers are part of the care team with the child's allocated worker. The support and other needs are discussed as part of the care planning process.

The circumstances of children under guardianship are reviewed annually to identify any changes in case direction including changes to supports.

Families SA are using view point, a software program for gathering the views of children / young people placed in out-of-home care (OOHC), to enable young people to talk about their out of home care experiences and needs

The Guardian for Children and Young People is also involved in advocating for improved systems and partnerships including partnerships related to planning and support for children as they transition from care, for instance, to stable housing; to access disability services and supports etc.

4.8 RESIDENTIAL CARE FACILITIES

- 4.8.1 As at 30 June 2014, how many residential care facilities were operating?
- 4.8.2 What proportion of residential care facilities are administered by:
 - government departments;
 - non-government organisations; or
 - other bodies?
- 4.8.3 What models of residential care currently operate?
- 4.8.4 What proportion of children in residential care are placed in residential care due to:
 - breakdown in foster care or relative/kinship placement; and
 - complex behaviour issues?

RESPONSE

4.8.1

As at 30 June 2014, how many residential care facilities were operating?

Families SA Residential Care:

As of 30 June 2014 there were 43 Families SA Residential Care facilities. Of these, 8 are larger purpose-built facilities that can accommodate between 8 and 12 young people. The remaining 35 are purpose fitted regular houses, accommodating 1-4 children / young people.

4.8.2

Government departments 71.6%

Non-Government organisations 28.4%

(Non-Government includes commercial care where Families SA provide the facility but contract commercial carers to look after the children and young people.)

4.8.3

The Families SA Residential Care Directorate provides an out-of-home care service for children and young people under the custody or guardianship of the Minister, delivered by professional child and youth workers. Residential Care staff are trained to provide out-of-home care to children and adolescents who have experienced trauma and/or abuse. Staff work according to a consistent practice framework that is relationship-based, trauma-informed and promotes safety, healing and nurturing care.

There are currently 43 houses that accommodate 2-4 children in smaller, home-like environments and 6 larger care facilities that can accommodate up to 12 young people. The larger facilities are purpose-built with higher numbers of staff on shift, they have more security features and increased capacity for supervision and monitoring, however they are not secure care environments as exist in other jurisdictions. In all of the larger facilities a supervisor and senior youth worker are based on-site to support the staff team, whereas in the smaller care environments one supervisor is responsible for oversight of up to five houses and based in a separate office. Generally the larger facilities have accommodated adolescents with more complex and challenging behaviours.

Families SA, Residential Care is currently undergoing a change process, with a vision to implement a differentiated model of care tailored to children and young people's needs. The proposed service enhancements will take up to five years to be accomplished as the facility repurposing will be staggered and responsive to the needs of children and young people already in Residential Care, those that are in Interim Emergency Accommodation and what evidenced based research suggests.

4.8.4

For the period between August 2009 and June 2014, 43 of 200 children whose first placement, over that period of time, was in kinship care were identified to be in residential care. Similarly, 69 of the 269 children whose first placement, over that period of time, was in foster care were in residential care.

4.9 TRANSITION FROM CARE

4.9.1 For children transitioning from out-of-home care to independence in 2013/14:

- how many children transitioned; and
- what was the average age of children at transition?

4.9.2 What proportion of children in out-of-home care have an active transition from care plan?

4.9.3 What is included in a transition from care plan? What consideration is given to the age of the child at transition?

4.9.4 How are outcomes for children transitioning from care measured?

RESPONSE

4.9.1

In 2013/14, 485 children were discharged from out of home care. Of these, 205 children were aged 15-17yrs and 95 children were aged 10 to 14yrs.

42% of children were aged between 15 and 17yrs.

20% were aged between 10 to 14yrs.

18% were aged between 5-9yrs.

16% were aged between 1-4yrs.

4% were under 1year.

4.9.2

All children in out of home care are required to have a transition from care plan. Reporting on case planning and transition from care planning is on hold as new functionality is being built into Families SA connected case work and case management system (C3MS).

4.9.3

For children on Guardianship to 18 orders transition planning is to commence when the child is 16 years. Families SA has agreements with Housing SA and Disability SA to support the transition of young people. Transition plans focus on life domain areas including health, education and training and employment and housing and disability services. The Transitioning from Care Policy (metro regions) is provided as **Attachment 2.6**.

4.9.4

Families SA does not currently measure the outcomes for children in transition from care.

4.10 PERMANENT CARE AND ADOPTION

4.10.1 In 2013/14, what proportion of children in out-of-home care were placed in a permanent care arrangement, including:

- adoption;
- permanent care order;
- transfer of guardianship to carer; or
- other permanent care arrangement?

4.10.2 What was the average age of children entering each category of permanent care arrangement listed above?

RESPONSE

4.10.1

Adoption:

There have been two local adoptions completed since July 2014.

No children in out of home care were adopted in 2013/4.

Permanent Care Order:

As at the 30 June 2014, 2253 children were on Guardianship 12 months and Guardianship to 18 orders.

Transfer of guardianship to carer:

Over the 13/14 time frame 111 children had their orders transferred to another person who then became their legal Guardian.

4.10.2

Permanent Care:

Age Breakdown of children on Guardianship 12 months and Guardianship to 18.

Age Group	Jun-14
Age 00-01	129
Age 02-04	377
Age 05-09	821
Age 10-14	816
Age 15-17	434
Total	2577

4.11 CHILDREN WITH A DISABILITY AND COMPLEX NEEDS

- 4.11.1 If known, how many children in out-of-home care at 30 June 2014 were identified as having a disability?
- 4.11.2 If known, how many children in out-of-home care at 30 June 2014 were identified as having complex needs?

RESPONSE

4.11.1

As at the 30 June 2014 there were 2577 children in out of home care. Of those 847 were identified to have health conditions and/or a disability. Some children have more than one health condition.

4.11.2

As at 30 June 2014, 264 children have complex needs.

4.12 CONTACT WITH BIRTH FAMILIES

4.12.1 What proportion of children in out-of-home care:

- maintain contact with their birth family;
- attempt reunification with their birth family; and
- transition out of out-of-home care back to their birth family?

RESPONSE

Individual social workers maintain information about family contact but this is currently not reportable at an agency level. The *Contact for Children and Young People Policy* is provided as **Attachment 2.7**.

Families SA is current developing capability to measure reunification.

4.13 EARLY INTERVENTION

4.13.1 What early intervention programs are available to supporting children in vulnerable family situations (prior to the removal of children under care and protection orders)?

4.13.2 What proportion of these programs are delivered by:

- Government; or
- Non-government organisations?

4.13.3 How is the efficacy of early intervention programs measured?

RESPONSE

Family Support Services

DECD auspice Family Support Services under the Stronger Families Safer Children Program (SFSC), including Targeted Intervention (TI non-intensive services) and Family Preservation & Reunification Services (FP&RS intensive services) formally Reunification Services.

These services are not early intervention services; they are considered to be secondary services that provide family supports to vulnerable families. Services are provided to families to improve family functioning, help to prevent family breakdown, decrease the occurrence of child abuse and neglect and to reduce the likelihood of children entering out-of-home care.

These services were developed in response to the increased number of notifications and children entering out-of-home care.

The types of interventions offered through these programs may include parenting skills development, counselling, practical structured in-home assistance, therapeutic interventions, children's services in relation to playgroups and links to other community networks and services.

The interventions are currently delivered by six non-government organisations (NGOs) across the State in close partnership with Families SA Offices.

Aboriginal Family Support Services x3	<ul style="list-style-type: none">• Family Preservation and Reunification Service• Targeted Intervention Service• Family Preservation and Reunification Service
ac.care	<ul style="list-style-type: none">• Family Preservation and Reunification Service
Anglicare SA	<ul style="list-style-type: none">• Family Preservation and Reunification Service
Centacare Catholic Family Services	<ul style="list-style-type: none">• Targeted Intervention Service
Centacare Catholic Family Services - Diocese of Port Pirie x2	<ul style="list-style-type: none">• Targeted Intervention Service• Family Preservation and Reunification Service
Uniting Care Wesley Country SA Incorporated x2	<ul style="list-style-type: none">• Targeted Intervention Service• Family Preservation and Reunification Service

Family by Family Program

In the 2013-14 South Australian State Budget it was announced that as part of the Every Chance for Every Child priority, \$2.8 million would be committed over a three year period to The Australian Centre for Social Innovation to expand its Family by Family program into the Northern and outer Southern suburbs.

The Family by Family program was developed in response to a brief from the State Government to reduce the number of families requiring crisis services, including child protection interventions. In the context of working with Families SA clients, the focus of the program is to work with children and parents at risk to keep families together when in the best interests of the child(ren).

Family by Family links families with support families to assist them to improve their family functioning.

The Family by Family program is currently operating in Northern, Inner South and West Adelaide. The program targets families with at least one child between the age of 0 and 5 years. Their Service Agreement incorporates a requirement that at least 70% of families referred to the program are referred through Families SA.

The programs identified in attachment 2.8 include targeted and universal approaches that support all children and young people, including those in vulnerable family situations, to access quality early childhood development, care and education.

5. ATTACHMENTS

- Attachment 2.1** Senate Standing Committee on Community Affairs list of questions.
- Attachment 2.2** Policy: Standards of Alternative Care in South Australia (2008).
- Attachment 2.3** Service Agreement: Family Based Foster Care Services (Template)
- Attachment 2.4** Policy: DECD Screening and Suitability – Child Safety.
- Attachment 2.5** Service Agreement: Non-Family Based Emergency Care Services (Template).
- Attachment 2.6** Transitioning from Care Policy (metro regions).
- Attachment 2.7** Policy: Contact for Children and Young People.
- Attachment 2.8** Question 13: Additional programs.

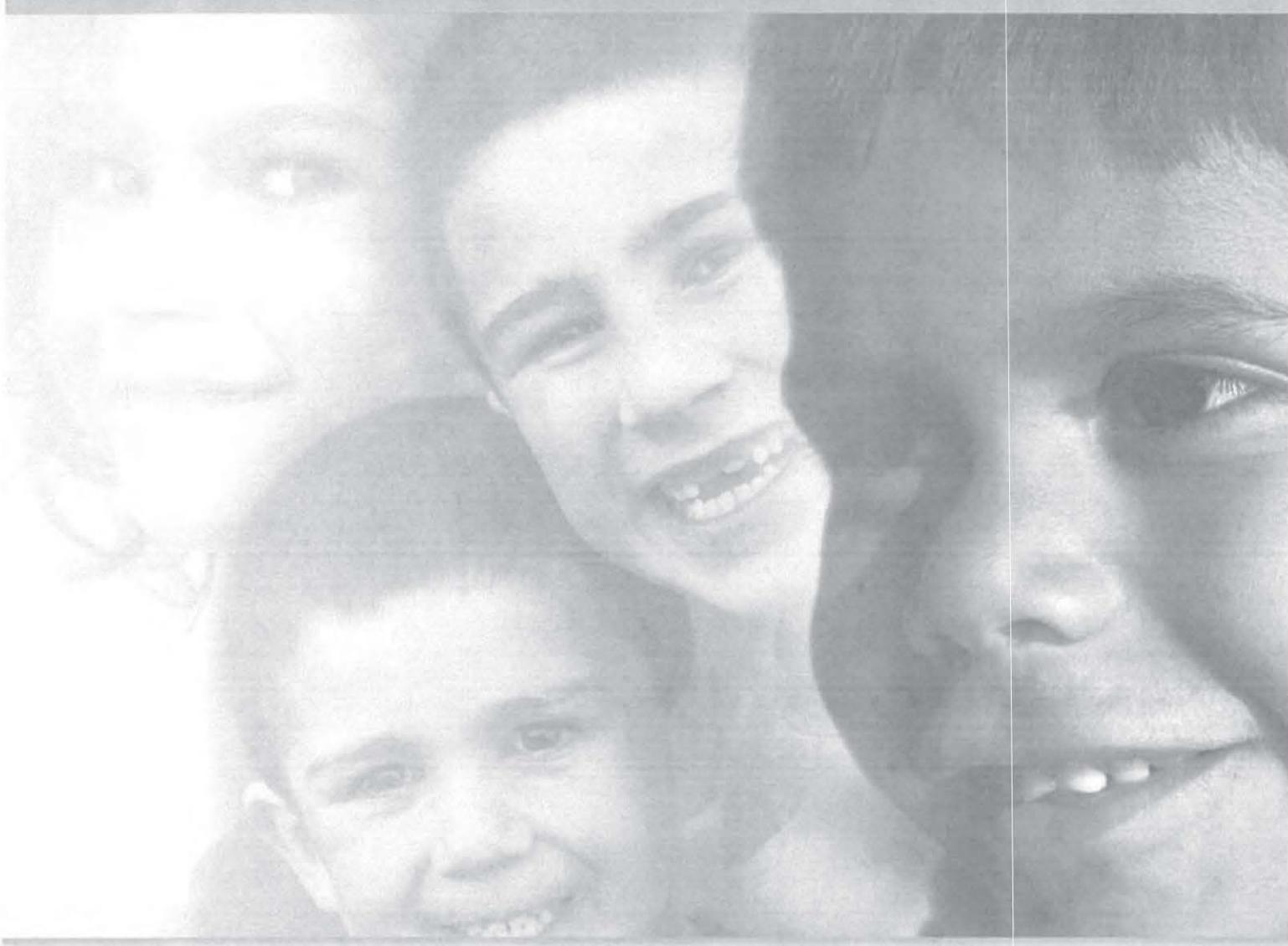
Note: Families SA sits within the Office for Child Safety, Department for Education and Child Development



Government of South Australia

Department for Families
and Communities

Families SA



Standards of Alternative Care in South Australia

An Alternative Care Partnership



Standards of Alternative Care in South Australia



Government of South Australia
Department for Families
and Communities



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Foreword from the Minister

This document sets out the Standards of Alternative Care in South Australia to promote consistent, quality care for children and young people.

While we aim to help keep children and families together, sometimes we must arrange for children and young people to be cared for outside their homes. Ensuring a safe and stable care environment for our children and young people is a top priority, so I am pleased to endorse the '*Standards for Alternative Care in South Australia*'.

The development of the Standards is one of the immediate actions of *Keeping Them Safe - In Our Care implementation (2007)*. The Standards provide the foundation for the State Government's reform in Alternative Care.

The Standards are applicable to all contracted alternative care service providers, Families SA employees and all carers. The Standards articulate what we expect from alternative care services and what we hope to exceed.

The responsibility for standards of care rests across the sector and can only be achieved through partnership, collaboration and communication.

As an active member of the sector my Department will provide ongoing support and collaboration to ensure successful implementation of the Standards.

The Standards underline the importance of working together to achieve ongoing certainty and stability for children and young people living in Alternative Care. They are the building blocks for implementing care team protocols with a 'child first' focus.

We are strongly committed to providing quality alternative care services and support to our valued carers. We want to continue to work together to achieve the Alternative Care Standards as they play a vital role in enhancing better outcomes for children in our care.

Jay Weatherill

Minister for Families and Communities



Acknowledgements

Special appreciation is extended to the Alternative Care sector for their support and participation in the consultation and development of the Standards of Alternative Care in South Australia.

Consultation occurred with the following services:

- Connecting Foster Carers SA
- Create
- Aboriginal Family Support Services
- Anglican Community Care Inc.
- Anglicare SA
- Baptist Community Services
- Centacare
- Life Without Barriers
- Lutheran Community Care
- Southern Junction Community Services Inc.
- The Salvation Army - Muggys Accommodation Service
- Uniting Care Wesley Port Pirie
- Port Lincoln Aboriginal Health Service
- Department for Education and Children's Services
- Disability SA
- Office for Foster Care Relations
- Office of the Guardian for Children and Young People
- Families SA.

Introduction

Development of the Standards

The Standards have been developed jointly by key people and organisations involved in the care of children and young people including:

- carers
- non-government organisations
- CREATE Foundation
- Families SA
- Disability SA
- Connecting Foster Carers SA
- Office of the Guardian for Children and Young People
- Foster Care Relations staff.

The development of the Standards is congruent with *Keeping Them Safe - In Our Care* (2006), the State Government's agenda of reform in alternative care. They are consistent with the current *National out of Home Care Standards* (1996), the *National Plan for Foster Children, Young People and their Carers* (2004-2006) and the *National Framework for Creating Safe Environments for Children-Organisations, Employees and Volunteers* (2005).

In summary the Standards document sets the overarching benchmark for delivering quality services for children, young people, families and carers across the Alternative Care sector. The Standards incorporate the aims and principles of the Charter of Rights for Children and Young People and the Foster Carers Charter.

Definition of Standard

'An agreed level of quality or attainment. Something used as a measure, norm, or model in comparative evaluations.' (Web Oxford English Dictionary 2007).

Purpose of the Standards for Alternative Care in South Australia

- to set the bench mark for quality care provision to children and young people
- to ensure consistent outcomes for children and young people in Alternative Care



- to promote working in partnership across the Alternative Care sector
- to articulate the core elements of effective governance for the south Australian Alternative Care sector
- to inform monitoring and compliance systems that ensures the attainment of the Standards.

Who are the Standards for?

The Standards are relevant to all contracted service providers, caseworkers and carers who have direct or indirect contact with children and young people in all forms of Alternative Care. The standards promote a 'child first' approach and a collaborative partnership of all members of the care team. Families SA aims to provide carers with the necessary support to meet and exceed the standards.

The standards are to be read in conjunction with the relevant policies, practice guides and procedures.

The Standards are relevant to:

Children and Young People in Alternative Care: all children and young people in alternative care including family-based care, non-family based care and Relative/Kinship care. The standards are about ensuring that children and young people are treated well, cared for properly and afforded the same opportunities as children who are not in out of home care. The Standards specify what service providers, caseworkers and carers need to do to achieve the goals of the Charter of Rights for Children and Young People.

Families SA Employees: all employees who have direct or indirect contact with children and young people in all forms of alternative care. The standards aim to guide valued employees in the delivery of quality and consistent care for children and young people.

Family Based Care - Relative and Kinship Carers: Relative and Kinship Care is a valued part of alternative care services in South Australia and has an important role in maintaining children in their familial networks and connected to their communities and culture. These standards are applicable across the Families SA relative and kinship carer population and the Relative and Kinship Care Program which support these carers. The aim of these standards is to promote a consistent level of quality care for children living in relative and kinship care through a collaborative and continuous improvement approach across the Care Team.

Family Based Carer - Foster Carers: Foster carers and foster parents are our valued partners who share our responsibilities for the safety and well being of children. The standards are applicable to all carers in home based settings. The standards aim to provide carers with the requirements of delivering quality care, information on carer training and supports.

Non-Family Based Carers: Non-Family based care is an essential care option for some children and young people. Non-family based care includes carers in residential and transitional accommodation. The standards will aid the non-family based carers in providing professional care for children and young people in residential care.

Non-Government Organisations (NGOs): NGOs licensed under the Family and Community Services Act 1972. The service providers and family based carers are required to act in accordance with the Standards. The NGOs are valued partners in building and providing a range of care options for children and young people in care.

Non-Government Organisations not licensed under the Family and Community Services Act: Commercial care services provide for emergency accommodation placements. The commercial service providers and the commercial care workers are required to act in accordance with the Standards.

Legislation that governs alternative care services

The Family and Community Services Act 1972 provides governance for licensing and monitoring of alternative care services in South Australia. The licensing arrangements assist the Minister to fulfil the statutory obligation to ensure that alternative care services provided to children and young people are consistent with the requirements of the legislation.

The Children's Protection Act 1993 establishes the Adelaide Youth Court jurisdiction to deal with applications relating to children in need of care and protection. Provision is made for orders to be obtained from the court to assist in investigation and assessment in cases where abuse and/or neglect is suspected. The Act also provides for family care meetings which offer an opportunity for the child's family, in conjunction with other professionals, to make informed decisions regarding the care and protection of the child and to review those arrangements.

The Adoption Act, 1988 allows for a child who is unable to return to the care of birth parents to be adopted by alternative caregivers, where such an action is deemed to be in the best interests of the child, where the child's cultural identity will not be lost, and where appropriate, the child's wishes are able to be expressed.



Principles

Families SA and support workers seek to work in partnership with the biological relative/kinship carers or the foster family to strengthen their supports and ability to provide quality care for children and young people. The Alternative Care sector is guided by Principles of Good Practice that underpin these Standards.

Preserving and strengthening families

An active effort is required to keep children and young people within their birth family wherever possible and to make every effort to reunify a child or young person who is separated from their family. Where this is not possible, connections to family of origin and community need to be maintained and strengthened. This includes efforts to restore children or young people to disrupted placements. Where this is not possible, efforts should be made to maintain best connections or to heal those that are fractured.

Active participation of children and young people

The interests of the child or young person are to be the focus of decision-making. Children and young people will be given a voice in decision-making and will be involved in the design and delivery of services. It is about making it comfortable and appropriate for them to be involved and for adults to really listen to what they say and give their views due weight in the decision. Children and young people may choose not to participate but they must be given the opportunity.

Adherence to the Child Placement Principle and Aboriginal Child Placement Principle

When children or young people require placement in alternative care, placement planning must follow in accordance with the Child Placement Principle and the Aboriginal Child Placement Principle. The Principles require relatives and kin to be given appropriate consideration as placement options for children and young people recognising the importance of preserving connection to family, communities and culture.

Planning that facilitates settled and stable care for the child or young person

Ongoing placement planning is required to secure settled and stable care for the child or young person. Care environments should promote a sense of security and belonging in order to ensure their optimal development. Where settled and stable care cannot be achieved with the child or young person's birth family, efforts are made to supplement the care of the birth

family with care provided by a family, or significant others, that can offer the child or young person love, security and life-long relationships. The goal of placement planning should follow the emotional lead of the child or young person and be guided by permanency planning and attachment theories. Children and young people should be returned home or settled into alternative care dependent upon this.

Child focused within a family-centred service

This involves ensuring that all caring efforts are focused on the needs of the child or young person, who is viewed in the context of their birth and foster, relative/kin carer families. A good standard of care is achieved by providing support to the birth family, foster family or relative/kin carer family while never losing focus on the child or young person's best interests and unique needs.

Recognition of the critical importance of nurturing relationships

A secure attachment relationship to a consistent and loving caregiver is essential for a child's optimal development. Impairment or continual disruption of a child's attachment relationships will damage a child's physical, emotional and cognitive development. All members in the Care Team need to ensure a focus on the child's attachment needs. It is the role of the caseworkers, support workers and carers to promote existing attachments to birth family and relatives with regular family contact.

Fostering resilience

Children and young people need secure attachment relationships, good educational attainment, the ability and opportunity to make and sustain friendships, the opportunity to pursue talents and interests, to learn social behaviour and acquire social skills.

Strengthening cultural identity

This recognises the importance of a child or young person's cultural expression, cultural heritage, and culture as an integral part of identity formation. Culturally sensitive and inclusive practice must be maintained to ensure cultural needs are supported.

Children and young people, their families of origin, and carers are often dealing with grief and loss. Sensitive and non-judgemental responses to the impact of grief, loss and trauma are required. Children and young people are able to achieve some level of recovery through the positive aspects of belonging, emotional connectedness, respect and love.



Promoting the rights and opportunities of children and young people

Children and young people in care should be afforded the same rights and opportunities that other children in the community have. The child or young person in care may require extra efforts to redress the disadvantage they have already experienced. Extra care is required to prevent further harm through the child or young person's experiences of the process of alternative care itself.

Partnership between members of the Care Team

For the State to fulfil the parenting role it is essential that all care team members work together. The care functions of a parent remain with the birth family or are transferred to alternative carers. Care Teams are comprised of the child, carer, birth family, service provider, caseworker and other relevant services or individuals that are involved in case planning. There is recognition of each party's responsibility and a mutual understanding of roles. The service provider agency and caseworkers share responsibility for supporting the child or young person and the carer. The child or young person's wishes and feelings should be considered and have increasing say with advancing age and maturity. Carers are encouraged and supported to attend case conferences and to implement case planning actions.

Monitoring and Compliance of the Standards

Non-Government service providers

Monitoring of the Standards will be a collaborative process between NGOs and Families SA. Service provider agencies will use the Standards to undergo an internal continuous organisational improvement process. They will be required to submit evidence that demonstrates their attainment of and compliance with specific standards. This evidence will be assessed by the Families SA Guardianship and Alternative Care Directorate who will determine the licensing of the agency.

Families SA will assist the service provider agency in meeting identified gaps by:

- providing advice on Standards requirements and service development
- encouraging the sharing of resources between service provider agencies (e.g. policies, procedures, and templates)
- holding information sessions
- assisting service provider agencies to establish mentoring relationships
- encouraging the sector to contribute to the continuous improvement and evaluation of the standards program.

Non-Government Organisations not licensed under the Family and Community Services Act 1972

Families SA may periodically enter into service agreements with Non-Government Organisations (the service provider) that are not licensed under the Family and Community Services Act. All service agreements state, the service provider must ensure that the service is provided in accordance with and is consistent with the Alternative Care Standards, specified guidelines and policies.

Families SA will use the Performance Management Framework and other assessment tools to monitor and evaluate these service agreements to ensure the service provider meets the guidelines and policies in operation during the terms of the service agreement.

Note: In exceptional circumstances where District Centres have sourced a private placement that is not subject to an existing service agreement the following will need to occur:



Core Standards

- Consultation with Families SA Contracts and Licensing before and during entering into written contracts as a risk minimisation and quality assurance measure.
- District Centres to recommend an interim 3 month placement with a written contract that is 'in accordance with and consistent with Alternative Care Standards', and must be approved by the Regional Director.
- All private placement referrals to be referred to and processed by Placement Services Unit.

Where funding is available and the placement is to exceed 3 months then District Centres refer to Families SA Contracts and Licensing in developing a service agreement on behalf of Regional Directors. Where possible this process is to occur at the commencement of the placement to meet the 3 month timeline.

Formal approval of the placement rests with the relevant Regional Director.

Families SA

The Monitoring of the Standards will be a primary responsibility of Families SA managers, supervisors and caseworkers. The monitoring and compliance of the Standards is applicable to all Families SA staff who are directly or indirectly involved in the delivery of Alternative Care Services, including District Centres, Relative and Kinship Care Program, Residential Care, Transitional Accommodation and Independent Living Team. Families SA will work in partnership with all care team members to ensure the Standards are met. Families SA will monitor compliance with the Standards through existing case reviews, internal audits and Performance Enhancement processes. Families SA will ensure recommendations results from reviews and audits are addressed through case planning and communicated to all care team members. Review and audit outcomes should be utilised to inform strategy and policy development for service improvement.

The following core standards define the overarching requirement of the Alternative Care sector to achieve quality of care for children and young people:

Standard 1 Entering Care

All contracted service providers within the Alternative Care sector will provide individualised placement planning and matching for all children and young people entering care to ensure placement suitability, stability and continuity.

Standard 2 Case Management

Families SA caseworkers will ensure their work with children, young people and their families and carers is based upon an ongoing assessment and planning framework. Monitoring and review of casework will ensure children and young people are provided with all identified opportunities/ services to allow them to realise their full potential.

Standard 3 Care Provision

(Family-based care:- Foster Care, Relative and Kinship Care, Non-family based care:- Residential Care, Transitional Accommodation, Commercial Care workers, Congregate Care and Independent Living).

All contracted service providers within the Alternative Care sector will provide children and young people with a safe and secure living environment appropriate to their specific needs. Service providers will be subject to regular monitoring and review to promote quality care provision for children and young people in care.

Standard 4 Participation

Children, young people, birth families and carers will be supported to actively participate in decision-making and to make choices in case planning.

Standard 5 Care Records

The Alternative Care sector will have well-managed records that are accessible and confidential.

Standard 6 Customer Relations

All inquiries, complaints and allegations will be heard and responded to in a confidential, responsive and fair manner.



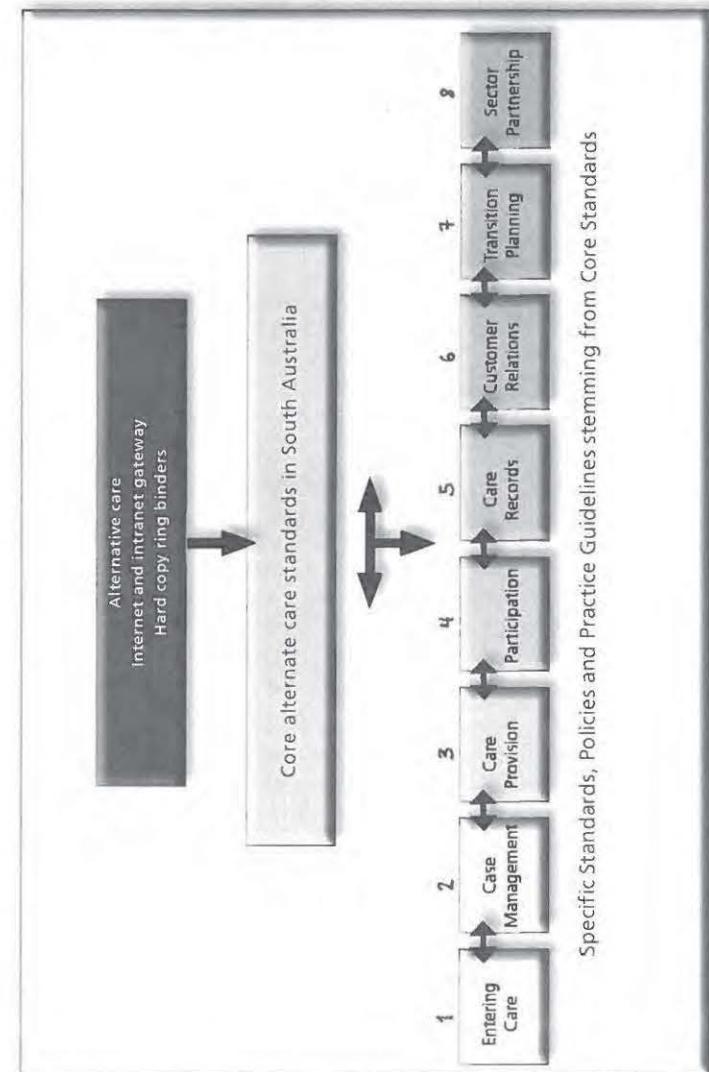
Alternative Care Access Pathways

Standard 7 Transition Planning

Transition planning will occur for children and young people from the onset of entry into care through to leaving care.

Standard 8 Sector Partnerships

All service providers within the Alternative Care sector, both government and non-government, will work in partnership to deliver accessible and effective services for children, young people and their families.





Format and Structure of Standards

Each core standard is divided into the following sections:

Core Standard:

describes the overarching practice requirements for the Alternative Care sector and provides the theme for specific standards to be grouped together.

Overview:

provides a summary of each section and defines the core standard areas.

Specific Standard(s):

sets out specific requirement that enables the Core Standard to be achieved.

Expected Outcome:

defines the key outcomes that each standard aims to achieve.

Roles and Responsibilities:

defines the different roles of specific services and positions to ensure that the standard is achieved.

Practice Criteria:

key requirements of each standard to ensure quality practice is delivered

Policies and Procedures:

Families SA documents that provide guidance and procedural requirements for each Standard.

Families SA policies and procedures can be accessed on the Families SA Intranet. The policies and procedures provide guidance on how to achieve the Standards. Non-government organisation can utilise Families SA policies and procedures to inform their practice and operating procedures. Families SA are able to provide the Alternative Care sector with copies of the nominated policies and procedures. For further inquires or to access information contact the Guardianship and Alternative Care Directorate - Strategy and Policy Team on 8226 6662.

Example

Standard 1.1: Health of Child or Young Person

Children and young people have their health care optimised through preventative services, regular assessment, monitoring and treatment.

Expected outcome

Children and young people have their medical, developmental, optical and dental health needs assessed and case managed to ensure they receive regular preventative appointments and treatment as required

Roles and Responsibilities:

Families SA caseworkers to ensure all children and young people in alternative care have a Case Plan and an Alternative Care Agreement that addresses their health needs.

Families SA and Placement Support Workers will provide support to carers to address children and young people's health needs. Caseworkers will maintain Basic Information Records and provide these records to service providers and carers. Carers' views will be sought regarding the health needs of children in their care.

Practice Criteria

1.1.1 Carers will ensure that the child or young person attends health care appointments as required in the Case Plan.

Policies and Procedures

Guardianship and Alternative Care Manual



Specific Standards



1. Entering Care

Core Standard 1: Entering Care

All contracted service providers within the Alternative Care sector will provide individualised placement planning and matching for all children and young people entering care to ensure placement suitability, stability and continuity.

Children and young people in care have the right to:

- understand why they are in care
- express their opinion about things that affect them
- be treated like other children and young people who do not live in care.

Overview

This section sets out the standards and practice criteria of entering care and outlines the importance of placement matching. These standards are applicable to all service providers, Families SA caseworkers and all carers.

Placing a child in Alternative Care will be a planned process that focuses on the individual needs of the child. The process commences with locating a suitable placement, by matching the child to the carer. The preferred placement for a child or young person is:

- culturally, age and developmentally appropriate
- least disruptive to the child, their siblings and family
- able to sustain a connection with family and community and give priority to maintaining the child in the same geographic area
- able to meet the physical, social and emotional needs of the child and young person, provides stability, and achieves the case plan goal and outcomes
- inclusive of the views of children, kin and carers in decision-making, planning and intervention.



Caregivers must be provided with sufficient information to ensure that children and young people experience a successful transition into care. There is a fine balance between maintaining privacy and confidentiality of individual children and their families whilst providing caregivers with sufficient information to assist them in their care giving role. In summary caregivers require the information that will assist them to provide the best care for children and young people. Caregivers are a crucial part of the Care Team and are bound by the same confidentiality principles as departmental employees.

Standard 1.1: Access to and Assessment of Placements

Children and young people in need of care and support will have timely access to appropriate services based on a thorough assessment of their needs and family situation.

Expected Outcome

All children and young people requiring alternative care will be matched to a suitable placement and provided with services that meet their specific needs.

Roles and Responsibilities

Families SA caseworkers will liaise with service providers, cultural consultants/service/forums and other key professionals to ensure children and young people have access to suitable placements and other required services. Caseworkers will share assessment results of the child or young person with the identified services.

Practice Criteria

- 1.1.1** Assessments of placements are carried out prior to the placement of a child or young person, or in emergencies, within 7 days after the placement has commenced.
- 1.1.2** Where siblings are being assessed and placed, the collective needs of siblings are considered, as well as the individual needs of each child and young person. Where it is possible and appropriate siblings are placed together.
- 1.1.3** All placement assessments and referrals of Aboriginal and Torres Strait Islander children and young people are in accordance with the Aboriginal Child Placement Principle.
- 1.1.4** A child with a disability is placed with a carer who has training or experience or is willing to receive training/support in caring for a child with disabilities.
- 1.1.5** Prior to making a recommendation about placing an additional child with a carer the service provider consults with all the relevant caseworkers to consider the effect on the identified children and young people. The placement assessment should consider the capacity of the carer to provide care for another child and to determine if there are too many children in the one placement (Families SA term for this issue is 'Exceed Numbers').



- 1.1.6 A placement checklist is completed for each child prior to entering the placement.
- 1.1.7 Children and young people are provided with information about being in care and their views are sought. This includes providing and explaining printed information such as the 'Charter of Rights' and the 'Being in Care' booklet (as appropriate).

Policies and Procedures

Carer Assessment Manual

Guardianship and Alternative Care Manual

Families SA Relative, Kinship and Specific Child Only Care: Policy, Practice Guideline and Procedure

Keeping Them Safe -Initial Placement Checklist

Office of the Guardian for Children and Young People Resources - Contact Card, Social Worker Checklist and 'About Being In Care' booklet

Standard 1.2: Placement Matching

Children and young people have their needs matched with the profile of potential carers.

Expected Outcome

The attributes of potential carers will be considered and matched to the needs and characteristics of the child or young person.

Roles and Responsibilities

The Alternative Care sector is responsible for ensuring placement matching occurs and meets the needs of children and young people in care. Families SA caseworkers will provide all relevant information, in a timely manner to service providers to assist the placement matching process.

In the event of suitable emergency accommodation arrangements, transition plans will be developed to ensure transfer to a stable placement.

Practice Criteria

- 1.2.1 There is close matching of the needs of the child or young person with the placement type.
- 1.2.2 The service provider recommends placement matches that are consistent with the carer's approval status, the Aboriginal Child Placement Principle, Child Placement Principle and the needs of the child and young person.
- 1.2.3 The child or young person is given information about the authorised carer before entering their care appropriate to their age and cognitive ability.
- 1.2.4 Where possible the views of child or young person, parents, caregivers, relatives/kin about the placement are obtained and recorded on the child's records.
- 1.2.5 Where possible children and young people experience minimal disruption to established routines, schooling, child care, relationships, community supports or employment arrangements.
- 1.2.6 Where possible entry to a placement is planned, so that the child or young person is best able to adapt to the new environment.
- 1.2.7 Where a child or young person is placed in Alternative Care, the caseworker or a significant person will accompany them to the placement and settle the child into the placement.



- 1.2.8 All children and young people are telephoned by their caseworker within 24 hours of the start of a placement and have face to face contact with their caseworker within one week. For children with a disability alternative means of communication may be required. Caseworkers to consult with disability caseworkers on alternative communication strategies.
- 1.2.9 Children and young people are provided with contact numbers for their caseworker and will be provided with emergency contacts.
- 1.2.10 The service provider ensures that carers are only approved for a maximum of three children or young people. Exceptions may be made in the case of sibling groups or relative/kinship care or specific child only placements.
- 1.2.11 Caseworkers use the 'Placement Information Checklist' to ensure that all relevant information about the needs of the child or young person is provided to the carer.
- 1.2.12 On entry to placement carers are provided with a copy of the 'Verification of a Child in Care' form.
- 1.2.13 Carers are provided with the following information needed to care for the child or young person: (where available)
 - medical/dental needs
 - health care plans
 - risk issues
 - behavioural issues
 - disability specific information, including eating and drinking plans, behaviour plans etc
 - dietary requirements,
 - emotional wellbeing issues
 - familiar routine details
 - family contact
 - court requirements and a copy of the court order.
 - emergency contact details
 - appointments
 - school details.

Policies and Procedures

Guardianship and Alternative Care Manual

2. Case Management

Core Standard 2: Case Management

Families SA caseworkers will ensure their work with children, young people, their families and carers is based upon an ongoing assessment and planning framework. Monitoring and review of casework will ensure children and young people are provided with all identified opportunities/services to allow them realise their full potential.

Children and young people in care have the right to:

- have their thoughts and opinions asked for and considered
- be involved in what is decided about their life and care
- regular support and contact from their worker
- a plan which shows how and where they will be cared for
- keep in contact with the people who help them feel good about themselves
- understand where the family is
- know who they are and their history
- have people supporting them who have special training about their needs

Overview

This section sets out the Standards and practice criteria of Families SA case management and outlines the roles and responsibilities for the delivery of case management. Case Management Standards are applicable to all Families SA caseworkers responsible for the care and protection of children in Alternative Care.

Families SA case management aims to maximise the safety, stability and wellbeing for children and young people in care. Case Management includes comprehensive assessments of children's needs and strengths and providing coordinated services.



Case management includes assessment across the key life domains of health, education/employment, family and caregiver relationships, connection with family/kin, identity, emotional/behavioural adjustment, social and peer relationships and life skills. Caseworkers will assess the life domain areas through their work with the child/young person, birth family, caregiver and other key services/professionals.

Case planning will maximise the participation of children and young people in all decisions which concern them.

Case planning is delivered by the allocated caseworker in conjunction with each member of the Care Team.

Case management will focus on addressing the needs of children and young people and enhancing their strengths. The care of children will be regularly monitored and reviewed. Exchange of information and a partnership approach will enable services to be responsive to the changing and emerging needs of children and young people.

Standard 2.1: Caseworker

A caseworker is allocated to each child and young person in alternative care.

Expected Outcome

Every child or young person in care has an allocated worker who is responsible for case management, maintains regular contact and is a key support to the child or young person.

Roles and Responsibilities

Families SA Supervisors/Line Managers will ensure that every child or young person in care has an allocated worker. Line Managers will implement quality assurance mechanisms within their teams to ensure regular contact occurs between the worker and child.

Practice Criteria

- 2.1.1** The supervisor allocates a caseworker to each child and young person in Alternative Care.
- 2.1.2** Aboriginal children and young people have access to a caseworker/community person/volunteer from the same cultural background. Refer to local Aboriginal community advisory forums or community groups regarding access to suitable support person.
- 2.1.3** Children from culturally and linguistically diverse backgrounds have access to a caseworker/community person/volunteer from the same cultural background.
- 2.1.4** If a child or young person is unallocated to a caseworker, the supervisor ensures that the child is allocated to the responsible team with a senior caseworker as the contact person.

Policies and Procedures

Supervisor CIS Manual

Guardianship and Alternative Care Manual



Standard 2.2: Caseworker Contact

Every child and young person in care will have face to face contact with their allocated worker a minimum of once a month.

Expected Outcome

Every child and young person in care will have regular contact with their caseworker focused on working in partnership with the carer and child to address the child's needs and enhance their strengths.

Roles and Responsibilities

The caseworker is responsible for contacting the child or young person. Caseworkers will visit, meet and communicate with the child or young person. Caseworkers may need to seek assistance to aid effective communication with a child or young person with a disability (e.g. significant other, interpreter, use of equipment etc.) Caseworkers will maintain regular contact to address the life domain areas and any other issues that may arise. The caseworker will communicate with the carer about key issues that arise from their communication with the child or young person.

Practice Criteria

- 2.2.1 Contact with the child/young person explores and addresses key areas of the child's life.
- 2.2.2 Contact with the child and young person occurs separately and with carers.
- 2.2.3 The child/young person's views are sought and encouraged.
- 2.2.4 The child/young person's participation is demonstrated, encouraged and documented in case notes.
- 2.2.5 All contacts are recorded in case notes.
- 2.2.6 Observations are recorded in case notes for non verbal children or for children with disabilities

Policies and Procedures

Child Protection Manual Volume 1 and 2

Guardianship and Alternative Care Manual

Case Recording Guidelines

Standard 2.3: Families SA Placement Decision Making Framework

Every child and young person will have a thorough and timely assessment of their placement options, with decisions supporting the need for settled and stable long term placements.

Expected Outcome

Every child or young person will have a thorough placement planning assessment to determine the best care options for settled and stable long term placements. Placement outcomes will enable children and young people to define themselves as belonging to a family, develop trusting relationships and connection to community.

Roles and Responsibilities

Families SA is responsible for ensuring a placement planning assessment occurs for every child or young person in care. Families SA caseworkers will work with the Alternative Care sector, cultural advisors and other key professionals to assist the placement planning assessments. Families SA will consider all the placement planning options and the cultural considerations impacting on the child.

Practice Criteria

- 2.3.1 Families SA Placement Decision Making Framework considers the range of placement options including:
 - remaining at home with family and additional support
 - restoration to the care of family of origin (Reunification)
 - placement with a member or members of a child's relative or kinship group
 - long term placement with:
 - an authorised carer (where guardianship may be transferred), or
 - within an authorised non family based care environment, or
 - supported semi-independent living environment, or
 - independent living, or
 - Adoption



- 2.3.2 Placement planning assessments are informed by the permanency planning theory:- raising children in a family setting, child centred - including child attachment & development and the significance of the biological family in individual identity and connectedness
- 2.3.3 Placement planning is discussed as part of case planning development and at case conferences, Family Care meetings or a specific meeting for placement planning.
- 2.3.4 All relevant information is explained verbally and in writing to children and young people, authorised carers and parents, as part of the process of establishing long term placement.

Policies and Procedures

- Families SA Placement Decision Making Framework
- Guardianship and Alternative Care Manual

Standard 2.4: Reunification

All children and young people who enter care will have a reunification plan, unless it is assessed that reunification is not a viable or safe option.

Expected Outcome

Caseworkers and care team members will work towards returning a child or young person home to the permanent care of their family resulting in one of the following outcomes:

1. *Child reunification with parents:* the reunification of a child who is in the Minister's care for protection reasons to the full time care of parent/s.
2. *Child reunification with relatives:* the reunification of a child who is in the Minister's care for protection reasons to the full-time care of relatives. This can include reunification with an adult sibling, a grandparent/s or another relative/kin.
3. *Shared Care:* the reunification of a child who is in the Minister's care for protection reasons to their family through a shared care arrangement between parents and/or relatives and/or another party.

Roles and Responsibilities

Families SA and Reunification Services will work in partnership to determine the best reunification outcomes for the child or young person. Families SA are responsible for developing reunification plans in consultation with child, young person, birth families, carers and reunification services. Families SA will refer all reunification families to contracted Reunification Services.

Practice Criteria

- 2.4.1 Every child and young person under a Family Care Meeting Agreement (FCM), Voluntary Custody Order (VCA), a one-year Custody or Guardianship order has a *written reunification plan* within the first 2 weeks of the finalised FCM Agreement or the Order being granted..
- 2.4.2 Reunification plans ensure the child's cultural, ethnic and religious identities are taken into account when determining the best interests of the child. The safety of the child however, must remain the central focus.
- 2.4.3 Reunification planning is informed by the following theories and



principles particularly Permanency Planning and Attachment theory, the value of raising children in a family setting, child centred approach-, child development and the significance of the biological family in forming individual identity and connectedness.

- 2.4.4 The reunification plans are reviewed in line with the case planning process. They will be reviewed every 3 months.
- 2.4.5 All reunification families are referred to the nominated reunification service within the first two weeks of the care and protection order being granted.
- 2.4.6 Caseworkers develop the Reunification Plan in consultation with the Care Team members.
- 2.4.7 Caseworkers and placement support workers work with authorised carers to assist them to positively support the reunification process.
- 2.4.8 Post Reunification supports: Ongoing support and contact is provided to the child, young person and their family for an agreed period of time where reunification has successfully occurred.
- 2.4.9 Concurrent planning occurs simultaneously in the event that reunification is not successful. This is to ensure that the child has settled and stable long term care arrangements and key areas of their life are addressed and nurtured.

Policies and Procedures

- Draft Reunification Policy and Practice Guidelines
- Guardianship and Alternative Care Manual

Standard 2.5: Case and Care Planning

Every child and young person who enters care must have a case plan that is based upon a comprehensive assessment that considers his or her safety, stability and wellbeing.

(Note: the term care plan and case plan may be used interchangeably however the purpose and function the plan will depend on your job role. Further direction to be sought from specific Practice Guidelines related to the caseworker's job role. This section is a generic approach to case planning across Families SA services inclusive of residential care settings and transitional accommodation).

Expected Outcome

All children and young people in care will have a current case plan that addresses all life domain areas. The case plan will promote a 'child first focus' and is inclusive of all participants of the care team.

Roles and Responsibilities

Families SA is responsible for ensuring that a case plan is completed in partnership with carers and revised for every child and young person in care. Care team members are all responsible for actioning specific goals/tasks of the case plan.

Practice Criteria

- 2.5.1 A current case plan is on the child or young person's records.
- 2.5.2 Case/care plans are revised every 3-6 months.
- 2.5.3 A three generational genogram is on the child or young person's records. Kinship relationships can be included in the genogram with clear articulation of their connection to the child. Alternatively an Eco Map can be used to demonstrate kinship and community supports.
- 2.5.4 Case planning is informed by the use of existing tools and processes such as Case & Care Plan templates, Alternative Care Placement Agreements, Life Domain Assessments, Education Plans, and Psych Assessments.
- 2.5.5 The Case Plan has child focused defined goals, actions and timeframes. Roles and responsibilities of all care team members are specified.



- 2.5.6 A current and comprehensive Alternative Care Agreement is on file and updated every three months.
- 2.5.7 Case/care planning actively seeks and consider the views of the child or young person. Views are recorded and updated regularly.
- 2.5.8 Case/care planning actively seeks and considers the views of birth family/relative/kin, carer(s) and representatives from relevant services. Views are recorded and updated regularly.
- 2.5.9 The case plan is signed by the caseworker, supervisor, child/young person, birth family and the carers. The case plan is explained to the child/young person by all care team members.
- 2.5.10 All parties involved in the planning process receive a copy of the case/care plan and any amended versions.
- 2.5.11 The effectiveness of care planning is promoted through collaboration between other agencies across government and non-government.
- 2.5.12 The Families SA caseworker assesses all client files, with long term orders, in relation to eligibility for Victims of Crime VIC compensation.

Policies and Procedures

Guardianship and Alternative Care Manual

Residential Care Practice Guidelines

Emergency Accommodation casework, case plan practice guidelines

Guardianship case plan practice guidelines

Victims of Crime - Statutory Compensation for Children and Young People under Care and Protection Orders

Standard 2.6: Guardianship Case Plan

Caseworkers to ensure that each child/young person under the Guardianship of the Minister to 18 has a Guardianship Case Plan that is developed, monitored and reviewed as part of a regular six monthly planning cycle.

(This standard is specific to social work practice for children under the Guardianship or Custody of the Minister, inclusive of 12 month orders and Guardianship of the Minister until 18 year orders).

Expected Outcome

All children and young people in care will have a current case plan that addresses all life domain areas. The case plan will promote the 'child first focus' and is inclusive of the participation of the care team.

Roles and Responsibilities

Families SA is responsible for ensuring that a case plan is completed and revised for every child and young person in care. Care team members are all responsible for actioning specific goals/tasks of the case plan.

Practice Criteria

- 2.6.1 The Guardianship Case Plan is developed in consultation with the child/young person, the caregiver and the birth parent(s) (where possible).
- 2.6.2 The child/young person's Guardianship Case Plan is developed and completed within 28 days of the child/young person starting in an alternative care placement. Where a child/young person already has a Guardianship Case Plan this will be updated and completed with new information (e.g. placement details) within 28 days.
- 2.6.3 A copy of the Guardianship Case Plan will be provided to the key people involved within 14 days of the Guardianship Case Plan being completed by the Families SA social worker.
- 2.6.4 In the case of placement break-down where a child/young person moves placement (without time for prior planning), the caseworker:
 - makes contact with the new caregiver within 24 hours to provide the necessary information (may be verbal) to ensure they are able to provide appropriate care for the child/young person



- meets with the caregiver, placement/relative/kinship support worker, and the child/young person to discuss the Guardianship Case Plan within seven days of the child/young person moving into the new placement.
- advises birth family of change of placement

2.6.5 Within 28 days of the change of placement the caseworker makes contact with the other key people involved to discuss the Guardianship Case Plan, making adjustments as required based on the feedback from these people.

Policies and Procedures

Guardianship Case Plan Policy and Practice Guide



Standard 2.7: Life Domains Areas

Caseworkers to ensure children and young people have their health care, education and employment, emotional wellbeing and mental health, identity, social and self-care needs met in order to support them to reach their full potential.

Expected Outcome

From the onset of entry into care through to post care all children and young people will have their life domain areas addressed by all care team members.

All care team members to work with children and young people about their aspirations for the future.

To encourage children and young people to have hopes and a vision for their future. Visionary aspirations will aid all care team members in care planning for children and young people in care.

Roles and Responsibilities

Families SA caseworkers and care team members are responsible for ensuring all life domain areas are assessed, managed, addressed and progressed.

Practice Criteria

- 2.7.1 Life Domain Assessment are included in case and care planning. The caseworker ensures that the Life Domain Assessment is completed at six monthly intervals.
- 2.7.2 A referral for the Initial Health Assessment occurs within 2 months from the time of Order being granted.
- 2.7.3 Caseworker and carers ensure that the child or young person attends health care appointments as required in the Case Plan and is accompanied by an adult.
- 2.7.4 Caseworker and carer ensures the child or young person attends Dental Health Care appointments as required in the case plan and is accompanied by an adult.
- 2.7.5 The caseworkers and carers assist children and young people to understand their own health needs and to be proactive in addressing their needs.



- 2.7.6 The caseworker ensures that the child receives developmental assessments if required.
- 2.7.7 The caseworker ensures the child or young person receives and/or attends relevant therapy appointments.
- 2.7.8 The caseworker supports the carer to meet the expectations outlined in the child or young person's Individual Education Plans.
- 2.7.9 The caseworker works in partnership with the carer and child to liaise with the school to address a child/young person's education and behaviour needs in the school environment.
- 2.7.10 The allocated caseworker keeps a copy of school reports on the child's records. The carer keeps a copy of school reports as part of their Life Story Collections.
- 2.7.11 The caseworker works in partnership with the carer to ensure that the child or young person is provided with opportunities to learn social, self care and independent living skills.
- 2.7.12 The caseworker works in partnership with the carer to ensure the child or young person is provided with opportunities to form their identity through community connections and activities, informing of family history and creating new experiences. The care team is responsible for Life Story works and collections.
- 2.7.13 Children and young people in care maintain their birth name, unless they make an informed choice to change their name and it is considered in their best interests to do so.
- 2.7.14 Children and young people in care are provided with information regarding their entitlements about being in care and the processes by which they can make their views known

Policies and Procedures

Life Domain Guidelines and Prompts

Life Domain Assessment Tool

Dental Agreement for Children and Young People under the Guardianship of the Minister

Health Standard for Children and Young People under the Guardianship of the Minister.

Standard 2.8: Family Contact and Community Connections

Children and young people in Alternative Care will be supported in the development of positive identity through 'family contact' and community connections.

Family contact incorporates the child's contact with siblings, parents, extended family and community members, persons of cultural or ethnic significance and other persons of significance in the child's life.

Expected Outcome

Children and young people in Alternative Care will be provided with opportunities to have family contact and maintain community connections.

Roles and Responsibilities

Families SA caseworkers are responsible for developing family contact plans. Care team members to assist the child or young person to understand their place in the world and to develop a sense of belonging through their family, history, community and friendships.

Family contact is required unless determined not to be in the best interest of the child. The child's views are always considered when arranging family contact.

Practice Criteria

- 2.8.1 When planning family contact the caseworker:
 - seeks the child's views about contact
 - assesses a child's contact needs and ensure that they are considered in the context of case planning, ongoing monitoring and subsequent reviews and
 - refers to the child's case plan when making practical arrangements for family contact.

Children with significant intellectual impairment may require specific assistance and support in coping with separation associated with contact visits. i.e. with visual tools, social stories etc.



2.8.2 Since family contact is also a fluid process that requires continuous monitoring and re-assessment, consideration is given to:

- who will have contact with the child
- purpose of the contact
- form the contact will take
- frequency and duration of any contact
- location of any contact
- supervision requirements
- role the carers will take
- monitor the child's reaction to the contact
- are any other practical considerations
- ensure the court ordered contact requirements are met, and
- maintaining and building attachment.

For children with disabilities, (in particular communication and cognitive impairments) any planning and decisions around contact need to take into account these children's particular vulnerabilities, especially when contact and transportation to contact is unsupervised.

2.8.3 The caseworker works in partnership with the care team to promote 'Community Connections.' Community connections can be promoted via the following:

- life story collections including: information/photos of previous kindergarten(s), school(s), carers, relatives. collection of mementos to promote memories i.e. photos, cards, important toys, books, crafts.
- helping the child to understand why they are in care, with age appropriate explanations.
- involving the child or young person in activities, sports, groups, clubs, and music or dance lessons.

Policies and Procedures

Practice Guidelines for Contact

Families SA Relative, Kinship Care and Specific Child Only: Policy, Practice Guidelines and Procedure

Standard 2.9: Duty Of Care

The standard of care expected of a Families SA employee is that of a reasonable, careful, prudent employee, to a standard in accordance with the employee's level of responsibility, experience and training.

Expected Outcome

Providing care to children and young people in alternative care is guided and informed by duty of care responsibilities. Children and young people are in a care environment that will enable them to thrive and experience the world with guidance and support.

Roles and Responsibilities

Families SA caseworkers, carers and service providers are all bound by duty of care requirements for children and young people in alternative care placements.

Practice Criteria

2.9.1 Reasonable Care

In all steps of service delivery, Departmental employees consider the following when making a *reasonable* decision:

- the risk and seriousness of harm to the child or young person
- the availability of precautions to reduce or eliminate the risk of harm to the child or young person
- the powers that mandate the Department to act in a particular situation
- the usefulness of the activity which involves risk
- any statutory requirements or specific directions e.g. standards and guidelines
- the prevailing standards of the relevant profession
- any other factors relevant to a particular situation must also be considered.

All factors are considered together to determine what is reasonable.

Policies and Procedures

Duty of Care Policy and Practice Guide



Standard 2.10: Reviews

There is regular monitoring of the placement, review of the case plans and files for all children and young people in care to ensure placements meet their individual needs.

Expected Outcome

The circumstances and opportunities for children and young people in alternative care will be reviewed at a minimum annually so that progress is made to helping them reach their full potential.

Roles and Responsibilities

Families SA is responsible for conducting annual reviews in line with the *Children's Protection Act 1993*. Reviews are conducted in partnership with carers, birth families, relatives and relevant services.

Families SA is responsible for reviewing the circumstances and outcomes of the child and young person to ensure the child or young person is afforded every opportunity to reach their full potential.

Families SA caseworkers are responsible for communicating the outcomes of the reviews to all care team participants and incorporating the review recommendations in case planning.

Practice Criteria

2.10.1 The review process is a statutory requirement. *Section 52* of the *Children's Protection Act 1993* requires that the Department review children under the Guardianship of the Minister to the age of eighteen on an *annual basis*.

2.10.2 Reviews include:

- a thorough assessment is made of the child or young person's individual circumstances,
- the review process draws information from significant people in the life of the child or young person to inform the understanding about their current needs,
- cultural advisors are consulted for all Aboriginal and CALD children or young people,
- recommendations contained in psychological assessments will be reflected upon in the annual review
- records relating to all casework activities are maintained and complete.

- case plans identify the goals and actions that will be undertaken between formal case reviews.

As stated in the *Children's Protection Act 1993, Section 52*, participants in the case review process, including the child and young person, carer(s) and the guardians receive a written record of the review considerations, unless it is deemed not to be in the best interests of the child or the whereabouts of the person can not be ascertained.

The caseworker ensures that the Case Plan is amended to incorporate the recommendations from the review process.

2.10.3 Children and young people to be actively encouraged and supported to participate in the review process.

Policies and Procedures

Annual Reviews - Guardianship Practice Guide

Annual Reviews Practice - Draft Templates



Standard 2.11: Care and Protection Court Matters

Care and Protection decisions to occur in a timely manner and in the best interests of the child or young person involved.

Expected Outcome

All care and protection matters will occur in the best interest of the child or young person to ensure safety, continuity and wellbeing.

Roles and Responsibilities

Families SA caseworkers to conduct social work assessments and consult with other key professionals and services to inform care and protection decisions.

Practice Criteria

- 2.11.1 Court applications are considered within the permanency planning and child attachment theory. Decisions are clearly documented in all Care and Protection applications
- 2.11.2 Social workers are familiar with the following Procedures, (*relevant to their job role and duties*):-
 - Family Care meetings
 - powers of the Youth Court in Child Protection
 - application for Care and Protection Orders
 - Crown Solicitors Office procedures
 - rules of the Youth Court
 - preparation and giving of evidence in court
 - procedures with Family Court
 - the role of professional advice and services (e.g. Psychological opinion, Reunification Services).
- 2.11.3 Caseworkers are familiar with and understand the philosophy and intent of the following Legislation governing Care and Protection matters and the Alternative Care sector.
Adoption Act 1988
Children's Protection Act 1993 (as amended in 2006)
Family and Community Services Act 1972
- 2.11.4 Children and young people have an independent legal representative in all care and protection matters.

- 2.11.5 Caseworkers inform families of how to obtain legal representation and access advocacy services.

- 2.11.6 Caseworkers inform carers of court requirements and discuss how they may impact on the children in their care and what role carers can play to support the child in care.

Policies and Procedures

Child Protection Manual of Practice, Volume 2 Version 3- Legal and Court Processes.



Standard 2.12: Supervision, Consultation and Support for Families SA Employees

All Families SA employees are provided with supervision and support to facilitate better outcomes for children and young people in care

Expected Outcome

All employees will participate in supervision processes that promote performance development within the context of our legislative requirements and professional practice.

Roles and Responsibilities

The supervisor and supervisee are both responsible for participating in the supervision process, developing supervision contracts and ensuring that supervision occurs when scheduled.

Practice Criteria

- 2.12.1** All employees enter into a supervision contract with their line manager.
- 2.12.2** Regular supervision occurs and is recorded between the worker and line manager.
- 2.12.3** Consultation and mentoring occurs between the senior practitioner and caseworker, as an essential support and quality assurance function.

Policies and Procedures

Performance Enhancement Policy

3. Care Provision

Core Standard 3: Care Provision

All contracted service providers within the Alternative Care sector will provide children and young people with a safe and secure living environment appropriate to their specific needs. Service providers will be subject to regular monitoring and review to promote quality care provision for children and young people in care.

Children and young people in care have the right to:

- live in a place where they are not hurt or made to feel bad
- know that people care about them
- be treated with respect
- have someone to talk to
- live in a place where
- live in a place where they get nutritious food
- live in a place where they get decent clothes
- live in a place where they have their own bed
- live in a place where they have their own 'space' or a place where they can have some time on their own if they want it
- not have to move too much
- if they are Aboriginal or Torres Strait Islander, know about their cultural and spiritual identity and their community
- have the right to talk to an Aboriginal person, if they are Aboriginal
- have their cultural needs respected
- live in a place where people understand and respect their culture
- medical, dental and other care when they need it
- a good education
- preparation for employment and to live independently
- extra support if they have a disability
- extra support if they have special education needs
- know and be confident that personal information will not be shared without good reason
- develop their talents and interests, like sport or art



Overview

This section sets out the standards and practice criteria for Service Providers and Carer.

The Care Provision Standards will promote safe and appropriate placements for children and young people under the care and Guardianship of the Minister.

The Standards are applicable to all non-government and government alternative care services providing foster care, relative and kinship care, non-family based care, residential care and all carers. The Standards are not applicable to secure care facilities.

The licensing and monitoring process is related to the contractual obligations of non-government services. As such, government service providers will not be required to engage in the monitoring process but are still subject to the requirements of the Alternative Care Standards, related policies and internal reviews. Non-government organisations not licensed under the Family and Community Services Act 1972 will be required to demonstrate compliance with the Standards through service agreements and an internal and ongoing evaluation process.

The Care Provision Standards do not attempt to define statutory case management responsibilities, but rather focus on service provider agencies and the carer requirements. However, current Families SA policies and procedures are documented as they relate to each set of standards to assist in their implementation.

For brevity in this section the term placement Support Worker refers to NGO placement support staff and Families SA Relative and Kinship Care Program staff. The term service provider refers to NGOs providing family and non-family based care and Families SA Relative and Kinship Care Program.

Each Care Provision section begins with a statement of shared values. This paragraph summarises the responsibilities shared between Families SA and the service provider.

Section 3.1: The Needs of the Child or Young Person

Statement of Shared Values

The section of the Standards reflects the commitment of alternative care services across South Australia to provide child/young person-focussed, family-centred services. In practice, this means ensuring that all aspects of care are focussed, listening to and acting on the needs of the child or young person. All life domains of the child or young person are addressed in this section, as well as specific individualised needs relating to culture, identity, special needs, disability and leaving care. Continuity of services, community connections, relationships and interests will be considered and planned for. Meeting the child or young person's needs will depend on case management that is collaborative in nature and ensures each member of the Care Team is able to contribute his or her view. The service provider will play the key role in assisting carers to attend case conferences, contribute to case planning and in the implementation of the outcomes.



Standard 3.1.1: Health of Child or young person

Children and young people have their health optimised through quality care, preventative services, regular assessment, monitoring and treatment.

Expected Outcome

Children and young people have their medical, developmental, optical and dental health needs assessed and case managed to ensure they receive regular preventative appointments and treatment as required.

Roles and Responsibilities

Families SA caseworkers to ensure all children and young people in alternative care have a Case Plan that addresses their health needs.

Families SA and placement/relative/kinship care support workers will provide support to carers to address children and young people's health needs. Caseworkers will maintain Basic Information Records and provide these records to service providers and carers. Carers' views are to be sought regarding the child or young person's health needs.

Practice Criteria

- 3.1.1.1** Carers ensure that the child or young person attends health care appointments as required in the Case Plan.
- 3.1.1.2** Carers ensure that each child or young person is accompanied when attending appointments. Carers provide transport, emotional support and ensure the transfer of accurate information. Where this is not possible, alternative arrangements are made with the statutory caseworker.
- 3.1.1.3** Carers ensure that the child's Health and Medicare cards are accessible when required and are given to the statutory caseworker or new carer in the event of a placement move or planned respite.
- 3.1.1.4** Carers provide children and young people with daily nutritious meals that optimise their health.
- 3.1.1.5** Carers observe and provide for the child or young person's health needs on a daily basis and inform the caseworker of any ongoing, unresolved or new health concerns.
- 3.1.1.6** Carers act as advocates on the child or young person's behalf for access to appropriate health services.

- 3.1.1.7** Care team members assist the child or young person to learn about their health needs and to be actively involved in their health choices and decisions. Children and young people are encouraged to lead a healthy lifestyle and make informed health choices.

Policies and Procedures

Guardianship and Alternative Care Manual

Operational Guidelines for non-family based care options

Health Standards for Children and Young People under the Guardianship of the Minister

SA Dental Agreement



Standard 3.1.2: Education, Training & Employment

Children and young people in care receive educational, training and employment opportunities that promote each child or young person's strengths, abilities and individual preferences.

Expected Outcome

Children and young people in care will be supported in their education, training and employment to achieve success and reach their full potential.

Roles and Responsibilities

The case management process ensures that children and young people in care undertake an assessment of literacy and numeracy skills and they have an Individual Education Plan developed as required. The case management process considers continuity of education, training or employment and ensures that uniforms, equipment, school outings/activities are financed to enable the child to meet their educational, training or employment outcomes.

Each child or young person in care will have an Individual Education Plan (IEPs). The IEP describes strategies to address the particular educational needs of the child or young person, including preschool/school attendance, behaviour management and strategies to enhance their achievement. The IEP is developed by preschool/school staff (e.g. school counsellor, director or principal) in conjunction with the child or young person, their caregiver, caseworker and professionals involved in providing services for the child or young person (Families SA Individual Education Plans Guardianship Practice Guide).

Families SA will support Carers to provide suitable resources to support study. This may involve a discussion with the carer regarding where the child can study in the home and how these pursuits will be supported.

Practice Criteria

- 3.1.2.1** The service provider supports the carer to meet the expectations outlined in the child or young person's IEP.
- 3.1.2.2** The service provider supports carers to provide an environment in which learning is valued and expectations regarding school attendance are firmly established. Care team members promote lifelong learning, encouragement of reading and encouragement of partnership with schools by carers. Carers assist children and young people to develop aspirations for the future in terms of employment/career through education.

3.1.2.3 The service provider assists carers to manage a child/young person's suspension or exclusion from school in consultation and collaboration with DECS and the caseworker.

3.1.2.4 The service provider provides carers with information and support in regards to school related problems.

3.1.2.5 Carers work in partnership with the caseworker and the school to address education and behaviour needs.

3.1.2.6 Carers provide children and young people with an appropriate place to study and support them to access information technology.

3.1.2.7 Carers assist and support children and young people with homework and access to school support services as required.

3.1.2.8 Carers provide an environment in which learning is encouraged through reading and creative play opportunities.

3.1.2.9 Carers encourage the child or young person to participate in educational trips and extra curricular activities in accordance with the young person's wishes. Expenses will be negotiated with the caseworker.

3.1.2.10 Carers keep a copy of school reports and ensure that in the event of a placement move, these documents move with the child. The carer provides the caseworker with the original school report.

Policies and Procedures

Families SA Education-Individual Education Plans, Guardianship Practice Guide

Families SA Education - Suspension and exclusion, Guardianship Practice Guide

Families SA Education - Change of School at Time of Placement, Guardianship Practice Guide

Families SA Education - TAFE SA, Guardianship Practice Guide



Standard 3.1.3: Emotional Wellbeing and Mental Health

Children and young people have their emotional wellbeing and mental health needs met in order to support them to reach their full potential.

Expected Outcome

The care experience of children and young people in care will promote their emotional wellbeing, positive mental health and prepare them for adulthood.

Roles and Responsibilities

Families SA will ensure as part of the case planning process that children and young people have access to appropriate emotional supports and mental health services. Carers to provide support and encouragement promote the child or young person's wellbeing and self-esteem. Carers to provide the environment to enable children and young people to feel and experience sense of belonging.

Practice Criteria

- 3.1.3.1** The service provider assists the carer in developing appropriate attachment relationships that are nurturing, consistent with safe caring practices, and take into account the child/young person's birth family attachments.
- 3.1.3.2** Through training and support, the service provider ensures that carers are equipped to provide children and young people with factual information about emotional wellbeing, mental health issues, alcohol and other substance abuse, relationships, sexuality and sexual health, including how to access relevant services.
- 3.1.3.3** The service provider and Families SA give carers access to information, training and support to care for children and young people who are having suicidal thoughts or displaying self-harming behaviours.
- 3.1.3.4** Carers encourage children and young people to form appropriate emotional connections with their birth families, carers, their peers and their communities that are based on a sense of belonging and being appropriately cared for and nurtured. These relationships are respected and preserved throughout the placement and beyond.

3.1.3.5 Carers provide children and young people with opportunities and assistance to access sporting, leisure and recreational activities that target their needs, interests and ability.

3.1.3.6 Carers treat the child or young person with fairness, respect and dignity, at all times taking into account their wishes and feelings.

3.1.3.7 Carers are assisted by the service provider to recognise the implications of the child and young person's previous experiences and assist with the resolution of personal difficulties and development of problem solving skills.

3.1.3.8 Carers support therapeutic strategies as recommended in the Case Plan.

Policies and Procedures

Interim Practice Guide, Suicide and Self Harm Behaviour, Emergency Accommodation

Life Domain Assessment Tools





Standard 3.1.4: Indigenous, Cultural And Spiritual Heritage

Each young person's Indigenous, cultural, spiritual and religious heritage is respected, strengthened and maintained.

Expected Outcome

Children and young people in care will experience a strong connection with their Indigenous, cultural, and spiritual heritage.

Roles and Responsibilities

Families SA will ensure placements adhere to the Aboriginal Child Placement Principle as enshrined in legislation, in which placement within the family, kinship and community networks is of priority without compromising the child or young person's safety or best interests.

Cultural maintenance plans will be developed on entry to care for all Aboriginal children and young people.

Practice Criteria

- 3.1.4.1** Families SA and the service provider support case planning that includes developing Cultural Maintenance Plans with input from local Aboriginal Services/Groups/Forums and Gazetted organisations.
- 3.1.4.2** Families SA and the service provider support relative, kinship and community carers with timely and helpful information to fulfil their role as carers. These services are delivered in a culturally sensitive manner including use of interpreters and cultural consultants.
- 3.1.4.3** The service provider has guidelines and procedures in place to support carers of children from Indigenous backgrounds and ensures that the child or young person's cultural and linguistic needs are met. This includes providing information about culture, celebrations and links to appropriate community resources.
- 3.1.4.4** Caseworkers and carers support the child/young person's cultural needs with day-to-day support such as transport to cultural events, respect for religious laws, attendance at funerals, providing appropriate food and access to religious celebrations, as agreed in the Case Plan.

- 3.1.4.5** Carers and caseworkers assist children and young people in developing skills to address racial discrimination and advocate on the child or young person's behalf as appropriate.

- 3.1.4.6** Indigenous children and young people have access to a caseworker/community person/volunteer/relative from the same Indigenous background.

Policies and Procedures

Families SA Relative, Kinship and Specific Child Only Care: Policy, Practice Guideline and Procedure



Standard 3.1.5: Cultural And Linguistically Diverse Heritage

Each child or young person's cultural and linguistically diverse heritage is respected, strengthened and maintained.

Expected Outcome

Every child or young person in care will have the opportunity to remain connected to their cultural community.

Roles and Responsibilities

Families SA will ensure placements contribute to the maintenance of cultural identity, as enshrined in legislation. Care planning will ensure placements with family, relatives and community networks is undertaken without compromising the child's or young person's safety or best interests.

Cultural maintenance plans will be developed on entry to care for all children from culturally and linguistically Diverse (CALD) backgrounds

Practice Criteria

- 3.1.5.1** Families SA and the service provider adhere to the placement hierarchy, where placement within the family, kinship and community networks is of priority without comprising the child or young person's best interests or safety.
- 3.1.5.2** The service provider, statutory agency, and carers work in partnership to implement the Case/Care Plan and connect children with their cultural communities, activities, events and celebrations. Children and young people's wishes and feelings are taken into account regarding their cultural and religious needs.
- 3.1.5.3** The service provider ensures that supervision and support is appropriately tailored to meet the immediate needs of carers who are recent arrivals in Australia. This may involve increased assistance accessing community resources and ensuring that the carers own needs are met to enable a safe placement to be provided.
- 3.1.5.4** The service provider ensures that training is appropriately tailored to meet the needs of carers who are recent arrivals in Australia. This may include training regarding the increased use of home based one on one training, linking with community services, language assistance and training that is gender specific when undertaking safe caring discussions.

- 3.1.5.5** The service provider assists carers to enable children and young people in their care to address identity issues associated with living in Australia.

- 3.1.5.6** Children from culturally and linguistically diverse backgrounds have access to a caseworker/community person/volunteer/relative from the same cultural background.

Policies and Procedures

Families SA Relative, Kinship and Specific Child Only Care: Policy, Practice Guideline and Procedure

Family Contact Practice Guidelines

Transitioning from Care Policy (metro)

Transition Planning for Young People Leaving Care practice guide (metro)

Memorandum of Understanding between the Commonwealth of Australia and the State of South Australia in relation to Unaccompanied Humanitarian Minors



Standard 3.1.6: Connections With Family, Kin And Significant Others

Children and young people are encouraged to strengthen or maintain connections with their birth families, extended relatives, former carers and significant others, peers, clan, and community.

Expected Outcome

Children and young people under the care and protection of the Minister will remain connected to their birth families and communities.

Roles and Responsibilities

Relative care and specific child only options will be given priority consideration before seeking an alternative care placement.

Contact with birth families, relatives, significant others, peers, former carers, clan and community are considered as part of the development of the Case Plan and specific actions required are negotiated and recorded as part of the Alternative Care Agreement. Continuity of peer contact and the existing social network and community will be considered prior to the child coming into care. When developing plans regarding contact the wishes and feelings of the child or young person will be paramount and feedback from carers will be sought regarding the child or young person's behaviour before and after contact visits.

Families SA recognise that relative kinship carers require intensive support in managing family issues that can be exacerbated by family contact and reunification plans. Relative carers will be listened to and concerns addressed by Families SA regarding the role they play in supervision of family contact as this can place them in a compromised position within their family.

Practice Criteria

- 3.1.6.1** The service provider ensures the carer is supported to facilitate contact, including being debriefed in the event of critical incidents and forwarding of relevant information to the caseworker.
- 3.1.6.2** Carers actively promote birth parent, sibling, extended kinship and community contact through participation in Families SA case planning and the Alternative Care Agreements and assisting with day-to-day arrangements.

3.1.6.3 Where appropriate carers promote the continuity of social, educational and recreation activities that existed prior to the child or young person coming into care.

3.1.6.4 Carers, in conjunction with Families SA, promote and encourage connections with former carers in accordance with the Case Plan and child or young person's wishes or feelings.

3.1.6.5 Carers ensure that birth families are talked about in a positive way and are treated with respect at all times.

3.1.6.6 Carers observe the child or young person before and after contact visits and forward any significant information to the caseworker.

3.1.6.7 Carers support children and young people to visit their friend's homes, or have friends visit their home, including overnight visits, with appropriate parent/carer and departmental permission.

3.1.6.8 Carers who are involved in the development of contact plans are provided with clear information of their role, purpose and boundaries of contact.

Policies and Procedures

Relative Kinship and Specific Child Only Care: Policy, Practice Guidelines and Procedure

Practice Guidelines for Contact



Standard 3.1.7: Identity

Children and young people will be supported in the positive development of their identity and self esteem and be allowed individual expression.

Expected Outcome:

Children and young people in care will develop a strong sense of themselves within their community that will provide a foundation for adult life.

Roles and Responsibilities:

Each child or young person's Case Plan addresses the child or young person's unique needs and plans to develop their sense of personal history and cultural identity, interests, strengths and life choices. All children and young people on short term and long term orders will have a Life Story Book for documenting significant events in their lives.

Practice Criteria

- 3.1.7.1** The service provider supports carers to value diversity and meet each child or young person's needs and personal interests in terms of gender, religion, language, culture, disability and sexuality as identified in the Case Plan and the Alternative Care Agreement. These issues are addressed in training and home visits.
- 3.1.7.2** The service provider and carers ensure that children and young people are clothed in a manner that complies with community expectations and allows the young person age appropriate choice and self-expression.
- 3.1.7.3** Carers encourage the child or young person to develop a strong sense of their own unique qualities, family, personal history, as well as an understanding of their own skills and interests. This is reinforced through carers providing a nurturing environment and positive day-to-day interactions.
- 3.1.7.4** The service provider provides training and support to carers to ensure they participate in life story work, including the use of geno-grams, eco maps and the preservation of significant photos and keepsakes.

3.1.7.5 Carers provide children and young people with age appropriate spending money and earning opportunities where appropriate.

3.1.7.6 Carers and caseworkers work with cultural advisors, community groups/forums/elders to promote identity, connection to family and community.

Policies and Procedures

Guardianship and Alternative Care Manual





Standard 3.1.8: Disability and special needs

Children and young people with disabilities and special needs are cared for in a safe and supportive environment that promotes personal growth and participation, maximises developmental potential and ensures quality of life

Expected Outcome

The special and unique needs, talents and interests of each child and young person in care will be considered and planned for, ensuring they have access to equipment, therapy developmental activities and life opportunities which enable their nurturance, development and participation in the community.

Roles and Responsibilities

Families SA will support all members of the Care Team to work in partnership in a collaborative case planning process that recognises the unique roles, skills and relationships that each member plays in the life of the child.

Practice Criteria

- 3.1.8.1** The service provider ensures that the day-to-day arrangements to address the child or young person's disabilities and special needs are discussed and planned with the carer. This will include working with specialist disability support agencies to ensure the child or young person receives appropriate support, developmental, therapeutic and recreational activities.
- 3.1.8.2** The service provider ensures that the carer receives information and training regarding the child or young person's disability and special needs and is supported to manage their specific care needs
- 3.1.8.3** The service provider assists the carer to work in partnership with appropriate agencies and services within the disability and community sector and to develop specific skills required such as appropriate communication between the child or young person and the carer.
- 3.1.8.4** Carers work with all members of the Care Team to advocate for a young person to have access to educational and developmental opportunities which take into account their special needs or disability.

3.1.8.5 The service provider supports the carer to plan for the young person to transition into independent living or alternative accommodation when independent living is not appropriate, working collaboratively with disability services. Please Note: It should be recognised that many young people with a disability (particularly those with an intellectual disability) are not ready for independent living at a chronological age of 18 years. In such cases, transition from care planning and alternative supported accommodation arrangements will be required.

3.1.8.6 The service provider assists the carer to implement care strategies that maximise developmental potential, support independent living and skill development, behaviours and appropriate communication skills. Planning for transition to independent living is negotiated in accordance with the Case Plan.

3.1.8.7 Carers implement agreed crisis management strategies as stated in the Case Plan.

3.1.8.8 Families SA and Service providers provide respite support to carers.

3.1.8.9 All care team members enhance the child's abilities and provide opportunities to enable children with disabilities to reach their full potential.

Policies and Procedures

Department for Families and Communities Equity of Access to Health Services for People with Disabilities: Policy Statement and Strategic Directions

Department for Families and Communities Disability Action Plan.



Section 3.2: The Management of the Placement

Statement of Shared Values

This section addresses the minimum expectations regarding the management of the placement whilst the child or young person is in care. In developing this section, the sector acknowledges that providing quality placements for children and young people requires the statutory agency, the service provider and carers to work together as part of a 'Care Team.' The Care Team works collaboratively to ensure the voice of the child or young person is listened to and to observe that good practice is delivered at all stages of the placement including matching, ensuring child or young person participation in case planning and managing transitions. In addition, issues associated with privacy, confidentiality, behaviour management require agreed standards to determine practice. Providing quality service is a shared responsibility that results from clear communication and transparent decision-making.

Standard 3.2.1: Participation

Children, young people, birth families and carers are supported to participate and make choices in case planning and decision-making.

Expected Outcome

Children and young people in care will know and have evidence that their wishes and feelings have been considered in all decisions relating to themselves.

Roles and Responsibilities

Families SA will ensure all members of the Care Team work in partnership with the child or young person to develop the Case Plan and Alternative Care Agreement that reflects the views of all participants. The case plan will outline goals developed with the child or young person. The Alternative Care Agreement will outline agreed roles and responsibilities to respond to the education, health and wellbeing of the child or young person.

All children and young people will be involved in decisions about placements, present and future planning.

Families SA acknowledges the significance of enabling the participation of relative and kinship carers. They bring extensive knowledge and understanding of a child or young person's family background.

Practice Criteria

- 3.2.1.1** The service provider supports the carer to attend case conferences, participate in case planning and assists the carer to understand the relevant Departmental processes and systems.
- 3.2.1.2** The service provider ensures that the carer's views, capacity and ability are considered in case planning and negotiated agreements with regards to the child's best interests. This may include providing assistance in self-advocacy and representation.
- 3.2.1.3** The service provider assists carers to develop skills in listening to children and understanding their perspective by eliciting their views through a variety of mechanisms.
- 3.2.1.4** Carers ensure that children and young people are involved in key decisions about day-to-day life that are age and ability appropriate.



- 3.2.1.5 Carers support the child or young person to attend case conferences, reviews and other planning forums and facilitate access to the caseworker.
- 3.2.1.6 Carers support and advocate for the child and young person at case conferences, reviews and other planning forums.
- 3.2.1.7 Carers are included and acknowledged as an active participant of the Care Team

Policies and Procedures

Charter of Rights for Children and Young People in Care

Foster Carers Charter: *Our Commitment to Relative, Kinship and Foster Carers*

Standard 3.2.2: Privacy and Confidentiality

Children and young people in alternative care placements have their privacy respected and confidentiality observed.

Expected Outcome

Personal information regarding children and young people in care will not be made available to the wider community unless assessed to be in the best interest of the child or young person i.e. sharing the child's medical information with required health services.

Roles and Responsibilities

The service provider works in partnership with the Department to ensure that all personal information about the child or young person, their birth families and their carers is treated with sensitivity and complies with Departmental and legislative requirements.

Practice Criteria

- 3.2.2.1 The service provider provides information and training to staff, carers, contractors and volunteers regarding mandated notification requirements and the way this may influence confidentiality.
- 3.2.2.2 The service provider ensures that promotional publications (photographs and information) do not identify children or young people under the Guardianship of the Minister or any other placement authority without express written approval by the Department and in accordance of the wishes of the child or young person.
- 3.2.2.3 The service provider ensures that each child or young person in care has their own bed in a bedroom and no more than 3 children sleep in the same room on a permanent basis. For relative carers, if this is not possible, the Service Provider Agency assists the carer to take steps to meet these requirements
- 3.2.2.4 Carers are prudent in protecting confidential details regarding the child or young person and ensure that they are not released to the community. Other household members are to be informed on a 'need to know' basis only. Any written information is stored securely in a designated space, and returned the Department when the child or young person leaves the placement



- 3.2.2.5 Carers ensure that there are household rules in place regarding protecting privacy including knocking before entering bedrooms, and private use of the bathroom.
- 3.2.2.6 Carers ensure that each child or young person is provided with adequate secure storage room for personal belongings to prevent damage, theft and to allow for privacy.
- 3.2.2.7 Carers ensure that the service provider agency is informed of any planned changes to sleeping arrangements.
- 3.2.2.8 Carers use observational logs in residential care and other non-family based care settings.

Policies and Procedures

Families SA, Information Sharing and Client Privacy Statement Regarding Children and Young People under Guardianship

Charter of Rights for Children and Young People in Care

Families SA Draft Photo and Media Involvement Practice Guide

Standard 3.2.3: Positive Parenting

Children and young people in care experience positive parenting that promotes the wellbeing of the child or young person and complies with Departmental requirements.

Expected Outcome

Children and young people in care experience parenting techniques that strengthen positive social interactions and promote self-esteem. Age appropriate boundaries will be set and maintained which take into account the child's developmental level.

Roles and Responsibilities

Families SA will assist carers and service provider agencies via the case management process in managing difficult behaviour and preventing placement breakdown. Families SA will work in partnership with the carer to develop strategies to manage any identified behaviour issues, disorders, health needs, and developmental issues.

Practice Criteria

- 3.2.3.1 The service provider provides training for the carer regarding parenting and behaviour management that reinforces positive behaviour and builds the child or young person's self esteem.
- 3.2.3.2 The service provider ensures that each carer is aware that corporal punishment is unacceptable; this includes hitting, punching, pinching, slapping, shaking and all other forms of physical punishment. Other forms of inappropriate discipline such as withholding food, deprivation of basic needs and liberty and emotional abuse are also unacceptable. This information is in written form and is provided to each carer.
- 3.2.3.3 The service provider has an organisational policy and training program to instruct carers in the use of restraint. The use of restraint is only permitted when the Department has given express written consent, is monitored and reviewed by the facility's management.
- 3.2.3.4 Carers make their needs known when they require further support to address challenging behaviour.
- 3.2.3.5 Carers ensure that they only use behaviour management techniques that comply with service provider guidelines and procedures.



3.2.3.6 Carers attend relevant skill development regarding behaviour management and positive parenting as requested by the service provider or other Departmental recommendations.

Policies and Procedures

Guardianship and Alternative Care Manual

Section 3.3: The Roles and Responsibilities of the Service Provider and Carer

Statement of Shared Values

This section is based on the understanding that providing high quality alternative care placements is reliant on the personal suitability, skills and experience of carers. Carers are unique contributors in the Alternative Care sector as they provide for the child on a day-to-day basis. Carers make crucial yet immeasurable contributions to the life of a child or young person. Safety, stability, nurturance, and love all provide a necessary foundation from which the child or young person can grow and develop. We all acknowledge the role of the carer is a difficult one. It requires personal suitability and readiness, an appropriate environment as well as considerable skill. It is the joint responsibility of the Department and the service provider to ensure that carers are able to meet adequate care standards. This section attempts to define the minimum expectations for carers, as well as document the support they can expect in order to undertake this





Standard 3.3.1: Recruitment

Carers are recruited to provide a range of placement options for children and young people in care.

Expected Outcome

All parties work in collaboration in order to promote the value of alternative care and the role of carers. These efforts will be co-ordinated and reflect a commitment to diversity.

Roles and Responsibilities

Families SA will provide research and data to assist service providers in their recruitment campaigns. Data will include a profile of children in care to assist with targeted recruitment. Families SA to work in partnership with services to deliver recruitment information sessions.

Practice Criteria

- 3.3.1.1 The service providers who recruit foster carers have a 'Recruitment Campaign' that is planned and delivered in partnership with Families SA. The strategy is evidence based and takes into account demographic data, the cultural needs of children requiring care and the structure of the carer population.
- 3.3.1.2 The service provider ensures that campaigns are culturally sensitive and respectful of cultural differences.
- 3.3.1.3 Service Providers to consult with Aboriginal/CALD community groups/forums regarding the identification of community members as potential carers.
- 3.3.1.4 The service provider and Families SA - Relative Kinship and Community Care Program demonstrates a process of recruitment founded on the child or young person's community connections and networks for relative, kinship and community carers
- 3.3.1.5 The service provider provides a timely response to potential carers.

Policies and Procedures

National Standards from National Plan for Children, Young People and their Carers

Carers Assessment Manual

Standard 3.3.2: Safety Screening

Children and young people in care have access to safe and appropriate placements that ensure physical, sexual and emotional safety.

Expected Outcome

Children and young people will be safe from harm while in care.

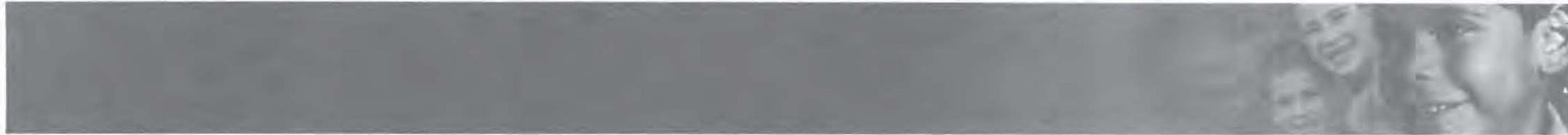
Roles and Responsibilities

Families SA will obtain police and Justice Information Checks on applicants seeking approval and registration as foster carers. Families SA will determine if an applicant meets the standards of approval and advise the service provider in writing.

Families SA and service providers will ensure that carers are supported through the police check process and that the context of a past offence is discussed as part of the assessment process and this is taken into consideration.

Practice Criteria

- 3.3.2.1 The service provider ensures that all carers, staff, volunteers and contractors undergo police checks every three years. (Note: Families SA 'Registration and Licensing' JIS checks all agency and service provider staff on an annual basis).
- 3.3.2.2 The service provider works in partnership with Registration and Licensing to ensure that police checks which reveal crimes of violence, sexual offences or crimes against children will preclude the applicant from being approved as a caregiver (unless additional evidence or factors reduce the risks to the child or young person).
- 3.3.2.3 The service provider ensures that police checks which reveal any other criminal history will be considered as part of the assessment process and may preclude the applicant from becoming a caregiver.
- 3.3.2.4 The service provider ensures that concerns, such as child protection or domestic violence recorded on the Justice Information System or a history of having a child placed in the alternative care system may also preclude the applicant from becoming a caregiver.



- 3.3.2.5 The service provider ensures that applicants who have previously been de-registered by the Approval and Registration Service will be precluded from eligibility for assessment unless otherwise authorised at Families SA at Director level or above.
- 3.3.2.6 The service provider informs Registration and Licensing within 5 working days of becoming aware of any new criminal charge against a carer.
- 3.3.2.7 The service provider ensures that a carer will not receive any new placements while 'on hold' as a result of a Special Investigation. The commencement of a Care Concern will not prevent further placements however this decision rests with Families SA at case management level.
- 3.3.2.8 The service provider provides training on 'Safe Caring Practices' and 'Safe Care of Infants' as compulsory topics in Induction Training for all new foster carers.
- 3.3.2.9 The service provider ensures that all staff, volunteers and contractors are assessed, according to Departmental guidelines, regarding their suitability to work with children placed in the alternative care system.
- 3.3.2.10 Carers inform the service provider of any previous and current criminal history or contact with child protection services during the assessment process and immediately following any subsequent charges or contact.
- 3.3.2.11 Carers advise the service provider or the caseworker as soon as possible of any person, over 18 years of age, who resides in the home, may provide care for children or who will be staying overnight on a regular basis.

Policies and Procedures

- Families SA Relative, Kinship and Specific Child Only Care: Policy, Practice Guideline and Procedure
- Families SA CARS Service Procedures
- Carers Assessment Manual
- DFC Screening and Licensing Branch CrimTrac Security Policy

Standard 3.3.3: Assessment of the Carer

The applicant's ability to provide safe, quality care for children and young people is thoroughly and comprehensively assessed.

Expected Outcome

Carer assessments will be of professional standard and provide assurance of the applicant's personal suitability to care.

Roles and Responsibilities

The Registration and Licensing will ensure all assessments are based on evidenced caring competencies, together with Police and Departmental screening checks, home and environment checks, as well as consideration of personal history that identifies values, skills, relationships, community supports, grief and loss, and an understanding of discrimination, motivation to provide care, the ability to communicate with children and young people and work as part of the Care Team.

Practice Criteria

- 3.3.3.1 The service provider conducts the full assessment with a minimum of three home visits and is completed within five months.
- 3.3.3.2 The assessment worker, on behalf of the service provider, interviews all members of the household and ensures participation in the assessment process as appropriate
- 3.3.3.3 The service provider uses the Departmentally approved carer assessment tool to a professional standard.
- 3.3.3.4 The service provider engages cultural consultants and interpreters to ensure that assessments are culturally sensitive and take into account diverse cultural customs, history and trauma, grief and loss.
- 3.3.3.5 The service provider ensures that a health check is undertaken on each adult carer applicant by a medical practitioner who is in a position, through knowledge of the applicant's health issues, to comment on the applicant's ability to provide suitable care
- 3.3.3.6 The service provider includes two written reference checks by people in a position to give an informed view. Face to face or telephone interviews may be further undertaken particularly if clarification is required regarding an adverse reference.



3.3.3.7 The service provider ensures that the carer is of an age and ability to meet the developmental needs of the child or young person in accordance with Departmental guidelines (25-70 years of age).

Policies and Procedures

Carers Assessment Manual

Families SA Relative, Kinship and Specific Child Only Care Practice Guideline and Procedures

Families SA, Duty of Care Policy



Standard 3.3.4: Assessment of the Care Environment

Children and young people are cared for in a safe and nurturing environment that meets their specific needs.

Expected Outcome

Children and young people in care will live in safe and appropriate environments. The care environment is personalised to meet the individual care needs of a child or young person.

Roles and Responsibilities

The Carer Registration Service will ensure all assessments document safe living conditions. Families SA staff will work in partnership with service providers to ensure placements meet the specific needs of children and young people. Assessment will be part of an ongoing process, through regular visits by caseworkers and support workers.

Practice Criteria

3.3.4.1 The service provider ensures that the carer's home is a comfortable, clean and hygienic environment that meets safety and council requirements, is in a good state of repair with no obvious dangers.

Smoke alarms are installed and operational.

Medicines and toxic materials are kept in child safe storage.

Registered firearms and weapons are locked up at all times and not accessible to children or young people.

3.3.4.2 The service provider ensures that stairs are in good repair, swimming pools and spas comply with council regulations, the property is adequately fenced and any pets are child friendly or secured adequately.

Rural properties and homelands will be assessed in accordance with cultural guidance and community/council requirements.

3.3.4.3 The service provider and the carer ensure that the care environment is able to ensure the safety and maintain the independence of a child or young person with a disability (i.e. The home is fitted with ramps and safety rails (etc) and can accommodate the appropriate equipment, wheelchairs etc.



- 3.3.4.4 The service provider ensures that bunk beds are safe and only used by children and young people where it is appropriate to their age and developmental ability.
- 3.3.4.5 In the case of facility based care, the service provider ensures that the living environment is similar to that of standard homes in the community.
- 3.3.4.6 The service provider ensures that the carer's home allows for age appropriate private space.
- 3.3.4.7 The service provider and the carer ensure that the child/young person's room is furnished in a similar manner to the standard of the remainder of the home.
- 3.3.4.8 The service provider ensures that the carer's vehicle is registered, has seat belts, baby capsule and child car seats as required. The carer will have a current driving licence and appropriate vehicle insurance. Motor bikes are not considered a safe form of transport for a child or young person in care.
- 3.3.4.9 The service provider provides clear guidelines regarding smoking to encourage that all household members smoke outside of the home and not in the presence of children or young people.
- 3.3.4.10 The service provider ensures that, if a child or young person is sharing a bedroom, all children or young people are of a similar age and developmental stage, are of the same gender or are siblings. Carers and Service Provider will ensure that sleeping arrangements are not improvised.

Policies and Procedures

Carers Assessment Manual

Departmental and agency OHS & W policies and procedures.

Standard 3.3.5: Registration and Approval

The Department will register and approve carers. Approval decisions will be transparent and based on the ability of the applicant to provide a safe and nurturing environment.

Expected Outcome

All carers providing care for children and young people under the care and Guardianship of the Minister will be registered and approved by Families SA.

Roles and Responsibilities

The Registration and Licensing Service will ensure that the registration and approval of carers will comply with Departmental and legislative requirements.

Practice Criteria

- 3.3.5.1 The service provider ensures that completed assessment and review reports are forwarded to Registration and Licensing to be held centrally.
- 3.3.5.2 The service provider ensures that a copy of the completed assessment is provided to the carer stating the conditions of approval, agency expectations, carer responsibilities, support and entitlements.
- 3.3.5.3 The service provider ensures that the carer is registered with one agency at a time.
- 3.3.5.4 The service provider is obliged to obtain a carer reference or a summary of caring history prior to accepting the transfer of a carer. A new assessment or an update of the carer's circumstances is also completed via the Review process, as negotiated with Registration and Licensing.
- 3.3.5.5 The service provider has documented eligibility criteria for carer selection and associated decision making documentation is available to carers on request.
- 3.3.5.6 The service provider provides a rationale for non-approval to unsuccessful applicants and informs them of their rights for an administrative review process. However when Families SA makes the final decision for non approval there is no avenue for appeal/ review.



'Prospective Caregivers do not have the right of appeal for non approval Foster Carers' (Assessment Manual Approval Section pg 2 1998).

3.3.5.7 The service provider ensures that if an applicant is not approved, and an appeal not upheld, the applicant must wait 2 years, or provide proof of change of circumstances to the Department prior to commencement of the re-assessment.

Policies and Procedures

Carer Assessment Manual

Families SA, CARS Service Procedures

Standard 3.3.6: Support

All carers are provided with sufficient support to enable them to provide safe and appropriate placements for children and young people in care.

Expected Outcome

Children and young people under the Guardianship of the Minister will experience high quality placements as their carers will be well supported and included as valuable members of the Care Team.

Roles and Responsibilities

Families SA caseworkers will work in partnership with the service provider agency to ensure the carer is receiving emotional and practical support.

Families SA will support service provider agencies in meeting a carer's needs through service development, contract management, licensing and standards monitoring.

Practice Criteria

3.3.6.1 The service provider ensures each carer is allocated an appropriately qualified Placement Support Worker for supervision and support.

3.3.6.2 The service provider visits the carer's home on a minimum eight weekly basis for support and supervision. Home visits will increase in frequency if required by the carer, service provider agency or Families SA.

3.3.6.3 The service provider ensures that during the home visit the following topics are discussed and actions are identified:

- child or young person's life domains cultural considerations, and special needs
- care environment, personal circumstances and interpersonal issues
- adequacy of carer support, critical incidents,
- relationships with birth family and the impact of contact
- partnership with the Department and other agencies.

3.3.6.4 The service provider ensures that the Placement Support Worker observes the child or young person on a regular basis and is in an informed position to comment on the relationship between carer and child.

3.3.6.5 The service provider documents all home visits and provides a copy to the carer.



- 3.3.6.6 The service provider and Families SA work in partnership to provide extra support to carers who have children or young people in their care with identified special needs or disability as per the Case Plan and the Alternative Care Agreement.
- 3.3.6.7 The service provider makes telephone contact with the carer at a minimum of four weekly intervals and returns calls as soon as possible.
- 3.3.6.8 The service provider supports, informs and advocates for the carer regarding their rights and entitlements.
- 3.3.6.9 Professionals in the Care Team ensure that the carer is aware of their rights and responsibilities under the Foster Carers' Charter and work with the carer in a manner which protects the carers' rights and assists them to meet their responsibilities.
- 3.3.6.10 The service provider and Families SA have a management system and procedure for providing a 24-hour emergency support to the carers.
- 3.3.6.11 The service provider provides the carer with written information about peer support activities including support groups and peak bodies.
- 3.3.6.12 The service provider ensures that respite is made available on a planned basis, in accordance with the child or young person's Case Plan/Care Plan.
- 3.3.6.13 Carers ensure they are available for home visits and agree to cooperate with the Case Plan and the service provider
- 3.3.6.14 Carers maintain contact with other carers through peer support and group activities.
- 3.3.6.15 The carer ensures the Families SA caseworker and the Placement Support Worker are able to talk with and see the child or young person as required.
- 3.3.6.16 Service providers ensure that non-family based carers (Agency staff, Residential carers) are provided with supports in accordance with Operational Guidelines. Examples of required supports are use of log books, access to mobile phones, attendance at care/ case plan meetings,

Policies and Procedures

Service Level Agreements with Service Provider Agencies

Standard 3.3.7: Training

All carers are provided with and participate in appropriate training in order to develop and maintain the necessary carer competencies to fulfil their caring role. This includes induction and ongoing training.

Expected Outcome

Carers will be skilled and able to meet the demands of the caring role.

Roles and Responsibilities

Families SA will work with service provider agencies to ensure training is flexible and includes a range of adult learning techniques including competency based, one to one and home visits. There are clear carer participation requirements. Accessibility is considered through careful planning of venue, times, dates, childcare and transport. Training opportunities are documented and monitored.

Families SA recognises that relative carers require training that is flexible and oriented towards validating the carers changing life experience, promotes strengths and leads people to identify their own learning needs.

Practice Criteria

- 3.3.7.1 The service provider and Families SA ensure carers are provided with training that corresponds with approval status and the age, developmental stage and any special needs of children in their care. All carers providing placements for children aged 0 to 2 years are provided with training regarding Sudden Infant Death Syndrome, Safe Infant Care and childhood developmental needs prior to placements being made.

The service provider ensures that carers have access to training to ensure that they understand and have the skills to care for children with special needs/disabilities.

The service provider works with specific disability agencies to ensure appropriate training and information be provided regularly to carers.

- 3.3.7.2 The service provider ensures that all training is delivered in partnership with carers and facilitation is shared between trained carers and Placement Support Workers.

3.3.7.3 The service provider ensures that each individual carer's personal



skill development needs and the needs of the child are discussed with the carer and an agreed action plan is developed and documented.

- 3.3.7.4** The service provider provides a range of flexible training opportunities based on adult learning principles including formal training sessions, 1:1 training in the home, peer training, conferences and workshops.
- 3.3.7.5** The service provider considers the potential barriers to carers attending training and takes steps to address these. This includes consideration of venue, times, school holidays, providing child care and reimbursement of transport costs incurred.
- 3.3.7.6** The service provider ensures that applicant carers from Indigenous and culturally diverse backgrounds are provided with culturally appropriate training led by suitable trainers.
- 3.3.7.7** All carer training is evaluated by participants and this information is used to inform the further development and improvement of ongoing training.
- 3.3.7.8** Training is available to carers who have cross cultural placements.
- 3.3.7.9** The service provider develops policies, procedures and training programs for 'Child Safe Environments'.

Policies and Procedures

Families SA Child Safe Environment Training Package

Standard 3.3.8: Carer Review

Reviews will occur at a minimum of annually to provide opportunities for mutual feedback, identify learning needs and to ensure carers are appropriately approved and supported to provide safe and appropriate care for children and young people.

Expected Outcome:

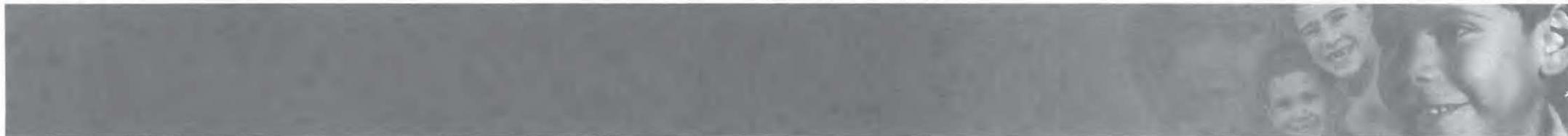
The carer's skills, experience, circumstances and personal suitability will be reviewed annually to ensure they are well equipped to provide ongoing high quality care.

Roles and Responsibilities:

Families SA via Registration and Licensing will support service provider agencies in processing carer reviews before the registration end date. Service Providers will be informed of the outcome of the review in writing.

Practice Criteria

- 3.3.8.1** The service provider ensures that all carers are reviewed at 12 monthly intervals and also immediately following a Special Investigation. This review will involve feedback from all stakeholders including the child and the caseworker and considers the appropriate approval criteria for continuing re-approval.
- 3.3.8.2** The service provider has a Review process which is thorough, based on the Alternative Care Standards, considers the behaviour of the carer and child in context and supports the natural justice rights of the carer.
- 3.3.8.3** The service provider to seek information from Families SA to inform the reviews.
- 3.3.8.4** The service provider ensures that the carer's ability to meet the specifications in the Alternative Care Standards is discussed. Any breaches of the standards are discussed and documented and an action plan for addressing issues is developed and documented, including training needs.
- 3.3.8.5** The Service provider ensures the annual carer review considers all placements with more than three foster children (termed 'Exceeds Numbers') and comments on whether the original approval category needs to be revised.



- 3.3.8.6 Based on the review outcomes the service provider must make any required recommendations for further training and development is made.
- 3.3.8.7 The service provider considers and acts on all recommendations from a Special Investigation Report and develops an action plan to ensure that identified carer and or systems issues are addressed. The action plan is to be completed prior to a further placement being made.
- 3.3.8.8 The service provider provides the carer with a copy of their Annual Review Report.
- 3.3.8.9 The carer participates in the Annual Review.
- 3.3.8.10 The service provider conducts carer exit interviews when carers leave.

Policies and Procedures

Carer Assessment Manual

Families SA, CARS Service Procedures

Section 3.4: The Service Provider Organisational Management

Statement of Shared Values

Families SA recognises that our partnerships with non-government agencies are crucial in delivering high quality services to children in care. Our non-government partners provide community based support that is crucial in supporting individual carers. Our contracted service providers must be of sound quality and be able to deliver on contractual obligations. The following section details minimum requirements for alternative care service providers including organisational planning, a commitment to continuous improvement and compliance with financial reporting requirements. This section attempts to be simple in its application in recognition of other organisational service improvement programs currently in use.





Standard 3.4.1 : Organisational Planning

Each service provider has in place mechanisms for effective organisational planning.

Expected Outcome

Service Provider Agencies will offer alternative care programs that are of high quality, meet legislative licensing requirements and reflect a commitment to organisational planning.

Roles and Responsibilities

Families SA seek to support service provider agencies improve their service via service development, contract management and standards monitoring.

Practice Criteria

- 3.4.1.1** The service provider has operational plans, including program and service plans, linked to the strategic plan.
- 3.4.1.2** The service provider has mechanisms to review and update the plan.
- 3.4.1.3** The service provider has an established risk management framework and supporting procedures.
- 3.4.1.4** The service provider has an established change management framework.
- 3.4.1.5** The service provider works in partnership with Department for Families and Communities to achieve standards of good practice in management operations and service delivery outlined under the Service Excellence Framework (SEII)

Policies and Procedures

- Keeping Them Safe-In Our Care Consultation and Implementation.
- Current strategic agenda for the Department for Families and Communities
- Current Families SA Business Plan
- South Australia's Strategic Plan
- Service Excellence Framework - (SEII)

Standard 3.4.2 : Commitment to Service Improvement

There is a demonstrated commitment to monitoring, evaluating and continuous improvement of alternative care services and programs for children and young people.

Expected Outcome

Families SA and Service Provider Agencies will offer alternative care programs that are of high quality and reflect a commitment to ongoing improvement.

Roles and Responsibilities

Families SA seek to support service provider agencies improve their service via service development, contract management and standards monitoring.

Practice Criteria

- 3.4.2.1** Families SA and the service provider have processes in place to involve children and young people, carers, young people, staff and other stakeholders in decision making, evaluation, development and delivery of agency plans.
- 3.4.2.2** The service provider conducts exit interviews and carer satisfaction surveys. Information about children, carers and staff is gathered, data collated and analysed and is used for ongoing service planning and development.
- 3.4.2.3** Families SA and service provider demonstrate organisational compliance with the Standards of Alternative Care and participate in all quality assurance mechanisms as requested by the Department.
- 3.4.2.4** Families SA and the service provider work with carers to facilitate cooperation with the Alternative Care Standards.
- 3.4.2.5** The service provider provides service data in accordance with Departmental requirements.
- 3.4.2.6** Families SA and the service provider demonstrate a commitment to the on-going development of a child safe organisation.
- 3.4.2.7** Families SA and the service provider work in partnership with Department for Families and Communities to strengthen, build and facilitate service improvement as outlined under the Service Excellence Framework (SEII).



Policies and Procedures

Australian Business Excellence Framework
Service Excellence Framework - (SEII)

Standard 3.4.3: Management and Governance

Management and governance processes of Families SA and non-government organisations support high quality alternative care service provision.

Expected Outcome

Families SA and alternative care service providers in South Australia will have management and governance structures that function effectively and meet the needs of children and young people.

Roles and Responsibilities

Families SA seek to support service provider agencies via service development, contract management and standards monitoring.

Practice Criteria

- 3.4.3.1** Families SA alternative care services and NGO service providers are managed by appropriately qualified and experienced staff with a commitment to children and young people and knowledge of alternative care issues.
- 3.4.3.2** Families SA alternative care services and NGO service providers are subject to regular reviews participate in performance development and improvement processes.

Policies and Procedures

Australian Business Excellence Framework
Service Excellence Framework - (SEII)

Standard 3.4.4: Premises and Equipment

The service provider has premises and equipment that are safe and suitable for a well functioning alternative care service.

Expected Outcome

The Service provider agency is well equipped to deliver services to children, young people and their carers.

Roles and Responsibilities

Families SA seek to support service provider agencies through service development, contract management, standards monitoring and licensing.

Practice Criteria

- 3.4.4.1** The service provider ensures that the premises comply with Occupational Health, Safety and Welfare regulations and legislation.
- 3.4.4.2** The service provider has premises that are accessible to, and suitable for, people with disabilities.
- 3.4.4.3** The service provider has a designated First Aid officer and First Aid kits are available in the office.
- 3.4.4.4** The service provider has facilities that support efficient and effective implementation of services which meet legislative requirements and standards.
- 3.4.4.5** The service provider has policies and procedures relating to the use of equipment such as cars and mobile phones.
- 3.4.4.6** The service provider ensures all staff vehicles are registered and insured.
- 3.4.4.7** The service provider gives staff access to communication and support systems when working after hours or away from the office.
- 3.4.4.8** The service provider has public liability and professional indemnity insurance in accordance with Departmental requirements.
- 3.4.4.9** The service provider ensures that an asbestos register exists if required.
- 3.4.4.10** The service provider has a current Facilities License

Policies and Procedures

Risk and Hazard Management Guidelines



Standard 3.4.5: Fund Management

Funds are managed in a responsible manner and reported about in accordance with Departmental requirements.

Expected Outcome

The financial management of the service provider agency supports the delivery of high quality services to children, young people and their carers.

Roles and Responsibilities

Families SA seek to support service provider agencies through service development, contract management, standards monitoring and licensing. Funding reporting mechanisms will be clearly specified in service level agreements.

Practice Criteria

- 3.4.5.1** The service provider uses allocated funds in a manner that complies with their service agreement specifications and has delegated responsibility for budget expenditure and monitoring.
- 3.4.5.2** The service provider ensures proper and prudent management and accounting practices are in place in order to deliver contracted obligations.
- 3.4.5.3** The service provider ensures that funds can be accounted for and distinguished from other funding sources in accordance with Departmental requirements.
- 3.4.5.4** The service provider's expenditure and financial systems are subject to audit by Families SA

Policies and Procedures

Treasurer's Instructions relating to Grants Management

Standard 3.4.6: Information and File Management

Case records are documented, maintained and secured.

Expected Outcome

The service provider agency's information and file management practices support the delivery of high quality services to children, young people and their carers.

Roles and Responsibilities

Families SA seek to support service provider agencies through service development, contract management, standards monitoring and licensing.

Practice Criteria

- 3.4.6.1** The service provider ensures that case files are accurate, current and reflect policy and procedures regarding information management
- 3.4.6.2** The service provider has a filing system in place that ensures sensitive handling of carer records and procedures regarding secure storage.
- 3.4.6.3** The service provider has procedures regarding file transfers that ensures confidentiality and tracking of file movements.
- 3.4.6.4** The service provider has policies and procedures relating to confidentiality, storage and archiving of client and carer information, release of information and maintenance of carer and young person information.
- 3.4.6.5** The service provider ensures that information about children and young people is handed back to the statutory agency in the event of a placement ending, including information held by the carer.
- 3.4.6.6** The service provider has an efficient and secure system for the collection of service data including collection, retrieval and reporting of information.
- 3.4.6.7** Service providers ensure that non-family based carers use information and file management systems in accordance with operational guidelines such as observation logs.
- 3.4.6.8** Information and File management systems are subject to audit by Families SA



- 3.4.6.9 A daily logbook is maintained and kept secure in non-family based care/residential care settings.
- 3.4.6.10 Carers are encouraged to keep a diary or log containing factual accounts of significant daily events.

Policies and Procedures

Case Recording Guidelines and Standards

Operation Guidelines for Emergency Accommodation - Observation log, diary and running sheets no.20.



Standard 3.4.7: Human Resources

Human resources are managed in a way that ensures recruitment and retention of high quality staff and a positive working environment.

Expected Outcome

Service provider agencies will be staffed by employees, contractors and volunteers that are appropriate for their roles and are well supported.

Roles and Responsibilities

Families SA seek to support service provider agencies through service development, contract management, standards monitoring and licensing.

Practice Criteria

- 3.4.7.1 The service provider keeps appropriate personnel files that reflect qualifications of staff, previous experience and training requirements.
- 3.4.7.2 The service provider has a policy on staff orientation, including induction training.
- 3.4.7.3 The service provider, staff, carers, contractors and volunteers work in a way that facilitates respect, co-operation and teamwork.
- 3.4.7.4 The service provider has safety procedures regarding carer home visits, including the monitoring of staff movements.
- 3.4.7.5 Each staff member has an appropriately qualified allocated supervisor. Supervision sessions, performance management, appraisals and critical incidents are documented and filed.

Policies and Procedures

Occupational, Health, Safety and Welfare policies

Human Resource policies and procedures



4. Participation

Core Standard 4: Participation

Children, young people, birth families and carers are heard, supported to actively participate in decision-making and make choices in case planning.

Children and young people in care have the right to:

- have their thoughts and opinions asked for and considered
- express their opinion about things that affect them
- be involved in what is decided about their life and care

Who should participate in case planning?

Wherever possible, case plans are developed with the participation of the child or young person, their family, carer and other significant members of the care team.

Specific strategies are required to ensure the participation of children and young people, people with disabilities, Aboriginal and Torres Strait Islander people and people from culturally and linguistically diverse backgrounds.

(Participation in Case planning 2007, NSW Department of Community Services)

Overview

This section sets out the participation standards and practice criteria for participation and is applicable to all service providers, Families SA, caseworkers and all carers.

What does participation mean?

Participation means that everyone gets to take part in discussions, express their views, and have their opinion considered in the case planning and decision-making process.

It also means that where Families SA makes decisions or takes action, the people whose lives are affected are given reasons for those decisions or actions, as well as the opportunity to respond.

Why is participation in case planning important?

A case plan is more effective if it has been developed with the participation of all parties. Participation is about inclusion for families, children and young people and carers and ensuring that they are involved in the decisions that affect them.

Where effective and cooperative relationships are established with families during the case planning process, better outcomes are achieved for children and young people.



Standard 4.1: Participation In Decision Making

Children, young people, birth parents and carers have the opportunity to participate in case planning and are included as significant members of the care team.

Expected Outcome

Child or young person and care team members will be active participants in all related decision making.

Roles and Responsibilities

Families SA has the responsibility for ensuring all care team members are consulted and have the opportunity to have their views listened to. All care team members are responsible for participation and expressing their views in a respectful manner that is inclusive of others. The significant role of carers is recognised and acknowledged as they are often the primary carers who have knowledge about the child or young person's needs. Carers are consulted and encouraged to participate in decision making.

Practice Criteria

- 4.1.1 There are strategies to support the direct involvement of children, young people, carers and their families in case planning.
- 4.1.2 Children, young people, carers and birth parents understand all aspects of the case plan.
- 4.1.3 Carers' views are sought about the child's or young person's needs and are actively included in case planning.
- 4.1.4 Children and young people are engaged and consulted when there is a change in a caseworker or carer.
- 4.1.5 Where any participant in the planning process does not have English as their first language interpreters should be considered, even if their language skills seem well developed. Cultural support persons must also be considered.
- 4.1.6 Families SA and service providers must ensure children and young people with special needs, their families and carers/staff are trained and supported in specialist communication techniques that meet the needs of the children and young people.
- 4.1.7 Carers support the child or young person to attend case conferences, reviews and other planning forums and facilitate access to the caseworker.

- 4.1.8 Children, young people, birth parents and carers are included and acknowledged as an active participant of the Care Team.

- 4.1.9 The child or young person, birth family and carers will have the option of a support person to accompany them to case conferences/meetings.

Policies and Procedures

Guardianship and Alternative Care Manual

Charter of Rights for Children and Young People

Foster Carers Charter



5. Care Records

Core Standard 5: Care Records

Alternative Care sector has a well-managed records system to document casework, which is appropriate, accessible and confidential.

Children and young people in care have the right to:

- add information to their personal life
- have all of their personal things kept safe - like photographs, school reports and special belongings.

Overview

This section sets out the requirements of best practice in recording and maintaining care records and is applicable to all service providers, Families SA caseworkers and all carers.

The process of recording and retaining information about children and young people's lives cannot be left to chance. A child or young person in Alternative Care is entitled to access records that accurately reflect their life history.

The Alternative Care sector is required to ensure that the records of children and young persons placed in Alternative Care contain sufficient information necessary to provide quality care. These records should also assist children and young persons in establishing independent lives once leaving care and to respond to queries later in life about their time in care.

Care records need to be comprehensive and contain sufficient information to answer the child or young person's questions about their history and demonstrate the quality of care provided.

Standard 5.1: Case Management System

There is a well-managed case management system to document casework, which is appropriately accessible and confidential.

Expected Outcome

The case management system will provide a structure for all case recordings concerning children and young people in Alternative Care.

Roles and Responsibilities

Families SA caseworker is responsible for maintaining the case management system and ensuring the information is accurate and current.

Practice Criteria

- 5.1.1 Caseworkers responsible for the care and protection of children and young people are trained and proficient in utilising and maintaining the case management system.
- 5.1.2 Appropriately qualified people undertake a random audit at least annually regarding the appropriate use of the case management system and to provide written feedback to staff for ongoing development and training purposes.
- 5.1.3 Confidentiality of records is kept at all times using a 'need to know' principle to determine access.

Policies and Procedures

C3MS Information (To be released once system is implemented)

JIS manuals and procedures

Case Recording Principles and Guidelines



Standard 5.2: Content of Care Records

All Records of children and young people in care contain the information necessary to provide quality care and assist them in establishing independent lives when they leave care.

Expected Outcome

All children and young people in alternative care have access to accurate and current care records.

Roles and Responsibilities

Families SA caseworker is responsible for maintaining care records and ensuring their confidentiality.

Practice Criteria

5.2.1 The record system for each child or young person is a comprehensive collection of electronic, printed and handwritten documents organised for the purpose of retaining a history of the department's and the caseworker's involvement with a client. They are a legal and statutory requirement. A case record includes, but is more than case notes. For example the case record includes:

Minutes of meetings	Reports
Day to day records	Referrals
Consultation sheets	Correspondence
Case plans	Placement history
Court reports	Life Story Records i.e. Photos
Structured Decision Making	Genogram
Electronic recording	Birth Certificate
Medical Records	Court Orders

5.2.2 Each entry requires the recorder's name, position, signature, date of entry, time of contact, purpose of contact, summary of issues discussed and child/young persons views and caseworker to sign each case note

5.2.3 Care records to distinguish between fact, hearsay Facts, description or direct observations and professional opinions.

Policies and Procedures

Case Recording Principles and Guidelines

Standard 5.3: Life Story Collections

All children and young people in Alternative Care will have a life story collection.

Expected Outcome

Every child and young person in care will have a life story collection that accurately reflects their life in care, family history and community connections.

Roles and Responsibilities

All care team participants are responsible for contributing and maintaining life story collections.

Practice Criteria

5.3.1 Caseworkers and carers to work in partnership with child or young person to develop their life story work.

5.3.2 The collection of records of significant events, special moments and objects from a child's life that should be kept and looked after. The collection may include photos, drawings and mementos, and may be kept in a box for safe keeping.

It is a chronological account of the child or young person's history, and should be started when the child enters Alternative care and maintained throughout their time in care.

Policies and Procedures

Families SA Aboriginal Life Story Book



6. Customer Relations

Core Standard 6: Customer Relations

All inquiries, complaints and allegations will be heard and dealt with in a confidential, responsive and fair manner.

Children and young people in care have the right to:

- speak to someone who can act on their behalf when they cannot
- know who to go to if they have a problem or want to complain about something.

Overview

This section sets out the requirements of managing inquiries, complaints and allegations in accordance with the confidentiality requirements and customer service standards.

This section is applicable to all service providers, Families SA caseworkers and all carers.

Families SA seeks to provide its customers, stakeholders and partners with the best service possible including high quality intervention, fair and transparent processes, collaborative decision making and accountability.

The standards aim to promote consistent customer relations across the Alternative Care sector by providing a set of specifications on what a service must provide to Alternative Care customers.

The Standards aim to reduce the number of complaints by ensuring all services work towards a common set of standards and practice criteria. In the event that customer complaints arise the Standards will assist in addressing the customer complaints in a fair and transparent manner.

The customer complaints process is an appropriate way to encourage customers to express their concerns about service delivery and to have them heard and addressed in a safe and transparent manner. Customer complaints help to shape service delivery standards and assist Families SA to assess its performance as part of its continuous quality improvement agenda. *Customer Complaints Handling Policy (20/06/2005)*

Standard 6.1: Rights Of Children, Young People, Families and Carers

The rights of children, young people, families and carers in the Alternative Care system are promoted and they are assisted to exercise these rights.

Expected Outcome

All customers involved in alternative care will be informed of their rights and provided with avenues to exercise their rights.

Roles and Responsibilities

The Alternative Care sector is responsible for ensuring customer service to all alternative care participants. Families SA works in partnership with the sector to ensure children and people in care are informed of their rights and have access to the Charter of Rights for Children and Young People. Carers are included as valued partners who have the right to be informed, be involved, provided with adequate support, respected and treated in an open and fair manner. Birth families are informed of their rights and are provided with supports to be involved and have their views heard.

Practice Criteria

- 6.1.1** Families SA caseworkers provide age appropriate printed material or other forms of information to children and young people in care (with an appropriate cultural context) to inform them of their rights. All children and young people are provided with a copy of the 'Charter of Rights.'
- 6.1.2** Families SA caseworkers inform families of their rights in relation to complaints and appeals.
- 6.1.3** Families SA caseworkers ensure children and young people receive information and support to access an independent advocate or an advocacy organisation. This can be especially relevant for children and young people with special needs.
- 6.1.4** Families SA caseworkers inform children and young people in alternative care about the role of 'Office of the Guardian for Children and Young People.'
- 6.1.5** All carers are informed about the role and function of the Foster Care Liaison Officer, are provided with a copy of the Foster Carers Charter and are informed of their rights.



Policies and Procedures

- Guardianship and Alternative Care Manual
- Foster Carers Charter
- Customer Complaints Handling Policy
- Customer Complaints Resolution Procedures
- Customer Service Standards and Practice Guidelines

Standard 6.2: Confidentiality

The right of confidentiality for children, young people, birth families and carers will be supported in all alternative care matters.

Expected Outcome

Confidentiality principles and practice requirements will be adhered to across the Alternative Care sector.

Roles and Responsibilities

All participants of the Alternative Care sector are responsible for maintaining confidentiality. Families SA caseworkers and service providers will ensure, where required 'exchange of information forms' are signed by the relevant parties. All confidentiality issues will be guided by the best interest of the child, in accordance with Children's Protection Act 1993 and Freedom of Information Act 1991.

Practice Criteria

- 6.2.1 All employees know their responsibilities concerning confidentiality as stated in legislation, *Children's Protection Act 1993, Section 13, 58 (1)* and the *Public Sector Management Act 1995, section 6(c)*.
- 6.2.2 Personal information about children, young people, birth families and carers is kept secure. Release of any personal information must be in accordance with current *Child Protection and Freedom of Information (F.O.I)* legislation.
- 6.2.3 Release of foster carer's personal details is in accordance with *Child Protection legislation Section 51 (3)* and in consultation with carers.
- 6.2.4 Interviews/meetings/case conferences with children, young people and their families occur in a chosen place that respects privacy and the rights of confidentiality.
- 6.2.5 Limits of confidentiality are explained to children, young people, birth families and carer. Examples are duty of care responsibilities or reporting of any disclosures involving criminal activity.

Policies and Procedures

- Families SA Freedom of Information Manual



Standard 6.3: Complaints

Children, young people, birth families and carers are able to express dissatisfaction with an aspect of their alternative care experience. Their complaints will be heard and dealt with in an open, responsive, fair and considerate manner.

Expected Outcome

Complaints will be a valuable feedback mechanism for service improvement and will contribute to better outcomes for children and young people.

Roles and Responsibilities

Families SA and service providers will comply with Departmental complaint resolution mechanisms. In instances where carers, children or young people have made a complaint regarding a service provider agency, Families SA will work to resolve the issue from a service development perspective. Appropriate supports will be provided to carers, birth families and children or young people during complaints process.

Practice Criteria

- 6.3.1** Families SA and the service provider assist carers, children and young people resolve complaints by informal means at the earliest opportunity and utilising conflict resolution/mediation strategies wherever possible.
- 6.3.2** Families SA and the service provider ensure that when handling a complaint they comply with all relevant legislation and act in accordance with Customer Complaint Resolution Procedures.
- 6.3.3** Families SA and the service provider ensure that the management of complaints are conducted respectfully by appropriately trained staff.
- 6.3.4** Families SA and the service provider ensure that carers are given the opportunity to talk about their view of the complaint.
- 6.3.5** Families SA and the service provider ensure that all complaints are recorded, outcomes monitored and that recommendations are taken into account in service development and continuous improvement initiatives.
- 6.3.6** The Families SA, service provider and the carer, assist children and young people to access the Children's Guardian and or other appropriate advocacy services.

6.3.7 All Care Team members ensure that all children and young people in out of home care are aware of the Charter of Rights for Children and Young People and work with children and young people to understand and exercise their rights in this Charter.

6.3.8 The service provider ensures that carers are made aware of their rights to make a complaint and the avenues to do so. The Service Provider Agency assists the carers to make a complaint.

6.3.9 Carers lodge complaints using the appropriate service provider and/or government grievances procedures and systems. All foster carers have access to the Foster Care Liaison Officer to provide support and advice regarding complaints processes.

6.3.10 There are regular reviews of complaints and their outcomes to inform the further improvement of policy and practice.

6.3.11 If families are not satisfied with a decision or services, they can be referred to Health and Community Services Complaints Commissioner.

Policies and Procedures

Customer Complaints Resolution Procedures

Customer Complaints Handling Policy



Standard 6.4: Allegations

Children and young people are able to make allegations regarding their alternative care experience. The child/young person, carers and others will be supported during this experience.

Expected Outcome

Children and young people are safe while in care.

Roles and Responsibilities

Families SA will comply with Special Investigations policy and procedures. Families SA will make all appropriate referrals to ensure children and young people are safe and supported. All necessary information will be made available to service providers to ensure carers are supported during the investigation process.

Practice Criteria

- 6.4.1** The service provider assists the Department in the investigation by providing information and records regarding the carer and their care experience.
- 6.4.2** The service provider keeps the carer informed regarding the progress of the investigation.
- 6.4.3** The Special Investigations Unit, Families SA and the service provider ensure that staff conducting Special Investigations or Care Concerns are appropriately qualified and ensure that Care Concerns are conducted respectfully, fairly and transparently.
- 6.4.5** The service provider assists carers to access an independent advocate or an advocacy organisation. Mechanisms for ongoing communication will be agreed and monitored.
- 6.4.6** The service provider ensures that when the Care Concern or Special Investigation is complete, steps are taken to assist the carer to address the effects of the investigation process and implement any associated recommendations.
- 6.4.7** Carers participate in the investigation as appropriate.
- 6.4.8** Families SA ensure child's safety and emotional wellbeing is managed and supported during a Special Investigation or Care Concerns investigations.

Policies and Procedures

Families SA, Special Investigations Policy and Procedures and Unit Fact Sheet.

7. Transition Planning

Core Standard 7: Transition Planning

Transition planning will occur for children and young people from the onset of entry into care through to leaving care.

Children and young people in care have the right to:

- a special plan for when they leave care
- support and a place to live when they leave care
- be included and have a say in all placement changes
- to be informed and supported during critical transition periods in their lives..

Overview

This section sets out transition planning, leaving and post care standards for best practice and is applicable to all service providers, Families SA caseworkers and all carers.

Transition planning commences from when a child enters care through to when they leave care. It is about assisting children and young people to adjust to new care environments, to forming reconnections with family during the reunification process, to planning for the future and ultimately preparing our children and young people to function as independent adults. The term transition planning is broad and occurs at every stage of a child's or young person's development.

Transition planning in relation to young people leaving care will occur for each young person from 15 years and will gain clarity and intensity as the young person approaches 18 years and/or their planned exit from care. Transition planning will involve a significant degree of flexibility and will be an ongoing process that is likely to change over time.

Transition planning focuses on a specific range of issues, activities and goals dedicated to a young person's effective transition into adulthood that takes place within the broader case planning and review framework. Transition planning will be specific to the individual needs of the young person and will be developed in collaboration with care team members and relevant services.



There is no expectation a young person will be ready for independent living at 15 years. The rationale for early engagement with transition support services is to provide young people with a greater opportunity and more time to develop the knowledge, skills and supports required to live independently and assist in making their transition smoother and more successful.

Families SA Post Care Services can assist care leavers to access services to help strengthen or reconnect with their family and community, access personal records, access community services and programs to meet individual needs.

Standard 7.1: Placement Transitions

Children and young people experience carefully planned placement transitions.

Expected Outcome

Children and young people will experience certainty, stability and wellbeing in care.

All placement changes will occur in a timely manner with transitions supports in place.

Roles and Responsibilities

Families SA will lead all members of the Care Team in working towards well planned transitions and the prevention of placement breakdowns. Settled and stable care will be seen as a priority.

If a placement transition is unavoidable, the Care Team will work co-operatively to ensure that the transition needs of the child or young person and carer are sensitively addressed. This may include debriefing and ensuring that timelines are considered.

In non-family based placements or emergency accommodation settings care plans will be developed to ensure the carer has all the required information documented for successful placement transitions and day to day care requirements.

Families SA recognises that placement breakdown for children and young people in relative care can often represent the potential severance of ties for a child or young person to their extended family unit. Hence support to maintain best connections are imperative in maintaining a child or young person's connections to family/kinship group.

Practice Criteria

- 7.1.1** The service provider and caseworker work in partnership to ensure placement transitions are planned and implemented according to an appropriate timeframe for the child or young person.
- 7.1.2** Caseworkers ensure that if there are any indications that a placement could be disrupted, a case conference is convened to identify strategies to preserve the placement.
- 7.1.3** The service provider ensures that the child or young person is not moved from placement without consultation and authorisation



from Families SA caseworker. If there is disagreement amongst the parties the matter can be referred to the Children's Guardian or Foster Care Relations Officer as appropriate

7.1.4 The service provider and Families SA ensure that a rationale for a placement transition is negotiated and explained in partnership with the carer.

7.1.5 In the event of a placement transition, the service provider works with the carer to ensure that all the child or young person's belongings are moved with the child or young person to the next placement.

7.1.6 In the event of a change of placement, the service provider gives priority consideration to the continuity of the child or young person's relationships, attachments, community and education. The option of placement with former carers is explored.

7.1.7 In the event of difficulties that could lead to placement disruption a carer notifies their support agency within 12 hours.

7.1.8 Carers assist children and young people in transition through planned placement endings. This may involve

- giving care until another placement is found
- giving time to say goodbye
- giving photos and keepsakes, life story collections
- helping to pack belongings into the child or young person's suitcase or travel bag (if child or young person does not have a suitable bag Families SA will purchase a suitcase for the child or young person).

These factors are considered in the context of the wellbeing and safety of the carer family and other children in placement. Information about the child or young person's day to day needs is passed by the carer to the caseworker to assist with the continuation and care of the child.

7.1.9 In accordance with the child or young person's wishes, the carer and young person's time together is acknowledged and celebrated if appropriate.

7.1.10 Carers in non-family based settings are familiar with Operational Guidelines for managing emergency situations.

7.1.11 Where possible children and young people participate in the selection of any new placement

7.1.12 Where possible there is a staged process of introduction and contact with new carers, birth parents, relative carers or kinship carers and caseworkers.

7.1.13 In planning for a placement transition priority is given to continuity for the child or young person in their significant relationships, life experience and attachments. Where appropriate, caseworkers should request a Psychological assessment to inform transition planning.

Policies and Procedures

Families SA, Leaving Care, Transitioning and Post Care Policy

Guardianship and Alternative Care Manual

Emergency Accommodation Operational Guidelines - behaviour management, crisis response management and critical incidents



Standard 7.2: Leaving Care

Children and young people are prepared for adulthood via the development of a transition plan that reflects the unique needs of the young person.

Expected Outcome

Families SA will provide planned and ongoing support for young people leaving care. Preparation for leaving care will begin at 15.

Roles and Responsibilities

The District Centre case manager will facilitate the transition planning process in accordance with the case planning and review framework. The case manager is responsible for ensuring that other agencies will provide assistance and/or case management post 18 years and are also actively involved in the various stages of the transition planning process.

Youth Support Teams will provide the practical life skills supports such as life skills training and development, access to education, assistance with employment and housing supports.

Families SA Anti Poverty Services are committed to providing support to young people transitioning from care to ensure they have access to opportunities to develop financial management and life skills required for independence and adulthood.

Carers will be involved in joint planning with Families SA to ensure they are involved in early transition planning and have the necessary supports to prepare the young person for independence and adulthood.

Practice Criteria

7.2.1 Preparation for leaving care begins at 15 years and involves:

- transition planning
- referral to Youth Support Services
- referral to Anti-poverty services
- referral to other support services as required.

7.2.2 Every young person aged 15 years and over is provided with My Stuff - Leaving Care Kit.

7.2.3 Case planning is undertaken with the young person and significant others to plan for the transition to independent living or other appropriate accommodation placement.

7.2.4

When a young person's order has expired, they can expect the following to have occurred:

- have fully participated in the transition planning process to the best of their ability
- have accommodation and are provided with the required practical and financial support in establishing and maintaining their accommodation
- have been appropriately referred and are receiving the required adult case management services (e.g. Disability SA)
- where required, prior to the expiry of the Guardianship Order that other orders have been put into place for the young person's protection e.g. Administration Order with the Guardianship Board
- be linked into adult health services (e.g. GP, Dentist, therapeutic service), and know how to access them when required
- have a Medicare card
- have an income
- be linked into educational and training opportunities, or know how to get the information and services when required.
- have maintained or re-established links with their family or know who to ask for support when they are ready.
- understand why they have been in care
- have been provided with copies of:
 - their birth certificate
 - care order
 - medical records
 - other relevant documentation
- be aware of the legal implications in relation to the expiry of their Guardianship order.
- be aware of Freedom of Information processes and have been offered the opportunity to peruse their file prior to their order completion or to later engage Post Care services to undertake this process.

7.2.5

In addition, case managers will:

- Support and assist the young person with any queries or concerns they may have about leaving care



- Reinforce that post care services are available to them, even after their involvement with Youth Support Services ends.

7.2.6 Where required, Disability SA or Novita Children's Services are involved in the transition planning at 15 years for all young people with disabilities transitioning from care.
(Note: Disability SA continues to give support into adulthood, whilst Novita would support the planned transition of the young person to Disability SA once they turn 18 years of age).

7.2.7 Where appropriate, Case managers ensure that the young person has been provided with the opportunity to pursue a Victims of Crime VIC application. Note: Current legislation enables a young person to pursue VIC application after they turn 18 years. Best practice should ensure the application process occurs well before they turn 18 years.

Policies and Procedures

Transitioning from Care Policy

Families SA, Transitioning from Care Policy and Post Care Policy

Victims of Crime - Statutory Compensation

Standard 7.3: Post Care

Post Care support will be provided to all care leavers*, regardless of age.

*see definition of care leavers in Transitioning from Care Policy and Post Care Policy

Expected Outcome

Post Care services provided by Families SA will promote and advocate for persons previously in care to receive assistance and support in:

- developing opportunities to re-establish and/or strengthen their connection to family and community
- accessing their personal records
- accessing community services and programs including health, housing, medical, education, housing and financial management, counselling, therapy, life and parenting skills and identity and relationships.

Roles and Responsibilities

Families SA will assist care leavers in accessing the relevant services and supports to enhance their emotional and physical wellbeing.

Families SA caseworkers are responsible for informing young people about post care supports.

Practice Criteria

7.3.1 Ongoing post care supports, financial or case management are at the discretion of the District Centre and require support from the District Centre Manager.

7.3.2 Where the necessary service and supports are of a transitioning nature (e.g. accommodation supports, life skills) and the care leaver is under 25 years, a referral to Youth Support Teams may be given.

7.3.3 Where the necessary service and supports include information, advocacy and referral service, a referral to Post Care Services may be given. There is no upper age limit to this service.

Care leavers can self refer to Families SA Post Care Services.



8. Sector Partnership

Core Standard 8: Sector Partnership:

All service providers within the Alternative Care sector - both government and non-government will work in partnership to deliver accessible and effective services for children, young people and their families.

Policies and Procedures

- Transition Planning for Young People Leaving Care Practice Guide
- Transitioning from Care Policy
- Post Care Policy
- Rapid Response Housing SA, Families SA and Disability SA service delivery guidelines for housing assistance for young people under the Guardianship of the Minister

Children and young people in care have the right to:

- priority access to services
- access to services that meet their needs

Overview

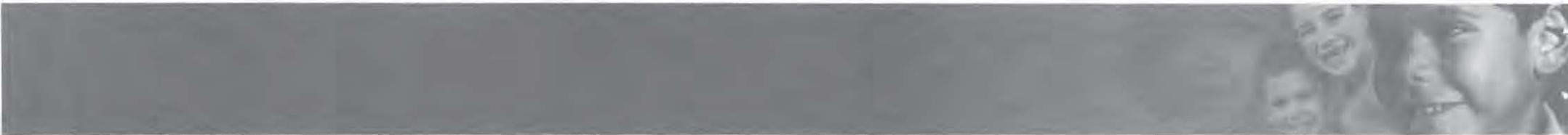
This section sets out the working in partnership standards and procedures for best practice across the Alternative Care sector and is applicable to all service providers, Families SA caseworkers and all carers.

Keeping Them Safe-In Our Care Implementation 2007 promotes Collaborative Partnerships with the Alternative Care sector and states the following:

'Families SA will work with government agencies and non-government partners to find integrated ways of directing resources to deliver better outcomes for individual children and young people in our care - and for providing an environment that creates success'.

This statement of Collaborative Partnership is intended to:

- reflect the partnership between department, approved carers and service providers
- identify the shared principles that inform activities and relationships within the partnership
- clarify the roles of the department, approved carers and service providers in the context of the partnership
- establish the responsibilities and rights of approved carers.



The primary objective of the partnership between Families SA, foster carers and service providers is to work together effectively to promote and ensure the safety and wellbeing of children and young people who require alternative care services (Statement of Commitment QLD-Department of Child Safety 2006).

All parties of the Alternative Care sector share the responsibility of sector partnership and constantly seek ways to ensure that it is imbedded in our daily practice. The Alternative Care Standards in South Australia provides the foundation for sector partnership to forge ahead and demonstrates a shared commitment for effective partnership to benefits our children and young people in care.

Standard 8.1: Partnership with Other Services

All agencies will work in partnership to ensure maximum benefit/services for children, young people and their families.

Expected Outcome

The Alternative Care sector, government and non-government, will work in partnership to plan and provide optimal services and supports for children and young people in Alternative Care.

Roles and Responsibilities

The Alternative Care sector is responsible for promoting partnership. Families SA will work in partnership with the Alternative Care sector to develop partnership practices via Memoranda, Protocols, Service Agreements, joint programs and training.

Practice Criteria

- 8.1.1** There is a file record of agencies involved with each child or young person and their families.
- 8.1.2** Identified agencies are included as participants of the Care Team.
- 8.1.3** Communication is regular between agencies involved in individual cases.
- 8.1.4** Consistent protocols and procedures are followed in working with other service providers in referral, assessment, case planning and review.
- 8.1.5** There is regular contact with other agencies in monitoring the progress of case plans.
- 8.1.6** There is active participation in interagency meetings for Alternative Care.
- 8.1.7** Service Agreements exist between the Department and non-government agencies providing Alternative Care Services.
- 8.1.8** Interagency Code of Practice guidelines or Memoranda of Understanding exist between key government Departments/Divisions such as Health, Housing, and Disability to ensure maximum benefits for mutual customers.
- 8.1.9** Relevant agencies and peak bodies are assisted to develop policies, procedures and training programs for 'Child Safe Environments'.



Policies and Procedures

Guardianship and Alternative Care Manual -Interagency Coordination and Collaboration Section.



Standard 8.2: Rapid Response

All children and young people under the Guardianship of the Minister have prompt access and a coordinated response to services providing a Rapid Response. (The term Guardianship is used as a generic term to include children and young people under custody and guardianship of the Minister, under the Children's Protection Act 1993 section 38, and unaccompanied refugee minors).

Expected Outcome

All care team participants will work in partnership to support children and young people under Guardianship of the Minister to have supported, coordinated and prompt access to government supports and services.

The Alternative Care sector will have a working knowledge of the established protocols and agreements for children and young people accessing services under Rapid Response.

Roles and Responsibilities

Rapid Response services are responsible for ensuring that services are provided in accordance with Rapid Response Memoranda of Understanding, Standards, Service Agreements and Practice Guides. Families SA caseworkers are responsible for accessing or referring to services providing a Rapid Response. Carers and caseworkers will work in partnership to determine what the child's needs are and access services providing a Rapid Response.

Practice Criteria

- 8.2.1** Families SA caseworkers and alternative care providers support carers to attend health appointments and education planning appointments provided under Rapid Response
- 8.2.2** Families SA caseworkers provide the information necessary to facilitate a good services response to children and young people under Guardianship.
- 8.2.3** Families SA and Alternative Care providers engage in local and regional across sector planning forums relating to the planning and providing of services to children in alternative care
- 8.2.4** Families SA and carers adhere to the Health Standards for Children and Young People under the Guardianship of the Minister.



- 8.2.5 Families SA and Carers and participate in Individual Education Planning for pre school, primary and secondary school students for children and young people under the Guardianship of the Minister.
- 8.2.6 Families SA caseworkers and carers ensure young people have the skills, knowledge and supports necessary to live independently when they make the transition from care and demonstrate knowledge and use of Rapid Response Housing SA, Families SA and Disability SA service delivery guidelines for housing assistance for young people under the Guardianship of the Minister, January 2007.
- 8.2.7 Families SA and Carers adhere to the commitments made in the SA Dental Agreement for Children and Young People under the Guardianship of the Minister.

Policies and Procedures

- Rapid Response Housing SA, Families SA and Disability SA service delivery guidelines
- Dental Agreement for Children and Young People under the Guardianship of the Minister
- Health Standards For Children And Young People Under Guardianship of the Minister
- Initial Health Assessment Practice Guide
- Individual Education Plan Guidelines

Standard 8.3: Sharing Information

Relevant information about children and young people under guardianship is shared across government and non-government agencies and with other persons.

Expected Outcome

Sharing of information about the child or young person between approved services will occur in accordance with acting in the best interest of the child.

Roles and Responsibilities

Families SA caseworker will ensure that sharing information forms are signed by the relevant parties and a record of the form is stored on the child or young person's 85 file.

Practice Criteria

- 8.3.1 Caseworkers demonstrate knowledge of Information Sharing and Client Privacy Statement and Guidelines 2005.
- 8.3.2 The disclosure of information is always:
 - in the best interests of the child, and
 - necessary for some purpose, such as making arrangements for the child's education or a medical or professional examination under section 51 of the Children's Protection Act 1993.

Policies and Procedures

Information Sharing and Client Privacy Statement and Guidelines



Glossary of Terms

Aboriginal or Torres Strait Islander: A person of Aboriginal or Torres Strait Islander descent who identifies as an Aboriginal or Torres Strait Islander and is accepted as such by the community with which he or she is associated.

Agency License: License for a registered foster care agency to provide alternative care services for Families SA.

Alternative Care Placement Agreement: An outline of the responsibilities of the child/young person, birth family, caregiver(s), Families SA Social Worker, ACSP Placement Support Worker and others involved at the outset of the placement. This agreement should be regularly reviewed including when the child or young person's circumstances change and the agreement needs to be renegotiated. Any of the stakeholders involved can request that the Agreement be reviewed.

Alternative Care Placements: These include respite, short and long-term foster care, specialized family or foster care, shared care, residential and congregate care.

Alternative Care Service Provider (ACSP): Agencies engaged in providing alternative care services, includes services within Families SA and non-government agencies funded through Families SA

Assessment: The process of collating accurate information, making observations, analyzing and drawing conclusions to make an appraisal of the functioning of a particular family and the child/young person's circumstances and needs.

Birth Family: The child's immediate and extended family of origin. Also known as the Biological Family.

Care Team: The Care Team is the group of people who share the responsibility for the care and development of the child or young person. The Care Team includes the child or young person, the foster/relative carer, the Families SA caseworker/Supervisor, the service provider agency, placement or Relative Care Kinship Support Worker and other key professionals.

Carer: A person who has the responsibility of providing day-to-day care of a child or young person. It includes carers who are relatives, foster carers, residential care workers, childcare workers and youth workers. Also known as Foster Carer and Foster Parent.

Case Management: The process of assessment, case planning, implementing, coordinating and reviewing of the Departmental intervention plan. The Supervisor has the delegated legal responsibility for children and young people who are under a custody or Guardianship order. Case management is a process that ensures that the strategies in the case plan are coordinated and acted upon in a timely manner. While a range of agencies may be involved in providing services to the family the Families SA case manager has the lead role in monitoring and reviewing the implementation of the Case Plan and the achievement of best outcomes for the child/young person and family.

Case Planning & Case Plan: Case Planning is the process of establishing agreed goals and outcomes to meet the identified needs of the child or young person and their family. The child or young person, birth parent(s), Families SA staff, foster carers, alternative care provider staff and other involved agencies should be included in the case planning process. Case planning ensures both immediate and long term needs of the child or young person across the life domains are addressed whilst they are in care. The Case Plan is the agreed goals and outcomes of the case planning process. The Families SA caseworker documents the Case Plan which is placed on the child or young person's file.

Care Plan: Case work in emergency accommodation are the actions that the carer undertakes, in consultation with the allocated Case Manager, in implementing elements of the Case Plan that are relevant to the young person's placement. A Care Plan is used to organise and document the implementation of these actions.

Caseworker: The social worker, youth worker, caseworker or case manager in Families SA who has the role of providing direct service, and coordinating interagency intervention, across care and protection to case closure.

Duty of Care: The obligation to ensure that the standard of care provided to the child or young person accords with the requirements of law and the expectations of the community. The means creating an environment that promotes the conditions necessary to provide effective services for and prevent harm to children and young people.



Emergency Care: Emergency care is provided when an initial assessment results in an immediate recommendation for placement. This recommendation may be for safety reasons, e.g. removal of a child following allegations of abuse or neglect, a family crisis or homelessness.

Exceed numbers: Families SA term used for a foster family caring for more than three children. The Family and Community Services Act 1972 states the legislative requirement of, 'A foster parent is not permitted to have more than three foster children in his or her care unless the children are all of the same family, or unless the Chief Executive Officer is of the opinion that special reasons exist for permitting a greater number.' - Section 43(3).

Facilities License: License for residential care facilities to provide alternative care services for Families SA.

Family Contact: Any form of contact between the child or young person and their birth family, including face to face contact, and contact by telephone or letter.

Foster Care: The care of a child who is living apart from his or her natural or adoptive parent(s) in a private household with one or more adults who act as substitute parents. The substitute parents, normally referred to as foster carers are paid a regular subsidy for the child's support by Families SA.

Foster Carer: A foster carer is an approved and trained person (not being a guardian or relative of a child) who, with the assistance of a regular subsidy, provides care and support for a child or young person in their own home. Also known as a foster parent. A foster carer from the Aboriginal community may also be referred to as a 'community carer'.

Guardianship: Where assessed to be necessary the Families SA allocated Social Worker makes a submission to the court to have a child or young person come under the Guardianship of the Minister for Families and Communities. The Minister delegates the duties of the guardian to the Families SA Supervisor. Orders can be for 12-months or up to 18 years of age.

Legislation: For the purposes of this document there are three main Acts providing the legal mandate for the delivery of services to children, young people and families. These are: the Children's Protection Act 1993, Family and Community Services Act 1972, Adoptions Act 1988 and Young Offenders Act 1993.

Long Term Care: The placement of children and young people who are in need of long term alternative care with care providers. The care providers must be assessed and trained by the alternative care service provider (ACSP) and then approved by Families SA. The intention of this care is to promote long-term placement stability for the child or young person where reunification is assessed as not possible.

Placement Authority: Provides the authority for a child or young person to be placed in alternative care. There are a range of authorities that come under this category including: Voluntary Custody Agreement (facilitated through Families SA), Juvenile Justice Order (such as a Bail or Obligation), Family Care Meeting Agreement and Custody and Guardianship Orders (court ordered - see Guardianship).

Placement Checklist: A tool used by the foster carer and caseworkers to ensure carers have all the information required to care for the child or young person due to come into placement.

Placement Support Worker: The worker in the Alternative Care Service Provider agency who is responsible for supporting the carer(s) in caring for a child and/or young person.

Registration and Licensing: Registration and Licensing is responsible under requirements of the Family and Community Services Act, 1972 for registration of carers and licensing of foster care agencies and facilities in South Australia. Registration and Licensing has the central quality assurance role through screening, assessment and approval of foster and relative carers and informal respite services as well as through assessment of appropriateness of foster care agencies and facilities.'

Relative Care: The placement of children and young people in need of care, with relatives or with any person held to be related to the child according to Aboriginal kinship rules, or Torres Strait Islander kinship rules. Where this process has been formalised through Families SA relative carers will be approved by Families SA and will be provided a regular allowance for the care of the child or young person.

Request to Exceed Placement Numbers: Carers are approved to care for a certain number of children and young people up to a maximum of three. Where an Alternative Care Service Provider wants to place above the approved number a request to exceed placement numbers must be approved by Placement Services Manager and or in some cases Director level.



Respite Care: Alternative care placements that are provided on a planned temporary basis. Respite may occur from the birth family as a means to support the sustainability of the child or young person within the family or from a foster/relative carer in order to sustain the placement.

Review: A Carer Review is completed annually to ensure that the carer approval status is appropriate, that the carer is able to meet standards of care and the motivation for fostering is suitable.

Reunification: Families SA recognises the following definition:

The planned process of reconnecting children in out-of-home care with their families by means of a variety of services and supports to the children, their families and their foster parents or other service providers. It aims to help each child and family to achieve and maintain, at any given time, their optimal level of re-connection - from full re-entry into the family system to other forms of contact, such as visiting, that affirm the child's membership in his or her family. (Pine, Warsh and Maluccio, 1993)

Service Agreement: This is a document that reflects the Parties' commitment to a relationship in which both have rights and responsibilities that are upheld and respected. A business contract or agreement that provides the costs for the services, key performance indicators and reporting requirements.

Short Term Care: The placement of children and young people in need of short term care with care providers. The short term placement may be used while the longer term plans for the child or young person are being determined (i.e. reunification).

Special Needs Loading (SNL): There are two types of loading made to foster carers over and above the standard carer loading: 1) Physical/Intellectual and 2) High Intervention. Loadings are for children with physical disabilities, intellectual disabilities, medical problems or significant behavioral problems.

The Physical/Intellectual Needs (Special Needs) Loading In situations of significant physical or intellectual disability, this loading can be applied to the regular subsidy to offset the extra hidden and direct costs associated with the care of such a child. The extent and complexity of the child's special needs is the essential element in determining the need for a loading.

The High Intervention Needs Loading is for children and young people who do not have a diagnosed physical/intellectual disability, but who do exhibit emotional and behavioral problems that generate continuing behavior management problems for the carer.

These loadings are normally reviewed annually. The rate of loading may rise or fall in accordance with any alterations to the child's/young person's assessed level of need.

Stakeholders: For the purpose of this document the primary stakeholders are children and young people, carers, Alternative Care Service Providers, Agency Support Workers, Families SA caseworkers. Other stakeholders may include the child or young person's birth family, mentors, education workers, therapists, health workers, disability workers and other advocates.

Statutory Responsibility: Statutory responsibility is the delegated legal responsibility of Department for Families and Communities - Families SA to ensure a reasonable standard of care for children and young people for whom the Minister for Families and Communities has guardianship or custody as prescribed in the relevant acts (see Legislation)

Statutory Annual Review: A statutory requirement (see Statutory Responsibility) for the Families SA Supervisor to ensure that an annual case review takes place for all children and young people under Guardianship of the Minister to 18 years of age. Outlines the services



Government of South Australia

Department for Education and
Child Development

Service Agreement

Minister for Education and Child
Development

and

ABN:

For the period:

Service: Family Based Foster Care

Project

ID:

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1 Preliminary Information

Service Agreement dated the

between:

Minister for Education and Child Development a body corporate by virtue of the *Education Act 1972* and the operation of the *Administrative Arrangements Act 1994* of Level 9 Education Centre 31 Flinders Street Adelaide South Australia 5000 ("Minister")

and

.....incorporated association pursuant to the *Associations Incorporations Act 1985* of("Service Provider")

Postal address:

The Parties agree as follows:

In consideration of the payment by the Minister of the Allocated Funds pursuant to the Master Agreement between the Minister and the Service Provider and this Service Agreement, the Service Provider must provide the Services on the terms and conditions set out in the Master Agreement and this Service Agreement.

This Service Agreement is to be read in conjunction with the Master Agreement, and the terms and conditions of the Master Agreement are incorporated into this Service Agreement.

2 Introduction and Term

2.1 Statement of Intent

This Service Agreement reflects the Parties' commitment to a relationship in which both have rights and responsibilities that are to be upheld and respected.

A co-operative approach will incorporate agreed values, mutual respect for the roles and responsibilities of government and the community services sector. Parties agree to working in partnership to increase out-of-home care service capacity, quality, value for money and improve service monitoring, reporting and accountability. The Parties recognise the importance of taking a long-term view, as well as responding to immediate and urgent needs, and recognise that social, environmental and financial outcomes are all equally important.

The ultimate vision is for a service provision that supports a democratic, fair, accountable body of services that accommodate and value diversity, and which address the particular needs of vulnerable and marginalised people. The service provision will recognise regional and rural differences and deliver high quality outcomes in accordance with agreed standards.

2.2 Purpose of Funding

Family Based Foster Care Services provide emergency, short term or long term care for Children and Young People referred by Families SA who are unable to live with their families and for whom relative or kinship care is not an option. This service aims to provide a supportive, stable and nurturing placement for Children and Young People and the Guardianship or Custody of the Minister. It also aims to provide high levels of support and training for carers, in order to ensure the best placement outcome possible.

2.3 Service Provision Framework

The Service(s) will meet the following policy imperatives:

State Strategic Plan (2011)

Out-of-home care services for Guardianship Children and Young People aligns with the State Strategic Plan (2011) through one of its key priorities, associated visions and goals as follows:

Our Community:

- Everyone has a place to call home,
- Strong families help build communities,
- We are safe in our homes, community and at work, and
- We are connected to our communities and give everyone a fair go.

Directions for Alternative Care in South Australia, 2011 – 2015

- Direction 1: Designing Flexible and Integrated Alternative Care Services.
- Direction 2: Creating an Enhanced Service Continuum of Placement Options and Support Services.

Keeping Them Safe: In Our Care Implementation Action Plan

- Direction 2: Care Planning – Improve our care planning to provide greater stability and certainty for Children and Young People .
- Direction 5: Connected Care – Ensure better connected care through better integrated teams and care families.
- Direction 6: Children and Young People with Complex Needs – Respond more effectively to Children and Young People with serious and complex needs.

Standards of Alternative Care in South Australia (2008)

The Standards promote consistent, quality care for Children and Young People . This Service aligns with the Standards of Alternative Care in South Australia.

2.4 Term

This Service Agreement commences on the Commencement Date and, subject to early termination pursuant to this Service Agreement, the Master Agreement or by operation of law, terminates on the Expiry Date.

2.5 Service Discontinuance

The Minister will provide three months prior written notice to the Service Provider if the Minister does not intend to extend the Services provided under this Service Agreement at the end of the Term.

3 Definitions

3.1 Definitions and Interpretations

Except as follows, the definitions and rules of interpretation in the Master Agreement apply to this Service Agreement:

3.1.1 Aboriginal Person means a person:

- 3.1.1.1 who is a descendant of the Indigenous inhabitants of Australia; and
- 3.1.1.2 who regards himself or herself as Aboriginal or, if he or she is a young Child, is regarded as Aboriginal by at least one of his or her parents.

3.1.2 Background Checks means obtaining and checking information in relation to a particular person including:

- 3.1.2.1 previous employment and relevant experience;
- 3.1.2.2 verification of qualifications and professional registration; and
- 3.1.2.3 reference checks and work history reports.

3.1.3 **Care Plan** means the agreement between Families SA, the Service Provider, the Carer, Service Provider Staff and the Young Person as it pertains to the out-of-home care placement of the Child or Young Person.

3.1.4 **Carer** means a person who has the responsibility of providing day-to-day care of a Child or Young Person and who for monetary or other consideration, maintains a Child or Young Person on a residential basis. It includes Carers who are relatives and foster Carers and who are registered with the DECD Carer Assessment and Registration Unit.

3.1.5 **Case Planning and Case Plan** means the process of establishing agreed goals and outcomes to meet the identified needs of the Child or Young Person in out-of-home care. The Child or Young Person, birth parents, Families SA staff, foster Carers, out-of-home care Provider staff and other involved agencies should be included in the Case Planning process. Case planning ensures both immediate and long term needs of the Child or Young Person across the life domains are addressed whilst they are in care. The Case Plan is the agreed goals and outcomes of the Case Planning process and should include an outline of the responsibilities of the Child/Young Person, birth family, Carers, Families SA and relevant Service Provider Staff.

3.1.6 **Child or Children** means a Child or Children under the age of 18 years who are under the Guardianship of the Minister or other order or authority.

3.1.7 **Children in State Care Commission of Inquiry** means the Inquiry into allegations of sexual abuse of a person who, at the time that the alleged abuse occurred, was a Child in State care, or criminal conduct which resulted in the death of a person who, at the time that the alleged conduct occurred, was a Child in State care (report dated 1 April 2008).

3.1.8 **Children's Residential Facility Licence** means a licence for a facility issued in accordance with section 51 of the *Family and Community Services Act 1972*.

3.1.9 **Commencement Date** means the date as specified in clause 11 of this Service Agreement.

3.1.10 **DECD or Department** means the Department for Education and Child Development.

3.1.11 **Direct Client Contact** means direct personal contact between the Service Provider and the client, (being the Child or Young Person), pursuant to the provision of the Services, being meetings, case conferences and/or telephone discussions between the Service Provider and the Child or Young Person or such other contact as may be approved by the Minister.

3.1.12 **DECD Carer Assessment and Registration Unit** means the Unit authorised to undertake registration services in relation to Carers administered by the Department for Education and Child Development.

3.1.13 **DCSI** means the Department for Communities and Social Inclusion formerly known as **DFC** or the Department for Families and Communities

3.1.14 **Emergency Placement** is a short-term interim placement service for Children and Young People in crisis situations that are referred by DECD as being in need of out-of-home care. Emergency placements are unplanned and require an immediate response.

3.1.15 **Exit Interview** is a survey for Carers when they leave the Service Provider and is used to gather information to identify issues or trends that will assist in strengthening recruitment and retention processes

3.1.16 **Expiry Date** means the date as specified in clause 11 of this Service Agreement.

3.1.17 **Families SA Case Manager** means the person nominated by the Families SA office with responsibility for the stated Child or Young Person's Case Plan. Every Child or Young Person under Guardianship of the Minister must be allocated a Families SA Case Manager.

3.1.18 **Foster Care Agency Licence** means a licence for an agency issued in accordance with section 48 of the *Family and Community Services Act 1972*.

3.1.19 **Guardianship of the Minister** means where the Youth Court has granted guardianship of a Child for a specified period not exceeding 12 months or until the Child or Young Person reaches 18 years of age to the care of the Minister. Families SA has statutory responsibilities where a Child or Young Person is placed under Guardianship of the Minister.

3.1.20 **Life Domains** means areas of a Child or Young Person's developmental progress, their needs and strengths. This includes taking into account the Child's or Young Person's age and stage of development, paying close attention to the Child's or Young Person's vulnerabilities and/or special needs. Assessment of developmental needs and strengths can be based on the following dimensions of health, education, emotional and behavioural development, identity and culture, family/Carers relationships, social/peer relationships and life skills.

3.1.21 **Long-Term Placement** means the provision of safe, nurturing and sustainable placements for Children and Young People for periods in excess of 18 months. These placements are designed to promote longer term placement stability for Children and Young People for whom out-of-home care is deemed the most appropriate long term option.

3.1.22 **Quarter** means the three-month period commencing 1 January, 1 April, 1 July and 1 October in each year.

3.1.23 **Respite Placement** means planned, regular, short-term care, e.g. one weekend per month for a discrete period of time, aimed at supporting and maintaining out of home care placements with Carers or helping families achieve their goals by giving the birth parent(s) a break from Child care responsibilities.

3.1.24 **Reunification** means the planned process of reconnecting Children and Young People with their birth families by means of a variety of services and supports to the Child or

Young Person, their birth families and their Carers. Reunification is a dynamic process that will begin as soon as Children are placed in alternative care, and ends when they return home and the family is no longer in need of ongoing intervention. It aims to help each Child or Young Person and their birth family to achieve and maintain, at any given time, their optimal level of reconnection – from full re-entry into the family system to other forms of contact, such as visiting, that affirm the Child or Young Person's membership in his or her family.

- 3.1.25 **Services** means the out-of-home care services described in this Service Agreement to be provided by the Service Provider in accordance with the terms and conditions of the Master Agreement (including Annexure B - Alternative Care Services) and this Service Agreement.
- 3.1.26 **Service Provider's Staff** means all employees, agents, consultants, contractors or subcontractors employed or engaged by the Service Provider in respect of the Services (including any person assisting in the provision of services in a voluntary capacity or as a volunteer, and any students on placement with the Service Provider) who has provided proof of having a current and satisfactory Criminal History Assessment from the DCSI Screening Unit.
- 3.1.27 **Short-Term Placements** means the provision of safe, nurturing and sustainable placements for Children and Young People for periods of up to 18 months. These placements are designed to enable Children and Young People to move to a more permanent placement option or return to birth families.
- 3.1.28 **Screening Unit** for the purpose of this Agreement means the DCSI Screening Unit which is authorised to undertake Criminal History Assessment and Background Checks on all Service Provider's Staff who may be involved in providing the Services.
- 3.1.29 **Torres Strait Islander Person** means a person:
 - 3.1.29.1 who is a descendant of the Indigenous inhabitants of the Torres Strait; and
 - 3.1.29.2 who regards himself or herself as a Torres Strait Islander or, if he or she is a young Child, is regarded as a Torres Strait Islander by at least one of his or her parents.
- 3.1.30 **Training** means training provided or arranged by the Service Provider and includes:
 - 3.1.30.1 the process of imparting information, knowledge and skills required for the provision of the Services;
 - 3.1.30.2 where appropriate, internal training and external training such as formal accreditation programs through recognised tertiary institutions or competency-based training; and
 - 3.1.30.3 where appropriate, the input of information, experiential learning, group tasks and case studies, elective topics relevant to the type of care being provided in all areas essential to deal with the legal and welfare requirements of Children and Young People .

3.1.31 **Young Person or Young People** means a person or people between the ages of 10 and 18 years who are under the Guardianship of the Minister or other order or authority, and includes persons who receive ongoing support from the Minister for Education and Child Development after they turn 18 years of age.

3.1.32 **Youth Worker** means any person employed or sub-contracted by the Service Provider to provide care for Children or Young People who can provide proof of having a current and satisfactory Criminal History Assessment from the DCSI Screening Unit.

4 Services

4.1 Service Description

The Service Provider must provide the Services described in Schedule 1 and in accordance with this Service Agreement.

4.2 Provision of Services General Requirements

4.2.1 The Service Provider must ensure that Services are provided in accordance with the following legislation:

- 4.2.1.1 the *Adoption Act 1988 (SA)*;
- 4.2.1.2 the *Bail Act 1985 (SA)*;
- 4.2.1.3 the *Children's Protection Act 1993 (SA)* including the Aboriginal Child Placement Principles;
- 4.2.1.4 the *Coroner's Act 2003 (SA)*;
- 4.2.1.5 the *Disability Services Act 1993 (SA)*;
- 4.2.1.6 the *Emergency Management Act 2004 (SA)*;
- 4.2.1.7 the *Family and Community Services Act 1972 (SA)*;
- 4.2.1.8 the *Freedom of Information Act 1991 (SA)*;
- 4.2.1.9 the *Occupational, Health Safety and Welfare Act 1986 (SA)*;
- 4.2.1.10 the *Immigration (Guardianship of Children) Act 1946 (Cth)*;
- 4.2.1.11 the *State Records Act 1997 (SA)*;
- 4.2.1.12 the *Supported Assistance Accommodation Act 1994 (Cth)*;
- 4.2.1.13 the *Young Offenders Act 1993 (SA)*; and
- 4.2.1.14 the *Youth Court Act 1993 (SA)*.

4.2.2 The Service Provider must ensure that the Services are provided in accordance with, and are consistent with, the following guidelines and policies:

- 4.2.2.1 Families SA Guardianship and Alternative Care Manual of Practice and all associated policies, procedures, practice guides and protocols;

- 4.2.2.2 Families SA Child Protection Manuals 1 and 2 and all associated policies, procedures, practice guides and protocols;
- 4.2.2.3 DECD Step by Step South Australia;
- 4.2.2.4 DECD Carer Assessment and Registration Manual;
- 4.2.2.5 DFC Alternative Care Support Payment Manual;
- 4.2.2.6 DFC Information Sharing and Client Privacy Statement;
- 4.2.2.7 DFC Adverse Events Policy, Practice and Procedures;
- 4.2.2.8 DFC Special Investigations: Care Concerns Procedures (October 2006);
- 4.2.2.9 Office of the Guardian for Children and Young People Charter of Rights for Children and Young People in Care;
- 4.2.2.10 DFC Standards of Alternative Care in South Australia 2008;
- 4.2.2.11 DFC Care Planning Policy;
- 4.2.2.12 DFC Family Based Care Policy;
- 4.2.2.13 DFC Non-Family Based Care Policy;
- 4.2.2.14 DFC Mandatory Training in Caring for Infants (0 to 2 years of age);
- 4.2.2.15 DFC Rapid Response – Whole of Government Services for Children and Young People under Guardianship of the Minister;
- 4.2.2.16 DFC Child Safe Environments: Policies and Procedures; and
- 4.2.2.17 SAPOL and Families SA Missing Persons Protocol.

- 4.2.3 The Service Provider must take every reasonable step to ensure the safety and proper care of the Child or Young Person. This includes ensuring that all the Service Provider's Staff and Carers are appropriately qualified, properly trained, assessed and supported.
- 4.2.4 The Service Provider will work with the Minister in the transition of Children and Young People from the current service model to an existing service model, or a new service model, that meets the needs of the Child or Young Person.

5 Hours of Operation

The Service Provider undertakes to provide the Services on a 24 hour per day, 7 days per week basis inclusive of public holidays.

6 Target Group

The Service Provider will provide Services to Children and Young People from a non-Aboriginal background.

7 Geographical Coverage

The Service Provider undertakes to provide Services in the following State Government Regions:

8 Outcomes and Key Performance Indicators

8.1 Outcomes

In providing the Services, the Service Provider will endeavour to achieve the following outcomes for Children and Young People :

- 8.1.1 Children and Young People are living in safe, secure and stable out-of-home placements.
- 8.1.2 Children and Young People in out-of-home care develop a sense of personal and cultural identity.
- 8.1.3 Out-of-home care placement capacity is increased.
- 8.1.4 Timely placement of Children and Young People in out-of-home care according to their needs and circumstances.
- 8.1.5 Children and Young People in out-of-home care succeed in education and training.
- 8.1.6 Carers are skilled to meet the care needs of Children and Young People placed with them;
- 8.1.7 A stable and skilled workforce to care for Children and Young People in out-of-home care is established.

8.2 Key Performance Indicators

In providing the Services, the Service Provider must achieve the following key performance indicators which have been identified and agreed as appropriate key performance indicators in relation to the Services:

- 8.2.1 The Service Provider will report 100% of Carer Concerns to the Child Abuse Report Line within 24 hours of becoming aware of the care concern.
- 8.2.2 The average Carer household to Child ratio to not exceed 1:1.8.
- 8.2.3 Less than 10% of Children or Young People have three or more placement starts (excluding respite) from this Service Provider.
- 8.2.4 80% of Children and Young People receive Respite Placements from the same Carer/s each time that they are placed in a respite placement.
- 8.2.5 The Placement Support Worker to Carer household ratio is less than 1:18 per annum;
- 8.2.6 90% annual Carer retention rate is achieve.
- 8.2.7 95% of initial placement referral requests from Families SA Placement Services Unit / Crisis Response Unit were responded to within 24 hours.
- 8.2.8 95% of initial Emergency placement referral requests from Families SA Placement Services Unit / Crisis Response Unit were responded to within 2 hours.

- 8.2.9 100% of referrals are accepted or declined by the Service Provider within 21 days, following an extensive matching process.
- 8.2.10 100% of referrals for long term care accepted by the Service Provider commence placement within 14 days or in accordance with the transition plan.
- 8.2.11 90% of accepted Emergency Care placements are placed in less than 24 hours.
- 8.2.12 100% of declined referral responses include reasons for the referral being declined.
- 8.2.13 100% of Placement Review Meetings are facilitated by the Service Provider every 28 days for Emergency Placements.
- 8.2.14 The service never exceeds capacity unless otherwise agreed by the Minister.
- 8.2.15 100% of Children who are excluded from school are supported to return by their Carers / Service Provider's Staff.
- 8.2.16 100% of Children who are suspended from school are supported to return by their Carers / Service Provider's Staff.
- 8.2.17 100% of Carers have been approved by DECD Carer Assessment and Registration Unit.
- 8.2.18 100% of Carers complete (at a minimum) the Carer competencies outlined in *Shared Stories Shared Lives* training package.
- 8.2.19 90% of Carer households' assessments are completed and submitted to the DECD Carer Assessment and Registration Unit within 5 months of assessment commencing.
- 8.2.20 100% of Carers' ongoing training requirements are identified and addressed within 3 months of being identified.
- 8.2.21 100% of Carers have an Annual Review completed by the Service Provider and approved by the DECD Carer Assessment and Registration Unit.
- 8.2.22 90% of Carers receive face-to-face contact from their Placement Support Worker within 7 days of a Child or Young Person's placement commencement.
- 8.2.23 100% of Carers have Learning and Development Plan developed within 6 months of their Carer approval.
- 8.2.24 95% of Carer Learning and Development Plans are reviewed as part of the Carer's Annual Review.
- 8.2.25 100% of Service Provider's Staff receive induction training.
- 8.2.26 95% of Service Provider's Staff have a current Performance Development Plan in place.
- 8.2.27 100% of Staff Performance Development Plans are reviewed every 12 months

9 Outputs and Data

9.1 Outputs

The following have been identified and agreed upon as appropriate outputs in relation to the Services:

- 9.1.1 Documented policies and procedures in relation to safety (security) in out-of-home care are in place in accordance with Families SA Licensing requirements and are reviewed annually.
- 9.1.2 The Service Provider holds a current Foster Care Agency Licence or Children's Residential Facility Licence.
- 9.1.3 A satisfactory Background Screening and Criminal History Assessment is completed for all Carers, Placement Support Workers and Service Provider's Staff.
- 9.1.4 Quarterly service data reports are received within the prescribed timeframes.
- 9.1.5 Quarterly expenditure reports are received within the prescribed timeframes.
- 9.1.6 Quarterly report about all Care Concerns to be provided by the Service Provider.
- 9.1.7 A Placement Support Worker is allocated for every Carer household.
- 9.1.8 Access to respite for all Children and Young People and their Carers.
- 9.1.9 Quarterly report on placement breakdowns for Children and Young People with more than two placements during their current period of out-home-care.
- 9.1.10 A minimum 189 out-of-home care placement is maintained for Children and Young People.
- 9.1.11 17 additional out-of-home care placements are established and maintained for Children and Young People per annum.
- 9.1.12 Quarterly report on placement referrals declined with explanations provided.
- 9.1.13 Service Provider participation in regular placement review meetings with the Placement Support Unit and the Families SA Case Manager in all instances where an emergency placement exceeds 42 days.
- 9.1.14 5 additional Carer households are established and maintained per annum.
- 9.1.15 Services to Children and Young People are delivered in accordance with the Case Plans.
- 9.1.16 All school suspension and exclusions of Children and Young People in out-of-home care are reported to Families SA.
- 9.1.17 A Step by Step assessment package is completed for every new Carer household.
- 9.1.18 Every Carer household completes Orientation Training.
- 9.1.19 Every Carer has a current Apply First Aid Certificate.
- 9.1.20 Annual review for all Carer households.

- 9.1.21 Ongoing training to Carers to meet the individual care needs of Children and Young People placed in their care.
- 9.1.22 Carers are provided access to support 24 hours a day, 7 days a week.
- 9.1.23 Learning and Development Plans for all Carer Households are established, maintained and actioned.
- 9.1.24 All Carers receive a face-to-face home visit by their allocated Placement Support Worker every eight weeks.
- 9.1.25 An Induction Training Program for Service Provider Staff is in place and adopted for training of all new staff.
- 9.1.26 A current Apply First Aid certificate is held by all staff employed in direct care roles.
- 9.1.27 Every staff member has a Performance Development Plan in place within three months of commencement of employment.
- 9.1.28 An annual review of all Staff's Performance Development Plans is conducted.
- 9.1.29 Two (2) hour of supervision per Placement Support Worker per month.
- 9.1.30 Two (2) hour of supervision per Assessment Worker per month.
- 9.1.31 Training sessions are delivered to staff which target identified training needs.
- 9.1.32 An Annual Training Plan is documented and actioned.
- 9.1.33 A recruitment plan to address staff attrition and meet service growth/needs is established and actioned.

9.2 Service Data

The Service Provider must provide:

- 9.2.1 The number of referrals for Emergency, Long Term and Short Term Placements received.
- 9.2.2 The number of Children and Young People placed during this reporting period.
- 9.2.3 The number of each type of placement (Emergency, Short Term and Long Term Placements) during this reporting period.
- 9.2.4 The average number of placement starts (excluding respite) with this Service Provider experienced by each Child or Young Person exiting or transitioning out of alternative care, or otherwise ceasing to receive placements from the Service Provider, in the reporting period.
- 9.2.5 The number of Children or Young People currently receiving a placement for this service provider that have received four or more placement starts (excluding respite) from this Service Provider.
- 9.2.6 The number of placement breakdowns.
- 9.2.7 The number of placements that exceed the approved numbers for the carer household.

9.3 Carer Data

- 9.3.1 The number of new Carer households recruited, registered and approved by the Carer Assessment Registration Unit during this reporting period.
- 9.3.2 The total number of approved Carer households at the end of this reporting period.
- 9.3.3 The number of active Carer households at the end of this reporting period.
- 9.3.4 The number of Carer households on hold for reasons other than a care concern or special investigation.
- 9.3.5 The number of Carer households both with and without an allocated Placement Support Worker (PSW) at the end of each reporting period.
- 9.3.6 The number of Carer households that received a PSW home visit at least every eight weeks.
- 9.3.7 The Carer household to Placement Support Worker ratio at the end of the period.
- 9.3.8 The number of Carer households who ended their Carer role during the reporting period.
- 9.3.9 The number of Carer households who required an exit interview.
- 9.3.10 The number of Carer households who required a Carer Review over the reporting period.
- 9.3.11 The number of Carer households who received a Carer Review over the period.
- 9.3.12 The number of Carers who have received all mandatory Training in this reporting period.
- 9.3.13 The number of Carers who will require further mandatory Training in the next reporting period.
- 9.3.14 The number of Carers who have received competency based Training during the reporting period.

9.4 Staff Data

The Service Provider must provide:

- 9.4.1 The average number of Service Provider' Staff (FTE) during this reporting period.
- 9.4.2 The number of Service Provider's staff who received mandatory training in this reporting period.
- 9.4.3 The total number of Service Provider's Staff (FTE) assessing Carers.
- 9.4.4 The total number of Service Provider's Staff (FTE) supporting Carers.
- 9.4.5 The number of out of hours calls received and made over the reporting period.
- 9.4.6 Any further training developed and provided, not including orientation or induction.

9.5 Other Data Requirements

- 9.5.1 The Service Providers will work with the Minister in the development of other data reports, as determined by the contract managers, from time to time.
- 9.5.2 The Service Provider must provide such information on volunteers associated with the Service to the Minister as reasonably required by the Minister, from time to time.

10 Reporting

10.1 Service Accountability and Reporting

- 10.1.1 The Service Provider must provide quarterly service data reports in the prescribed format. Quarterly Service Data Reports must be received by the 30th day of the month immediately following the close of each Quarter.
- 10.1.2 The Service Provider must participate in a formal service monitoring process that will occur each Quarter.
- 10.1.3 The service monitoring process may include discussions on Services, outcomes, key performance indicators, outputs, data, target group, use of allocated funds, quality, financial viability of the Service Provider, management and organisation structure relevant to the Service Provider, Service Provider's Staff, linkages and partnerships, management of care concerns, implementation issues and other relevant issues.
- 10.1.4 The Service Provider must participate in evaluation of the Service, as required from time to time.

10.2 Financial Accountability and Reporting Measures

- 10.2.1 The Service Provider must:

- 10.2.1.1 provide reports to the Minister detailing receipt and expenditure of the Allocated Funds at such times, including such information and in such form as is reasonably required by the Minister. This will include quarterly written reports to be received by the 30th day of the month immediately following the close of each Quarter;
 - 10.2.1.2 provide a final expenditure report for the year ending 30 June in each year of the term of this Service Agreement, which must be certified by at least two senior officers of the Service Provider, affirming that the expenditure is in accordance with the provisions of the Master Agreement and this Service Agreement and in particular with clause 7 of the Master Agreement;
 - 10.2.1.3 provide to the Minister by 30 November each year of the term of this Service Agreement an audited financial statement for the previous financial year, which may be incorporated in the Service Provider's annual report or be provided as a separate report;

- 10.2.1.4 provide such other financial information in relation to the provision and administration of the Services as is reasonably required by the Minister and must make the financial records relating to the provision of the Services available for inspection by the Minister within 10 Business Days of a written request to that effect by the Minister;
- 10.2.1.5 ensure that all financial statements prepared in respect of the Allocated Funds are prepared in accordance with Australian Accounting Standards and are signed by an appropriate senior officer of the Service Provider; and
- 10.2.1.6 where the Allocated Funds are in excess of \$1,000,000 (GST exclusive) over the term of the Service Agreement, or where the total Allocated Funds the Service Provider receives from the Department on behalf of the Minister or any other Minister to whom the Department is responsible pursuant to any Service Agreement or otherwise are in excess of \$1,000,000 (GST exclusive) in any one financial year, the Service Provider must prepare its financial statements in the nature of a general purpose financial report.

10.2.2 Following expiry or early termination of the Service Agreement, the Minister may require any Unexpended Allocated Funds to be recovered in accordance with clause 9 of the Master Agreement.

11 Criminal History Assessment

The Service Provider must comply with the requirements of clause 12 of the Master Agreement. The Service Provider acknowledges that the Minister's rights in that clause which relate to Criminal History Assessment and Background Checks for all Service Provider Staff and all Carers are fundamental to this Service Agreement.

12 Funding and Contact Details

12.1 Commencement Date

12.2 Expiry Date

12.3 Name of Service

Family Based Foster Care

12.4 Funding Program

12.5 Additional Funding

12.6 Address for Notices

12.6.1 Minister's address for notices:

Department for Education and Child Development

Level 7, HP Centre

108 North Terrace

Adelaide SA 5000

Facsimile: (08) 8463 6188

Attention: Manager, Service Development and Accountability

12.6.2 Service Provider's address for notices:

12.7 Allocated Funds

12.8 Time and Manner of Payment of Allocated Funds.

12.9 Minister's Contract Manager

12.10 DECD Liaison Officer

Level 7, HP Centre

108 North Terrace

Adelaide SA 5000

12.11 Service Provider's Contract Manager

12.12 Service Provider's Contact Person for the Service

13 Termination of this Service Agreement

Notwithstanding, and in addition to, any other provision in the Master Agreement, the Minister may terminate this Service Agreement immediately, or on a later nominated date, by written notice to the Service Provider if:

- 13.1.1 the Service Provider breaches any of the provisions set out in clause 4 and clause 10 of this Service Agreement; or
- 13.1.2 either:
 - 13.1.2.1 a Child or Young Person the subject of the Services; or
 - 13.1.2.2 Child, Young Person or Client, the subject of any other services being provided by the Service Provider pursuant to any other Service Agreement entered into under the Master Agreement is put at risk; or
- 13.1.3 without cause at any time by giving three months' written notice to the Service Provider and the Service Provider will have no claim against the Minister in respect of such termination other than in respect of the following:
 - 13.1.3.1 payment of any Allocated Funds (if any) due to the Service Provider in respect of the provision of the Services under this Service Agreement; and
 - 13.1.3.2 any antecedent breaches of this Service Agreement by the Minister;

THE PARTIES EXECUTE THIS SERVICE AGREEMENT AS FOLLOWS:

SIGNED for and on behalf of the MINISTER FOR EDUCATION AND CHILD DEVELOPMENT

Signed: Date:

Name: Title:

Minister's Authorised Signatory

(having been duly authorised in that regard)

In the presence of:

Signed: Date:

Name: Title:

SIGNED for and on behalf of

Signed: Date:

(Having been duly authorised in that regard)

Name: Title:

In the presence of:

Signed: Date:

Name: Title:

SCHEDULE 1

Family Based Care Services

1 Service Details

1.1 Model of Care

Family Based Care Services

1.2 Description of Services

- 1.2.1 The Service Provider will provide Emergency, Short and Long Term Placements for Children and Young People under Guardianship or Custody of the Minister
- 1.2.2 The Service Provider will respond to requests for placement from the following sources only:
 - 1.2.2.1 Families SA, Placement Service Unit during business hours; or
 - 1.2.2.2 Families SA, Crisis Response Unit outside of business hours,
- 1.2.3 The Service Provider will place Children and Young People with Carers who have been approved and registered by the DECD Carer Assessment and Registration Unit.
- 1.2.4 The Service Provider will use a matching process to place Children and Young People with Carers who have the appropriate skills and training. This will help ensure the requested placement duration is achieved, and minimise the number of placement starts per request. The Service Provider will consult with the Families SA Case Manager of any Child or Young Person who has had a previous placement, before placing the Child or Young Person.
- 1.2.5 The Service Provider will ensure that the Families SA Placement Services Unit is aware of all decisions being made in relation to the placement.
- 1.2.6 The Service Provider is committed to providing a minimum of 189 placements the term of the Service Agreement, which number will be reviewed annually and funding will be adjusted according to the outcome of that review.
- 1.2.7 Any placement that will result in exceeding the approved number of placements for the Carer household will require express approval from the Minister.
- 1.2.8 Where a Child or Young Person from the Service Provider's target group is unable to be placed, the Service Provider will work with the Minister to either:

- 1.2.8.1 provide a placement that is in the best interests of the Child or Young Person with other placement Providers in the out-of-home care sector; or
- 1.2.8.2 provide a sustainable and nurturing placement from within their Carer cohort provided that such placements are in the best interests of the Child or Young Person and approved by the Minister.

- 1.2.9 Where Children or Young People are unable to attend school due to illness, suspension, exclusion or for other similar reasons, the Service Provider will work with the Families SA Case Manager to develop contingency care arrangements.
- 1.2.10 The Service Provider will work with other out-of-home care services to implement transition plans where transition planning is part of a Child or Young Person's Case Plan.
- 1.2.11 The Service Provider will contribute to Families SA's case management and planning for Children and Young People in out-of-home care.
- 1.2.12 The Service Provider will advise the Minister of placement capacity and Carer capacity and availability.
- 1.2.13 The Service Provider will advise the Minister of recruitment drives and strategies aimed at increasing Carer and placement capacity, and any specific recruitment required or undertaken for specific Children.
- 1.2.14 The Service Provider will implement appropriate recruitment drives and strategies in conjunction with DECD Foster Care Services.
- 1.2.15 In the event of problems arising with the placement, the Service Provider will immediately contact either the:
 - 1.2.15.1 Families SA Case Manager during business hours, or
 - 1.2.15.2 Families SA Crisis Response Unit outside of business hours.
- 1.2.16 In the event that the Child or Young Person requests to stay with another person, for whatever reason, approval must be sought and given by
 - 1.2.16.1 Families SA Case Manager during business hours, or
 - 1.2.16.2 Families SA Crisis Response Unit outside of business hours.
- 1.2.17 At the commencement of all Short and Long Term Placements the Minister will have responsibility to formulate or review the Child or Young Person Case Plan. This will be done in consultation with the Service Provider Support Worker, the Child or Young Person and Carer (where appropriate).

2 Recruitment, Assessment Training and Support of Carers

2.1 General

- 2.1.1 The Service Provider will have, or develop, and implement a Carer Recruitment Strategy.
- 2.1.2 The Service Provider will provide services to recruit, assess, train and support prospective Carers, and provide training and support to Carers in accordance with relevant service provision principles set out in this Service Agreement.
- 2.1.3 The Service Provider will complete assessments of potential Carers for approval and registration by the DECD Carer Assessment and Registration Unit using the *South Australian Step by Step South Australia Carer Assessment Tool* and the DECD Carer Approval and Registration Manual. These assessments must include
 - 2.1.3.1 an evaluation of the applicant's ability to provide safe and accountable placements that meet the legislative requirements and the Standards of Alternative Care in South Australia
 - 2.1.3.2 the existence of any risk factors in the prospective Carer's household
 - 2.1.3.3 collating information that will allow appropriate judgements regarding the suitability of each applicant; and
 - 2.1.3.4 provision of written assessments to the Minister to allow the Minister to make informed decisions regarding the appropriateness of the applicants.
- 2.1.4 The Service Provider must assess all members of the applicant's household throughout the Carer Assessment Process.
- 2.1.5 For all Carers approved and registered by the DECD Carer Assessment and Registration Unit, the Service Provider will have ongoing Training and support programs.
- 2.1.6 The Service Provider will keep accurate records of all Training undertaken by each Carer under the terms of this Service Agreement, and all Training required to be undertaken by Carers within each reporting period.
- 2.1.7 The Service Provider will ensure that all Carers have received compulsory orientation and mandatory Training in accordance with the requirements of this Service Agreement.
- 2.1.8 The Service Provider will ensure that all Carers are made aware of any upcoming mandatory Training.
- 2.1.9 The Service Provider will ensure that each Carer has an allocated Placement Support Worker, and the Service Provider will provide support to Carers through their Placement Support Workers. Placement Support Workers will have regular face to face contact with the Carers, with face to face visits occurring on a minimum eight weekly basis.
- 2.1.10 The Service Provider must provide out of business hours telephone support to their Carers.

- 2.1.11 The Service Provider must, in relation to each Carer supported by the Service Provider, undertake regular assessments of the person's role as a Carer as required by the DECD Carer Assessment and Registration Unit.
- 2.1.12 The Service Provider will immediately advise the DECD Carer Assessment and Registration Unit of any change in the circumstances of any Carer.
- 2.1.13 The Service Provider will immediately advise both the DECD Carer Assessment and Registration Unit and the Placement Services Unit once a Carer comes under a care concern or the special investigation process.
- 2.1.14 The Service Provider will provide all Carers with an opportunity for an Exit Interview when they leave the Service Provider.

2.2 Registration of Carers

No Child or Young Person referred to the Service Provider for placement will be placed with a Carer unless the Carer has been approved and registered by the DECD Carer Assessment and Registration Unit or such other registration authority or entity as may be approved by the Minister in writing from time to time.

The Service Provider must initiate and conduct Carer reviews in accordance with the requirements of the DECD Carer Assessment and Registration Unit or such other registration authority or entity as may be approved by the Minister in writing from time to time.

2.3 Compulsory Orientation Training

- 2.3.1 The Service Provider will provide competency based Training to Carers on various topics covered in the *Shared Stories Shared Lives South Australia Training Package* which include:
 - 2.3.1.1 foster care in context;
 - 2.3.1.2 bonding and attachment;
 - 2.3.1.3 grief and loss;
 - 2.3.1.4 abuse and trauma;
 - 2.3.1.5 identity and birth family contact;
 - 2.3.1.6 responding to challenging behaviours;
 - 2.3.1.7 team work;
 - 2.3.1.8 maintaining cultural connections; and
 - 2.3.1.9 the story continues (life story work, concluding placements and dealing with the demands of being a Carers).
- 2.3.2 The Service Provider will provide competency based training to Carers who will be caring for Aboriginal Children and Young People on the following topics

- 2.3.2.1 Aboriginal foster care in context;
- 2.3.2.2 bonding and attachment;
- 2.3.2.3 Aboriginal Children who have experienced abuse;
- 2.3.2.4 grief and loss;
- 2.3.2.5 coping with challenging behaviours;
- 2.3.2.6 maintaining connections;
- 2.3.2.7 team work; and
- 2.3.2.8 the next step.

2.4 Mandated Training

- 2.4.1 The Service Provider will provide mandatory training for all Carers about Mandatory Reporting – reporting Child abuse and neglect.
- 2.4.2 Where the Service Provider provides care for infants (0-2 years), the Service Provider will provide mandated training to Carers on various topics including:
 - 2.4.2.1 safe caring practices towards infants, sleeping, feeding, including advice against using U or V-shaped pillows;
 - 2.4.2.2 bathing;
 - 2.4.2.3 prevention of scalds and burns, drowning, falls, choking and poisoning;
 - 2.4.2.4 detailed safety checklist for Carers households with up-to-date information on safety products; and
 - 2.4.2.5 current legislation and safety information relating to transporting Children in cars.

2.5 Specialised Training

- 2.5.1 The Service Provider will provide specialised and ongoing training and support for Carers of Children and Young People with high or complex care needs or disability
- 2.5.2 The Service Provider will provide specialised training to all Carers and potential Carers of Children and Young People on Child sexual abuse prevalence, tactics used to silence Children, protective behaviours and caring for a Child or Young Person who has been sexually abused, per Recommendation 17 of the *Children in State Care Commission of Inquiry*.
- 2.5.3 The Service Provider will provide training to all Carers and potential Carers of Children and Young People on therapeutic supports for Children and Young People in care. The Service Provider will also provide specialised training for all Staff who work with Children and Young People with high or complex care needs or disability. Specialised training includes issues concerning the prevalence of sexual abuse of Children and Young People with disabilities, assessing behaviours as indicators of sexual abuse, supporting and

responding to disclosure per Recommendation 18 of the *Children in State Care Commission of Inquiry*.

2.6 Apply First Aid Certificates

2.6.1 The Service Provider must ensure that all Carers have an Apply First Aid Certificate issued by an appropriately certified authority.

2.7 Service Provider Support of Carers

2.7.1 The Service Provider will support, supervise and manage Carers to ensure compliance with the requirements of this Service Agreement by various means including

- 2.7.1.1 regular face to face contact with Carers;
- 2.7.1.2 regular visits to Carers' homes;
- 2.7.1.3 providing an allocated Placement Support Worker for every Carer;
- 2.7.1.4 24 hour access to telephone advice;
- 2.7.1.5 support to Carers who may be the subject of a care concern or special investigation; and
- 2.7.1.6 ongoing training relevant to the role.

2.8 Carer Recruitment and Child and Young Person Placement Growth Target

Quarter 1: 1 July 2012 – 30 September 2013	144 Carer Households/227 Placements
Quarter 2: 1 October 2012 - 31 December 2013	145 Carer Households/231 Placements
Quarter 3: 1 January 2013 – 31 March 2013	147 Carer Households/236 Placements
Quarter 4: 1 April 2013 – 30 June 2013	149 Carer Households/241 Placements

3 Recruitment, Training and Support of Staff

3.1 General

3.1.1 In providing Family Based Foster Care Services the Service Provider must have an ability and willingness to provide appropriate service responses to the entire cross section of the client community (in this context being Children and Young People) regardless of their cultural, religious or spiritual background through organisational policies and practices.

3.1.2 The Service Provider will maintain a current Foster Care Agency Licence.

3.2 Competency Based Training

- 3.2.1 The Service Provider will provide competency based training to their Staff on various topics, including but not limited to:
 - 3.2.1.1 induction / orientation to the role;
 - 3.2.1.2 Child development;
 - 3.2.1.3 behaviour management, including adolescent behaviour;
 - 3.2.1.4 grief, loss and attachment;
 - 3.2.1.5 mandated notification – Child Safe Environments: reporting abuse and neglect;
 - 3.2.1.6 dealing with aggressive and potentially violent behaviour; and
 - 3.2.1.7 the effects of abuse and neglect on Children and Young People .
- 3.2.2 Where the Service Provider provides care for infants (0-2 years), the Service Provider will provide mandated training to Staff on various topics, including but not limited to:
 - 3.2.2.1 safe caring practices towards infants, sleeping, feeding, including advice against using U or V-shaped pillows;
 - 3.2.2.2 bathing;
 - 3.2.2.3 prevention of scalds and burns, drowning, falls, choking and poisoning;
 - 3.2.2.4 detailed safety checklist for households with up-to-date information on safety products; and
 - 3.2.2.5 current legislation and safety information relating to transporting Children in cars and safe travel.

3.3 Service Provider's Staff

- 3.3.1 The Service Provider will ensure a Criminal History Assessment and Child Protection Background Check is completed by the DCSI Screening Unit for all relevant Service Provider Staff.
- 3.3.2 The Service Provider must ensure that all Service Provider's Staff working in the area of placement support possess either or both of the following
 - 3.3.2.1 an appropriate tertiary qualification relevant to working in the area of placement provision and support; and/or
 - 3.3.2.2 demonstrated knowledge and competencies in the area of youth or community services work appropriate for working in the area of placement support.
- 3.3.3 The Service Provider must ensure that all Service Provider's Staff undertaking assessment of potential Carers possess a demonstrated knowledge and competencies of *Shared Stories Shared Lives South Australia Training Package*.
- 3.3.4 The Service Provider must ensure all Service Provider's Staff have:

- 3.3.4.1 a personal aptitude to undertake the work;
- 3.3.4.2 the ability to work within guidelines;
- 3.3.4.3 knowledge and understanding of:
 - 3.3.4.3.1 the *Family and Community Services Act 1972* (SA) as it relates to approval, review and support of Carers;
 - 3.3.4.3.2 the *Children's Protection Act 1993* (SA) in particular the focus on the safety of Children and Young People ;
 - 3.3.4.3.3 the *Family and Community Services Act 1972* (SA) as it relates to the licensing of foster care agencies;
 - 3.3.4.3.4 the effects of abuse and neglect on Children and Young People ; and
 - 3.3.4.3.5 the procedures required for the assessment and review of Carers as specified by the DECD Carer Assessment and Registration Unit and the *Family and Community Services Act 1972* (SA).
- 3.3.4.4 knowledge and experience:
 - 3.3.4.4.1 in strategies to deal with challenging and difficult behaviours displayed by Children and Young People
 - 3.3.4.4.2 in the recruitment of the range of Carers required to meet the need of Children and Young People who receive home based foster care
 - 3.3.4.4.3 of the procedures required to undertake Criminal History Assessment and Background Checks for potential and current Carers and members of their household
 - 3.3.4.4.4 in assessing potential Carers in terms of identifying appropriate skills and meeting of standards, along with areas in which further competency based training is required
 - 3.3.4.4.5 in the provision of supervision to Carers and helping them develop their competencies
 - 3.3.4.4.6 in the facilitation of training for Carers to develop the skills required for high quality care and meeting the needs of Children and Young People
 - 3.3.4.4.7 in assisting Carers with problem resolution
 - 3.3.4.4.8 in supporting Carers of Children and Young People during the reunification of the Child or Young Person with their birth families; and
 - 3.3.4.4.9 in supporting Carers when an allegation of abuse is made against a Carer.

- 3.3.4.5 an ability to liaise with the DECD Carer Assessment and Registration Unit with regard to potential risks among potential and/or current Carers identified on the Justice Information System and Connected Client Case Management System
- 3.3.5 The Service Provider will provide training to its Staff on Child sexual abuse prevalence, tactics used to silence Children, protective behaviours and caring for a Child or Young Person who has been sexually abused, per Recommendation 17 of the *Children in State Care Commission of Inquiry*.
- 3.3.6 The Service Provider will provide training to its Staff on therapeutic supports for Children and Young People in care. The Service Provider will also provide specialised training for all Staff who work with Children and Young People with high or complex care needs or disability. Specialised training includes issues concerning the prevalence of sexual abuse of Children and Young People with disabilities, assessing behaviours as indicators of sexual abuse, supporting and responding to disclosure per Recommendation 18 of the *Children in State Care Commission of Inquiry*.

3.4 Service Provider Support

- 3.4.1 The Service Provider will support, supervise and manage Service Provider's Staff to ensure compliance with the requirements of this Service Agreement by various means including
 - 3.4.1.1 orientation to the role;
 - 3.4.1.2 ongoing training relevant to the role;
 - 3.4.1.3 regular supervision and performance review;
 - 3.4.1.4 24 hour access to telephone advice;
 - 3.4.1.5 support to Service Provider Staff who may be the subject of a care concern or special investigation;
 - 3.4.1.6 access to Employee Assistance Program for counselling services; and
 - 3.4.1.7 ensure the safety and proper care of Children and Young People by appropriately qualified and trained Service Provider's Staff.

3.5 Service Provider's Support of Assessment and Placement Support Workers

- 3.5.1 The Service Provider must ensure that the Service Provider's full-time assessment and placement support workers will receive supervision for a minimum of one hour per fortnight and part-time Workers will receive supervision at a minimum of one hour per month. The supervision will
 - 3.5.1.1 address practice issues;
 - 3.5.1.2 be provided by a suitably qualified and experienced supervisor;
 - 3.5.1.3 be provided face to face individually or in group sessions; and

- 3.5.1.4 be conducted with supervisors who themselves receive guidance in respect of their supervisory work.
- 3.5.2 The Service Provider must ensure that the Service Provider's support workers
 - 3.5.2.1 participate in the periodic review of their performance, to be conducted by persons with the relevant status, qualification and experience; and
 - 3.5.2.2 have access to reputable and appropriate programs to enhance professional development.

3.6 Health, Safety and Welfare Matters

- 3.6.1 The Service Provider will have in place, and maintain and practice, appropriate Occupational, Health, Safety & Welfare procedures.
- 3.6.2 The Service Provider will keep documentation and provide training on emergency and critical incident procedures to all Service Provider's Staff and Carers.
- 3.6.3 The Service Provider will have crisis intervention and support policies and procedures.

3.7 Licensing and Regulation Requirements

- 3.7.1 The Service provider will be responsible for adhering to licensing requirements under the *Family and Community Services Act 1972 (SA)*
- 3.7.2 The Service Provider must maintain a current Foster Care Agency licence at all times.

4 Funding Details

4.1 Allocated Funding

Policy

Screening and Suitability – Child Safety

Please note this policy is mandatory and all persons to whom the policy applies are required to comply with all instructions herein

DECD13/1696

This policy describes the mandatory screening and suitability processes to be followed prior to and during the engagement of persons with DECD sites and services. These processes are applied for the protection of children and young people.

Table 1 - Document details

Publication date	2014
Review date	2015
Related legislation/applicable section of legislation	Children's Protection Act 1993 Family and Community Services Act 1972 Education and Care Services National Law (2010) and Regulations (2011) Adoption Act 1984 and Regulations 2004
Related policies, procedures, guidelines, standards, frameworks	Child Protection in Education and Schools, Early Childhood Education and Care Services Policy Child Safe Environments: Standards for dealing with information obtained about the relevant history of people who work and volunteer with children Child Safe Environments: Principles of Good Practice
Replaces	Screening and Criminal History Checks Policy Guidelines DFC Child Safe Environments: Child Protection Policy (with respect to screening and suitability assessments)
Policy officer (name/position)	Gaye Brimacombe, Project Director, Child and Youth Safety
Policy officer (phone)	Phone: 8226 6804
Policy sponsor (name and position)	Etienne Scheepers, Deputy Chief Executive Child Safety, Office for Child Safety
Executive director responsible (name, position and office)	Etienne Scheepers, Deputy Chief Executive, Child Safety, Office for Child Safety



Applies to	All people engaged with DECD sites/services as either <ul style="list-style-type: none">• DECD employees and volunteers or through DECD contracts, agreements or licensing arrangements (including through Management Committees & Governing Councils) <ul style="list-style-type: none">• employees and volunteers of identified third party providers,• identified site users, and• family based carers
Key words	Screening, suitability, child safety, criminal history
Status	Approved
Approved by	Senior Executive Group
Approval date	31 October 2014
Version	1.0



Revision Record

Table 2 - Revision record

Date	Version	Revision description
2014	1.0	Created policy

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1. Title

- Screening and Suitability – Child Safety

2. Purpose

2.1 This policy and its appendices set out the expectations to be met and the processes to be followed in establishing and monitoring the suitability of persons engaged with DECD sites/services.

2.2 This policy and its appendices aim to

- (a) Support DECD in meeting its paramount responsibility for the safety of children and young people involved with its sites/services.
- (b) Limit the possibility that unsuitable persons are engaged with DECD sites/services.
- (c) Ensure DECD screening and suitability practices comply with legislative and policy requirements.
- (d) Summarise the information and guiding documents needed by DECD personnel to meet their responsibilities under this policy.

3. Scope

3.1 Policy terms

In this policy, 'screening' refers only to the process of assessing an individual's relevant history background, whereas 'suitability' encompasses both screening and all other defined means of assessing that a person is suitable, from a child safety perspective, for a particular DECD site/service.

3.2 Application to specific individuals

This policy applies to all people engaged with DECD sites/services as either

- DECD employees and volunteers, or

through DECD contracts, agreements or licensing arrangements (including through Management Committees & Governing Councils)

- employees and volunteers of identified third party providers,
- identified site users and
- family based carers.

3.3 This policy is best understood by reading the definitions in section 7 before proceeding through sections 4 to 6.

4. Policy detail

4.1 Policy Principles

- (a) The safety of children and young people is DECD's paramount obligation and must not be overridden by other interests.
- (b) The establishment and monitoring of a person's suitability to be engaged with DECD sites/services is only one means by which DECD meets its obligations to children and young people's safety.



- (c) DECD's child safe environment policies relating to employee and volunteer training and induction, codes of conduct, supervision, child protection curriculum and complaints and investigation processes are essential in supporting this policy's purpose and principles.
- (d) The monitoring of a person's suitability to be engaged with DECD sites/services is continuous and persons engaged with DECD sites/services must be suitable to do so at all times. See 4.2.1 (d) and (e).
- (e) The responsibility of persons engaged with DECD sites/services to report inappropriate conduct of adults towards children and young people is a critical contribution to the continuous monitoring of suitability.
- (f) Assessing a person's suitability to be engaged with DECD sites/services must be based on sufficient and relevant information.
- (g) Relevant information may include factors that contribute to a child's wellbeing such as the connection with family or carer.
- (h) The use, storage and disclosure of personal and sensitive information about a person's background and circumstances must occur in accordance with legislative, government and departmental policy requirements.
- (i) Risks to the safety of children and young people must be responded to immediately they are known or suspected.
- (j) Risks to the safety of children and young people have the potential to occur through direct or indirect contact with children and young people, formal or incidental access to information about children and young people and the direct or indirect capacity to influence the standards and delivery of DECD services to children, young people and their families. For these reasons this policy applies to:
 - I. all DECD employees and volunteers, irrespective of the presence or otherwise of children and young people at a DECD site/service, and
 - II. through DECD contracts, agreements or licensing all identified third party providers and site/service users See Definitions section 7 'identified site user' and 'identified third party provider'.

4.2 Screening and suitability processes

4.2.1 General processes

- (a) Checks of relevant history as prescribed in relevant sections of the Children's Protection Act and Regulation 8 of the Adoption Regulations 2004 must be conducted through the DECD approved screening authority as identified in this policy's appendices.
- (b) Relevant history clearances must be current while persons are engaged with DECD sites/services. Currency periods are indicated in the guiding documents provided in this policy's appendices.
- (c) Suitability of persons must be established at the point of recruitment/formal registration and be monitored for the full term of engagement with DECD sites/services.
- (d) Continuous monitoring of suitability includes the responsibility of all persons engaged with DECD sites/services to report inappropriate conduct towards children and young people by any person engaged with the site/service.
- (e) Continuous monitoring of suitability includes the responsibility of relevant DECD personnel, identified third party providers and identified site users to
 - I. document and act on information about inappropriate conduct towards children and young people by persons engaged with the site/service
 - II. supervise, assess, observe and mentor staff or volunteers under their management, as required by their role
 - III. document their performance management of staff and volunteers, and
 - IV. utilise flagging systems associated with recruitment and investigation roles.



- (f) Suitability assessments are not automatically transferable across DECD sites/services. Suitability may need to be reconsidered at a change of role or assignment.
- (g) Changes to DECD screening or suitability policy requirements must be applied to existing persons engaged with DECD sites/services where legislation or contracts of engagement allow.
- (h) DECD screening and suitability processes must meet, but are not limited to legislative requirements.
- (i) Information that suggests a person poses a risk to the safety of children and young people must be responded to as soon as that information is known.
- (j) The investigation and use of information relating to unsuitability must occur in a manner which respects the person's right to procedural fairness.

4.2.2 Specific processes

- (a) The consideration of an individual's suitability to be engaged with a DECD site/service must involve relevant history screening as required by legislation and this policy. It must also involve the suitability assessments prescribed in the guiding documents of the relevant appendix to this policy. These assessments may include the use of curriculum vitae, character references, interviews, work observations, testing, family observations, assessments, testimonials, declarations, information sharing protocols, any other source of permissible information or as prescribed in legislation.
- (b) The suitability assessment must include the requirement for full and honest disclosure of specified matters throughout the period of engagement. Persons must be informed in writing and/or sign by way of declaration their ongoing responsibility to notify DECD of specified matters that relate to the screening and suitability purpose.
- (c) Identity must be verified as part of the screening process.
- (d) Enquiries may be undertaken with former employers to verify employment history credentials such as employment dates and positions held.
- (e) Declared academic qualifications and professional memberships must be available for sighting if required.
- (f) Checks may be undertaken of any gaps (periods of no information) or anomalies (changes of name) in the person's curriculum vitae.
- (g) Checks of character references may include whatever follow up is required to establish confidence in the person's suitability.
- (h) In countries where relevant history records are not available but to which a DECD student visit or exchange program is organised, DECD must:
 - I. Explore and document all other practicable avenues of assessing the safety and suitability of accommodation arrangements.
 - II. Inform parents/caregivers in writing of the screening limitations that apply to the program and ensure this forms part of the document on which parents provide their written consent.

4.2.3 Requirements of DECD personnel making suitability assessments

Such persons must:

- (a) Be without vested interest in the appointment, approval or recruitment of any particular person.
- (b) Have appropriate experience and qualifications to assess suitability of persons on behalf of DECD, including the use of specific assessment tools where required.



- (c) Consider whether an individual already engaged with a DECD service should be re-assessed as to their suitability if moving to a different role in a different DECD service.
- (d) If required in their role, ensure DECD flagging systems are utilised and protocols relating to the sharing of information with other sectors/agencies and professional and regulatory bodies are followed.
- (e) Maintain screening and suitability process records in accordance with this policy's appendices for proof of compliance at all times.

4.3 Policy application

Procedural information about the policy's application to all persons listed under 3.2 is summarised in the policy's appendices. The appendices name the DECD approved screening authority, the documents that guide suitability processes and where records must be stored. Appendix A relates to child protection services, Appendix B relates to education and children's services and Appendix C relates to shared use agreements with community groups.

5. Roles and responsibilities

Table 2 - Roles and responsibilities

Role	Authority/responsibility for
Persons engaged with DECD sites/services	<p>Meeting the screening and suitability requirements of this policy and its relevant appendix at recruitment and for the period of engagement</p> <p>Reporting inappropriate conduct towards children and young people by persons engaged with DECD sites/services</p>
Site/service leaders	<p>Ensuring all persons engaged with the site/service, including through Management Committees and Governing Councils, meet the screening and suitability requirements of this policy and its relevant appendix</p> <p>Maintaining/providing evidence (records) of compliance as required by DECD and for the period specified by State Records</p> <p>If required in their role, initiating and documenting performance management processes with persons engaged with the site/service</p> <p>Ensuring information about inappropriate conduct of adults towards children and young people is immediately responded to</p>

	and documented as required in their role
Directors/Managers	<p>Monitoring and ensuring site/service leaders' compliance with the screening and suitability requirements of this policy and its relevant appendix</p> <p>Initiating performance management processes with individual site/service leaders as appropriate</p>
Personnel with workforce management responsibilities (recruitment and compliance)	Ensuring recruitment and compliance processes meet the requirements of this policy and its appendices
Personnel with responsibilities for auditing screening compliance	Ensuring audit processes are consistent with this policy and its appendices and that any non-compliance with this policy identified during the conduct of screening audits is documented and immediately raised through appropriate line management channels
Personnel with responsibilities for establishing contracts with third party providers, approving panels of third party providers or approving family based carers	Ensuring contracts have required clauses relating to screening and suitability, membership on 'approved panels' is contingent on meeting this policy's requirements and approval to provide home based care meets the requirements as outlined in the guiding documents in the policy's appendices
Personnel with responsibilities for monitoring services of identified third party providers/home based carers	Ensuring any breach of screening and suitability requirements in a contract or agreement is documented and immediately raised through appropriate line management channels
Policy sponsor	Ensuring this policy is reviewed, consulted on and amended as required
Chief Executive	Ensuring any issues identified as impeding DECD's capacity to comply with this policy are addressed internally or, where necessary, at whole of government forums



6. Monitoring, evaluation and review

- 6.1 Workforce Management provides regular screening and suitability reports to Senior Executive Group.
- 6.2 Office for Child Safety chairs the Screening Working Group which has oversight of screening and suitability issues across DECD.
- 6.3 Policy sponsor has responsibility for monitoring the relevance of this policy, its alignment with legislation and its review and amendment.

7. Definitions and abbreviations

Table 3 - Definitions and abbreviations

Term	Meaning
DECD approved screening authority	The screening authority identified in this policy's appendices.
DECD sites/services	All services, functions and facilities of the Department for Education and Child Development.
Family based carers	Providers of foster kinship and 'specific child only' care, other person guardian, international student homestay, family day care and prospective adoptive parents.
Flagging systems	Various alert or prompt systems that protect against unsuitable persons being engaged with a particular DECD site/service.
Identified site/service user	Refers to individuals using DECD sites/services who are not employees, volunteers or identified third party providers but for whom screening is a requirement. It includes but is not limited to identified groups hiring DECD sites, belonging to community groups meeting on DECD sites, undertaking research involving DECD sites/services, enrolling as an adult student at DECD sites, undertaking observation or placement as a tertiary student or university supervisor and adults residing at a DECD site/service.
Identified third party provider	A person engaged with DECD sites/services to work with children and young people, to work in proximity to children and young people without constant supervision by a



	DECD employee, to have access to records relating to children and young people or to manage or supervise personnel undertaking those roles.
Inappropriate conduct towards children and young people	Conduct considered a breach of a requirement of employment, contract, agreement, DECD policy or professional code that relates to the safety and wellbeing of children and young people.
Persons engaged with DECD sites/services	All people engaged with DECD sites/services as DECD employees or volunteers; or through DECD contracts, agreements or licensing arrangements (including through Management Committees & Governing Councils) employees and volunteers of identified third party providers, identified site users and family based carers.
Screening	The consideration of a person's relevant history obtained through the DECD approved screening authority in accordance with relevant sections of the Children's Protection Act 1993, Regulation 8 of the Adoption Regulations 2004 and for the purposes outlined at 2.2 (a) and (b).
Site/service	A DECD location such as a hub, school, preschool, residential care facility, metropolitan or country office, corporate office, children's centre, OSHC service and home of a family based care provider.
Site/service leader	The individual with ultimate responsibility for adults and/or children and young people at a site/service.
Specified matters	Offences or other matters as identified in contracts or as part of employee or volunteer declarations and about which the individual must notify DECD. Specified matters may include but are not limited to relevant offence charges and convictions, intervention orders, injunctions, allegations of misconduct resulting in investigations and/or disciplinary proceedings, allegations of improper conduct or conduct considered inappropriate to the role undertaken with the DECD site/service.



Suitability	The establishment of confidence that a person has the required experience and the emotional, physical, intellectual and ethical capacity to be engaged with a particular DECD site/service from the perspective of child safety. Confidence may be established through consideration of curriculum vitae, character references, interview, work observations, testing, family observation, assessment, testimonials, declarations, information sharing protocols, relevant history screening, any other source of permissible information or as prescribed in legislation.
Unsuitable person	An individual who has not met or maintained the required suitability for a particular DECD site/service.
Volunteer	An individual who has been accepted by a DECD site/service to provide regular or irregular ongoing assistance irrespective of whether the assistance involves direct contact with children and young people or with their records.

8. Supporting documents

- All documents identified in this policy's appendices
- Protective Practices for Staff in their Interactions with Children and Young People
- Managing Allegations of Sexual Misconduct guidelines
- Incident Coordination: Managing Incidents of Extreme Severity
- SA Royal Commission 2012-2013 Report of Independent Education Inquiry
- Overseas Travel Procedure for Student Excursions
- National Guidelines for the Operation of International Secondary Student Exchange Programs in Australia
- Care Concerns Investigations Unit - procedures

9. References

- Code of ethics for the South Australian Public Sector
- Adoption Act 1984 and Regulation 8 of the Adoption Regulations 2004



- Children's Protection Act 1993
- Education and Care Services National Law 2010 and Regulations 2011
- Family and Community Services Act 1972
- Information Sharing Guidelines (SA)
- Information Privacy Principles Instruction (SA)
- Education Services for Overseas Students Act 2000
(National Code 2007 Standard 5)



Appendix A: Application of screening and suitability - child safety in child protection services

From 1 January 2014 the DECD approved screening is a child-related employment screening check through the Department for Communities and Social Inclusion (DCSI). DCSI -The screening and assessment process

Group	Suitability assessment conducted by	Guiding document/s	Records kept
Employees	Families SA business units Probity panel as required	Merit Selection Checklist Workforce Management Procedures	CHRIS Personal File
Volunteers	Families SA business units responsible for recruiting volunteers	Families SA Volunteer Program Manual of Practice	CARIS
Family based carers (and adults residing in the home)			
Foster carers	Non-government family based care services	Step by Step foster care assessment package Carer Registration Team procedures Master and Service Agreement	Care Registration File CIS and C3MS Third party provider
Kinship carers	Placement Services Unit	Carer Registration Team procedures (iReg) process Kinship Assessment Team procedures	Care Registration File CIS and C3MS
Prospective adoptive parents	Placement Services Unit	National Adoption Assessment Report Guidelines for Intercountry Adoption (Accessed at GOVDEX, Australian Government portal)	"AFISPRO" Data Base, Families SA, Metropolitan Services Directorate
Identified third			



party providers			
Third party providers contracted by DECD (inclusive of family support services, foster care support workers, residential care workers)	Third party provider as per contract / agreement/ deed	Relevant clauses in contract /service agreement /deed	Third party provider Divisional Services Unit
Emergency Care Workers	For profit organisation	Relevant Panel Deed	For profit organisation DECD corporate records
Identified site users			
Tertiary social work students	Social Work Field Education Coordinator	Social Work Field Education Coordinator role description.	Families SA business unit at which student is placed



Appendix B: Application of screening and suitability – child safety in education and children's services

From 1 January 2014 the DECD approved screening is a child-related employment screening check through the Department for Communities and Social Inclusion* (DCSI). Approved clearances prior to this date must be replaced on expiry with a DCSI clearance. DCSI -The screening and assessment process.

Group	Suitability assessment conducted by	Guiding document/s	Records kept
Teachers NB Teachers Registration Board screening process is valid for teaching positions only.	Teachers Registration Board (TRB) regarding fitness and propriety for teacher registration	http://www.trb.sa.edu.au/new-applicant	Teachers Registration Board
	DECD Workforce Management regarding suitability for employment in DECD	Workforce Management Procedures	Human Resource Management System (HRMS)
Employees (Schools, preschools, early childhood services)	Workforce Management Probity Panel as required	Workforce Management Procedures <u>Relevant History Summary for Site Leaders</u>	HRMS
Employees (Corporate/non-school or children's sites)	Chairperson Appointing Panel	Merit Selection Checklist Workforce Management Procedures	Corporate Personnel Files Valeo & Eduportal
Governing Council Operated OSCHC employees	Governing Council as employer	OSHC policy & guidelines <u>Relevant History Summary for Site Leaders</u>	Site leader
Volunteers (incl. in OSHC)/ parent billets & adults in the home /members of a Governing or Management Council/C'ttee	Site leader (or Governing Council if OSHC volunteer)	<u>Relevant History Summary for Site Leaders/</u>	Site leader
Family Day Care (FDC) Educators, FDC assistants, adults residing in home	FDC Coordinator –Recruitment and FDC Scheme Manager in relation to Educators and Assistants	FDC Registration Guidelines-induction process FDC Registration Conditions	Harmony Hard copies in FDC Educator File.



Group	Suitability assessment conducted by	Guiding document/s	Records kept
International student homestay provider/adults residing in home	International Education Services	Homestay Code of Conduct and Service Expectations. Homestay Service Agreement	International Education Services database (iSMS)
Identified third party providers			
Third party providers contracted by DECD/Govt.	Third party provider as per contracts	Relevant clauses in contract	Third party provider and Relevant corporate business unit
Approved third party providers of OSHC services	Approved third party provider	Licence and Service Agreement/ <u>OSHC policy & guidelines/</u> Contract Management Plan / Panel Contract Management Plan/ <u>Relevant History Summary for Site Leaders</u>	DECD Site leader and Approved third party provider
Third party providers engaged by sites	Third party provider (e.g. The Smith Family)	<u>Relevant History Summary for Site Leaders</u>	Site leaders
	Panel of Providers (e.g. ICAN)	As per contract <u>Relevant History Summary for Site Leaders</u>	Site leader
	Corporate DECD unit (e.g. music programs)	<u>Relevant History Summary for Site Leaders</u>	Site leader
Identified site users			
Community groups	Community group as per <u>shared- use agreement</u>	Screening and Suitability – Child Safety Policy - Appendix C	Shared use agreements held by site leader
Tertiary students & supervisors	Higher Education Authorities (all states and territories)	DECD/higher education authority protocol 2013 <u>Relevant History Summary for Site Leaders</u>	Site leader
Others (e.g. work placement/adult students)	Site leader	<u>Relevant History Summary for Site Leaders</u>	Site leader



Appendix C

Child Protection Requirements for DECD Principals, Directors and Community Groups in establishing community use agreements

The community's use of the Department for Education and Child Development's (DECD) facilities has benefits for everyone. The child protection requirements outlined in the community use of school facilities agreements are intended to help make sure that children are protected while the community enjoy these benefits. When parents enrol their children with a DECD service, they expect the education environment is a safe one. When the community shares a DECD facility, parents expect the shared use arrangements do not lessen the safety of the education environment.

Best scheduling practice

- Schedule community activities *outside* the hours of the education program.
- Schedule adult activities and children's activities on separate nights, or if not practicable, at separate times.
- If activities are scheduled *during* the hours of the operation of the education program, use vacant buildings or spaces on the site, such as the Out of School Hours Care facilities during school hours, to help establish a clear geographical separation for the activity.

Risk assessment by principal/director

If activities are scheduled during the hours of the education program, a risk assessment must be undertaken by the principal/director to determine whether adequate separation between the education and community programs is established. The risk assessment must include consideration of the following:

How do people access the activity? What route do they take entering and exiting the education grounds?

What toilets or change-rooms do they access and how are these quarantined for the community group's exclusive use?

How is incidental contact between adults and children enrolled at the education site monitored? For example, if the activity involves movement around the site during the education program, who supervises that movement?

If it is a shared service such as a library, how is same-time access by children and community members managed? Are toilets quarantined? What supervision is provided?

Criminal and Relevant History Screening requirements

Is the community group providing an activity or service wholly or partly for children in a health, education, welfare, sporting or recreational, religious or spiritual, child care, or residential service? (*Children's Protection Act 1993*)

Yes	Everyone engaged in providing that activity as a hirer, employee, volunteer, director, officer, contractor and invitee must have a current criminal and relevant history clearance.
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No but the activity operates during the hours of the education program	The site leader undertakes a risk assessment (see above). DECD may require any member of the community group to obtain complete and current criminal and relevant history information as a means of establishing that no unsuitable person is engaged with the activity on a DECD site.
No and the activity operates outside the hours of the education program	DECD may require any member of the community group to obtain complete and current criminal or relevant history information as a means of establishing that no unsuitable person is engaged with the activity on a DECD site.

The required actions when unsuitable persons are identified (e.g. by police) or alleged by others

All community groups using DECD sites have child protection reporting responsibilities. These responsibilities are designed to ensure that:

- police and child protection authorities are notified about matters for which they have investigative responsibilities
- information about unsuitable persons* is acted on immediately and all community members, employees, volunteers, directors, officers, contractors and invitees are aware of their responsibilities to immediately notify DECD regarding unsuitable persons
- parents of children accessing, or in proximity to the activity, are informed of all known and potential threats to their children's safety based on an assessment of risk
- unsuitable persons do not continue to be engaged with an activity on a DECD site
- the Minister for Education and Child Development is informed of all circumstances involving unsuitable persons and the community group's actions in meeting the requirements of the shared use agreement

*Unsuitable persons are those that are the subject of any allegation, arrest, charge or conviction for a sexual offence, an offence of indecency, violence, deprivation of liberty or other indictable offence.

Actions checklist for community groups

- Police report if police are not already involved.
- Mandatory report if child abuse or neglect is suspected.
- Removal and exclusion of unsuitable person as per police advice.
- Immediate advice to the principal/director who may make a mandatory report based on the information provided.
- Assessment of risk to children and identification of parents to be notified **in consultation with principal/director** (DECD principals/directors are required to follow the [Managing Allegations of Sexual Misconduct](#) guidelines when coordinating these actions with the community group)
- Notification to the Minister for Education and Child Development regarding all actions required in the Shared Use Agreement.
- Notification to identified parents once the matter is more than an allegation.

Note:

Community groups whose activities do not involve children and young people are still required to follow the above checklist and take all required actions as relevant. For example, DECD must be advised that a community member is an alleged unsuitable person even though a mandatory report may not be required or there is no obvious parent group to notify. The principal/director and Minister for Education and Child Development must be advised in every case except if the principal/director is the person about whom the allegation is made. In this instance the community group must report directly to the Minister.

Principals/directors should seek the advice of their line managers if they are unsure about any aspect of a community group's operation at their site.

If there is any inconsistency between these requirements and the Community Use of School Facilities – Agreement Form, the Agreement Form will prevail.





Government of South Australia
Department for Education and
Child Development

Service Agreement

Minister for Education and Child
Development

and

ABN:

For the period:

Funding Program:

Service: Non-Family Based Emergency Care

Project ID:

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1 Preliminary Information

Service Agreement dated the 1 July 2012

between:

Minister for Education and Child Development a body corporate by virtue of the *Education Act 1972* and the operation of the *Administrative Arrangements Act 1994* of Level 9 Education Centre 31 Flinders Street Adelaide South Australia 5000 ("Minister")

and

an incorporated association pursuant to the *Associations Incorporations Act 1985* SA of ("Service Provider")

Postal address:

The Parties agree as follows:

In consideration of the payment by the Minister of the Allocated Funds pursuant to the Master Agreement between the Minister and the Service Provider and this Service Agreement, the Service Provider must provide the Services on the terms and conditions set out in the Master Agreement and this Service Agreement.

This Service Agreement is to be read in conjunction with the Master Agreement, and the terms and conditions of the Master Agreement are incorporated into this Service Agreement.

2 Introduction and Term

2.1 Statement of Intent

This Service Agreement reflects the Parties' commitment to a relationship in which both have rights and responsibilities that are to be upheld and respected.

A co-operative approach will incorporate agreed values, mutual respect for the roles and responsibilities of government and the community services sector. Parties agree to working in partnership to increase out-of-home care service capacity, quality, value for money and improve service monitoring, reporting and accountability. The Parties recognise the importance of taking a long-term view, as well as responding to immediate and urgent needs, and recognise that social, environmental and financial outcomes are all equally important.

The ultimate vision is for a service provision that supports a democratic, fair, accountable body of services that accommodates and value diversity, and which address the particular needs of vulnerable and marginalised people. The service provision will recognise regional and rural differences and deliver high quality outcomes in accordance with agreed standards.

2.2 Purpose of Funding

Non-Family Based Emergency Care in South Australia has developed as a response to the immediate need of Children entering the alternative care system. Under Non-Family Based Emergency Care services, service providers provide 24/7 Emergency Accommodation Facilities for Children and Young People who are under the Guardianship or Custody of the Minister. These facilities aim to provide short term care for Children and facilitate their transition into longer term family-based foster care programs, or other alternative care services.

2.3 Service Provision Framework

The Service(s) will meet the following policy imperatives:

State Strategic Plan (2011)

Out-of-home care services for Guardianship Children and Young People aligns with the State Strategic Plan (2011) through one of its key priorities, associated visions and goals as follows:

Our Community:

- Everyone has a place to call home,
- Strong families help build communities,
- We are safe in our homes, community and at work, and
- We are connected to our communities and give everyone a fair go.

Directions for Alternative Care in South Australia, 2011 – 2015

- Direction 1: Designing Flexible and Integrated Alternative Care Services.
- Direction 2: Creating an Enhanced Service Continuum of Placement Options and Support Services.

Keeping Them Safe: In Our Care Implementation Action Plan

- Direction 2: Care Planning – Improve our care planning to provide greater stability and certainty for Children and Young People.
- Direction 5: Connected Care – Ensure better connected care through better integrated teams and care families.
- Direction 6: Children and Young People with Complex Needs – Respond more effectively to Children and Young People with serious and complex needs.

Standards of Alternative Care in South Australia (2008)

The Standards promote consistent, quality care for Children and Young People. This Service aligns with the Standards of Alternative Care in South Australia.

2.4 Term

This Service Agreement commences on the Commencement Date and, subject to early termination pursuant to this Service Agreement, the Master Agreement or by operation of law, terminates on the Expiry Date.

2.5 Service Discontinuance

The Minister will provide three months prior written notice to the Service Provider if the Minister does not intend to extend the Services provided under this Service Agreement at the end of the Term.

3 Definitions

3.1 Definitions and Interpretations

Except as follows, the definitions and rules of interpretation in the Master Agreement apply to this Service Agreement:

3.1.1 Aboriginal Person means a person:

3.1.1.1 who is a descendant of the Indigenous inhabitants of Australia; and

3.1.1.2 who regards himself or herself as Aboriginal or, if he or she is a young Child, is regarded as Aboriginal by at least one of his or her parents.

3.1.2 **Background Checks** means obtaining and checking information in relation to a particular person including:

- 3.1.2.1 previous employment and relevant experience;
- 3.1.2.2 verification of qualifications and professional registration; and
- 3.1.2.3 reference checks and work history reports.

3.1.3 **Care Plan** means the agreement between Families SA, the Service Provider, the Carer, Service Provider Staff and the Young Person as it pertains to the out-of-home care placement of the Child or Young Person.

3.1.4 **Carer** means a person who has the responsibility of providing day-to-day care of a Child or Young Person and who for monetary or other consideration, maintains a Child or Young Person on a residential basis. It includes Carers who are relatives and foster Carers and who are registered with the DECD Carer Assessment and Registration Unit.

3.1.5 **Case Planning** and **Case Plan** means the process of establishing agreed goals and outcomes to meet the identified needs of the Child or Young Person in out-of-home care. The Child or Young Person, birth parents, Families SA staff, foster Carers, out-of-home care Provider staff and other involved agencies should be included in the Case Planning process. Case planning ensures both immediate and long term needs of the Child or Young Person across the life domains are addressed whilst they are in care. The Case Plan is the agreed goals and outcomes of the Case Planning process and should include an outline of the responsibilities of the Child/Young Person, birth family, Carers, Families SA and relevant Service Provider Staff.

3.1.6 **Child or Children** means a Child or Children under the age of 18 years who are under the Guardianship of the Minister or other order or authority.

3.1.7 **Children in State Care Commission of Inquiry** means the Inquiry into allegations of sexual abuse of a person who, at the time that the alleged abuse occurred, was a Child in State care, or criminal conduct which resulted in the death of a person who, at the time that the alleged conduct occurred, was a Child in State care (report dated 1 April 2008).

3.1.8 **Children's Residential Facility Licence** means a licence for a facility issued in accordance with section 51 of the *Family and Community Services Act 1972*.

3.1.9 **Commencement Date** means the date as specified in clause 11 of this Service Agreement.

3.1.10 **DECD or Department** means the Department for Education and Child Development.

3.1.11 **Direct Client Contact** means direct personal contact between the Service Provider and the client, (being the Child or Young Person), pursuant to the provision of the Services, being meetings, case conferences and/or telephone discussions between the Service

Provider and the Child or Young Person or such other contact as may be approved by the Minister.

- 3.1.12 **DECD Carer Assessment and Registration Unit** means the Unit authorised to undertake registration services in relation to Carers administered by the Department for Education and Child Development.
- 3.1.13 **DCSI** means the Department for Communities and Social Inclusion formerly known as **DFC** or the Department for Families and Communities
- 3.1.14 **Emergency Placement** is a short-term interim placement service for Children and Young People in crisis situations that are referred by DECD as being in need of out-of-home care. Emergency placements are unplanned and require an immediate response.
- 3.1.15 **Exit Interview** is a survey for Carers when they leave the Service Provider and is used to gather information to identify issues or trends that will assist in strengthening recruitment and retention processes
- 3.1.16 **Expiry Date** means the date as specified in clause 11 of this Service Agreement.
- 3.1.17 **Families SA Case Manager** means the person nominated by the Families SA office with responsibility for the stated Child or Young Person's Case Plan. Every Child or Young Person under Guardianship of the Minister must be allocated a Families SA Case Manager.
- 3.1.18 **Foster Care Agency Licence** means a licence for an agency issued in accordance with section 48 of the *Family and Community Services Act 1972*.
- 3.1.19 **Guardianship of the Minister** means where the Youth Court has granted guardianship of a Child for a specified period not exceeding 12 months or until the Child or Young Person reaches 18 years of age to the care of the Minister. Families SA has statutory responsibilities where a Child or Young Person is placed under Guardianship of the Minister.
- 3.1.20 **Life Domains** means areas of a Child or Young Person's developmental progress, their needs and strengths. This includes taking into account the Child's or Young Person's age and stage of development, paying close attention to the Child's or Young Person's vulnerabilities and/or special needs. Assessment of developmental needs and strengths can be based on the following dimensions of health, education, emotional and behavioural development, identity and culture, family/Carers relationships, social/peer relationships and life skills.
- 3.1.21 **Long-Term Placement** means the provision of safe, nurturing and sustainable placements for Children and Young People for periods in excess of 18 months. These placements are designed to promote longer term placement stability for Children and Young People for whom out-of-home care is deemed the most appropriate long term option.

3.1.22 **Quarter** means the three-month period commencing 1 January, 1 April, 1 July and 1 October in each year.

3.1.23 **Respite Placement** means planned, regular, short-term care, e.g. one weekend per month for a discrete period of time, aimed at supporting and maintaining out of home care placements with Carers or helping families achieve their goals by giving the birth parent(s) a break from Child care responsibilities.

3.1.24 **Reunification** means the planned process of reconnecting Children and Young People with their birth families by means of a variety of services and supports to the Child or Young Person, their birth families and their Carers. Reunification is a dynamic process that will begin as soon as Children are placed in alternative care, and ends when they return home and the family is no longer in need of ongoing intervention. It aims to help each Child or Young Person and their birth family to achieve and maintain, at any given time, their optimal level of reconnection – from full re-entry into the family system to other forms of contact, such as visiting, that affirm the Child or Young Person's membership in his or her family.

3.1.25 **Services** means the out-of-home care services described in this Service Agreement to be provided by the Service Provider in accordance with the terms and conditions of the Master Agreement (including Annexure B - Alternative Care Services) and this Service Agreement.

3.1.26 **Service Provider's Staff** means all employees, agents, consultants, contractors or subcontractors employed or engaged by the Service Provider in respect of the Services (including any person assisting in the provision of services in a voluntary capacity or as a volunteer, and any students on placement with the Service Provider) who has provided proof of having a current and satisfactory Criminal History Assessment from the DCSI Screening Unit.

3.1.27 **Short-Term Placements** means the provision of safe, nurturing and sustainable placements for Children and Young People for periods of up to 18 months. These placements are designed to enable Children and Young People to move to a more permanent placement option or return to birth families.

3.1.28 **Screening Unit** for the purpose of this Agreement means the DCSI Screening Unit which is authorised to undertake Criminal History Assessment and Background Checks on all Service Provider's Staff who may be involved in providing the Services.

3.1.29 **Torres Strait Islander Person** means a person:

- 3.1.29.1 who is a descendant of the Indigenous inhabitants of the Torres Strait; and
- 3.1.29.2 who regards himself or herself as a Torres Strait Islander or, if he or she is a young Child, is regarded as a Torres Strait Islander by at least one of his or her parents.

3.1.30 **Training** means training provided or arranged by the Service Provider and includes:

- 3.1.30.1 the process of imparting information, knowledge and skills required for the provision of the Services;
- 3.1.30.2 where appropriate, internal training and external training such as formal accreditation programs through recognised tertiary institutions or competency-based training; and
- 3.1.30.3 where appropriate, the input of information, experiential learning, group tasks and case studies, elective topics relevant to the type of care being provided in all areas essential to deal with the legal and welfare requirements of Children and Young People.

3.1.31 **Young Person** or **Young People** means a person or people between the ages of 10 and 18 years who are under the Guardianship of the Minister or other order or authority, and includes persons who receive ongoing support from the Minister for Education and Child Development after they turn 18 years of age.

3.1.32 **Youth Worker** means any person employed or sub-contracted by the Service Provider to provide care for Children or Young People who can provide proof of having a current and satisfactory Criminal History Assessment from the DCSI Screening Unit.

4 Services

4.1 Service Description

The Service Provider must provide the Services described in Schedule 1 and in accordance with this Service Agreement.

4.2 Provision of Services General Requirements

4.2.1 The Service Provider must ensure that Services are provided in accordance with the following legislation:

- 4.2.1.1 the *Adoption Act 1988* (SA);
- 4.2.1.2 the *Bail Act 1985* (SA);
- 4.2.1.3 the *Children's Protection Act 1993* (SA) including the Aboriginal Child Placement Principles;
- 4.2.1.4 the *Coroner's Act 2003* (SA);
- 4.2.1.5 the *Disability Services Act 1993* (SA);
- 4.2.1.6 the *Emergency Management Act 2004* (SA);
- 4.2.1.7 the *Family and Community Services Act 1972* (SA);
- 4.2.1.8 the *Freedom of Information Act 1991* (SA);

- 4.2.1.9 the *Occupational, Health Safety and Welfare Act 1986* (SA);
- 4.2.1.10 the *Immigration (Guardianship of Children) Act 1946* (Cth);
- 4.2.1.11 the *State Records Act 1997* (SA);
- 4.2.1.12 the *Supported Assistance Accommodation Act 1994* (Cth);
- 4.2.1.13 the *Young Offenders Act 1993* (SA); and
- 4.2.1.14 the *Youth Court Act 1993* (SA).

4.2.2 The Service Provider must ensure that the Services are provided in accordance with, and are consistent with, the following guidelines and policies:

- 4.2.2.1 Families SA Guardianship and Alternative Care Manual of Practice and all associated policies, procedures, practice guides and protocols;
- 4.2.2.2 Families SA Child Protection Manuals 1 and 2 and all associated policies, procedures, practice guides and protocols;
- 4.2.2.3 DECD *Step by Step South Australia*;
- 4.2.2.4 DECD Carer Assessment and Registration Manual;
- 4.2.2.5 DFC Alternative Care Support Payment Manual;
- 4.2.2.6 DFC Information Sharing and Client Privacy Statement;
- 4.2.2.7 DFC Adverse Events Policy, Practice and Procedures;
- 4.2.2.8 DFC Special Investigations: Care Concerns Procedures (October 2006);
- 4.2.2.9 Office of the Guardian for Children and Young People Charter of Rights for Children and Young People in Care;
- 4.2.2.10 DFC Standards of Alternative Care in South Australia 2008;
- 4.2.2.11 DFC Care Planning Policy;
- 4.2.2.12 DFC Family Based Care Policy;
- 4.2.2.13 DFC Non-Family Based Care Policy;
- 4.2.2.14 DFC Mandatory Training in Caring for Infants (0 to 2 years of age);
- 4.2.2.15 DFC Rapid Response – Whole of Government Services for Children and Young People under Guardianship of the Minister;
- 4.2.2.16 DFC Child Safe Environments: Policies and Procedures; and
- 4.2.2.17 SAPOL and Families SA Missing Persons Protocol.

4.2.3 The Service Provider must take every reasonable step to ensure the safety and proper care of the Child or Young Person. This includes ensuring that all the Service Provider's Staff and Carers are appropriately qualified, properly trained, assessed and supported.

4.2.4 The Service Provider will work with the Minister in the transition of Children and Young People from the current service model to an existing service model, or a new service model, that meets the needs of the Child or Young Person.

5 Hours of Operation

The Service Provider undertakes to provide the Services on a 24 hour per day, 7 days per week basis inclusive of public holidays.

6 Target Group

The Service Provider will provide Services to Children and Young People under Guardianship or Custody of the Minister, aged between 0-17 years for whom direct entry into foster care, community residential care or other forms of departmental care is either unavailable or inappropriate.

7 Geographical Coverage

The Service Provider undertakes to provide Services in the following State Government Regions:

Outcomes and Key Performance Indicators

7.1 Outcomes

In providing the Services, the Service Provider will endeavour to achieve the following outcomes for Children and Young People:

- 7.1.1 Children and Young People are living in safe, secure and stable out-of-home placements.
- 7.1.2 Children and Young People in out-of-home care develop a sense of personal and cultural identity
- 7.1.3 Out-of-home care placement capacity is increased.
- 7.1.4 Timely placement of Children and Young People in out-of-home care according to their needs and circumstances
- 7.1.5 Children and Young People in out-of-home care succeed in education and training
- 7.1.6 A stable and skilled workforce to care for Children and Young People in out-of-home care is established

7.2 Key Performance Indicators

In providing the Services, the Service Provider must achieve the following key performance indicators which have been identified and agreed as appropriate key performance indicators in relation to the Services:

- 7.2.1 The Service Provider will report 100% of Carer Concerns to the Child Abuse Report Line within 24 hours of becoming aware of the care concern.
- 7.2.2 Less than 10% of Children or Young People have three or more placement starts (excluding respite) from this Service Provider
- 7.2.3 95% of initial placement referral requests from Families SA Placement Services Unit / Crisis Response Unit were responded to within 24 hours.
- 7.2.4 95% of initial Emergency placement referral requests from Families SA Placement Services Unit / Crisis Response Unit were responded to within 2 hours
- 7.2.5 90% of accepted Emergency Care placements are placed in less than 24 hours.
- 7.2.6 100% of declined referral responses include reasons for the referral being declined.
- 7.2.7 100% of Placement Review Meetings are facilitated by the Service Provider every 28 days for Emergency Placements.
- 7.2.8 The service never exceeds capacity unless otherwise agreed by the Minister.
- 7.2.9 The service provides, or is capable of providing, three (3) Emergency Placements at all times
- 7.2.10 100% of Children who are excluded from school are supported to return by their Carers / Service Provider's Staff
- 7.2.11 100% of Service Provider's Staff receive induction training.
- 7.2.12 95% of Service Provider's Staff have a current Performance Development Plan in place.
- 7.2.13 100% of Children who are suspended from school are supported to return by their Carers / Service Provider's Staff
- 7.2.14 100% of Staff Performance Development Plans are reviewed every 12 months.

8 Outputs and Data

8.1 Outputs

The following have been identified and agreed upon as appropriate outputs in relation to the Services:

- 8.1.1 Documented policies and procedures in relation to safety (security) in out-of-home care are in place in accordance with Families SA Licensing requirements and are reviewed annually.

- 8.1.2 A satisfactory Background Screening and Criminal History Assessment is completed for all Carers, Placement Support Workers and Service Provider's Staff.
- 8.1.3 Quarterly service data reports are received within the prescribed timeframes.
- 8.1.4 Quarterly expenditure reports are received within the prescribed timeframes.
- 8.1.5 Quarterly report about all Care Concerns to be provided by the Service Provider.
- 8.1.6 Quarterly report on placement breakdowns for Children and Young People with more than two placements during their current period of out-home-care
- 8.1.7 Quarterly report on placement referrals declined with explanations provided.
- 8.1.8 Service Provider participation in a regular placement review meetings with the Placement Support Unit and the Families SA Case Manager in all instances where an emergency placement exceeds 42 days.
- 8.1.9 Services to Children and Young People are delivered in accordance with the Case Plans.
- 8.1.10 All school suspension and exclusions of Children and Young People in out-of-home care are reported to Families SA.
- 8.1.11 An Induction Training Program for Service Provider Staff is in place and adopted for training of all new staff.
- 8.1.12 Induction training is provided to all new staff.
- 8.1.13 A current Apply First Aid certificate is held by all staff employed in direct care roles.
- 8.1.14 Every staff member has a Performance Development Plan in place within three months of commencement of employment.
- 8.1.15 An annual review of all Staff's Performance Development Plans is conducted.
- 8.1.16 Training sessions are delivered to staff which target identified training needs.
- 8.1.17 An Annual Training Plan is documented and actioned.
- 8.1.18 A recruitment plan to address staff attrition and meet service growth/needs is established and actioned.

8.2 Service Data

The Service Provider must provide:

- 8.2.1 The number of referrals for Non-family based Emergency Care received.
- 8.2.2 The number of referrals received for Children and Young People from an Aboriginal background.
- 8.2.3 The number of referrals received for Children and Young People from a non-Aboriginal background.
- 8.2.4 The number of Children and Young People Placed during this reporting period.

- 8.2.5 The number of Children and Young People successfully transitioned from other service providers and/or services into sustainable home-based foster care or independent living.
- 8.2.6 Number of nights where the Service Provider did not have capacity to provide the total number of placements specified by this Service Agreement.
- 8.2.7 Total number of nights in the reporting period when a Child or Young Person was missing from the placement.

8.3 Staff Data

The Service Provider must provide:

- 8.3.1 The average number of Service Provider's Staff (FTE) per week or per fortnight during this reporting period.
- 8.3.2 The number of Service Provider's Staff who required Training in accordance with this Service Agreement during this reporting period.
- 8.3.3 The number of Service Provider's Staff who received Training in accordance with this Service Agreement during this reporting period.
- 8.3.4 The total number of hours Training received by the Service Provider's Staff in this reporting period.
- 8.3.5 Any further Training developed and provided, not including orientation or induction.

8.4 Other Data Requirements

- 8.4.1 The Service Providers will work with the Minister in the development of other data reports, as determined by the contract managers, from time to time.
- 8.4.2 The Service Provider must provide such information on volunteers associated with the Service to the Minister as reasonably required by the Minister, from time to time.

9 Reporting

9.1 Service Accountability and Reporting

- 9.1.1 The Service Provider must provide quarterly service data reports in the prescribed format. Quarterly Service Data Reports must be received by the 30th day of the month immediately following the close of each Quarter.
- 9.1.2 The Service Provider must participate in a formal service monitoring process that will occur each Quarter.
- 9.1.3 The service monitoring process may include discussions on Services, outcomes, key performance indicators, outputs, data, target group, use of allocated funds, quality,

financial viability of the Service Provider, management and organisation structure relevant to the Service Provider, Service Provider's Staff, linkages and partnerships, management of care concerns, implementation issues and other relevant issues.

9.1.4 The Service Provider must participate in evaluation of the Service, as required from time to time.

9.2 Financial Accountability and Reporting Measures

9.2.1 The Service Provider must:

- 9.2.1.1 provide reports to the Minister detailing receipt and expenditure of the Allocated Funds at such times, including such information and in such form as is reasonably required by the Minister. This will include quarterly written reports to be received by the 30th day of the month immediately following the close of each Quarter;
- 9.2.1.2 provide a final expenditure report for the year ending 30 June in each year of the term of this Service Agreement, which must be certified by at least two senior officers of the Service Provider, affirming that the expenditure is in accordance with the provisions of the Master Agreement and this Service Agreement and in particular with clause 7 of the Master Agreement;
- 9.2.1.3 provide to the Minister by 30 November each year of the term of this Service Agreement an audited financial statement for the previous financial year, which may be incorporated in the Service Provider's annual report or be provided as a separate report;
- 9.2.1.4 provide such other financial information in relation to the provision and administration of the Services as is reasonably required by the Minister and must make the financial records relating to the provision of the Services available for inspection by the Minister within 10 Business Days of a written request to that effect by the Minister;
- 9.2.1.5 ensure that all financial statements prepared in respect of the Allocated Funds are prepared in accordance with Australian Accounting Standards and are signed by an appropriate senior officer of the Service Provider; and
- 9.2.1.6 where the Allocated Funds are in excess of \$1,000,000 (GST exclusive) over the term of the Service Agreement, or where the total Allocated Funds the Service Provider receives from the Department on behalf of the Minister or any other Minister to whom the Department is responsible pursuant to any Service Agreement or otherwise are in excess of \$1,000,000 (GST exclusive) in any one financial year, the Service Provider must prepare its financial statements in the nature of a general purpose financial report.

9.2.2 Following expiry or early termination of the Service Agreement, the Minister may require any Unexpended Allocated Funds to be recovered in accordance with clause 9 of the Master Agreement.

10 Criminal History Assessment

The Service Provider must comply with the requirements of clause 12 of the Master Agreement. The Service Provider acknowledges that the Minister's rights in that clause which relate to Criminal History Assessment and Background Checks for all Service Provider Staff and all Carers are fundamental to this Service Agreement.

11 Funding and Contact Details

11.1 Commencement Date

11.2 Expiry Date

11.3 Name of Service

11.4 Funding Program

11.4.1 Minister's address for notices:

11.4.2 Service Provider's address for notices:

11.5 Allocated Funds

Payment of Allocated funds will be in accordance with Schedule 1 of this Service Agreement.

11.6 Time and Manner of Payment of Allocated Funds

Subject to the provisions of this Service Agreement and the Master Agreement, the Minister will pay the Allocated Funds quarterly in advance for the financial years specified above.

11.7 Minister's Contract Manager

Attention: Director, Statewide Services

11.8 DECD Liaison Officer

11.9 Service Provider's Contract Manager

11.10 Service Provider's Contact Person for the Service

12 Termination of this Service Agreement

Notwithstanding, and in addition to, any other provision in the Master Agreement, the Minister may terminate this Service Agreement immediately, or on a later nominated date, by written notice to the Service Provider if:

- 12.1.1 the Service Provider breaches any of the provisions set out in clause 4 and clause 10 of this Service Agreement; or
- 12.1.2 either:
 - 12.1.2.1 a Child or Young Person the subject of the Services; or
 - 12.1.2.2 Child, Young Person or Client, the subject of any other services being provided by the Service Provider pursuant to any other Service Agreement entered into under the Master Agreement is put at risk; or
- 12.1.3 without cause at any time by giving three months' written notice to the Service Provider and the Service Provider will have no claim against the Minister in respect of such termination other than in respect of the following:
 - 12.1.3.1 payment of any Allocated Funds (if any) due to the Service Provider in respect of the provision of the Services under this Service Agreement; and
 - 12.1.3.2 any antecedent breaches of this Service Agreement by the Minister.

THE PARTIES EXECUTE THIS SERVICE AGREEMENT AS FOLLOWS:

SIGNED for and on behalf of the MINISTER FOR EDUCATION AND CHILD DEVELOPMENT

Signed: Date:

Name: Title:

Minister's Authorised Signatory

(having been duly authorised in that regard)

In the presence of:

Signed: Date:

Name: Title:

SIGNED for and on behalf of

Signed: Date:

(Having been duly authorised in that regard)

Name: Title:

In the presence of:

Signed: Date:

Name: Title:

SCHEDULE 1

Non-Family Based Care Services

1 Service Details

1.1 Model of Care

Non-Family Based Emergency Care

1.2 Description of Services

- 1.2.1 The Service Provider will provide Non-Family Based Emergency Care services for up to three (3) Children/Young People who are under Guardianship or Custody of the Minister.
- 1.2.2 This service is designed to provide short term accommodation (up to 42 days). However, depending on the availability of suitable longer term placements, the Service Provider, Families SA Case Manager and Families SA Placement Services Unit may support an extended placement.
- 1.2.3 The Service Provider will provide a flexible and innovative care model which is tailored to meet the diverse needs of individual Children and Young People and enables a successful transition to long term care.
- 1.2.4 The Service Provider will create a secure and stable environment for Children and Young People by establishing predictable household routines and accountability structures.
- 1.2.5 The Service Provider will ensure that Service Provider's Staff have qualifications and experience appropriate to the age of the Children and Young People resident in the facility.
- 1.2.6 The Service Provider will maintain a strong emphasis on partnership with Families SA Case Managers, and contribute to the Child or Young Person's care plan, by:

 - 1.2.7 Meeting with each relevant Families SA Case Manager on a weekly basis, and reviewing the progress of each Child or Young Person in regards to the life domains established in their care plans.
 - 1.2.8 Following the Families SA Case Manager's instructions regarding the Child or Young Person's care plan.
 - 1.2.9 The Service Provider will maintain a safe working environment for all Service Provider's Staff.

- 1.2.10 The Service Provider will maintain staffing levels, physical structures and operational practices that are focussed upon managing and minimising the risk of Children and Young People exhibiting the following behaviours:
 - 1.2.10.1 Extreme behaviours
 - 1.2.10.2 Disruption to other clients
 - 1.2.10.3 Abuse/assault of staff
- 1.2.11 The Service Provider will provide Children and Young People placed at this facility with support to engage in educational, recreational and community based activities as appropriate, and in accordance with the Child or Young Person's care plan.
- 1.2.12 The Service Provider will provide Children and Young People with the opportunity to develop an age appropriate level of independent living skills, and endeavour to include them in household decisions where appropriate.
- 1.2.13 The Service Provider will ensure that Services will be dependent upon referrals from the Families SA Placement Services Unit during Business Hours and Crisis Response Unit after Business Hours only.
- 1.2.14 The Service Provider will engage with the relevant Families SA Case Manager and Placement Services Unit to develop a transition plan for each Child and Young Person in the program.
- 1.2.15 In the event that the breakdown of a placement appears imminent, the Service Provider will attend a Pre-Termination Meeting with the relevant Families SA Case Manager and Placement Services Unit.
- 1.2.16 Should the placement exceed 42 days, the Service Provider will engage in a Placement Review Meeting and will negotiate with the Families SA Case Manager and the Placement Services Unit about any further supports required by the Young Person.
- 1.2.17 The Service Provider will ensure all Service Provider's Staff receive all Training as required by this Service Agreement, and will keep accurate records of all training undertaken by Staff, and all training required in the following reporting period.
- 1.2.18 The Service Provider never exceeds capacity unless otherwise negotiated with the Minister.

1.3 Intake to the Service

- 1.3.1 Referrals for Children and Young People to this Service can only be made through the Families SA Placement Services Unit during business hours and Crisis Response Unit after hours.
- 1.3.2 The Service Provider will use a matching process to ensure all Children and Young People receive care from appropriately matched Service Provider Staff.

1.4 Placement in the Service

- 1.4.1 The Service Provider is committed to ensuring that connections between siblings who have been placed in separate care arrangements, are supported to safely and appropriately maintain contact on a regular basis as detailed by the Case Plan, where appropriate.
- 1.4.2 The Service Provider, Families SA Case Manager and Child or Young Person will develop a Care Plan as soon as possible after the Child or Young Person has entered the Service. The purpose of the Care Plan is to establish and maintain roles and responsibilities of all stakeholders involved in the placement to ensure a clearer understanding of these, inclusive of actions and timelines against the life domains described in the Families SA Case Plan.
- 1.4.3 The Service Provider will create a secure and stable environment for Children and Young People by establishing household routines and accountability structures.
- 1.4.4 The Service Provider will provide Children and Young People placed at this facility with support to engage in educational, recreational and community based activities as appropriate, and in accordance with the Child or Young Person's Case Plan.
- 1.4.5 The Service Provider will provide Children and Young People with the opportunity to develop age appropriate life skills.
- 1.4.6 Cultural links are included in care plans of Aboriginal and Torres Strait Islander Children and Young People and also Children and Young People from culturally and linguistically diverse backgrounds.

1.5 Plans and Support for Children and Young People in Service

- 1.5.1 The Service Provider will work in partnership with the Child or Young Person's Families SA Case Manager and the Child or Young Person to develop the Child or Young Person's Transition Plan when that Child or Young Person is entering and leaving the Service.

1.6 Placement Breakdown

- 1.6.1 The Service Provider must immediately advise the Child or Young Person's Families SA Case Manager in business hours, or the Families SA Crisis Response Unit out of hours, of any problems arising within the placement with the potential to result in placement breakdown.
- 1.6.2 The Service Provider will work with the Child or Young Person's Families SA Case Manager and the Child or Young Person to identify causal factors and any supports that could be provided to maintain the placement.
- 1.6.3 Where the Service Provider and the Child or Young Person's Families SA Case Manager determines that the placement cannot continue, then the Service Provider will attend a pre-

termination meeting. The pre-termination meeting will include the Child or Young Person's Families SA Case Manager and Families SA Placement Services Unit and will identify an action plan that will be implemented to assist in the transition of the Child or Young Person out of the Service. The Service Provider will participate in 100% of pre-termination meetings.

1.7 Transition out of the Service

- 1.7.1 The Service Provider and the Child or Young Person's Families SA Case Manager will support the Child or Young Person in achieving successful transition out of the Service as identified in their Transition Plan.

1.8 Approved Staffing Levels

- 1.8.1 The table below indicates the approved staffing structure for this Service:

1.9 Licensing and Regulation Requirements

- 1.9.1 The Service Provider will be responsible for adhering to licensing requirements under the *Family and Community Services Act 1972 (SA)*.
- 1.9.2 The Service Provider must maintain a current Children's Residential Care Facility Licence at all times.

1.10 Health, Safety and Welfare Matters

- 1.10.1 The Service Provider will have in place, and maintain and practice, appropriate Occupational, Health, Safety & Welfare procedures.
- 1.10.2 The Service Provider will keep documentation and provide training on emergency and critical incident procedures to all Service Provider's Staff and Carers.
- 1.10.3 The Service Provider will have crisis intervention and support policies and procedures.

2 Recruitment, Training and Support of Staff

2.1 Competency Based Training

- 2.1.1 The Service Provider will provide competency based training to their Staff on various topics, including but not limited to:
 - 2.1.1.1 induction / orientation to the role

- 2.1.1.2 Child development;
- 2.1.1.3 behaviour management, including adolescent behaviour;
- 2.1.1.4 grief, loss and attachment;
- 2.1.1.5 mandated notification – Child Safe Environments: reporting abuse and neglect;
- 2.1.1.6 dealing with aggressive and potentially violent behaviour; and
- 2.1.1.7 the effects of abuse and neglect on Children and Young People.

2.1.2 Where the Service Provider provides care for infants (0-2 years), the Service Provider will provide mandated training to Staff on various topics, including but not limited to:

- 2.1.2.1 safe caring practices towards infants, sleeping, feeding, including advice against using U or V-shaped pillows;
- 2.1.2.2 bathing;
- 2.1.2.3 prevention of scalds and burns, drowning, falls, choking and poisoning;
- 2.1.2.4 detailed safety checklist for households with up-to-date information on safety products; and
- 2.1.2.5 current legislation and safety information relating to transporting Children in cars and safe travel.

2.2 Apply First Aid Certificates

2.2.1 The Service Provider must ensure all the Service Provider's Staff have an Apply First Aid Certificate issued by an appropriately certified authority.

2.3 Service Provider's Staff

2.3.1 The Service Provider must ensure all Service Provider's Staff possess either or both of the following

- 2.3.1.1 an appropriate tertiary qualification relevant to working in the area of placement provision and support; and/or
- 2.3.1.2 demonstrated knowledge and competencies appropriate to Certificate 3 or 4 in Youth Work training for working in the area of placement provision.

2.3.2 The Service Provider must ensure all Service Provider's Staff have:

- 2.3.2.1 a personal aptitude to undertake the work
- 2.3.2.2 the ability to work within guidelines
- 2.3.2.3 knowledge and understanding of

- 2.3.2.3.1 the *Children's Protection Act 1993 (SA)*, in particular the focus on the safety of Children and Young People; and
- 2.3.2.3.2 the *Children's Protection Act 1993 (SA)* in particular the focus on the safety of Children and Young People;
- 2.3.2.3.3 the *Family and Community Services Act 1972 (SA)* as it relates to the licensing of foster care agencies; and
- 2.3.2.3.4 the effects of abuse and neglect on Children and Young People.

2.3.2.4 knowledge and experience

- 2.3.2.4.1 in strategies to deal with challenging and difficult behaviours displayed by Children and Young People.

2.3.3 The Service Provider will provide training to its Staff on Child sexual abuse prevalence, tactics used to silence Children, protective behaviours and caring for a Child or Young Person who has been sexually abused, per Recommendation 17 of the *Children in State Care Commission of Inquiry*.

2.3.4 The Service Provider will provide training to its Staff on therapeutic supports for Children and Young People in care. The Service Provider will also provide specialised training for all Staff who work with Children and Young People with high or complex care needs or disability. Specialised training includes issues concerning the prevalence of sexual abuse of Children and Young People with disabilities, assessing behaviours as indicators of sexual abuse, supporting and responding to disclosure per Recommendation 18 of the *Children in State Care Commission of Inquiry*.

2.4 Service Provider Support

2.4.1 The Service Provider will support, supervise and manage Service Provider's Staff to ensure compliance with the requirements of this Service Agreement by various means including

- 2.4.1.1 orientation to the role;
- 2.4.1.2 ongoing training relevant to the role;
- 2.4.1.3 regular supervision and performance review;
- 2.4.1.4 24 hour access to telephone advice;
- 2.4.1.5 support to Service Provider Staff who may be the subject of a care concern or special investigation;
- 2.4.1.6 access to Employee Assistance Program for counselling services; and
- 2.4.1.7 ensure the safety and proper care of Children and Young People by appropriately qualified and trained Service Provider's Staff.

3 Funding Details



Title:

Transitioning from Care Policy (metro regions)

Policy Number:	FAM / 92
Version:	1.0
Applies To:	All DFC
Issued By:	Families SA
Approved By:	Beth Dunning
Approved On:	June 2007
Policy Custodian:	Gabby Healy, Lead Program Officer - Strategy and Policy, Guardianship & Alternative Care Directorate
Due for Review:	June 2010
Accessibility:	Internal
DFC Strategic Objective	2: High Need Housing 3: Independence and Community Connection 4: Keeping Them Safe

1 Intent

The primary objective of this policy is to promote better outcomes for young people transitioning from care. This will be achieved through:

- early planning, from 15 years, for all young people transitioning and leaving care
- the provision, and/or promotion and advocacy of the provision, of life skills training, information, practical support and advice for young people; and
- assistance in accessing services for health, housing, education, employment and training and other services aimed at the achieving successful outcomes in independence.

2 Context

Families SA will provide, or promote and support the provision of, transition service responses that aim to improve the outcomes for young people leaving care. Early preparation for leaving care will become a priority when a young person in care turns 15 years. Transitioning to independence needs to be a gradual and flexible process that takes into account individual needs and maturity level of the young person. The young person must play an active role in this preparation and feel adequately supported when leaving care. Preparation for leaving care includes the facilitation, support and/or promotion of connection with transition and adult services in relation to health, housing, employment and education, as well as emotional, financial or 'family' support. Acknowledging that many young people require support beyond the expiration of their order, transition support services will be provided to eligible young people to 25 years, as required.

In response to the *Layout Report*, various strategic documents have highlighted the need for government to provide a broader concept of leaving care and post care support. These include:

- *Children's Protection Act 1993 - Amendments (2006) have mandated support to persons transitioning from care and post care under Section 8(h)(ii) to provide, or assist in the provision of, services to assist persons who, as children, have been under the guardianship or in the custody of the Minister, to prepare for transition to adulthood.*
- *Family and Community Services Act 1972 provides an implied duty for the Minister under section 10 To provide, assist in the provision of or promote services designed to assist individuals or groups to overcome the personal or social problems with which they are confronted.*

- *Keeping Them Safe: The South Australian Government's Child Protection Reform Program – Commitment to the "Minister's Children" – "supporting young people leaving care and making a successful transition to adulthood beyond their eighteenth birthday, by establishing a state wide leaving care/ex care program."*
- *Connecting to the Future: The strategic agenda for the Department for Families and Communities:*
 - Objective 2: High Need Housing:**
 - Develop and implement intensive supported accommodation strategies to provide housing and stability.....for young people under the guardianship of the Minister who are exiting care and have high and complex needs.
 - Work with other agencies and sectors on effective transition management to stable, appropriate longer term supported accommodation and services for the range of people in need, including young people and guardianship young people after care.
 - Objective 3: Independence and Community Connection:**
 - To enable people to take charge of their lives and ensure community connection opportunities are available to all.
 - Objective 4 Keeping Them Safe:**
 - Develop, monitor and regularly review individual plans for each of the Minister's children with input from the child or young person
 - Improve accommodation and support arrangements for young people exiting guardianship to provide stability through to adulthood.
 - Implement strategies consistent with the findings of the Senate Inquiry into Forgotten Australians in relation to older care leavers.
- *Rapid Response; Whole of Government Services – Recommendation 3.9 "preparation for the successful transition from care to independence"*
- *Keeping Them Safe – In Our Care – the intent is to offer strengthened placement options and supports with improved outcomes for children and young people in care, and care leavers in adulthood, as well as improved outcomes for Aboriginal children and young people and those living in regional areas.*
- *Commission of Inquiry (Children in State Care) - South Australia is awaiting the final outcomes of the Inquiry which will provide recommendations in relation to service requirements and support needs of care leavers.*

3 Risk

Non adherence to the policy will result in a lack of appropriate planning for individual young people leaving care and inconsistent service delivery, potentially minimising opportunities for young people to achieve more positive outcomes in their transition into independence.

4 Reference Documents and Links

4.1 Directive Documents

- Children's Protection Act 1993 (and previous titles)
- Young Offenders Act 1993
- Family and Community Services Act 1972
- Adoptions Act 1988
- Freedom of Information Act 1991
- Victims of Crime Act 2001
- Civil Liberty Act 1936
- Child Protection and Youth Offenders Act 1979
- Public Sector Management Act 1995
- Child Protection Review (Layton Report) 2003

4.2 Supporting Documents

- Post Care Policy
- Transition Planning for Young People Leaving Care (metro regions) practice guide
- Guardianship Case Plan practice guide
- Leaving Care Kit practice guide
- Life Domain Tool (guidelines and prompts)
- Life Domain Tool
- A Rapid Response by Health Services in Partnership with Families SA: Health Standards for Children and Young People under Guardianship of the Minister
- Housing SA, Families SA and Disability SA Service Delivery Guidelines for Housing

4.3 Related Documents and Resources

- Charter of Rights for Children and Young People in Care
- Information Sharing and Client Privacy Statement, Department for Families and Communities
- Foster Carers Charter
- Forgotten Australians*: A report on Australians who experience institutional or out-of-home care as children
- Bringing Them Home* report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their families.

5 Scope

This policy applies to all young people who:

- are, or have been, under the Custody (including secure custody) or Guardianship of the Minister current at 15 years (time limited or to 18 years)
- are aged between 15 – 25 years, and
- have spent a minimum of 6 months in alternative care from the age of 15 years; and
- are preparing to, are currently, or have recently transitioned from care

Young people covered by Family Care Meeting Agreements for a continuous period of 6 months current at 15 years or beyond are also covered by this policy.

Young people not under a care order but experiencing multiple placements, a lack established networks and multiple risk factors may be eligible for transition services as negotiated with the Manager, Integrated Youth Services.

6 Definitions

Alternative care is defined in the Children's Protection Act 1993 as care provided for a child on a residential basis—

- (a) by or through a government or non-government agency; or
- (b) in a foster home (including a foster home provided by a member of the child's family),

This care includes that provided in a detention facility for a child who is held there in lawful detention and care provided under independent living arrangements made for a child under the Minister's guardianship.

Care and Protection Orders

Care and Protection Orders refer to orders made by the Youth Court in accordance with section 38 of the Children's Protection Act 1993. These include:

- 12 month Guardianship orders, granted under section 38 1 (c) current at 15 years or beyond.
- Guardianship until 18 years of age, granted under section 38 1 (d)
- 12 month custody orders , granted under section 38 1 (b) current at 15 years or beyond
- Unaccompanied refugee minors, for whom the Commonwealth (Australian) Government has delegated guardianship to the state under the Immigration (Guardianship of Children) Act 1946.

Family Care Meeting Agreements and Voluntary Custody Agreements, for a continuous period of 6 months and current at 15 years or beyond, are also covered under this definition.

Also included are care and protection orders made in accordance with previous legislative instruments.

Secure Custody Orders

Secure Custody Orders refer to the sentence imposed when a youth is convicted, or found guilty, of an offence and that offence is punishable by detention in accordance with the Young Offenders Act 1993 and its predecessors.

7 Policy Detail – Policy Principles

Safety, Best Interests and Wellbeing

The safety, best interests and well being of young people (and their children, where relevant) will be the primary considerations when planning for an individual's transition from care. Underpinning this are the principles of:

respect for the individual and racial, ethnic, religious, spiritual or cultural identity
consideration of the individuals views and participation in decision making, and
strengthening and preserving connections to family and community

Early Preparation and Managing a Smooth Transition to Independence

Acknowledging leaving care as a process, not an event, planned interventions aimed at maximising a young person's capacity to live independently need to occur over time from 15 years to enable the young person to feel adequately prepared and supported in their transition to independence.

Access to Services and Equitable Outcomes

Families SA will support, promote and advocate that services to young people transitioning from care: are provided, where possible, with minimal disruption to lives, in locations of choice and by an agency or individual of choice; and provide opportunities that enable achievement of equitable outcomes in education, health, and personal development.

Access to Educational Opportunities

Families SA will support, promote and advocate that young people transitioning from care have continuing access to educational opportunities in line with young people in the general community.

Consumer Rights

Young people have the right to express concerns and to make complaints about services received and to have these concerns dealt with properly and promptly.

Collaborative Practices

In decisions affecting young people's lives, including care, placement/accommodation, family contact, health and education/employment, young people must be consulted, informed and participate (wherever possible). Case planning and service provision needs to be responsive to the stated, assessed and unique needs of the young person and involve regular review of circumstances and arrangements for transition from care.

Families SA will support, promote and advocate for collaborative practices with carers, families and significant others to promote the best possible outcomes for each young person transitioning from care.

Access to Information

Young people leaving care must be able to gain access to their Departmental records with minimal barriers and be provided with support in obtaining and viewing such records.

Responding to Diversity

Care leavers are not a homogenous group in terms of their backgrounds, care experiences, needs, abilities, cultures and ethnic backgrounds. Responses to young people transitioning from care will be based on individual needs and circumstances and delivered in ways which maximise an individuals potential to succeed.

Respect for Aboriginal and Torres Strait Islander Cultures

Families SA will promote and advocate that transition services provided to Aboriginal and Torres Strait Islander young people are respectful of cultural differences, provide connection with families, community

and culture to enhance cultural identity and are provided by Aboriginal and Torres Strait Islander service providers where accessible and available.

Cultural respect

Families SA will promote and advocate that transition services provided to young people from culturally and linguistically diverse backgrounds are respectful of cultural differences, provide connection with culture to enhance cultural identity and are provided by culturally appropriate service providers where accessible and available.

Maintaining Continuity of Significant Relationships

Relationships with family and significant others promotes healthy psychological development and identity. The re-establishment and/or strengthening of these relationships will be supported and promoted.

Privacy and confidentiality

Young people's privacy is to be respected and information will be confidentially handled. The effective care of young people under custody or guardianship is an across-government responsibility, dependent on the sharing of information. In sharing personal information Families SA will act with sensitivity and respect and will be aware of the potential impact any mishandling, or inappropriate withholding, of that information may have on the young person, his/her family, and on caregivers. The young person will be aware of information exchange, and where the young person is 18 years and over, informed consent will be sought. (see DFC Information Sharing and Client Privacy Statement for further detail).

Shared responsibility

All young people are members of the community, whether still in care or having recently transitioned from care. When a young person requires support and assistance, shared responsibility for the delivery of services and support that promote their health and well being needs to be acknowledged across government agencies and broader community services.

8 Policy Approval

Author:	Director: (or authorised delegate)	Executive: (if required)
Date:	Date:	Date:
Gabby Healy Senior Project Officer Strategy & Policy Guardianship and Alternative Care	Nicole Stasiak Manager Strategy & Policy Guardianship and Alternative Care	Nancy Penna Director Guardianship & Alternative Care



CONTACT FOR CHILDREN AND YOUNG PEOPLE POLICY

Policy Number:	FAM/ 170
Version:	1
Applies To:	Whole of Families SA
Issued By:	Marj Ellis
Approved By:	Executive
Approved On:	13.07.07
Policy Custodian:	Tricia McGeachie
Due for Review:	01/08/08
Accessibility:	Internal and External
DFC Strategic Objective	4. Keeping Them Safe

1 Intent

This policy is about the decision making regarding contact arrangements between children and young people (in the care of Families SA) to their birth families, siblings, grand parents and/or ex- carers and significant others. All Families SA staff must be aware of their responsibilities in relation to contact.

The primary aim of this policy is to ensure that decisions made about contact are child centric and in the child's best interest.

Child - centric used to be referred to as a child-focussed approach.

The strategies for being child - centric in decision making about contact are:

- Ensuring that all children are safe from harm.
- Contact decisions must be child centred.
- Contact must be a purposeful activity that is planned and coordinated.
- Where appropriate children's views must be sought and taken into account.
- Planning and decision making about the purpose and process of contact must be undertaken in partnership with the child, the family and the carers¹ – as part of a care team model of practice.
- Practice must be culturally appropriate. Families SA staff involved in case planning must consider the child's sense of racial, ethnic, religious, and cultural identity when making decisions and orders about contact.

This policy should ensure that:

- Families SA staff collaborate with family members having contact with children and young people about the purpose of their contact.
- Families SA staff involved in case planning consider the child's sense of racial, ethnic, religious, and cultural identity when making decisions and orders about contact.

2 Context

Decision making regarding contact arrangements between children and young people (in the care of Families SA) to their birth families, siblings, grand parents and/or ex- carers and significant others.

¹ Carers – includes foster parent, relative carers, and those staff in child residential care facilities

3 Risk

A medium risk for this policy, if not well implemented, is that it may result in variable practice across the Regions. A low risk is that there is a lack of commitment to the new policy/ practice guidelines.

4 Reference Documents and Links

4.1 Directive Documents – legislation

Proclaimed February 06 - the Objects (Section 3) and Fundamental Principles (Section 4) of the CPA have been completely rewritten to strengthen child - centeredness in all dealings under this legislation. Children's Protection Act 1993

As well, the Aboriginal Child Placement Principle became a legal requirement as opposed to a policy consideration. The Guardianship and Alternative Care Directorate are developing new policy and practice guidelines on Aboriginal children in care.

The Youth Court may or may not make a specific order regarding contact for the child to his or her birth family. Sometimes the court leaves the arrangements to Families SA as part of their case plan.

The Youth Court can order contact / access arrangements for the child under the following sections:

Section 21 Orders

After the Youth Court is satisfied that there are sufficient grounds for making an order under this section and it is the child's best interests the Court can make:

- (1) (d) *an order directing a party to the application who resides with the child to cease or refrain from residing in the same premises as the child.*
- (e) *an order directing a party to the application to refrain from having contact with the child.*

An order under subsection (1) has effect for up to six weeks and can only be extended (only once) for up to four weeks on the application of the Chief Executive .

Section 23 Power of Adjournment

The court may adjourn a hearing for a period not exceeding seven days and during that period may make one or more orders.

The following legislation relates to access to the child:

- (3) (c) *an order directing that a specific person be allowed, or not allowed access to the child.*

Section 38 Courts power to make orders

If the court finds on an application under this Division the court can exercise one or more of the following powers.

(1) (a) *The Court may require a parent, guardian or other person who has the care of the child, or the child, to enter into a written undertaking for a period, not exceeding 12 months to do any specific thing, or refrain from any specific thing, and if the court thinks fit, require the child to be under supervision of the Chief Executive or some other specified person or authority for the duration of the undertaking.*

(e) The Court may direct a party to the application to do one or more of the following:

- (i) *to cease to refrain from residing in the same premises as the child;*
- (ii) *to refrain from coming within a specified distance of the child's residence;*
- (iii) *to refrain from having any contact with the child except in the presence of some other person;*
- (iv) *to refrain from having any contact with the child at all.*

(f) *The court may make consequential or ancillary orders –*

- (i) *providing for access to the child.*

4.2 Supporting Documents

The recently developed - Child Protection Practice Guidelines – Contact which accompanies this document.

Families SA web site will provide electronic links to procedures, etc relevant to this policy.

4.3 Related Documents and Resources

- Keeping Them Safe: The SA Government's Child Protection Reform Program
- Connecting to the Future- the Strategic Agenda for DFC
- Families SA Business Plan
Refer – especially - Child Centric – 43107
- Child protection
Refer Child Protection Manual – Volumes 1 & 2
- Children's Protection Act 1993
- The Child Protection Development Plan 2006 – 2008
- Practice Guidelines for Contact
- Guidelines on Case Recording

5 Scope

The range of this policy is applicable to:

- Children (up to 18 years of age) who are under Care and Protection Orders, Investigation and Assessment Orders, or Ministerial Custody or Guardianship Orders of the Youth Court. For example, Youth Court Orders under s21, s23 and s38 of the *Children's Protection Act 1993* (CPA).
- Children up to 18 years who are under a Voluntary Custody Agreement.
- All Families SA staff and volunteers who are involved in facilitating, organising or supervising contact as part of casework practice.

6 Definitions

Contact / access – Have same meaning - so they are interchangeable words

Family – *in relation to a child means the child's immediate family (including all guardians) and the child's extended family (that is to say, all other persons to whom the child is related by blood or marriage) and in relation to Aboriginal or Torres Strait Islander child, includes any person held to be related to the child according to kinship rules, or Torres Strait Islander kinship rules, as the case may require.*

Source: Children's Protection Act 1993 - Interpretation

7. Policy Detail

- 7.1 This policy aims to ensure that case-work decisions about contact are delivered using a child centred approach which is consistent with the amendments to the Objects and Principles of the Children's Protection Act 1993 (CPA).
- 7.2 The paramount consideration in the exercise of powers under the CPA are that the child's safety, care, well being and their best interests are its primary object - to ensure every child has a right to be safe from harm.
- 7.3 In determining child's best interests consideration must be given to the need to preserve and strengthen the relationships between the child, the child's parents and grandparents and other members and of the child's family (whether or not the child is to reside with those parents, grandparents or other family members).
- 7.4 If the child is able to express his or her own views as to his or her best interest - those views must be taken into account.
- 7.5 The child's sense of racial, ethnic, religious, spiritual and cultural identity must be encouraged, preserved and enhanced as well as respecting traditions and values of the community into which the child is born.
- 7.6 Changes to the legislative base of child protection focus on a whole of community response to child protection therefore opportunities exist for collaborative practice in the delivery of supervised access services and in the use of "access" friendly locations for supervising.
- 7.7 This policy must be reviewed within 12 months (or earlier) from the current issue date to evaluate the implementation process.

8. Policy Approval

Authors: Date 29/06/07	Director: (or authorised delegate) Date: 13/07/07	Executive Date: 13/07/07
Name: Tricia McGeachie Position: Lead Program Officer, Child Protection Directorate Name: Paul Heinrich, Position: Principal Social Worker, Country Regional Office	Name: Marj Ellis Position: Director, Northern Region	Name: Beth Dunning Position: Executive Director: Families SA

4.13 EARLY INTERVENTION

4.13.1 What early intervention programs are available to supporting children in vulnerable family situations (prior to the removal of children under care and protection orders)?

4.13.2 What proportion of these programs are delivered by:

- Government; or
- Non-government organisations?

4.13.3 How is the efficacy of early intervention programs measured?

Note that in compiling this information the percentage split between programs delivered by Government and Non-Government is based on an estimated calculation.

The programs identified include targeted and universal approaches that support all children and young people, including those in vulnerable family situations, to access quality early childhood development, care and education.

Name: Universal Contact Visit

Service type: Universal	Core client group: New parents	Link to vulnerable children: Direct	Responsible agency: Dept. Education & Child Development and Dept. Health & Ageing
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Description:

A Universal Contact Visit is offered to all parents in South Australia, following the birth of their baby, by a registered community Child and Family Health nurse. The visit is comprehensive and includes conducting the first child health check, responding to parents' needs and providing information on feeding and settling their baby, and ensuring a safe environment for the baby (including safe sleeping arrangements). The visit provides the link for care from the birthing hospital into the community and is the primary client entry point into Child and Family Health Services.

Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government
How is the efficacy of early intervention programs measured? KPI % conducted within 2 weeks of receipt of referral is 80%.		

Name: Family Home Visiting Program			
Service type Targeted	Core client group Families	Link to vulnerable children Direct	Agency Dept. Education & Child Development and Dept. Health & Ageing
Description:			
The Family Home Visiting Program is a two year nurse led preventative parenting program based on building a partnership between the Child and Family Health Service nurse and the family, to provide a supportive environment and the best possible developmental opportunities for children. The program has a multi-disciplinary approach, including Aboriginal Cultural Consultants for families who identify as Aboriginal or Torres Strait Islander.			
Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government	
How is the efficacy of early intervention programs measured? Formal evaluation completed by University of Adelaide in 2013			

Name: Newborn and Children's Hearing Screening Program			
Service type Universal	Core client group Newborn infants	Link to vulnerable children Direct	Agency Dept. Education & Child Development and Dept. Health & Ageing
Description:			
A population based hearing screening service for newborn infants aged 0 - 6 months, which includes screening of all infants (following birth) in both public and private hospitals across the state.			
Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government	
How is the efficacy of early intervention programs measured? % eligible infants screened by 4 weeks old			

Name: Development/Health Checks			
Service type	Core client group	Link to vulnerable children	Agency
Universal	Children	Direct	Dept. Education & Child Development and Dept. Health & Ageing
Description:			
<p>The Child and Family Health Services promote the development of children in safe and nurturing environments. There is currently no agreed national schedule for checks, with the Child and Family Health Service adopting a recommendation from the National Health and Medical Research Council of Australia (NHMRC) that parents and providers monitor development over time and not just at specific times</p> <p>To support this, all families are provided with a copy of the Child Health Record (the Blue Book) that guides the recording of their child's development, and either provides assurance or information that they can take to a health professional to discuss any concerns that they have. and are offered at:</p> <ul style="list-style-type: none"> • 1-4 weeks with the Universal Contact Visit • 6 weeks (with a general practitioner or paediatrician) • 6-9 months (targeted) • 18 to 24 months (targeted) • 3 years. (general practitioner or paediatrician) <p>Children can also be seen at any age when parents have concerns, questions or issues.</p> <p>The Child and Family Health Service nurses also visit kindergartens/ pre-school centres across the state to provide vision, hearing, growth and developmental checks, providing opportunities for parents to discuss parenting or health concerns. Teachers, nurses and parents work in partnership to assess children's needs before school entry. A 4 year old health check can also be provided by a general practitioner or paediatrician</p> <p>Women's and Children's Health Network staff can provide information about immunisation through the Child and Family Health centres, and via the Parent Helpline. Immunisation is offered as part of other child health services from many clinic sites. Free vaccines are available at specific health checks, in accordance with the National Immunisation Schedule.</p>			
Proportion of these programs delivered by government/non-government: %	Government 100%		Non-government
How is the efficacy of early intervention programs measured? Developmental Concerns - % seen identified at 18-24 months			

Name: Parent Helpline			
Service type	Core client group	Link to vulnerable children	Agency
Universal	Parents	Indirect	Dept. Education & Child Development and Dept. Health & Ageing
Description:			
<p>The Women's and Children's Health Network (WCHN) Parent Helpline is a telephone information service for parents in South Australia. It provides telephone information and support at any time 7 days a week (calls received between 7.15am - 9.15pm are answered by local Parent Helpline staff; calls received outside these hours are automatically redirected to the national <i>healthdirect</i> helpline). It is available to parents of children from birth to 12 years who live anywhere in South Australia and provides information about health, behaviour and relationships. It is able to provide information to callers on where to go for further help. Calls are confidential.</p> <p>Parent Helpline staff have an information database based on the latest research, so they can give the most up-to-date information. Staff are qualified nurses, social workers and community health workers and receive ongoing training and support.</p>			
Proportion of these programs delivered by government/non-government: %	Government 100%		Non-government
How is the efficacy of early intervention programs measured?			

Name: Parenting SA			
Service type	Core client group	Link to vulnerable children	Agency
Universal	Parents	Indirect	Dept. Education & Child Development
Description:			
<p>Established in 1996, Parenting SA provides South Australian parents with up-to-date printed information about good parenting practices. Parents advise that the information is very useful, practical, and easy to understand. The information (80 Parent Easy Guides [PEGs]) is displayed in health, education and community services across South Australia, and downloadable from the Parenting SA website at www.parenting.sa.gov.au. PEGs have also been specially developed for Aboriginal families and new migrant families.</p>			
Proportion of these programs delivered by government/non-	Government 100%		Non-government

government: %		
How is the efficacy of early intervention programs measured?		

Name: Children's Centres for Early Childhood Development & Parenting			
Service type	Core client group	Link to vulnerable children	Agency
Universal and targeted	Families and children	Direct	Dept. Education & Child Development
Description:			
<p>There are currently 42 Children's Centres operational in South Australia. Children's Centres aim to support children and families achieve the best possible learning, health and wellbeing outcomes in a universal setting with targeted responses for children and families who may require additional support. Children's Centres are a direct result of a South Australian government inquiry into early childhood services and research that shows good early experiences such as, a healthy start, reading to children and support for families, bring long term benefits to children, families, communities and the economic future of the State.</p>			
<p>There is a strong connection between Children's Centres and the local school, making transition from the centre to the school much easier for both parents and children. Children's Centres aspire to the following outcomes for children:</p> <ul style="list-style-type: none"> • children have optimal health and development • parents provide strong foundations for their children's healthy development and wellbeing • communities are child and family friendly • Aboriginal children are safe, healthy, culturally strong and confident. 			
<p>Programs and services in Children's Centres are delivered in partnership by government and non-government agencies and involve community based organisations, parents, community members and staff. Targeted programs provided by Children's Centres for vulnerable children include:</p> <ul style="list-style-type: none"> • The Allied Health Program that has speech pathology and occupational therapy staff in Children's Centres to identify and respond early to supporting families with young children who are developmentally vulnerable and to ameliorate developmental delays. • The Family Services program that has specialist staff in children's centres designated to support vulnerable families and enhance family and community capacity in responding to the needs of vulnerable children. Services include support for families experiencing homelessness, domestic violence drug and alcohol and mental health issues and those involved in the child protection system. Family Services Coordinators work in partnership with Families SA to support families whose children are at risk of removal from home care, to support reunification where children are in out-of-home care and support family contact 			

where children are unable to return to the care of their parents.		
Proportion of these programs delivered by government/non-government: %	Government 70%	Non-government 30%
How is the efficacy of early intervention programs measured? A three year Children's Centre Evaluation: conducted by the Telethon Institute		

Name: Parenting groups, playgroups and playcentres			
Service type	Core client group	Link to vulnerable children	Agency
Universal and targeted	Parents and children	Direct	Dept. Education & Child Development
Description:			
<p>Playgroups offer an opportunity for parents, carers and young children from birth to five years of age to meet in a relaxed setting, share experiences and build a support network. Playgroups and playcentres promote young children's development through play experiences. They provide a range of play experiences to support children's social, emotional, physical and communication development. Activities aim to give children lots of time to experiment, explore and interact.</p> <p>Supported playgroups are led by a trained facilitator. They are ideal for families and children under five who for varying reasons may not attend a community playgroup. They offer planned activities each session for young children to learn through play and for families to develop networks with others who have similar needs, for example:</p> <ul style="list-style-type: none"> • families from non-English speaking and culturally diverse backgrounds • Aboriginal families • teenage and young parent families • families with mental health or disability issues • families who are socially isolated, vulnerable or disadvantaged • grandparents who are carers. <p>Supported playgroups are set up according to the needs of the local community and often partner with organisations that offer other services to these groups.</p>			
Proportion of these programs delivered by government/non-government: %	Government 100% of PinS Supported Playgroups in Schools (50 Sites)	Non-government	
How is the efficacy of early intervention programs measured? Termly reports; collecting attendance data and qualitative data on playgroup outcomes.			

Name: Strong Start

Service type	Core client group	Link to vulnerable children	Agency
Targeted	Mothers	Direct	Dept. Education & Child Development

Description:

- The Strong Start program started in 2013 in the northern suburbs of Adelaide and supports families with complex health, education and social needs. Working with a range of providers, Family Support Workers work with families to increase their ability to 'be available' for their baby by:
- supporting parents to manage stress and develop life skills strengthening families problem solving and resilience
- improving attendance at antenatal health assessments
- building a nurturing relationship with their child
- ensuring greater access to community and governmental support services
- addressing issues of vulnerability i.e. homelessness, substance abuse, and
- providing developmental opportunities for the baby, including access to child care.

The current program operates in the Playford area. Expansion of Strong Start into the southern suburbs – from Marion to Noarlunga – is currently underway.

Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government
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How is the efficacy of early intervention programs measured? Number of women in the program

Name: Early Child Parent Service (Elizabeth Grove and the Parks Community Centre)

Service type	Core client group	Link to vulnerable children	Agency
Targeted	Mothers	Direct	Dept. Education & Child Development and Dept. Health & Ageing

Description:

The Early Child Parent Service provides services in the northern metropolitan suburbs and the western suburbs where families are experiencing challenges that impact on their child's development. Where possible, families are connected during pregnancy, aiming to provide practical support as well as providing opportunities to make changes. The team have experience working with babies and young children and are specially trained to work with families facing challenging situations. Information is provided to help understand

children's development, and explore how they grow and learn, developing confidence and self-esteem in parenting. Staff also support parents by providing information on ways to keep families healthy. Families are also linked with other services in local areas that may be useful, and with other parents to create a network of friends.

Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government
How is the efficacy of early intervention programs measured?		

Name: Learning Together			
Service type	Core client group	Link to vulnerable children	Agency
Targeted	Parents and children	Direct	Dept. Education & Child Development
Description:			
Learning Together works with families of children aged birth to three years, in areas of disadvantage to involve them in their children's learning. Learning Together was recognised by the OECD as an 'innovative learning environment' in 2011.			
Learning Together SACE is part of the Learning Together program in some sites and enables parents to complete their SACE while focussing on aspects of parenting and children's learning. Learning Together @ Home is a program that connects with families primarily, but not exclusively, through home visiting. Learning Together @ Home aims to enhance the ability of families to support their children's learning through play.			
Proportion of these programs delivered by government/non-government: %	Government 100% (7 LT programs) 100% (22.9 FTE Learning Together @ Home field workers)	Non-government	
How is the efficacy of early intervention programs measured? Collect quantitative and qualitative data through termly reports including attendance and program outcomes.			

Name: Pregnancy and Birthing support initiatives			
Service type Targeted	Core client group Women and children	Link to vulnerable children Direct	Agency Dept. Health & Ageing (delivered in DECD Children's Centres)
Description:			
The Northern area Midwifery Group Practice will soon be providing antenatal services at the Kaurna Plains, John Hartley and Mark Oliphant Children's Centres in addition to the existing access point at Parafield Gardens. This will help to link women into community settings and provide the catalyst to enable the long term community support for these families. The Family Contact Program (Children's Centre and Families SA staff) work in partnership to assist in breaking the cycle of multigenerational vulnerability and disadvantage by supporting family reunification.			
Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Out of School Hours Care (OSHC)			
Service type Universal	Core client group Children (school aged)	Link to vulnerable children Direct	Agency Dept. Education & Child Development
Description:			
Out of school hours care (OSHC) services provide a range of recreational and leisure experiences for school aged children through before school and/or after school and /or on pupil free days and/or during school holiday periods. OSHC services provide care mostly for children attending school, and can also care for children who have not started school. OSHC services must give school children priority over children who have not yet started school. The Intervac program improves access and participation in OSHC services for children with additional needs or disabilities. It also supports services to meet the requirements of the Disability Discrimination Act 1992. Intervac funding is provided by DECD to approved OSHC services and state-funded vacation care services where there is a need for additional educators to include children with an additional need or disability.			
Proportion of these programs delivered by government/non-government: %	Government	Non-government As of 6 May 2015 of the 228 services operating on DECD sites 43 are operated by third party providers = .07% and the others by	

		School governing councils (not delivered by government)
How is the efficacy of early intervention programs measured? N/A		

Name: Family Day Care			
Service type Universal	Core client group Children (Birth – 12)	Link to vulnerable children Direct	Agency Dept. Education & Child Development
Description: Family day care (FDC) services provide a home-based care program for children Birth to age 12. The respite care program provides respite care for families who have a child with a disability. Educators provide care in a home-based environment according to the National Quality Framework requirements.			
Proportion of these programs delivered by government/non-government: %			
How is the efficacy of early intervention programs measured? N/A	Government 30% (12 schemes)	Non-government 70% (24 schemes)	

Name: Preschool			
Service type Universal	Core client group Children (3-6)	Link to vulnerable children Direct	Agency Dept Education & Child Development
Description: Preschools provide an educational program for children in the year prior to beginning reception. The educational program is a play-based program where educators focus on children's individual learning and development needs based on the Early Years Learning Framework. Aboriginal and Torres Strait Islander children and children under the guardianship of the Minister are eligible to attend preschool from three years of age.			
Proportion of these programs delivered by government/non-government: %			
How is the efficacy of early intervention programs measured? Annual census records proportion of children enrolled in pre-school.	Government 74%	Non-government 26%	

Name: Occasional care

Service type	Core client group	Link to vulnerable children	Agency
Targeted	Children	Direct	Dept. Education & Child Development

Description:

Occasional care is short term child care for babies, toddlers and children under school age. In South Australia, occasional care is generally offered through government preschools and in some child care centres. Occasional care can be used by appointment or when parents need respite. Priority of access is given to:

- children not enrolled in another early years service
- Aboriginal or Torres Strait Islander children
- children from low income families
- children with additional needs or those who are at risk
- children of parents with a disability.

Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government
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How is the efficacy of early intervention programs measured?

A biennial utilisation review is undertaken to reallocate underutilised places to areas of high demand.

Name: Day Service

Service type	Core client group	Link to vulnerable children	Agency
Targeted	Parents	Direct	Dept. Education & Child Development and Dept. Health & Ageing

Description:

If new parents are having some ups and downs getting their new baby feeding or settling comfortably, Child and Family Health Services can provide a day support service. A nurse will spend several hours with the parent at one of the larger Child and Family Health centres, helping the parent to understand their baby's needs. This may include provision of breastfeeding support, health information, reading baby's cues and tips on settling the baby. If necessary, parents can be referred to Torrens House for extra support. Referral occurs via local Child and Family Health nurses.

Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government
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How is the efficacy of early intervention programs measured?

Name: Torrens House			
Service type Targeted	Core client group Parents	Link to vulnerable children Direct	Agency Dept. Education & Child Development and Dept. Health & Ageing
Description:			
Torrens House is a residential unit located at 295 South Terrace, Adelaide. Torrens House is part of the Child and Family Health Service. It offers a free service to families with infants aged up to 12 months who are accommodated for a 3½ day stay, Tuesday - Friday (the unit is not open at other times). Families are admitted to Torrens House when requiring additional assistance with unresolved feeding, settling and sleeping issues to provide more intensive support to address identified health issues.			
Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Coordination of services for children and young people with disabilities and their families			
Service type Targeted	Core client group Children with disabilities	Link to vulnerable children Direct	Agency Dept. Education & Child Development and Dept. Communities & Social Inclusion
Description:			
DCSI (Disability Services) has been working in partnership with the Department for Education and Child Development on one of the initiatives under DECD's Nation Partnership Supporting Students with Disabilities. A Team around the child approach for children with complex needs will be implemented at 4 to 6 school sites. The initiative will enable integrated service delivery at the sites as well as inform the broader application of the team around the child approach between schools and disability services.			
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Aboriginal Community Education Officers (ACEO)			
Service type Targeted	Core client group Aboriginal Students	Link to vulnerable children Direct	Agency Dept. for Education and Child Development
Description: The ACEO is a school based position to support the engagement and participation of Aboriginal parents, families and communities in the education of their children and young people. ACEOs work with other school staff and service providers to support the wellbeing and education needs of Aboriginal children and young people. ACEOs support schools to provide a culturally competent and culturally safe learning environment for Aboriginal students.			
Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Aboriginal Services Engagement Officers (ASEO)			
Service type Targeted	Core client group Aboriginal Students	Link to vulnerable children Direct	Agency Dept. for Education and Child Development
Description: The ASEO will have a proactive role in a community education model working with families. ACEOs work collaboratively to develop, support and implement community education initiatives targeting attendance, wellbeing and engagement and will have a greater interface with school based Aboriginal Community Education Officers as a support to student attendance counsellors and other support services providers. ACEOs will collaborate with support services to support improved attendance, wellbeing and engagement and establish and maintain interagency connections.			
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Workabout Centre			
Service type	Core client group	Link to vulnerable children	Agency
Targeted	Aboriginal Students	Direct	Dept. for Education and Child Development
Description:			
WORKABOUT is an innovative, integrated model for connecting Aboriginal youth with pathways that lead to sustainable employment. These include pathways to post-secondary training, higher education that lead Aboriginal youth to successful employment.			
Specifically, the WORKABOUT Centre coordinates the industry-based training programs available to young Aboriginal people and integrates existing career transition and employment services. By doing this, it assists both the student and their school to access a broad range of industry-based learning with the aim of improving school retention and completion rates of the South Australian Certificate of Education (SACE).			
The WorkAbout Centre training program is known as 'Playing the Job Game' which is delivered in 5 steps, with each step preparing the student for a first experience in the workplace and/or training environment. The training program targets year 8 to year 12 Aboriginal students with each step's 'learning descriptor' designed to help students gain generic training and employability skills and knowledge. The five steps's include:			
Resumes	Personal Identification		
Portfolios	Training Plan		
Jobs	Training Pursuit		
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Aboriginal Programs Assistance Scheme (APAS)			
Service type	Core client group	Link to vulnerable children	Agency
Targeted	Aboriginal Students	Direct	Dept. for Education and Child Development
Description:			
The Aboriginal Programs Assistance Scheme provides funding to schools for the employment of tutors to support students in their academic achievements. In 2014, APAS operated as an early intervention model. Funding was provided with the aim of improving Aboriginal student literacy and numeracy outcomes, attendance and retention, SACE completion, and parent and community engagement.			

Proportion of these programs delivered by government/non-government: %	Government	Non-government
How is the efficacy of early intervention programs measured?		

Name: Starting Out Right (SOR)			
Service type Targeted	Core client group Aboriginal Students	Link to vulnerable children Direct	Agency Dept. for Education and Child Development

Description:

The 'Starting Out Right' project has been developed with the aim to improve the health, development, learning and wellbeing of Aboriginal children through a series of parent workshops.

The project encompasses two categories:

"Families Learning" to work with Aboriginal parents in preschool settings through empowering the role of the ACEO under the leadership of school and preschool leaders to focus on improving health, development, learning and wellbeing of Aboriginal children
"Together we are Strong" – to work with schools and preschool leaders to design and deliver local literacy workshops to Aboriginal parents and caregivers on listening to reading, understanding NAPLAN or other appropriate parent support programs.

The workshops aim to:

- Ensure all Aboriginal children have a great start in their literacy and numeracy learning;
- Work with Aboriginal families using research from neurosciences on how children learn best at different ages and stages;
- Build the capacity of Aboriginal parents to benefit from strong partnerships between early childhood settings, school and families;
- Build the literacy and numeracy knowledge of Aboriginal education support personnel within DECD & empower them to link the learning of schooling with the engagement of Aboriginal parents; and
- Support pre-schools and schools to build parental literacy and numeracy knowledge and skills to support the learning of their children through the Individual Learning Plan process and basic literacy and numeracy skills.

Proportion of these programs delivered by government/non-government: %	Government	Non-government
How is the efficacy of early intervention programs measured?		

Name: Keeping Them On Track (KTOT)			
Service type Targeted	Core client group Aboriginal Students	Link to vulnerable children Direct	Agency Dept. for Education and Child Development
Description:			
'Keeping them on track' is designed to support achievement of South Australia's Strategic Plan Target T6.16 SACE or equivalent: Annually increase the proportion of 15-19 year olds who achieve the SACE or comparable senior secondary qualification. The program also supports achievement of the Closing the gap target of 90% SACE completion (or equivalent) by Aboriginal students by 2020.			
The initiative monitors all Aboriginal senior secondary enrolments at key transitional points of secondary schooling with an aim to improve retention to Year 12 and SACE completion. The initiative specifically focuses on the collection and analysis of individual student data across the student's Year 10, 11 and 12 senior schooling experience to provide clear information to the student, parents, and educators to support the completion of the SACE, and the student's transition to further training, education or an employment pathway.			
Students are supported to develop an individual learning plan to achieve their SACE, identify their intended career pathway, relevant qualification requirements, and subject choices. Students are monitored and supported to remain on track to achieve their goals.			
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Getting Them On Track (GTOT)			
Service type	Core client group	Link to vulnerable children	Agency
Targeted	Aboriginal Students	Direct	Dept. for Education and Child Development
Description:			
'Getting them on track' provides a planning and monitoring approach for Aboriginal students for their school journey from Reception to Year 7. The Getting them on track initiative has been developed to support the achievement of South Australia's Strategic Plan targets and to support the targets of the National Education Agreement in 'closing the gap' on Indigenous early childhood and schooling outcomes.			
Getting them on track supports all Aboriginal students towards successfully attending, engaging, completing and transitioning through the primary school setting from Reception to Year 7. The initiative monitors the progression of Aboriginal students from R-7 at a Partnership and site level each term, and engages educators, Aboriginal parents, caregivers and students in an individualised learning support and case management strategy using individual learning plans (ILP) as a planning and monitoring mechanism.			
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Enter For Success			
Service type	Core client group	Link to vulnerable children	Agency
Targeted	Aboriginal Students	Direct	Dept. for Education and Child Development
Description:			
The Enter For Success initiative enables Aboriginal students transitioning from Year 7 to Year 8 to enrol in any South Australian government school of their choice.			
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Strategies for Managing Abuse Related Trauma (SMART) program			
Service type Universal/Tailored	Core client group All students	Link to vulnerable children Direct	Agency Dept. Education & Child Development
Description: <p>Education staff occupy a critical role in the development and implementation of a multi-level range of responses to at-risk and abused children including individual and whole centre/school approaches.</p> <p>Effective intervention and protection of children relies upon a sound understanding of the impact of abuse related trauma, and an ability to implement support plans for these children that not only reduce the risk they are exposed to but also promote their recovery from the harm they have experienced.</p> <p>The Strategies for Managing Abuse Related Trauma (SMART) program provides a clear framework for understanding the significant impact of abuse related trauma on the behaviour, learning and lives of children. SMART gives staff in education care settings the necessary understanding of the impact of abuse related trauma and builds their capacity to respond to the particular needs of those children and engage them in learning.</p>			
Learning outcomes include: <ul style="list-style-type: none"> • Increase participant understanding of the theoretical underpinnings of abuse related trauma and its impact on brain functioning and development of children • Conceptualisation and application of a framework for assessing the impact of complex child abuse related trauma on the cognitive, social and emotional functioning of children, with specific reference to learning and behaviour • Demonstrate an understanding of the relevance of traumatic memory states and trauma oriented relational patterns to the behaviour of children within an education setting • Build on participant's practice skills in applying models of intervention which promote recovery for children using principles of restorative justice, integrative psychology and competency based relationship processing • Consider ways to support staff confidence and skill in responding to children at risk of abuse, in addition to the promotion of a positive environment that is effective in its response to the critical needs of children at risk and child abuse prevention 			
Proportion of these programs delivered by government/non-government: %			
<p>Government: Manages the program development, procurement, administration and funding.</p> <p>Non-government: The Australian Childhood Foundation (ACF) is responsible for delivering the program to participants (100%).</p>			
How is the efficacy of early intervention programs measured? Feedback from participants (staff in education and care settings) is			

collected by ACF. It is then written up into report each year and presented to DECD.

Name: Aboriginal Education Teachers

Service type	Core client group	Link to vulnerable children	Agency
Targeted	Aboriginal Students	Direct	Dept. for Education and Child Development

Description:

Aboriginal education teachers (AET) have a specific focus on the development of teaching and learning practices to improve the outcomes for Aboriginal students in the school community. In 2015, approximately 226 AETs are employed in schools at a teacher level based on the number of Aboriginal student enrolments.

Proportion of these programs delivered by government/non-government: %	Government	Non-government
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How is the efficacy of early intervention programs measured?

Name: Better Behaviour Centres

Service type	Core client group	Link to vulnerable children	Agency
Targeted	Children and Young People (Year 3 – 10)	Direct	Dept. for Education & Child Development

Description:

Six Better Behaviour Centres were created by the State Government of SA in 2010 to provide early intervention for students whose behaviour and learning outcomes indicate a high potential for early disengagement from education. The four metropolitan, primary centres which take students (years 3 – 7) on a part-time basis while they attend their school for the remainder of the week, from ten up to twenty weeks. The two regional, secondary centres cater for students on full-time placements for up to twenty weeks. The students participate in comprehensive pre and post testing in key learning areas such as literacy and numeracy, as well as in social skills supported by a Family Engagement Coordinator (social worker or psychologist) unique to these centres, who designs programs for students and their families to build parenting capacity and emotional resilience.

Proportion of these programs delivered by government/non-government: %	Government	Non-government
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How is the efficacy of early intervention programs measured?

Name: Responding to Abuse and Neglect – Education and Care training (RAN-EC)			
Service type	Core client group	Link to vulnerable children	Agency
Universal	All students	Direct	Dept. Education & Child Development
Description:			
<p>Responding to Abuse and Neglect - Education and Care (RAN-EC) Training is available to staff to ensure they respond most appropriately to child abuse and neglect. Everyone wishing to work or volunteer with children and young people on DECD sites must undertake training in their child protection responsibilities. RAN-EC training is compulsory for employment in education and care settings and is a full day face to face course.</p> <p>Government and non-government education sectors both use the RAN-EC training product in education and care settings and is developed in collaboration. RAN-EC training is intended to give everyone the same understanding of their child safeguarding responsibilities. Once the full day training has been completed for the first time, RAN-EC update training is undertaken online and free of charge every three years.</p> <p>In the country/remote areas, some DECD staff in education offices are approved and provide the RAN-EC full day training.</p> <p>RAN training is one of the requirements for teacher registration in SA.</p> <p>In relation to Pre-service teachers and tertiary students, some universities offer their students a modified RAN-EC lecture Promoting Safety and Wellbeing Induction which has been approved for restricted use. If this option is not available through the university, pre-service teachers and tertiary students must attend the full day RAN-EC training.</p> <p>Modified RAN-EC training sessions are also required for DECD site based volunteers and DECD employed bus drivers. The RAN-EC induction outlines for volunteers and DECD bus drivers their child protection responsibilities and provides guidelines on protective practices. The DECD site leader is responsible for facilitating the two hour RAN-EC induction with DECD volunteers and bus drivers or they may delegate the responsibility to another member of the DECD site leadership team.</p> <p>In relation to third party providers who provide a service to DECD sites, they are responsible for providing RAN-EC Induction to their volunteers. Third party providers must confirm for DECD site leaders that their volunteers have accessed the induction. They are able to download the same materials as DECD sites use as per the DECD Training Resources - RAN-EC Induction .</p> <p>Volunteers from third party providers that have an Agency Agreement or a Deed with the Minister and those who are described specifically in DECD policies e.g. the DECD Approved Panel of Providers must abide by the training and induction requirements stipulated in those documents and resources. In some cases it may be a requirement for these volunteers to participate in the full day RAN-EC training session. The third party provider in these instances should arrange for the training for their volunteers and should cover the cost.</p>			

Proportion of these programs delivered by government/non-government: %	Government: Approximately 10% of the RAN-EC full day training is provided by DECD country staff in DECD education offices. DECD manages the full day training program, the delivery provided by the preferred providers, the review, update and the development of the training.	Non-government Approximately 90% of the RAN-EC full day RAN-EC training is provided by DECD approved preferred providers
How is the efficacy of early intervention programs measured? Feedback from RAN-EC participants is collected by the preferred providers in relation to the full day training collated and provided to DECD. The feedback is one way that informs the future development of RAN-EC training. DECD has Quality Service Agreements with DECD preferred providers. The DECD approved preferred providers are limited to a small group of providers, as this allows us to ensure quality control. By dealing with a relatively small group of providers, DECD can readily monitor/review and ensure that consistent high quality child protection information and messages are delivered at the RAN-EC training sessions.		

Name: Learning Centres			
Service type	Core client group	Link to vulnerable children	Agency
Targeted	Children and Young People (Foundation – Year 10)	Direct	Dept. for Education and Child Development
Description:			
Three Learning Centres are located across the Adelaide metropolitan area (regional schools are supported by additional funds in lieu of access to Learning Centres) to support the re-engagement with learning of students whose behaviour is too complex and challenging for mainstream schools. These are predominantly students who have been excluded from school (10 weeks at a time) for extreme behaviours. The students are placed full-time in a Learning Centre for the duration of their exclusion, where they participate in intensive social skills, literacy and numeracy programs differentiated on the basis of pre-testing to meet each student's particular needs. Through consistent teaching, modelling and rehearsal of fundamental school behaviours, the programs build students' emotional resilience and self-management to enable their effective re-integration in mainstream education			
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Hospital Education Services			
Service type	Core client group	Link to vulnerable children	Agency
Targeted	Pre-school to Year 12	Direct	Dept. for Education & Child Development and Dept. for Health
The Hospital Education Services (HES) provides education services and programs for pre-school, junior primary, primary and secondary students who are patients at the Women's and Children's Hospital (WCH), Flinders Medical Centre (FMC) and Lyell Mc Ewin Hospital. The HES also supports teachers who work within the CAMHS managed Adolescent Services Enfield Campus and Behaviour Intervention Services Enfield Campus to provide educational support to children and young people participating in programs delivered at these sites. HES teachers use a range of responsive strategies and methodologies to ensure educational programs meet the needs of individual students. These include individualised programs that result from liaison with the student's school to provide continuity of curriculum and facilitate transition back to school.			
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
How is the efficacy of early intervention programs measured?			

Name: Flexible Learning Options (FLO) Enrolment Strategy			
Service type	Core client group	Link to vulnerable children	Agency
Targeted	Students aged 10-19 years (and young mums up to 25 years)	Direct	Dept. Education & Child Development
FLO is a student enrolment strategy aimed to assist schools and the wider community in supporting successful engagement and retention of young people in Year 6 to the age of 20 identified at risk of disengaging, or have disengaged from a mainstream school based learning program. FLO is available to DECD schools in all areas of the State (excluding the APY Lands) and involves: <ul style="list-style-type: none"> the undertaking of appropriate learning programs (Australian curriculum, VET, SACE). having a school managed Flexible Learning and Transition Portfolio (FLTP) in place, and the provision of individual case management to help address wellbeing issues, as well as plan and broker learning options Currently there is up to 5,000 students participating in a FLO enrolment. Since 2007, Education Department data records show that an average of 80% of FLO enrolments each year, were successfully re-engaged in accredited learning, further education or employment.			
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
How is the efficacy of early intervention programs measured? Each FLO enrolled student is monitored and tracked throughout the year. Level of engagement, attendance, wellbeing and participation and learning outcomes, as well as intended destination are recorded for each student. A variety of positive external evaluations (including Cost:Benefit ratio, of 7:1) have been undertaken. Community investment runs at \$1.00 per \$1.00 invested in \$1m of ICAN local Community Partnership grant funding activity.			

Service type	Core client group	Link to vulnerable children	Agency
Targeted	Parents and Students	Direct	Dept. Education & Child Development
Description:			
The Confidential Student Transfer is available to enable schools to support parents/caregivers/students escaping unsafe environments who are reluctant to enrol children in a new school if the previous school will know the child's whereabouts due to fear for his/her safety.			
The aim of the Confidential Student Transfer process is to support families fulfil obligations of compulsory attendance and enrolment in a school, whilst maintaining higher security about the whereabouts of the student for care and protection purposes. The Confidential Transfer process enables DECD schools to support the family's request for confidentiality whilst maintaining obligations for information transfer and enrolment of the child.			
The Confidential Student Transfer process was designed by DECD in collaboration with the Office for Women Domestic Violence Services and SAPol.			
Proportion of these programs delivered by government/non-government: %	Government	100%	Non-government
How is the efficacy of early intervention programs measured? There has been no review of the process to date.			

Name: Innovative Community Action Networks (ICAN)			
Service type	Core client group	Link to vulnerable children	Agency
Targeted	Students	Direct	Dept. Education & Child Development
ICAN is a DECD initiative to re-engage learning young people, who have either completely disengaged from school or are at serious risk of doing so.			
Using school and community partnerships, Flexible Learning Option (FLO) enrolments and targeted case management services, disengaged children and young people are successfully re-engaged in accredited learning programs. ICAN aims to help these young people successfully return to school and/or begin on a path to further education, training and employment.			
ICAN currently provides support to 5,670 children and young people and is managed through 10 local ICAN Partnership for Learning Coordinators and the local ICAN community-based management committees. These committees comprise key government, non-government and community youth agency stakeholders. In addition, local school and community partnership FLO clusters consisting of non-government/government agencies and schools collaborate in developing service and program responses to locally identified needs for FLO students. The collaborative partnership approach taken by the key local stakeholders ensures that the shared commitment and responsibility for these vulnerable children and young people will have a significant collective impact. It is a state wide system based around the state government's Better Together strategy.			
Since 2007 an average of 80% of the 5,000 FLO enrolments, each year, are successfully re-engaged in accredited learning, further education or employment.			
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
	50%	50%	
How is the efficacy of early intervention programs measured? Each ICAN supported student is monitored and tracked throughout the year. Level of engagement, attendance, wellbeing and participation and learning outcomes, as well as intended destination are recorded for each student. A variety of positive external evaluations (including Cost:Benefit ratio, of 7:1) have been undertaken. Community investment runs at \$1.00 per \$1.00 invested in \$1m of ICAN local Community Partnership grant funding activity.			

Name: Student Attendance and Engagement Officers			
Service type	Core client group	Link to vulnerable children	Agency
Targeted	Students	Direct	Dept. Education & Child Development
DECD has Attendance and Engagement Officers who work across the partnerships with learners (K-12) with attendance, engagement and retention issues and their families.			
The Attendance and Engagement Officers have a range of priorities which include:			
<ul style="list-style-type: none"> Identification of needs and data analysis Provision of advice at individual, group, site and community levels Case work management and case management/coordination More proactive approaches and whole site and community responses to attendance & engagement concerns. 			
DECD Attendance and Engagement officers are also the only DECD Support Service that provides a service to all three education sectors.			
Proportion of these programs delivered by government/non-government: %		Government 100%	Non-government 0%
How is the efficacy of early intervention programs measured? There was a review of this service in 2014 in line with the review of the ISS model.			

Name: Family Focus Workers			
Service type Targeted	Core client group Students	Link to vulnerable children Direct	Agency Dept. Education & Child Development
DECD has Family Focus Workers who work across the partnerships with learners (K-12) with complex needs and vulnerable families. The Family Focus Workers have a range of priorities which include:			
<ul style="list-style-type: none"> Identification and prioritisation of the needs of families. Advocacy, liaison between families/sites/agencies. Building capacity of sites/partnerships to understand & engage families. Provision of advice and strategies to sites, partnerships and families Development & delivery of workshops for families, partnerships and site staff. 			
Proportion of these programs delivered by government/non-government: %	Government 100%	Non-government	
How is the efficacy of early intervention programs measured? This is a new service for 2015.			

Name: Multi Agency Protection Service (MAPS)			
Service type Targeted	Core client group Children and families	Link to vulnerable children Direct	Agency Lead agency SAPOL (DECD partner)
Description:			
The Multi Agency Protection Service (MAPS) brings together elements of SAPOL, Education, Health, Housing SA and Families SA under one roof to share vital information. Co-locating agencies allows authorities to share important information and identify victims and emerging patterns of harm before they escalate. MAPS provides police and other agency staff with a more thorough picture of what is going on so at-risk children and families do not slip through the net and streamlines the referral and notification processes for key agencies. MAPS helps agencies to assess, analyse and respond to emerging problems in a more co-ordinated and timely fashion.			
Proportion of these programs delivered by government/non-government: %	Government	Non-government	
How is the efficacy of early intervention programs measured?			