



**Government of Western Australia  
Department for Child Protection  
and Family Support**

Our ref: 2015/7101

Ms Jeannette Radcliffe  
Secretary  
Senate Committee on Community Affairs  
[Community.affairs@sen.aph.gov.au](mailto:Community.affairs@sen.aph.gov.au)

Dear Ms Radcliffe

**SENATE ENQUIRY INTO OUT OF HOME CARE**

Thank you for your correspondence dated 30 April regarding the Senate Committee on Community Affairs inquiry into out of home care.

Please find attached responses to the questions for states and territories as requested.

Yours sincerely

Emma White  
DIRECTOR GENERAL

18 May 2015

SENATE COMMUNITY AFFAIRS REFERENCES COMMITTEE  
INQUIRY INTO OUT OF HOME CARE

**Question 1 – Expenditure by type of care**

- **For 2013/14, what was the total expenditure on out-of-home care services?**
- **What proportion of expenditure was spent on:**
  - **foster care;**
  - **relative/kinship care;**
  - **residential care; and**
  - **other types of care?**
- **What was the expenditure per child for:**
  - **foster care;**
  - **relative/kinship care;**
  - **residential care; and**
  - **other types of care?**

Expenditure by type of care arrangement and per child by type of care arrangement for 2013-14 is not available. However the information reported on Western Australia's 2013-14 out-of-home care expenditure that was published in the Productivity Commission's *Report on Government Services 2015* and is outlined below:

<b>2013-14</b>	
Real expenditure on out-of-home care services	\$225.969m
Placement nights in out-of-home care (*)	1 299 316
Real expenditure per placement night	\$174

(\*) Placement nights in out-of-home care is calculated based on the number of nights each child was in care arrangements which were funded and current for any part of the year.

<b>2013-14</b>	
Residential out-of-home care services expenditure	\$107.561m
Non- residential out-of-home care services expenditure	\$118.408m
<b>Total out-of-home care services expenditure</b>	<b>\$225.969m</b>

<b>2013-14</b>	
Residential out-of-home care services expenditure per child	\$640,244
Non-residential out-of-home care services expenditure per child	\$33,307
<b>Total out-of-home care services expenditure per child</b>	<b>\$60,695</b>

## Question 2 – Allowances for carers

- **What are the available annual care allowances/reimbursements for:**
  - **relative/kinship carers;**
  - **foster carers; and**
  - **non-statutory informal carers?**
- **What are the differences in care allowances/reimbursements between general, intensive and complex levels (or other levels as applicable)?**

### **Departmental Relative and General Foster Care Arrangements:**

All general, relative and respite foster carers are paid allowances and other reimbursements to cover the normal, ongoing costs of maintaining a child in their care. The Western Australian Department for Child Protection and Family Support (the Department) supports foster carers through the provision of:

- Payments including a basic subsidy, special needs loading subsidy, clothing allowance, pocket money and special purpose subsidy, and
- Case support expenditure (counselling, day care, entertainment, furniture, legal costs, medical and dental, mentoring, recreational and leisure, school fees, books, supervision, contact, travel and tuition).

The **basic subsidy** is set based on three child age groups, as outlined below:

Age group	Fortnightly subsidy at 1 July 2014	Fortnightly subsidy at 1 July 2013
0 – 6 years	\$363.15	\$353.43
7 – 12 years	\$427.60	\$416.16
13 –18 years	\$492.05	\$478.88

A **20 per cent remote weighting** is applied to basic subsidy payments for children and young people located in the **Pilbara** and **Kimberley** regions. A **10 per cent remote weighting** is applied to basic subsidy payments for children and young people in the **Murchison** and **Goldfields** region.

**Special needs loading** is paid to carers who care for children who have extra care needs which create additional, regular and ongoing costs to meet an individual child's special needs. The child might have special needs due to a medical issue or behavioural/emotional issues. Special needs loading comprises of two components:

- Part A - to recognise the extra care required to meet the special needs of the child, as outlined below:

Hours spent providing extra care to meet the special needs of a child	0-6yrs	7-12yrs	13-18yrs
7-14 hours per week	\$72.63	\$85.52	\$98.41
15-21 hours per week	\$145.26	\$171.04	\$196.82
22-28 hours per week	\$217.89	\$256.56	\$295.23
29-35 hours per week	\$290.52	\$342.08	\$393.64

- Part B - an amount equal to the dollars required to meet regular and ongoing expenses, arising from the special needs that are in excess of the basic subsidy.

**Clothing allowance** is paid three times a year at the following rates:

Age Group	Allowance from 1 July 2014
0 – 6 years	\$178.81 every 4 months
7 – 12 years	\$235.28 every 4 months
13 – 17 years	\$400.00 every 4 months (16-17 years old exceptional circumstances only)

Note: Receipt of clothing allowance will not be paid if a young person is working or receiving a Centrelink benefit.

Fortnightly **pocket money** allowance is paid at the following rates:

Age Group	Fortnightly Subsidy at 1 July 2014
6 – 12 years	\$8.00
13 – 15 years	\$20.00
16 – 17 years	\$26.00 – Exceptional circumstances only

Note: Receipt of pocket money will not be paid if a young person is working or receiving a Centrelink benefit.

In limited circumstances a **special purpose subsidy** may be paid to carers for large expenditure items including:

- Placement supports** which are generally for the provision of services by third parties, such as mentors to provide the child with planned activities at regular times to offer support to the carer, the provision of respite to the carer through respite placements at specialist agencies or in-home domestic support for large sibling groups.
- Boarding school attendance** in limited circumstances where this is in the best interests of the child due to their specific educational or developmental needs, or their geographical location.
- Financial contribution towards a **vehicle** where a carer requires a particular type of vehicle that the family would not have required if a child/ren in care was not placed with them. Vehicles may be needed to meet the special needs of a child with a disability or a large sibling group.
- Home modifications** in cases where modifications are needed to meet the special needs of a child with a physical disability or to accommodate a sibling group of four or more children.
- Major and extraordinary events** such as:
  - admission of a child to a Residential Treatment Program,
  - private schooling,
  - purchase of disability/mobility equipment,
  - high cost services related to reunification and/or contact,
  - high cost specialist services for parenting capacity and/or forensic assessments,
  - provision of teachers' aides,

- travel fares and/or accommodation associated with a child attending holidays with their carers, or
- religious, cultural, school and sporting tours.

Carers approved by community sector funded placement agencies receive subsidy payments through the agency through which they are engaged. Community sector funded placement agencies also receive an allocation for case support expenditure as part of their funding agreement with the Department.

Children and young people with highly complex needs and/or challenging behaviours may be placed in **individualised care arrangements** with funded community sector placement agencies. Their specific needs are identified and the costs associated with meeting their specific needs are incorporated in the overall cost of the specialised placement arrangement.

**Relatives of a child (non-statutory carers)** are entitled to an **establishment payment to informal relative carers** where the Department has had prior involvement with the child, however no legal or court action has been taken to promote or safeguard the child's wellbeing.

The Department introduced an Establishment Payment for relatives, where a safety and wellbeing assessment has been undertaken and a plan developed with the relative/s to allow the child to remain with them. This payment recognises the initial costs involved in caring for children and the role of those relatives who take on the care for children who might otherwise be taken into the Chief Executive Officer's care. Parental responsibility remains with the parents.

The Establishment Payment is a one off payment of \$1000, which is provided for each child residing with the relative/s. The relative will only receive the Establishment Payment for a child once.

The Department also provides **other financial support** for open cases where the Department is working with at risk children and families but the child is not in care, case management support may be provided to the child's relatives to support the child's safety and wellbeing.

This may include the provision of short term financial assistance, with the amounts determined on a case by case basis.

### **Question 3 – Aboriginal and Torres Strait Islander children**

- ***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?***

At 30 June 2014, 68 per cent of Aboriginal children in care were placed with a member of the child's family; placed with an Aboriginal or Torres Strait Islander in the child's community; or placed with an Aboriginal or Torres Strait Islander.

- ***What proportion of departmental out-of-home care staff are Aboriginal or Torres Strait Islander?***

In 2013/14, nine (9) per cent of staff in service delivery positions, including out-of-home care positions, were of Aboriginal or Torres Strait Islander descent. The Department is unable to identify the specific staff numbers as these roles have multiple functions in addition to out-of-home care.

- ***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?***

Aboriginal organisations have the capacity and potential to play a critical role in the placement and supervision of Aboriginal and Torres Strait Islander children in out of home care including:

- finding family/extended family history information and suitable family placement options for Aboriginal children
- working to keep Aboriginal children in Country by finding suitable local placements
- providing training and support for general and relative foster carers (both non-Aboriginal and Aboriginal)
- engaging Aboriginal children and families in culturally sensitive support services and programs

The Department is currently reviewing the *Aboriginal Services Framework 2012* with a focus on the *Service* and *Practice* elements required to integrate it more fully into all elements of the Department's functions. Priorities relating specifically to Aboriginal children in care will be to:

- reduce the over representation of Aboriginal children in care through targeted and further development of the Signs Of Safety (SofS) Framework for Aboriginal people (Signs of Safety Aboriginal Way)
- build the organisational capacity of the Department to partner with Aboriginal communities, agencies and businesses where external Aboriginal expertise would improve outcomes for Aboriginal clients
- Exploration of innovative approaches to partner with agencies to address the structural barriers faced by many Aboriginal families and communities, particularly in relation to increasing the opportunity for relative carers and access to housing and other required intensive supports (where this may be a barrier to having children placed with them)
- Focussed and targeted service procurement with Aboriginal Registered Businesses utilising exemption provisions in the WA State Government Aboriginal Economic Participation Strategy 2012-2016.

Yorganop Association Incorporated, a Perth based Aboriginal Community Controlled Agency is currently contracted by the Department to provide out of home care services to Aboriginal and Torres Strait Islander children.

A second Aboriginal agency was engaged in 2014 to provide foster care services to Aboriginal children. Wirraka Maya Aboriginal Medical Service partner with MacKillop Family Services in the Pilbara region to provide this service.

Other new initiatives include the strengthening of relationships with Aboriginal agencies such as Kinship Connections who assist the Department by increasing the number of suitable family supports (such as respite) and relative care placement options for Aboriginal children. Kinship Connections develop 'Who's My Mob' and 'History' books to assist with finding families for Aboriginal and Torres Strait Islander children in care. Kinship Connections is becoming the community's first agency of call when the Aboriginal community has questions/issues with the Department. The work of Kinship Connections includes:

- advocating on behalf of relative carers
- supporting carers with managing their carer duties
- supporting relative carers in managing a child's behaviour
- supporting parents whose children have been removed
- The Department requesting advice on communicating with Aboriginal families

- ***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?***

The Signs of Safety (SofS) - Aboriginal Way approach aims to further invest in building relationships between CPFS staff and Aboriginal and Torres Strait Islander children, their families and communicating by promoting opportunities for the ongoing development of personal and departmental cultural competence, as well as practical tools and resources.

SofS Pre-Hearing Conference Aboriginal Support Project, in partnership with Legal Aid Western Australia (LAWA), aims to involve and support appropriate or significant members of the kinship system in the pre-hearing conferences to reduce the number of cases and number of Aboriginal children in care. Evaluation will occur through joint data collection (quantitative and qualitative) by LAWA and CPFS – in particular the Department's Information Research and Evaluation (IRE) Unit in the early stages of the project. Data reviews will be conducted every three months.

SofS Pre-Birth Getting Ready pilot project aims to increase the number of Aboriginal women and families actively participating in Pre-Birth SofS planning meetings and to promote early and collaborative planning to provide safety and the best possible outcomes for the unborn child. There will be emphasis placed on building strong partnerships between the Department, King Edward Memorial Hospital, Aboriginal Community Controlled Organisations (including Aboriginal Medical Services), the Aboriginal Family Law Service, Legal Aid and other non-government services and agencies in order to provide intensive family support services through the design of innovative and targeted specific programs for Aboriginal families. Evaluation will occur through data collection (quantitative and qualitative) by the Department.

Strong Families brings family members and agency workers together to share relevant information, identify goals and develop a plan to help meet the

family's needs. While Strong Families is a universal program, Aboriginal families are the priority target group.

The Department also has Aboriginal Practice Leaders (APL's) in every District. The APLs work across the District to build capacity and practice in relation to working with Aboriginal children, families and communities.

#### **Question 4 – Non-government organisations**

- **What is the role of non-government bodies (if any) in the delivery of out-of-home care services?**
- **At 30 June 2014, how many non-government organisations were responsible for delivering:**
  - **relative/kinship care;**
  - **foster care; and**
  - **residential care?**
- **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?**

The Department works in partnership with the not-for-profit community service sector in the delivery of out-of-home care services. As at 30 June 2014, out-of-home care placements provided by the community services sector represented 35 per cent of placements for children not placed with their families/relatives. The Department's strategic focus is to build the capacity of the community service sector to play a far greater role in the provision of non-relative out-of-home care arrangements.

At 30 June 2014:

- no community service organisation provided relative/kinship care;
- 11 community service organisations provided foster care; and
- 12 community service organisations provided residential care.

The Department currently administers all relative/kinship care, with foster care and residential care delivered by both the Department and the community service sector.

Historically, the community service sector's provision of out-of-home care is relatively small with Department funding for their services traditionally being limited and focused. Only 13 community service sector organisations are recurrently funded to provide out-of-home care, and then predominantly only to children with the least complex needs. The Department has sought

services for children with the most complex needs by individual tenders on a case-by-case basis.

For the foreseeable future, the Department's predominant role in out-of-home care provision will become focused on relative care and residential care for children.

### **Question 5 – Assessment and training for carers**

- **What is the recruitment and assessment process for:**
  - **relative/kinship carers;**
  - **foster carers; and**
  - **residential care workers?**
- **What training is required (by legislation or policy) to be undertaken by:**
  - **relative/kinship carers;**
  - **foster carers; and**
  - **residential care workers?**

Information about fostering in WA is provided through:

- Targeted advertisements, such as local newspapers and the West Australian;
- Department presence at significant events (for example, events for NAIDOC week);
- Presentation by the Department during relevant conferences;
- Facebook; and
- Word of mouth, particularly from existing carers.

Fostering enquiries are primarily processed through the Fostering and Adoptions Service. In 2014, the Department received enquiries via the following methods:

- telephone – 48%;
- email – 27%;
- Facebook – 20%;
- in person – 3%; and
- mail – 2%.

Prospective general foster carers are sent an information pack and encouraged to attend an information evening. During 2014, 42 information sessions were held in the Perth metropolitan area, with a total of 289 family groups attending.

If a person wishes to proceed, they lodge an 'Expression of Interest' to the Department's Fostering and Adoption Service. There were 391 Expression of Interest forms received in 2014.

An individual with appropriate assessment skills completes an initial interview in response to the Expression of Interest, which includes a practical

assessment of the home. The recruitment phase of the assessment process is completed once an application form is received.

Where possible, relative and significant other care options are sought from the child's safety network during Signs of Safety meetings. The safety network are people identified by the parents and child who can provide a safe environment. When relative and significant other care options are sourced from the safety network, the Department has a greater familiarity with the carer, and an increased opportunity to assess the carer competencies over time.

All prospective carers (including general, relative and significant other persons) must have a Criminal Record Check and Client and Child Protection Record Check conducted by the Department's Screening Unit, and a Working with Children Check.

The Department assesses all prospective carers against the five competencies outlined in the *Children and Community Services Regulations 2006*.

All prospective carers are thoroughly assessed. The process involves consideration of any previous involvement with the Department, home visit observations, interviews with the applicants, referee reports and medical reports to determine a person's capacity to meet the competencies.

#### **Training for foster carers –**

A range of training and information is available to foster carers during the preparation, assessment and post-approval stages.

For all metropolitan general carer applicants, completion of Fostering with Skill and Care training is a mandatory requirement. Training provides further opportunity for applicants to demonstrate their competence. Applicants complete a participant workbook and attend 19 hours of workshops. If the foster carer training team has concerns about an applicant, they alert the person undertaking the assessment to follow up as part of the process.

General carer applicants in country areas are provided with preparation training as part of the assessment process via the district using a similar workbook to those residing in the metropolitan area.

Learning Pathways are available to all carers, including relative carers. These include foster care development workshops, eLearning and access to relevant face-to-face programs. Relative carers are encouraged to access these learning opportunities.

Individual learning plans are developed as required with relative and significant other carers to support the applicant's acquisition of additional skills and to build capacity to meet competencies during the assessment process.

Development of knowledge and skills in caring for children and young people is an ongoing process that is provided through relevant internal staff such as the child protection worker (caseworker), senior child protection worker, psychologist and education officer. External service providers and/or specialists are used where appropriate to assist foster carers to respond to the child's behaviours/additional needs.

### **Recruitment and assessment process for Department residential care workers**

Any individual who applies to the Department to be employed as a residential care worker is assessed and interviewed against the selection criteria as set out in the job description form.

The applicant must demonstrate knowledge of engaging with children and young people through their life skills and recreational activities, demonstrate a commitment to promoting positive self-worth and development, and show they have an understanding of working with traumatised children. An essential selection criterion is Certificate III and/or Certificate IV in Community Services (Protective/Residential Care) or approved equivalent, or equivalent experience in working with or caring for children who have experienced trauma.

In addition, new residential care workers undertake orientation shifts in a house before they work with children on their own to enable them to be partnered with and learn from a more experienced staff. It also allows the children to be introduced slowly and in a supported way. This allows the new worker to observe the care facility in practice and learn about a facility before taking on direct responsibility.

### **Training required to be undertaken by residential care workers –**

The Department's residential care workers must complete two weeks of required training prior to working with children in care.

The training includes Introduction to Child Protection (eLearning module), Impact of Trauma on Children and Youth, Residential Care (Sanctuary) Framework, Responding to Concerning Sexual Behaviours in Out-of-Home Care, and Therapeutic Crisis Intervention.

Ongoing learning and development is provided through staff supervision, debriefing, working closely with Department psychologists and attendance at learning and development events.

### **Question 6 – Ongoing support services for carers**

- **What ongoing support services are available for:**
  - **relative/kinship carers;**
  - **foster carers; and**

- ***residential care workers?***
- ***What proportion of support services are delivered by government or non-government bodies?***

Most support services available to foster carers and residential care workers are provided by the Department or funded service providers.

#### **Support services for Department foster carers –**

Learning and skill development is a key form of support provided by the Department for foster carers to help build confidence and competence in meeting the needs of children placed with them.

As outlined in the response to question five above, the Department provides access to a range face-to-face learning and development workshops and online learning programs. Foster carers also have their own individual learning pathway developed in consultation with the child protection worker.

Child protection workers have at least monthly contact with each foster carer, either face to face or by telephone, to monitor how the placement is going and discuss any supports that may be required. In addition, regular reviews are undertaken with foster carers (at a minimum once every 12 months) to discuss what is working well, what the Department and the carer might be worried about, and what needs to happen, including the learning and development plan for the carer.

Foster carers can receive up to five days respite per month, per child in their care. In some circumstances the use of respite provides additional support to the foster carer. Extended respite can be arranged as required.

Enrolment of a child in care in approved childcare may be a consideration to support a foster carer and the placement.

Support is also provided through district office forums and casework activities.

In addition, carers can debrief and discuss support options with Department staff, including a district psychologist, and/or access counselling through the Department's Employee Assistance Program.

Foster carers can also access both funded government and other community-based services, such as Parenting WA and the Foster Care Association of WA.

#### **Support services for Department residential care workers –**

The Department's residential care facilities use the Residential Care (Sanctuary) Framework to support residential care staff to work therapeutically with children in care. The Sanctuary model is used to facilitate recovery by creating safe, democratic and therapeutically secure environments for staff and children in residential care.

A manager and other professional staff, including a Department psychologist, support and supervise residential care workers. Residential care workers receive regular ongoing supervision and the opportunity to debrief from any critical incidents that occur.

The supervision process provides an opportunity to identify learning and development goals and strategies as well as identifying any problems or issues that a worker may be experiencing.

Residential care workers also have access to the Employee Assistance Program, which is a confidential counselling service for workers and eligible family members paid for by the Department.

## **Community Service Organisations**

Where the out-of-home care service is provided by a community service organisation, support services for foster carers and residential care workers are provided internally by the organisation. This can include, but is not limited to:

- access to Employee Assistance Programs;
- professional development and training opportunities;
- 24 hour 'on call' crisis support;
- supervision (including clinical supervision for carers/workers in therapeutic care environments);
- respite; and
- carer support/peer support groups/networking opportunities.

The Department provides funding to the Foster Care Association of Western Australia Inc for the provision of information, support and advocacy services for foster and relative carers. Support to foster and relative carers includes:

- home visits to provide support for carers;
- provision of functions, including coffee mornings, Mother's Day morning tea and Christmas Party, to support carers and provide peer networking opportunities;
- newsletters and access to resources, such as the Foster Carer Handbook;
- access to clothing, equipment and toys for foster children;
- provision of support and advocacy in forums including case review meetings, care and case plan meetings, signs of safety meetings, Police carer interviews, State Administrative Tribunal and Ombudsman meetings; and
- supporting clients to prepare written advice for professional forums and processes.

The Foster Care Association of Western Australia Inc provides ongoing support for departmental foster and relative carers and community service sector foster carers.

The Department will provide support services for residential care workers and departmental foster and relative carers. As stated above, community service organisations will provide support services for residential care workers and community sector foster carers.

#### ***Question 7 – Ongoing support services for children***

- ***What ongoing support services for children are offered by:***
  - ***government; and***
  - ***non-government organisations?***

There is a raft of government and non-government services available to support children in care. Some of the Department's services include:

- the Advocate for Children in Care – refer to additional information in Advocacy for Children and Young People in Care, attached;
- ongoing case work support and planning by the child's case manager, which includes health, education and leaving care planning;
- education officers help with a wide range of schooling and education supports;
- district psychologists provide assessment and intervention services;
- respite camp programs; and
- Crisis Care provides support after hours as required.

In addition, as part of the WA Rapid Response Framework, government agencies have agreed to an interagency action plan, which outlines each agency's service response to children in care to help address their health, psychological, educational, employment and housing needs.

Where the out-of-home care service is provided by a community service organisation, ongoing support services for children are provided internally by the organisation. The community service organisation supports the day-to-day care of the child but may also provide specialist supports to address the emotional, health, education, employment and cultural needs of the child.

The Department funds the following services that provide ongoing support for children in the care of the CEO:

- The CREATE Foundation Inc provides activities and programs to connect and empower children and young people in care. The service provides information, support, activities and programs in metropolitan and regional areas, providing opportunities for children and young people in care to develop leadership, project development and group facilitation skills.
- Leaving Care Services assist young people in the care of the CEO to access safe, supportive stable accommodation, drawing on the strengths of young people to assist them to develop and enhance skills necessary to establishing independence.

The following services funded by the Department can be accessed by children in the care of the CEO:

- Child Sexual Abuse Therapeutic Services provide counselling and therapeutic responses to children and their families affected by child sexual abuse and children who are responsible for, or at risk of sexually abusing children.
- Youth Counselling Services provide short term counselling/mediation service for at risk young people commencing secondary education up to 18 years and their families, working towards resolving parent/adolescent conflict, providing early intervention strategies to prevent risk escalating and divert young people away from high risk situations that may impact on their safety.

#### **Question 8 – Residential care facilities**

- **As at 30 June 2014, how many residential care facilities were operating?**
- **What proportion of residential care facilities are administered by:**
  - **government departments;**
  - **non-government organisations; or**
  - **other bodies?**
- **What models of residential care currently operate?**
- **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?**

As at 30 June 2014, there 4,237 children in the care of the CEO. During 2013/14 there were 128 children who entered a residential care facility from a foster care or relative care placement, comprising 82 children from foster care and 46 from relative care.

The Department does not keep aggregate data about the reasons children leave relative or foster care to enter residential care. In these circumstances, there are a variety of reasons children enter residential care placements, including:

- foster or relative carers becoming unable to continue providing care due to a change of circumstance, illness or difficulty managing a child's behaviour;
- maintaining sibling groups together;
- children displaying self-harming behaviours, or abusive behaviour toward other children or household members; and
- children absconding or otherwise requiring new placement arrangements.

### **Question 9 – Transition from care**

- ***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?***

In 2013/14, 209 children aged between 15 and 18 transitioned from out of home care.

The most common age for children who transitioned from care to independence was 18 years old (with a mean age of 16).

The Department has a legislated responsibility to provide assistance to eligible young people who have left care until they reach 25 years of age. Each Department district has a designated leaving care officer to support child protection workers planning for leaving care and to assist young adults who have left care and return seeking aftercare support.

In addition, the Department provides funding to the community services sector to provide four leaving care services to which young people should be referred as part of the planning for leaving care. Priority is given to those most at risk and those who have experienced multiple placements.

- ***What proportion of children in out-of-home care have an active transition from care plan?***
- ***What is included in a transition from care plan? What consideration is given to the age of the child at transition?***
- ***How are outcomes for children transitioning from care measured?***

At 31 March 2015, 61 per cent of children in care aged 15 years or older have a transition from care (leaving care) plan.

Planning for leaving care begins at 15 years of age and occurs as part of the care planning process where the care plan is modified to reflect leaving care arrangements. The plan is based on assessment of the young people's individual needs and covers the nine dimensions of care reflected in the care plan document.

The Department uses a three phased model for leaving care planning: preparation, transition and aftercare. Planning occurs incrementally to allow young people time and space to deal with life decisions in a supported manner and build on skills learnt during each phase.

The Department has established Better Care Better Services standards for the care of children in out of home care.

The Department's Out-of-Home Care Reform Plan will be implemented from January 2016 and includes established indicators for the measurement of outcomes for children leaving care.

#### **Question 10 – Permanent care and adoption**

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

During 2013/14 two children aged five were adopted by carers.

During 2013/14 an Until 18 Order was granted for 423 children with the most common age being six (with a mean age of seven) when the order was granted.

During 2013/14 a Special Guardianship Order was granted for 69 children with the most common age being either eight or 11 (with a mean age of eight) when the order was granted.

There are no other permanent care arrangements administered by the Department.

### **Question 11 – Children with a disability and complex needs**

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

On 30 June 2014 there were 350 children in care who were recorded as having a disability and/or were registered with Disability Services Commission.

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

On 30 June 2014 there were 242 children who were identified as having complex needs requiring specialised foster care arrangements.

### **Question 12 – Contact with birth families**

- **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?**

For a child placed in out-of-home care, maintenance of the relationship with their birth family is critical, especially when there are plans for reunification. The Department is committed to quality contact that is purposeful and focused on the child's best interests. Quality contact can increase the likelihood of successful reunification, reduce time in out-of-home care, promote healthy attachment, and reduce the negative effects of separation of the child from their family. When a child is taken into care, contact is an important aspect of the child's placement plan and care plan.

During 2013/14, 78 per cent of children (aged 17 or less) were reunified with their family at the point of transitioning out of care.

### **Question 13 – Early intervention**

- **What early intervention programs are available to supporting children in vulnerable family situations (prior to the removal of children under care and protection orders)?**
- **What proportion of these programs are delivered by:**
  - **Government; or**
  - **Non-government organisations?**
- **How is the efficacy of early intervention programs measured?**

The Department provides a range of family support services in addition to funding a range of non-government organisations to deliver services.

Specific programs offered by the Department to prevent children coming into care include:

- Strong Families – a record of whether benefits for the family were achieved is captured at the completion of each case and the proportion of cases with positive outcomes is the measure of efficacy.
- Parent Support – a record of whether there were gains made to the parenting skills of the clients is captured at the completion of each case and the proportion of cases with some or significant gains is the measure of the efficacy.
- Best Beginnings – a record of the risk factors at the start and the end of this program is captured and the reduction in controllable risk factors is the measure of efficacy.
- Child Centred Family Support (CCFS) – the indicator of efficacy reports on the proportion of children who received a CCFS service and did not enter the care of the CEO within 12 months of the completion of that service.

- The Department funds community service organisations to provide the following services:
  - Tertiary Family Preservation services have the primary aim of preventing children coming into care and protection by providing intensive services to reduce the risk to the children and enhance safety in the family. The service provides support to families and their children to reduce the risk of harm to the children and the likelihood of being taken into provisional protection and care.
  - Family Enhancement services are preventative services to support families where parenting issues have been identified as affecting the wellbeing of children but prior to the point where children are at imminent risk of immediate harm or coming into care. The service supports families with children aged 0-12 years.
  - The Indigenous Family Program works with Aboriginal and Torres Strait Islander families who may be difficult to engage to assist them to build their capacity and provide protection to their vulnerable children. This service provides practical support and uses a range of strategies and activities to strengthen the skills of parents.
  - The Ngala Overnight Stay Service is an intensive residential parenting service provided over four days and nights to assist families to address relevant issues including child/parent relationships, child behaviour, sleep and settling and nutritional issues, by utilising their strengths and parenting goals to assist in determining a way forward.

- The Kwinana Early Years service provides supports to parents with at least one child 0-8 years considered to have poor life outcomes. The service identifies the needs and strengths of parents and uses a positive approach to build a strong child/parent relationship. Parents are linked with other service providers in the community.

In line with service agreement requirements, Tertiary Family Preservation services provide six monthly progress reports to the Department, reporting on the following:

- Parents with increased knowledge and skills needed to improve their parenting ability.
- Parents with improved attachment with their children.
- Child living situation at completion of service.

In line with service agreement requirements, Family Enhancement, Indigenous Family Program, Ngala Overnight Stay Service and Kwinana Early Years services provide six monthly progress reports to the Department, reporting on the following:

- Families who demonstrate that they have increased their ability to promote safety for themselves and family members and to resolve crises.
- Families who demonstrate increased ability to recognise potential risks.
- Parents/and or care givers who report an increase in skills and confidence in parenting.
- Families who demonstrate increased knowledge of resources and services/supports.
- Families who demonstrate increased confidence to manage their lives and responsibilities.
- Families who demonstrate a reduction of risk.

## **SENATE COMMUNITY AFFAIRS REFERENCES COMMITTEE**

### **INQUIRY INTO OUT OF HOME CARE**

#### **Terms of reference**

Out of home care, including:

- 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.