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Acronyms

AbSec  NSW Aboriginal Child, Family and Community Care State Secretariat’s
ACFCs  Aboriginal Child and Family Centres
ACYFS  Aboriginal Child, Youth and Family Strategy
AMIHS  Aboriginal Maternal and Infant Health Strategy
CCNSW  Connecting Carers NSW
CSC    Community Services Centre
CYFS   Child, Youth and Family Support
ECAV   NSW Health Education Centre Against Violence
FACS   Department of Family and Community Services
FTE    Full-time equivalent
IFBS   Intensive Family Based Services
MRG    Mandatory Reporter’s Guide
NDIS   National Disability Insurance Scheme
OCG    Office of the Children’s Guardian
OOHC   Out-of-home care
OSP    Office of the Senior Practitioner
PACT   Protecting Aboriginal Children Together
POCLS  Pathways of Care Longitudinal Study
QAF    Quality Assurance Framework
ROSH   Risk of significant harm
SARA   Safety and Risk Assessment
SCRPT  Screening and Response Priority Tool
SDM    Structured Decision Making
SHFL   Safe Home for Life reforms
The Act  *Children and Young Persons (Care and Protection) Act 1998*
Wood Inquiry  Special Commission of Inquiry into Child Protection Services in NSW
WWCC   Working with Children Check
Approach to the submission

Child protection - a shared responsibility

The submission highlights caring for children and keeping them safe as a shared responsibility across governments, the non-government sector, communities and families.

In NSW, child protection work is undertaken by a range of government and non-government agencies, independently and in partnership with Family and Community Services (FACS). The departments of Health and Education, Juvenile Justice and the NSW Police Force all have an important role in keeping children safe.

We understand our non-government partners are critical to the delivery of quality OOHC and other services working to protect children and young people in NSW. We are also committed to working with Aboriginal organisations to ensure that the range of services available to Aboriginal children, families and communities, meet the specific needs of those communities.

Structure

The submission provides information relevant to the terms of reference of the Legislative Council General Purpose Standing Committee 2’s Inquiry into Child Protection. The submission is divided into six sections as follows:

- **Section one** provides context and an overview of current procedures and practices to notify, investigate and assess reports of children and young people at risk of harm.
- **Section two** outlines FACS budgeted expenditure for prevention and earlier intervention, statutory child protection and OOHC. This section also covers caseworker numbers.
- **Section three** gives examples of strategies and programs to prevent and reduce risk of harm to children and young people.
- **Section four** provides examples of specific initiatives to help protect Aboriginal children and young people.
- **Section five** describes supports and training available to carers. It also covers the safety, monitoring and auditing of carers.
- **Section six** provides a summary of the oversight role of the Office of the Children’s Guardian (OCG); and the interaction between the OCG, FACS and non-government sector in protecting children and young people.
1 Notifying, investigating and assessing reports of children at risk of harm

1.1 Reporting

Section 24, *Children and Young Persons (Care and Protection) Act 1998* (the Act) provides that any person who has reasonable grounds to suspect that a child or young person (or class of children or young people) is at risk of significant harm may report this to the Secretary of FACS. In practice this report is made to the NSW Child Protection Helpline.

Under section 27 of the Act, certain people are obligated to report suspected risk of significant harm, as ‘mandatory reporters’. Mandatory reporters are defined under the Act as anyone who in the course of their professional work or paid employment delivers health care, welfare, education, children’s services, residential services, or law enforcement, wholly or partly, to children and young people; or holds a management position in organisations which deliver such services.

The provisions offer certain protections to people who report under the Act in good faith.

1.2 Investigating and assessing reports

In 2008, the Special Commission of Inquiry into Child Protection Services in NSW (the Wood Inquiry) found NSW had one of the lowest thresholds in Australia for reporting children and young people at risk of harm. At this time the reporting threshold was ‘risk of harm’. This lower threshold was identified as a primary reason for the Child Protection Helpline being overwhelmed with reports about children, young people and families who needed support, but who did not require statutory intervention.

The former NSW Government’s response to the Wood Inquiry included a number of legislative and structural reforms to allow the then Department of Community Services (now FACS) to better focus resources on investigating and assessing children and young people most at risk of experiencing serious harm. These reforms included:

- Increasing the threshold for reporting children and young people to the Child Protection Helpline from ‘risk of harm’ to ‘risk of significant harm’ (ROSH).

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1 A ‘class of children report’ is a report created by the department where it relates to a group of children whose identities may or may not be known. They are generated because the department has a report in relation to one or more children as being at ROSH. Class of children reports are usually created where an alleged person of interest has contact or authority over a group of children.

2 The FACS Child Protection Helpline is a 24 hours a day, 7 days a week, statewide call centre staffed by professionally qualified caseworkers to receive and screen all reports.
• **Introducing new intake and referral pathways:**

_**Child Wellbeing Units** (CWUs) were introduced in the departments of Police, Health and Education to help mandatory reporters from these agencies identify the appropriate children and young people to report to the Child Protection Helpline, and to divert reports below ROSH from being reported to the Child Protection Helpline, by providing services within their own agency or referring to other organisations.

_Family Referral Services_ (FRSs) were introduced to conduct needs assessments and link vulnerable children, young people and their families to a range of support services in their local area. The core role of the FRS is to provide services to children, young people and families who do not meet the statutory threshold for child protection intervention.

Examples of other intake and referral pathways are outlined in sections three and four.

• **Simplifying information exchange** provisions to allow information relating to the safety, welfare and wellbeing of children and young people to be readily exchanged between certain government agencies and other prescribed bodies. The enactment of Chapter 16A, _Children and Young Persons (Care and Protection) Act 1998_ has been instrumental in this regard. These provisions expanded upon the existing information exchange provisions under section 248 of the Act. The definition of prescribed bodies for the purposes of section 248 and Chapter 16A was recently expanded to capture doctors, nurses, midwives, psychologists, occupational therapists and speech therapists working outside the public health system and private hospitals. These professionals have significant contact with children, young people and their families and may hold important information about a child or young person’s safety and wellbeing for the purposes of protection of that child or young person.

1.2.1 Structured decision making

In response to the Wood Inquiry, structured decision making (SDM) system tools were introduced in NSW to help improve the consistency of child/young person concern reports being made by reporters and the handling of those reports by the system.

SDM provides a common decision-making assessment framework for use by FACS and other agencies in child protection work. Key objectives of SDM are to identify critical decision points; increase reliability of decisions; increase validity of decisions; target resources to families at highest risk; and to use data to better inform policy and practice. SDM tools are supported with training and guidelines.

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1 Clause 8(2), Children and Young Persons (Care and Protection) Regulation 2012.
NSW uses SDM tools at different points in the child protection system. These tools include the Mandatory Reporter’s Guide (MRG); the Screening and Response Priority Tool (SCRPT); and the Safety and Risk Assessment (SARA).

The MRG assists mandatory reporters to decide whether to report their concerns about the possible abuse or neglect of a child to the Child Protection Helpline. Where the MRG indicates that the level of risk does not warrant such a report, it assists mandatory reporters to respond appropriately to children and young people (for example, referral to an appropriate service).

The SCRPT is used by Child Protection Helpline staff to help assess whether reported concerns meet the ROSH threshold. If they do, the response priority tool is applied to determine how quickly the investigation/assessment or other response should commence. The Helpline determines ROSH by applying the SCRPT along with knowledge about statutory child protection history.

SARA is used by staff at FACS Community Services Centres (CSCs) to determine what action should be taken to protect a child who has been the subject of a ROSH report. It is made up of three distinct tools. The safety assessment tool concentrates on identifying factors that represent imminent danger to the child. The family risk assessment tool incorporates factors that represent the future risk or likelihood of abuse and neglect. The third tool is the family risk reassessment tool. This tool brings together information from the original risk assessment with additional new information that evaluates a family’s progress towards case plan goals, in order to ensure that a child or young person is safe to stay at home.

SDM tools are designed to make best use of the information available at specific assessment points, by relying on actuarial science and comprehensive research into factors known to be most relevant to the safety, welfare and wellbeing of children and young people. SDM tools are developed by the Children’s Research Centre in the United States.

The SDM tools have been customised for the NSW context. They are used in American and Australian jurisdictions, including Queensland, the Northern Territory and South Australia.

1.3 Transparency in reporting

FACS is committed to providing open and transparent access to data. This includes data on response rates to ROSH reports, and related productivity and efficiency outcomes. This information is publicly available through a number of sources, including the FACS online statistical tools⁴ and the FACS Caseworker Dashboard⁵.

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The data within the FACS online statistical tools shows how we are performing against our objective to protect children and young people from abuse and neglect.

The FACS Caseworker Dashboard is updated quarterly and includes details of all children and young people reported at ROSH, and the percentage of those children and young people who receive face-to-face visits from a caseworker. The caseworker dashboard also reports on the numbers of caseworkers and caseworker vacancy rates. This is covered further in section two, caseworker numbers.

Other public reporting mechanisms include the FACS annual reports6, and FACS statistical reports7, including the FACS quarterly reports to partner agencies8.

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1.4 Number of ROSH reports, OOHC entries and face-to-face assessments

Figure 1 shows that the total number of ROSH reports has been steadily increasing from 2010-11 to 2014-15. The number of children and young people at ROSH with a completed face-to-face assessment has also increased over the same period.

Actual data for the 2015-16 financial year was not available at the time of drafting this submission. This is expected to be available in September 2016.

Figure 1: A comparison of ROSH reports*, OOHC entries** and face-to-face assessments***
2 Resourcing

2.1 FACS budget for keeping children safe

In 2016-17 FACS has been allocated funding in three Budget Service Groups in support of its goal of providing vulnerable children and young people with long-term, stable environments that help keep them safe; whether that is at home with their families, in OOHC, through guardianship or open adoption.

As shown in Table 1, 2016-17 FACS budgeted expenditure for the three Service Groups, ‘Earlier Intervention for Vulnerable People and Support for Communities’; ‘Statutory Child Protection’; and ‘OOHC for Vulnerable Children and Young People’ is approximately $1.9 billion.

‘Earlier Intervention’ Service Group funding is used to support vulnerable children, young people and their families to live better lives, and also supports community engagement. It includes support services that intervene early to prevent escalation into and within the statutory child protection system, reduce the incidence and impact of domestic violence against women and children and young people, and broader services in communities.

‘Statutory Child Protection’ Service Group funding is used to respond to reports of children and young people at ROSH. It involves assessing and investigating reports of child abuse and neglect, and intervening, where appropriate, to ensure the safety, welfare and wellbeing of children and young people at ROSH.

‘OOHC’ Service Group funding is used to support vulnerable children and young people who cannot live safely with parent/s. OOHC includes restoration, general foster care, kinship care, residential care and adoptions. It includes planning, monitoring and supporting NGOs to deliver services to children and young people in care.
Table 1: 2016-17 FACS budgeted expenditure for the ‘Earlier Intervention’, ‘Statutory Child Protection’ and ‘OOHC’ Service Groups.

<table>
<thead>
<tr>
<th>2016-17 Budget as Published</th>
<th>Service Group</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Earlier Intervention for Vulnerable People and Support for Communities</td>
<td>Statutory Child Protection</td>
<td>Out-of-Home Care for Vulnerable Children and Young People</td>
</tr>
<tr>
<td>Expenses</td>
<td>$'000</td>
<td>$'000</td>
<td>$'000</td>
</tr>
<tr>
<td>Employee Related Expenses</td>
<td>$18,820</td>
<td>$339,805</td>
<td>$136,018</td>
</tr>
<tr>
<td>Other Operating Expenses</td>
<td>$25,738</td>
<td>$95,439</td>
<td>$77,662</td>
</tr>
<tr>
<td>Grants and Subsidies</td>
<td>$274,483</td>
<td>$57,590</td>
<td>$865,479</td>
</tr>
<tr>
<td>Total Expenses Excluding Losses</td>
<td>$319,041</td>
<td>$492,834</td>
<td>$1,079,159</td>
</tr>
</tbody>
</table>

2.2 Non-government organisations

In 2016-17, $670 million has been allocated in the ‘Statutory Child Protection’ and ‘OOHC’ Service Groups to fund NGOs to provide intensive family support and contracted OOHC services.

A further $128 million has been allocated in the ‘Earlier Intervention’ Service Group for NGOs seeking to intervene with families, children and young people at risk of entering the child protection system. Please see sections three and four for examples of some of these initiatives.

*Delivery of OOHC services by NGOs*

The transition of OOHC to the non-government sector commenced in March 2012 and has been an important NSW Government initiative to strengthen and expand the capacity of the system. Approximately 57 percent of children and young people in OOHC are now placed with and managed by non-government designated agencies.
Service providers delivering OOHC placement services are funded on an all inclusive unit price, based on the identified needs of a child. The unit price covers the range of placement and support services to be purchased, including case management, care allowances and contingencies. Payments are reconciled according to actual bed nights used over a period.

The OOHC re-contracting process aims to reward service providers for improving child wellbeing and seeking the best permanency outcomes for children and young people; increasing value for money; and enabling a viable and sustainable service system.

2.3 Universal supports

FACS funding for universal supports to prevent and reduce harm to children and young people is captured primarily within the ‘Earlier Intervention’ Budget Service Group in Table 1. However as noted earlier, the responsibility for child protection and particularly the prevention of harm and early intervention in response to risk, extends beyond FACS. Other government departments, non-government sector agencies who work with children and young people and their families, and communities all play a vital role in child protection. Please see sections three and four for examples of strategies and specific services and programs delivered by government agencies and non-government partners, independently or in partnership with FACS and other agencies.

2.4 Caseworkers numbers

The FACS Quarterly Caseworker Dashboard reports on the actual staffing levels for caseworkers and caseworker specialists. The expenditure for these staff is reported within the ‘Statutory Child Protection’ and ‘OOHC’ Budget Service Groups in Table 1.

Figure 2 below, is part of the FACS Caseworker Dashboard. It specifically shows the number of full-time equivalent caseworkers funded against the number of full-time equivalent caseworker positions filled in a given financial year, from 2009-10 to 2014-15. Caseworker vacancy rates are also shown. In 2014-15 the FACS caseworker vacancy rate was 5 percent, the lowest recoded rate since 2009-1010.

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5 The funded FTE change between 2010-11 and 2011-12 reflects supplementation for the Helpline of 36 FTE positions. The funded FTE change between 2011/12 and 2012/13 reflects the transfer of brighter future caseworker resources (117 FTE) to the NGO sector. These resources are therefore not reported in subsequent years as FACS caseworkers, but remain in the NGO sector as a FACS funded program (see Section 3.5 for more information on the Brighter Futures Program).

10 The data reflected in figure 2 is annual and has been used because it reflects trends over the longer term. It shows actual FTE has increased between 2009-10 and 2014-15, because over the same period the vacancy rate has reduced from 13 to 5 percent. The most recent quarterly figures, also available on the dashboard, show the vacancy rate for third quarter 2015-16 was lower again, at 3 percent.
Annual data for the 2015-16 financial year was not available at the time of drafting this submission. This is expected to be available in September 2016.

**Figure 2**: FACS caseworker annual data from financial years 2009-10 to 2014-15.

Explanatory notes to Figure 2

Caseworker numbers reflect both frontline caseworkers and caseworker specialists across the community services spectrum, including those working in statutory child protection and out-of-home care. The figures do not include management staff associated with caseworkers and specialist disability caseworkers.

**Caseworkers** provide protection and support services by: assessing and investigating reports of risk of harm to children and young people; providing assistance to vulnerable families via prevention and intervention services; supporting and monitoring children and young people in OOH; managing crisis situations; promoting the safe and adequate care and protection of children and young people through appropriate interventions as legislated through the *Children and Young Persons (Care and Protection) Act 1988* and departmental policy and procedures.

**Caseworker Specialists** provide direct, practice-based professional support and development to casework managers and caseworkers. This includes: providing specialist advice on case practice matters; working with caseworkers and managers to develop case practice skills; undertaking practice and complex case reviews to develop the overall caseworker skill base; providing expert assistance in aspects of case management in complex or sensitive cases; acting as a conduit between FACS, community partners and other agencies in respect to current practice, professional support, service development and policy.

**Funded full-time equivalent** (FTE) is the number of FTE caseworkers funded in the FACS Budget.

**Actual FTE** refers to the number of FTE caseworkers working in a given reference period, excluding those on extended or parental leave or occupying positions funded by specific time-limited funding.

**Number of vacancies** represents the difference between the funded FTE and actual FTE during the reference period. The vacancy rates presented on the dashboard may differ from rates published by other sources due to the use of different methodologies.

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12 For example, vacancy rates determined using different methodologies could be based on a head count at a point in time, or numbers of employees, without adjusting for factors like employee leave. Instead, the FACS
2.4.1 Caseworker recruitment

FACS is working to fill all budgeted caseworker positions and targeted recruitment is underway to increase caseworker numbers in hard-to-fill locations\(^\text{13}\).

These activities include:

- promoting rural and regional student placement opportunities to social work students at relevant universities in NSW, and strengthening our partnerships with universities by promoting the benefits of regional practice;
- developing and implementing strategies to increase caseworker capacity, including a caseworker paraprofessional role that supports caseworkers with casework-related tasks and administration; and
- targeted marketing and social media campaigns, as well as dedicated caseworker recruitment webpages on the FACS website.

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\(^\text{13}\) Caseworker Dashboard methodology quantifies the actual/available caseworker resources over the periods shown.

\(^\text{13}\) Hard-to-fill locations are more likely to arise in some rural and remote areas.
3 NSW initiatives to prevent and reduce risk of harm

As noted earlier, child protection work is undertaken by a range of government and non-government agencies independently and in partnership with FACS. Together we strive to support families to ensure the safety and wellbeing of their children.

A wide range of prevention and earlier intervention initiatives are already available in NSW, and are designed to help children, young people and families with varying levels of vulnerability and need. Initiatives range from universal programs providing basic support to families, through to intensive, integrated, multi-component programs for families dealing with complex issues.

Examples of some NSW initiatives are outlined below.

3.1 Safe Home for Life

In 2014, the NSW Government introduced the Safe Home for Life (SHFL) reforms. These reforms reflect the significance of a safe, stable and permanent home to children and young people’s happiness and the opportunity for them to reach their potential. Ideally this will be with a child or young person’s birth parents, but where this is not possible, the reforms emphasise early decision-making for permanency such as guardianship or open adoption.

To this end, reforms introduced the Permanent Placement Principles into the Children and Young Persons (Care and Protection) Act 1998. These guide decision-making about a safe and stable home for children and young people. They also set out the timeframes for when the Children’s Court must decide if returning a child to their parent is possible. Where restoration is not possible, the preferred order for the permanent placement of a child or young person is guardianship, open adoption (for non-Aboriginal children) and only where these are not appropriate or possible, parental responsibility to the Minister and placement in foster care.

Guardianship orders were a new type of order introduced under SHFL. They aim to provide greater stability for a child or young person until they are at least 18 years of age, without cutting legal ties to their family. Under a guardianship order, a child or young person is not in foster care or OOHC but in the independent care of their guardian.
Other practice aspects of SHFL include specific tools to work with parents, to strengthen their parenting ability and an increased focus on alternative dispute resolution, which offers opportunities to resolve issues around contact with birth parents and other significant people in the lives of children and young people in care without court involvement.

The SHFL reforms embrace co-design, a new approach to public service reform that aims to include all stakeholders in the change process. Co-design draws on the experience of caseworkers, partners and families to guide, test and review how FACS works. SHFL co-design allows FACS districts to respond differently to their unique challenges. It lets districts develop solutions appropriate to their local needs rather than a one-sized fits all approach.

### 3.2 ChildStory

As part of the SHFL reforms, the NSW Government is investing in the replacement and upgrade of frontline technology systems. This investment is known as ChildStory. In 2016-17, FACS will invest $49 million in ChildStory.

ChildStory will replace a number of existing IT systems with one integrated platform. ChildStory will be an information technology system that places the child at the centre of their story and builds around them a network of family, carers, caseworkers and service providers that work collaboratively, with each other and the child, to keep them safe.

Children and families will have more information and involvement in what is happening to them. Caseworkers will have access to better tools so they can spend more time working with children, young people and families and less time in the office. Service provider organisations will be able to work more closely with the department sharing information and coordinating care for children and young people.

### 3.3 The Office of the Senior Practitioner

The Office of the Senior Practitioner (OSP) was established in 2012 as a specific unit within FACS dedicated to practice leadership. The mission of the OSP is “to develop, inspire and support child protection practice, to build genuine relationships with families and the sector to keep children safe, and achieve positive outcomes for families”.

Since its establishment, the OSP has implemented a number of strategies to support practitioners in their efforts to keep children safe.
3.3.1 Practice First

One of the broader strategies developed and implemented has been the service delivery model Practice First, which is also part of SHFL reforms. The focus of Practice First is on changing the practice culture across the spectrum of FACS work with families including assessment, intervention and collaboration with partner agencies. Practice First aims to achieve safety for children, young people and families through skilful child protection practice, shared management of risk and building genuine relationships with families and the community.

The model is based on 10 principles of practice that are evidence-based and reflect contemporary research. The principles influence our systems, culture and people.

3.3.2 Further examples of OSP strategies

The Shining a Light on Good Practice Report is published annually and showcases stories of good relationship-based practice from within FACS and the broader NGO sector for all to learn with. The report is accompanied by a series of reflective learning exercises based on stories in the report, and a series of podcasts aimed at enhancing learning.

The OSP hosts Research to Practice Seminars each year that are theme based, and involve experts presenting contemporary theory on the given theme.

An annual Child Protection Practice Conference is also held that brings together international and national experts to deliver a series of contemporary and skill based key note addresses and master classes. A series of workshops are also part of the program and are an ideal opportunity for practitioners to share their particular expertise with colleagues.

The OSP launched ten Care and Protection Practice Standards in late 2015. The standards are based on theory about the skills that make for a good child protection practitioner. Each standard is accompanied by a series of reflective questions designed to prompt practitioners to reflect on their application and how this impacted on their work with a family.

3.4 Child, Youth and Family Support

Child, Youth and Family Support (CYFS) is a FACS early intervention program which aims to deliver a broader range of less intensive early intervention services to meet the needs of vulnerable children, young people and families who fall below the threshold for statutory child protection intervention. FACS funds NGOs and local councils to deliver CYFS services across NSW.
The services provided under this model include advice and referral, assessment, case planning and case management, parenting programs and parent support groups, skills focused groups for young people, counselling and home visiting.

### 3.5 Brighter Futures

Brighter Futures is a FACS program delivered by NGOs across NSW. The program delivers services to families with a child aged under nine years, or who are expecting a child, where the child is at high risk of entering the statutory child protection system. Brighter Futures aims to ensure that vulnerable children, including those who meet the ROSH threshold, can live safely at home. Eligible families receive a range of tailored services including case management, home visiting, parenting programs and quality childcare.

### 3.6 Multi-Agency Response Centre

The Central Coast Multi-Agency Response Centre (MARC) is located in Wyong on the Central Coast and has been accepting child protection reports diverted from the Child Protection Helpline in the Gosford and Wyong local government areas since late 2015.

The Centre is operated by FACS, NSW Health, Department of Education and FRS caseworkers.

The service will operate as a two year trial and aims to identify and apply improved wrap-around services to children at risk of harm through a multi-agency collaborative approach, thereby ensuring that children are receiving the appropriate response in a timely and connected way.

### 3.7 Mobile Child Protection Unit

The Mobile Child Protection Unit (MCPU) was established in early 2015 to address the need for more reliable and consistent child protection responses across the upper sector of the Western NSW district. It services the Bourke, Brewarrina, Walgett and Cobar Local Government Areas.

MCPU caseworkers respond to allocated ROSH reports as the primary caseworker, with the local caseworker as the secondary worker. This separation of roles enables local caseworkers to support families and spend more time engaging with them and building effective ongoing relationships.

MCPU caseworkers are based in Dubbo and travel to communities to complete assessments. Local caseworkers retain responsibility for supporting families to reach the identified case planning goals.

The team of seven MCPU caseworkers and local caseworkers has nearly tripled the number of home visits made in the area. In the first nine months of operation from April to December 2015, there were 1250 home visits compared with 459 during the same period in 2014.
3.8 Intensive Family Preservation Program

The Intensive Family Preservation Program is FACS highest-intensity placement prevention program coordinated and delivered by NGO service providers. The program targets families where a child aged nought to fifteen is the subject of a ROSH report, and is either at imminent risk of being removed from their parents and placed in OOH, or under certain conditions, is to be returned to their family home from an emergency OOH placement.

3.9 Transition to the National Disability Insurance Scheme

FACS is facilitating a suite of safeguarding and decision support initiatives to operate during the transition to the National Disability Insurance Scheme (NDIS).

This includes a $1 million Child Safe Organisation Project which will focus on building the child safe capacity of funded disability service providers, including Aboriginal and culturally and linguistically diverse service providers.

FACS is funding the OCG to lead the project which will:

- promote child safe organisations, including existing legislative requirements to the sector;
- develop child safe training and resources for the sector to improve its understanding and capability in practice; and
- reinforce service providers’ responsibilities under the Child Protection (Working with Children) Act 2012 (NSW).

3.10 Families NSW

The Families NSW program aims to enhance the health and wellbeing of children up to eight years and their families. Families NSW is designed to meet the needs of children and families who have identified vulnerabilities and prevent the further escalation of the challenges they may face. Families NSW reflects our understanding of the importance of the early years in a child’s development, and the long-term effectiveness of support provided to parents and children during these years.

Families NSW provides five types of services: supported playgroups; parenting programs; family workers; community capacity building; and partnerships and network projects.

In 2014-15 a total of 399 funded projects were delivered across NSW.

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14 Data for the 2015-16 financial year was not available at the time of drafting this submission.
3.11 The Pathways of Care Longitudinal Study

An understanding of the pathways children and young people take through OOHC is important in identifying the factors that influence their experiences and outcomes. Reliable data helps to inform more effective policy and practice aimed at reducing risk and enhancing the wellbeing of children and young people.

The Pathways of Care Longitudinal Study (POCLS) is the first large scale prospective longitudinal study on OOHC in Australia. The study population cohort is all children aged nought to seventeen years entering OOHC, on interim and final orders, for the first time across NSW within an 18 month period between May 2010 and October 2011 (a total of 4,126 children and young people).

FACS is funding and leading the study with a team of experts contracted to provide advice on the study design and undertake data collection and analysis. The study has significant potential to inform policy, program and service development to achieve the best outcomes for children and young people in OOHC.

3.12 NSW Health Education Centre Against Violence

The NSW Health Education Centre Against Violence (ECAV) is a state-wide unit responsible for workforce development and training programs in the specialised areas of adult and child sexual assault, domestic and Aboriginal family violence and physical and emotional abuse and neglect of children.

ECAV provides the mandated training for NSW Health senior health clinicians, specialist child protection, sexual assault and Aboriginal family health workers, as well as targeted training to mental health and drug and alcohol workers. Courses are provided in metropolitan, rural and remote areas across NSW. ECAV provides face-to-face and online training, learning and resource development services, clinical and policy consultation, mentoring and supervision, and community development programs. ECAV is also highly regarded for the provision of these services to other government agencies and NGOs.

The Centre is in demand for training in the complex areas of Aboriginal cultural competency, children under 10 with problematic sexualised or sexually harmful behaviours, sibling sexual abuse, same sex domestic violence, abuse of older people, Aboriginal family violence and domestic violence routine screening.

ECAV is committed to a diverse and inclusive workforce that is safe and comfortable for all people including the lesbian, gay, bisexual, transgender, queer and intersex community.
3.13 Sexual Assault Services

NSW Health has a network of 55 specialist Sexual Assault Services delivered by Local Health Districts which provide crisis and ongoing counselling, medical and forensic services to adult and child victims of sexual assault and their non-offending family members.

NSW Health Sexual Assault Services also provide a range of activities in response to sexual assault including advocacy, court preparation and court support, community development, community education and awareness raising and prevention, and professional training and consultation. Each Local Health District provides access to 24/7 on call sexual assault services as well as timely assessment and referral services for follow up counselling.

Of the 55 NSW Health Sexual Assault Services:

- 48 provide services to adult and child victims of sexual assault;
- four are adult Sexual Assault Services providing services to children 14-16 years old who have experienced assault by someone who is not a caregiver or relative, young people 16-17 years old and adults 18 years and older; and
- three are Child Protection Units which provide crisis and ongoing counselling, medical and forensic services and support to victims of sexual and physical abuse and neglect under the age of 18 years and their non-offending family members.

3.14 Child Protection and the NSW Education System

Mandatory child protection training is provided annually for all Department of Education (DoE) staff working in or supporting students and schools. The training focuses on the need to understand and respond to the circumstances of each individual student and contains information and scenarios addressing a range of safety, welfare and wellbeing concerns for children and young people from early intervention and prevention to ROSH.

DoE’s CWU provides on-demand, direct support to schools assisting staff to identify and implement appropriate responses for individual students and their families experiencing safety, welfare and wellbeing concerns (please see section one for general information on CWUs).

DoE provides a range of specialist services in public schools to support the health, welfare and wellbeing of all vulnerable students in their educational journey. This includes those students residing in OOHC.
Since 2010, DoE has employed 10 OOHC coordinators, distributed across the department’s four Education Services teams. The positions work to develop more effective and efficient modes of improving educational outcomes for children and young people in OOHC through the coordination and monitoring of educational support for students living in OOHC and ensuring that DoE fulfils its legislative requirements in relation to these students.

Child protection education forms part of the *NSW Personal Development, Health and Physical Education* (PDHPE) curriculum and is implemented in all NSW government and non-government schools. In March 2015, the Premier of NSW committed $4 million over four years for a specialised child protection education program in schools to complement the current PDHPE curriculum. The specialised program will be delivered by an external non-government provider and will be available to all schools in NSW, including government and non-government, from July 2016.

**3.15 Young Offenders Act 1997**

In some circumstances, vulnerable children and young people will come in contact with the criminal justice system.

Juvenile Justice administers Part 5 (Youth Justice Conferences) of the *Young Offenders Act 1997*. The Act is designed to divert all but the most serious young offenders from court and ultimately from custody. This initiative is aimed at all young people who have offended, including Indigenous young people and those who are homeless.

Under the Act, a young person can be cautioned or warned by police or referred by police and/or the Court to participate in a Youth Justice Conference.

Youth Justice Conferencing is administered by Juvenile Justice. The conferencing process is a restorative justice approach facilitated by an independent convenor, where offenders seek to take responsibility for and to the extent possible, repair the harm caused to victims. Youth Justice Conferences bring together young offenders, their families, victims of their offence and police.

Young Indigenous people are more likely to participate in diversionary programs if they are aligned with a worker with a similar cultural background. Reflecting this, Juvenile Justice also employs Indigenous staff to engage and support young people from Indigenous backgrounds.

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15 The term ‘Indigenous’ young people is used by Juvenile Justice and refers to ‘Aboriginal and Torres Strait Islander’ young people.
3.16 Youth on Track

The Juvenile Justice Youth on Track early intervention scheme provides family-based intervention and support to young people at the early stages of their interaction with the justice system.

The aim of the scheme is to divert young people from becoming further entrenched in the justice system by addressing the underlying factors of their offending behaviour and working with their families. The scheme is voluntary and has the benefit of multi-agency support. It provides police and schools with an avenue to refer young people at risk of offending into support without requiring a mandate. The target group is 10 to 17 year-old offenders with at least one formal contact with NSW Police, a range of risk factors, but who have never received a supervised court order.

Youth on Track has shown positive change in participants’ contact with police, a reduction in offending risk factors, and improvement in social outcomes such as family functioning and education engagement.

3.17 Bail Assistance Line

The Juvenile Justice after-hours Bail Assistance Line aims to reduce the number of young people being remanded in custody pending a court outcome, where they can be safely supervised on bail in the community.

The period between arrest and sentencing presents a unique window of opportunity for Juvenile Justice to intervene effectively, with the co-operation of other agencies such as FACS and NSW Police, in order to divert young people from unnecessary incarceration.

Police contact the Bail Assistance Line when they are considering conditional bail but are unable to locate a responsible adult, transport or appropriate accommodation. Bail Coordinators are able to assist police and where possible, attend police stations and work with the young person, to locate a responsible adult, provide safe transport and/or arrange accommodation services.

The priority target group is young people aged 10 to 17 years old and, in particular, young people under 14 years old with a focus on Indigenous young people.

Selected NGOs support the Bail Assistance Line through the provision of bail related services such as transport, accommodation and case support.

The Bail Assistance Line operates between 4pm and 3am every day in metropolitan Sydney and the Newcastle/Hunter region. Juvenile Justice data identified these areas as having high rates of remand for young people due to their inability to meet their bail conditions.
If a child or young person apprehended by police is under the parental responsibility of the Minister for Family and Community Services, the Child Protection Helpline will work collaboratively with the Bail Assistance Line to secure an appropriate accommodation placement.

3.18 Joint Counselling Trial

Victims Services NSW, in partnership with Juvenile Justice, has developed a trial to provide counselling services to young people at Juniperina and Reiby Juvenile Justice Centres. Victims Services administers the Approved Counselling Service which provides face-to-face counselling to eligible victims of violent crime.

The trial was initiated to meet a gap in services to young people in detention centres who are victims of crime, in accessing therapeutic services to address issues of victimisation.

3.19 NSW Police Force

All police have a role in the protection of children, including under the Children and Young Persons (Care and Protection) Act 1998.

The Child Abuse Squad and Sex Crimes Squad, State Crime Command, have primary responsibility for the investigation of child protection matters within the NSW Police Force. The Child Abuse Squad investigates the sexual abuse, serious physical abuse and/or serious neglect of children and young persons.

This includes, but is not limited to, investigations conducted in accordance with the Joint Investigation Response Team (JIRT) Memorandum of Understanding (MoU). The JIRT MoU is a formal arrangement between the NSW Police Force, FACS and NSW Health intended to provide a timely, coordinated and comprehensive response to children and young people subject to child abuse constituting a criminal offence. The process is collaborative, although each agency has clearly defined roles, responsibilities and response time-frames. The role of Police includes detecting and investigating criminal offences, and initiating criminal proceedings where appropriate.

The Sex Crimes Squad Child Exploitation Internet Unit investigates the sexual abuse and exploitation of children facilitated through the use of the internet, related computer and telecommunication devices.

The Sex Crimes Squad also administers the Child Protection Register in accordance with the Child Protection (Offenders Registration) Act 2000.
4 Initiatives for Aboriginal children and families

Aboriginal children and young people are significantly over-represented in the child protection system. The NSW Government is working closely with Aboriginal organisations and communities to develop culturally competent strategies and services to support Aboriginal children, young people, families and communities.

Examples of some initiatives targeting Aboriginal children, young people and their families are outlined below.

4.1 FACS Aboriginal Employment Strategy 2016-18

FACS is working to ensure the department becomes the employer of choice for Aboriginal people by providing a more culturally competent workforce that is responsive to Aboriginal people and communities. This commitment is reflected in the FACS Aboriginal Employment Strategy 2016-18. As FACS moves towards a localised approach to community engagement and inclusion, Aboriginal employment and leadership development will become paramount, as will the existing need to deliver more effective culturally competent services.

As at June 2015, 4.31 percent of FACS staff identified as Aboriginal, exceeding the Council of Australian Government’s (COAG) Aboriginal employment target of 2.6 percent.

4.2 Aboriginal Child, Youth and Family Strategy

The Aboriginal Child, Youth and Family Strategy (ACYFS) provided services to 1023 Aboriginal or Torres Strait Islander children in 2014-1516.

ACYFS aims to provide Aboriginal children with the best possible start in life through universal service delivery to Aboriginal families. The strategy has a particular focus on supporting Aboriginal families expecting a baby or with children aged up to five years.

The program consists of five service models. These include:

- *Aboriginal supported playgroups* - providing an opportunity for parents to share experiences of parenting and for children to socialise, play and learn in a structured and positive environment. Supported playgroups provide a support network for parents and opportunities for parents to learn new parenting skills they may otherwise not acquire. For children, supported playgroups create opportunities for age-appropriate learning experiences and activities that help them become ‘ready for school’.

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16 Data for the 2015-16 financial year was not available at the time of drafting this submission.
• **Parenting programs** - providing parents with effective activities, information and coaching to assist them to build positive parenting skills.

• **Aboriginal family workers** - working to improve the outcomes and wellbeing of Aboriginal families with children aged nought to five by providing support for parenting, facilitating informal support groups and access to appropriate services. Family workers assist parents to understand their child’s development and support them to develop confidence with parenting skills.

• **Community capacity building** - community based projects aiming to strengthen the connections community members make with local services available to them.

• **Partnership and network projects** – supporting service providers to work collaboratively to improve conditions in local communities and improving prevention and early intervention approaches by connecting local services. The aim is to improve access and engagement with services.

ACYFS works in close partnership with Families NSW, and the NSW Aboriginal Maternal and Infant Health Strategy.

In 2014-15\(^\text{17}\) a total of 75 funded projects were delivered across NSW.

### 4.3 Aboriginal Maternal and Infant Health Strategy

The Aboriginal Maternal and Infant Health Strategy (AMIHS) is a NSW Health initiative that aims to improve the health of Aboriginal women during pregnancy and reduce mortality rates for Aboriginal babies. AMIHS provides culturally appropriate, community based health services for Aboriginal women and is provided by a midwife and an Aboriginal health worker or Aboriginal education officer.

These services include antenatal and postnatal care; education about the effects of smoking, drugs and alcohol during pregnancy and the benefits of breastfeeding; home visits; and transport to appointments.

### 4.4 Aboriginal Child and Family Centres

Aboriginal Child and Family Centres (ACFCs) are operational across a number of communities in NSW, providing services to 3572 children in 2014-15\(^\text{18}\).

ACFCs target client group is nought to eight years. The Centres are located in Ballina, Lightning Ridge, Brewarrina, Gunnedah, Toronto, Doonside, Mt Druitt, Minto and Nowra. They are purpose built in disadvantaged locations for early learning and care, and as a community space.

\(^\text{17}\) Data for the 2015-16 financial year was not available at the time of drafting this submission.

\(^\text{18}\) Data for the 2015-16 financial year was not available at the time of drafting this submission.
The centres are operated largely by Aboriginal organisations and provide a network of integrated and culturally appropriate services in a community hub model, tailored to the needs of the local community.

Service delivery falls under four main categories: early childhood education and care; maternal and child health; parent and family support; and other relevant early childhood support.

Services may include immunisations, health checks, speech pathology, paediatric appointments, counselling and psychological services for adults and children, vaccinations, disability assessments and referrals, TAFE short courses and community development activities. The range of services between centres will vary depending on local needs and priorities.

In 2014, an evaluation of ACFCs undertaken by the Cultural and Indigenous Research Centre Australia (CIRCA) showed that significant progress was made in effectively reaching out to families who previously would not have accessed services available to them because of a lack of access and affordability.

The number of families using the services continues to increase as the centres become more established in communities. Client satisfaction with the centres is high. This is driven by approximately 80 percent of employed staff being Aboriginal.

In May 2016, reflecting the success of the centres and to ensure their continuation, the NSW Government announced funding of $15 million over four years to the ACFC Program.

4.5 Protecting Aboriginal Children Together

Protecting Aboriginal Children Together (Moree and Shellharbour) works in partnership with FACS and Aboriginal families through all aspects of child protection. The program is delivered by NGOs, recruited predominately from the local Aboriginal communities.

The program aims to ensure families are supported in their engagement with FACS and that they understand the child protection process; whilst assisting FACS to understand family practices through an Aboriginal cultural lens. Forty-six families were engaged with Protecting Aboriginal Children Together during 2014-15\textsuperscript{19}.

\textsuperscript{19} Data for the 2015-16 financial year was not available at the time of drafting this submission.
4.6 Intensive Family Based Services

Intensive Family Based Services (IFBS) is a FACS program delivered to Aboriginal families and communities through a mixture of internal and external sources. It is a time-limited, intensive support program for vulnerable Aboriginal children and their families. IFBS provides crisis intervention, restoration and placement support services targeting ROSH clients.

Currently, FACS has six internal IFBS services and additionally contracts with four Aboriginal NGOs to provide the external pilot model.

4.7 Family Group Conferencing

Under Safe Home for Life FACS is implementing Family Group Conferencing (FGC). The model is based on the New Zealand approach, however, participation by families is voluntary in NSW. The FACS model of FGC is a family-focused, strengths-based form of alternate dispute resolution which seeks to enhance partnerships between families and FACS in decision-making for at risk children and young people.

FGC is now operational across 12 FACS districts with state-wide coverage to be achieved by the end of 2016. An Aboriginal Family Group Conferencing model has also been developed and piloted in some FACS districts.

To embed FGC in NSW practice, FACS has recently established a panel of over 90 independent, external facilitators, to conduct FGC in NSW. Work is progressing, in collaboration with peaks, to increase the number of Aboriginal facilitators and those from multicultural backgrounds.

4.8 Aboriginal Cultural Plans

Cultural Plans are a current requirement for all Aboriginal children and young people in OOHC. The structure of the Aboriginal Cultural Plans, which must be included with Care Plans submitted to the Children’s Court, were developed by FACS, the Children’s Court and Aboriginal Child, Family and Community Care State Secretariat (AbSec).

Aboriginal Cultural Plans are an Aboriginal child and young person specific plan intended to increase the child or young person’s opportunity to learn, understand and appreciate their unique cultural background despite being removed from the family unit which normally provides this knowledge.

Aboriginal Cultural Plans complement the existing permanency plans for children and young people that focus upon stability of placement. Inclusion of the Aboriginal Cultural Plans into the remodelled FACS data system changes as part of ChildStory will enable accurate data extraction and compliance.
4.9 Aboriginal Co-Design Project

FACS funds Aboriginal non-government organisations to provide a range of services to Aboriginal children and young people and their families. These include the peak organisation for child protection and OOHC, AbSec and Aboriginal OOHC care and earlier intervention service providers.

The number of Aboriginal children and young people in the OOHC system in NSW is significant and disproportionate. In order to best meet the needs of these children and young people, and their families, it is important that the capacity and capability of Aboriginal service providers is promoted. In response to this challenge, FACS, AbSec, other government agencies and relevant NGOS are working collaboratively to increase the viability of Aboriginal service providers across the continuum of child protection service delivery. This includes improving the capacity of the system to work effectively with Aboriginal communities prior to statutory intervention.

4.10 Aboriginal and Torres Strait Islander Cultural Respect Framework and Programs

The Juvenile Justice Aboriginal and Torres Strait Islander Cultural Respect Framework is the Juvenile Justice blueprint for creating cultural respect across services, programs and staff. A key feature is the development of cultural standards and practices for program development and service delivery.

In addition to other offence focused and education programs and interventions, Juvenile Justice has two specific programs for Indigenous young people:

- **Dthina Yuwali (thi-nah you-wah-lee)** is a Juvenile Justice Indigenous specific drug and alcohol program which deals with the relationship between substance abuse and juvenile offending in the community and custodial environment.

- **My Journey, My Life** (formerly *Our Journey to Respect*) is a Juvenile Justice Indigenous specific program which aims to reduce the incidence of inter-generational violence. It seeks to facilitate participants’ movement from relationships based on power and control towards relationships based on respect.
4.11 Outcomes for Aboriginal children in OOHC

The Pathways of Care Longitudinal Study (POCLS)

An overview of the POCLS is provided in section three. The data collected through the POCLS will be invaluable in understanding the wellbeing trajectories of Aboriginal children and young people and the factors that influence these. Of the 4,126 total sample size in the study, 32.6 percent are Aboriginal. The POCLS Wave 1 Baseline Statistical Report released in September 2015\(^\text{20}\), includes comprehensive data about a sub-set of children who received final orders. The data was collected from in-depth face-to-face interviews with caregivers, children and young people. Of the 1285 children and young people in this sub-set, 598 (46.5 percent) were in kinship care and 469 (36.5 percent) were Aboriginal.

4.12 The Guiding Principles

In November 2015, FACS made a commitment to local decision making with the launch of the Guiding Principles for strengthening the participation of local Aboriginal communities in child protection decision making (Guiding Principles)\(^\text{21}\). The Guiding Principles were developed in consultation with Grandmothers Against Removals (GMAR), the NSW Ombudsman and FACS. The Guiding Principles provide a framework for FACS and local Aboriginal communities to work together in the practical application of the Aboriginal placement and participation provisions of the Children and Young Persons (Care and Protection) Act 1998 and relevant policies. They recognise that broader family networks need to be engaged in decisions about the care and protection of children.

4.13 Aboriginal Community Protocols

Prior to formulation of the Guiding Principles, the Western NSW District had engaged with a number of local Aboriginal communities to formulate Aboriginal Community Protocols which similarly provide a framework for formal case based interactions between FACS and the local Aboriginal community. Agreements have been finalised in both Dubbo and Bourke, with Dubbo becoming operational on 23 May 2016. Bourke is currently undergoing recruitment. It is the intention of Western NSW District to retain this model due to existing commitments made to local Aboriginal communities and developed systems to implement the protocols. These protocols are consistent with the intent of the Guiding Principles.

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\(^{20}\) The POCLS Wave 2 Baseline Statistical Report is due for release later in 2016.

5 Support, training, safety, monitoring and auditing of carers

Carers are often the people who know children and young people in OOHC best. They make the day-to-day decisions for these children and young people, and play a vital role in ensuring that their physical and emotional needs are met. Under NSW legislation all carers of children and young people in statutory OOHC must be authorised. FACS and designated agencies have a responsibility to provide their carers with the training and support they need to provide quality care to the children and young people who come to live with them.

5.1 Assessment and authorisation of carers

Carers register

The OCG operates a centralised carers register which holds certain information about carers to assist designated agencies in assessing a person as an authorised carer. The NSW Carers Register is capable of updating the information it holds on carers from a number of sources as it arises.

Sharing of information about allegations against carers

In accordance with the Children and Young Persons (Care and Protection) Regulation 2012 and the Adoption Regulation 2015, carer authorisation in NSW requires a ‘community services check’ to be completed. Information may include carer authorisation documents, carer reviews, allegations of reportable conduct and outcomes of investigations. This ensures that all relevant information held by FACS is provided to designated agencies before authorisation. After authorisation, FACS and designated agencies are required to keep the carers register updated with information about changes to the person, for example, if the person’s authorisation has been suspended.

Working with Children Check Scheme

All authorised carers in NSW must have a Working with Children Check (WWCC) Clearance. Chapter 16A, Children and Young Persons (Care and Protection) Act 1998, sometimes referred to as the information sharing provisions, enables designated agencies (and others) to provide the OCG with information about carers where that information relates to the safety, welfare or well-being of children or young people or a class of children or young people.

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22 Section 136(1), Children and Young Persons (Care and Protection) Act 1998.
In some circumstances FACS is required to provide information to the Children’s Guardian about carers under Part 5 and section 40 of the Child Protection (Working with Children) Act 2012 (WWC Act). For example, where FACS makes a finding that a carer has committed a serious physical assault upon a child or has committed sexual misconduct against or in the presence of a child, including grooming a child.

The WWC Act allows for immediate protective action to be taken by the Children’s Guardian, such as cancelling a WWCC Clearance, where the Children’s Guardian is satisfied that the person poses a risk to the safety of children and young people.

The WWC Act allows the OCG to conduct a risk assessment at any time should they obtain information indicating a person engaged in child-related work may pose a risk to children and young people. If the OCG is of the opinion that it is likely there is a risk to children and young people, the OCG may impose an interim bar preventing that person from engaging in child-related work while the assessment is being carried out.

5.2 Initial carer training

Initial training for generalist foster carers in NSW is based on the Shared Stories, Shared Lives training manual, an introductory pre-authorisation carer training package used widely by FACS and non-government designated agencies. The training modules focus on the stories of children and young people to engage participants in relevant and effective preparation for their role as carers.

This training covers a broad range of foundational topics. Issues covered include an understanding of the experiences of children and young people who have been abused, how this might reflect in their behaviours and responses to their environment; and how to support them to build self-esteem, resilience and reach their potential. Specific topics include bonding and attachment; grief and loss; identity and birth family contact; responding to challenging behaviour; and maintaining cultural connection.

5.3 Ongoing training, coaching and support for carers

NSW Carer support and training opportunities include:

- carer peer support groups in FACS districts;
- family camps organised by Connecting Carers NSW (CCNSW);
- a 24 hour carer support line - 1300 794 653 (CCNSW);
- access to CCNSW Regional Coordinator by phone and email;
- FACS carer support teams in districts;
- carer advocacy (CCNSW and AbSec);
• FACS carer resources including downloadable fact sheets, *Fostering our Future* magazine, publications, information and advice; and

• training such as, *Healing Invisible Wounds* and *Managing Challenging Behaviours* to support them during periods of time when a child’s behaviour may be complex and where placement breakdown is a risk.

Further examples of support and training strategies for carers are outlined below.

**Fostering NSW**

Fostering NSW is a one-stop site that provides information, support and resources for carers and prospective carers. This includes the Caring for Kids; and Raising them Strong (for Aboriginal carers) resources.

Fostering NSW is a partnership between the NSW Government and non-government OOHC care agencies. It was initiated by the NSW Government and is managed by the Association of Children’s Welfare Agencies (ACWA), a not-for-profit body representing OOHC agencies.

Fostering NSW supports the SHFL reforms, which place a child’s need for permanency and stability at the heart of all decision-making.

**Alternate Care Clinic**

NSW Health provides highly specialised mental health programs to support children in OOHC and their carers. This includes services through the Alternate Care Clinic. This is a joint initiative between South Western Sydney Local Health District and FACS that started in 2005. It provides state-wide consultation, outpatient and training services targeted to children in OOHC and their carers.

The Alternate Care Clinic developed the Reparative Parenting Program. This is an attachment-based parenting program that seeks to help foster and kinship carers learn to manage behaviour in a manner that also seeks to redress the psychological and emotional effects of trauma. It aims to increase the understanding, skills and resources of carers in order to increase placement stability. Since 2012, the Alternate Care Clinic has trained over 70 clinicians around the state as facilitators. Findings from an evaluation of the Reparative Parenting Program included a statistically significant decrease in parenting stress in carers.

**FACS psychologists**

FACS psychologists employed across NSW, including in rural and remote areas, are trained to address the effects of trauma in children and young people. They are available for consultation during case planning and to work with the families and carers of children and young people who have experienced trauma.
Support for Aboriginal kinship carers

NSW is committed to building the capacity of the sector to incorporate the needs of Aboriginal families. Two targeted initiatives include:

- *Raising Them Strong*, a ‘train the trainer’ package delivered to Aboriginal caseworkers to coach Aboriginal carers on a range of topics including health, education, grief, loss, trauma and challenging behaviours.

- *NSW Winangay Aboriginal Kinship carer resources assessment pilot*, a FACS pilot that commenced at Tamworth CSC in 2015. The pilot has recently been extended to include Mount Druitt and St Marys CSCs as well as the Nye Gurung Aboriginal Foster Care team.

The Winangay resources were developed to assist practitioners in their engagement and assessment of prospective Aboriginal kinship carers for children and young people in OOHC. Self determination and participation is fostered, and interactions are based on empowerment and support for Aboriginal people. The ultimate goal is for more Aboriginal children and young people to be raised on country by family.

The relationship between carers and caseworkers

Often the greatest support and first port of call for carers is their child’s caseworker. A good working relationship between a child’s carer and caseworker is an effective mechanism for the monitoring of a placement. For example, monitoring the extent to which the placement is meeting the needs of the child, as well as whether the carer is able, and feels supported, to provide for these needs.

NSW caseworkers are committed to building ongoing, effective relationships with carers, to support placements for the benefit of both the child or young person and the carer themselves.

Financial assistance to carers

Authorised carers receive an allowance to assist them to provide for the children and young people in their care. Allowances vary according to the needs of the child. Contingency payments and other financial support may also be available in certain circumstances.

5.4 Safety information for carers

Special provisions exist in the *Children and Young Persons (Care and Protection) Act 1998* to enable carers to receive information about a child who may come into their care or who is in their care, for the purpose of medical care and safety.

FACS produces a number of documents that provide advice for carers on their entitlement to obtain this information and how to obtain it. This includes the *Caring for Kids* guide that is given to all new carers.
Additionally, the Carers Code of Conduct, which is signed by all new carers, states that carers are to be provided with all relevant information that is available about the child or young person in their care to help them understand their needs.
6 Oversight and interaction between the OCG, FACS and NGOs

6.1 Functions of the OCG

The OCG is a statutory office, established under Chapter 10, *Children and Young Persons (Care and Protection) Act 1998*, under the responsibility of the Minister for Family and Community Services.

The functions of the OCG include:

- the accreditation and monitoring of designated agencies delivering OOHC (FACS and non-government providers);
- the registration of organisations providing voluntary OOHC (non-government providers, noting that organisations accredited as statutory OOHC designated agencies do not have to register with the OCG to deliver voluntary OOHC);
- management of the NSW WWCC regime (utilised by government and non-government organisations);
- operation of the NSW Carers Register (utilised by government and non-government OOHC designated agencies); and
- encouraging the development of child safe organisations (resources for all organisations working with children and young people).

Detailed information about the role and functions of the Children’s Guardian can be found on its website.

6.2 FACS interactions with the OCG

FACS interactions with the OCG (where these relate to the key functions of the Children’s Guardian) are focussed around FACS’ work as a designated agency providing OOHC services to children and young people, and as an organisation employing a significant number of people who work with children and young people.

The legislative and policy frameworks that govern these interactions include the *Children and Young Persons (Care and Protection) Act 1998* and regulation, the OCG Child Safe Standards for Permanent Care; and the *Child Protection (Working with Children) Act 2012* and regulation.

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Obligations under the legislation and related policy include requiring FACS to ensure all relevant employees have a current WWCC Clearance; reporting against the Child Safe Standards for Permanent Care; reporting to the OCG on compliance for the legislative requirements for carer authorisation and registration; entry and updating on the OCG’s Carer’s Register; sharing information; and notifying the OCG regarding risks to a child or young person posed by a child-related worker.

FACS also works closely with the Children’s Guardian on a broad range of practice and policy issues, particularly those in relation to the safety, welfare and wellbeing of children and young people in OOHC.

6.3 Non-government organisations

FACS funds NGOs to provide a range of services including prevention and earlier intervention and OOHC services. Legislation governing these arrangements includes the *Community Welfare Act 1987*, the *Children and Young Persons (Care and Protection) Act 1998* and the *Adoption Act 2000*. FACS funded services agree to comply with all relevant legislative requirements including those relating to privacy and confidentiality, record keeping and financial management.

FACS’ funding agreements with its funded services provides a framework for respective obligations and responsibilities. These include the outcomes FACS is seeking from the agreement and how these will be measured and monitored. Funding may be suspended or withdrawn where organisations fail to comply with the terms of the agreement. However, FACS seeks to work in partnership wherever possible and appropriate to build capacity within organisations and support them to provide services and support to our clients.

FACS’ ongoing partnership with the non-government sector is central to providing high quality, effective programs to vulnerable children and young people and their families in NSW. FACS is constantly seeking out new ways to work with our partners to this end. Examples of collaboration include the increasing use of a co-design approach to developing the strategies needed to meet current and future challenges, and partnerships with peak bodies to develop and deliver training.