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| Victorian handbook for foster carers  |
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Department of Health

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| Victorian handbook for foster carers  |
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| To receive this publication in an accessible format phone 03 9096 7366, using the National Relay Service 13 36 77 if required.Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.© State of Victoria, Department of Health and Human Services May, 2017.Throughout this document, the term ‘Aboriginal’ is used to refer to both Aboriginal and Torres Strait Islander peoples. Use of the terms ‘Koori’, ‘Koorie’ and ‘Indigenous’ are retained in the names of programs and initiatives and, unless noted otherwise, are inclusive of both Aboriginal and Torres Strait Islander peoples.ISBN 978-0-7311-6967-2 (Print)978-0-7311-6968-9 (pdf/online)Av[ailable at www.dhhs.vic.gov.au/fostercare](http://www.dhhs.vic.gov.au/fostercare)Printed by Mercedes Waratah, Port Melbourne (1603039) |
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# Foreword by the Minister for Families and Children

As one of Victoria’s foster carers, you play a vital role in our community, opening your heart and home to children and young people in need of a safe and nurturing environment.

This handbook contains important information to help you carry out your essential role. The handbook was developed in partnership with the Foster Care Association of Victoria, Centre for Excellence in Child and Family Welfare, foster care agencies and with input from foster carers and young people with a care experience from the CREATE Foundation.

For the first time, a Victorian foster carer charter has been developed and included in this handbook. The charter emphasises the role of the foster carer as a key member of the care team, offering a unique perspective into the needs of the child or young person in their care. The charter sets out the ways in which carers must be consulted, kept informed and respected as part of the care team and supported to fulfil their roles and responsibilities

This handbook is just one of the ways we are working to better support you as foster carers. Carer Advisory Groups have recently been established to ensure that your voice continues to be heard to improve communication and inform service improvements.

Like you, I am passionate about giving children and young people the best possible start in life. That’s why the Victorian Government is reforming the system that supports vulnerable children, young people and families. The details of our reform agenda are outlined in our Roadmap for reform. We are putting the people who need our care at the centre of our focus. We need to intervene earlier and connect families to the full range of services they need, before they reach the point of crisis. And when children and young people do come into our care, we need carers like you to help us do our very best for them.

Increasing the number of foster carers in the system is a central focus of our plans. You can play a significant role in spreading the news about the great work you do in your community to support the recruitment of more carers.

Our work with Victoria’s 25 foster care agencies to provide a unified approach to attracting, recruiting and retaining foster carers will mean better results for carers and most importantly, children and young people who cannot live with their families. In addition to our focus on retaining current carers, the new Fostering Connections advertising campaign is attracting new foster carers and streamlined recruitment processes are helping to ease pressure on the system, and most importantly, you, our hardworking foster carers.

Thank you for your hard work and dedication in caring for some of the most vulnerable members of our community. You do amazing work and make a genuine difference in the lives of vulnerable children and young people.

I hope this handbook provides you with the information and support you need to carry out your important role.

**Jenny Mikakos MP**

**Minister for Families and Children**

# Foreword by CREATE young consultants

Dear carer

On behalf of the children and young people in care in Victoria, we would like to thank the Minister for Families and Children for allowing us to have our voices heard in creating this resource. We believe it will make a huge difference in the lives of children and young people in care.

We are a group of young consultants from the CREATE Foundation (CREATE), who have all had an experience of living in care, and we have helped develop this handbook for foster carers.

CREATE is the national peak consumer body representing the voices of children and young people with an out-of-home care experience (including kinship care, foster care and residential care). Due to our diverse care backgrounds, we have a broad understanding of the lived experience of children and young people, similar to those whom you currently care for.

Being a young consultant provided us with a chance to help children and young people in care to help change the system. We are hopeful that we can empower each other and those

in the system (including carers and workers) to make a difference. We do this by building a connection with the system, so that our voices are heard and our experiences are equally valued, assisting us to reclaim our identity. Our experience is that we are not always heard or listened to, and CREATE provides us with an avenue to do this.

Being involved in this project gave us the opportunity to demonstrate what we are capable of achieving when we work together. We felt that the lyrics from Rachel Platten’s ‘Fight Song’, summed this up for us.

[Pull out text] ‘This is my fight song, Take back my life song, Prove I’m alright song, My power’s turned on, Starting right now I’ll be strong, And I don’t care if nobody else believes, ‘Cause I’ve still got a lot of fight in me.’ Rachel Platten and David Basset, 2015

We believe when we arrive at a new home (placement), the first three days are so important. This is the starting point where we go from being an individual to becoming part of a family, and where we get an impression of the family that we will be living with.

We, like anyone else, are unique individuals who need love and support throughout our journey in life. Even though we have been through a lot, we are still children and young people, and deserve to experience a family home. During this time, we need stability, safety, warmth and open mindedness, and we value your willingness to include us in your family.

This is what allows us to feel like we can begin to trust. We believe that family means to feel secure and to have someone to count on who shares your problems. It also means having respect for each other and a shared responsibility. Family is a good word as it’s used for the people we love.

[Pull out text] ‘Love recognises no barriers. It jumps hurdles, leaps fences, penetrates walls to arrive at its destination full of hope.’ Maya Angelou

Family is a unit that everyone collectively contributes to, with individuals and different personalities that function in unity. Home, the meeting place for a family, is more than just a place. For us, it’s a feeling.

As a foster carer, we need you to help us to survive in society and life. We would like you to know that moving from placement to placement, or even from home to home is hard for us. However, if you can create a connection with us, it can make a massive difference.

We hope that this handbook will help you as a foster carer to have a better opportunity to understand the children and young people you care for. We hope that this can be used as a tool to help you become the best carer you can be.

Read this with the understanding that it will prepare you for your own journey as a carer of children and young people with similar experiences to us. This handbook will help you to face and overcome some of the challenges of being a carer.

Lastly, we felt that the following quote from the Disney movie Lilo and Stitch helps explained our perspective on your invaluable role and what you have to offer us in our own ‘Fight Song’.

[Pull out text] ‘OHANA means family. Family means nobody gets left behind or forgotten.’ Lilo and Stitch, Disney Animation Studios 2002

We hope you enjoy this handbook.

Yours faithfully,

**Ash, Matt, Michelle, Naomi, Natisha, Reanna, Russ, Sammii, Steph**

**The Foster Carer Recruitment Project**

**Working Group**

**CREATE Foundation Young Consultants**

# About this handbook

This handbook has been developed to support you in your important role as a foster carer. It clarifies your role, and the roles of others involved in the care of children and young people who are subject to child protection involvement in Victoria.

It answers common questions and explains:

* what to expect as a foster carer
* the out-of-home care system
* the services available to you and the child or young person in your care
	+ how to be an effective advocate for a child or young person.

The handbook describes a sometimes complex system and your agency will support you with any questions you may have. This handbook also aims to help you understand some of the behaviours and emotions you may see in the children and young people you care for, and gives you tools to help you support them.

This handbook includes the changes to the Children, Youth and Families Act 2005, which came into effect on 1 March 2016. At the time of publication, this information is also consistent with the recently updated Victorian Child protection manual.

If you want more information about a specific topic in the handbook, we have referenced other useful resources that provide further information. There are also a number of information sheets for easy reference and a glossary to explain the terminology used throughout the handbook.

The handbook contains regular references to the needs of Aboriginal children and young people because Aboriginal children and young people make up approximately 20 per cent of all children in the Victorian out-of-home care system. This results from the impact of past government policies including the Stolen Generations, which led to many Aboriginal children and young people becoming disconnected from their families, communities and culture.

Information is provided about the particular requirements when caring for Aboriginal children and young people, which must be considered to ensure their best interests and cultural needs are met. If you are caring for an Aboriginal child or young person, you need to seek guidance regarding decision making about their wellbeing and care. The handbook supports you in this role.

Carers, child protection and foster care agency staff have reviewed the handbook, and their views on a number of issues have been included in quotes throughout the handbook. A group of young care leavers, the CREATE Young Consultants, have spent a considerable amount of time reviewing sections of this handbook, providing their insights to inform carers and support care arrangements. These consultants also hosted an art day for children and young people currently in care – this art is featured throughout the handbook. The department would like to thank the CREATE Consultants for their time, effort and expertise.

We would like to thank the many contributors to this handbook, including carers, foster care agency staff, child protection staff, the Foster Care Association of Victoria, the Centre for Excellence in Child and Family Welfare, the Commission for Children and Young People, Kinship Carers Victoria and a variety of departments within the Victorian and Commonwealth Governments. The commitment to carers and the children and young people in their care by all involved has been evident throughout the consultation process and we thank you.

The Foster Care Association of Victoria is available for you to contact for additional support. This handbook cannot address every issue that may arise during your time as a carer. Some issues need individual responses and you should discuss these with your foster care agency case worker.

# 1. Charters for out-of-home care

## The Victorian Foster Carer Charter – out-of-home care

The Victorian Foster Carer Charter (the charter) is for accredited foster carers in Victoria. The charter sets out your responsibilities as a foster carer and how you can expect to be supported, consulted and kept informed by your agency and the Department of Health and Human Services (the department), to fulfil your important role in looking after the child or young person in your care.

The charter recognises your significant role and unique position to share views and insights into the needs of the child or young person in your care. It aims to strengthen the support you get and involve you as a valued member of the child or young person’s care team.

The charter sets out the importance of effective working relationships between foster carers, foster care agencies, child protection and the department to achieve the best possible outcome for children and young people in out-of-home care.

The charter will help you understand your rights and responsibilities as a foster carer and member of the care team, and help those who work with you to understand their responsibilities to you. You and other members of the care team should refer regularly to the charter, which is designed to promote teamwork to advocate for and support the child or young person in out-of-home care.

Although the charter is not legally enforceable, the concepts within it are reflected in law through the *Carers Recognition Act 2012*, as well as in the *Program requirements for home-based care in Victoria* and the *Victorian charter supporting people in care relationships.*

### The charter’s principles

The charter also reflects the considerations of good practice for care teams, as described in the [child protection manual at *www.cpmanual.vic.gov.au/advice-and-protocols/advice/out-home-care/ care-teams*](http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/out-home-care/care-teams)

The considerations of good practice promote teamwork to:

* put the best interests of the child or young person first (central to the relationship between all members of the care team)
* get to know the child or young person well enough to know how best to involve them in decision-making processes, and to ensure their wishes and views are taken into account
* develop the skills for providing trauma-informed practical care
* establish or maintain the child or young person’s connections to their Aboriginal community and culture, where applicable
* ensure children from diverse cultural and religious backgrounds have their cultural and religious needs met
* respect each other, and acknowledge the skill and expertise of other care team members
* keep each other informed about what is happening
* ensure everyone has the opportunity to contribute to plans and decisions made about a child or young person
	+ understand each other’s own role and responsibilities

## The Victorian Foster carer charter

**As a foster carer, your responsibilities are to:**

* put the best interests of the child or young person first[[1]](#footnote-1)
* provide a safe and nurturing home
* respect and proactively maintain a child or young person’s connections to family, community and culture, according to their case plan
* support the permanency objective for the child or young person
* provide culturally appropriate care to children and young people who are Aboriginal or from culturally diverse backgrounds
* encourage the child or young person’s learning and educational achievement
* support the child or young person’s wishes and views and advocate for their healthy development
* maintain open communication with other care team members to keep them informed
* uphold the child or young person’s, and their family’s right to privacy
* fulfil your role within the care team and understand the role of other care team members
* actively seek opportunities to develop your skills and knowledge to care for the child or young person
	+ actively participate in developing the Care and Placement Plan and other Looking After Children tools

**As foster carer, you can expect your agency and/or the department to:**

* action your needs as soon as possible, to assist you in caring for the child or young person
* include you in planning and seek your views in care team meetings
* consider and respect the health and wellbeing, culture and religion of you and your family
* consider your safety when planning about the disclosure of your address to parents of the child or young person
* provide timely information to you about court decisions and other issues that affect you and the child or young person in your care
* establish regular channels of communication with you and provide you with important documentation, such as the instrument of authorisation and cultural plans
* give prompt advice to you about changes to contact arrangements
* provide all relevant available information to enable you to make an informed choice about caring for a child or young person
* respond to issues and complaints in a timely manner, and treat you fairly
	+ manage quality of care matters with sensitivity and understanding of the emotional impact on you and your family

## Charter for children in out-of-home care

The Charter for children in out-of-home care has been prepared specifically for children and young people who can’t live their parents and are in out-of-home care. It lists what they should expect from all those people who look after them and work with them while they are in care.

### A child and young person’s rights

**As a child or young person in care, I need:**

* to be safe and feel safe
* to stay healthy and well, and go to a doctor, dentist or other professional for help when I need to
* to be allowed to be a child and be treated with respect
* if I am an Aboriginal child, to feel proud and strong in my own culture
* to have a say and be heard
* to be provided with information
* to tell someone if I am unhappy
* to know information about me will only be shared in order to help people look after me
* to have a worker who is there for me
* to keep in contact with my family, friends and people and places that matter to me
* careful thought being given to where I will live, so I will have a home that feels like a home
* to have fun and do activities that I enjoy
* to be able to take part in family traditions, and be able to learn about and be involved with cultural and religious groups that are important to me
* to be provided with the best possible education and training
* to be able to develop life skills and grow up to become the best person I can
	+ help in preparing myself to leave care and support after I leave care.

The every child every chance reforms provide professionals working within the sector with more effective processes to:

* listen to what children and young people want and need
* enable earlier intervention
* reduce child abuse and neglect
* provide better support to Aboriginal children, young people and your families
* work together in cooperation with other providers of children, young people and family services.

### Useful resources

* Carers Recognition Act 2012, check the website.
* Charter for children in out-of-home care - Questions and answers (PDF).
* Charter for children in out-of-home care - Your rights flyer (PDF).
* Program requirements for home-based care in Victoria, check the website.
* [Victorian charter](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/] supporting people in care relationships at
	+ **Information sheet 5: Case planning, case management, roles and responsibilities**.

# 2. Foster care

## Foster care

Families come in all shapes and sizes and so do foster care households. Foster care enables all types of families to provide care and security to vulnerable children and young people who cannot live at home.

In most cases, when a child or young person first comes into foster care, the aim is to support the parents to have their child or young person return to their care, as soon as it is safely possible. As a foster carer, you play a key role to support reunification, noting most children and young people return home to their parents within six months.

You play an invaluable role in caring for vulnerable children and young people, providing them with safety, security, stability and opportunities for building positive relationships, which are very important to healing.

[Pull out text] ‘Foster carers not only provide a safe home for a child, they provide an opportunity for a better future for that child.’ Natasha, child protection worker, six years

[Pull out text] ‘Foster carers are amazing! They open up their homes and are so accepting. Willing to take the risk of the unknown journey.’ Maya, agency case worker, six+ years

## Types of foster care

Foster carers may care for children and young people for a night, a weekend or over a longer period of time. Some carers may choose to provide only one type of care, while others may provide a combination of care arrangements.

Definitions of the different types of foster care are outlined below. Definitions can vary depending on your agency.

|  |  |
| --- | --- |
| Respite foster care | Short-term and/or intermittent care provided for children and young people living with full-time foster and kinship carers or parents, often for one or two weekends a month, or for a week during school holidays, or as required. |
| Emergency foster care | For children and young people who require immediate care due to concerns for their safety. Because these arrangements are urgent, there is usually very little notice before a child or young person is placed with the carer. They often occur in the night. |
| Short-term foster care | For children and young people who require care ranging from overnight up to about six months. Children and young people requiring short-term care are often reunified with their parents, or may be placed with extended family at the end of the foster care arrangement. |
| Long-term foster care | Care arranged when a child or young person cannot return home for some time. Long-term foster care may cease when a permanent care arrangement is organised, or when the child or young person reaches adulthood and becomes independent. |
| Therapeutic foster care | Therapeutic foster carers are provided with specialist training, support and financial assistance to care for children and young people who need therapeutic responses to their specific needs. Therapeutic foster carers work closely with a team of professionals who provide tailored behaviour support strategies. |

While the majority of children and young people who come into your care will be on Children’s Court orders, some children and young people are placed in temporary care with the consent of their parent. This is called voluntary care. Some parents, due to illness or unforeseen circumstances, make these arrangements directly with the agency. At other times, child protection may agree to a voluntary placement in which a written care agreement is negotiated between a parent or young person who is over 16 years, the agency and the foster carer.

For other types of out-of-home care, **see Information sheet 1: Out-of-home care in Victoria**.

[Pull out text] ‘Get on the phone and ask. No question is a silly one.’ Robyn and Maya, agency case workers, 20+ years combined

## Children and young people in your care

Children and young people flourish and achieve their potential in an environment that provides safety, security, consistency and love.

The children and young people coming into your family have typically experienced abuse, neglect or other traumatic experiences. These have harmful effects for children and young people, and can often impact on their behaviour and emotions, and on relationships with others. Exposure to adverse and traumatic experiences, such as family violence, physical abuse, sexual abuse, emotional abuse or neglect, also impact on the way children and young people perceive themselves and make sense of the world.

Children and young people coming into out-of- home care have usually experienced significant disruption and loss in their lives. Often key relationships and connections have been disrupted, and children and young people may have experienced disconnections from their family members, school and community. Loss, grief, shame and guilt can be very common emotions for them to experience.

For Aboriginal children and young people coming into your care, an important consideration is the impact of intergenerational trauma, as a result of poor past government welfare practices that saw the forced removal of children and young people and long-term disconnection from their families, communities, country and culture.

The experience of entering foster care itself is a difficult one for most children and young people. It is important to be understanding of the complex set of feelings a child or young person may have when being placed with you and your family.

Having a routine and receiving consistent and nurturing responses are important for children and young people. It allows them to start challenging their beliefs that adults cannot be trusted, that they need to look after themselves or they are not worthy of love and care, and they can learn to trust that you will care for them.

## Support from your agency

Your agency will allocate you a case worker who will be your main contact. There will be a team supporting your case worker, who you can also turn to if your case worker is not available. See **Chapter 6. Support for carers***.*

[Pull out text] ‘Take the opportunity to get to know us. Talk to us about issues and help us understand that we are not the only ones going through issues.’ CREATE Young Consultants

# 3. Preparing for a child or young person coming into your care

## Before a child or young person enters your care

It is important to know what to expect when a child or young person comes into your care.

The likely steps that will occur leading up to a child or young person entering your care include:

* Most children and young people in out-of- home care have been removed from their home by child protection and are subject to a Children’s Court order. Child protection and the Children’s Court make decisions about the safety and wellbeing of children and young people, according to the *Children, Youth and Families Act 2005*. Attempts will have been made to keep the child or young person safely with their parents, and where this was not possible, family and friends would have been explored as potential carers.
* When requested by child protection, your agency will consider the suitability of all available carers and contact a carer to discuss a child or young person needing care. This is when you might receive a call from your agency.
* Your agency will give you as much information as possible about the child or young person, so you can make an informed decision. However, there are times when there is very little information to share about a child or young person, due to their situation.
* It is important to ask questions and consider how caring for this child or young person might affect you and your family, so you can decide whether providing this care will be a good fit at this time in your life. This helps to make sure that the experience is positive for everyone involved. For a detailed guide of questions to ask, see Information sheet 2: Accepting a child or young person into your care – questions to ask.
* If you agree to care for a particular child or young person, your agency will let the department know you are available, and they will consider what the best placement option is for the child or young person. This does not always mean a child or young person will come into your care, as an alternative suitable arrangement may have been identified. Not all discussions with you will result in a child or young person being placed with you.
	+ If the child or young person is to be placed with you, your agency will advise you that this is happening and talk to you about the arrangements.

## Informing you about the child or young person

Having as much relevant information as possible about the child or young person is helpful, but it is not always possible to provide detailed information when they first arrive at your home.

Some information may be known when a child or young person arrives at your home, but other information is gathered over time and should be provided to you if the child or young person is to remain in your care, including:

* full name (including nicknames)
* date of birth
* parent and family member (including siblings) names and relevant details
* health issues or conditions, including allergies and associated management plans
* school or early childhood services details
* Aboriginality or cultural background
* routines, likes and dislikes, including favourite foods
* bedtime and sleeping habits
	+ behaviours and triggers

[Pull out text] ‘For me, information = empowerment = better outcomes for all involved.’ Rachel, foster carer, eight years

* what helps them feel safe
* current contact arrangements with their biological family
* when the next contact with family is and what the arrangements are
* conditions on the court order that may be relevant to you in caring for the child or young person
* their important milestones and achievements
* their Medicare number or photo of the card
* their Health Care Card and Customer Reference Number (CRN)
	+ members of their care team and upcoming meeting dates (if known).

The Looking After Children framework referred to in *Chapter 5. Planning, decision making* *and case management for children and young people in your care* will provide some of this information. You should be given an Essential Information Record within 14 days of the child or young person coming into your home. Ask your agency case worker for a copy if it hasn’t been provided.

## Being prepared

### Urgent situations of children and young people coming into your care

When a child or young person needs safety and protection urgently, they may not have their belongings and may arrive at your home with only the clothes they are wearing. You will receive a ‘new placement loading’ in your carer allowance, if you are receiving Level 1 care allowance, to support the costs associated with providing for their immediate needs. See **Chapter 6. Support for carers**.

While every child or young person needing care is different, it helps to be as prepared as possible. They may come into your care following an emergency and require basic items for the first night. Basic items such as a tooth brush, a night light, some toys and books or an oversized t-shirt to wear for pyjamas might be helpful to have on hand.

If you do not have the necessary items to support the child or young person’s immediate needs, talk to your agency case worker at the time of referral to seek their support.

#### **Why it matters that carers are well prepared for a placement**

* A placement needs to be stable for the child, and warm and welcoming. It needs to be a fresh start and it needs to be positive.
* If carers are well prepared, it not only supports the child or young person,
* it also supports the carer.
	+ The more prepared the carer is, the easier it is for the child or young person to settle in.

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#### Helpful tips for carers, children or young people preparing for a placement

* Carers can have a package prepared for kids (made in advance) with things like soap, a diary, pen, teddy, change of clothes, even a gift voucher, so they can go shopping and choose some things they would like to have. It could be waiting on their bed when they arrive.
* Carers need to know the importance of and struggles kids can have with secrets, trust issues and honesty. First impressions make a huge impact.
* Carers need to know how a child or young person reacts to situations and what their triggers are.
* Carers need to know about the different avenues to get information and who or how to share information with.
* When a child or young person is going into a placement, they need information too. They need to know the name of the carer, who is in the house, if there are dogs or pets, when it is dark if there is a light left on.
	+ If possible, it is good to have a coffee date before the placement begins or at least a phone call so that they can introduce themselves.

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#### Being prepared for a baby

It is very important that you consider sudden unexpected death in infancy when you take a baby into your home. The term ‘sudden unexpected death in infancy’ is the umbrella term for sudden infant death syndrome (SIDS) and fatal sleep accidents. There are techniques you can use to help keep a baby safe.

#### How to sleep baby safely

* Sleep baby on their back from birth, not on their tummy or side.
* Sleep baby with head and face uncovered.
* Keep baby smoke free.
* Provide a safe sleeping environment night and day.
* Sleep baby in their own safe sleeping place.
	+ Co-sleeping with an infant increases the risk of SIDS and fatal sleep accidents in some circumstances.

For more information visit the website [Safe Sleeping](https://rednose.com.au/section/safe-sleeping) [https://rednose.com.au/section/safe-sleeping]

## Preparing for an Aboriginal child or young person entering your care

There are some other considerations that you will need to be aware of when preparing to welcome an Aboriginal child or young person into your home.

A culturally safe environment will enable and encourage an Aboriginal child or young person to identify with, and be proud of being Aboriginal, because their carer family recognises and values their Aboriginal identity and culture.

Aboriginal people have their own cultural values, beliefs and traditions, which impact on the way they raise their children and see the world, which may be different from yours. As a result, Aboriginal children and young people who are cared for by non-Aboriginal families need to adapt to a new physical and cultural environment, where they may:

* value different things
* behave differently from your family
* have different understandings of social expectations
	+ view the world differently.

Aboriginal children and young people who are proud and strong in their culture are likely to develop a positive self-image and be more resilient. Caring for an Aboriginal child or young person is an opportunity for you to gain more information and skills, so they will thrive. Both of you can share a journey of learning and understanding more about Aboriginal culture and communities. This is an ideal way of making the child or young person and your family feel comfortable and respectful of each other, and get the placement off to a good start.

When you are preparing to care for an Aboriginal child or young person, it is important to reflect on your background, parenting practices, cultural background and values.

### Questions to consider include:

* What is my cultural background? What events do I celebrate, what are important ceremonies to me, and how might these be different for the Aboriginal child or young person in my care? Aboriginal children and young people are likely to celebrate NAIDOC Week in July and Aboriginal and Torres Strait Islander Children’s Day in August.
* What are the cultural differences between my background and that of the child or young person, in terms of values, beliefs and communication? Do my children spend lots of time with members of our extended family, as this is something that is common for many Aboriginal children and young people?
* How will I communicate to make sure that I’m culturally sensitive and respectful? Be aware that Aboriginal children and young people do not view themselves as a cultural minority. They are proud to be the First Peoples of this nation.
* What is my understanding of Aboriginal culture and how can I increase my knowledge? Am I open to attending Aboriginal community events and learning more through attending Aboriginal cultural training about my local community, and the child or young person’s traditional community?
* How can I create a culturally safe environment for the child or young person? Having Aboriginal artwork, books and toys will help the child or young person feel comfortable when they arrive in your home. Make sure you respectfully talk about Aboriginal people and acknowledge cultural events.
	+ What can I do to ensure the child or young person remains connected to their culture? Can they attend Aboriginal art and sporting events? How can I actively work with the child or young person to implement their cultural plan?

The Aboriginal community is very welcoming and inclusive, and participation in community events can be a wonderful experience for the whole family.

### Supporting an Aboriginal child or young person’s cultural needs

It is important that you provide care that supports the child or young person’s development and wellbeing, including their physical, social, emotional, cognitive, cultural and spiritual wellbeing. See Chapter 8.Caring for Aboriginal children and young people.

Some of the things that you can do to make sure you are able to meet the child or young person’s cultural needs and wellbeing include:

* Attend cultural awareness training.
* Ask what cultural planning has occurred for the child or young person to remain involved in cultural activities and events in the local community, and plan upcoming activities.
* Take an interest in the child or young person and find out which language group the child or young person is from, who their mob is and where their traditional country and lands are. It is important to talk to them about this.
* Display objects around your home that Aboriginal people place spiritual and cultural value on. Some examples include photos, posters or pictures of Aboriginal people and heroes (such as leaders and sportspeople), traditional and contemporary art and artefacts by local artists (or the child or young person’s mob), statements of acknowledgement of the traditional owners of the land, the Aboriginal flag, Aboriginal children’s books, music and videos.
* Organise for your agency to give you an Aboriginal Life Book so that you and the child or young person can add events, experiences and document memories about cultural activities attended, family events and photos, drawings, awards and keepsakes.
* Be aware of significant dates of cultural events and activities that occur in your local Aboriginal community, talk about this at home, and where possible, attend with your family.
	+ Involve yourself and the child or young person in your local Aboriginal community controlled organisation (for health services, activities, homework club, playgroup and connecting to community).

### Cultural training

You should make every effort to participate in cultural training before caring for an Aboriginal child or young person, or as soon as possible after taking them into your care. Cultural training is important, because it will inform you about aspects of Aboriginal culture, including the kinship system, child-rearing practices, and the impact of past discriminatory policies on Aboriginal families, and in particular, on the child or young person you are caring for. It will also provide you with useful contacts and resources, and connect you with other carers of Aboriginal children and young people.

Training provides a safe space in which you can seek advice about any questions you have about culture, Aboriginal people, and caring for the child or young person. The training will also include information that can help you create a culturally safe home and environment.

### Useful resources

* Cultural training for carers through your agency or local Aboriginal community controlled organisations.
* **Information sheet 2: Accepting a child or young person into your care – questions to ask.**
* [Magabala Books](https://www.magabala.com/) [https://www.magabala.com/] has a great range of Aboriginal books, including many for children and young people
* Reconciliation Victoria has a range of resources and they support local councils to develop
* [Reconciliation Action Plans](https://www.reconciliation.org.au/) [https://www.reconciliation.org.au/]
* [The Koorie Heritage Trust](http://koorieheritagetrust.com.au/) [http://koorieheritagetrust.com.au/] has a gallery, bookshop and gift shop, and they provide cultural education in Melbourne.
* [Victorian Aboriginal Child Care Agency (VACCA)](http://koorieheritagetrust.com.au/) [http://koorieheritagetrust.com.au/] have a range of resources, including the Caring for an Aboriginal child in out of home care resource, a VACCA Koorie teddy bear, diary and Koorie learning posters, available for purchase
	+ [Yarn Strong Sista](http://www.yarnstrongsista.com/) [http://www.yarnstrongsista.com/] has a good range of early childhood toys, puzzles and books

# 4. Your role in caring for a child or young person

## A nurturing home

The role of the foster carer is to provide a safe and nurturing environment for children or young people. You have the opportunity to provide a home that provides a vulnerable child or young person an experience of consistency, care and safety that can make a significant difference in their lives.

Every home is different, and children and young people can be overwhelmed if the routines in your home are vastly different to what they were used to. All homes work differently and have certain rules, routines, values and behaviours that suit the family, and you need to help a child or young person navigate these.

They may include:

* taking shoes off at the front door
* getting lunch boxes out of schoolbags
* hanging things on bedroom walls
* doing homework before or after dinner
* picking up after themselves
	+ keeping bedrooms tidy.

Children and young people also need to feel heard as they are an important member of your family. Listening to the child or young person helps them feel connected. Feeling heard helps a child or young person begin to take ownership over their life, empowering them to build self-confidence and self-esteem.

[Pull out text] ‘The carers can have a cake to welcome the child, or a nice breakfast on their first morning. A good conversation starter is ‘What do you like eating?’ Carers should learn what the child or young person likes. This is a good and simple way to start building a connection with the child. If the child likes the film *Frozen*, they could have a picture of Olaf in their room’ CREATE Young Consultants

Valuing Aboriginal culture and identity is important for Aboriginal children and young people to feel welcome and culturally safe in your home. It is important that you provide a culturally safe environment for Aboriginal children and young people.

(Caring for Aboriginal and Torres Strait Islander children in out-of-home care – see Useful resources)

[Pull out text] ‘To me, fostering means providing a safe and nurturing environment.’ Melissa, foster carer, seven years

## Providing day-to-day care

As the primary carer, you are responsible for assisting a child or young person to settle into your home and to provide a child or young person’s day-to-day care, which involves:

* letting them know what to call you and the rest of your family
* making sure they understand daily routines to reduce any anxiety – such as when meal times are, when TV can be watched, when they can use the computer or phone, if they are meant to make their bed
* helping them to get ready for childcare, kindergarten or school
* letting the school know if there is anything they need to be aware of, and responding to calls from childcare, kindergarten or school if there are issues
* working out what they like to do and encouraging activities
* encouraging school attendance, providing positive reinforcement and support for them in their schooling, and supporting them to pursue good educational outcomes
* exploring opportunities within school to enhance and support their educational experience, and exploring options for post-school education, including higher education
* getting them to and from local childcare or school, or supporting them in using public transport when they are old enough and competent
* supporting them through any change in routine or plans
* respecting children and young people’s culture
* supporting children and young people to participate in cultural traditions and practices
* supporting the children and young people to attend community and cultural activities
* setting clear boundaries so that they know what is expected in relation to behaviour, and learn that these boundaries are there to provide them with safety and stability
* introducing them to your friends and the children of your friends, and helping them interact with them
* preparing and sharing meals together
* helping them settle for bed, being aware that night time is often difficult, especially in a new home, and comforting them through nightmares
* supporting arranged contact with their family
* helping a young person to work out what they want to do when they are older, building their aspirations and helping them develop a positive self-image
* helping them learn how to speak up and get involved in their lives
	+ teaching them independent living skills when they are ready – such as making a sandwich, doing dishes, cooking, making their bed and budgeting.

The list goes on and as you get to know the child or young person in your care, you will be able to add more ideas to fit their needs, likes and dislikes.

The agency and the care team will support you to care for the child or young person.

[Pull out text] ‘I want you to show me that my views are being considered.’

‘We are not just a client or human, we are a family member.’

‘It is a mutual understanding, if I listen to you, you will listen to me – respect goes both ways.’

‘If a child or young person has a voice, it makes them feel that their opinion is respected and it will contribute to something.’

‘Respect is earned and we want carers to look at us and treat us like we are like any other family member.’

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[Pull out text] ‘It gives us a reminder of the relationships we formed in care – we can keep it forever’. CREATE Young Consultants

### Life story work – collecting memories and milestones

Another great way to support the child or young person is through life story work. Record the details about the child or young person’s life, culture and development in a portable format, which can be a book, digital recording or video that can go with them if they move from your home. You can also keep their school reports and birth certificate in this collection.

Use words, pictures and photos made by them to create a book or start a video.

The collection of memories needs to be age appropriate, culturally sensitive and engaging. It needs to be led by the child or young person in an engaging, fun and inclusive way.

Ask the agency for help creating the life story work if you need it. Your agency is also required to keep a copy of this information to make sure the child or young person has the opportunity to obtain it in the future.

Take care when doing this with the child or young person, as it may bring up experiences that are very difficult for them. This work is often undertaken by trained professionals, so talk to your agency if you feel the child or young person in your care would benefit from specialised support.

Life story work can include many different aspects of the child or young person’s life, and it can be very helpful in keeping them connected to their culture. Information you can help them to collect include:

* the place their biological parents and family come from and what it is like
* their culture or religion
* language(s) they speak
* holidays and special events associated with their culture or religion
	+ foods and dress associated with their culture or religion.

A Life Book for an Aboriginal child or young person should also includes:

* who are the child’s family? – including family trees and photos
* where is the child’s country? – traditional country and language group information
* what is the child’s totem/moiety/clan group?
* special events – such as visits to family, and participation in community events and cultural activities
* visits and information about traditional country
* collections of pictures and stories about
* Aboriginal role models
	+ information about the child or young person’s culture and practices needs to be embedded throughout the book.

[Pull out text] ‘Life story work I have seen included using a memory box with templates, photo frames, stickers, pencils and a USB stick. The kids loved the box as it was theirs, no matter where they went and they got to draw all over the box to make it theirs.’ Hayley, agency case worker, 20+ years

### Useful resources

* [Aboriginal Life Books](http://www.vacca.org/product/life-books/) [http://www.vacca.org/product/life-books/]
* [Caring for Aboriginal and Torres Strait Islander children](http://www.vacca.org/product/caring-for-aboriginal-and-torres-strait-islander-children-in-out-of-home-care/) [http://www.vacca.org/product/caring-for-aboriginal-and-torres-strait-islander-children-in-out-of-home-care/ ] in out-of-home care
* [CREATE Foundation](http://create.org.au/) [http://create.org.au/] – providing programs, services and resources for children and young people in out-of-home care
* [Life story work](http://www.childhoodinstitute.org.au/RichardRose) [http://www.childhoodinstitute.org.au/RichardRose] – see the work of Richard Rose, [Director of Child Trauma Intervention Services Ltd](http://www.childtraumaintervention.com/page/33/therapeutic-life-story-work.htm) [http://www.childtraumaintervention.com/page/33/therapeutic-life-story-work.htm]
	+ [Raising Children Network](http://raisingchildren.net.au/children_with_disability/children_with_disability.html) [http://raisingchildren.net.au/] – which covers a range of issues from nutrition, behaviours, developmental milestones, play and learning for children aged 0 to 15 years

[Pull out text] ‘Listen to the child or young person and what they want.’ CREATE Young Consultants

## Making decisions for the child or young person

Who can make decisions and how decisions are made about the child or young person in your care is determined by the *Children, Youth and Families Act 2005*.

### Day-to-day decisions

As the child or young person’s carer, you make decisions every day about the child or young person in your care, such as the clothes they wear, their routine and their bedtime. Carers have both the right and the responsibility to make these day-to-day decisions in the child’s or young person’s best interests. It is important that you consider the child’s or young person’s preferences and culture when making these decisions.

Although you do not require authorisation to make day-to-day decisions, the child or young person’s care team are there to support you in these decisions if required – see **Chapter 5. Planning, decision making and case management for a child or young person in your care**and **Information sheet 5: Case planning, case management, roles and responsibilities.**

Day-to-day decisions could include:

* school drop offs and pickups: you can make a decision about whether the child or young person in your care is dropped off or picked up by someone in your community, considering the risks in the same way any parent would for their own children
* babysitting: babysitting is considered occasional child minding and is usually for a period of hours at a time. Babysitters are not formally assessed and approved carers, therefore, they are not eligible for a carer allowance. You can make decisions about the frequency and suitability of the babysitting arrangements and discuss any concerns you have with your agency
	+ pocket money: the care allowance is designed to contribute to the day-to-day costs of caring, including pocket money. Pocket money can help children and young people to learn about the value of money and how to budget. It can also give them a sense of independence as they decide how to spend it.

### Authorisation of a carer to make short-term and long-term decisions

In addition to making day-to-day decisions, you can be authorised by the child protection case planner to make other decisions about specific issues for the child or young person.

The types of decisions you can be authorised to make are determined by:

* the type of protection order in place
* the child or young person’s case plan
	+ the Care and Placement Plan (Looking After Children framework).

The case planner may, with recommendations from your agency, and the child or young person’s care team, authorise you to make specific decisions about a particular child or young person that are in the best interests of that child or young person. A separate authorisation is required for each child or young person, and a new authorisation is required if they move or a new child protection order is made.

Authorisation may occur as part of the initial case plan, or at any point in the case planning cycle. You will receive a copy of the authorisation document signed by the child protection case planner. This is called an instrument of authorisation, and specifies the decisions and timeframes you are given authority to make decisions on. You will also receive an information sheet detailing carer authorisation processes (see **Useful information** for the link).

An authorisation remains in place while the child or young person lives with you for the duration of the protection order, unless the authorisation is revoked by the child protection case planner. You and anyone with a copy of the authorisation (for example, childcare or school) will be advised in writing or each occasion the authorisation is revoked.

If you are unsure whether you have the authority to make a specific decision, clarify this with your agency case worker.

[Pull out text] ‘Foster carers may provide a home for a child for just a moment in their life, but will be forever remembered for the positive impact it had on them’ Karyn, child protection worker, 16 years

#### Short-term decisions requiring authorisation

You will need authorisation to make short-term decisions, regardless of the type of order the child or young person is on.

Where you have a child or young person in your care on an interim accommodation or a family reunification order, parents are to be involved in decisions that affect their child as far as possible.

Short-term decisions can include:

* routine medical (including immunisation) and dental care
* treatment of a chronic medical condition with an established treatment plan
* school activities, excursions and work experience
* school camps within Victoria
* activities – sports, cultural and social clubs within Victoria
* social events and overnight stays within Victoria
* haircuts to maintain current style in a healthy condition
	+ taking the child or young person interstate for appointments and to access services (for carers close to interstate borders).

#### Long-term decisions requiring carer authorisation

Authorisation for you to make long-term decisions will not be made when the child or young person is on an interim accommodation or family reunification order, unless in a specific situation where the court orders it or the department has legal authority.

When caring for a child or young person where the Secretary has parental responsibility to the exclusion of all others for the child or young person (care by Secretary and long-term care orders), you may be authorised by child protection to make certain decisions of a long-term nature. These authorisations are most likely to be appropriate where a child or young person is in long-term care and living with an intended long-term or permanent carer. An ongoing positive connection to family is vitally important for a child’s identity, social and emotional development. If it has been determined that a child or young person cannot be reunified and they are subject to a care by Secretary or long-term care order, parents are still encouraged to be involved in decisions about the child or young person’s life.

Long-term decisions may include:

* haircuts (more than maintaining current style)
* approving the young person’s Year aa and 12 subject choices
* enrolling a child or young person in a school
	+ a change in education provider (such as moving schools)

[Pull out text] ‘For every bump along the way comes twice the reward.’ Melissa, foster carer, seven years

### Examples of what to consider when authorised to make a decision for a child or young person in your care

#### Overnight stays away from your home

All children and young people should have opportunities to participate in normal and acceptable, age-appropriate activities, such as an overnight stay at a friend’s home. You are expected to act as a responsible parent would when making decisions about where the child or young person in your care can go, or where they can be left without your direct supervision.

When you make a decision, you should consider the child or young person’s age and developmental stage. In general, you can decide if a child (over four years) or young person in your care can stay overnight with a friend, without the need for police checks on the adults in the household where they are to stay. See the overnight stays policy in the child protection practice manual for further information, instruction and advice.

#### Interstate travel

The department must approve any interstate travel of a child or young person who is subject to a protection order (other than a permanent care order). Travel will not be approved for children or young people on interim accommodation orders, unless it is a condition of the order or every party gives consent. However, if you live near an interstate border and travel across the border is part of your daily routine, authorisation for taking a child into another state can be approved when the child is on an interim accommodation order.

For children on protection orders interstate travel for a particular purpose can be specified in a carer authorisation. If you think the need for interstate travel with the child or young person may arise while in your care, discuss this with your agency case worker, so that authorisation can be requested in advance.

Authorisation for other interstate travel may be requested, for example, where you regularly holiday across the border, or where it is known that the school camp for the child or young person’s year level will be interstate.

If you live near an interstate border and travel is part of your daily routine, you may be authorised to take the child into another state as part of your usual routine.

#### School photographs

Consent forms for a school, sporting or community activity may seek agreement for the child or young person’s photograph to be taken and included in a class photo or in a school newsletter, newspaper, or similar.

You may consent to these photographs provided that:

* there is no risk to the child or young person of their location being revealed (if the placement needs to remain undisclosed, consent should not be given)
	+ this will not lead to identification of the child or young person being involved with the Children’s Court. Be mindful that mention of their care arrangement could lead to such identification. See **Privacy and confidentiality**later in this chapter for further detail.

#### High-risk activities and signing consent forms

Before giving your consent for a child or young person to attend a high-risk activity (such as horse riding, rock climbing, abseiling or water skiing), you need to discuss this with their care team or case manager.

If you are authorised to sign consent forms for an activity and the consent form includes an indemnity or immunity clause that is intended to apply if the child or young person is harmed while participating in the activity, there are things you need to carefully consider before signing this form, including:

* the level of risk and the safety arrangements in place
* whether the activity is appropriate for the child or young person
	+ what a responsible parent would do in the circumstances.

If you have any doubts, consult your agency before signing. The department can provide legal advice if necessary.

#### Finance

You are not authorised to make decisions that commit funding by the agency or department. You need to follow existing arrangements for any approval of expenditure beyond the scope of the care allowance.

## Obtaining official documents

### Birth certificate

Child protection can apply for a child or young person’s birth certificate through Births, Deaths and Marriages. Contact your agency if you need their birth certificate, and they will request this from child protection. This can take time, depending on the order the child or young person is on and the associated permission requirements. A copy of the protection order is required, as well as an authorising letter from the person who has parental responsibility for the child or young person: the parent or the Secretary of the department.

### Passport

Passports are arranged by child protection and you need to seek approval from the child protection case planner to take a child or young person on a protection order overseas. If you are intending to take a child or young person who is on a protection order and in your care overseas, you should not make any arrangements for travel or accommodation until you have their passport.

Obtaining the documents required for a passport application can be a lengthy process, as there are requirements for obtaining the written consent of all people with parental responsibility, although the circumstances vary, depending on the type of protection order the child or young person is on.

As part of a passport application, evidence of the child or young person’s parent’s Australian citizenship is required. If this is not available, child protection will need to apply to the Department of Immigration and Border Protection for proof of citizenship, which can take several weeks.

Once the application for a passport is lodged with the Department of Foreign Affairs and Trade, the normal processing time for a passport application is six to eight weeks. The arrangements for the urgent issue of a passport do not apply to children and young people in out-of-home care on child protection orders.

### Confirmation of Aboriginality

Many Aboriginal services now ask for a letter confirming a person’s Aboriginality to access their services. If a child or young person in your care cannot access a service without a confirmation of Aboriginality letter, contact your agency case worker, as there are processes in place with Aboriginal community controlled organisations to apply for one.

A letter of confirmation of Aboriginality acknowledges that an Aboriginal community controlled organisation has confirmed that there is evidence that a person:

* is of Aboriginal descent
* identifies as Aboriginal or Torres Strait Islander
	+ is accepted as Aboriginal or Torres Strait Islander by an Aboriginal or Torres Strait Island community.

If a child or young person does not have this letter, it does not mean they are not Aboriginal.

[Pull out text] ‘Privacy is important as it makes children and young people feel that they can talk with confidence – they feel safe and like they are not being spoken about commonly.’ CREATE Young Consultants

## Cyber safety

The use of the internet by children and young people is a part of their lives. Cyber safety is the safe and responsible use of information and communication technology. There are a range of resources that provide advice on keeping children and young people safe in the world of online and digital technology. This includes information about the consequences of online actions, knowing what to do if things go wrong, and understanding online security. This information can help you guide the children and young people in your care to use technology responsibly.

Check the age restrictions for social networking or games. Some social networking sites are created especially for children under the age of 13, but most mainstream sites like Facebook and Instagram require the user to be 13 or older. You must not approve access to a social media site if the child or young person is younger than the age restriction for a particular site.

It is helpful to stay involved, to monitor the child or young person’s use of technology, and encourage them to think before they put anything online or while making new friends. Set up your own account and learn about privacy settings.

### Sexual predators online

You need to be aware of the potential danger to children and young people in your care of being sexually exploited online. Evidence shows that children and young people in out-of-home care are more vulnerable to sexual predators. Online predators can use common tools to gain trust and interest through sites that are about things that appeal to children and young people, such as modelling, acting, dating and gaming.

Careful monitoring of their internet use can help to keep them safe.

ThinkUKnow is a free, evidence-based cyber safety program that provides accessible cyber safety education to carers and teachers through schools and organisations across Australia. They highlight that young people are quick to take up the latest developments in technology and are often the first to know when something new comes along.

You may wish to talk to the child or young person in your care and see what applications they use to have fun online. You are encouraged to learn more about the ways they are using technology positively, rather than just being concerned about the potential misuse of technology. It’s important to have a balanced view of the role technology plays in all our lives. See **Useful resources** for the ThinkUKnow link.

Talk to the child or young person in your care about the need to be safe. Explain why they should never agree to send photos of themselves, stream live videos of themselves, or provide their phone number or street address to people they meet online.

## Privacy and confidentiality

It is an offence under the Children, Youth and Families Act to disclose to another person information gained when deciding to care for/or to assist in caring for a child or young person.

It is also an offence under the Act to publish information that could lead to the identification of a person as being involved with Children’s Court proceedings or on a Children’s Court order. Talk to your agency if you are unsure about an action you want to take.

[Pull out text] ‘It gives us something to reflect on – some things may not have been good, some may have, but you can look back and say look how far I have come.’ CREATE Young Consultants

Information that accompanies photos on social media cannot include identifying references to the child or young person in your care or use terms such as ‘foster carer’ or ‘foster care household’. Check the terms and conditions of the social media platforms you are using, and make sure you set the strongest possible privacy settings to limit viewers of your Facebook page or other electronic media that you use and allow the child or young person in your care to use.

The Charter of Human Rights and Responsibilities Act 2006, the Privacy and Data Protection Act 2014 and the Health Records Act 2001 also contain provisions to protect and promote human rights, privacy and fair and responsible handling of information between government, agencies and individuals.

It is important to consider where you store the personal and health information of the child or young person in your care. If a locked draw is not available, ensure the documents are kept as securely as possible.

### Useful resources

* Authorising carers to make certain decisions – Information for carers of children and young people where the Secretary has sole parental responsibility, check the website.
* [Birth certificates](http://www.bdm.vic.gov.au/utility/about%2Bbdm/about%2Bus/proof%2Bof%2Bidentity/apply%2Bfor%2Bsomeone%2Belses%2Bcertificate/) [http://www.bdm.vic.gov.au/utility/about%2Bbdm/about%2Bus/proof%2Bof%2Bidentity/apply%2Bfor%2Bsomeone%2Belses%2Bcertificate/] – Another person’s child’s birth certificate (under 18 years).
* Publication of identifying details – Child protection manual, check the website..
* Cyber safety advice:
	+ - [ESafety](https://www.esafety.gov.au/esafety-information) [https://www.esafety.gov.au/esafety-information]
		- [Interactive Learning Models](http://www.education.vic.gov.au/about/programs/bullystoppers/Pages/parentmodules.aspx) [http://www.education.vic.gov.au/about/programs/bullystoppers/Pages/parentmodules.aspx]
			* [Australian Federal Police](https://www.afp.gov.au/what-we-do/services/child-protection/online-child-sex-exploitation) [https://www.afp.gov.au/what-we-do/services/child-protection/online-child-sex-exploitation]
* Information sheet 3: Responding to a disclosure of abuse.
* Information sheet 4: Privacy and photographs.
* [Overnight stays](http://www.cpmanual.vic.gov.au/policies-and-procedures/out-home-care/overnight-stays) [http://www.cpmanual.vic.gov.au/policies-and-procedures/out-home-care/overnight-stays] – the Child protection manual
	+ [Passports](http://www.cpmanual.vic.gov.au/policies-and-procedures/out-home-care/passports) [http://www.cpmanual.vic.gov.au/policies-and-procedures/out-home-care/passports] – for more information, see the Child protection manual

[Pull out text] ‘Foster carers are the backbone of our system. Without them, children’s recovery from trauma would be limited.’ Katherine, child protection worker, 5 years

## Acknowledging and responding to different behaviours

As a carer, you will need to navigate the full range of normal child developmental behaviours that can be both rewarding and difficult at times. The constant negotiation over day-to-day activities, such as meals, bed times, going out rules and getting up on time, is a normal part of caring for any child or young person.

Children and young people who are in out-of- home care have experienced abuse, neglect and trauma. The fact that they cannot live with their family can have a significant impact on their psychological and emotional wellbeing. The effects of past experiences often shape their behaviours.

This section discusses responding to the behaviours of children and young people in your care, and some of the impacts of the trauma they may have experienced.

### Impact of trauma on children and young people’s behaviour

Understanding the impact of childhood trauma on behaviour is important when caring for the children and young people who come into your care. Trauma can impact on their body, memory, emotions and relationships, as well as on the way they interact with the world through their behaviour.

The effect of trauma depends on its nature, severity, the support received at the time and the individual involved. You should have an understanding of how trauma impacts on a child or young person’s development, and the way they can internalise (direct towards themselves) or externalise (act out) their behaviour.

The impact of transgenerational trauma is still being felt by Aboriginal children, families and communities today. Due to the impact of the Stolen Generations and past government policies, many Aboriginal people were disconnected from their families and communities. Transgenerational trauma is when the grief and loss from one generation is passed to future generations, and over time, layers of trauma build up, impacting on people and their communities.

Many children and young people in out-of- home care face difficulties with:

* relationship skills – the ability to engage with others, navigate friendships and work as a team, to trust others and resolve conflict
* learning and decision making – solving problems or tackling challenges, attention, concentration, organisation, making safe choices, awareness of danger
* managing emotions – the ability to stay in control, identify feelings and regulate emotions
* social awareness – understanding and empathy
	+ self-awareness – knowing their strengths and limitations.

**A child or young person may seek to re-enforce their belief that the carer will eventually reject them, and engage in behaviour they know will upset them.**

Understanding the impact of trauma can help explain behaviours that the child or young person may have adapted in order to survive. It can also help you to respond to them in a sensitive and responsive way. With consistency, understanding and time, you and the care team can work together to help them heal, become more self-aware and strengthen their self-worth.

Child development trends and trauma tables have been collated to provide a guide to the developmental ages and stages of children and young people, providing indicators of trauma and practical advice for caring for children and young people of different ages. The tables cover the ages 0–12 months, 1–3 years, 5–7 years, 7-9 years, 9–12 years and 12–18 years. They can be found in the [child protection manual](http://www.cpmanual.vic.gov.au/our-approach/) [http://www.cpmanual.vic.gov.au/our-approach/].

Speak to your agency about training and resources that you and the child or young person in your care can access to help support you both in dealing with challenging behaviours.

[Pull out text] ‘Stay calm, call for support and hang in there!’ Rachel, foster carer, eight years

### Forming attachments

The type of care a child or young person receives impacts significantly on the way they respond to the world. Attachment theory has been used as a tool to understand the different ways that caring styles impact on how a child or young person responds to those around them.

Attachment is the deep and enduring emotional bond that connects one person to another across time and distance. Attachment relationships can be characterised as secure, insecure or disorganised. In Aboriginal culture, children and young people form attachments to many people in their community who are responsible for providing care such as aunts, uncles and Elders.

It is through the child or young person’s experience of relationships that they learn how to behave, in order to get their needs met. Sensitive and responsive caring from you builds a secure relationship and promotes physical, behavioural, social and emotional development. This includes a greater capacity for them to be able to regulate their emotions, have positive interactions with others and develop better coping skills.

You should aim to develop a ‘secure attachment’ with the child or young person in your care. Strive to offer comfort when they are distressed, give warm, interested responses to their wish to communicate or play, and provide empathy and acceptance of their point of view.

[Pull out text] ‘If a child has a tendency to be aggressive or lost, it may be because they don’t understand why they were taken away.’ CREATE Young Consultants

### Loss and grief

Children and young people in out-of-home care are highly likely to have experienced loss and grief, which can be overlooked by those around them and masked as difficult, defiant or withdrawn behaviour.

The experiences of loss can occur from:

* the removal from parents, siblings, extended family and community
* the denial of culture
* not growing up in their community or being recognised as part of the community
* severing of significant relationships and friendships
* multiple moves and changes in carers and support staff
	+ the loss of pets, changes in houses, neighbourhoods and schools.

The CREATE Young Consultants emphasised the significance of the grief and loss they have experienced from being unable to live with their families, including that:

* the triggers for grief and loss are different for every child or young person – a lost teddy bear could mean a great deal, the death of a dog could be very significant
	+ grief and loss is on a continuum, and what one child or young person rates as a one in grief, another person could rate as a 10.

#### Helping a child or young person deal with loss and grief

Things that can help a child or young person move through their feelings of loss and grief include:

* reminders that they are not to blame for the loss
* opportunities to remember and talk about their losses
* photos of their family, friends, pets and the associated memories
* additional support and understanding if further grief occurs through missed or cancelled contact with parents, siblings or other family members
* engaging in life story work to help understand their life and build new memories
* learning to understand their triggers
* helping them work out what their emotional outlets are
* connection to their community and culture
* speaking positively about the child or young person’s family, cultural group or community
	+ supporting of family contacts.

[Pull out text] ‘Knowing we are the building block of their courage, their attachments, their success, their future.’ Deborah, foster carer, three years

### Responding to a child or young person’s behaviours

Consistency and nurturing responses are important for children and young people coming into your care, as they benefit from predictability and routine. This will allow them to start the process of believing that adults can be trusted, that they can rely on adults to care for them and that they are worthy of love and care from adults.

As a carer, you are prohibited by section 161B (prohibited actions) of the Children, Youth and Families Act from using physical or punitive discipline on a child or young person who comes into your care. Instead, the aim is to support them to learn acceptable behaviours through strategies, such as:

* role modelling appropriate behaviour
* positive reinforcement such as praise
* increasing skill development
	+ teamwork and inclusive approaches.

A trauma-informed approach to providing care focuses on teaching the child or young person new skills for how best to recover from the impact of trauma. The care team provides an opportunity to explore the child’s behaviours and provide support and approaches to provide trauma-informed care. Your agency case worker will support you in implementing these positive approaches.

Understanding the child or young person’s past experiences and the impact of trauma can help you remain calm and in tune to the child or young person’s underlying pain. The challenge for you is to try and work out what triggers the child or young person’s behaviour and what is going on for them to cause the behaviour. For example, is the child or young person displaying aggressive behaviour as a result of upcoming contact and fear or confusion associated with this or could it be they are displaying learnt behaviours that were previously rewarded with gaining what they wanted or enabling them to feel safe.

For Aboriginal children or young people, culture is a part of healing and a sensitive, trauma- informed approach to caring must include connection to culture.

It is during your regular day-to-day interactions with the child or young person in your care that you can praise their achievements, share moments, and celebrate culture, so they can experience a sense of belonging. This helps them develop a stronger and more positive sense of self, and will have the greatest impact in influencing positive behaviour.

During everyday life, a child or young person can:

* start to put words to their confusing emotions
* learn to trust
* realise they do not necessarily need chaos to function
* develop skills to identify, talk about and regulate feelings
	+ regularly hear about things that they are doing well.

[Pull out text] ’Heartbreaking, roller coaster journey but worth every step, at times the challenges are huge but the rewards cannot be measured.’

### Responding to disclosures of abuse

When a child or young person tells you they have been abused, they may be feeling scared, guilty, ashamed, angry and powerless. You, in turn, may feel a sense of outrage, disgust and sometimes disbelief. However, it is important to remain calm and in control of your feelings, in order to reassure them that something will be done to keep them safe. For more detail, **see Information sheet 3: Responding to a disclosure of abuse.**

### Impact of behaviours on carers

The way a child or young person behaves in your care can be distressing and challenging at times. There may be times when their behaviours lead to injury or damaged property. Your safety and the safety of people around you, including your family and the child or young person in distress is very important. Try to remain calm, even if you do not feel that way on the inside.

Recognising your own responses to challenging behaviours is important, as it will help you work out how best to care for your ongoing emotional and physical wellbeing, as well as the wellbeing of your family.

It is not unusual to have strong reactions to some of the behaviours shown by the child or young person in your care, and they can also trigger memories of your own childhood or unresolved issues. Being open to seeking support is a very positive thing for both of you. You are not doing this alone. There is a care team ready to help and reflect on what you are experiencing – effective teamwork is a powerful and helpful tool.

## When a child or young person leaves your care

Children and young people leave out-of-home care for many different reasons. This could be a planned reunification with their family that occurs over time with increasing stays at home, or a planned move to a kinship or a permanent carer’s home. These are times to celebrate your role as a carer and the difference you made every day to a child or young person in your care.

Endings can also happen unexpectedly through a decision made by the Court, or you may have made a very difficult decision, in consultation with your agency, after extensive attempts to settle a child or young person into your home and this has been unsuccessful. It could also be an unplanned move due to your needs, or the child or young person’s needs. There are many instances where circumstances do not allow further contact or updates on how the child or young person is going after leaving your care.

These separations can be felt deeply – by you, your family and the child or young person. You have emotionally invested in the child or young person in your care to ensure their safety and wellbeing. They have been a part of your family and you a part of theirs. It is important to talk through the impact of placements ending with your agency case worker, who is there to support you. At these times, it is important to be kind to yourself.

[Pull out text] ‘Carers need to know that it is not personal that the placement broke down, that it is the result of lots of different things, rather than being the child’s fault.’ CREATE Young Consultants

[Pull out text] ‘I don’t always get it right. But I always try to take a deep breath and ask myself ‘what’s the meaning behind the behaviour?’ before I respond. That way I’ve got a better chance of meeting the child’s real need rather than just responding from my own irritation.’ Tori, foster carer, nine years

### Useful resources:

* [Caring for Aboriginal and Torres Strait Islander children](https://www.vacca.org/product/caring-for-aboriginal-and-torres-strait-islander-children-in-out-of-home-care/) [https://www.vacca.org/product/caring-for-aboriginal-and-torres-strait-islander-children-in-out-of-home-care/] in out-of-home care.
* Child developmental trends and trauma table, check the website.
* Best interests case practice – the best interest case practice model provides guidance on how trauma can affect development, and suggests some useful ways of working with children and forming attachments. Go to the [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) website at [https://www.dhhs.vic.gov.au/]
* Child development and trauma – for more information, download the Child development and trauma guide at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) website at [https://www.dhhs.vic.gov.au/]
* [Victorian Aboriginal Health Services](http://www.vahs.org.au/wp-content/uploads/2014/12/KooriParenting_POSTER_Blue-2.pdf) [http://www.vahs.org.au/wp-content/uploads/2014/12/KooriParenting\_POSTER\_Blue-2.pdf].

# 5. Planning, decision making and case management for a child or young person in your care

## Planning for a child or young person

All children and young people in out-of-home care need a coordinated and clear approach to managing their care. As a carer, you will be involved in planning and decision making for the child or young person. See **Chapter 1. Charters for out-of-home care***.*

Case plans are a formal process that occurs following substantiation of abuse or neglect and the case plan document outlines the major decisions about the child or young person. The case manager will work with those involved with the child or young person to inform this planning. Care team meetings are helpful to ensure everyone contributes to these planning processes.

In addition to culturally appropriate case plans, each Aboriginal child or young person is required to have a cultural plan which maintains and develops the child or young person’s Aboriginal identity and sets out how an Aboriginal child or young person is to remain connected to their Aboriginal community and culture. The cultural plan is developed at the same time as the case plan and it is the responsibility of child protection and the care team to ensure it is developed and implemented.

The child or young person’s case manager and the care team have responsibility for the practical implementation of the case plan and cultural plan.

[Pull out text] ‘When foster carers, agencies and child protection work hand-in- hand, there is no limit to what can be achieved for our children and young people.’ Katherine, child protection worker, five years

[Pull out text] ‘’Carers see children in a different and important way, this information is invaluable in a setting where key decisions are being made about children.’ Sarah, agency case worker, seven years

The Looking After Children framework offers a set of tools to help with the planning of the child or young person’s day-to-day life, to make sure their needs are met. These tools are the responsibility of the agency, and are often completed in discussion with you and the care team. More information about the Looking After Children framework is outlined later in this chapter.

The case plan, cultural plan and Looking After Children Care and Placement Plan should provide a consistent approach to meeting the child or young person’s needs while they are in care.

## Case plans

A case plan outlines what is required to meet the needs of the child or young person. It covers the significant decisions about their:

* care arrangements
* placement
* contact
* cultural support
* education, employment or child care
* healthcare
* developmental needs
* financial decisions
	+ crisis management.

Children and young people placed in out-of- home care must have a case plan and these are reviewed regularly. See Table 1. Timeframes for planning and review processes.

The child or young person’s case manager is responsible for developing the case plan, which is then endorsed by the child protection case planner. Where appropriate, the child or young person, their parents, you the carer, the agency and relevant professionals have input into developing the case plan with child protection.

The Act states that you should be consulted as part of the decision-making process and given an opportunity to contribute to the process. Your role in the case plan is important, as you have vital information about the child or young person in your care.

The child or young person’s case manager must, according to the Act, provide information to the parents about the child or young person, unless they are over 12 years old and do not consent to this or it is not in the best interest of the child or young person to do so. There are also times when the Court orders against this.

## Family-led decision-making meetings

Families are offered family-led decision making meetings when protective concerns have been substantiated and further intervention is required or the child or young person is on a protective order.

Aboriginal family-led decision-making meetings are a culturally based approach to decision making, and offered specifically for Aboriginal children and young people and occur in the same circumstances as family–led decision-making meetings. Ideally they will occur at substantiation.

For Aboriginal children and young people this meeting will develop the case plan for the child or young person, and help with developing the cultural plan to identify family and to maintain connection to community and family. If the case plan is due for a review, or if there is a significant change in the child or young person’s circumstances that warrant a review of the case plan, a further meeting is offered to the family.

[Pull out text] ‘Foster carers are an integral part of a child’s care team and vital in planning and achieving positive outcomes for vulnerable children.’ Bobby, child protection worker, eight years

The inclusion of foster carers and or the agency case worker in the meeting should be considered on a case-by-case basis and the meeting convener will need to discuss your involvement with the child or young person and their family. However, regardless of whether you attend or not you have an important role in contributing advice or views to the meeting and supporting the child or young person before and after the meeting, including managing any anxieties or concerns they may have about attending and participating at the meeting.

## Case management

Case management is the term used to describe the coordination and delivery of services provided to a child or young person in out-of- home care. The case manager is responsible for ensuring the child or young person’s case plan and cultural plan are implemented. Case management may sit with child protection or be contracted to an agency.

Regardless of who is the case manager, decision making about changes to the case plan remains the responsibility of the child protection case planner. There are times when a child or young person may not have an allocated child protection worker or case manager, and queries will be managed by the child protection team manager.

Your agency case worker will remain your primary support while you are a carer.

**See Information sheet 5: Case planning, case management, roles and responsibilities for a table of roles and responsibilities.**

## Care teams

When a child or young person is placed in your care, there are a number of people who share responsibility for doing the things parents would generally do alongside you. This group of people is called the care team.

Care teams aim to strengthen communication between the important people in the child or young person’s life, and members of the care team work together to achieve the best outcomes for the child or young person.

The care team is led by your agency, who will organise meetings. The care team develops the Care and Placement Plan (a tool in the Looking After Children framework) and contributes to the case planning process.

Care team meetings provide the opportunity for all involved to talk about the progress and achievements of the child or young person. Some care teams meet formally, while others work well with regular discussions and conversations as frequently as required. If appropriate, the child (if they are old enough) or young person, and their parents will be invited to attend. Involving the child or young person in decisions about their lives empowers them to build self-confidence and self-esteem, and enables them to have a voice and be heard.

Although care teams do not keep minutes, the Looking After Children framework tools should be used and regularly updated. If you have any questions following a meeting, you can talk to your agency case worker.

[Pull out text] ‘You are the one that holds vital information to help nurture these children’s needs. Stand up, be heard.’ Deborah, foster carer, three years

As a foster carer, your participation in the care team is very important, because it provides an opportunity for your knowledge and experience of caring for the child or young person to be used in planning for a child’s needs.

### Care team members

The members of the care team will vary, depending on the needs of the child or young person and their family.

The care team for the child or young person in your care should always include you and:

* their agency case worker
* their case manager
* their parents (unless there is a good reason not to include them)
	+ any other adults who play a significant role in caring for them, such as an Aboriginal community member or grandparent, a psychologist, teachers or early intervention professionals.

It is important to understand the roles and responsibilities of each care team member. Knowing the right person to ask questions of, improves communication and makes your expectations clear. See Information sheet 5: Case planning, case management, roles and responsibilities.

For further information about the considerations for good practice to promote teamwork in the care team, see **Chapter 1. Charters for out-of-home-care**.

#### Good communication in a care team

Care teams will have:

* clear, open and regular communication between you, the agency and child protection
* regular discussions (face to face or via email/telephone – formal meetings are not automatically required)
* a responsibility to share information with each other, while making sure to protect the privacy of the child or young person
	+ the child or young person involved in decision making, where appropriate, about matters affecting their lives, protecting the privacy of their personal information in that process.

## Looking After Children framework

Looking After Children is the framework used to identify how each child or young person’s needs will be met while they are in out-of-home care. The Looking After Children framework is a recording tool for use by the agency, supported by the care team, to identify the needs of children and young people and to develop plans to meet those needs.

The framework encourages good communication, teamwork, planning and assessment in out-of-home care. It requires the involvement of the care team, including you as the carer and the child or young person. You should expect to have input and receive a final version of each plan and record.

The four key tools in the Looking After Children framework are:

* Essential Information Record
* Care and Placement Plan or Care and Transition Plan (for young people from 15 years of age)
* Assessment and Progress Record, which has six age-related formats
	+ Review of the Care and Placement Plan.

The framework considers the child or young person’s needs and outcomes in seven life areas, which cover the things that parents usually pay attention to, including:

* Health
* emotional and behavioural development
* education
* family and social relationships
* identity
* social presentation
	+ self-care skills.

[Pull out text] ‘Sometimes in child protection it can be easy to focus on the negative, on the risk and forget that our client is a child or young person in their own right with their own wishes and opinions. It is important we find the time to spend with them and get to know them, find out what they like, what they enjoy, speak to those who spend time with them every day like their foster carers. This is the best way to achieve positive outcomes.’ Corinne, child protection worker, 10 years

The framework is initiated as soon as the child or young person enters out-of-home care. The agency gathers the information and provides copies to the care team, including you. All care team members must have a copy of the current care plan, so members are clear about actions, responsibilities and timelines.

## Decision making and the Aboriginal Child-Placement Principle for children and young people

When placing an Aboriginal child or young person in out-of-home care, the Aboriginal Child Placement Principle in the Children, Youth and Families Act must be adhered to.

The Aboriginal Child-Placement Principle includes:

* An Aboriginal agency is to be consulted before a child or young person is placed in out-of-home care
* Wherever possible, the child or young person should be placed within the Aboriginal extended family or relatives, and where this is not possible other extended family or relatives.
* If this is not possible, the child or young person may be placed with an Aboriginal family from the child or young person’s local community.
* An Aboriginal family from another Aboriginal community is then to be explored.
	+ Finally, as a last resort, a non-Aboriginal carer situated as close as possible to the child or young person’s family is to be considered.

The objectives of the principle are to ensure that recognition is given to an Aboriginal child or young person’s right to be raised in their own culture and to the importance and value of family, extended family, kinship networks, culture and community in raising Aboriginal children and young people.

Under the Children, Youth and Families Act, any decisions, including all case plan decisions made must protect and promote a child or young person’s Aboriginal cultural and spiritual identity and development, by maintaining and building the child or young person’s connection to their Aboriginal family and community.

The Act outlines the Aboriginal Decision- Making Principles.

Aboriginal Decision-Making Principles include:

* The child or young person’s Aboriginal community or respected Aboriginal people are to be consulted, where relevant, on any decision or action taken.
	+ A meeting should be held, convened by an Aboriginal leader, and where possible, involve the child or young person, parents, extended family and other members of the Aboriginal community, to support decision making.

If placed with a non-Aboriginal carer, the care team must support the child or young person’s Aboriginal identity and actively facilitate cultural connection through contact with the child or young person’s Aboriginal community.

### Aboriginal child specialist advice and support services

This service provides culturally appropriate advice and consultation in regards to all significant decisions about a child or young person’s involvement with child protection. Child protection is required to consult with Aboriginal Child Specialist Advice and Support Services prior to making any key decisions for Aboriginal children and young people.

### Cultural plans

The cultural plan is developed at the same time as the case plan. It can be prepared through the Aboriginal family-led decision-making process or prepared by the care team with input from an Aboriginal community controlled organisation. It sets out how the child or young person will stay connected to their Aboriginal culture and community. *See Chapter 8. Caring for Aboriginal children and young people* for more detail on cultural plans.

[Pull out text] ‘Carers are experts regarding the child; often facilitating medical appointments and being able to comment on how the child is progressing.’ Jenny, agency case worker, 20+ years

Table 1. Timeframes for planning and review processes

Many decisions need to be made when caring for a child or young person. There are set timeframes for making decisions, planning and reviewing their situation, and there are different tools or plans used in this planning. This table summarises the planning and review processes, and timelines.

| Plan name | What is it? | Who completes it? | Is there a meeting? | Do carers get a copy? | When is it completed? | Timelines |
| --- | --- | --- | --- | --- | --- | --- |
| Case plan | The case plan sets out the permanency objective and Child protection significant decisions made by the child protection case planner concerning the child or young person’s present and future care and wellbeing. The caseplan contains all significant decisions about a child including their care arrangements, contacts, and decisions about their health and education. | Child protection | The case plan is developed with parents, and with input from carers and other services. A family-led decision-making meeting can be utilised to support preparation of the plan | Yes | The case plan starts when child protection concerns have been substantiated | A copy of the case plan must be provided to parents and the child or young person (over 10 years), within 21 days |
| Case plan reviews | A review of the case plan sets out changes to the Child protection case plan or permanency objective, and other significant decisions. | Child protection | It is developed with parents and with input from carers and other services | Yes | All case plans must have a review date of no more than 12 months after it was first made, or they can be reviewed earlier if there is a significant change in the child or young person’s circumstances | Parents and the child or young person must receive a copy of the new case plan within 14 days of preparation, or within eight weeks of a protection order being made or extended |
| Cultural plan | The cultural plan is aligned with the case plan and sets out how an Aboriginal child or young person will maintain and develop their identity and remain connected to their community has a cultural plan, | Child protection must make sure the child or young person has a cultural plan but these are completed by the care team, with input from an Aboriginal community controlled organisation | Aboriginal family-led decision-making meetings can occur where there is agreement | Yes | Cultural plans should be commenced when the child or young person enters out-of-home care | Cultural plans are created and reviewed as part of the case plan process and should be developed and given to the child or young person within eight weeks of starting the plan |
| Essential Information Record(Looking After Children framework) | This holds important current and historical information, such as the child or young person’s Medicare number, health alerts and conditions, school details, family members’ names and details, important milestones and achievements. | Agency (with drafting input from carers) | It contains information gathered through documentation, discussion and care team meetings | Yes | To be completed within the first two weeks of a child or young person coming into care | The record is updated as new information arises and reviewed every six months |
| Care and Placement Plan (Looking After Children framework) | The Care and Placement Plan records the detailed Agency day-to-day arrangements for the care of the child or young person, and identifies show their long and short-term needs will be met. | Agency (with drafting input from carers) | Yes – care team meetings | Yes | To be completed within the first two weeks of a child or young person coming into care | The plan is reviewed in the first year at one month, four months and 10 months after coming into out-of-home care, and then every six months from then on |
| Care and Transition Plan (Looking After Children framework | This replaces the Care and Placement Plan once the young person turns 15 years. It covers their day-to-day care as they grow and mature through their adolescence. It also records how they are being helped to prepare for the future and make a successful transition to adulthood. | Agency (with drafting input from carers) | Yes – care team meetings | Yes | To be completed within the first two weeks of a child or young person coming into care | The plan is reviewed in the first year at one month, four months and 10 months after coming into out-of-home care, and then every six months from then on |
| Assessment and Action Record (Looking After Children framework) | This includes age-related records about the child or young person’s development and follow-up action covering the seven Looking After Children domains of health, emotional and behavioural development, education, family and social relationships, identity, social presentation and self-care skills. | Agency (with drafting input from carers) | Yes – care team meetings | Yes | Completed six months after coming into care | The plan is reviewed at 10 months after coming into out-of-home care, every six months (for a child under five years), and every 12 months (for a child or young person over five years) |

### Useful resources

* [Aboriginal Child Placement Principle](http://www.dhs.vic.gov.au/__data/assets/pdf_file/0006/580614/aboriginal-child-placement-principle-guide-2002.pdf) [http://www.dhs.vic.gov.au/\_\_data/assets/pdf\_file/0006/580614/aboriginal-child-placement-principle-guide-2002.pdf]
* [Cultural plans](http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/aboriginal-children/cultural-support-plans) [http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/aboriginal-children/cultural-support-plans]
* Information sharing – see the Child protection manual, check the website.
* Information sheet 5: Case planning, case management, roles and responsibilities.
* Looking After Children framework, check the website

# 6. Support for carers

## Care allowance and other financial support

There are a range of financial supports available for you, including the care allowance and client support funding. In addition to this, the Victorian Government provides financial and other supports to assist you and the child or young person in your care (see Table 2).

The Commonwealth Government also provides benefits that are available to the broader community. It is the role of the department, agency and care teams to support carers to identify and access the full range of financial supports available, to help vulnerable children and young people thrive and participate fully in their lives and in their community.

The care allowance structure and payment rates that you receive directly from the department are outlined in the Support for home-based carers in Victoria webpage at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/].

### Care allowance

The department provides you with a care allowance that contributes to the day-to-day costs you incur while providing for the child or young person in your care. The care allowance level is assessed by the department and in consultation with your agency, according to the individual needs of each child at the time of placement and is regularly reviewed.

The care allowance is not a ‘payment’ for being a carer and is not considered a source of income for the purposes of annual tax returns, testing eligibility for Commonwealth Government allowances or when applying for loans from financial institutions. Care allowance rates are not affected by Centrelink or Commonwealth child support agency payments, or Youth Allowance payments.

A fact sheet for carers on the care allowance is [available at *www.dhs.vic.gov.au/for-individuals/ children,-families-and-young-people/kinship- foster-and-other-care/support-for-carers-in- victoria*.](http://www.dhs.vic.gov.au/for-individuals/children%2C-families-and-young-people/kinship-foster-and-other-care/support-for-carers-in-victoria)

For questions you may have about department care allowances, contact:

The Care Allowance Helpdesk

Department of Health and Human Services

Phone: 1300 552 319

Fax: 1300 788 062

Email: caregivers.mgt@dhhs.vic.gov.au

### Client support funding

Client support funding is additional funding that carers may be eligible for to help cover costs for extraordinary expenses. This includes the purchase of specific items or services that exceed the day-to-day costs of what the care allowance contributes to or to assist with high costs that place an unreasonable financial burden on the carer.

Where a child has extraordinary needs or needs that are above the day-to-day cost of caring, foster carers should contact their agency to discuss access to client support funding.

For more information on client support funding and support for home-based carers in Victoria visit [*www.dhs.vic.gov.au/carersupport*.](http://www.dhs.vic.gov.au/carersupport)

Table 2. Other supports linked to the care allowance

| Allowance | Purpose  | Description |
| --- | --- | --- |
| New placement allowance | To assist in meeting the immediate or ‘start-up’ costs caring of a child or young person, subject to statutory involvement by the Victorian child protection  | Additional amount paid to carers over the first six months of the placement or care arrangement, of where the carer is receiving **level 1** care allowance rate.Included in fortnightly care allowance |
| Education and medical payment | To assist in meeting the education and health needs of children and young people in out-of-home care | Included in fortnightly care allowance |
| School attendance allowance | To contribute to meeting the educational costs for a child or young person, subject to statutory involvement by the Victorian child protection system | Two age bands for the allowance; 5–11 years and 12–18 yearsQuarterly payment separate to the care allowance and paid to the carer’s nominated bank accountPaid in arrears to primary or full-time carers, based on the number of days a child or young person has been in the care arrangement |
| Dual care allowance for periods of respite care | To support periods of respite care within primary foster care arrangements | Where a child or young person subject to child protection involvement is being cared for by a registered foster carer in a respite arrangement, the respite carer will receive the same care allowance rate as the primary carer for an approved period (dual allowance)Specific approval for dual allowance is required where any respite placement is greater than seven consecutive daysFor respite periods exceeding a total of 28 days in a calendar year, the care allowance will only ordinarily be provided to the respite carer, unless exceptional circumstance apply |
| 18 years and school attending | To provide ongoing support and placement stability to young people completing their secondary education qualification | Carers must maintain a private accommodation arrangement within their home for a young person for whom they were in receipt of a reimbursement on the date of the young person’s 18th birthdayWhere a young person has turned 18 years of age and is continuing to attend school at a senior level (eligibility provisions apply), the care allowance can be extendedThis extension can occur for the calendar year in which the young person turns 18, and for the calendar year beyond which they turn 18, if they are still attending school at a senior level (full time or part time) |

### Flexible funding for permanent care

Flexible funding can be provided to you to help meet the additional needs of a child or young person in your care, beyond those met by the care allowance and other available funding sources at the time a permanent care order is made. The funding is specific to the child or young person. The funds are to promote continuity of quality care, and help address issues that may be a result of abuse or neglect. Funding for new permanent carers is managed by child protection through the permanent care assessment and approved as part of the case plan.

Funding for existing carers is managed by OzChild, in partnership with Permanent Care and Adoptive Families. For more information, contact Permanent Care and Adoptive Families on 03 9020 1833 or by email at info@pcafamilies.org.au.

### Victorian Government Carer Card

The Victorian Government Carer Card gives you free and discounted services, including free public transport on Sundays, two return off- peak rail vouchers for travel anywhere within Victoria, and discounted entry to government venues, such as zoos, museums and various tourist attractions.

#### Commonwealth Government assistance

The Commonwealth Government provides payments and services to carers who are not the parent and who provide full-time care for a child or young person.

* Centrelink provides payments and services that may assist you to provide care to a child or young person, as well as payments to eligible young people and children, such as:
* Child Care Benefit – helps with the costs of approved or registered childcare
* Child Care Rebate – covers 50 per cent of out-of-pocket expenses, in addition to the
* Child Care Benefit
* Jobs, Education and Training Child Care Fee Assistance – can help with childcare if you need to search for a job, work, study or other approved activities
* Family Tax Benefit – helps with the costs of raising a child
	+ Assistance for Isolated Children Scheme – can help carers get children and young people to school when they live in an isolated area, or if the child or young person cannot go to an appropriate state school daily, because they have a disability or special needs.

Some of these payments require an income assessment for eligibility. Even though you may not receive any benefit due to your income, you may still be eligible.

### Useful resources

* Administration of allowances – for queries regarding the administration of department care allowances to carers, contact:

The Care Allowances Helpdesk

Department of Health and Human Services

Phone: 1300 552 319

Fax: 1300 788 062

Email: caregivers.mgt@dhhs.vic.gov.au

* Carer payments – see [Support for home-based carers in Victoria](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* [Flexible funding for existing permanent carers](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/] – services provider guidelines
* [Support from Centrelink](https://www.humanservices.gov.au/customer/subjects/support-non-parent-carers) [https://www.humanservices.gov.au/customer/subjects/support-non-parent-carers] – make an appointment with a social worker to discuss issues
* [Victorian Government Carer Card Program](http://carercard.vic.gov.au/) [http://carercard.vic.gov.au]. Call the Carer Card Information Line on 1800 901 958 or email [carercard@dhhs.vic.gov.au]

## Support from your agency

Your relationship with your agency case worker is important as they provide you with support during challenging times and can provide answers to your questions. The case worker can also represent your views in discussions and decisions about the child or young person if you are not present.

When you start to care for a child or young person, your agency will provide supervision. You and your case worker will decide on the level of supervision and support you need (including supervision at least once a month). The frequency will depend on both your needs and the needs of the child or young person.

You can ask your case worker for a copy of the agency’s supervision policies and procedures.

[Pull out quote] ‘Make the most of supervision and support provided by your agency, which will allow you to understand your own limitations and know that it is okay to seek help and or say you can’t do it.’ Robyn and Maya, agency case workers, 20+ years combined

### Agency supervision policies and procedures

The agency’s supervision policies and procedures should include:

* the assessed level of need of the child or young person, which may vary at different times
* the level of supervision and support required for new carers
* the level of supervision required at the beginning and end of a child or young person’s placement
* arrangements for after-hours support
* supervision and debriefing arrangements if there is a critical incident
	+ an agency contact person (including when the case worker is not available) for advice and support as needed.

[Pull out quote] ‘As a foster carer with two young children, respite plays an important role in allowing us to give our own children some one-to-one family time. We love having kids stay with us, but recognise that sometimes it means our attention is spread out a bit more. When we have respite, it gives us a chance to check in with our children and ensure they are also coping with the changes that fostering brings to a household.’ Jen, foster carer, four years

Each year, you are required to participate in a review with your agency to discuss continuing as a carer. This review will highlight your strengths, learning needs and any issues with your current care arrangement. Your case worker will address any issues with you and is responsible for making sure that issues identified during supervision and reviews are recorded and acted on appropriately, to ensure the ongoing safety, wellbeing and development of the child or young person in your care.

The annual review can help identify significant changes in your circumstances and may also require a change to your accreditation status. If your accreditation status is to change, this decision will be made by the foster care accreditation panel.

## Respite and time out

Everybody needs a break and carers are no different. As a carer you can take a break from caring at any stage.

There are a number of options for a break available to you, which will depend on what suits your family, and the child or young person in your care. Some of the options to discuss with your agency include:

* having time off from caring
* respite care
* childcare
* before or after-school care.

## Looking after yourself

The role of a carer can be very demanding. Being aware of how to manage your stress can improve your wellbeing and may help you in providing care. You are the best person to know what makes you feel emotionally, physically and mentally better, so plan activities to support your health and wellbeing.

There are a range of resources you can access, which may help you identify what would work best for you. **See Information sheet 6: The impact of caring and looking after yourself.**

You could also consider getting support and advice from other carers, your agency and broader support networks, such as the Foster Care Association of Victoria which provides a range of support services to carers.

[Pull out quote] ‘An amazing organisation with great staff, who truly are passionate about their role.’ Rachael, foster carer, four years

## Training

Training is offered by agencies and external providers on a range of topics, and provides an opportunity for you to gain skills and knowledge to support the child or young person in your care.

Training is critical for all carers, and participation in training will support you to care for children and young people with various needs. You are encouraged to take part in the training opportunities available to you, and you will find that this can provide an opportunity to meet with other carers, share ideas and discuss challenges you have faced.

There is a lot of research and practice advice about understanding trauma, and approaches to supporting children and young people with challenging behaviours. Training in this area may be of particular interest for you.

Specific training about caring for Aboriginal children and young people is also available. Cultural awareness training is important for carers because it will inform you about aspects of Aboriginal culture including the kinship system, child rearing practices and the impact of past discriminatory policies on Aboriginal families and the children you are caring for. Training can also provide you with useful contacts and resources and connect you with other carers of Aboriginal children and young people.

This training provides a safe space in which carers can seek advice about culture, Aboriginal people and caring for the child or young person. The training will also include information to assist you with creating a culturally safe home and environment for the child to live in. Talk to your agency about accessing this.

Online training resources are increasingly being made available. Speak with your agency or check the Foster Care Association of Victoria and the department websites for further information on training.

## Foster Care Association of Victoria

The Foster Care Association of Victoria is a non-government peak body supporting and representing Victorian foster families. The association represents carers, working alongside government and non-government agencies and other peak bodies. Membership of the Association is free to all Victorian carers.

The Foster Care Association of Victoria’s mission is to strengthen foster care in Victoria, ensuring that the perspective of the carer is represented. This is done in a number of ways.

### The Carer Information and Support Service

The Carer Information and Support Service at the Foster Care Association of Victoria provides free, confidential and independent advice, information and advocacy to carers, covering all areas of care.

### Celebrating foster care through social media and a newsletter

The association communicates with foster carer members via email, newsletters and social media. This provides you with the opportunity to keep up to date with sector information, share stories and find handy tips on Facebook at [facebook.com/fostercarevictoria](http://www.facebook.com/fostercarevictoria) and [@vicfostercare](https://twitter.com/vicfostercare) on Twitter.

### Influencing and shaping policy

The association has representation on many government and non-government advisory groups, working groups and committees. The purpose of this representation is to ensure the voice of carers is heard. If you would like more information, contact 9416 4292 or visit [www.fcav.org.au.](http://www.fcav.org.au/)

## **Carer Advisory Groups**

There are Carer Advisory Groups in the North, East, South and West divisions of the department. The groups bring together carers, agency management, peak bodies, child protection and other department representatives to improve communication and to foster service improvements in out-of-home care. The groups meet quarterly and membership is for a period of 18 months.

Foster and kinship carers are at the centre of change for some of our most vulnerable children and young people. In order to improve quality outcomes for them, and to allow for better stability in care arrangements, it is critical that carers participate in decision- making and development opportunities.

Information about the outcomes of the groups will be made available throughout the year via the Foster Care Association of Victoria webpage and newsletter. If you have any ideas for the Carer Advisory Group in your division, or if you are interested in participating, please get in touch with the Foster Care Association of Victoria [www.fcav.org.au.](http://www.fcav.org.au/)

### Useful resources

* [Foster Care Association Victoria](https://www.fcav.org.au/) [https://www.fcav.org.au/], or call 9416 4292, or follow on [social media](https://www.facebook.com/fostercarevictoria) [https://www.facebook.com/fostercarevictoria] or [Twitter](https://twitter.com/vicfostercare) [https://twitter.com/vicfostercare]
* [Nikara’s Journey](http://www.vacca.org/home_page_panels/training-and-development/) [http://www.vacca.org/home\_page\_panels/training-and-development/] – training to support carers to care for Aboriginal children in out-of-home care.
* Support for permanent carers and adoptive families – [Permanent Care and Adoptive Families](http://www.pcafamilies.org.au/) [http://www.pcafamilies.org.au/] offers a range of training and support options. Membership is free. For more information, call 9020 1833
* [Tracks to healing](https://www.theactgroup.com.au/) [https://www.theactgroup.com.au/] - training to support carers to care for Aboriginal children.

# 7. Contact with the child or young person’s family

## The importance of contact

A child or young person’s family is a significant part of their life and identity. Not being able to live with or near their family or community can raise complex emotions for them. Having contact with their family can help them develop, make sense of their history and experiences, and feel a sense of belonging.

Wherever possible and when safe to do so, children and young people will return to live with their family. The aim is to support the parents to have them return to their care as soon as is safely possible. You play a key role while this happens, and most will return home to their parents, usually within six months.

The Children, Youth and Families Act ensures that parents are provided information about the child or young person while they are in out- of-home care regardless of whether the plan is for them to return to the parent’s care or not.

A significant number of young people return to their family as young adults, if they were not able to as children, so how you talk and express your views about the child or young person’s family is critical.

A child or young person in care has a complex life story, one that is difficult to describe in the school playground. The more we help them understand it and feel like they can share their story, in a way they are comfortable with, the stronger sense of self they can have.

Contact can be between a child or young person, and a parent, sibling, extended family or other people significant to them. Ask them who is in their family and who they would like to stay in contact with, or to reconnect with. If they identify someone, check with your agency before making any arrangements to contact that person.

[Pull out quote] ‘Contact needs to happen because kids could go home. Parents also need a purpose to fight back, which benefits the child.’ CREATE Young Consultants

[Pull out quote] ’Every child needs to know their beginnings, their heritage, their belonging. It makes them know who they are.’ Deborah, foster carer, three years

Most parents want to see their children and want face-to-face contact. However, other contact may include letters and cards, phone calls, video calls or other types of communication, and may include overnight visits and trips.

Family is central to Aboriginal people and includes parents, grandparents, aunts, uncles, Elders and community members. Family is a source of support, strength, cultural heritage and identity.

A meaningful connection to family and community can provide a good basis for enhancing self-image as they develop a clearer understanding of who they are and where they fit in the Aboriginal community.

## Contact arrangements

The decisions about a child or young person’s contact arrangements are made by the Children’s Court or by the child protection case planner, depending on the protection order. They are referred to in the case plan. A separate schedule or contact plan may be developed, which is given to everyone involved, including you.

Where child protection makes decisions around contact arrangements, they will take into account the child or young person’s age, stage, school, home and other requirements and the child or young person’s views and wishes as far as these can be gained. Where possible, the arrangements should also consider the carer family’s commitments.

The care team makes decisions about providing transport and support for the child or young person before, during and after contact, promoting a positive experience and environment and making arrangements for them to be supervised as required. If supervised contact is required, then the case manager arranges this.

### Approved contacts

Only people who have been approved by child protection may attend contact visits with a child or young person. When people not approved for contact attend a scheduled contact session, the unapproved person should be asked to leave, and if they do not, the contact will need to be terminated. This should be done as soon as possible, while protecting the safety and wellbeing of the child or young person.

If you are supporting a contact and this occurs, let your agency know and they will follow up with child protection to clarify whether that person can see them in future.

## How you can support family contact

**Working together with the family and developing positive relationships can help strengthen the connections the child or young person has with their family.**

By supporting the child or young person’s contact with their family, you can help the family feel proud of them. You can celebrate accomplishments together and let the family know the positive things they have achieved. This may make it easier for the family to support their emotional wellbeing and happiness while they are in your care.

Children and young people in care are often members of different families. By helping them feel comfortable about this, you support them in moving between the families more easily. They need to feel safe and have opportunities to make sense of their experiences.

Showing a positive attitude and interest about Aboriginal culture, family, and community is important when caring for Aboriginal children and young people. It is important to understand the role of community and Elders in passing down cultural knowledge and your role in supporting these connections.

There are times when you may be frustrated in managing a child or young person’s contact with their family. There might be cancellations by both the family or the child or young person’s case manager, and periods when the family do not attend.

[Pull out quote] ’To maintain strong connections and relationships where possible with parents is vital for children to have a sense of identity, security and reassurance. It is essential that we take every opportunity to build, maintain and encourage those relationships.’ Rachel foster carer, eight years

[Pull out quote] ’Carers need to be prepared for whether the contact is good or bad. It is good to have something nice waiting for the child or young person so they know they are coming ‘home’. Make a silent assessment of the child or young person. Don’t ask, ‘How did it go?’ until later on.’ CREATE Young Consultants

[Pull out quote] ’Some children do leave contact feeling upset. It is important to have a back- up plan for this. A child can get upset at their carers. They might want to be with their parents. Be aware and have ways to deal with this. Realise it’s not personal. Know avenues to get support – this is important for both you and the child or young person.’ CREATE Young Consultants

[Pull out quote] ’Children want to be with their biological family if possible, re-unification is very important. We had a lovely little girl live with us for six months while her mum sorted out some challenges, they are now back together, and l believe they are doing really well. That’s the best outcome for a foster carer.’ Jen, foster carer, four years

These are times when the child or young person is reminded that they may not return to their family, and they can experience intense emotions about this. Helping them work through their emotions is an important part of caring for them. Support them to understand that it is normal to miss their family or be angry or sad at things that happen, while encouraging them to see the positives in remaining connected to their family.

You are the one standing beside the child or young person as they go through the many different and confusing emotions when things go well or not so well. It is important to remain neutral or positive about their parents and family, while providing this support. If they hear or sense negativity about their family from those around them, it adds to their confusion. This can be a delicate balance for you, but it will have more positive outcomes for them.

## What to do if contact with family is difficult

Contact arrangements involve many parties, including the child or young person’s parents, siblings and other family members. You may have limited influence over who the child has contact with and under what circumstance this occurs.

You should be told of cancellations or changes to contact arrangements as soon as possible and the contact plan or schedule should outline who is responsible for communicating those changes. If contact arrangements are causing difficulty, contact your agency. A care team meeting about contact arrangements may help strengthen the arrangements and reduce stress.

There are also instances when a child or young person’s behaviours will regress before or after contact. This could result in the child bedwetting, having nightmares or acting out. Talk to your agency case worker about this. Strategies to address this regression can be supported through the care team. If the contact is supervised, the supervisor will need to be aware of the behavioural changes.

### Undisclosed care arrangements

Section 265 of the *Children, Youth and Families Act 2005* states that a child’s parents are entitled to be given details of the child’s whereabouts under an interim accommodation order, unless the Court or a bail justice making the interim accommodation order directs otherwise. The Court or bail justice may only direct that the child’s whereabouts be withheld from the parents if it is determined that this is in the best interests of the child. For example, it is likely to be in the child’s best interests to withhold placement details in order to protect the child from harm, including from exposure to potential conflict between parent and carer, or from a risk of abduction.

Where a child in your care is subject to a protection order placing them in out-of-home care (family reunification order, care by Secretary order, long-term care order), it is a departmental case planning decision whether to disclose placement details to the child’s parent. As with interim accommodation orders, the decision should be based on an assessment of the child’s best interests. The case planning decision should be reviewed whenever there is a significant change of circumstances, and can be reviewed upon request by you, the child’s parent or – if old enough – the child. As the child’s foster carer, your views should be considered by the case planner before they make a decision.

[Pull out quote] ’Supporting a child during, and after, contact with biological family members is important. It helps the child to develop and form an understanding of their world, identity, culture and other important aspects of their life. Working alongside family, the case team, and with a child-centred approach, wonderful outcomes can be achieved.’ Marita foster carer, 20 years

[Pull out quotes] ’Having contact with my siblings gave me a chance to realise who I was. It was a sense of self and identity. Siblings are a big part of who we are.’

‘Blood doesn’t always make family – family is who we make them.’

CREATE Young Consultants

### Useful resources

* Contact with family
* ***Information sheet 5: Case planning, case management, roles and responsibilities.***
* [Moving between families – download the child development and trauma guide at [http://www.dhs.vic.gov.au/\_\_data/assets/pdf\_file/0006/586167/child-development-and-trauma-guide-1\_intro.pdf]](http://www.dhs.vic.gov.au/__data/assets/pdf_file/0006/586167/child-development-and-trauma-guide-1_intro.pdf)
* Supervising contact – if you and the care team have agreed that it is in the best interests of the child or young person, and you have the capacity and want to organise or supervise contact [with the family, refer to the Child protection manualat [http://www.cpmanual.vic.gov.au/sites/default/files/2902.4%20Contact%20-%20%20for%20contact%20supervisors.pdf]](http://www.cpmanual.vic.gov.au/sites/default/files/2902.4%20Contact%20-%20%20for%20contact%20supervisors.pdf)

# 8. Caring for Aboriginal children and young people

Caring for an Aboriginal or Torres Strait Islander (Aboriginal) child or young person can be enriching and enjoyable and can have a profoundly positive impact on you and your family. As First Peoples of Australia, Aboriginal culture is rich with traditions, ceremony, art, stories, music and dance. Additional information about caring for Aboriginal children and young people is also mentioned throughout this handbook.

Raising strong and healthy Aboriginal children and young people in out-of-home care can only be achieved with the active support of carers who acknowledge the importance of culture to their wellbeing, and who make sure that culture is accessible to them. You should not underestimate the significant difference that this will make to their wellbeing and life outcomes.

All Aboriginal children and young people (including children in out-of-home care) have the right to:

* identify as Aboriginal, without fear that they will be ridiculed or seen as less than others
* an education that strengthens their culture and identity
* maintain their connection to their land and country
* maintain strong kinship ties and social obligations
* be taught cultural heritage from respected members of the community, including Elders
	+ receive information in a culturally sensitive, relevant and accessible manner.

[Pull out quote] ‘A non-indigenous carer regularly attends return- to-country trips with the child or young person in her care in order to hear the family stories and continue conversations at home, capturing the memories for the child.’ Robyn, agency case worker, 20+ years

It is the responsibility of child protection to identify if a child or young person is Aboriginal before they come into your care. However, in some instances, you may be the first person who becomes aware that they are Aboriginal.

If you are informed or believe that the child or young person may be Aboriginal, you should advise your agency case worker as soon as possible. They will contact child protection, who will consult with the Aboriginal Child Specialist Advice and Support Service (ACSASS) to ensure the Aboriginal child placement principle is followed, the child or young person’s right to culture is upheld and cultural planning occurs.

As an Aboriginal child or young person’s carer, and with the support of the care team, you will want to develop your cultural awareness, so you can raise them in a culturally safe and supportive home environment. This will help them develop in a positive manner so that they can meet appropriate developmental milestones, similar to most other Aboriginal children who are raised in the Aboriginal community.

You should be aware that there are additional roles and responsibilities in caring for Aboriginal children and young people, which include:

* fostering their Aboriginal identity by ensuring that you prioritise and support activities and relationships that keep them connected to culture and community
* contributing to the development and review of their cultural plan
* understanding the significance of the cultural plan and your responsibilities in implementing the plan
* referring to their parents and family in a manner that is accepting and respectful of their ongoing role in their life, cultural identity and spiritual beliefs
* understanding their family’s rights in decision making, through supporting the actions agreed to in Aboriginal family-led decision-making meetings
* being aware of when significant cultural events are throughout the year, and what activities are occurring in the Aboriginal community for them to participate in
	+ attending ongoing training, reading resource material, accessing information and attending carer gatherings to increase your cultural awareness.

It is important to remember that you are not expected to be an Aboriginal cultural expert, but you do need to be open to exploring and promoting the Aboriginal child or young person’s culture. Always remember that you are not expected to do this on your own.

## Aboriginal culture

Culture defines who we are, how we think, how we communicate, what we value and what is important to us. For Aboriginal people, land, the kinship system and spirituality are the foundations on which culture is built.

For an Aboriginal child or young person to grow into a strong adult, they must be supported to learn about, maintain and grow in their knowledge and connections to land, family, community and culture. If these elements are not present in their life, it will significantly impact on their social, emotional, health, educational and psychological development and wellbeing, throughout their childhood, adolescence and adulthood.

Aboriginal children and young people who are not supported to maintain cultural connections experience poorer life outcomes than those who grow up strong in culture and identity. Past government policies that include forcible removal of Aboriginal people from their traditional lands, the forcible removal of children from their families, and penalties imposed on Aboriginal people practising culture, have denied many Aboriginal people their culture and had significant impacts on life outcomes.

Many of those affected by these policies have grown into adults and raised their own families, while struggling to rebuild their life and place in the Aboriginal community. The denial of culture to Aboriginal children and families has resulted in significant trauma and poorer life outcomes for many. This is why culture and connection must be maintained for Aboriginal children who live in out-of-home care.

Aboriginal children and young people in care are reliant on their carers and workers to understand the importance of culture and to commit to ensuring their connection to culture is a priority.

### Promotion of a child or young person’s cultural identity

As a carer of an Aboriginal child or young person, it is critical for you to show them that you value their culture and recognise that this is an important part of who they are. This will give them positive thoughts about culture and identity, and will foster:

* the development of a positive Aboriginal identity
* resilience
* confidence in themselves
* placement stability
* interest in knowing what Aboriginal nation they belong to and visiting their traditional country, as part of the cultural plan
	+ maintaining positive contact with their extended family.

Aboriginal children and young people who are strong in their culture and see that their culture is valued by others are more likely to develop a positive self-image. They must be supported to continue to develop their cultural identity and maintain ties to culture and community, while they are in care.

Connection to community and culture

Many important aspects of culture are handed down from generation to generation, through storytelling, songs and dance. For these reasons, it is important for Aboriginal children and young people to remain connected to other Aboriginal people and Elders in the community, so they do not miss out on these important teachings.

Through connection to community and culture, children and young people learn who they are, where they fit within their kinship system and community, their history and their cultural practices.

There are many ways you can help to keep Aboriginal children and young people connected with their culture while they are in your care, including:

* recognising and fostering the importance of culture and maintaining their connection to culture
* celebrating and promoting Aboriginal cultures in your home (this can be done by taking an interest in traditional and contemporary culture and people, by identifying and discussing past and present Aboriginal role models, taking an interest in Aboriginal art and displaying this in your home, listening to Aboriginal music (3KND radio station – 1503AM), and watching films made by Aboriginal people and Aboriginal television, such as NITV).
* supporting them to have contact with Aboriginal people, services and events, such as using Aboriginal health services, attending Aboriginal playgroups, early years services, homework clubs or youth groups
* attending Aboriginal celebrations and community events with them, such as NAIDOC events, National Aboriginal Children’s Day and sporting carnivals
* supporting them to visit their land or country, develop relationships with Aboriginal community members and Elders, identify and organise an Aboriginal mentor, and learn about their Aboriginal culture and history
* increasing your awareness and understanding of Aboriginal cultures, in order to be more supportive
* providing them with lots of support and positive reinforcement, to enhance their view of themselves, their culture and identity
* being accepting of their family, background, lifestyle and culture, and encouraging them to discuss their family in a positive, yet realistic way
* helping them to discuss and appreciate differences, and teaching them resilience, including strategies to deal with people who are not accepting of differences
	+ encouraging them to keep an ‘Aboriginal life book’ or special journal to store information or photos about themselves and their family. This can include a story about their dreamtime or spending time with family, photos of family, and participation in cultural events.

It is important that you speak to your agency case worker to receive ongoing support to increase your cultural awareness. Request extra support if you need it, to meet members of the Aboriginal community and attend Aboriginal community events, to support the Aboriginal child or young person in your care.

## Cultural safety

Children and young people’s everyday experience should be one of feeling culturally safe. You will want to explore ways to make sure that your home provides this environment and that you work with the school to promote cultural safety.

Some of the things you can do to make your home culturally safe and to reinforce positive experiences and thoughts for the child or young person in your care include:

* taking an interest in their culture and who their mob is – learn about their Aboriginal history and talk to them about this
	+ supporting them if they experience racism or are exposed to negative comments about their Aboriginality

There are many non-Aboriginal carers who provide warm and culturally safe homes for Aboriginal children and young people, whose own lives have been enriched by this experience. It is about embracing and fostering connection to Aboriginal culture and community in day-to-day activities.

### Useful resources

* [Caring for an Aboriginal child](http://www.vacca.org/shop/) [http://www.vacca.org/shop/] in out of home care resource – developed by VACCA
* Cultural training for carers through your agency or local Aboriginal community controlled organisations.
* Growing up our way: Child rearing practices matrix available through [Secretariat of National Aboriginal and Islander Child Care (SNAICC)](http://www.snaicc.org.au/product/growing-up-our-way-child-rearing-practices-matrix/) [http://www.snaicc.org.au/product/growing-up-our-way-child-rearing-practices-matrix/]
* **Information sheet 7: Caring for Aboriginal children and young people**.
	+ Your local Aboriginal community controlled organisations.

# 9. Caring for children and young people with diverse needs

## Caring for a child or young person with diverse needs

**Diversity can refer to a person’s cultural background, their language, disability, sexuality or gender identity.**

Caring for children and young people with diverse needs can be enriching and bring new experiences to you, as well as to them. It is important that their differences are responded to in a respectful and sensitive way.

Diversity can impact on a child or young person’s sense of identity and worth, development and experience. There are ways to support diversity and to access services if needed, and there are plans and actions that support cultural identity and community connection.

## Caring for children and young people from diverse cultural backgrounds

Everyone has culture. However, while we are born into cultures, we are not born with culture. Culture is something that we learn. It is dynamic and adapts to changing circumstances. Around half of all Victorians are either born overseas or have a parent born overseas, so the child or young person you care for may have a culture or language that is different from yours.

Culture, language and religion go to the heart of a child or young person’s identity and how they connect to others. It shapes their sense of self and belonging, and impacts on their health and wellbeing. It is important that the child or young person in your care feels supported to express and understand their culture, language and religion. Children may have preferences connected to their religion or culture. You may need to seek guidance or advice to understand how to support these practices.

Some aspects of culture include our:

* identity
* ethnicity
* age or generation
* gender
* sexual orientation
* education
* occupation and socioeconomic status
	+ ability and disability.

[Pull out quote] ‘Diversity is important because it keeps the world interesting. It is individualism. Everyone is different and unique and that’s okay. It’s cool to be welcomed and accepted as you are.’ CREATE Young Consultants

### Supporting cultural understanding and expression

There are many ways you can support a child or young person to express and understand their culture, including:

* think about your own culture, aspects that are important to you and how it shapes your identity
* think about attitudes or beliefs you may have about their culture
* improve your understanding of the child or young person’s culture through research or by contacting multicultural services (through your council). Gather relevant information and make it available to them
* celebrate cultural and religious occasions with them
* encourage them to talk about their culture, family, religion and traditions, and what is important to them
* identify significant people in their life who can help them to maintain contact with their culture, language or religion
* speak to Elders in their community
* encourage opportunities for them to speak and read their own language by accessing community groups, books, videos, toys, music or other resources that are related to their culture, language or religion (start with your local library)
* encourage them to participate in activities that involve people from diverse backgrounds and teach them about diversity
* recognise that they might be subject to bullying or discrimination due to their culture and language
	+ support them with different dietary and food preparation practices, such as halal or kosher.

### Useful resources

* [Ethnic Communities Council of Victoria](http://www.eccv.org.au/) [http://www.eccv.org.au/] – is the peak body for ethnic and multicultural organisations in Victoria.
* [FKA Children’s Services](http://fka.org.au/) [http://fka.org.au/] – supports schools and childcare services to support the culture of children.
* Interpreter services – speak with your agency case worker for access to funded interpreters.
* Multicultural services – your local council should have a directory or list of community and multicultural services. Check their website.
	+ FCAV has a list of cultural resources on their website, check their website.

## Children and young people with a disability

Children and young people with a disability have ambitions, skills and talents like other children and young people. They have the same rights to participation, opportunities, development and self-determination in everyday life, as everyone in our society has.

A disability can be a physical, sensory, intellectual, cognitive or psychiatric impairment that affects their ability to undertake everyday activities. A disability can occur at any time in life. Children and young people can be born with a disability or acquire a disability suddenly through an accident or a condition. Some forms of disability are intermittent, while others are temporary or permanent. Some disabilities may be obvious while others are hidden.

People with a disability are more likely to leave school earlier, earn less, have a higher level of unemployment, and are more likely to live in funded accommodation options. They are also more vulnerable to abuse and have higher levels of social isolation.

Ensuring that the disability-related support needs of the child or young person are met is part of meeting their best interests and is a key role of the care team. As the day-to-day carer of the child or young person, you will develop important insights, skills and knowledge about their strengths and needs, including their disability-related needs.

### Disability support

If a child or young person coming into your care has a known disability, your agency case worker will inform you about this, and explain the needs and supports for them. They may be receiving supports and services from the department, or have their disability-related supports needs funded through the National Disability Insurance Scheme.

[Pull out quote] ‘When a child with a disability comes into your care, ask questions, seek information about the disability and support for you and your family– such as equipment for the house, training and respite. I have worked with a child with a disability who has transitioned from residential care to foster care, and when I look back at what the child and the carer family have achieved, I am blown away.’ Hayley, agency case worker, 20 years

[Pull out quote] ‘One carer family took on a little one with no speech and significant developmental delay who had been exposed to extreme neglect. Through their unconditional acceptance, care and love, they have provided a nurturing environment, which has enabled the child to reach their full potential.’ Robyn, agency case worker, 20+ years

If you are concerned that a child or young person in your care may have a disability and it is unclear if they have been assessed, discuss this with your agency case worker. They can contact the department or the National Disability Insurance Scheme to discuss an assessment and potential eligibility for support.

You can provide support for a child or young person with a disability in your care by:

* supporting and advocating for their engagement in education
* understanding the range of services that are available for them, and helping them to access these supports
* ensuring they have access to the aids, equipment and services that they require to achieve their goals and aspirations
* maximising opportunities for them to socialise and participate in community activities
* learning what you can about the particular disability and ways to support them with their communication, physical and social- emotional development
	+ being aware of their additional vulnerability to abuse, and providing appropriate care and protection.

### The National Disability Insurance Scheme (NDIS)

The National Disability Insurance Scheme is a national approach to providing individual support and services for people with a disability, their families and carers to achieve their goals and aspirations. The three-year roll out of the National Disability Insurance Scheme across Victoria commenced on 1 July 2016. This replaces the disability services provided by the Victorian Department of Health and Human Services.

Based on insurance principles, the National Disability Insurance Scheme will provide people with a disability (including psychosocial disability associated with a mental illness), who meet access requirements, the support and services they need to participate in and contribute to the community. Supports are funded in a range of areas, including education, employment, social participation, independence, living arrangements and health and wellbeing.

Each person who meets the access requirements for the National Disability Insurance Scheme receives a plan of supports that are tailored to their individual needs and aimed at helping them achieve their goals. The scheme is implemented by the National Disability Insurance Agency (NDIA). It is anticipated that, over time, the National Disability Insurance Scheme will contribute to greater service access, participation and self-determination by children and adults with disabilities.

People who have received disability support through the Victorian Government move to the National Disability Insurance Scheme at different times, depending on where they live and the type of support they receive. Existing Commonwealth and state-based services and supports will continue until eligible people start their plans with the National Disability Insurance Scheme.

The National Disability Insurance Scheme has also developed a national approach to early intervention. This approach will help identify the type and level of early intervention support that each child needs to achieve their best outcomes. Children under the age of seven with developmental delay or disability will be eligible for early intervention supports through the National Disability Insurance Scheme.

More information and how it works can be found at the website [National Disability Insurance Scheme](https://auth.my.gov.au/las/login?execution=e1s1) [https://auth.my.gov.au/las/login?execution=e1s1]

### Disability support – before the National Disability Insurance Scheme starts in your area

Existing Commonwealth and state-based services and supports will continue to be provided until eligible people start their National Disability Insurance Scheme plans.

The department provides disability supports for children with a disability over six years of age, who are yet to transition to the National Disability Insurance Scheme, and their carers. This can include individual support packages, facility and community-based respite, behaviour intervention services, therapy and case management.

Access to ongoing disability support is through an application process and registration on the Disability Support Register. Applications for ongoing support can be completed by child protection or your agency case worker.

### Useful resources

* [Action on Disability Advocacy Service](http://www.adec.org.au/) [http://www.adec.org.au/] – is an organisation that aims to empower people with disabilities from ethnic backgrounds, their families and carers
* [Association for Children with a Disability](http://acd.org.au/) [http://acd.org.au/] – advocacy and information service for families of children with disability
* [Disability Discrimination Legal Service](http://ddlsaustralia.org/) [http://ddlsaustralia.org/] – a statewide independent community legal centre that provides free legal services in several areas.
* [Disability support](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* [Disability Support Pension](https://www.humanservices.gov.au/customer/services/centrelink/disability-support-pension) [https://www.humanservices.gov.au/customer/services/centrelink/disability-support-pension] – for 16 years and over
* Exploring the Possibilities provides range of post-school options available for young people with a disability, check the website
* **Information sheet 8: Education supports.**
* [National Disability Insurance Scheme (NDIS)](http://www.vic.gov.au/ndis.html) [http://www.vic.gov.au/ndis.html]
* [Raising Children Network](http://raisingchildren.net.au/children_with_disability/children_with_disability.html) [http://raisingchildren.net.au/children\_with\_disability/children\_with\_disability.html] –includes links to a forum for parents of children with a disability and information about supporting siblings, or other children in the family
* [Youth Disability Advocacy Service](http://www.ydas.org.au/) [http://www.ydas.org.au/] – is a Victoria-wide disability advocacy service for young people aged 12 to 25
	+ [Victorian Disability Services Commissioner](http://www.odsc.vic.gov.au/) [http://www.odsc.vic.gov.au/] – provides free, confidential and supportive complaints resolution for people with a disability

[Pull out quote] ‘Carers can normalise the experience for young people by saying thank you for sharing this with me, saying that it is okay to feel this way and being supportive of the experience.’ CREATE Young Consultants

## Same-sex attracted, gender diverse or intersex (SSAGDI) children and young people

### Terminology

In relation to children and young people, the term ‘same-sex attracted, gender diverse and intersex’ (SSAGDI) is often used, as it is recognised that they may be exploring their sexuality, and that a young person’s expression of identity may not be linear. For this reason, SSAGDI is used in this section.

To define some of the terms used:

* LGBTI is used to refer collectively to people who are lesbian, gay, bisexual, transgender or intersex.
* Lesbian, gay and bisexual refers to sexual orientation.
* Transgender relates to gender identity (being male, female or other).
	+ Intersex refers to congenital (from birth) variations in physical, hormonal or chromosomalsex characteristics. Please be aware that some people do not use the term intersex, referring instead to the name of the medical condition relating to their sex characteristic variation.

If you would like more information about the meaning of any of these terms, the National LGBTI Health Alliance provides useful definitions that can be found online at [*http://SSAGDIhealth.org.au/communities/*](http://lgbtihealth.org.au/communities/).

A child or young person’s sexual orientation, gender identity or intersex status is very personal to them, and you may or may not be informed about this. Some may never talk about it, no matter how supportive their environment. It is important not to make assumptions, but where it is known that a young person is SSAGDI, this needs to be respected. It can be challenging for a child or young person to reveal their sexual orientation, gender identity or intersex status in new environments.

Children or young people who are SSAGDI are subject to higher levels of abuse and discrimination than the population as a whole, which puts them at greater risk of having poorer physical and mental health and wellbeing. Some intersex variations can also be associated with physical, emotional or learning difficulties.

[Pull out quote] ‘One carer family fully embraced the child, providing unconditional acceptance, allowing them to fully express themselves. The child instantly started to flourish, became more settled and confident, building trusting relationships, resulting in overall improved self- confidence and self-worth for the child. Maya, agency case worker, six+ years.

A SSAGDI child or young person in your care may have experienced discrimination in the past from friends, family and services. This can also be an issue for them at school. They may anticipate discrimination when meeting new people or starting with new services, and may need additional support for this reason.

Children or young people who are SSAGDI in rural areas can also be isolated, with fewer social and support networks than in metropolitan areas. Confidentiality is particularly important for people who are SSAGDI living in small communities, as they may be at a higher risk of experiencing homophobia, biphobia or transphobia if their confidentiality is breached.

Supportive schools can be crucial for the health and wellbeing of children and young people who are SSAGDI. Many schools have specific initiatives to support SSAGDI students. For instance, ‘queer–straight alliances’ and ‘diversity groups’ have been formed in schools by those who are SSAGDI or by those who support them. Despite this, children and young people who are SSAGDI can face verbal and physical homophobic and transphobic abuse and bullying at school, and difficulties with establishing relationships.

#### Supporting a SSAGDI child or young person

You can provide support for a SSAGDI child or young person in your care by:

* not making assumptions about their gender or sexuality
* responding positively when they discuss or acknowledge their sexual orientation, gender identity or intersex status
* respecting their right to privacy about their SSAGDI orientation, if that is their preference, and ensuring confidentiality of any information shared
* identifying and linking in with SSAGDI support groups, information networks, directories and SSAGDI-inclusive healthcare professionals and agencies, so that they can be referred to appropriate services, including online services, as needed
* reading available information to be better informed
* ensuring they have access to information about sexual health and safety
* understanding that they are at greater risk of suffering from anxiety or poor mental health, and accessing services and supports for them if needed
* being aware of and responding to any particular physical, mental or learning needs relating to their intersex variation
	+ identifying specialist services for referral if appropriate – your agency or doctor may be able to provide additional advice.

There is also a range of support groups for caring for SSAGDI children and young people that provide information and advice that may be helpful to you.

### Discrimination and bullying

Discrimination is treating someone unfairly or unjustly because of their gender, race, culture, background, disability, sexuality, identity or other reason. See **Chapter 10. Education,training and employment**for more information about discrimination and bullying, and how to tackle it.

### Useful resources

* [CREATE](http://create.org.au/resources/lgbtq/) [http://create.org.au/resources/lgbtq/] – LGBTQ young people in care
* Depression and SSAGDI young people – see [beyondblue](https://www.bspg.com.au/dam/bsg/product?client=BEYONDBLUE&prodid=BL/0643&type=file) [https://www.bspg.com.au/dam/bsg/product?client=BEYONDBLUE&prodid=BL/0643&type=file]
* Rainbow Families Council – links to LGBTI support services, check website
* [Rainbow Network](http://www.rainbownetwork.com.au/) [http://www.rainbownetwork.com.au/] – a networking and information-sharing site
* [Resources for LGBTI](http://www.carergateway.gov.au/resources-for-lesbian-gay-bisexual-transgender-intersex-carers) [http://www.carergateway.gov.au/resources-for-lesbian-gay-bisexual-transgender-intersex-carers] for lesbian, gay, bisexual, transgender and intersex carers[.](http://www.carergateway.gov.au/resources-for-lesbian-gay-bisexual-transgender-intersex-carers)
* [Resources for young SSAGDI people](http://www.opendoors.net.au/) [http://www.opendoors.net.au/] – Open Doors Youth Service
* [Safe Schools Coalition Australia](http://www.safeschoolscoalition.org.au/who-we-are) [http://www.safeschoolscoalition.org.au/who-we-are] – this national partnership of organisations and schools works together to make schools a safe environment for SSAGDI young people
* [SSAGDI](https://www.nswtf.org.au/files/library.pdf) [https://www.nswtf.org.au/files/library.pdf] resources for classrooms
* [SSAGDI youth with a drug or alcohol problem](http://www.ysas.org.au/QBLTQI) [http://www.ysas.org.au/QBLTQI] – YSAS has a Queer Youth Withdrawal Program
* [SSAGDI youth](https://minus18.org.au/) [https://minus18.org.au/] – Minus 18 is a youth-led organisation for SSAGDI youth
* [TRANSCEND](http://www.transcendsupport.com.au/) [http://www.transcendsupport.com.au/] – provides advocacy, support and fundraising for young transgender Australians

# 10. Education, training and employment

## The importance of education

Education and employment can make a vital contribution to improving the outcomes and lives of children and young people in out-of-home care, who are more likely to experience disruption in their education.

School, post-school education and work can provide places of safety and stability, where children and young people can connect with staff and friends. In some cases, they can face challenges at school and work, and may need assistance and support.

The circumstances and background of a child or young person in your care may mean that they are likely to need extra assistance to make the most of educational opportunities, experience positive school engagement and improve academic performance. You play an important role in creating a home environment that supports them and their development, and helps them gain the most they can from education and support services.

If you are caring for an Aboriginal child or young person, there are specific Aboriginal education, training and employment services where Aboriginal children and young people may be more comfortable attending.

There are a range of education, learning and employment services and programs, as well as subsidies to support participation for children and young people in out-of-home care.

[Pull out text] ‘I would have liked someone to say, ‘Where will you be in 10 years if you don’t go to school?’ ’ CREATE Young Consultants

## Early education and care

There is strong evidence that intensive and sustained participation in high-quality, early childhood services makesa significant and enduring difference for the most disadvantaged children and young people. There are a range of universal and specialist services that promote early education and care.

### Early Childhood Agreement

The Early Childhood Agreement for Children in Out-of-Home Care aims to increase the participation of young children in out-of-home care in high-quality, early childhood services, with a focus on maternal and child health, and kindergarten services.

### Maternal and child health

The role of maternal and child health is to ensure that young children are on track to reach their developmental milestones. The maternal and child health service offers 10 free key ages-and-stages consultations, where you can talk about your caring experiences, and explore ways to improve the child’s health, growth and development.

Under the Early Childhood Agreement, all children in out-of-home care aged 0–12 months are automatically referred to enhanced maternal and child health services, which provide a more intensive level of support, including assertive outreach and short-term case management.

For more information about maternal and child health services, see Chapter 11. Health.

### Types of early childhood services

There are a range of education and childcare services available for the children in your care, which are described in *Table 3***.**

Children are now required by state and federal legislation to be fully vaccinated, in order to attend childcare and kindergarten and access childcare subsidies.

Table 3. Education and childhood services available

|  |  |
| --- | --- |
| Long day care  | Primarily aimed at 0–6 year olds, long day care is usually based in a centre, typically operates for at least eight hours a day on normal working days, for a minimum of 48 weeks per year, and is staffed by qualified workers. Education and care programs are created around the developmental needs, interests and experiences of each child. |
| Kindergarten | Kindergarten is an educational program delivered by qualified early childhood teachers, who work to engage each child in effective learning, communication and thinking. Kindergarten can be delivered as a sessional program or integrated within a long day care program. The Early Childhood Agreement commits to supporting access for three and four-year-old children in out-of-home care for up to 15 hours per week of funded kindergarten programs in the two years before school. Depending on the service type, applications for either the Early Start Kindergarten Grant for three year olds, or the Kindergarten Fee Subsidy or Early Start Extension Grant for four year olds are made by the service on behalf of carers and families. For Aboriginal children there are subsidies for three and four year old kindergarten and Aboriginal early child care centres. See Useful resources for further information. |
| Family day care | Family day care provides home-based education and care for children delivered within a carer’s home. It includes all-day care, part-time, casual, overnight and outside school-hours care. |
| Outside school- hours care | This care is provided for primary school-aged children before and after school (7.30 am–9 am and 3 pm–6 pm), during school holidays and on pupil-free days. Vacation care is a type of outside school-hours care that includes indoor and outdoor activities. |
| Occasional care | Occasional care is provided in a range of settings on an hourly basis, for short periods of time, or at irregular intervals. Services are delivered by qualified staff, who provide developmental activities for children primarily aged 0–6 years. |
| Supported playgroups | Supported playgroups are regular gatherings of parents, carers and children. They can help carers develop the skills and confidence to support the child’s learning and development, and provide opportunities for carers to learn about local services. There are also supported playgroups that focus on the specific needs of children. There are a number of playgroups run by Aboriginal organisations that also provide a connection to culture for children and an opportunity to meet with other Aboriginal children, families and carers. |

### Useful resources

* [Aboriginal Early Years Support](http://www.education.vic.gov.au/childhood/providers/needs/Pages/aboriginalsupport.aspx) [http://www.education.vic.gov.au/childhood/providers/needs/Pages/aboriginalsupport.aspx]
* [Early Childhood Agreement for Children in Out-of-Home Care](http://www.education.vic.gov.au/Documents/childhood/providers/edcare/ecagrchildrenoutofhomecare.PDF) [http://www.education.vic.gov.au/Documents/childhood/providers/edcare/ecagrchildrenoutofhomecare.PDF]
* [Koorie playgroups](https://www.playgroup.org.au/Old-Site/Programs/Koorie-Playgroups.aspx) [https://www.playgroup.org.au/Old-Site/Programs/Koorie-Playgroups.aspx] Call 1800 171 882 for Victorian Koorie playgroups, or contact your local Aboriginal agency for further playgroup information.
* Location and quality rating of [local childcare services](https://www.mychild.gov.au/) [https://www.mychild.gov.au/]
* [MyTime](https://www.playgroup.org.au/Programs---Projects/MYTIME2.aspx) [https://www.playgroup.org.au/Programs---Projects/MYTIME2.aspx] – this is a national program for carers and parents of children aged 0–16 with a disability, developmental delay or chronic health condition.
* [Smalltalk supported playgroups](https://www.smalltalk.net.au/ehls-research-2/) [https://www.smalltalk.net.au/ehls-research-2/] – this is a program for parents and carers of babies and young children to improve their language development and early learning.
	+ The [Education Department](http://www.education.vic.gov.au/childhood/parents/kindergarten/Pages/fees.aspx) [http://www.education.vic.gov.au/childhood/parents/kindergarten/Pages/fees.aspx] outlines the types of kindergarten funding available, eligibility and how to apply for funding

### Subsidies and supports

Select an early childhood service carefully so that you can access available grants and subsidies. Check whether the service offers a funded kindergarten program to ensure that the kindergarten program delivered is of high quality, and that the service can apply for Early Start Kindergarten for three year olds, a Kindergarten Fee Subsidy or an Early Start Kindergarten Extension Grant when the child is three or four years old.

Talk to your agency about applying to have fees paid that are not covered by the subsidies.

### Child Care Rebate

The Child Care Rebate is a payment that helps families with the cost of childcare. It provides extra assistance if the child is attending a Child Care Benefit-approved service, and if you are working, studying or training at some time during the week, or have an exemption. The Child Care Rebate is not income tested.

### Child Care Benefit

The Child Care Benefit assists families with the cost of childcare for children enrolled in registered education and care services. To receive any Child Care Benefit, you must meet the income test.

Child Care Benefit approved services include:

* most long day care
* family day care
* outside school-hours care
	+ some occasional care and in-home childcare.

There are a number of eligibility requirements to access the Child Care Benefit (see *Useful resource*s below).

A childcare service can tell you if it is an approved provider and if you are accessing registered care. Some providers charge a gap fee that is not covered by the Child Care Benefit. Talk to your agency if this occurs for you.

### Kindergarten fee subsidies and Early Start Kindergarten Extension Grants

Kindergartens often charge families fees to help meet the cost of running kindergarten programs. Fees are set by individual services and can vary, depending on how many hours your child attends, group size and extra costs, such as excursions. The Kindergarten Fee Subsidy or Early Start Kindergarten Extension Grant allows children to access up to 15 hours of kindergarten that is delivered by a qualified early childhood teacher in the year before school, free of charge or at low cost.

#### Eligibility for Early Start Kindergarten for three-year-old children

All children aged three by 30 April each year who are in out-of-home care are ‘known to child protection’ and therefore eligible for an Early Start Kindergarten Grant where the kindergarten program is delivered by a qualified teacher. All three- year-old Aboriginal and Torres Strait Islander children are similarly eligible for an Early Start Kindergarten Grant. Just ask if there is a ‘funded kindergarten program’ to see if the service can apply.

#### Eligibility for Kindergarten Fee Subsidy in the year before school

If the child in your care is four years old by 30 April and identifies as an Aboriginal person, or if they have ever had contact with child protection (or been referred by them to Child FIRST), they are eligible for the subsidy.

Eligibility also applies if you or the child holds:

* a Health Care Card
* a Pensioner Concession Card
* a Department of Veterans Affairs
* Gold Card or White Card
* Refugee or Asylum Seeker visa (200-204 or 866)
	+ an ImmiCard.

Children in out-of-home care are eligible for their own Health Care Card (see *Chapter 11. Health*) and therefore have access to the Kindergarten Fee Subsidy. If the child is in long day care (where they cannot apply for the Kindergarten Fee Subsidy), or there has been a delay in getting a Health Care Card, the service may be able to apply for an Early Start Kindergarten Extension Grant to ensure that the 15 hours of free or low-cost funded kindergarten each week is available in the year before school.

The kindergarten will apply for this on your behalf. It only requires a verbal request from you or the case worker. You may need to contact central enrolment services (if available) at your local council or individual kindergarten services to find a place.

### Inclusion supports

There are programs available to support children in early education services, such as the:

* Preschool Field Officer Program
* Inclusion support for Commonwealth- funded care
* Kindergarten Inclusion Support Package program
	+ Early Childhood Intervention Services.

For more information, **see Information sheet 8: Education support.**

### Supporting Aboriginal children

Supporting Aboriginal children and their families in the early years of development and learning is key to ensuring successful future outcomes.

In Victoria, Aboriginal children and their families have access to the full range of early childhood services, and to targeted services available to those who need them.

There are programs that support kindergartens with the aim of supporting Aboriginal children to engage in early education, including:

* Aboriginal Best Start – a prevention and early intervention project that aims to improve health, development and learning outcomes for all Victorian children from conception through to school.
* Koorie Preschool Assistance – provides support to Aboriginal children and their families to access and participate in kindergarten.
* Koorie Engagement Support Officers – promote the importance of learning and development, and facilitate access, participation and engagement of Aboriginal children in learning and development services.

### Useful resources

* [Aboriginal Early Years Support](http://www.education.vic.gov.au/childhood/providers/needs/Pages/aboriginalsupport.aspx) [http://www.education.vic.gov.au/childhood/providers/needs/Pages/aboriginalsupport.aspx]
* [Childcare Benefit eligibility criteria](https://www.humanservices.gov.au/customer/subjects/payments-families) [https://www.humanservices.gov.au/customer/subjects/payments-families]
* [Child Care Benefit and the Child Care Rebate](https://www.education.gov.au/early-childhood-and-child-care) [https://www.education.gov.au/early-childhood-and-child-care] are under review and may change.
* Financial support guide for home-based carers, check the website.
* Form for short-term care – this form must be completed with the childcare centre in special circumstances. Check the website to download the form.
* [Koorie Kids Shine at Kindergarten](http://www.education.vic.gov.au/Documents/childhood/parents/kindergarten/koorieshineflyer.PDF) [http://www.education.vic.gov.au/Documents/childhood/parents/kindergarten/koorieshineflyer.PDF] – a promotion strategy
	+ [Support for Aboriginal children](http://www.education.vic.gov.au/childhood/parents/kindergarten/Pages/aboriginal.aspx) [http://www.education.vic.gov.au/childhood/parents/kindergarten/Pages/aboriginal.aspx]

## Schooling

It is compulsory in Victoria for children and young people aged six to 17 years to attend school. For children and young people in out-of-home care, there is an education commitment that ensures schools, carers, child protection and agencies work together to support this to occur.

A child or young person in your care may change schools more frequently due to their changing circumstances. However, efforts will be made to keep the child or young person in their school, if this is possible.

### Education transition

For most children and young people, starting school or changing schools is a big milestone. A successful start to a new school is linked to future positive school outcomes, both academically and socially. However, children and young people in out-of-home care may face additional challenges during their transition to or between schools, due to their life experiences and circumstances.

When a child or young person enters out-of- home care, a change of schools is to be avoided if possible, as this is often the only remaining stable or consistent place for them when they are facing significant changes.

If they must change their school, the case manager will work with you, their parents, the Department of Education and Training’s regional office, Catholic Education Office or Independent Schools Victoria to identify the closest and most appropriate school for them. Once enrolled, the case manager will advise the school principal in writing that they are living in your care.

[Pull out text] ‘One carer supported a highly anxious young person who had limited life experience to engage in a VET course; recognising areas of interest that the young person held. The carer was confident in the young person’s capabilities and promoted a ‘can do’ environment, while supporting and encouraging the young person.’ Robyn, agency case worker, 20+ years

### School reports

You need to keep the child or young person’s school reports, as they go with them through their life. You also need to give a copy of the school reports to your agency to place on the child or young person’s file, in case they want to access it in the future. If possible, reports may also be shared with their family – especially if it provides opportunities to discuss some successes they have had.

### Parent-teacher interviews

Talk to the care team about who should attend the child or young person’s parent-teacher interview – if necessary, a second interview may be requested to enable both you and the parent to have involvement in their education.

### Useful resources

* + [Transition to school](http://www.education.vic.gov.au/childhood/professionals/learning/Pages/transition.aspx) [http://www.education.vic.gov.au/childhood/professionals/learning/Pages/transition.aspx]

### Out-of-home care education commitment

The Department of Health and Human Services, the Department of Education and Training, the Catholic Education Commission of Victoria and Independent Schools Victoria have a partnering agreement to ensure that education and out-of-home care systems work together to improve the educational experience and outcomes for children and young people in out- of-home care.

The aims of the agreement are to make sure that:

* processes are in place to actively support the educational achievement of every child and young person in out-of-home care
* a strongly coordinated approach is in place to support the children and young people, and that all parties understand their roles and responsibilities and work cooperatively
	+ strategies are implemented to improve outcomes related to student enrolment, attendance, achievement, planning, retention and school completion.

### Education partnering agreement

Key requirements in the agreement include:

* the case manager should advise the school in writing when the child or young person lives in out-of-home care
* schools should record the child or young person’s living arrangements
* schools should establish a Student Support Group for each child or young person in out-of-home care, and case managers must participate in this group. Your input as the carer is also vital
* schools should lead the development and regular review of an education plan for each child or young person in out-of-home care, including input from the case manager (and you, wherever possible)
	+ schools and case managers should facilitate referrals for assessments and services, to support the learning and wellbeing of the child or young person.

The agreement provides useful information for carers of school-aged children and young people regarding the roles and responsibilities of the school and case manager to support the educational engagement of children and young people in care. To access the agreement, visit [*www.education.vic.gov.au/Documents/school/ teachers/health/a4partnering.pdf*.](http://www.education.vic.gov.au/Documents/school/teachers/health/a4partnering.pdf)

[Pull out text] ’Advocating for your young person brings you closer together.’ Kym, foster carer, 12 years

#### Student Support Group

Principals must make sure a Student Support Group is established for all children and young people in out-of-home care, and identify and address any issues that impact on their educational outcomes.

The aims of the Student Support Group are to:

* make sure that those with the most knowledge of, and responsibility for, the child or young person work together to support engagement, attendance and achievement, and to establish shared social and educational goals
* plan reasonable adjustments for the child and young person to access the curriculum
* provide educational planning
	+ monitor the progress of the child or young person.

#### Individual Education Plans

Under the agreement, Individual Education Plans for each school-age child or young person in out-of-home care are to be developed to support their educational achievement and engagement. The purpose of this plan is to describe a set of strategies to address the particular educational needs of the child or young person.

Aboriginal children and young people should have an Individual Education Plan from the Wannik Education Strategy for Koorie Students.

The Individual Education Plan should:

* outline a meaningful education program
* be age and developmentally appropriate
* be flexible and future oriented
* be strengths-based to focus on the child or young person’s potential to achieve good educational, social and behavioural outcomes
* aim to retain the child or young person at school
* clearly articulate individual and shared responsibilities
* provide information on the child or young person’s progress
* provide guidance to the Student Support Group
* contain a record of decisions and actions
	+ be reviewed regularly, according to the needs of the child or young person (at least twice a year).

If a child or young person changes school, the Individual Education Plan must be forwarded by the existing school to the new school.

#### Education Support Guarantee

The education partnering agreement includes an Education Support Guarantee for children and young people in out-of-home care. This guarantee commits schools and education- related health and wellbeing services to provide an increased level of support for their educational needs.

#### Education Support Guarantee

The elements of the guarantee are:

* allocation of a teacher or staff member as a Learning Mentor to each child and young person in out-of-home care who is enrolled in a school
	+ prioritisation of referrals for children and young people in out-of-home care to education-related health and wellbeing services, to ensure that these services are highly accessible and responsive to their needs
* an Educational Needs Assessment for every child or young person who has resided in out-of-home care for a period of three months or longer, to identify their individual learning needs and to inform their individual education plan
* priority status all year round for applications to the Program for Students with Disabilities for children and young people in out-of- home care enrolled at a government school
	+ checklists outlining the commitments and responsibilities for schools, case managers and agencies, when a child or young person enters out-of-home care or when they are enrolled at a school.

There are additional responsibilities for schools and case managers, regarding suspension and expulsion of children and young people in out- of-home care.

### Useful resources

* [Aboriginal Education Plan](http://www.education.vic.gov.au/Documents/about/programs/aboriginal/kelpresource.pdf) [http://www.education.vic.gov.au/Documents/about/programs/aboriginal/kelpresource.pdf]
* Calmer classrooms: a guide to working with traumatised children and young people, check the website
* Great expectations: supporting children and young people in out-of-home care to achieve at school, check the website
* [Out-of-home care education commitment](http://www.education.vic.gov.au/Documents/school/teachers/health/a4partnering.pdf) [http://www.education.vic.gov.au/Documents/school/teachers/health/a4partnering.pdf]
	+ [Wannik: learning together](https://www.eduweb.vic.gov.au/edulibrary/public/govrel/policy/wannik.pdf) [https://www.eduweb.vic.gov.au/edulibrary/public/govrel/policy/wannik.pdf] – journey to our future is an education strategy for all Koorie children and young people

### Allowances and exemptions

#### Youth Allowance – Centrelink

A young person may qualify for a Youth Allowance if they are between 16 and 21 years, or up to 25 years, if they are a full-time student.

The level of funding depends on various factors and is assessed on a case-by-case basis. The young person in your care may need help from you or their case manager to apply for the Youth Allowance.

#### ABSTUDY – Centrelink

ABSTUDY helps with the costs for Aboriginal young people who are studying or undertaking an Australian apprenticeship.

#### Tuition fee exemptions – Young people transitioning from care initiative

This initiative waives tuition fees for young people in out-of-home care or who are under 21 and have recently transitioned from state- based care. Places are available to eligible young people for a range of VCAL, VCE, Certificates I-IV, Diploma and Advanced Diploma Courses that are delivered by registered training organisations.

#### School-attending care allowance for 18 year olds

The department may provide a care allowance to you if the young person in your care is in the year beyond turning 18, when they are enrolled in secondary school education and will continue with their schooling. See Chapter 6. Support for carers for further detail.

#### Camps, Sports and Excursions Fund

You are eligible to apply for the Camps, Sports and Excursions Fund, which provides payments for eligible students to attend camps, sports and excursions. Payments will go directly to the school and be linked to the student. For more [information, visit www.education.vic.gov.au/ about/programs/health/Pages/csef.aspx.](http://www.education.vic.gov.au/about/programs/health/Pages/csef.aspx)

#### Voluntary government school fees

You should only pay the compulsory components and not the voluntary contribution components of government school fees. While government schools may invite voluntary financial contributions, these should not be paid for children and young people in out-of- home care, including:

* contributions to a building or a library trust fund
* contributions for a specific purpose identified by the school (for example, additional computers or student-related services)
	+ general voluntary financial contributions or donations to the school

### Useful resources

* [Parent payments in Victorian Government schools policy](http://www.education.vic.gov.au/school/parents/financial/Pages/parentpayments.aspx) [http://www.education.vic.gov.au/school/parents/financial/Pages/parentpayments.aspx]
* [Service Information and Referral Service](http://www.education.vic.gov.au/about/programs/health/Pages/csef.aspx?&Redirect=1) [http://www.education.vic.gov.au/about/programs/health/Pages/csef.aspx?&Redirect=1]
* [Tuition fee exemptions](http://www.education.vic.gov.au/training/learners/vet/pages/feeexemptions.aspx) [http://www.education.vic.gov.au/training/learners/vet/pages/feeexemptions.aspx]
	+ [Youth allowance](https://www.humanservices.gov.au/customer/enablers/dependent-or-independent-youth-allowance) [https://www.humanservices.gov.au/customer/enablers/dependent-or-independent-youth-allowance]

[Pull out text] ‘It starts at school then flows out into the streets, then into texts and social media. A lot of the time it starts in the school, but it doesn’t end there.’ CREATE Young Consultants

### Educational supports

There are resources, strategies and supports for children and young people who have additional needs, or face particular barriers in attending school.

#### Children and young people with disabilities and additional needs

Some children and young people with disabilities and additional needs may experience difficulty:

* navigating the social dynamics of the classroom
* coping with frustration and embarrassment
	+ learning to self-regulate their behaviour.

Identifying a child or young person’s underlying learning needs, providing tailored support and modifying the educational program should increase their engagement in learning and improve their opportunities for success. If you are concerned that the child or young person in your care may be having difficulties at school or are worried about their behaviour, you should contact their school.

#### Children and young people identifying as same-sex attracted, gender diverse and intersex

Research has shown that gender and sexually diverse students in Australia can struggle at school and are often the victims of homophobia, which can negatively impact on their experience at school and their learning.

The Safe Schools Coalition Victoria works in partnership with the government to offer membership, training, and resources to help combat homophobic bullying, and to create safe and supportive environments for same-sex attracted, gender diverse and intersex students, staff and families.

The coalition provides training, resources and advice for every school in Victoria, to support sexual diversity and gender diversity, and therefore enhance school performance.

### Discrimination and bullying at school

Bullying is a serious issue for everyone in a school community. It can happen anywhere, anytime, and can have devastating consequences for a child or young person. Bullying is harmful behaviour that can be physical, social or psychological. It happens when someone uses words or actions against a person or a group of people to cause them distress or harm. It is often related to using power over someone or trying to make them feel helpless.

Discrimination is treating someone unfairly or unjustly because of their gender, background, culture, race, disability, sexuality, identity or other reason.

Discrimination and bullying can be a particular issue for children and young people who live in out-of-home care and may be made worse if they have a disability, are from a different racial or cultural background or identify as lesbian, gay, bisexual, transgender or intersex.

Discrimination and verbal and physical abuse can have significant impacts on a child or young person’s wellbeing, including an increased risk of mental health problems, such as depression, anxiety, suicidal behaviour or thoughts and self-harm.

Discrimination and bullying have received more attention in recent years, particularly with greater access to social media, and concerns about new forms of bullying, such as cyber bullying, particularly experienced by children and young people.

#### Tackling bullying

It is important to talk to the child or young person in your care about bullying and, if it is an issue, consider ways to address it.

Encourage the child or young person to talk about what happened. If they want to try to deal with the bullying themselves, discuss strategies and set a short period of time to see if they can resolve the situation. Tell them that reporting the bullying is okay and reassure them it is not their fault.

Encourage the child or young person to:

* try to act unimpressed or unaffected
* use other strategies to diffuse the situation (such as agreeing in an offhand way with the bullying when they say offensive or negative things – this is known as fogging)
* say ‘No!’ firmly
* talk to the teacher or another staff member, such as a school guidance officer
	+ act confidently, even when they don’t feel it.

Practice some strategies at home with the child or young person to help them to:

* stand and walk in a way that appears more confident
	+ give a quick reply to surprise or disarm the other child or young person
	+ use a routine response (such as ‘okay whatever’)that implies they are not bothered.

Talk about what doesn’t work with bullying, including:

* fighting back
* bullying the bully
* ignoring it
* playing with a different group of friends
	+ remaining silent about the problem.

Give the child or young person the Kids Helpline telephone number (1800 55 1800) to use if they want to talk to someone other than the school, or if you don’t feel able to support them. If you feel unable to deal with this issue and are concerned about their wellbeing, you should talk to your agency worker.

[Pull out text] ‘Bullying because you have been in care can be a huge issue.’ CREATE Young Consultants

[Pull out text] ’Seek the support of the care team, including their Student Support Group, reinforcing that they are not alone.’ Jenny, Maya and Robyn, agency case workers, 46+ years combined

[Pull out text] ’Sometimes kids don’t want to burden carers. Carers can subtly say that they want the young person to bring up stuff and can pay attention to look for tell- tale signs.’ CREATE Young Consultants

### Useful resources

* [Bully Stoppers](http://www.education.vic.gov.au/about/programs/bullystoppers/Pages/parents.aspx) [http://www.education.vic.gov.au/about/programs/bullystoppers/Pages/parents.aspx] – is a program that supports students, parents and carers, teachers and principals in working together to make sure schools are safe and supportive places
* **Information sheet 7: Caring for Aboriginal children and young people.**
* Services and support organisations that can help with bullying issues include:
	+ - [Kids Helpline](https://kidshelpline.com.au/) [https://kidshelpline.com.au/], or call 1800 55 1800
		- Beyondblue information line, call 1300 22 4636
		- Lifeline, call 13 11 14
		- Suicide Helpline Victoria, call 1300 651 251
		- Racismnoway, check the website
		- [ReachOut](http://www.au.reachout.com/factsheets/b/bullying) [http://www.au.reachout.com/factsheets/b/bullying] has resources and a discussion forum in relation to bullying
			* [National Centre Against Bullying](https://www.ncab.org.au/) [https://www.ncab.org.au/]

### Student support services

Victorian Government schools have access to a range of professionals who can provide support to students with additional needs, including:

* guidance officers, counsellors and psychologists
* social workers
* school nurses
* visiting teachers (for students with visual, hearing or physical impairments)
* speech pathologists
* curriculum consultants
	+ school education support staff.

#### LOOKOUT Education Support Centres

LOOKOUT Education Support Centres are a Department of Education and Training initiative that support children and young people in out-of-home care to complete their education and achieve their best. The centres will be established in all areas of Victoria by 2017. The centres offer a multi-disciplinary service response, building on the expertise and professional practice within schools, the community sector and across the Department of Education and Training and the Department of Health and Human Services. Refer to **Information sheet 8: Education support.**

Speak to the child or young person’s case manager if you think they may need any of these services.

#### SAFEMinds

SAFEMinds is a learning and resource package for schools, carers and families developed by the Victorian Government in partnership with Headspace and the National Youth Mental Health Foundation. It aims to:

* enhance early intervention mental health support for children and young people in schools, specifically regarding mild mood disorders (anxiety and depression) and self-harm
* increase engagement of parents and carers with schools, to more effectively support the child or young person’s mental health
* develop clear and effective referral pathways between schools and community youth and mental health services.

### Useful resources

* [SAFEMinds](http://www.education.vic.gov.au/school/parents/health/Pages/mentalhealth.aspx) [http://www.education.vic.gov.au/school/parents/health/Pages/mentalhealth.aspx]
	+ [Support for gender and sexually diverse students](http://www.safeschoolscoalition.org.au/) [http://www.safeschoolscoalition.org.au/]

## Post-school opportunities, TAFE and university

In Years 10, 11 and 12, young people start thinking about what they will do when they leave school. This might include study at TAFE, university, an apprenticeship or employment. Study and training can open up many possibilities for young people in their work and personal life.

It is important that young people who have grown up or spent time in out-of-home care are encouraged and supported, like any other young person, to pursue and aspire to higher education, and develop their knowledge and skill through formal study. This will help to prepare them for the next phase of their life, and provide more options for meaningful employment, and a career.

Talking to the young person in your care and their school about these options will help them to think about and identify areas of interest, strengths and possibilities for future study and employment.

As well as the young person’s learning mentor (who is assigned by the school), there may be teachers they get on well with who they can talk to, or other adults they trust. Each school has a careers counsellor, who can also provide support and guidance. Lots of TAFEs and universities have open days and different activities. Schools should know about these.

This gives young people an opportunity to see the environment, ask existing students questions, get a feel for the place, do lots of fun things and feel less daunted about higher education.

### Higher education and university services to support care leavers

Several universities in Victoria provide specific support services for young people leaving out-of-home care, who want to go to TAFE or university. While services will vary, they can include counselling services, mentoring programs and scholarships.

TAFE and universities may also provide support with application forms, understanding FEE- HELP, guidance around the different courses, and liaising with departments to advocate for young people. Often, there are other services to help them feel more prepared for the course they want to study.

Many universities have specific centres, services and supports to assist Aboriginal students in their study. This may include a designated physical space, use of computers and printers, free tutoring and information on financial assistance.

### Useful resources

* [Myfuture](https://myfuture.edu.au/) [https://myfuture.edu.au/]
* [Study assist](http://studyassist.gov.au/sites/StudyAssist/) [http://studyassist.gov.au/sites/StudyAssist/]

## Employment assistance

### Transition to Work

The Commonwealth Government Transition to Work is a service to support young people aged 15–21 on their journey to employment. It provides intensive, pre-employment support to improve the work readiness of young people and help them into work (including apprenticeships and traineeships) or education.

Transition to Work will help young people:

* develop practical skills to get a job
* connect with education or training
* find and complete work experience placements
* find job opportunities in the local area
	+ connect with relevant local community services.

### Jobactive

The Commonwealth Government funds a network of jobactive services across 1,700 locations in Australia to provide employment services to employers and job seekers. They work closely with job seekers, tailoring services to their assessed needs, so they can find and keep a job.

A jobactive service will have a face-to-face meeting with the job seeker to develop a Job Plan, which will set out all of the activities the job seeker should do to help them find work, such as job searches and activities like Work for the Dole.

Services for job seekers include:

* help to look for work, write a résumé and prepare for interviews
* referrals to jobs in the local area and help to relocate for work if they are interested
* help to become job ready, including targeted training that is suited to the skills that local employers need
* individualised support (called case management), so they are ready to take up and keep a job
* support to complete Work for the Dole, or other eligible activities, that provide work like experiences
* help to learn new skills and improve the job seeker’s chances of finding a job.

### Back to Work Scheme

The Victorian Government’s Back to Work Scheme encourages employers to hire disadvantaged job seekers, by giving them financial and training support. Employers are offered additional incentives for employing young people in or leaving out-of-home care.

### Indigenous Employment

Indigenous Employment is a national initiative that helps find information about employment programs and assistance for Aboriginal and Torres Strait Islander people.

Programs and assistance include:

* Health Heroes
* Indigenous Australians looking for work, studying or training
* Indigenous cadetship support
* Indigenous careers
* Indigenous Wage Subsidy
* Jobactive – helping Indigenous Australians.

### Disability Employment Services

Disability Employment Services provide specialist employment assistance to help people with disability, injury or health conditions to find and keep suitable employment. It also provides support to their employers where required.

### Useful resources

* [Back to Work Scheme](http://www.vic.gov.au/backtowork.html) [http://www.vic.gov.au/backtowork.html]
* [Disability Employment Service providers](https://jobsearch.gov.au/) [https://jobsearch.gov.au/]
* [Indigenous employment](http://www.australia.gov.au/information-and-services/jobs-and-workplace/employment-services-and-jobs/indigenous-employment) [http://www.australia.gov.au/information-and-services/jobs-and-workplace/employment-services-and-jobs/indigenous-employment]
* [JobAccess](https://www.jobaccess.gov.au/) [https://www.jobaccess.gov.au/] – the website provides information about supporting workers with a disability for people with disability, their co-workers, employers, and Disability Employment Services providers. Phone a JobAccess adviser on 1800 464 800.
* [jobactive](https://jobactive.gov.au/) [https://jobactive.gov.au/]
* Local disability employment services – a young person can directly register with a Disability Employment Services provider in their area without going to Centrelink.
* [myfuture](https://www.myfuture.edu.au/) [https://www.myfuture.edu.au/] – provides information about career planning, education and training options, VTAC courses, pathways to prepare for university studies, support and mentoring at [.](http://www.myfuture.edu.au/)
* [Transition to Work](https://www.employment.gov.au/transition-work) [https://www.employment.gov.au/transition-work]

# 11. Health

## The importance of health

In general, children and young people in out- of-home care experience an increased level of unmet health needs, compared with peers of the same age. A child or young person’s experience of abuse and trauma impacts significantly on their health and wellbeing.

Some children and young people in out-of-home care may have health needs that haven’t been attended to, and they may have experienced significant developmental delay due to physical and environmental factors. Unmet health needs or poor health may negatively influence other aspects of a child or young person’s life. For example, poor eyesight may have an impact on their education or participation in sport.

Behavioural issues due to developmental delay can mean that learning needs go unrecognised. Children and young people also develop health issues during their time in care, so your role in supporting their physical and emotional health is very important.

## General health and wellbeing

### Health requirements for a child or young person in out-of-home care

A child or young person coming into care for the first time (or for the first time during the current period of child protection involvement) should have a medical, dental, optical and auditory assessment as soon as possible, or within one month of entering care. Your agency will discuss with you how to ensure this occurs. They will also make sure the child or young person’s health needs are monitored annually or more frequently if required.

[Pull out text] ‘Make sure the young person knows who to go to and can make their own appointments when they have health needs to be addressed.’ CREATE Young Consultants

A child or young person should, where possible, keep visiting their existing doctor or paediatrician for their healthcare. If they do need to change doctors, it is important that the medical records are obtained for the new clinic. Your agency will support you with this process.

One of the most important ways to look after a child or young person’s health is to gather their relevant medical and psychosocial history, so that any health professional is able to make a thorough assessment. You can do this using the Looking After Children practice tools.

#### Health considerations

For all children and young people in out-of-home care, there are health issues that should be considered, including:

* dental
* optical and auditory testing
* general health issues – such as immunisations and general childhood illnesses
* specialist assessments – for example, paediatric developmental assessment, speech development, fine and gross motor development
* specialist health needs – for example, asthma, skin conditions, orthodontics
* congenital defects
* counselling and psychological assessment
* alcohol and other drug use
	+ sexual health.

Information on all general health matters can be found at the Better Health Channel. It is a trusted, comprehensive and easy-to- understand health and medical information website – see *Useful resources*.

### Decisions regarding a child or young person’s health

As the carer, with a carer authorisation letter (see Chapter 4. Your role in caring for a child or young person), you are able to make decisions about:

* arranging routine medical care and health checks from a doctor – for example, colds, tonsillitis and other infections
* consenting to a check by the school nurse, or maternal and child health services
* consenting to diagnostic tests recommended by a doctor or dentist
* arranging childhood immunisations as set out in the current department immunisation schedule
* arranging routine dental care provided by a dentist, including dental check-ups and routine treatment
* signing for prescriptions at a pharmacy and administering medication prescribed by a doctor or dentist
	+ seeking emergency medical treatment for the child or young person where required.

You are not able to:

* approve or consent to non-routine or specialist assessment or treatment, including surgery
* make decisions regarding medical or health issues of a long-term nature – for example, surgery or major dental work
* arrange more extensive dental treatment, such as orthodontic treatment or the extraction of permanent teeth.

For young people, usually 14 years and over, a doctor can assess that they understand the nature of the medical treatment and can provide informed consent for a medical service, without the need for their parent or carer to consent.

This principle applies regardless of whether the child or young person is in out-of-home care or not. This is particularly relevant for young women receiving contraception, but it applies generally for access to healthcare professionals and treatment.

[Pull out text] ‘Obtain a photocopy of the young person’s Medicare card if you cannot have the original.’ Kym, foster carer, 12 years

### Medicare

Medicare is Australia’s universal health scheme. Through Medicare, children and young people in out-of-home care receive free treatment in a public hospital, as well as reduced costs for out-of-hospital care.

Services that are partly or fully funded by Medicare include:

* consultation fees for doctors, including specialists
* tests and examinations by doctors, including X-rays and pathology tests
* eye tests performed by optometrists
* most surgical and other therapeutic procedures performed by doctors
	+ some surgical procedures performed by approved dentists.

#### Medicare card

A child or young person in your care is eligible for services funded through Medicare with a valid Medicare card (or a valid Medicare number). If parents are unwilling or unable to provide a Medicare card or number, your agency and child protection can obtain these, provided the child or young person is either already registered with or eligible to be registered with Medicare.

If the child or young person is on an order of greater than six months duration, child protection or the agency can apply for a card in the child or young person’s name.

If you take a child or young person to a doctor and you do not have a Medicare card, the doctor can check if they have a Medicare number for bulk billing purposes. If you have to pay for the medical service, you can be reimbursed by making a claim to Medicare, even if they are not on your Medicare card.

### Pharmaceutical Benefits Scheme

The Pharmaceutical Benefits Scheme ensures that prescription medicine is provided at affordable prices. To be eligible for the Pharmaceutical Benefits Scheme, you need to provide the child or young person’s Medicare card or Medicare number, and the pharmacist will automatically reduce the cost of your medicine.

### Health Care Card

All children and young people in out-of-home care are entitled to a Health Care Card from Centrelink, either in their own name or by being added to your Health Care Card, if you have one.

A Health Care Card entitles the child or young person to:

* bulk billing for doctor’s appointments, decided by the doctor
* greater refunds for medical expenses through the Medicare Safety Net
* lower cost prescriptions
	+ assistance with hearing services through the Office of Hearing Services.

You can apply directly for the child or young person’s Health Care Card, using a range of acceptable evidence for eligibility (such as a document or letter from your agency to show they are in your day-to-day care). This evidence does not necessarily include a protection order or a birth certificate. If required, your agency can help you with this.

Victorians who are eligible for a Health Care Card receive free clinically necessary ambulance cover throughout Australia. This cover will provide free emergency and medically authorised non-emergency ambulance transport to the nearest and most appropriate hospital.

### Useful resources

* [Ambulance transport for Health Care Card holders](http://ambulance.vic.gov.au/) [http://ambulance.vic.gov.au/]
* [Better Health Channel](http://ambulance.vic.gov.au/) [http://ambulance.vic.gov.au/] – you can search an A–Z of health information, or download the Better Health Channel app for use on your mobile phone.
* Health Care Card application, check the website
* Maternal Child and Health Line, call 13 22 29, 24 hours, seven days a week.
* [Medicare](https://www.humanservices.gov.au/customer/services/medicare/medicare-card) [https://www.humanservices.gov.au/customer/services/medicare/medicare-card] – for more information on Medicare cards for children and young people in out-of-home care,
	+ [Pharmaceutical Benefits Scheme](https://www.humanservices.gov.au/customer/services/medicare/pharmaceutical-benefits-scheme) [https://www.humanservices.gov.au/customer/services/medicare/pharmaceutical-benefits-scheme]

## Aboriginal health

Using Aboriginal health services helps Aboriginal children and young people see themselves as part of the Aboriginal community.

Aboriginal people view health as something that connects all aspects of life. It is ‘not just the physical wellbeing of the individual, but the social, emotional, and cultural wellbeing of the whole community’ (Victorian Aboriginal Health Service).

### Aboriginal health services

The Victorian Aboriginal Community Controlled Health Organisation (VACCHO) is the peak body for all Aboriginal community controlled health organisations in Victoria. Check the website at Aboriginal health services across Victoria.

The Victorian Aboriginal Health Service (VAHS) based in Fitzroy provides healthcare, assessments, understanding and education to the Aboriginal community. The service operates five days a week, and on Saturdays between the hours of 9.30 am and 12.30 pm for people with an emergency.

The Victorian Aboriginal Spectacle Subsidy is administered by the Australian College of Optometry, in partnership with Aboriginal community controlled health organisations and a network of optometrists in regional Victoria.

### Useful resources

* Dental services for Aboriginal children and young people are located in the Hume Region at the Rumbalara Aboriginal Cooperative, and in the Barwon Region at the Wathaurong Aboriginal Cooperative. For up-to-date information on dental services for Aboriginal children and young people, contact your local Aboriginal community controlled health service.
* The Australian College of Optometry has primary care optometry services for Aboriginal people at locations around Melbourne that operate in partnership with the Victorian Eyecare Service. To arrange an appointment at any of the clinics, contact each site directly:
	+ - Victorian Aboriginal Health Service, 186 Nicholson St, Fitzroy. Call 03 9419 3301.
		- Bunurong Health Service, 3 Carroll Ave, Dandenong. Call 03 9794 5933.
			* The Gathering Place Health Service Unit, 1-2, 7 Wedge Street, Werribee. Call 03 8742 3144.
* [Victorian Aboriginal health services](http://www.vaccho.org.au/om/our-membership/members/) [http://www.vaccho.org.au/om/our-membership/members/] can be found on the VACCHO werbsite
* [Victorian Aboriginal Health Service (VAHS)](http://www.vahs.org.au/) [http://www.vahs.org.au/] is a free service for children, young people and adults at 186 Nicholson St, Fitzroy. Call 03 9419 3000.
* [Victorian Aboriginal spectacle subsidy scheme](http://www.healthinfonet.ecu.edu.au/key-resources/programs-projects?pid=1090) [http://www.healthinfonet.ecu.edu.au/key-resources/programs-projects?pid=1090]
	+ WADJA Aboriginal Family Place, [The Royal Children’s Hospital](http://www.rch.org.au/afsu/) [http://www.rch.org.au/afsu/]

## Dental care

### Routine dental care

In Victoria, children and young people in out-of- home care have priority access to public dental services. This means they are offered the next available appointment for general care and are not placed on a waiting list.

Routine dental treatment includes:

* dental check-ups and advice
* dental sealants to prevent decay
* teeth cleaning
* fillings
	+ extraction of baby teeth.

When you are making an appointment, tell the clinic staff that the child and young person lives in out-of-home care, so they are given priority.

Dental care is provided at the Royal Dental Hospital Melbourne and at more than 80 community dental clinics throughout metropolitan Melbourne and rural Victoria – see *Useful resources*.

If there is any delay in accessing these services due to a lack of availability of the service, talk to your agency and they can try to resolve the issue with the department. This does not apply to the Victorian Aboriginal Health Service dental service, as it is funded by the Commonwealth Government.

### Specialist dental care

Specialist dental care may be provided on referral from a public dental clinic to the Royal Dental Hospital of Melbourne. Talk to your agency about receiving carer authorisation if specialist dental care is required.

A child or young person can be eligible for referral to the Royal Dental Hospital by a dentist or doctor, if they:

* are very young children with advanced decay
* have behavioural difficulties
* have abnormal patterns of dental growth, for example, extra teeth, orthodontic problems
* may require a general anaesthetic for dental treatment
* have genetic dental problems
	+ have sustained dental and orofacial trauma.

### Useful resources

* [Dental Health Services Victoria](https://www.dhsv.org.au/public-dental-services/specialist-dental-care) [https://www.dhsv.org.au/public-dental-services/specialist-dental-care] in Carlton provides specialist public dental services
* Dental services for children in out-of-home care, check the website
* List of [public dental clinics](https://www.dhsv.org.au/clinic-locations/community-dental-clinics) [https://www.dhsv.org.au/clinic-locations/community-dental-clinics]
* [Public dental services in Victoria](https://www2.health.vic.gov.au/primary-and-community-health/dental-health) [https://www2.health.vic.gov.au/primary-and-community-health/dental-health] – call 1300 360 054 or 1800 833 039 (country areas only),
* [Specialist dental care](http://www.rch.org.au/dentistry/) [http://www.rch.org.au/dentistry/] – The Royal Children’s Hospital has information on the full range of dental services in Victoria, including services for children and young people with special or complex needs.

## Eye and ear care

Eye examinations can be conducted by a qualified optometrist in your local area. Most optometrists provide a bulk billing service for a vision check, and you should check that there are no extra costs when you make an appointment. To find an optometrist in your area, visit the Optometry Australia website.

It is important that a child or young person’s hearing is tested at an audiology clinic. There are a number of publicly funded clinics in Victoria, but there may be waiting lists for some services. To find the closest service to you, visit the Audiology Australia website at [*http://audiology.asn.au*.](http://audiology.asn.au/)

### Useful resources

* Ear care – [Audiology Australia](http://audiology.asn.au/) [http://audiology.asn.au/]
	+ Eye care – [Optometry Australia](http://www.optometry.org.au/your-eyes/) [http://www.optometry.org.au/your-eyes/]

## Maternal and child health

Maternal and child health services offer 10 free key ages-and-stages consultations for all children aged 0–6 years.

At these consultations, the maternal and child health nurse reviews the child’s health, growth and development, and records information in the child’s My Health and Development Record (commonly known as the ‘green book’).

At particular stages, there are more specific assessments, (for example, related to hearing and vision). If you do not have the child’s ‘green book’, the nurse may be able to access the child’s records, if the previous centre is known.

All consultations are free, and you can discuss your concerns, talk about your caring experiences, and explore ways to improve the child’s health, growth and development.

### Maternal and child health consultations

All children and their families (including you as the carer) can expect to attend several maternal and child health consultations, including:

* a home visit soon after birth
* consultations at two, four and eight weeks
* consultations at four, eight, 12 and 18 months
	+ consultations at two and three and a half years of age.

Most maternal and child health centres offer scheduled appointments, open consultation sessions and some after- hours appointments. The service is free, is provided 52 weeks of the year, and is supported by the 24-hour Maternal and Child Health Line, which you can call on 13 22 29.

## Immunisation

Victoria’s immunisation program protects against infection, saves lives and protects those who are too young or too sick to be immunised. You may not know if a child or young person’s immunisations are up to date when they first come into your care, so it is important to make sure that you, your family and the child or young person in your care are all up to date with your immunisations to ensure you are protected.

Ask your doctor if there are any additional immunisations recommended for people caring for children and young people. Children and young people are eligible to receive some vaccines for free under the National Immunisation Program. Some vaccines are also funded by the Victorian Government. Ask your doctor or immunisation provider what vaccines are provided free.

### Immunisation history

All children and young people coming into care will need to have their immunisation history checked to determine if catch-up vaccinations are required.

Immunisations set out in the current National Immunisation Program schedule are considered routine medical care.

An instrument of authorisation from child protection may allow you to follow up on a child or young person’s immunisations. If, for a medical reason, they cannot safely be immunised, a specific exclusion should be noted in the Care and Placement Plan, by adding ‘excluding immunisations’ to the issue of routine medical and dental care, and will likely be included on the instrument of authorisation.

A specific exclusion for a medical reason will require a general practitioner to complete a medical exemption form and submit it to the Australian Childhood Immunisation Register.

### Immunisation records

The Australian Childhood Immunisation Register is a national register that records all vaccinations given to children and young people under 20 years of age. Talk to your agency about accessing their immunisation record and if required, talk to your local council about how to access secondary school immunisation records.

For more information on how to obtain an immunisation history statement, visit [Australian immunisation register](https://www.humanservices.gov.au/customer/services/medicare/australian-immunisation-register) [https://www.humanservices.gov.au/customer/services/medicare/australian-immunisation-register]

#### Catch-up immunisations

If the child or young person in your care has missed vaccines on the National Immunisation Program schedule, you can talk to a doctor or immunisation provider to arrange a catch-up schedule. They can electronically check the child or young person’s immunisation status with the Australian Childhood Immunisation Register and decide which immunisations are needed.

### Immunisation requirements for kindergarten and childcare

The Victorian Government requires all children to be up to date with their immunisations to be enrolled in childcare or kindergarten in Victoria. If the child in your care requires catch-up immunisations, they are eligible to enrol and commence at the service under a ‘grace period’ provision, while you bring their immunisations up to date. After the child is immunised, you need to provide an immunisation status certificate to the childcare centre or kindergarten.

The best document to provide is an Immunisation History Statement from the Australian Childhood Immunisation Register. This statement is a valid immunisation status certificate. Your doctor or immunisation provider can also provide this certificate.

If there is information missing from the child’s immunisation history statement, please let your agency know. They will contact the immunisation provider, who can update the child’s immunisation details on the register.

#### Immunisation requirements for benefit payments

To receive Family Tax Benefit Part A supplement and the Child Care Benefit, the child needs to be up to date with their immunisations, according to the Australian Childhood Immunisation Register, or have a medical exemption or a catch-up schedule in place.

The National Immunisation Program schedule specifies the age at which children and young people should receive certain immunisations. Most of those immunisations are linked to family assistance payments. If you have any questions about these benefits, visit [Centrelink](https://www.humanservices.gov.au/customer/dhs/centrelink) [https://www.humanservices.gov.au/customer/dhs/Centrelink]

### Useful resources

* Australian Childhood Immunisation Register, check the website
* [Immunisation](https://www2.health.vic.gov.au/public-health/immunisation) [https://www2.health.vic.gov.au/public-health/immunisation]
* [Immunisation required for kindergarten](https://www2.health.vic.gov.au/public-health/immunisation/vaccination-children/no-jab-no-play) [https://www2.health.vic.gov.au/public-health/immunisation/vaccination-children/no-jab-no-play]
* [National Immunisation Schedule](http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/national-immunisation-program-schedule) [http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/national-immunisation-program-schedule]
* The Maternal and Child Health Line – available 24 hours, seven days a week, call 13 22 29.

## Medication

When administrating prescribed medication to a child or young person in your care, you need to follow the directions provided by the doctor or pharmacist.

You can give them over-the-counter medications as part of their routine care. The administration of medication should be discussed with the pharmacist, and the dose must be given in accordance with their age or weight. If they do not respond to the medication and improve within a reasonable time period, they should be taken to the doctor.

You need to let the pharmacist know if the child or young person is on prescription medication for a pre-existing condition, to ensure there is no interaction of medications.

**Children and young people who are on long-term medication should have their treatment reviewed regularly by their doctor and information about their treatment provided to the care team. Carers are not able to consent to long-term ongoing medical treatment on behalf of the child or young person and should consult with their agency case worker.**

### Medication refusal

If a child or young person refuses to take their prescription medication, you should address the situation in an age-appropriate manner. Never force them to take medication.

Contact the doctor or dentist who prescribed the medication to tell them that the child or young person is refusing it and ask for advice. This is something your agency case worker needs to know about, so they can also provide you with advice and support.

### Medication recording

Generally, you will not be required to record a child or young person’s use of prescribed and over-the-counter medication. However, the use of ongoing medication must be recorded in the child or young person’s Care and Placement Plan (0–14 years), or Care and Transition Plan (15 years+). The agency will keep records of their medical and dental assessments, including records of immunisations, and pass these to the child or young person, their family or another relevant agency, when they move from your care.

When the child or young person first comes into your care, ask your agency if they have an easy template to record medical appointments. They will need this information to include in their records. Keep a complete health history and, if possible, use the same health professionals, as this is one of the best ways you can support proper healthcare for the child or young person.

### Useful resources

* [Administering medication](http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/out-home-care/health/administration-medication) [http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/out-home-care/health/administration-medication] – for more information,

## After-hours medical attention

For non-urgent after-hours care you can call NURSE-ON-CALL for advice and assistance on any medical issue.

Services are available after hours when there is no medical emergency but medical care is required. Information about finding the closest general practitioners (GP) after-hours service is listed in the *Useful resources* below. You should check with this service about the cost of a visit.

## Urgent medical attention

If a child or young person in your care is having a medical emergency you should dial 000 or should take them immediately to the closest emergency department in a public hospital.

If a child or young person in your care requires urgent medical attention or a health intervention where consent is required, such as surgery, you must contact your agency, who will consult child protection prior to providing consent. A senior manager within your agency is authorised to provide consent. If you are unable to contact your agency, the treating doctor can make a decision.

### Useful resources

* [Better Health Channel – after-hours healthcare options](https://www.betterhealth.vic.gov.au/health/servicesandsupport/after-hours-healthcare-options) [https://www.betterhealth.vic.gov.au/health/servicesandsupport/after-hours-healthcare-options]
* [Health Direct](https://www.healthdirect.gov.au/after-hours-gp-helpline) [https://www.healthdirect.gov.au/after-hours-gp-helpline] – after-hours GP health line
* NURSE-ON-CALL – is a phone service that provides immediate, expert health advice from a registered nurse, 24 hours a day, seven days a week. This helpline is free and can be accessed for the cost of a local or mobile phone call: 1300 60 60 24.
	+ To find your [closest public hospital](https://www2.health.vic.gov.au/hospitals-and-health-services/public-hospitals-victoria) [https://www2.health.vic.gov.au/hospitals-and-health-services/public-hospitals-victoria]

## Sexual health

Supporting children and young people with their sexual health is important. Research shows that most young people in years 10 to 12 in secondary school are sexually active, to varying degrees. Worryingly, most teenagers are not practising safe sex, leading to concerns around unwanted pregnancies and sexually transmitted infections.

### Sex education

Abuse experiences can make the task of sex education a delicate one, as it may revive painful memories, but it is important that it is actively addressed. Children and young people need to know about safe touch and safe sex, including information about contraception and the prevention of sexually transmitted infections, if age appropriate.

It is important that young people develop an understanding of non-exploitative sexual relationships. When addressing a child or young person’s sex education, you need to understand whether they have adequate age-appropriate knowledge about sexual development, and if applicable, contraception and sexual health. You and the care team should discuss who the most suitable person to provide this education is.

### Steps for building resilience and protection against sexual harm

The following summarises the key steps that you can take to build resilience and protect children and young people from sexual harm including:

* Inform them that it is wrong for adults to touch them inappropriately and to engage in sexual activity with them.
* Encourage them to feel comfortable telling you anything, especially if it involves another adult, and ask them to identify other trusted adults they can talk to in confidence.
* Learn about the people with whom they are spending time.
* Teach them about their bodies. Knowledge is power. Give them the correct language to use when describing their private parts, and emphasise that those parts are private. This will make them more at ease if they need to tell you about a touch that made them feel uncomfortable. If a child or young person uses other words to describe their private parts, you may misinterpret something important that they are trying to tell you.
* If you attend or participate in their activities, you will have a better opportunity to observe how the adults in charge interact with them. If you are concerned about anyone’s behaviour, take it up with the organisation running the activities or your agency.
* Notice when someone shows them a great deal of attention or begins giving them gifts. Take time to talk to them and find out why the person is acting in this way.
* Teach them that they have the right to say no to any unwelcome, uncomfortable, or confusing touch or actions by others. Ask them to tell you immediately if this happens. Reassure them that you are there to help and it is okay to tell you anything.
* Be sensitive to any changes in their behaviour or attitude. Encourage open communication and learn how to be an active listener. Look and listen to small cues and clues that something may be troubling them, because they are not always comfortable disclosing disturbing events or feelings. This may be because they are concerned about your reaction to their problems. If they do confide problems to you, try to remain calm, non-critical, and non-judgmental. Listen compassionately to their concerns and work with them to get the help they need to resolve the problem.
* Practice basic safety skills with them. Make an outing to a shopping centre or a park a ‘teachable’ experience in which they can practice checking with you, going to the bathroom with a friend, and locating the adults to go to if they need assistance.
	+ Be aware of safe internet practices. Teach them never to give out their last name, address, or phone number to a person online, and never meet friends made online in person, without your supervision and consent. Help them choose an online name that does not disclose information about their location. Teach them not to post pictures with identifying information, such as a school uniform.

Sourced from [Bravehearts](https://bravehearts.org.au/services/for-young-people/) [https://bravehearts.org.au/services/for-young-people/]; an organisation that aims to educate and protect children and young people from sexual assault

#### Sexualised behaviours

Sexualised play and sexual behaviours may be normal in children and young people as they explore who they are, test boundaries and work out what is and is not acceptable behaviour. Children are usually easy to distract away from these behaviours, and their accompanying emotions and expressions of age-appropriate sexual play include laughter, spontaneity, curiosity and experimentation. Age-appropriate sexual behaviours do not require intervention by professionals. As a carer of children and young people who have often experienced trauma and abuse, you must always be sensitive to the possibility that the child is expressing some past or current sexual trauma through their behaviour. If unsure and the behaviour is persistent despite clear requests to stop or the content of the behaviour is concerning, seek advice from your agency.

See ***Information sheet 9: Age-appropriate sexual behaviours***for a description of age- appropriate sexual behaviour in children and young people. Speak to your agency if you are unsure about any behaviours or need help addressing sexualised behaviours. For information on sexual exploitation, grooming, sexual assault services and responding to disclosures of sexual abuse, see *Chapter 15. Critical incidents*.

### Useful resources

* [Bravehearts](https://bravehearts.org.au/services/for-young-people/) [https://bravehearts.org.au/services/for-young-people/]
* [Family Planning Victoria](http://www.fpv.org.au/) [http://www.fpv.org.au/] provides a range of information about sexual and reproductive health
* Sexual education, check the website
* Sexualised behaviour – visit [South East Centre Against Sexual Assault](http://www.secasa.com.au/pages/age-appropriate-sexual-behaviour-guide/classify-the-behaviour/) [http://www.secasa.com.au/pages/age-appropriate-sexual-behaviour-guide/classify-the-behaviour/]
	+ [Teenagers and sex](https://www.betterhealth.vic.gov.au/health/healthyliving/teenagers-and-sexual-issues) [https://www.betterhealth.vic.gov.au/health/healthyliving/teenagers-and-sexual-issues]

[Pull out text] ‘It’s ok to not be ok – if we are upset or anxious, it’s ok – teach us how to know our emotions and validate these.’ CREATE Young Consultants

## Mental health

Children and young people in out-of-home care are at increased risk of mental health problems due to their experiences of trauma and separation. Many services and sectors are involved directly or indirectly in promoting and restoring child and youth mental health. Talk to your agency if you have concerns about their mental health.

Health services, including community health counselling services, student wellbeing and support staff in schools, general practitioners, psychologists, allied health services and school nurses, are typically the first health point of contact for people seeking help. All these services provide interventions for children and young people with mild to moderate and relatively uncomplicated mental health problems. They may also provide consultation and sometimes urgent access for those with more severe problems.

Paediatricians and professionals in private practice (such as psychiatrists and psychologists) are a substantial mental health resource. They provide more specialist care to children and young people with a broad range of moderate and severe emotional and behavioural problems and mental health problems, including mood and eating disorders.

Specialist mental health services provide assessment and treatment for people with moderate to severe problems and disorders, from significant psychological distress and risk, to severe and complex disorders. A specialist mental health assessment of a child or young person may be useful where they are presenting with challenging, difficult or concerning behaviours, such as:

* prolonged unhappiness, anxiety, anger
* serious sleeping or eating problems
* social withdrawal, refusal to attend school
* displaying unusual or odd behaviours (hearing voices)
* suicidal thoughts or self-harming behaviours.

### Useful resources

* [Assessments and treatment](http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/health-medical/mental-health-assessments-and-treatment) [http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/health-medical/mental-health-assessments-and-treatment] – see the Child protection
* [Chief Psychiatrist’s](http://www.cpmanual.vic.gov.au/advice-and-protocols/protocols/education-medical/mental-health) [http://www.cpmanual.vic.gov.au/advice-and-protocols/protocols/education-medical/mental-health] - guidelines to mental health services on implementing priority service access for infants, children and young people who are placed in out-of-home care
* [headspace](https://headspace.org.au/) [https://headspace.org.au/] is the National Youth Mental Health Foundation providing early intervention mental health services to 12–25 year olds, along with assistance in promoting young peoples’ wellbeing
* To find your local [mental health service](http://www.health.vic.gov.au/mentalhealthservices/child/index.htm) [http://www.health.vic.gov.au/mentalhealthservices/child/index.htm]

## Alcohol and other drug treatment services

Drug and alcohol use can be an issue for children and young people in out-of-home care. Research indicates that substance abuse often masks trauma and emotional pain associated with the experience of abuse.

The goal of all alcohol and other drug treatment services is harm minimisation, which aims to reduce the harmful effects of alcohol and other drug use on individuals and communities. Alcohol and other drug treatment services recognise that the capacity and circumstances of a person will influence their recovery journey. For some, reducing the level, frequency and harm associated with alcohol and other drug use may be more attainable in the short term than abstinence.

Any support provided to a child or young person with alcohol or other drug use needs to take the impact of abuse and neglect into consideration. There are specialist alcohol and other drug services available across Victoria that address these issues.

Talk to your agency about local services that support the needs of the child or young person in your care. If you think they may need treatment, there are services you can contact as a carer for advice and referral.

The [Out-of-Home Care Toolbox](http://oohctoolbox.org.au/) [http://oohctoolbox.org.au/] provides easily accessible and effective information for the carers of young people (12–18) in out-of- home care.

Youth Support and Advocacy Service (YSAS) supports highly vulnerable and high-risk young people with substance dependence and misuse issues, mental illness and social disconnection.

Through assertive outreach, residential withdrawal and rehabilitation, supported housing, day programs and social enterprise, [YSAS](http://www.ysas.org.au/) [http://www.ysas.org.au/] provides treatment services and enables re-engagement with education and training, families and communities.

[Youth, Drugs and Alcohol Advice](http://yodaa.org.au/) [http://yodaa.org.au/] (YODAA) provides young people with alcohol and drug information, support options, a service finder and options for self-help. It also provides information, tools and advice for carers and professionals. Call 1800 458 685.

DirectLine is a 24-hour, seven days a week telephone and online service that supports people seeking alcohol and other drug information, advice or referral to treatment. It is a statewide point of access to the alcohol and other drug treatment system, offering confidential advice and support to alcohol and drug users, their family and friends. Call 1800 888 236 or visit [www.directline.org.au/service-finder.](http://www.directline.org.au/service-finder)

If you have concerns about any drug and alcohol use by a child or young person in your care, talk to your agency. If you have immediate concern for their presentation and health, call 000 for an ambulance.

# 12. A safe environment

## Creating a safe environment

A home safety check is a requirement of your accreditation as a carer. Creating a safe environment is as important as creating a welcoming environment for a child or young person coming into your care.

### Annual home and environment checks

Your agency will conduct annual home and environment checks. Talk to your agency if you have any questions about this process.

Kidsafe is a non-government organisation that has resources for making homes, roads and pools safe for children and young people. Kidsafe is dedicated to preventing unintentional childhood injuries and reducing the deaths and disabilities associated with injuries in children under the age of 15 years visit [Kidsafe](http://www.kidsafe.com.au/) [http://www.kidsafe.com.au/]

#### Blind and curtain cords

Check your blind and curtain cord safety. Children have died in Australia from strangling themselves with a cord. A free safety kit is available from Consumer Affairs Victoria.

#### Flat screen TVs

To avoid a flat screen TV falling and hurting a child or young person, it is recommended that the screen is secured. This can be done by mounting the TV on the wall, or there are safety straps available to secure the TV to a cabinet or a wall (refer to the manufacturer’s instructions).

#### **Child restraints and where a child sits in the car**

Keep up to date with the current regulations about child restraints for cars.

In Victoria, depending on a child’s height and weight:

* A child under six months of age must travel in a rearward-facing approved child restraint.
* A child aged six months to under four years must travel in either a rearward- facing or forward-facing approved child restraint.
* A child aged four years to under seven years must travel in either a forward-facing approved child restraint with an inbuilt harness or an approved booster seat. These can have different harness types.
* A child aged seven years to under 16 years must travel in either an approved booster seat or an adult seatbelt.
	+ A person 16 years and over must travel in an adult seatbelt

A child restraint is not considered ‘approved’ for road rule compliance if it becomes too old. There are guidelines permitting the use of restraint products that are more than 10 years old. Some products have an expiry date stamped into them for guidance.

Children under the age of four years must only travel in the back seat of a vehicle. Children aged seven years and over can travel in the front seat. However, research shows that children under 12 years are much safer travelling in the back seat. See Useful resources for further information

### Fire plans

Protecting the child or young person in your care from the risk of fire is paramount. The types of things that are included in your annual home and environment check include:

* installation and maintenance of smoke detectors
* the availability of escape routes through doors and windows
* the availability of fire blankets and extinguishers where necessary
* evacuation plans
* safe storage of matches and lighters
	+ fire guards fitted to open fires

Talk to your agency if you need support to create a fire safety plan.

If you are caring for a child or young person on a child protection order or managed by child protection, and your home is located in one of the Victorian Fire Risk Register extreme fire risk areas or is assessed as being a high bushfire risk area, you must have an up-to-date Client Bushfire Leaving Early Plan for days that are declared code red.

Your agency case worker and child protection worker will help you to develop the Client Bushfire Leaving Early Pan, which you are required to follow in the event of a code red day.

In these circumstances, the department will direct you to leave your property the day before a code red day and relocate, unless you have an exemption. You are responsible for enacting the leaving early plans and to report no later than 9 am on the code red day that you have relocated

#### Code red days

A code red day signifies the worst conditions for bushfires and grassfires. Homes are not designed to withstand fires in these conditions. The safest place to be is away from high-risk bushfire areas. If you have a child or young person in your care, your leaving early plan must outline your arrangements for leaving the night before a code red day.

Swimming pools and spas

Drowning is one of the major causes of accidental deaths in Australia. Toddlers can drown in as little as a few centimetres of water. It is crucial that when children and young people are near any water, they are supervised by a responsible adult at all times.

If you have a pool or spa at your home, you will need to be compliant with Victorian Building Authority pool and spa fence safety requirements. The Home Safety Check will focus on all safety aspects of pools, spas, ponds or dams on a property.

## Insurance and property damage

The Victorian Managed Insurance Authority (VMIA) is the insurer for the department, which has established a Volunteer Care Givers insurance cover. It applies to foster care, kinship care or pre-permanent care arrangements, and provides cover where, during a period of care, a child or young person causes damage to your property, either through accident, theft or malice.

Your agency and child protection should provide the VMIA with your details to assist with any claims. If you need to make a claim, speak to your agency about this process or contact the VMIA. Call 03 9270 6900 or email contact@vmia.vic.gov.au.

### Useful resources

* Blinds and cords, check the website
* [Child restraints](https://www.vicroads.vic.gov.au/safety-and-road-rules) [https://www.vicroads.vic.gov.au/safety-and-road-rules
* Emergency preparedness policy for clients and services, check the website
* Making an insurance claim – for more information, see the [Child protection manual](http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/out-home-care/administration/insurance-claims) [http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/out-home-care/administration/insurance-claims]
* [Pool fence safety regulations](https://www.kidsafevic.com.au/water-safety/pool-fence-safety/pool-fencing-laws) [https://www.kidsafevic.com.au/water-safety/pool-fence-safety/pool-fencing-laws]

# 13. Young people transitioning to independence

## **Planning for independence**

Young people leave out-of-home care at various ages and for various reasons. Those who are moving from out-of-home care to independence are a particularly vulnerable group in our community. They often have to develop independent living skills and manage on their own much earlier than other young people.

You can play an important role in preparing young people for their future as independent adults, by building their independence skills from the time they enter your care.

### Moving to independence done well

* ‘Letting the bird fly: independence is a good thing for young people that can be celebrated when they are prepared well.’
* ‘I was so excited to set up my own home. It gives you a sense of belonging by having your own home. You need to have skills though so you don’t get huge bills and get into trouble.’
* ‘You need to be supported at a young age because you need to hear the same message over and over. It takes time to sink in so that it becomes second nature.’
	+ ‘Link young people into services so they know where to go if they get stuck’

CREATE Young Consultants’

[Pull out text] ‘These young people may be excited about the prospect of leaving care, but they don’t have the supports other 18 year olds have. They need lots of preparation and support prior to this. It’s important to be well informed about and included in the Care and Transition Plan.’ Sarah, agency case worker, seven years

[Pull out text] You hold their hand, they hold your heart. You keep them safe and loved. Their future is bright, they will achieve big things. You are but a page in the big picture of this.’ Deborah, foster carer, three years

[Pull out text] ‘I had coping skills, but I needed living skills. When you have a parent they guide you – I didn’t have that. You can stop the hard life by helping young people build a life they are proud of.’ CREATE Young Consultants

[Pull out text] ‘Becoming independent isn’t just one big conversation; it can’t just be thrown at you. Carers need to do it bit by bit and check in on the young person’s feelings about it as well.’ CREATE Young Consultants

When a young person is preparing to leave your care and move into another living situation, they require significant planning and support. Conversations around their transition need to happen well ahead of the time they will be moving, to make sure that post-care support services are in place, and the young person is as prepared as possible for independence.

This section outlines the transition planning process, which aims to prepare young people for their future and equip them with the capacity to live independently.

### Looking After Children Care and Transition Plan

The Looking After Children framework can be used to help consider the needs of young people as they prepare to transition from your care. It provides the processes and tools for you and everyone on the care team to work together, to ensure that the young person’s safety, stability and developmental needs are met.

For young people from 15 years of age, the Looking After Children Care and Transition Plan is used instead of the Care and Placement Plan.

This tool aims to provide the young person’s care team with support for:

* best practice approaches and processes to prepare and support young people transitioning from out-of-home care
* a strong, developmentally based framework that supports young people to develop the skills and resources to grow into mature young adults who are able to participate fully in community life
	+ a flexible, accessible service planning response that provides a bridge for young people from care to post-care services, and to independence.

[Pull out text]’Help young people to collect little things like cutlery, tea towels – these small things add up.’ CREATE Young Consultants

### Scheduled moves

Young people usually leave care on a scheduled date. A planned move is ideal for the young person, and for you and your family, because it allows you to work with the young person and the agency to prepare a transition plan, and to have supports in place for them, well before they leave care.

At times, a young person may choose to move on more quickly than planned, as they attempt to manage their emotions and take control of their situation.

While you are supporting the young person through this significant and often stressful time in their life, make sure you also take time to look after yourself. Grief and loss is real in any situation of separation. Talk to your agency and seek out other carers, who are likely to understand what you are experiencing.

### Access to information

Questions around a young person’s background and identity may arise at any time. It can be useful to talk to them about how they can apply for access to their departmental records while in out-of-home care, or at any point after they leave care.

A young person can request access from foster care agencies that hold records relating to them. Requests for access can also be directed to the department’s Freedom of Information Unit. Call 1300 650 172 or 03 9096 8449. There is no cost for a young person who has been in care to access their own information under Freedom of Information.

[Pull out text] ’Foster carers often continue to provide support to children well after the child has reached adulthood. One of the most rewarding experiences as a worker has been recently when one of our young adolescents went to permanent care through foster care conversion at the age of 17 and a half. For the young person and for the foster care family, it was celebration of a forever commitment and a celebration of love.’ Viv, child protection worker, 13 years

[Pull out text] ’Young people need really basic and practical information about how to get by when things are tough. Things like which gas and electricity company to choose and how to get these connected. Things can be overwhelming and make a big difference on our confidence and how we cope when we become independent.’ CREATE Young Consultants

### Getting a driver licence

At age 16, a young person is able to get a learner permit that allows them to drive on the road with an experienced driver. They will need to complete 120 hours of supervised driving, including 10 hours at night, and record it in a learner log book. They will also need to have held a learner permit for at least 12 months, immediately prior to applying for a probationary driver license.

Whether you directly provide driving lessons for the young person is your choice. Ask your agency if they have any suggestions or recommendations about this.

VicRoads has an L2P learner driver mentor program, which helps learners under 21 years, who do not have access to a supervising driver or vehicle, to gain the driving experience required to apply for a probationary license. There is also the potential of accessing leaving care brokerage to buy some driving lessons, which you can discuss with your agency case worker.

#### Planning to leave

To ensure that young people are well prepared for immediate and long-term challenges, help them to consider:

* Who can they turn to for support once they leave care?
* What will they do when they leave care – will they be studying, in an apprenticeship or working?
* What support do they have to help them – how will they get to work or study, will work or study conflict with other responsibilities, and how can this be resolved?
* Where and who will they live with and what help do they need to set up their own home?
* What financial resources do they need – will they receive income support, are they required to study, be in an apprenticeship or work to receive income support?
* Where will they receive health or other services they require?
* Do they have the skills to look after themselves – such as shopping, cooking, cleaning and budgeting?
	+ Do they know how to access services?

#### Personal belongings

The young person who is transitioning out of care will need to take practical things with them when they leave, and they may need your help. You have a responsibility to make sure that when a young person leaves your care, they can take all their personal belongings, including:

* identification (ID)
* health records, birth certificate, Medicare card and Health Care Card (which can also be used as ID)
* personal items
* items purchased for them, such as clothing, bedding or equipment
	+ money that they have saved or earned.

## Leaving care services

There are a range of services that young people can access to support their move from care. Make sure that the young person who is leaving your care is aware of these services and help them access them if required.

### CREATE Foundation

CREATE Foundation is the national peak consumer body representing the voices of children and young people with an out-of- home care experience. CREATE connect children and young people to each other and their community through their club CREATE membership program. Children and young people have access to connection events and receive birthday cards, magazines, Entering Care Kits and Welcome Packs.

CREATE can support you in empowering the children and young people in your care to build self-confidence, self-esteem and skills that enable them to have a voice and be heard through programs such as Speak Up, CREATE Your Future, Youth Advisory Groups and Case Worker Training.

### Go Your Own Way kit

A Go Your Own Way (leaving care) kit is a resource for young people aged 15 and older, who are starting to plan for their transition to adulthood and independence. The kit has resources, information and useful links to help you and the young person plan for a successful transition. If they have not received a kit, either you or the case worker can contact the CREATE foundation. Call 1800 655 105 or email CREATE [victoria@create.org.au]

### Leaving care hotline

The leaving care hotline is managed by Melbourne City Mission’s Frontyard and is for young people and their carers. The hotline connects young people to their nearest post-care support program and helps with immediate issues, including crisis accommodation. Call 1300 532 846 or email Leaving care hotline [leavingcare@dhhs.vic.gov.au]

#### Sortli

Sortli (short for ‘sort out your life’) is a free mobile app for young people to help with the transition to independence. The app was designed by young people at CREATE and focuses on:

* identity
* relationships
* finding a place to live
* health
* finances
* gaining education and looking for a job
	+ general living skills.

The app is available on Apple, Android or Microsoft mobile devices.

[Pull out text] ’Budgeting is a really important thing we need to know and makes a huge difference.’ CREATE Young Consultants

### Transition to Independent Living Allowance (TILA)

This is a one-off payment from the Commonwealth Government to help young people aged 15–25 years who are leaving out-of-home-care. Funding of up to $1,500 can be used towards the costs involved in moving to independent living.

#### Help for young people leaving care

Help is available for young people who are leaving or have left out-of-home care in Victoria. The young person may need:

* help to stay in education or return to studying
* help to look for a job, or apply for on-the-job (vocational) training
* help or advice to keep a current job
* help to find accommodation or to stay in existing accommodation
* support to reconnect with family
	+ some financial help to maintain independence, if they have already left state care.

Young people can receive support from a case worker, as well as access to brokerage money for items such as accommodation, recreation, education and health. This support is accessed by the child protection case manager, who completes the form, which is then forwarded to the most appropriate agency.

It gives the young person access to the Leaving Care Mentoring Program, which aims to provide young people transitioning from care with opportunities to interact with adults in community settings. It promotes personal relationships and friendships that continue after they have left care, to help avoid social isolation.

### Support for Aboriginal young people leaving care

Aboriginal young people can access the leaving care program through Aboriginal Community Care Organisations to support their transition to independent living.

### Keeping in contact

Keeping in touch may be a good idea for you, your family and the young person. Discuss this with the young person and their care team. The agreed arrangements will be included in their Care and Transition Plans.

[Pull out text] ‘If it works for you, let the young person know it is still a home for them – a place where they can drop in if they want to and spend Christmas or celebrate special occasion or to get support.’ CREATE Young Consultants

### Useful resources

* A list of services that can help the young person with issues such as housing or education, check the website.
* [CREATE](http://create.org.au/) [http://create.org.au/] – the national body creating a better life for children and young people in the care system, call 1800 655 105
* Freedom of information request, check the website
* Leaving care and post-care support request form at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* Transitioning from out-of-home care: support for Aboriginal young people at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* Transition to independent living allowance – for information about the allowance and the application process, check the website
* VicRoads L2P Learner Driver Mentor Program, check the website 137

# 14. Child protection and the Children’s Court

## **The role of child protection**

When a child or young person is at risk of significant harm or unable to live with their parents, due to concerns for their safety and wellbeing, child protection provides services to protect children and young people from significant harm under the Children, Youth and Families Act.

Child protection will take all reasonable steps to enable the child or young person to stay at home with their own family, where it is safe to do so. However, there are children and young people who are placed in out-of-home care for their own safety and wellbeing.

Children and young people who come into your care will usually be on an interim accommodation order or a protection order made by the Children’s Court.

## **The role of the Children’s Court**

In Victoria, the Family Division of the Children’s Court decides whether a child or young person is in need of protection, and makes the appropriate protection order. Court proceedings are almost always initiated by child protection.

In some circumstances, a child or young person may be placed in care by a bail justice. A bail justice hearing occurs when a child or young person is taken into emergency care outside court sitting hours. The emergency care application is then heard in the Children’s Court on the next working day.

The Family Court of Australia is separate from the Children’s Court and administers Australia’s family law. A protection order takes priority over a Family Court order.

### Protection orders

The child or young person in your care will be on one of the orders in Table 4, made by the Children’s Court for the protection and care of children and young people. As a carer, you can expect to know what has been decided by the Court, and you can expect to be provided with a copy of the protection order.

Table 4. Types of protection orders

|  |  |
| --- | --- |
| Interim accommodation order | This order is made when the magistrate at the Children’s Court believes there are issues to be resolved about a child or young person’s safety and wellbeing. The order specifies where they will live until the next court date. |
| Family preservation order | The Court will make a family preservation order when it has decided that a child or young person is in need of protection, and can safely stay in parental care while the protective concerns are being addressed. The childor young person will live with one or both parents with no change to parental responsibility for them. The department will supervise them. |
| Family reunification order  | The Court has decided that a child or young person is in need of protection and cannot safely stay in their parents’ care while the protective concerns are being addressed.The family reunification order grants parental responsibility for the child or young person to the Secretary of the department, but a parent’s agreement must be sought for any decisions about major long-term issues. This order will usually include conditions. |

|  |  |
| --- | --- |
| Care by Secretary order | The Court has decided that family reunification will not be achieved in a timely way for the child or young person, or the child or young person has been in out-of-home care for more than 24 months and cannot safely return to their parents’ care.This order is made for a period of two years and the Secretary of the department has parental responsibility for the child or young person, to the exclusion of all others. This order does not include conditions. |
| Long-term care order | The Court has decided that the child or young person is in need of long-term care and there is a suitable carer available to raise the child or young person. Under this order the Secretary of the department has parental responsibility for the child or young person, to the exclusion of all others, until the child or young person turns 18 or marries, whichever happens first. |
| Permanent care order | The Court has found proposed permanent carers suitable to have parental responsibility for the child or young person to the exclusion of all others, until the child or young person turns 18 or marries, whichever happens first.Apart from the care allowance, once issued the department has no further role with the child or young person or carers. The order must include a condition that a person caring for a child must, in the best interests of the child, preserve the child’s identity and connection to their culture of origin and the child’s relationships with their birth parents and family, unless the Court decides otherwise. |
| Undertaking –protection order | The Court has decided that a child or young person is in need of protection and that future risks can be sufficiently managed by the parent and child or young person with community support. The undertaking may include conditions. The department does not stay involved when an undertakingis made. An undertaking may require the child or young person, their parent(s) or the person with whom the child or young person is living to undertake in writing to do, or refrain from doing, actions specified in the undertaking. An undertaking can only be made if the person entering into the undertaking consents to the order. |

## Attending court hearings

The court process can be a complex and stressful process for children and young people, but it can also be daunting for you and the child or young person’s family.

### Attendance by carers

A decision made by a carer to attend court can be complicated and may not be in the best interests of you or the child or young person. You will need to consider this carefully and discuss your decision with your agency.

The giving of evidence by a carer rarely happens and is not standard practice. However, if for some reason, you think giving evidence is appropriate, please discuss this with your agency, as there are many factors to consider.

In some instances, a carer may ask the Court to be party to the proceedings, or they may be requested by the Court to be involved. This is not a common occurrence, but it can happen when a carer has been caring for the child or young person for a significant period of time.

Attendance by the child or young person

All children and young people should be given the opportunity to decide whether or not to attend court. They are not required to attend unless they:

* wish to do so
	+ are ordered by the Court to attend.

All children and young people aged 10 years or older will be legally represented in proceedings in the Family Division of the Children’s Court, except where the Court determines that the child or young person is developmentally not able to provide instructions. A child under 10 years or a child over 10 years or more whom the Court has determined is not able to give instructions, may be legally represented if the Court determines it is in the best interests of the child or young person.

If the child or young person decides not to attend court, they must still provide their instructions to a legal representative, and this is arranged away from the Court by their case manager. Phone instructions may be provided with the prior agreement of the child or young person’s legal representative.

If the child and young person is required or chooses to attend the court, they may see their parents, siblings or other family members. If this is a concern for them, discuss this with the agency so plans can be made to support them. If a child or young person does decide to go to court, or is required to attend court, child protection or the agency will arrange transport them.

### Preparing a child or young person attending court

To help children and young people who want to attend court with the agency case worker, find out some details such as:

* Who will be at court, such as family members, lawyers, court staff?
* What is everyone’s role in court, such as the magistrate, the clerk, and the lawyers?
* What is the department recommending about their care and why?
* What will be expected of them?
	+ How long will the process take?

#### Supporting the child or young person when they attend court

A child or young person in your care may need a lot of support from you if they have to attend court. While at court, they may hear discussions about why they are not living with their family. This could be upsetting to them and they may need extra emotional support following court. You should also prepare the child or young person for the possibility that their parents may not attend court.

If a child or young person is required or wishes to attend court, there are strategies you can use to help them lessen feelings of being stressed, pressured, confused or bored. For example, take quiet activities to court, such as colouring or reading, some snacks and drinks, as there can be lengthy waiting times. Talk to the agency case worker or child protection worker if you think the child or young person is feeling stressed or pressured.

The agency case worker will advise you and the child or young person of the outcome of the proceedings. You may find that they do not fully understand the outcome and have more questions. If you find this is the case, please raise any questions with your agency.

## Court processes

At court, legal representatives for child protection, the child or young person, and the parents of the child or young person will advocate on behalf of their client and present their client’s views about the child or young person’s ongoing care. The magistrate makes a decision based on the information presented.

Child protection prepares a detailed report for the Court that outlines their assessment of the family situation, their recommendations about care for the child or young person, and the type of protection order they think is best for them. Also submitted to the Court at this time is the child or young person’s case plan, which covers significant decisions about the child or young person. Case plans are covered in more detail in Chapter 5. Planning, decision-making and case management for a child or young person in your care and **Information sheet 5: Case planning, case management, roles and responsibilities.**

Child protection base their report and case plan on information gathered from many sources, including you as the carer. You are in the unique position to gain insight into the needs of the child or young person in your care. You can present your views during care team meetings, or your agency will advise child protection about your views.

Child protection cannot give a copy of the court report to you, the agency or other service, including the police, without consent of the child or young person, or their parents. This means copies of the court reports are not provided to you.

### When asked for a child or young person’s protection order

You may be asked by childcare, schools or other professionals for a copy of the child or young person’s protection order. Let them know they can seek the necessary paperwork they require directly from child protection or you could also ask your agency to gather this information.

### Useful resources

* [Children’s Court](http://www.childrenscourt.vic.gov.au/jurisdictions/child-protection) [http://www.childrenscourt.vic.gov.au/jurisdictions/child-protection]
* [Country Courts](http://www.childrenscourt.vic.gov.au/about-us/court-locations/country-courts) [http://www.childrenscourt.vic.gov.au/about-us/court-locations/country-courts] where Children’s Court matters are heard
* Legal representation for children and young people – see the Child protection manual, check the website.
* [Metropolitan Courts](http://www.childrenscourt.vic.gov.au/about-us/court-locations/metropolitan-courts) [http://www.childrenscourt.vic.gov.au/about-us/court-locations/metropolitan-courts] where Children’s Court matters are heard
	+ Relationship between family law and child protection – see [The Australian Law Reform Commission](http://www.alrc.gov.au/) [http://www.alrc.gov.au/]. Go to the Publications section to access The intersection of child protection and family laws.

# 15. Critical incidents

## Crisis support

Your agency will provide you with crisis support when you have been challenged by a child or young person’s behaviour, or you find yourself in an emergency situation.

If you need urgent support during business hours (Monday to Friday, 9 am to 5 pm), contact your agency case worker or ask to speak to the duty worker or manager, if your case worker is not available.

For crisis support out-of-hours, contact your agency via their on-call or out-of-hours contact number.

### Agency telephone numbers:

Business hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

After hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Other contacts

**Child Protection After Hours Emergency Service, call 13 12 78**

This is an emergency service from 5 pm to 8.45 am, Monday to Friday, including 24 hours a day on weekends and public holidays. This service has responsibility for children or young people in need of a child protection service response after hours, where a child and young person is in a situation that cannot safely be left until the next working day.

**Kids Helpline, call 1800 55 1800**

[Kids Helpline](https://kidshelpline.com.au/) [https://kidshelpline.com.au/] is Australia’s only free, 24 hours a day, seven days a week phone and online counselling service for young people aged five to 25.

**Lifeline, call 13 11 14**

Lifeline is a confidential telephone crisis support service that is available 24 hours a day, seven days a week, from a landline, payphone or mobile. Anyone across Australia experiencing personal crisis or thinking about suicide can contact Lifeline. Regardless of age, gender, ethnicity, religion or sexual orientation, trained volunteers are ready to listen, provide support and give referrals.

**Maternal and Child Health Line, call 13 22 29**

This is a 24 hours a day, seven days a week state-wide telephone service that supports the maternal and child health service, and is available to Victorian families with children from birth to school age.

**NURSE-ON-CALL, call 1300 60 60 24**

NURSE-ON-CALL is a phone service that provides immediate, expert health advice from a registered nurse, 24 hours a day, seven days a week. The cost is a local call from anywhere in Victoria (calls from mobile phones may be charged at a higher rate). For more information, visit [www2.health.vic.gov.au/primary-and-community-health/primary-care/nurse-on-call.](https://www2.health.vic.gov.au/primary-and-community-health/primary-care/nurse-on-call)

**Police/Fire/Ambulance, call 000 or go to an emergency department at a hospital.**

**Suicide Helpline Victoria, call 1300 651 251**

Suicide Helpline is a free, professional, anonymous support line, available 24 hours a day, seven days a week across Victoria.

**Victorian Poisons Information Centre, call 13 11 26**

The poisons centre provides advice about what to do if a person has been poisoned, has overdosed, has made a mistake with medication dosage, been exposed to a toxic substance, or been bitten or stung by a venomous animal or insect.

## What to do during a critical incident

When a serious incident occurs that involves a child or young person in your care, contact your agency as soon as possible. This will ensure that you receive the support you need after the incident, and it will also help the agency to follow their critical incident reporting procedure, and to decide if it requires compulsory reporting.

### What is a critical incident?

Critical incidents include:

* when the child or young person is absent or missing
* behaviours that are dangerous, disruptive, sexual or sexually exploitative
* a breach of privacy or confidentiality
* a community concern involving a child or young person
* the death of a person that impacts the child or young person
* drug or alcohol misuse
* an unforeseen illness
* actions or behaviours that have caused injury that requires medical attention
* deterioration in a known medical condition
* medication errors or refusal of prescribed medication
* physical assault poor quality of care
* possession of illegal or unauthorised goods
* property damage or disruption
* self-harm
* a suicide attempt
	+ sexual assault.

### Missing persons reports

The whereabouts of a child or young person in out-of-home care should be known at all times. If their whereabouts is unknown, you must advise your agency to discuss whether a missing persons report is to be lodged and to decide who is going to lodge the missing persons report with police.

The police will want to know where you have looked for the child or young person, and who you have contacted in search of them.

If you make a missing persons report, you need to:

* go to the local police station to make a missing persons report, providing a description of the child or young person, what they were wearing, their weight, height, eye and hair colour. It is helpful if you have a recent photo
* provide police with a contact name and phone number, as well as an after-hours contact
* ask police to inform child protection when the child or young person is located
	+ advise police of child protection’s proposed plan and care arrangement for the child or young person when found.

## Sexual abuse and sexual assault

It is an offence for any adult to fail to disclose child sexual abuse to the police. The offence requires that any adult who holds a reasonable belief that a sexual offence has been committed in Victoria by an adult against a child (aged under 16) disclose that information to police. The offence applies to all adults, not just professionals who work with children, unless they have a reasonable excuse.

A child or young person is sexually abused when any person uses their power over the child or young person to involve them in sexual activity. Child sexual abuse involves a wide range of sexual activity.

It may include:

* fondling of the child or young person’s genitals (or getting the child or young person to fondle the perpetrator’s genitals)
* masturbation (with the child or young person as either observer or participant)
* oral sex
* vaginal or anal penetration by a penis, finger, or any other object
* fondling of breasts
* voyeurism (regular observation of the child or young person)
	+ exhibitionism.

It can also include exposing the child or young person to pornography, or using them for the purposes of pornography or sexual exploitation.

Children and young people lack the necessary information and maturity to make an ‘informed’ decision about sexual activities with an older person. They do not have adult knowledge of sex and sexual relationships, or the social meaning of sexuality and its potential consequences.

Sexual assault happens when someone of any age does not consent to a sexual act or acts. In some cases, such as offences against children and young people, consent is not accepted. It happens more frequently than people realise, and it is a crime that can happen at any time throughout a person’s lifespan.

## Sexual exploitation

Children and young people in out-of-home care and those leaving care are at a higher risk of being sexually exploited.

Sexual exploitation is when ‘… children and young people under 18 being involved in exploitative situations, contexts and relationships where the young person (or third person or persons) receive ‘something’(such as food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities’ Tackling child exploitation: helping local authorities to develop local responses (Barnardos 2012).

The factors that increase a child or young person’s vulnerability to sexual exploitation and grooming are similar to the reasons why a child or young person may not be able to reside with their family.

They include:

* exposure to family violence
* parental drug and alcohol use
* parental mental health issues
	+ poor attachment.

Acts of sexual exploitation (such as sexting), grooming for the purposes of sexual exploitation or contact between a child or young person and the person sexually exploiting them can both occur through the use of technology. Sexting between a 14 year old in a ‘relationship’ with a 27 year old or the exchange of child exploitation material (illicit images) between a 14 year old and an adult are examples of sexual exploitation. Supervising or discussing cyber safety is an important part of reducing the risk of sexual exploitation see Chapter 4. Your role in caring for a child or young person on cyber safety.

Understanding and managing these risks can be challenging for carers, child protection, agencies and police.

## Grooming

It is common for a person who intends to sexually exploit a child or young person, to try to build rapport with them to reduce their resistance to sexual exploitation. This is known as ‘grooming behaviour’ and, while difficult to isolate, it is important that you understand this behaviour pattern.

### Grooming behaviour

Grooming behaviour may include:

* inappropriate ‘accidental’ touching
* giving gifts or attention for inappropriate purposes
* exposing the child or young person to pornography or sexual acts (either openly or ‘accidentally’)
* talking about sex inappropriately in front of a child or young person
	+ manipulating a child or young person through threats or the misuse of authority.

## Sexual assault services

Sexual assault services provide direct support for children and young people, who are recent or past victims or survivors of sexual assault.

Services include:

* crisis care for adults
* paediatric forensic medical services for children and young people
* counselling, advocacy and support
	+ specialist consultation.

For advice on what to do if a child or young person discloses a sexual assault to you, see Information sheet 3: Responding to a disclosure of abuse.

### Counselling, advocacy and support

Sexual assault support services for adults, children and young people include counselling services, ranging from counselling following a crisis to longer-term therapeutic treatment, casework, advocacy, information, practical assistance and group work.

Counselling services for children and young people who have been sexually abused include the Gatehouse Centre at The Royal Children’s Hospital, South East Centre Against Sexual Assault (CASA) at the Monash Medical Centre, and therapeutic services available through the Children’s Protection Society. Other CASA locations also provide services to children and young people.

## Responding to a disclosure of sexual abuse

If a child or young person has been sexually abused, they are more likely to disclose this when they start feeling safe. It is important to think about the possibility of a disclosure and how you would respond, before such a situation arises. See **Information sheet 3: Responding to a disclosure of abuse.**

### Useful resources

* Child sexual abuse – Understanding and responding: for professionals working with children who have experienced sexual abuse at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* Forensic medical service – see the Child protection manual at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* **Information sheet 3: Responding to a disclosure of abuse**.
* Offence of failure to disclose child sexual abuse at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* Sexual assault services – see the Child protection manual at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* Sexual exploitation – see the [Child protection manual](http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/high-risk/sexual-exploitation) [http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/high-risk/sexual-exploitation]
	+ [Victoria Police – sexual assault](http://www.police.vic.gov.au/content.asp?Document_ID=43353) [http://www.police.vic.gov.au/content.asp?Document\_ID=43353]

# 16. Issues, compliments and **complaints**

## Issues, compliments and complaints explained

You have the right to raise an issue, provide a compliment or make a complaint about a decision or a situation relating to the care of a child or young person. You can expect that your views and opinions will be taken into consideration and responded to in a way that is:

* transparent
* fair
* accountable
* outcome focused
	+ respectful.

It is important that you feel confident in sharing your concerns with your agency at any time. This is the best way to prevent issues from becoming a bigger problem or a formal complaint.

### Issues

Issues arise from time to time, that may need urgent or immediate action. These can usually be resolved quickly.

Quick and effective resolution is important to:

* enable you, your agency and the department to focus on caring for the child or young person in your care
* minimise any disruption for the child or young person
* ensure your needs are met and you receive the appropriate and expected level of support and assistance to perform your role.
* Prevent the issue form escalating

### **Compliments**

Compliments are expressions of praise, encouragement or gratitude about services provided or managed by your agency, child protection or the department. They provide valuable feedback about the level of satisfaction with service delivery.

Compliments should be acknowledged and the person providing the compliment thanked for their feedback. Where possible, the person providing the compliment will be informed how their feedback will be used and provided assurance that it will be passed on to relevant staff members.

### Complaints

The department uses the following definition of a complaint: ‘an expression of dissatisfaction made to or about an organisation, related to its products, services, staff or the handling of a complaint, where a response or resolution is explicitly or implicitly expected’[[2]](#footnote-2)

If you are unhappy with a process or service provided by your agency, child protection or the department, you can raise a complaint.

## How to raise an issue, provide a compliment or make a complaint

A compliment can be provided directly to your agency case worker, their line manager or alternatively the department at Step 3.

The following steps will help you to raise an issue, provide a compliment or make a complaint. A visual guide for managing your issue, compliment or complaint is provided at the end of this section.

### Step 1 – Discuss your concerns with your agency case worker

Contact your agency case worker to discuss your concerns and to resolve day-to-day issues requiring urgent or immediate action.

If you cannot resolve the issue with your agency case worker, or you are uncomfortable having a discussion with them, contact your agency case worker’s line manager to try to achieve a resolution.

Your agency is best placed to provide support and advice, and to resolve matters on your behalf. They will raise the issue with the department if required. In most instances, issues will be resolved with your agency without the need for further escalation including issues that need urgent or immediate action.

### Step 2 – Register a complaint with your agency

If your issue remains unresolved or you are unhappy about a service provided by your agency case worker or their line manager, you can register a complaint with your agency by following their complaints process.

Your agency is required to provide you with a copy of its complaints policy, following your accreditation as a carer. If you haven’t received this, you should request a copy.

If your complaint relates to an unresolved issue arising from a department action or service, you should refer to Step 3.

### Step 3 – Register a compliment or complaint with the Department of Health and Human Services

If you would like to provide a compliment, are unhappy with how your complaint has been managed by your agency, or the issue relates to an action or service provided by the department that cannot be resolved through Step 1, you can submit a complaint to the department’s Complaints and Privacy Unit.

To do this:

* call 1300 884 706
* email Complaints [complaints.reception@dhhs.vic.gov.au]
* write to Complaints and Privacy Unit, GPO Box 4057, Melbourne VIC 3001
* complete and online complaint form at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* Alternatively, if you know your department divisional office, you can contact the Performance, Quality and Compliance Team in the department by sending an email to:
	+ - north divisional office [north.feedback@dhhs.vic.gov.au]
		- south divisional office [south.feedback@dhhs.vic.gov.au]
		- east divisional office [east.qualitycomplaints@dhhs.vic.gov.au]
			* west divisional office [west.feedback@dhhs.vic.gov.au]

Complaints received by the department are managed in accordance with the department’s Compliments and complaints management policy, which provides important information about how your complaint will be managed, the review and response timeframes and how your complaint will inform improvements in service delivery. To view this policy, visit [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]

### Step 4 – Register a complaint with the Victorian Ombudsman

The Victorian Ombudsman is an independent officer of the Victorian Parliament who investigates complaints about administrative actions taken by Victorian Government agencies and departments.

If you have a complaint about a Victorian Government agency or department, the Victorian Ombudsman may be able to assist you. Before contacting the Victorian Ombudsman, you should attempt to resolve your complaint with your agency and the department. To contact the Victorian Ombudsman:

* call 03 9613 6222 or 1800 806 314 toll free (regional areas only)
	+ write to

Victorian Ombudsman

Level 1 North Tower

459 Collins Street

Melbourne VIC 3000.

### Advocacy, support and information

#### Foster Care Association of Victoria

The Foster Care Association of Victoria is the peak body for foster carers in Victoria, providing independent and confidential advice and support, including managing issues or complaints.

To receive advice, support or advocacy from the Foster Care Association of Victoria:

* call 03 9416 4292 Monday to Thursday 9 am to 5 pm, Friday 9 am to 4.30 pm or

#### The Commission for Children and Young People

The Commission for Children and Young People is not an official complaints or review body however they can provide information and assistance to people concerned about the safety and wellbeing of children and young people. To contact the Commission for Children and Young People:

* call 1300 78 29 78 (enquiry line), Monday to Friday 10 am to 4 pm

### Requesting a review of case planning decisions by child protection

A parent, a child or young person, or a person directly affected by a child protection decision who has a significant relationship with the child or young person, may request access to the internal departmental review process. This can include carers in some instances. To request a review of a case planning decision by child protection, you are advised to speak to your agency worker or their line manager as described in Step 1.

### Requesting a review of a quality of care substantiation decisions or a recommendation that directly affects you

To request a review of a quality of care substantiation decision or a recommendation that directly affects you, you are encouraged to discuss your concerns and options with your agency as described in Step 1.

To request a review of a quality of care substantiation decision regarding an allegation of abuse that has resulted from a quality of care investigation, you must request a review of the process in writing to the Child Protection Operations Manager. Your agency will help you do this.

The Child Protection Operations Manager will consider requests for a review on a case-by- case basis. The review process may involve an audit of the investigation process and interview of the people involved.

The review must occur within 28 days of your request for review being received, and written advice of the review decision must be provided to you within two weeks of the review occurring.

If you are unhappy with the outcome of this first level of review, you may request a further review by the Director of Child Protection. This is the final avenue of internal review.

### Useful resources

* [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]

### Framework for managing foster carer issues, compliments and complaints

The following framework provides guidance about how to manage and resolve issues, compliments and complaints raised by foster carers.

| Issues, compliments and complaint examples | Steps for resolution and process/outcome |
| --- | --- |
| **Case planning and child protection decisions**Placement changes and reunification decisions made by child protectionApproval to travel, holiday approval (unavailable to children on interim orders)Carer authorisationInclusion and consultation (where appropriate) in case planningDelays in decision makingImpact of contact on carers or level of support in managing family contact**Care planning and day-to-day issues**Changes to contact arrangements or cancelation without adequate notice (where time and situation allows)Issues relating to payment - receipted expenses Issues relating to responsibilities for managing a child’s timetable/activitiesAccess to a child’s relevant documentation and sharing of information**Conduct of staff (agency or department)**Overall support/case worker engagementHarassment/ bullyingDisregard for cultural practicesLack of communication or lateness of communicationIssues relating to the Charter for Foster Carers or Charter for Children and Young people in Out-of-home care **Compliments/feedback**Opportunities to thankRecognise good practice and good relationships**Quality of care** Concern with the process at start, during or completion of investigationLack of support and advice during investigationRequesting a review of a quality of care substantiation decision | Step 1 Process - Discuss your concerns with your agency case worker or their line managerYour agency worker or their line manager will work with you to determine how to manage your issue or concernStep 1 Outcome - The issue is resolved and information communicated verbally or, if unresolved, can be escalated to the agency’s complaint process (step 2).For **case planning decisions** - if you have a significant relationship with a child or are directly affected by a case plan decision you may be able to seek a review of decision. For further guidance speak to your agencyTo request a **review of a quality of care substantiation** **decision**, you must request a review of the process in writing to the Child Protection Operations ManagerStep 2 Process - Register a complaint with your agencyIf your issue remains unresolved or you are unhappy about a service provided by your agency you can register a complaint with your agency by following their complaints process. If your complaint relates to a service provided by the department refer to step 3Step 2 Outcome - The agency’s complaints management policy is actioned and followedStep 3 Process - Register a complaint with the Department of Health and Human Services If you are unhappy with how your complaint has been managed by your agency or the issue relates to an action or service provided by the department that cannot be resolved through step 1, you can submit a complaint to the departmentTo contact the department’s central Complaints and Privacy Unit:call 1300 884 706email complaints.reception@dhhs.vic.gov.auwrite to Complaints and Privacy UnitGPO Box 4057Melbourne VIC 3001If you know your divisional office you can contact the Performance, Quality and Compliance Team in the department by email to:north.feedback@dhhs.vic.gov.ausouth.feedback@dhhs.vic.gov.aueast.qualitycomplaints@dhhs.vic.gov.auwest.feedback@dhhs.vic.gov.au **Step 3 Outcome** - The complaint is managed in line with the department’s Compliments and Complaints Management Policy:Receive Complaint is received and assessed to determine its urgency. Time: same working dayRecord Once assessed, details of the complaint are recorded. Time: within one working day of receiving the complaintAcknowledgeAll complaints will be acknowledged where possible, in the same way they were received. Time: within three working daysResolveThe time taken to investigate or review a complaint will depend on the nature and complexity of the complaint Time: between 10 and 20 working daysCommunicate resolutionThe investigation outcome is communicated to the complainant, including advice on alternative courses of internal or external review. Time: 3 days from finalising responseStep 4 Process - Register a complaint with the Victorian Ombudsman If you are dissatisfied with how your complaint has been handled by a Victorian government agency or department, you can contact the Victorian Ombudsman. Before contacting the Victorian Ombudsman you should attempt to resolve your complaint with your agency or the department. To contact the Victorian Ombudsman:call (03) 9613 6222 or 1800 806 314 toll free (regional areas only)write to the Victorian Ombudsman Level 1 North Tower, 459 Collins Street, Melbourne VIC 3000 |

# 17. Quality of care concerns

Introduction to quality of care

Victoria’s carers provide a very high standard of care to the children and young people for whom they care for. However, at times, concerns may be raised regarding the quality of care being provided to a child or young person in their care arrangement. All allegations are handled as potentially serious concerns.

A quality of care concern refers to any issue that could compromise a child or young person’s safety, stability or development within their out-of-home care arrangement. Such concerns range from serious allegations of physical or sexual abuse or neglect, to concerns about the quality or standard of care being provided to a child or young person.

Concerns and allegations are considered in the context of the child or young person’s age, stage of life, culture and gender. In some instances, they may need to be moved from their current care arrangement while the concerns or allegations are fully assessed, to ensure their immediate safety.

It can be unsettling and highly stressful when concerns or allegations are raised about the care you are providing to a child or young person.

## Support and assistance

If a concern is raised about the quality of care you have provided, it is the role of your agency to support you during and after the quality of care processes, including:

* allocating a liaison person
* providing advice about procedures and timeframes
* keeping you up to date with the progress of the investigation
* providing information about the services available to you
* providing access to appropriate support services
* making a referral for counselling, if you feel this would be beneficial for you or your family
	+ informing you about how to seek a review, resolve disputes or make a complaint.

Your agency will also be advised of any other processes that may need to occur, such as possible referral for independent investigation under s. 86 of the Children, Youth and Families Act, if an allegation of physical or sexual abuse is made about you.

If you feel you need further assistance, consider contacting the Foster Care Association of Victoria on 9416 4292.

### Useful resources

* Information sheet 10: When a question arises about the quality of care you are providing.

Quality of care concerns – see Quality of care concerns [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]

# 18. Glossary

The following terms are commonly used by child protection workers, agency case workers and the Children’s Court, and are consistent with the glossary from the department’s Child protection manual.

If you want definitions of protection orders, please see Chapter 14.Child protection and the Children’s Court.

**Aboriginal community controlled organisation**

An Aboriginal community controlled organisation is a non-government organisation that has a board of local Aboriginal community members that are elected by the local community. The board provides direction and leadership that ensures that service provision meets the needs of the Aboriginal community.

**Agency (also known as community service organisation)**

An agency, often referred to as a community service organisation (CSO), provides services to meet the needs of children, young people and families requiring care, support, protection or accommodation, and for families requiring support. The provision of foster care is one of the services some agencies provide. The agency is responsible for the recruitment and accreditation of foster carers.

**Agency case worker**

The agency case worker is responsible for the support and supervision of the foster carer. They are responsible for supporting the carer with the day-to-day care of the child or young person, and coordinating the care team.

The agency case worker could also be allocated as the child or young person’s case manager, via a case contracting arrangement with child protection. At these times, the agency case worker is also responsible for the implementation of the child or young person’s case plan.

**Care and Placement Plan**

The purpose of a Care and Placement Plan is to ensure that all children and young people in out-of-home care have a clearly developed plan that addresses their needs, and ensures that all parties concerned with the care of the child or young person are clear about what they are expected to do to achieve the plan. The placement plan will always be guided by the case plan. A Care and Placement Plan records the detailed day-to-day arrangements for the care of the child or young person. It identifies how their long and short-term needs will be met.

**Care and Transition Plan**

The Care and Transition Plan replaces the Care and Placement Plan once the young person turns 15 years. It covers their day-to- day care as they grow and mature through their adolescence. It also documents how to help the young person prepare for the future and make a successful transition to adulthood. It is developed by the agency case worker at least six months prior to the young person transitioning from care, in consultation with the young person.

**Care by Secretary order**

See Chapter 14. Child protection and the Children’s Court.

**Carer**

A carer in this handbook refers to a foster carer, but is also used to describe a kinship carer. A carer has primary day-to-day responsibility for a child or young person in home-based care, and aims to ensure their safety and wellbeing.

A carer must be able to form a positive relationship with the child or young person, which provides warmth, nurturing, support, stability and guidance. A carer is an integral part of the care team. By definition, a carer is not the child or young person’s parent. A foster carer will be assessed, approved and supported by the foster care agency.

**Care team**

The care teams exists to strengthen communication and teamwork between carers, child protection, agency case workers, other associated professionals, clients and their families, prompting all parties involved to consider the things that any good parent would naturally consider when caring for their own children. The care teams develop the Care and Placement Plan and contribute to the case plan process. The composition of a care team will vary, depending on the specific issues and needs of the child or young person and family. However, it will always include the agency case worker, the child or young person’s case manager, the carer and parents (as appropriate), and usually the child protection worker.

**Case contract**

A case contract is a formal written agreement between child protection and an agency for the provision of case management for an individual child protection client by the agency, or the provision of case management tasks on behalf of child protection.

**Case management**

Case management is the coordination and delivery of services provided as part of a child or young person’s case plan.

**Case manager**

A case manager is the person allocated the primary responsibility of overseeing the implementation of the child or young person’s case plan. This can be either a child protection

worker or an agency case worker. There are also times when case management is contracted to another department area, such as disability services.

**Case plan**

A case plan is prepared and endorsed by the child protection case planner for a child or young person. The case plan sets out the permanency objective and all significant decisions made by the department, concerning the child or young person’s present and future care and wellbeing, including care and contact arrangements.

The case plan includes decisions about health, education and other significant decisions, and is prepared for all children and young people where protective concerns have been substantiated – that is, where a child protection case planner is satisfied on reasonable grounds that the child or young person is in need of protection. Implementation of the case plan is supported by the use of an actions table setting out the goals and tasks required to address the protective concerns. A foster carer can expect to receive a copy of the case plan for the child or young person in their care.

**Case planner**

A case planner is a person with delegation within child protection to make case planning decisions. Case planners are usually the team managers or more senior child protection staff. Practice leaders or above, within child protection, also have case planning delegation.

**Child protection**

The department has a statutory responsibility under the Children, Youth and Families Act 2005 to provide child protection services for children and young people in Victoria under the age of 17 years in need of protection or, when an order is in place, children and young people under the age of 18 years.

Child protection provides services to children, young people and their families aimed at protecting children and young people from significant harm. When a child or young person is assessed as being ‘at risk’ within the family, child protection will – in the first instance and in accordance with the law – take reasonable steps to enable the child or young person to remain in the care of their family, by strengthening the family’s capacity to protect them.

When, even with support, there is an unacceptable risk of harm, child protection will intervene to bring the matter before the Children’s Court and, if necessary, place the child or young person in emergency care. If the safe resumption of care by the parents cannot be achieved within the timeframes set out in the Act, child protection will work towards an alternative permanent family care arrangement, or an independent living arrangement, depending on the age and circumstances of the child or young person, or if there are exceptional circumstances.

**Child protection worker**

The child protection worker is responsible for ensuring the functions of child protection are undertaken for the child or young person. The child protection worker could be the allocated case manager and therefore is responsible for the implementation of the case plan, or they could support the allocated case manager when this is contracted to an agency.

**Children, Youth and Families Act 2005**

The Act is Victorian legislation that governs the child and family services sector, youth justice and establishes the Children’s Court.

**Cultural plan**

A cultural plan is a requirement under the Act for an Aboriginal child or young person placed in out-of-home care. The cultural plan must address the cultural support needs of the child or young person. Section 10(3) of the Act focuses on promoting cultural and spiritual identity. The case plan should align with the cultural plan, and set out how the child or young person will maintain their identity and be connected to their Aboriginal community and Aboriginal culture.

**Family reunification order**

See Chapter 14. Child protection and the Children’s Court.

**Home-based care**

Home-based care provides care arrangements with approved carers in their own home, for children and young people up to 18 years of age, who have experienced significant abuse and neglect, and where the Court has made a decision that they are unable to safely live with their parents. Home-based care includes foster care, kinship care and permanent care.

**Interim accommodation order**

See Chapter 14. Child protection and the Children’s Court.

**Long-term care order**

See Chapter 14. Child protection and the Children’s Court.

**Looking After Children (LAC)**

Looking After Children (LAC) is a practice framework for supporting outcomes-focused collaborative care for children and young people, who are placed away from their families as a result of child protection intervention. The framework was originally developed in the United Kingdom and has been implemented in many other places, internationally and interstate.

**Permanency objective**

The permanency objective is the plan for the ongoing care arrangement for a child or young person. A case plan must include one of the following permanency objectives, which are listed in order of preference:

* family preservation––the objective of ensuring a child who is in the care of a parent of the child remains in the care of a parent
* family reunification–the objective of ensuring that a child who has been removed from the care of a parent of the child is returned to the care of a parent
* adoption–the objective of placing the child for adoption under the Adoption Act 1984
* permanent care–the objective of arranging a permanent placement of the child with a permanent carer or carers
* long-term out-of-home care–the objective of placing the child in–
	+ - a stable, long-term care arrangement with a specified carer or carers, or
			* another suitable long-term care arrangement.

**Permanent care order**

See Chapter 14. Child protection and the Children’s Court.

**Protection application**

A protection application is made to the Children’s Court in relation to a child or young person, who is in need of protection because the child or young person has suffered or is likely to suffer significant harm.

**Protection order (also known as a court order)**

A protection order is an order made by the Family Division of the Children’s Court for the protection and care of a child or young person if the Court finds that the child is in need of protection.

**Report about a child or young person**

If a person has significant concern for the wellbeing of a child or young person the person may make a report (previously called a notification) to child protection. Certain professionals, including police and teachers are mandated (obliged by law) to report suspected child abuse to child protection. The identifying details of the reporter to child protection are protected under the Act.

**Secretary**

This refers to the position of the Secretary of the Department of Health and Human Services.

**Substantiation (of harm to child)**

Substantiation refers to the decision about whether a child has experienced (or is currently at risk of) significant harm to their safety, stability or development That is, child protection is satisfied on reasonable grounds that the child or young person is in need of protection.

**Substantiation (quality of care)**

Substantiation with regard to quality of care refers to the decision made by Child Protection that on the balance of probabilities, abuse or neglect is likely to have occurred within a child or young person’s out-of-home care placement.

**Team manager**

The team manager leads a team of child protection staff. The team manager is the case planner and is responsible for decisions that affect children who are allocated to their team. They also manage cases awaiting allocation and the allocation of cases and tasks to the team members.

**The Act**

*The Children, Youth and Families Act 2005.*

**The department**

The Department of Health and Human Services.

# 19. Information sheets

## Information sheet 1: Out-of-home care in Victoria

### Types of out-of-home care

In Victoria, out-of-home care services provide care for children and young people who cannot live at home with their parents. This Information sheet outlines the different types of out-of-home care arrangements, or living arrangements for children and young people who cannot live with their own parents.

#### Home-based care

|  |  |
| --- | --- |
| Kinship care | The child or young person is placed with a relative, significant friend or member of their social network. Kinship care is explicitly preferred as a placement and is always the first care option. |
| Foster care | The child or young person is cared for by an accredited foster carer. Carers and the children and young people in their care are supported by agencies funded by the department to provide foster care programs. The carer is an integral member of the child or young person’s care team. |
| Permanent care | The child or young person is placed permanently with a carer (or carers), who are assessed and approved to provide permanent care for a child or young person. Once a court order has been made, a permanent carer becomes the parent of the child or young person, and has parental responsibility to the exclusion of all others. Child protection involvement ceases when the permanent care order is granted. Decisions about permanent care are made in the best interests of the child or young person.Permanent carers are required to preserve the child or young person’s identity, connection to culture and the relationship with their biological families, unless the Court determines otherwise. Court-ordered contact between the child or young person and their biological parent is limited to up to four times per year in the first 12 months of the order. More contact can be arranged by agreement between the permanent carer parents and biological parents, or by seeking to vary the order at the end of the first 12 months. The child or young person’s biological parents need to seek the leave of the Court to vary the order.For a child or young person in a kinship or foster care placement, it may be in their best interests to remain with their carer under a permanent care order. However, converting a child or young person’s placement from foster care to permanent care is not an automatic process, and requires discussion with the agency and child protection.Once the order is made, a permanent carer parent continues to receive level-one care allowance for the child or young person. The permanent care order remains in place until the young person turns 18. |

### Adoption

In Victoria, adoption is governed by the Adoption Act 1984 and is most commonly used for children whose biological parents have given consent for them to be adopted. The number of adoptions is small, with approximately 20 adoptions occurring in Victoria each year.

Pre-adoption care arrangements are provided under the Adoption Act by a small number of experienced carers, who play an important role in helping babies and children transition to their new family.

### Residential care

Residential care provides a home for a young person, typically aged between 12–18 years, who often have behaviours that place them at high risk, and where they need a team of carers around them to help them settle. Alternative care arrangements will be sought while a young people is in residential care.

### Lead tenant

Lead tenant is a semi-independent accommodation option for young people aged 16 to 18 years, who are child protection clients and are moving towards independence. Young people are supported by a live-in volunteer (a lead tenant), who shares the community-based accommodation, and an outreach support team.

### Useful resources

* Adoption at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* Types of home-based care at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* [Permanent care at](http://www.dhs.vic.gov.au/for-individuals/children%2C-families-and-young-people/adoption-and-permanent-care/become-a-permanent-care-parent)  [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]

## Information sheet 2: Accepting a child or young person into your care – questions to ask

When you are considering accepting a new child or young person into your care, there are a number of questions you should ask before you make a decision. While these questions are designed to help you understand the needs of the child or young person, and the potential impact of the decision on your home and family life and routines, your agency may not be able to provide all the information.

**General questions**

* What is the gender and age of the child or young person?
* What is the expected length of the care arrangement?
* Why does this child or young person need a foster care arrangement?
* Are there special religious or cultural requirements for the child or young person?
* Does the child or young person have any allergies or illnesses?
* Does the child or young person have any particular dietary requirements?
* Are there any sensitive key issues to be aware of?
* What is their current emotional or physical state?
* Is there anything special I should know about how to support this child or young person?
* What does the child or young person understand about why they are moving?
* Have I fostered children or young people with similar characteristics before?
* Are we a good match?
* Do I need additional training or support to make this type of care arrangement successful?
* If the child or young person is coming into my care from another carer, is it possible to speak with the previous carer?
* Why did the previous care arrangement break down?
* How will the child or young person be supported through the transition and who will do this?
	+ What items are needed to care for the child or young person and what is needed to help them settle in?

**Questions to ask about court and protection orders**

* What protection order is the child or young person on?
* Are there any special protection order conditions I need to know about?
	+ Are there any key meetings or court dates that I would be required to attend?

**Questions to ask about contact arrangements**

* What contact plans are in place?
* What is the frequency of any contact plans?
* Will their contact arrangements fit with my family?
* Who is contact with?
* Where are contact visits to be held? Will I need to provide transport or support for the child or young person with contact?
	+ Are the contact visits supervised, and if so, by whom?

**Questions to ask about routines**

* Does the child or young person attend childcare, preschool or school?
* Will they continue to attend the same childcare, preschool or school? If so, what are the transport, hours and support requirements for this?
	+ Does the child or young person have extracurricular activities, such as basketball or swimming that I will need to provide transport for and support?

## Information sheet 3: Responding to a disclosure of abuse

If a child or young person has been abused, they are more likely to disclose this when they start feeling safe. Disclosures could be about themselves or other things they have seen.

It is important to think about the possibility of a disclosure and how you would respond, before such a situation arises. This will help you be prepared and respond as well as possible, because when a child or young person discloses to you, they will be very aware of your immediate reaction. If you respond with shock, they will feel this.

It helps to stay calm and accepting of the child or young person’s story, listen and comfort them. There are a number of things you can do when a child or young person discloses to you that they have been abused:

**Do:**

* listen to them and let them tell you in their own words
* stay calm and be patient, and allow the child or young person to talk at their own pace
* reassure the child or young person that you believe them and it is the right thing to do
* reassure them that it is not their fault and they are not responsible for the abuse
* tell them what you need to do next, such as inform the agency, and that you will support them if anything needs to be done following this
* tell them that the agency will contact child protection, which will help make sure they are safe
* tell them it is likely the police will need to be contacted (for sexual and physical abuse)
* reassure them that there are people they can talk to, such as the Centre Against Sexual Assault (CASA) for sexual abuse
* be truthful
* be respectful to the sensitive nature of the information and only talk to those who need to know.

**Do not:**

* show signs of panic, shock or anger
* go over the information or put your own interpretation on the information
* pressure the child or young person into telling more than they are ready to disclose
* keep asking questions to elicit more information
* tell them you can keep their disclosure a secret
* make promises you cannot keep
* be surprised if children or young people retract their statements
	+ confront the person alleged to be the abuser

You will need to call your case manager as soon as possible – especially if the child or young person will be placed at further risk. Be ready to give as much information as possible about the disclosure. Every bit of information is vital if the matter is to go to court.

If you suspect abuse, but the child or young person has not told anyone, be aware of the emotional distress that they may be experiencing. Approach them in a caring and sensitive manner, and assure them that you are willing to listen and to help if there is a problem.

These types of conversations can be very confronting. It is not an easy topic and you will be forced to think about it as you go on caring for the child or young person. The experience could leave you feeling angry, sickened and sad, or you may tap into unresolved memories of your own. Talk to people, call your case manager or call CASA for support.

**Contacts**

* Centre Against Sexual Assault (CASA) – there are 15 CASAs across Victoria. The CASA Forum is the peak body that works with all of the CASAs. The [CASA Forum](http://www.casa.org.au/) website [http://www.casa.org.au/] has contact details and website links for the CASAs.
* Responding to disclosures of abuse – see advice given to child protection, agencies and mandatory reporters at [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]
* Sexual Assault Crisis Line (Victoria) – is a statewide, after-hours, confidential telephone crisis counselling service for victims and survivors of past and recent sexual assault. Call 1800 806 292 or visit [Sexual Assault Crisis Line](http://www.sacl.com.au/) [http://www.sacl.com.au/]
* 1800 RESPECT (Australia) – is a national 24-hour phone counselling service for sexual assault and domestic violence. Call 1800 737 732 or visit [Respect](https://www.1800respect.org.au/) [https://www.1800respect.org.au/]

## Information sheet 4: Privacy and photographs

### Commonly asked questions about photographs

**Q: Can photos of the child or young person in my care be put on my fridge or in frames around the house?**

A: Yes, they can. Always ask the child or young person if they would like their photos displayed in the house. For many children and young people, this gives a sense of ‘belonging’. When they leave your care, ask if they would like to include the photos in their life story book or an album to take with them.

**Q: Can photos of the children and young people in my care be put on my Facebook page?**

A: Always check what the policy is with your agency. It is highly recommended that you use social media cautiously and thoughtfully. It is important to have a discussion with your agency case worker if you require further information, advice or support, before deciding whether or not to post photos of a child or young person in your care on social media. Care needs to be taken to ensure the child or young person is not identified as being subject to a Children’s Court protection order.

Never enter into any online discussions with other people regarding the child or young person or their family members, particularly parents. This is considered a significant breach of both the child or young person’s, and their parents’ right to privacy.

The Act has clear penalties where confidentiality breaches occur. Be aware that photos may reveal the child or young person’s location. Some smart phones embed tags that can provide geographic information. Other photos can provide clues, such as a school or city name. Think before you post. Be sensitive to how messages may be interpreted by others, including the child or young person’s family members and agency case worker.

**Q: Can photos of children or young people be published in their school newsletter?**

A: Wherever appropriate, children and young people in care should be included in school photos, including newsletters. In most cases, parents are aware of the school their child or young person is attending and will not want them excluded from these. However, care must be given to the possible consequences of children or young people’s photos being published in school publications, such as where there is a risk of their school being identified by a parent whose access is significantly restricted. Care needs to be taken to ensure the child or young person is not identified as being subject to a Children’s Court protection order.

It is essential that relevant school staff are advised of any confidentiality and safety issues regarding the children and young people appearing in school publications.

You should always check with your agency case worker that parents are comfortable with the publication of their child or young person’s photo, prior to publication occurring.

**Q: Can children or young people’s photos be published in newspapers?**

A: Children and young people participating in community sport or other activities, such as a community event, may find their achievements published by local newspapers or broadcast by local television news.

Care needs to be taken to ensure the child or young person is not identified as being subject to a Children’s Court protection order. Avoid references such as foster children and foster carers, and never refer to court matters. Wherever possible, ensure appropriate permissions have been obtained from the agency, and the child or young person’s parents, prior to photos being taken.

## Information sheet 5: Case planning, case management, roles and responsibilities

This information sheet outlines the elements of the case planning, management and decision making in relation to children and young people in out-of-home care. It also sets out the roles and responsibilities of child protection, the agency, the foster carer, and others involved in their care.

### Best interests case practice model

The Act provides the statutory framework aimed at protecting children and young people from significant harm.

In Victoria, the Best interests case practice model provides the foundation for working with children and young people, and their families, to address issues and to provide a supportive and cohesive response. Effective practice requires the development of good working relationships between services, including working in partnership with parents, where possible, with the child’s best interests being central to this approach.

### Case plans

Case plans and case plan reviews are required under the Act. A case plan is different to a care plan, which supports the day-to-day care of the child or young person.

A case plan occurs:

* within 21 days following the substantiation of child protection concerns

or

* six weeks after the making of a protection order

or

* + when there are significant changes to the child or young person’s circumstances.

A case plan sets out a permanency objective. Section 167 of the Act states that a case plan must include one of five permanency objectives, which are listed in order of preference, being:

* family preservation – the objective of ensuring that a child or young person who is in the care of their parent remains in the care of their parent
* family reunification – the objective of ensuring that a child or young person who has been removed from the care of a parent is returned to the care of the parent
* adoption – the objective of placing a child for adoption under the Adoption Act 1984
* permanent care – the objective of arranging a permanent care arrangement for a child or young person with a permanent carer or carers
* long-term out-of-home care – the objective of placing the child or young person in a stable, long-term care arrangement with a specified carer or carers, or if that arrangement is not possible, another suitable long-term care arrangement.

For the majority of children and young people involved with child protection, the most appropriate permanency objective will be to remain in the care of a parent. For those children or young people who come into out- of-home care, family reunification will almost always be the preferred permanency objective, subject to timelines.

For a very small proportion of children and young people with whom child protection intervenes, a permanent out-of-home care arrangement will be required to ensure their safety and wellbeing. It is important that this decision is made as soon as possible, and within a timeframe that promotes the child’s developmental and emotional needs.

### Case management

Case management is the coordination and delivery of services provided as part of a case plan. Case management responsibility for the child or young person either sits with child protection or is contracted to the agency.

When a child or young person is first placed in out-of-home care, the child protection worker is the case manager. However, this responsibility may be transferred to an agency (called case contracting), when the decision has been made for the child or young person to remain in long-term out-of-home care. The roles and responsibilities of the agency case worker and the child protection worker change when case management is contracted to the agency.

Regardless of who has case management responsibility for the child or young person, your agency case worker will remain your primary support while you are a carer. The agencies responsibilities will always be to:

* support you as the carer in providing the day-to-day care of the child or young person
* organise and lead the care team with the aim of supporting this day-to-day care
* use the Looking After Children framework tools (such as the Care and Placement Plan and Essential Information Record) to support the day-to-day care of the child or young person.

Regardless of who has the case management responsibility for the child or young person, child protection will remain responsible for case planning, case planning decisions and ensuring the cultural plan is developed for Aboriginal children and young people.

### Agency case management

When the agency case worker has the primary case management role, this is commonly referred to as contracted case management and is a formal arrangement between child protection and the agency for the provision of case management for a child or young person who is subject to a protection order.

Contracting arrangements are designed to enable the agency to support implementation of the case plan, and responsibilities are moved from child protection to the agency. Child protection will assign a contracted case manager, but it has limited involvement with the care team and the day-day care and support of the child or young person. Child protection remains responsible for the case plan, applications to the Children’s Court and other significant decisions.

When a child or young person’s case management is contracted to the agency, responsibilities for the agency case manager include:

* implementing the child or young person’s case plan with the support of the care team, of which the carer is a significant member
* working directly with the child or young person and their family, and undertaking case management tasks specified in the case plan
* engaging with other specialist agencies and services, when required and consistent with the case plan, and authorised by child protection
* providing court reports, and participating in court processes and proceedings when required
* providing a copy of the case plan, protection order and Looking After Children documents to the carer
* maintaining regular contact with child protection, including quarterly reports and providing progress updates when requested
* participating in the case plan process
	+ coordinating contact between the child or young person and their family, and assisting with transport and supervision of the contact.

The agency case manager will remain the primary support of the carer and continue to manage the care team.

When a case is contracted to the agency, the responsibilities for child protection include:

* responsibility for the development and review of the child or young person’s case plan
* obtaining the necessary statutory authorisations, such as consent for health and education assessments
* providing the written case plan and court report to the parent, child or young person and the contracted case manager
* providing the agency case manager with appropriate written information and assessments
* regularly discussing the progress of the child or young person, and urgent case issues as they arise
* meeting with the child or young person at least once per year, and at other times as appropriate
* following up no less than 10 business days before the scheduled due date for progress reports, and following up agency management if the report is not received within the scheduled timeframe
* developing clear lines of communication between the agency, the child or young person and family, and child protection
* supporting the child or young person and family to understand the contact arrangements and review mechanisms.

### Care team roles and responsibilities

The table below provides a list of tasks and who is responsible for them. The ‘allocated case manager’ will either be the child protection worker or the agency case worker. You will need to know who holds case management responsibility for the child or young person in your care. The agency case worker will always be your primary support. However, they may also have the responsibility as allocated case manager responsible for the child or young person’s case plan implementation.

#### Roles and responsibilities of the carer, agency, child protection and case manager (agency or child protection)

Care team

| Role | Who is responsible :Foster carer | Who is responsible :Agency case worker | Who is responsible :Child protection case planner or child protection task only | Who is responsible :Allocated case manager either child protection or agency |
| --- | --- | --- | --- | --- |
| Establish the **care team** and make recommendations about the day-to-day care of the child or young person |  | Yes |  |  |
| Make sure an initial **Care and Placement Plan** is developed and documented within two weeks of the child or young person coming into care, and providinga copy to the care team |  | Yes |  |  |
| All members of the care team, including carers, to contribute to the development of the **Care and Placement Plan** | Yes | Yes |  | Yes |
| Be an active member of the child or young person’s **care team** | Yes | Yes |  | Yes |
| **Make recommendations** to the child protection case planner about the specific decisions a carer is authorised to make | Yes | Yes |  | Yes |
| Approve **authorisation for carers** for things such as routine medical/dental treatment, travel, school activities and camps. |  |  | Yes |  |
| Work together to contribute to the development and implementation of the child or young person’s **case plan and Looking After Children planning processes**, including the Care and Placement Plan | Yes | Yes |  | Yes |
| **Maintain open communication** so that all members of the care team are kept up to date with important information | Yes | Yes |  | Yes |
| Make sure that **information is only disclosed** outside the care team to those who need to know | Yes | Yes | Yes | Yes |
| Ensure, via the agency, that members of the care team are **informed of the child or young person’s progress**, including any relevant issues and concerns. In particular, concerns about ongoing care arrangements must be communicated as soon as possible | Yes | Yes |  |  |

Case planning

| Role | Who is responsible :Foster carer | Who is responsible :Agency case worker | Who is responsible :Child protection case planner or child protection task only | Who is responsible :Allocated case manager either child protection or agency |
| --- | --- | --- | --- | --- |
| **Communicate the permanency objective** in the case plan to the agency and carer |  |  | Yes |  |
| Lead the **development and review of the case plan** and ensure the care team contributes to the development of the plan |  |  | Yes |  |
| Lead the **implementation of the case** plan and ensure the care team contributes to the development of the plan |  |  |  | Yes |
| Ensure that a **Care and Transition Plan** is prepared and followed to support a young person when they are leaving care | Yes | Yes |  | Yes |
| Register the child’s birth and arrange a **birth certificate** |  |  | Yes |  |

Engagement with family

| Role | Who is responsible :Foster carer | Who is responsible :Agency case worker | Who is responsible :Child protection case planner or child protection task only | Who is responsible :Allocated case manager either child protection or agency |
| --- | --- | --- | --- | --- |
| Work with the child or young person’s family to **promote family reunification** | Yes \* |  |  | Yes |
| Promote and support the **relationship of children and young people with their family**, and their connection with their social networks and community | Yes |  |  | Yes |
| **Engage parents and families** in a manner that is accepting and respectful of their primary role, cultural identity and spiritual beliefs. Promote positive relationships where possible | Yes\* |  |  | Yes |
| **Transport child or young person** to and from contact as required | Yes\* | Yes |  | Yes |
| Inform carers of any **changes to** contact arrangements in a timely manner |  | Yes |  | Yes |

Care of the child or young person

| Role | Who is responsible :Foster carer | Who is responsible :Agency case worker | Who is responsible :Child protection case planner or child protection task only | Who is responsible :Allocated case manager either child protection or agency |
| --- | --- | --- | --- | --- |
| **Provide carers with the information** they need to provide good care for a child or young person, at the time the care arrangement is made |  | Yes | Yes | Yes |
| Provide **day-to-day** **care** and support for the child or young person | Yes |  |  |  |
| Provide a **safe and nurturing home** environment that contributes to all aspects of healthy development for children and young people, including their physical, social, emotional, cognitive, cultural and spiritual needs | Yes |  |  |  |
| Provide **support and advocate for children and young people** in out-of-home care | Yes | Yes |  | Yes |
| **Work with the child or young person** to make sure they understand their situation, and that their needs are being met in the care arrangement | Yes | Yes |  | Yes |
| Support the child or young person to **access and participate in local, day-to- day extra-curricular activities** | Yes | Yes |  | Yes |
| Respond to the **needs of the child or young person** and include them in planning and decision making where possible | Yes | Yes | Yes | Yes |
| **Update carers as information changes** for example, any changes to appointments |  | Yes |  | Yes |
| Record and **act on information** provided by carers, and inform the carer of outcomes where appropriate |  | Yes |  | Yes |
| Arrange for appropriate **care allowance and other supports** to be provided to carers, in liaison with the child protection worker |  | Yes | Yes | Yes |
| Coordinate and provide **respite care if required** |  | Yes |  |  |
| Obtain a **Health Care Card** and other documents for the child or young person as required |  |  | Yes |  |
| Arrange for children and young people **to attend specialist** medical, educational or therapeutic services | Yes\* | Yes |  | Yes |
| Ascertain the immunisation status of the child or young person, and request authorisation for the carer to take them for necessary catch-ups | Yes\* | Yes |  |  |
| Inform the agency of any **emergencies** or critical incidents as soon as possible | Yes |  |  |  |
| Investigate and assess **reports of harm** to the child or young person |  | Yes | Yes | Yes |

Supporting carers

| Role | Who is responsible :Foster carer | Who is responsible :Agency case worker | Who is responsible :Child protection case planner or child protection task only | Who is responsible :Allocated case manager either child protection or agency |
| --- | --- | --- | --- | --- |
| Provide **support, supervision, information and training** to carers so they can carry out their roles and responsibilities |  | Yes |  |  |
| Review **accreditation of carers** annually |  | Yes |  |  |
| Continue to develop **competencies as carers** by participating in development **and** training opportunities | Yes | Yes |  |  |

\* May not be the core role of the carer, however carers involvement in these activities is important for the child or young person.

## Information sheet 6: The impact of caring and looking after yourself

The demands of being a carer can be high. It is important that you manage your health and wellbeing, which may help in your role as a carer. You are the best person to know what makes you feel better emotionally, physically and mentally.

This information sheet provides some practical tips and suggestions to look after yourself, things to expect or consider, and where to get support. The information is gathered from the insightful advice provided by kinship carers in their Kinship Carer’s Handbook, available on the Kinship Carers Victoria website.

### The impact of caring

Your caring role will affect many areas of your life. In order to provide optimal care for the child or young person, it may help to reflect on why you have become a carer. It is important to recognise that not only are there daily physical demands, but often there are significant emotional issues that can add to the pressures of your caring role.

The issues can be many and varied, but try to be especially conscious of things like:

* your own stress levels
* recognising your emotions and how you respond to situations
* what measures you take to look after your physical and mental health and wellbeing and how you manage stress

Simply being aware of the potential impacts, in the context of your own situation and particular responses, means that you are more likely to recognise any warning signs and ask for help if needed. You may need to seek support at various times in your caring role, to assist with understanding your own reactions, and for advice about how to manage these effectively.

While you are busy trying to help a child or young person, your own confidence and self- regard may take some hard knocks. With some of the daily pressures you face, it can be challenging to maintain positive self-thinking and self-regard. It may help to have regular and honest assessments of what you expect of yourself in this caring role.

Ask yourself:

* Do you have realistic expectations of what can be achieved in the timeframe you have in mind? Or are they more in the realm of ‘wishful thinking’ and need to be broken down into smaller, more achievable expectations?
* Are there other ways of measuring progress, other than success or failure? What might these be?
* When and how do you celebrate the successes, and do you reflect on the part you played in achieving them?
* Are you realistic about what you expect from yourself? Are you too hard on yourself if expectations are not met? Can you forgive yourself and move on if this happens?

### Support and network groups

The good news is that support is available. Being aware of what supports are available is crucial for a successful caring relationship. These may include emotional support, physical and practical support, financial support, education and learning, task-focused and problem-solving support, respite care, community support and social support.

Your agency case worker is there to support you. This may be in the form of information and access to local support services, help with managing contact with the child or young person’s family, or respite care. Remember to raise issues in meetings with your case worker so they can be discussed, recorded and raised with the department if required.

### Foster Care Association of Victoria

You have the opportunity to become a member of the Foster Care Association of Victoria. The association can give you independent and confidential advice, support and advocacy.

The carer information and support service has four main aims, which are:

* providing accurate and clear information through consultation – phone, email and in person, training developed for carers, newsletters and information sheets
* referrals to appropriate agencies for specialised and targeted support and assistance
	+ being available for phone conversations, one-on-one discussions and attendance at meetings for support
	+ representation to agencies and government on issues affecting carers, and children and young people in out-of-home care.

Membership is free. For more information, call 9416 4292 or visit [Foster Care Association of Victoria](https://www.fcav.org.au/) [https://www.fcav.org.au/] or [Facebook](https://www.facebook.com/fostercarevictoria) [https://www.facebook.com/fostercarevictoria]

### Support groups

There are opportunities for carers to form support networks with other carers. These could include buddy or mentoring systems with experienced carers, social catch-ups and virtual networks. Many agencies arrange regular and one-off morning teas, lunches or evening networking opportunities for carers to meet and discuss their caring experiences. Ask your agency if it has support networks already set up or if you can start one.

### Health

When you are caring for others, it is easy to forget about your own needs or put off concerns for another day. It is important to make time to attend to your own health needs. This may mean asking for help so that you can get to appointments.

Having a regular check-up and following up on any advice or concerns with your doctor is essential. Both physical and emotional health issues should be given consideration, as these are closely linked and one can adversely affect the other. When you are feeling tired, it is even more important to be conscious of health needs and act on any warning signs quickly.

### Useful resources

* [Child Trauma Academy](http://www.childtraumaacademy.com/cost_of_caring/) [http://www.childtraumaacademy.com/cost\_of\_caring/]
* CREATE – the national body creating a better life for children and young people in the care system, call 1800 655 105 or [CREATE](http://create.org.au/) [http://create.org.au/]
* [Foster Care Association of Victoria](https://www.fcav.org.au/) [https://www.fcav.org.au/], or call 03 9416 4292
* Kinship Carers Victoria – Victoria’s peak body for kinship carers, call 03 9372 2422.
	+ Permanent Care and Adoptive Families, call 03 9020 1833 or email Permanent Care and Adoptive Families [info@pcafamilies.org.au]

## Information sheet 7: Caring for Aboriginal children and young people

This information sheet provides a snapshot of information to help you improve your knowledge about Aboriginal culture in Victoria, and the cultural needs of the child or young person you are caring for. Further information about caring for Aboriginal children in out-of-home care can be found in the Caring for Aboriginal and Torres Strait Islander children in out-of-home care resource developed by the Victorian Aboriginal Child Care Agency (VACCA).

Culture plays a key role in the Aboriginal child or young person’s development, identity and self-esteem, and in determining their overall wellbeing needs.

As a carer of an Aboriginal child or young person, you have a significant role in fostering their Aboriginal identity and connection to culture. If you prioritise and understand the importance of Aboriginal culture to a child or young person’s wellbeing and positive development, and you bring this into your home, you are more likely to raise Aboriginal children and young people who experience better life outcomes. The impact of culture to their overall wellbeing cannot be underestimated.

It is critical that you recognise the need to learn about and embrace Aboriginal culture. This will help you increase your understanding of how to best to support the physical, social, emotional, cognitive, cultural and spiritual wellbeing needs of an Aboriginal child or young person in your care.

### Terminology

‘Koori’, ‘Koorie’ is a term used by the Aboriginal community to refer to clan groups that are from Victoria and some parts of NSW. Aboriginal people may also identify themselves, according to the language group of their family’s ancestral lands, for example, Yorta Yorta.

‘Community’ refers to Aboriginal people living in Victoria who may belong or identify with one or more communities. For example, they may identify with their ancestral lands and country where their family is from, which may not be where they now live or work. Aboriginal people may also be part of the local Aboriginal community where they live or work. Community is about interrelatedness and belonging, and is central to Aboriginality.

### Aboriginal culture

For Aboriginal people, land, kinship system and spirituality are the foundations on which culture is built and grown. They share deep spiritual connection with the land, and their relationships are not only with other family and people, but also with all aspects of the environment.

Elders are held in the highest regards by the Aboriginal community. In Victoria, Elders can be people who have lived in an area for a long time and are respected community members, or traditional Elders who are descendants of the area and active in community issues. When addressing an Elder, it is important to acknowledge their status as aunty or uncle.

Elders have a significant role in the community to teach, guide and hand down cultural information and traditional knowledge. Every Aboriginal child or young person should be made aware of their Elders and have opportunities to meet and spend time with them.

Torres Strait Islander people and culture have many significant differences to Aboriginal culture and people, including child-rearing practices. In caring for Torres Strait Islander children and young people, it is important that you are aware of these differences, and seek to maintain their cultural connections to the Torres Strait Islander community.

In learning about culture, it is important that you are aware that diversity exists among Aboriginal people across Australia. It is important for you to learn about the child or young person in your care, including:

* Where are they from, who is their mob?
* How much do they know about their culture, traditions and practices?
* What are their connections to their family, Elders and community?
	+ What are their interests and involvement in community events and activities?

This will help you to understand the child or young person, and support them in connection to their community, the local Aboriginal community and their culture.

### Historical context

Colonisation and past government policies have impacted on Aboriginal people, with the forcible removal of Aboriginal people from their traditional lands, the forcible removal of their children from their families and penalties imposed on Aboriginal people practising culture. This has denied many Aboriginal people their culture and had significant impacts on life outcomes. Many of those affected by these policies have grown into adults and raised their own families, while struggling to rebuild their life and place in the Aboriginal community.

Aboriginal people have lost their traditional lands, aspects of culture, language, connections to community and family. These losses are not just historical events, but are experienced by Aboriginal children, young people, their families and the Aboriginal community, as current losses that still require mourning.

### Trauma

For Aboriginal families and children, the losses that Aboriginal people have experienced have had a profound impact on the social, emotional, mental, physical and spiritual wellbeing of Aboriginal people. They continue to be passed down to the next generation through what is known as ‘transgenerational’ trauma.

Aboriginal children and young people in care will also have experienced trauma that has resulted in them being unable to live with their families.

### Aboriginal child placement principle

The Aboriginal child placement principle is in place to make sure that Aboriginal people are consulted on all decisions regarding Aboriginal children and young people involved with child protection, so that there is cultural consideration on all decisions, and there is not a repeat of past government policies that resulted in the Stolen Generation.

This principle aims to ensure that Aboriginal children are connected and placed within the Aboriginal community where possible. Where children are removed, the principle requires child protection to try to reunite the Aboriginal children with their family, where it is in their best interests and safe to do so.

### Aboriginal Child Specialist Advice and Support Service

The Victorian Aboriginal Child Care Agency delivers the Aboriginal Child Specialist Advice and Support Service in all locations, except Mildura, where it is provided by the Mallee District Aboriginal Service. The service provides culturally appropriate advice and consultation for all significant decisions about a child or young person involved with child protection.

### Aboriginal cultural identity

A child or young person‘s cultural identity is a critical feature of who they are. Children and young people who are strong in their culture, and see that their culture is valued by others, are more likely to develop a positive self-image. Denying them access to their culture is harmful, because it strikes at their sense of identity.

For Aboriginal children and young people in out-of-home care, displaying respect for their Aboriginal culture and identity is critical to their comfort and pride in themselves, and their environment. When they see that their culture is valued by others, it is enriching for them, but also for everyone in the home. You can promote the rich diversity and strength of Aboriginal culture to all those who seek to do their best for Aboriginal children and young people.

### Cultural plans

Non-Aboriginal carers, child protection workers and agency case workers caring for an Aboriginal child or young person have an active role in making sure they do not lose connection with their family, community and culture.

When an Aboriginal child or young person is placed in out-of-home care, a cultural plan must be developed and linked to their case plan. It is the responsibility of child protection to ensure the plan is developed. You and the agency case worker will be included in the development of a cultural plan.

You have an important role in implementing the cultural plan to support the child or young person to maintain their connections to community and culture every day.

### Cultural safety

An Aboriginal child or young person should feel culturally safe. This means that they should view their Aboriginality positively and see that others are positive about their culture at school, in the community and in their interactions with other services.

You can make sure that your home is a place of cultural safety by acknowledging and respecting the child’s culture, as well as including objects in the home that Aboriginal people place spiritual and cultural value on.

### Kinship system

The Aboriginal kinship system continues to be a cultural strength for families and communities. This system creates a network of people who have a responsibility for the care and day-to-day needs of children and young people.

From a young age, Aboriginal children learn about their kinship relationships and are introduced to a broad network of family and community members. They are taught who they are, their significance within the kinship group, and their responsibility and relationship with each person. As they grow they are identified through this system within their own mob or community, and in other communities. These learnings and experiences are essential in raising children and young people to have a strong Aboriginal identity, wellbeing and sense of belonging.

Where possible, you will need to support the child or young person to develop their knowledge of their kinship network, and ensure they have contact with their family and community, so that they remain and are recognised by others as part of this network.

You and your family can also become part of the child or young person’s extended and kinship network.

Aboriginal child-rearing practices

Aboriginal child-rearing practices can differ significantly to your practices as a carer. In Aboriginal child rearing, the whole Aboriginal community contributes to raising a child, giving mutual assistance and support to the parents.

Child-rearing practices can also differ in other ways. For instance, Aboriginal people allow children and young people to play with less adult involvement, and discipline is commonly taught through humour, teasing and surprised responses.

It is important to understand Aboriginal child- rearing practices to better understand the child or young person’s behaviour and responses to practices in your home. You can access resources through the Secretariat of National Aboriginal and Islander Child Care (SNAICC), and talk to your agency or local Aboriginal community controlled organisation about getting support from the Aboriginal community.

### Aboriginal language

There has been a significant loss of Aboriginal language through past government assimilation policies. Koorie English has been evolving, particularly in Victoria. Aboriginal English is the first language or home language of many Aboriginal children throughout Australia. This is often mistaken by non-Aboriginal people as bad English. For Aboriginal people, using Koorie English or Aboriginal English is a statement of identity. It is important that you do not correct or prevent children from using this language.

### Cultural lens

The term ‘cultural lens’ is used to describe how we understand behaviour and values, by moving beyond our own cultural approaches. It is about seeking explanations for behaviours that may not make sense to you, but are cultural practices. For example, some Aboriginal children and young people will find it unsettling to have a room of their own.

As a carer of an Aboriginal child or young person, you need to remember that your culture is different. Make sure you understand and don’t misinterpret their behaviour, due to your lack of understanding of their culture.

It is important that you are supported and seek support from your agency, the child or young person’s family, their community and the local Aboriginal community controlled organisation, to be able to understand them through a lens of their culture.

Current issues facing Aboriginal people

The effects of colonisation, dispossession from land, forced removal of Aboriginal children and young people, past government policies and racism have led to significant disadvantage in the Aboriginal community. The issues facing the Aboriginal community include high rates of unemployment, poorer health, and higher levels of disability, earlier deaths, family violence and substance misuse.

Aboriginal children and young people are at significant disadvantage when compared with non-Aboriginal children in regards to:

* low birth rate
* higher rates of hospitalisation
* lower immunisation rates
* lower rates of attendance at preschool
* lower educational achievement
* higher rates of middle ear infections
* higher rates of involvement with juvenile justice
	+ high rates of involvement with child protection and placement in out-of-home care.

However, most Aboriginal children and young people remain at home with their families, and are thriving and achieving positive life outcomes. There is an increasing and thriving Aboriginal middle class who, in common with many other Aboriginal people, are making a significant positive contribution to the broader Australian community.

### Importance of using Aboriginal services

Aboriginal people feel culturally safe using Aboriginal services. These services are provided by Aboriginal organisations who understand the Aboriginal culture, and the issues facing Aboriginal people, so they are able to provide holistic services. Where possible, it is beneficial to the child or young person to utilise these services. Most of these services are free.

### Confirmation of Aboriginality

Many Aboriginal services now ask for a letter confirming a person’s Aboriginality to access their services. If a child or young person in your care cannot access a service without a confirmation of Aboriginality letter, contact your agency case worker, as there are processes in place with Aboriginal community controlled organisations to apply for one.

A letter of confirmation of Aboriginality acknowledges that an Aboriginal community controlled organisation has confirmed that there is evidence that a person:

* is of Aboriginal descent
* identifies as Aboriginal or Torres Strait Islander
* is accepted as an Aborigine or Torres Strait Islander by an Aboriginal or Torres Strait Island community.

If a child or young person does not have this letter, it does not mean they are not Aboriginal.

### Recognising cultural abuse

Cultural abuse refers to any actions or attitudes that ignore, denigrate or intentionally attack the culture of a person or community. It is important that you are able to recognise cultural abuse of a child or young person in your care, and take action to address the behaviour. It is important that you seek advice and support from your agency on the best way to deal with the issues that are occurring.

### Dealing with bullying and racism

As a carer of an Aboriginal child or young person, you may need to deal with the consequences of them being a victim of racism at school, among friends, in the community, or even in your home or neighbourhood.

It is important to develop strategies to deal with racism and bullying before it arises, or before it escalates. Some things you can do to support the child or young person is to:

* not ignore racism and bullying against them
* ensure that they understand there are laws that make it illegal to discriminate against an individual or group based on their cultural background
* tell them that unjust attitudes or actions are not deserved or acceptable
* be a role model for them on how to advocate on behalf of themselves
	+ teach them to be respectful while being verbally assertive and confident in their body language and response to racism and bullying.

### Supporting and maintaining cultural connection

Sometimes, Aboriginal children and young people are disconnected from their community and culture. They are often at particular disadvantage, because they do not have the opportunity to experience the strength and richness of Aboriginal culture. They may have been exposed to only negative images and ideas of Aboriginal people. Consequently, they may have low self-esteem and a poor sense of their identity.

It is critical for these children and young people to develop a positive attitude to their Aboriginal culture and community. Seeking support from your agency and local Aboriginal services will be helpful.

### Participating in cultural events and activities

Attending cultural events and activities supports children and young people to feel a sense of belonging to their community, enables them to see strong members of their Aboriginal community, spend time with Elders and other Aboriginal people, and helps in the development of a strong cultural identity.

When you attend these events with the child or young person, you show them you respect and value their cultural identity, and it provides an opportunity for you to learn more about Aboriginal culture and what it means for the child or young person and their community.

There are a number of cultural activities that you can attend with the child or young person, or to support them to attend, which may include:

* Aboriginal playgroups, childcare centres or kindergartens
* homework clubs, youth groups and afterschool groups at your local Aboriginal service
* cultural centres and museums like Bunjilaka at Melbourne Museum or Koorie Heritage Trust
* Family reunions or camps
* Aboriginal sports carnivals or sporting groups
	+ community cultural ceremonies.

There are many significant dates and cultural events throughout the year that are important for Aboriginal people to come together to grieve what has been lost, and the impacts of past government policies; but also to celebrate history, culture, achievements and the resilience and strength of Aboriginal people.

It is important for you to know the dates of these events, and see that the child or young person in your care attends local events with you, their family and community. Local Aboriginal services will be able to provide information about local activities occurring.

#### Significant cultural events and dates include:

* **Sorry Day** is 26 May each year.
* **Reconciliation Week** is 27 May to 3 June each year.
* **National Aborigines and Islanders Day of Commemoration (NAIDOC)** week is in July each year.
	+ **National Aboriginal and Islander Children’s Day** is on 4 August each year.

Support, contacts and further reading

You should be supported by your agency to be a culturally competent carer. This support can be provided through supervision, cultural advice, training, and professional development.

Your local Aboriginal services will also be a wealth of knowledge, provide support services to you and the Aboriginal child or young person in your care, and be aware of local events and activities that are occurring in the community.

### Useful resources

* [Aboriginal and Torres Strait Islander Health Services Directory](http://www.atsihealth.org/) [http://www.atsihealth.org/]
* [Aboriginal associations and organisation contact details](https://www.yellowpages.com.au/vic/aboriginal-torres-strait-islander-associations-organisations-40592-category.html) [https://www.yellowpages.com.au/vic/aboriginal-torres-strait-islander-associations-organisations-40592-category.html]
* [Australian Institute of Aboriginal and Torres Strait Islander Studies](http://aiatsis.gov.au/) [http://aiatsis.gov.au/]
* [Caring for Aboriginal and Torres Strait Islander children in out-of-home care](http://www.vacca.org/) (VACCA) [http://www.vacca.org/]
* [Commission for Children and Young People](https://ccyp.vic.gov.au/) [https://ccyp.vic.gov.au/] provide a range of articles and links on their website
* [Foster Care Association of Victoria](https://www.fcav.org.au/) [https://www.fcav.org.au/]
* [Growing up our way](http://www.snaicc.org.au/product/growing-up-our-way-child-rearing-practices-matrix/) [http://www.snaicc.org.au/product/growing-up-our-way-child-rearing-practices-matrix/] child rearing practice matrix
* Information about child protection laws in Victoria for [Koori families](http://www.fvpls.org/) [http://www.fvpls.org/]
* [Koorie Heritage Trust](http://koorieheritagetrust.com.au/) [http://koorieheritagetrust.com.au/]
* Koorie Youth Council – for young Aboriginal people aged 12–25 years of age, check the website
* [Magabala Books](https://www.magabala.com/) [https://www.magabala.com/] have a great range of books, including many for children and young people
* News – subscriptions are available for:
	+ - [National Indigenous Times](http://nit.com.au/) [http://nit.com.au/]
		- Koori Mail 02 6622 2666
			* Deadly Vibe Magazine, check the website
* [Reconciliation Australia](https://www.reconciliation.org.au/) [https://www.reconciliation.org.au/]
* [Secretariat of National Aboriginal and Islander Child Care](http://www.snaicc.org.au/product/growing-up-our-way-child-rearing-practices-matrix/) (SNAICC) [http://www.snaicc.org.au/] this is the national body for Aboriginal and Torres Strait Islander children’s services, and provides training and resources for carers of Aboriginal children, including resources about Aboriginal child rearing practices. Call 03 9489 8099
* [Victorian Aboriginal Child Care Agency](http://www.vacca.org/) [http://www.vacca.org/] (VACCA) – this agency provides training, cultural and parenting information, support for carers, groups and resources. Call 03 9287 8800
	+ [Victorian Aboriginal Children and Young People’s Alliance](http://www.vaccho.org.au/policy-advocacy/vacypa/) [http://www.vaccho.org.au/policy-advocacy/vacypa/]

## Information sheet 8: Education support

There are many education services and supports available to help children and young people. This information sheet outlines the programs and educational support available to children and young people. Specific education resources for children and young people in out-of-home are also outlined.

### School support programs and packages

Education support programs are available to assist children and young people with high support needs. These programs either support the child or young person directly, or provide resources to those caring for them.

### Preschool Field Officer Program for kindergartens

This program supports the access and participation of children with additional needs in kindergarten. Preschool field officers support kindergartens by providing consultation, resources and advice to teachers. Any state- funded kindergarten program can access this service. You can provide authorisation for a kindergarten to access this assistance for the child in your care.

### Inclusion support for Commonwealth- funded care

The Inclusion and Professional Support Program aims to improve access and participation of children with additional needs in early childhood and child care services.

This may include assisting childcare services to access specialist equipment, bi-cultural support or the Inclusion Support Subsidy.

In centre-based care, the Inclusion Support Subsidy contributes towards the cost of engaging an extra childcare educator to increase the educator-to-child ratio, when a child or children with ongoing high support needs are in care including support for:

* children with a disability, including those undergoing assessments for disability
* children from culturally and linguistically diverse backgrounds
* children from a refugee or humanitarian intervention background
* Aboriginal and Torres Strait Islander children
* children with serious medical conditions
* children presenting with language and speech delays
	+ children presenting with disruptive behaviour.

For more information about the inclusion programs, visit [Commonwealth Government Department of Education and Training](https://www.education.gov.au/) [https://www.education.gov.au/] and search for the Inclusion and Professional Support Program.

### Kindergarten Inclusion Support Package program

Kindergarten Inclusion Support Packages are designed to build the capacity of funded kindergarten programs to support the access and participation of children with disabilities, and ongoing high-support needs or complex medical needs.

### Kindergarten Inclusion Support Packages

These packages may provide:

* training and consultancy for kindergarten staff to support adjustments, adaptations and modifications of the kindergarten program
* specialist training for kindergarten staff to meet the individual needs of a particular child with a disability, ongoing high-support needs or complex medical needs
* minor building modifications (such as ramps and grip rails) to support a particular child’s attendance in the kindergarten program and participation in the activities
	+ staffing support in the form of an additional assistant who works as a member of the team delivering a program developed by a kindergarten teacher that is inclusive of all children.

Authorisation for Kindergarten Inclusion Support applications may be made by parents or the person who has parental responsibility for the child.

### Early Childhood Intervention Services

Early Childhood Intervention Services support children with a disability or developmental delay from birth to school entry. These services provide special education, therapy, counselling, service planning and coordination, assistance and support to access early childhood services. Services are designed to meet the needs of the child, and are focused on supporting them in their natural environment, and in their everyday experiences and activities.

When a child in out-of-home care is assessed as being eligible for Early Childhood Intervention Services support, they are prioritised, along with other higher-risk children, as places become available. If services are not already in place, an application for Early Childhood Intervention Services should be an immediate priority when children with a disability or developmental delay enter out-of- home care.

If services are in place, continued access to the Early Childhood Intervention Services supports should be maintained. When a child who is provided with this support is moved to a different location, this may require transferring to another local service.

The National Disability Insurance Scheme is currently being rolled out across Victoria. See Chapter 9. Caring for children and young people with diverse needs for information on this scheme.

### Raising the Bar

The Raising the Bar manual supports foster and kinship carers in the education of children and young people in their care. Produced by Berry Street, it provides information and resources to foster and kinship care workers supporting carers. The tip sheets and checklists will also be helpful for carers.

The manual has been created in recognition of how the educational support a carer provides can have a significant and positive impact on a young person’s life, and make a real difference to who they become. Download [Raising the Bar](http://www.childhoodinstitute.org.au/Resources) [http://www.childhoodinstitute.org.au/Resources].

### Dolly Parton’s Imagination Library

The Dolly Parton’s Imagination Library is an initiative of United Way Australia that delivers free books monthly, to children from 0 to five years of age, with supporting resources for parents and carers.

United Way Australia offers this program to a number of agencies working with children in out-of-home care.

Every month, the nominated child will receive a high-quality, age-appropriate book chosen by experts in early childhood development. While building a lasting love of reading, the program also builds the basic skills children need to start school and be ready to learn.

Any child aged between 0–4.5 years, who is linked to a partner agency of United Way Australia is eligible to join the library.

For more information, please visit [Dolly Parton’s Imagination Library](https://au.imaginationlibrary.com/) [https://au.imaginationlibrary.com/]

### LOOKOUT Education Support Centres

School-aged young Victorians in out-of- home care are considerably less likely than their peers to attend school and engage with education.

As a result, they are less likely to achieve the national benchmarks for reading and numeracy or attain a Year 12 or equivalent qualification. Young people in out-of-home care tend to move between care settings, and therefore educational settings, so are at high risk of falling through the cracks educationally.

LOOKOUT Education Support Centres are a Department of Education and Training initiative that support children and young people in out-of-home care to complete their education and achieve their best. The centres offer a multi-disciplinary service response, building on the expertise and professional practice within schools, the community sector and across the Department of Education and Training and the Department of Health and Human Services. Centre staff are based in the Department of Education and Training’s regional offices.

LOOKOUT Education Support Centre staff will advocate and support all children and young people in out-of-home care within the education system.

Centres will work in partnership with schools to enrol young people, monitor and evaluate educational progress, set targets, and co- ordinate resources and activities to support the child’s education at school and at home. This will lead to improvements in school attendance, engagement and achievement.

LOOKOUT Education Support Centre staff will partner with students, schools and carers to get better results for vulnerable students in out-of-home care.

These young people will receive more support than ever to remain engaged with education and training.

For more information, please visit [LOOKOUT](http://www.education.vic.gov.au/about/educationstate/Pages/lookout.aspx?Redirect=2) [http://www.education.vic.gov.au/about/educationstate/Pages/lookout.aspx?Redirect=2]

## Information sheet 9: Age-appropriate sexual behaviours

### Classify the behaviours

Classify the behaviours is an outline of the differences between sexual behaviour that is part of the normal growing-up process, and sexual behaviours that are concerning. It was created by the [South East Centre Against Sexual Assault](http://www.secasa.com.au/pages/age-appropriate-sexual-behaviour-guide/classify-the-behaviour) [http://www.secasa.com.au/pages/age-appropriate-sexual-behaviour-guide/classify-the-behaviour]

### Age-appropriate sexual behaviours

Sex play and sexual behaviour is normal in children and young people. Age-appropriate behaviours do not require intervention by carers and professionals. Children can readily be distracted from these behaviours. The accompanying emotions and expressions of age-appropriate sexual play include laughter, spontaneity, curiosity and experimentation.

### Concerning sexual behaviours

Some behaviours signal the need to watch for the frequency and persistence of these behaviours. If a child or young person exhibits several of these behaviours or they continue, despite clear requests to stop, seek advice from the agency

### Very concerning sexual behaviours

There are behaviours that are indicative of very concerning sexual behaviour. Most of these behaviours require immediate professional advice, particularly if they are accompanied by secrecy, anxiety, tension, coercion, force, compulsion and threats. Some of the behaviours listed become criminal offences when the child reaches the age of criminal responsibility (10 years of age in Victoria, Australia). Criminal offences require immediate reporting to the police.

For more information on these behaviours and [to download the booklet, visit www.secasa.com. au/pages/age-appropriate-sexual-behaviour- guide/classify-the-behaviour/. Hard copies](http://www.secasa.com.au/pages/age-appropriate-sexual-behaviour-guide/classify-the-behaviour/) of this booklet can be obtained from South East Centre Against Sexual Assault, call 03 9928 8741.

### Centres Against Sexual Assault across Victoria

In Victoria, the Centres Against Sexual Assault (CASAs) are non-profit, government-funded organisations that provide support and intervention to women, children and men, who are victims and survivors of sexual assault. There are 15 CASAs across the state of Victoria and the Victorian Sexual Assault Crisis Line (after hours) offering free, confidential 24-hour emergency or crisis care for victims and survivors of sexual assault. This includes crisis counselling support, and access to medical care and legal services, as well as counselling support for adults who were abused in their childhood.

## Centres Against Sexual Assault

Sexual Assault Crisis Line

| Name | Address | Contact details |
| --- | --- | --- |
| Sexual Assault Crisis Line | Victoria | Call 1800 806 292 |

Metropolitan CASAs

| Name | Address | Contact details |
| --- | --- | --- |
| Eastern CASA | 17 Ware Crescent,Ringwood East, 3135 | Call: 03 9870 7330Email: ecasa@easternhealth.org.au[Website: www.easternhealth.org.au/](http://www.easternhealth.org.au/services/ambulatory-community-services/eastern-centre-against-sexual-assault)[services/ambulatory-community-](http://www.easternhealth.org.au/services/ambulatory-community-services/eastern-centre-against-sexual-assault)[services/eastern-centre-against-](http://www.easternhealth.org.au/services/ambulatory-community-services/eastern-centre-against-sexual-assault)[sexual-assault](http://www.easternhealth.org.au/services/ambulatory-community-services/eastern-centre-against-sexual-assault) |
| Gatehouse Centre | Level 5, South East Building, The Royal Children’s Hospital, Flemington Road Parkville, 3052 | Call: 03 9345 6391Email: gatehouse.centre@rch.org.auWebsite: [www.rch.org.au/gatehouse](http://www.rch.org.au/gatehouse) |
| Northern CASA | Building 26 Repatriation Hospital, 300 Waterdale Road Heidelberg West, 3081 | Call: 03 9496 2240Email: ncasa@austin.org.au[Website: www.austin.org.au/](http://www.austin.org.au/northerncasa)[northerncasa](http://www.austin.org.au/northerncasa) |
| South Eastern CASA | 11 Chester Street East Bentleigh, 3165  | Call: 03 9594 2289Email: secasa@southernhealth.org.auWebsite: [www.secasa.com.au](http://www.secasa.com.au/) |
| West CASA | 53 Ballarat Road,Footscray, 3011 | Call: 03 9687 5811Email: info@westcasa.org.auWebsite: [www.westcasa.org.au](http://www.westcasa.org.au/) |

Rural CASAs

| Name | Address | Contact details |
| --- | --- | --- |
| Barwon CASA | Level 1, 59–63 Spring Street,Geelong West, 3218 | Call: 03 5222 4318Email: admin@barwoncasa.orgWebsit[e: www.barwoncasa.org](http://www.barwoncasa.org/) |
| Centre AgainstViolence (Ovens Murray District) | 50 Docker Street,Wangaratta, 3677 | Call: 03 5722 2203Email: admin@cav.org.auWebsite:[www.centreagainstviolence.org.au](http://www.centreagainstviolence.org.au/) |
| Gippsland CASA | 31–41 Buckley Street,Morwell, 3840 | Call: 03 5134 3922Email: mail@gippscasa.orgWebsite: [www.gcasa.org.au](http://www.gcasa.org.au/) |
| Goulburn Valley CASA | 130 Nixon Street,Shepparton, 3630 | Call: 03 5831 2343Email: gvcasa@gvhealth.org.auWebsite: [www.gvcasa.com.au](http://www.gvcasa.com.au/) |
| Loddon Campaspe CASA | 71 Bridge StreetBendigo, 3550 | Call: 03 5441 0430Fax: 5444 6713Email: lccasa@lccasa.org.auWebsite: [www.lccasa.org.au](http://www.lccasa.org.au/) |
| Mallee Sexual Assault Unit | Suite 1, 144–146, Lime AvenueMildura, 3500 | Call: 03 5025 5400Email: info@msau-mdvs.org.auWebsite: [www.msau-mdvs.org.au](http://www.msau-mdvs.org.au/) |
| South Western CASA | 299 Koroit Street Warrnambool, 3280 | Call: 03 5564 4144Email: casa@swh.net.auWebsite: [www.casa.org.au/swcasa](http://www.swcasa.org.au/) |

## Information sheet 10: When a question arises about the quality of care you are providing

The safety and wellbeing of children and young people is the paramount responsibility of the department, the agency and carers. Every concern raised about the quality of care of children and young people in out-of-home care is taken very seriously.

### The quality of care process

The diagram below gives an outline of the different elements of the quality of care process.

Issue: Screening of concerns (Investigation Planning Group)

| Step1 - options for action | Step 2 - options for action | Step 3 - options for action |
| --- | --- | --- |
| No further action |  |  |
| Supervision and support |  |  |
| Formal case review | No further action, orAction plan developed, or Carer no longer in role |  |
| Investigation | UnsubstantiatedSubstantiated | No further action orSupport and supervision orFormal care reviewCarer no longer provides care orCarer continues to provide care with supervision |

Timeframe for quality of care process

24 hours to 28 working days

### Screening of concerns

All concerns about possible physical, sexual or emotional abuse, neglect, or other quality of care concerns must initially be screened through a discussion between the agency manager, child protection team manager and the quality of care coordinator employed by the department. This is known as the Investigation Planning Group. They will determine the exact nature of the concern and the most appropriate response.

The four possible responses to quality of care concerns are to:

* take no further action – in some cases, it can be clearly established that the report of concern is inaccurate, or there is no basis for concerns about the safety of the child or young person, or the quality of care the child or young person is receiving. With this decision, the quality of care process is complete
* recommend that concerns are managed via support and supervision – it is expected that the majority of quality of care concerns will be managed through support or supervision, either by the agency or by child protection, depending on the care arrangements. This decision ends the quality of care process, although you will continue to discuss and reflect on the issues raised during supervision with your agency case worker
* recommend a formal care review – this occurs when there are serious or repeated concerns about possible poor-quality care, which has been assessed as not relating to possible abuse or neglect
	+ commence an investigation into the concerns – this response, which may or may not involve the police, will be implemented in response to allegations of possible abuse or neglect.

Formal care review

There are times when concerns raised about the quality of care provided to a child or young person in out-of-home care do not relate to possible abuse or neglect, but they may still affect a child or young person’s safety or wellbeing.

Examples of poor-quality care could be in relation to:

* inadequate hygiene
* poor diet
* inadequate supervision
* inappropriate discipline
	+ not cooperating with case plan arrangements for the child or young person not complying with the department’s [standards](http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies%2C-guidelines-and-legislation/human-services-standards) [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]

A formal care review occurs where the quality of care concerns raised about a carer cannot be considered as abuse in care, but are significant enough in type or volume to require exploration of the carer’s capacity to provide quality care to children and young people in out-of-home care.

Formal care reviews are led by the agency, with participation of the department’s representatives. A formal care review panel will meet to determine if an agreed action plan can be implemented to address the identified concerns, and if it is appropriate for the carer to continue in their role.

A carer will be given time and support to meet the goals outlined in the action plan to ensure the safety and wellbeing of any children or young people in their care. After a three-month period, the action plan will be reviewed to determine whether concerns have been addressed.

If concerns have been addressed, no further action may be required. If concerns have not been addressed, consideration will need to be given as to whether the carer is able to continue in their caring capacity.

### Investigation

In some cases, the quality of care concern involves allegations about physical or sexual abuse, or serious neglect. When this occurs, an investigation will commence. The child protection team manager will consult with the quality of care coordinator and the agency manager to assess the immediate risk of harm to the child or young person.

This assessment will determine what actions are in the best interests of the child or young person, taking account of natural justice and procedural fairness for carers. It may involve interviews of the child or young person (where appropriate), the carer and other involved parties.

Where the assessment has found that the allegation of physical or sexual abuse, or serious neglect could be considered a criminal offence, the police will be informed to determine if they will conduct a criminal investigation.

The process of addressing the concern may also involve a separate independent investigation and suitability panel process. Through this process, carers can be disqualified from providing care, if the suitability panel determines that the carer poses an unacceptable risk of harm to children or young people. This may occur at the same time as a quality of care investigation, but is a separate process. A decision of disqualification may also affect your ability to hold a Working with Children Check card.

### Resolving differences

When a carer disagrees with a decision or recommendation made during the course of an investigation or formal care review regarding their approval to provide out-of-home care, they should raise their concerns with the agency, in accordance with the organisations policy and procedures. See **Chapter 16. Issues, Compliments and Complaints**for more information about resolving differences regarding to the management of the quality of care process, or to request a review of a substantiation decision.

For more information on quality of care processes and to access the [Child protection manual](http://www.cpmanual.vic.gov.au/) [http://www.cpmanual.vic.gov.au/] and [Department of Health and Human Services](https://www.dhhs.vic.gov.au/) [https://www.dhhs.vic.gov.au/]

1. The Children, Youth and Families Act states that the best interest of a child or young person must always be paramount when making a decision, or taking action. When determining whether a decision or action is in the child’s best interests, there are a number of needs that must always be considered:

	* the need to protect the child from harm
	* the need to protect the child’s rights
	* the need to promote the child’s development (taking into account his or her age, stage of development, culture and gender). [↑](#footnote-ref-1)
2. As defined by: Australian Standards customer satisfaction – guidelines for complaints handling in organisations. [↑](#footnote-ref-2)