



Government of South Australia

Office of the Guardian
for Children and Young People

Response to the Consultation Paper on
Keeping Them Safe – In Our Care

November 2006

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1. Introduction

- 1.1 Among other statutory functions the Guardian for Children and Young People acts as an advocate for the interests of children under the guardianship, or in the custody, of the Minister for Families and Communities. It is in this capacity that the following submission is made.
- 1.2 This submission is prepared on the basis of the Office's experience in investigating individual matters, talking with children, workers and carers about their experience, listening to the young people associated with our Office and our knowledge of policies and practice in Families SA and alternative care agencies.
- 1.3 We welcome the commitments and principles in the draft document and the intention to significantly improve the provision of alternative care services in South Australia. If we can be of further assistance in the development of the plan please contact our Office.
- 1.4 As agreed with you, we have kept to broad comments about the plan and have not commented on each point, nor provided details or case studies.

2. General

- 2.1 We welcome the intention to diversify the models of care and to legitimate a range of alternative care services by inclusion in a coordinated system of care.
- 2.2 The commitment to child-centred planning and participation of children and young people in the decisions that affect them is re-iterated in the plan. The challenge lies in making this a reality, in family care meetings, case meetings and annual reviews for example. We would recommend too that the implementation process demonstrate how this can be done at a systemic level by engaging young people in the decisions about the plan. We would be happy to talk with you further about how this could be achieved.
- 2.3 Also welcome is the stated commitment to the principles of certainty and stability for children. However, it is not clear from the document what place permanency planning has in case management for children in care. While overseas and interstate jurisdictions are grappling with the policy and practice implications of permanency planning the South Australian plan appears to avoid it.
- 2.4 We welcome the stated commitment to a partnership approach in the implementation of the plan. The implementation process is an opportunity to demonstrate commitment to shared responsibility by making it inclusive and respectful.
- 2.5 It is highly significant that the plan commences with the intention to strengthen families. This should be carried through in implementation so that a family support response runs parallel to alternative care planning for children. Policy, planning and practice should reinforce the links between these two service areas. Given that most children come into care as a result of neglect, the first question we should answer is, "have we done all we can to support the family of this child?"
- 2.6 Our own advocacy message has rested on the challenge to agencies, carers and workers that we should be providing the best care, not just adequate. It is pleasing to see this reinforced in the plan by raising expectations of what can and should be provided well beyond "doing no harm".

- 2.7 The draft plan understandably emphasises semi-professional and professional care for children and young people with high needs. They are the children who have previously been let down by the limited range of care options available. The final plan though will need to be more specific about the support and service to 'regular' family-based care.
- 2.8 There is a tendency for any system that deals with human welfare and related crises to focus on the 'hard end' of need in the allocation of time, services and timely response. However, as "conscientious parents" we have to be strong and partisan advocates for every child and young person in care, including those who are "trundling along". It is not okay to accept that children in care will probably perform below average. We have to set our sights higher for them and ensure they get every opportunity to reach their goals.
- 2.9 The draft plan largely neglects the care of children and young people who are subjects of youth justice orders. The final plan should consider the provision of bail accommodation, community detention, home detention, family-based placements for those on remand, transition planning from secure care centres and the quality of care in secure care centres.
- 2.10 The final plan should also address the child protection issues that will emerge in newly established refugee communities. At present the services are focused on providing for unaccompanied humanitarian minors. There is an opportunity at this point of time to attempt a more sound preventative approach by engaging the communities in developing their own response to child abuse but firmly in the context of our statutory responsibilities and children's rights.
- 2.11 The success of the proposed changes will depend in large part on the skills and knowledge of all involved in the care of children. There is acknowledgment of the training needs of carers in the plan but the same emphasis should be given to the training needs of social workers, youth workers and residential workers. For example, training in child development, child-focussed assessments and court reports, and talking with children would be beneficial.

3. Stronger families

- 3.1 The renewed focus on supporting families is most welcome. This highlights the need to re-invigorate and reward community development work, community knowledge and inter-agency cooperation. This could partly be achieved by mandating inter-agency work and community engagement in job specifications, induction of new workers, the performance expectations of District Centre managers and with identified 'drivers' of community engagement in each office.
- 3.2 Our recent report on the audits of annual reviews reinforced other evidence that a majority of children come into care because of their parents' drug and alcohol abuse. There is a need to strengthen the links between drug and alcohol services, family support services and Families SA to ensure that services are accessible, timely and consistent. In a recent trial, a District Centre had a drug and alcohol worker located in the office. Was an evaluation ever conducted into the effectiveness of this approach?
- 3.3 Family Care Meetings could play a key role in assisting the family to recognise issues and commit to addressing them. Indeed this is their intention. As we have reported before, the effectiveness of Family Care Meetings is lost when the meeting is held close to the date of a Court application and at the end of an

investigative and threatening engagement with the family. It should instead be a mechanism in participative case work with the family and child.

- 3.4 There is a critical gap in services to families struggling with crises and, as a result, struggling to provide adequate care for their children. These are the children who should not be brought into state care but who will be if help is not available. The gap has been recognised and is being investigated through the Vulnerable Infants Services Plan. We hope that the investigation does not stop at coordination of existing services but addresses the sizeable service gaps.

4. Care planning

- 4.1 We have previously identified a number of issues with the provision of a good reunification service to families and children. This partly stems from lack of support to case workers in making timely and reasoned decisions about reunification. It also stems from inconsistent use of reunification services. Based on interviews with workers there is a lack of understanding between Families SA and the reunification services in the metropolitan area and a lack of confidence in the service in some country regions.
- 4.2 In order to make the early planning process more timely and decisive for children the shared understanding of legislative intent and principles between the Youth Court, the Care and Protection Unit, Families SA and non-government providers is critical.
- 4.3 More consideration should be given to the security and identity benefits to children of ongoing guardianship by other persons (relative and non-relative carers) and adoption. Where this is deemed in the best interests of the child it should be encouraged and obstacles addressed. For example, contact with birth families can be maintained and priority access to services continued.
- 4.4 Young people report their grief on losing contact with their siblings. We welcome the acknowledgment of this in the draft plan and want to emphasise how significant regular contact is in most cases, where they cannot be placed together.

5. Care packages

- 5.1 There is undoubtedly more planning required to make the concept of care packages for every child in care a reality. Few would dispute the principle of individualised care responses but it is not clear how this changes the care plan, the alternative care plan or, more significantly, the responsiveness of services to individual circumstances.
- 5.2 Without information about the recommendations made following previous evaluations of the existing program of Individual Packages of Care it is difficult to comment in detail on the proposal to extend the concept to all children. [It may be that a very different approach is planned but the use of term 'packages' has linked the two.] Anecdotally four out of five young people who leave residential care following the commencement of an IPC return to residential care. This suggests they do not have the desired outcomes.
- 5.3 Through interviews with workers in Families SA and in non-government providers there is a disjuncture between expectations of what is to be provided in an IPC

and what, in reality, can be provided. This disjuncture is exacerbated by the time lag between referral and allocation.

- 5.4 The success of expanding the use of IPCs may be impeded by the recognised skills shortage of workers to provide the level of care required and the availability of recommended services. This issue is of heightened significance in country regions.
- 5.5 The implications for financial viability and capacity to be innovative in the non-government providers by moving to a more pure form of 'unit funding' will need to be considered carefully.
- 5.6 We welcome the commitment to implement the Alternative Care Standards and to seek regular external review of compliance.

6. Aboriginal children

- 6.1 Underpinning planning for alternative care for Aboriginal children is the question of whether and how we should move to Aboriginal controlled family and child welfare services. This will need to be expanded on in the implementation, including strategies to build the capacity of Aboriginal community organisations to govern and control child care services.
- 6.2 In successive field consultations we have noted the deliberate different process adopted in engaging Aboriginal families in Family Care Meetings, with the intention of avoiding Court orders. While this seems desirable and is one of the intentions of such meetings, there is now some anecdotal evidence that this has merely delayed removal of the child under a formal order and possibly resulted in drawn out uncertainty and neglect for the child. It would be good to have a closer look at the outcomes for children of adopting this different approach.
- 6.3 There is still work to be done on improved understanding between Families SA and Aboriginal organisations on the principles, nature and capacity of family support and alternative care services for Aboriginal children.
- 6.4 In our field consultations and audits of annual reviews we have seen little evidence of the use of cultural maintenance plans.

7. Connected care

- 7.1 The focus on 'mirroring' extended families in the care family/team is welcome. The benefits of such wider support lie as much in support for the primary caregiver as in direct care of the child. That is, good child development rests on support for the primary caregiver in undertaking their role which is often provided by other family members.
- 7.2 The success of looking for carers in existing networks will depend in part on the strength of the relationships between local District Centre staff and other local agencies such as childcare centres and schools. This again highlights the need to re-invigorate and reward community work, community knowledge and inter-agency cooperation. [See 3.1]

8. Complex needs

- 8.1 Comprehensive implementation of the broader *Keeping Them Safe* reform program and heightened attention to family support and alternative care should result in a significant reduction in the numbers of children and young people with high and complex needs.
- 8.2 We welcome the intention to develop more home-like residential facilities. This would require preparedness to replace the existing facilities which accommodate 8-10 young people.
- 8.3 It would be good to engage Disability Services SA and CAMHS in the development of new models of accommodation and care so that responsibility is truly shared. At present the agencies draw a clear boundary around accommodation provision for children and young people under the guardianship of the Minister which detracts from innovative thinking and development of accommodation/care services for children with complex needs.
- 8.4 'Adolescence' is often identified as a period when placement stability is threatened, as it is in other families. A quick response from practitioners with expert knowledge and skills in working with young people and families in resolving adolescent and family issues could prevent a number of unnecessary moves of young people in care.

9. Foster carers

- 9.1 Improved matching of children and carers is welcome. Some young people have suggested more time is needed for the child or young person and carer to get to know each other before a decision on placement is made. This allows both to make a commitment based on their knowledge of each other.
- 9.2 A long term carer family of a particular child should be respected as, and expected to be, the child's family, in most circumstances. We have seen evidence of a household argument being quickly labelled a 'placement breakdown' and the young person is moved. The emphasis on 'family support' in the plan should equally apply to carer families, as should flexible use of budgets and programs to accommodate the support they need.
- 9.3 Our audits of annual reviews found little involvement of the carers in the review process. Participative case planning would require their active engagement.
- 9.4 Consistent with evidence from the survey of children and young people in Queensland¹, some young people here have reported concern at the lack of decision-making power that their carers have, especially as the child or young person considers them as their 'parents'. We therefore support the exploration of roles and responsibilities of foster 'parents'.

10. Residential care and leaving care

- 10.1 We accept that for some children and young people, family based care is not possible at times. This is generally because of damage to the child as a consequence of late removal from an abusive family and repeated placement

¹ Commission for Children and Young People and Child Guardian [2006] *Views of children and Young People in Care*, CCYPCG, Queensland

breakdown. Most children and young people though still express a preference for a nurturing family environment. The initiatives in this section are welcome as a significant number of children will spend at least some part of their time in residential care.

10.2 While it may not be desirable, a significant number of young people use SAAP services during their transition to independence. It is therefore important to engage the SAAP providers in discussion about transition and coordination of services.

10.3 Also to be addressed in the final plan is the question of how best to support the care family/team into adulthood of the young person in their care.

10.4 The current tension between the expected 'temporary' nature of residential care with the reality of long stays and the need for stability will need to be addressed.