



Centre for Excellence
in Child and Family Welfare Inc.



2014 Election statement



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**2014
Election
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About the Centre for Excellence in Child and Family Welfare

The Centre for Excellence in Child and Family Welfare (The Centre) is a peak body established to improve the lives of vulnerable children and their families. The Centre and its hundreds of members represent early childhood, child, youth and family support services, and out-of-home care services, including kinship care, foster care, residential care and services providing support for children moving on from care.

The Centre works with these organisations and those employed in child and family services to strengthen the quality and capacity of services. It does this through workforce development and learning, policy development research and advocacy for children and families.

Introduction

The Centre for Excellence in Child and Family Welfare (The Centre) and its members provide support and care for Victoria's most vulnerable children – abused or neglected children and those who may be at risk of abuse or neglect – and the families and carers of these children.

The number of vulnerable children and families in Victoria is growing at an alarming rate. Child welfare organisations are struggling to cope with the soaring demand for services to help these children and families. The Centre has therefore written this 2014 election statement to identify the child welfare policy areas that need the most urgent attention from Victoria's political parties as they prepare for the state election in November 2014.

The election statement outlines five priority areas that a newly elected government should address to rescue a child welfare system that is under severe strain and to improve the lives and prospects of the state's most vulnerable children and families.

The election statement includes recommendations to enhance service planning and delivery. It is based on statewide consultations with The Centre's member organisations and the 2012 Cummins Inquiry report into protecting Victoria's vulnerable children.¹

The election statement is underpinned by the following core values:

- children's safety and wellbeing are paramount
- parents, carers and families are supported and respected
- children's views are heard

Recent Victorian government reforms - challenges and opportunities

Much has been accomplished in the child and family welfare sector since 2012 when the Cummins Inquiry report set out new approaches for vulnerable children and their families, for example:

- the newly established independent Commissioner for Children and Young People and the Aboriginal Commissioner for Children and Young People
- introduction of Cradle to Kinder early parenting program
- introduction of the Springboard intensive education and outreach service for young people leaving residential care
- multi-disciplinary centres to respond to sexual assault
- extension of therapeutic approaches to foster and residential care.

The state government has also introduced notable changes to the way it funds and regulates the community services sector including individual packages and mandated child safety standards.

¹ Cummins P., Scott D. and Scales B., 2012, Report of the Protecting Victoria's Vulnerable Children Inquiry, State of Victoria, Department of Premier and Cabinet, Session 2010–12 PP. No 112

These changes have raised challenges for child and family service providers as well as other organisations across the community sector upon which the providers rely. Child and family services in Victoria are well positioned to rise to these challenges in providing for vulnerable children and their families but fundamental decisions need to be made about the next steps.

Chief of these is the need to re-examine the core respective functions of government and community service organisations in responding to vulnerable children and their families. The Centre believes that the role of government should mainly be that of resourcing, regulation and monitoring. Only in areas such as juvenile justice and child protection should government be providing services directly and these should be subject to the oversight of independent review. The Victorian Auditor General, the Commissioner for Children and Young People and the Aboriginal Commissioner for Children and Young People and the Children's Court have demonstrated their crucial role in these areas by ensuring improved services and better outcomes for vulnerable children and families.

An important next step for government is to consider the extra benefits that could be gained if community-based service organisations were to play a greater role in such areas. An example where significant service improvement and potential efficiencies could be found is in the kinship care support area where the support of more kinship care families could be undertaken by family workers in community service organisations. This would free up child protection workers to focus on their core role of investigating reported cases of suspected child abuse or neglect.

Service redevelopment through re-commissioning in the mental health and in the alcohol and other drugs programs has had significant impact on the essential support services available to vulnerable families. The Centre recommends that a newly elected government should introduce a tiered, more progressive approach to service redevelopment which includes protections for service users and community organisations such as those adopted in the UK.² It is important that service users and community service organisations are equal partners in shaping a redeveloped services approach for vulnerable children and their families.³

Community access and early intervention are proven ways to help strengthen vulnerable families and reduce the risk of children entering the protective system. Governments in all jurisdictions have identified the importance of local area networked approaches to planning and providing services to people. In Victoria ChildFIRST and Integrated Family Networks are the platform for further service provision for vulnerable families. An important next step for government is to ensure an expanded range of service types for this platform, integration with other local area approaches and co-construction at the local level.

Child and family service organisations contribute to the economic and social well-being of the whole community through their enormous volunteer contribution and fundraising for service innovation and enhancement. They are crucial to the fabric of the community. Government should ensure that strategies to strengthen service provision and accountability also recognise and support the community's contribution to vulnerable children and their families.

2 Centre for Excellence in Child and Family Welfare, Submission to Sector Reform Council Discussion Paper on Recommissioning, September 2014 at www.cfecfw.asn.au

3 Centre for Excellence in Child and Family Welfare, 2011, Issues Paper One: Their Outcomes: local governance and outcomes frameworks for vulnerable children young people and their families, at www.cfecfw.asn.au/sites/www.cfecfw.asn.au/files/submissions/PVCC_Issues_Paper_1_Final.pdf

Executive summary

The future prosperity and social cohesion of our nation depends on our ability as a community to ensure all children have the opportunity to thrive and go on to reach their potential. Children and their families have human rights which must be supported and sustained.^{4,5} Large and growing numbers of Victorian children are being denied the opportunity to thrive because the state is experiencing high and surging rates of child abuse and neglect.

This had led to unprecedented levels of demand for child and family support services, including out-of-home care such as foster care and residential care. The lack of adequate funding for these services has left them struggling to meet the increasingly complex needs of the vulnerable children and families they are expected to care for. The situation is dire for foster care and residential care, with the number of children living in out-of-home care expected to soar by 29 per cent over the next five years, based on current trends.

The costs of inadequate funding and care for Victoria's most vulnerable children are stark and tragic for the children themselves and our community. For example, based on figures for 2009–10, the total lifetime cost for children reported to child protection for the first time in a single year – taking into account health and support services, unemployment and loss of productivity, out-of-home care and involvement in the legal system – is estimated to be \$1.6–1.9 billion.

Responding to the steep rise in the number of vulnerable children and families requiring help is a difficult challenge for governments. However, governments often tend to adopt a short-term response to the challenge by focusing on tertiary service demand at the expense of community based early intervention service provision.⁶ This contributes to a demand spiral which ultimately overwhelms the service system and results in children and families being trapped in the statutory service approach with poor outcomes and generational impacts.

The recent figures showing the large rise in reports of suspected and substantiated child abuse cases to the child protection system indicate we may be approaching that point.⁷ The Centre strongly believes that community based early intervention and support services should be significantly enhanced and expanded to reduce the number of children and families entering the child protection system.

4 The United Nations General Assembly, 1989, Convention on the Rights of the Child, United Nations, 20th November 1989

5 Charter of Human Rights and Responsibilities Act 2006, No 43/2006

6 McGorry, Patrick, 2014, The awakening giant, Sunday Age, September 21

7 Department of Human Services, 2014, Department of Human Services Annual Report, Government of Victoria, September 2014

Hence this election statement outlines five priority areas that a newly elected government needs to address to achieve meaningful improvements for vulnerable children and families and the services that help these families. The five priority areas for government action are:

1. Responding to surging numbers of vulnerable children.
2. Boosting early intervention programs for families.
3. Improving out-of-home care for children
4. Supporting older teens moving from care.
5. Building stronger services.

Some of the Centre's key recommendations for each priority area are included in the list below. The full list of recommendations for each priority area can be found in the rest of this document.



The Centre calls on the Incoming government to:

1. Responding to surging numbers of vulnerable children

- Provide growth funding for the out-of-home care service system to the level of trend growth for at least the next term of the new government.
- Immediately review pricing for children's and family services.
- Provide funding for the increased demand (10 per cent) being experienced by family support services.

2. The need to boost early intervention programs for families

For Aboriginal families:

- Fully implement s18 of the *Children, Youth and Families Act, 2005*
- Invest in initiatives designed to improve Aboriginal Community Controlled Organisation workforce capacity
- Resource Aboriginal Community Controlled Organisations to ensure Aboriginal children can stay connected to their culture.
- Implement an urgent review of Early Parenting Centres including improving the adequacy of funding and expanding services.
- Extend Stronger Families across the state.

3. Out-of-home care for children

- Transfer responsibility for supporting the children and families in kinship care to community service organisations.
- Increase direct client costs allowance for educational medical and special services to \$6,000 per annum per child in home based care.
- Recognise the need for adequate staffing levels in residential care by immediately funding all placements at the complex level (transferring RP2 to RP3 placements).

4. How to support older teens moving on from care

- Provide all young people moving on from care with holistic support until they turn 21 at least. Support should be mandatory, not discretionary.
- Provide a combined education and housing guarantee for children moving on from care by providing full fee relief for post compulsory education and appropriately tailored support and housing packages, to the age of 25.

5. Building stronger services

- Develop a comprehensive workforce strategy that considers the professional and voluntary workforce.

1. Responding to surging numbers of vulnerable children

Demand for services to help vulnerable children and their families is growing at an unprecedented rate due to Victoria's population boom, the rapid rise in the numbers of vulnerable children and the tendency for these children to have more complex problems.

Greater Melbourne's population growth is the fastest of Australia's capital cities. Evidence shows that the complexity of need of children coming to the attention of family support services and the child protection system is increasing.⁸

In 2013–14 suspected cases of child abuse or neglect in Victoria reported by professionals and community members increased by 12 per cent to 82,075.⁹ This followed a 15 per cent increase between 2011–12 and 2012–13 compared to eight per cent growth nationally.

Victoria's growth in reports or notifications of children suspected of being abused or neglected was the highest rate of growth among all Australian states during the same period. Changed procedures such as police reporting of family violence situations where children are involved and changed legislative provision (e.g. expansion of mandatory reporting) have also contributed to the large rise in notifications.

Evidence about the rapidly rising number of substantiated cases of abused or neglected children and children found to be at risk of abuse or neglect, is also deeply concerning. The number of children found to be at risk of significant harm in Victoria increased by fourteen per cent to 12,401 in 2013–14.¹⁰

⁸ Delfabbro, P. McCormick, J. Kettler, L & Fernandez, E 2011, *Reunifications Patterns in Victoria: An analysis of social and demographic correlates*. Report prepared for the Department of Human Services, Victoria, University of Adelaide

⁹ Department of Human Services, 2014, p 48

¹⁰ Ibid

Surging rates of abused and neglected Victorian children¹⁰

An annual 46 per cent rise in the number of children found to be at risk of sexual harm, increasing from 901 substantiated cases in 2011–12 to 1,319 cases in 2012–13. This may reflect improved detection and investigation by professionals.

A 47 per cent increase in substantiated cases of significant harm involving babies and infants under one year of age, increasing from 887 cases in 2011–12 to 1,305 cases in 2012–13.

An 11 per cent rise in substantiated cases of harm involving Aboriginal and Torres Straits Islander children and a 6 per cent rise in the number of Aboriginal and Torres Straits Islander children placed in out-of-home care.

A 7 per cent increase in the number of children subject to a Children's Court Protection Order in Victoria: from 7,262 children in 2011–12 to 7,751 children in 2012–13. This is slightly above a national growth of five per cent.

The number of children placed in out-of-home care in Victoria increased by five per cent from 6,207 children in 2011–12 to 6,542 in 2012–13 compared to two per cent nationally.



Overwhelming demand across all services¹¹

Pressures are reported across child and family services and within the whole child protection system – from the investigation of notifications, family support and ChildFIRST services, early years and parenting services, kinship care support and case management, foster care recruitment, through to leaving care supports. Service systems that help prevent children entering the care system including family violence, mental health, alcohol and drug treatment services and affordable housing and homelessness supports are also experiencing significant demand pressures that affect their ability to respond early and effectively.

Pressures on early intervention

ChildFIRST is the gateway to Victoria's network of family support programs for families where a child has been identified as being at risk. The gateway is unable to meet demand for its services despite increasing its performance efficiency.

Table 1: ChildFIRST and family services responding to increased demand^{12,13,14}

Year	ChildFIRST total referrals	ChildFIRST target performance	ChildFIRST actual performance	Family services cases provided
2013–14		9,870	12,142	31,962
2012–13	15,985	9,870 (demand increase)	10,780	29,123
2011–12	15,473	9,000	9,709	28,835
2010–11	14,199	9,000 (funds increased)	9,814	26,790
2009–10	12,683	6,000	8,865	26,223

Pressures in out-of-home care

On current trends, the number of children unable to live with their parents for protective reasons is expected to surge by 29 per cent from 6,542 children in 2013 to just over 8,300 children in the next five years.^{15,16} Of particular concern is the expected rise in the number of Aboriginal children living in out-of-home care. Their numbers are predicted to soar by almost 50 per cent in the next five years from 1,083 children in 2013 to more than 1,500 children by 2017. Urgent action is clearly required to address this alarming trend and to ensure that services are available to ensure children in the system are safe, well and able to thrive.

11 Australian Institute of Health and Welfare annual report *Child Protection Australia 2012–13*

12 State Government of Victoria, Victorian Budget 2010–11, Service Delivery Paper No. 3; State Government of Victoria, Victorian Budget 2011–12, Service Delivery Budget Paper No.3; State Government of Victoria, Victorian Budget 2012–13, Service Delivery Budget Paper No.3; State Government of Victoria, Building for Growth, Victorian Budget 2013–14, Service Delivery Budget Paper No.3; State Government of Victoria Victorian Budget 2014–15, Service Delivery Budget Paper No 3

13 Ibid

14 Ibid

15 Victorian Auditor General, *ibid.*, p 26

16 AIHW 2014. *Child Protection Australia 2012–13*. Child welfare series 58. Cat. no. CWS 49. Canberra: AIHW, p 54

While 50 per cent of children are reunited with their families within six months of admission to care, what is not known is the proportion of these children who are subject to re-involvement with child protection. It is vital that new data and monitoring systems are developed and shared with community service organisations in real time to more accurately monitor the outcomes of reunification from out-of-home care.

Growth in the number of non-Aboriginal and Torres Straits Islander children in permanent care arrangements is considered good practice as it can secure greater safety and stability for the child. However, such growth also contributes to the growth in the number of children and young people in out-of-home care.

In relation to residential care the Victorian Auditor-General recently found that:

“The residential care system is unable to respond to the level of demand and growing complexity of children’s needs. It has been operating over-capacity since at least 2008 ... The lack of sufficient capacity affects the quality of care provided and reduces opportunities for children to achieve positive outcomes while in care.”¹⁷

Ways to reduce demand for out-of-home care

It is crucial that Victoria takes urgent action to reduce the spiralling growth in demand for out-of-home care services. This can be achieved if Victoria increases its policy focus and funding of early intervention services that can prevent children and families from entering the out-of-home care system.

Equally it is important to ensure that the out-of-home care system can function efficiently and has enough resources to be able to respond to the complex needs of children and families in its care. Because demand and growth in the system has not been properly addressed in recent years, this is now an urgent problem that requires significant government investment.

The Centre calls on the incoming Victorian Government to:

- Provide growth funding for the out-of-home care service system to the level of trend growth for at least the next term of the new government.

¹⁷ Victorian Auditor General, 2014, Residential Care Services for Children, p 24

Funding needs to keep pace with demand

Although demand for out-of-home care is rising dramatically, Victoria continues to have the lowest rate of children placed in out-of-home care in Australia.¹⁸ This is a positive outcome for children.

However, Victoria has one of the lowest real expenditures on out-of-home care per child, a level of investment that is 34 per cent below the national average and 57 per cent below the level in New South Wales.¹⁹

Overall, Victoria's spending in real terms on all services for vulnerable children – \$579 per child – is much lower than most other Australian jurisdictions and below the national average of \$738 per child:

Table 2: Real national expenditure per child 2012–13

Child protection, out-of-home care, intensive family support services and family support services		Per cent of national average +/-
New South Wales	\$842.2	114%
Victoria	\$579.9	79%
Queensland	\$727.1	98%
Western Australia	\$712.2	96%
South Australia	\$609.2	83%
Tasmania	\$642.6	87%
Australian Capital Territory	\$550.6	75%
Northern Territory	\$2,781.8	377%
Australia	\$738.5	

Productivity Commission, 2014, Report of Government Services, Table 15A1

The data does not address the quality of care. In this respect, there is mounting evidence that the quality of care experienced by vulnerable Victorian children is under significant pressure because funding and planning has not kept pace with demand, population growth and catchment planning.

The Victorian government recently unveiled a \$128 million funding package over four years for children in out-of-home care, targeted at children in residential care to support its five-year service reform strategy. Despite this, there remains an underlying problem of significant demand growth that if left unchecked could undermine any service improvements.

It is important that all political parties recognise that an absence of new and increased investment combined with rising demand will inevitably produce poorer outcomes for children and their families.

Sustained, long-term investment is required to address the serious deficiencies caused by significant growth in demand identified in the Auditor-General's report, recent Ombudsman Victoria reports and the report of the Protecting Victoria's Vulnerable Children.^{20,21,22}

18 Australian Institute of Health and Welfare, Child Protection Australia Table 4.6 2011–12

19 Productivity Commission, 2014, Report of Government Services

20 Victorian Auditor General op. cite

21 Ombudsman Victoria, 2010, Own motion investigation into Child Protection-out-of-home care, 01 May Session 2006–10, PP No 308

22 Ombudsman Victoria Own motion investigation into the Department of Human Services Child Protection Program, November 2009, Session 2006–09 PP No 253



The need for a fairer, realistic funding model

Current pricing for models of care and family intervention are contrary to satisfactory outcomes for children young people and their families. The processes of securing funding for adequate care suggest efficiency goals have been emphasised over effectiveness of care.

The Cummins report identified three aspects to adequate funding of services for vulnerable children young people and their families. These were:

- Adequacy of funding
- Method of funding and
- Distribution of funding.²³

In Recommendation 79 Cummins stated: "The government should adopt an explicit policy of fully funding child protection and family services delivered through community service organisations, including provision for infrastructure and other relevant indirect costs."²⁴

In the past year, several large and small Centre members have returned programs to the government because the cost of delivery is greater than the price paid by government. This has been particularly acute in the Residential Services program. However, we are aware that pressure is mounting across the system.

23 Cummins P, Scott D. and Scales B., op. cite. p 465

24 Cummins P, Scott D. and Scales B., op. cite. p 471

A greater level of independent oversight of the government's role as the sole purchaser of services delivered through community service organisations is needed. The Essential Services Commission should be given an ongoing role to periodically determine the appropriate prices for child protection and family services delivered through community service organisations.

Independent price setting is essential to ensure the three elements are taken into account.

Country and regional loading

Children and their families requiring support in rural and remote areas do not have access to the same scope of services available in cities and regional centres.²⁵ Services that provide support and care in rural and remote areas have additional service costs from travel recruitment and outreach services. In the past, costs of services in country areas have been incorporated in funding models in the health sector but have not been consistently applied in child and family services in Victoria. Cummins recommended that funding for child protection and family services should be distributed using an area-based approach taking into account:

- The population of children in a region
- The level of vulnerability of these children including the Aboriginal population and
- Factors that increase the cost of service delivery in regions, such as remoteness and the geographic size of the area.

Cummins recommended these components be incorporated into future system planning.²⁶ These are aspects of a funding model employed in Alberta Canada.

The Centre calls on the incoming Victorian Government to:

- Establish an independent process or body to set program pricing for children's and family services.
- Ensure the new process or body immediately reviews pricing for children's and family services.
- Move immediately to a model of funding distribution that takes into account the cost of service development and delivery in rural and remote areas.

²⁵ Youth Affairs Council of Victoria, and Victorian Rural Youth Services, Young People in out-of Home care in rural and regional Victoria: A discussion paper, October 2013 p 111

²⁶ Cummins P, Scott D. and Scales B., 2012, p 469

2. The need to boost early intervention programs for families

When parents are struggling, it's important to ensure that they get the support they need before the problems become too big and the family breaks down or children are put at risk. Working effectively and earlier to prevent family breakdown and the removal of children to care also make economic sense. Taking into account the costs of health and support services, unemployment and loss of productivity, out-of-home care and involvement in the legal system, the total lifetime costs for children reported to child protection for the first time in just one year – 2009–10 – is estimated to be \$1.6–1.9 billion.²⁷

Aboriginal children and families

The Centre strongly supports the recommendations outlined in the submission *Koorie Kids: Growing Strong in their Culture: Five Year Plan for Children in Out of Home Care*.²⁸ The current government committed to take forward the recommendations from the submission by establishing the Taskforce 1000 project to identify practical ways to reduce the number of Aboriginal children in out-of-home care.

Next year is the tenth anniversary of the *Children, Youth and Families Act 2005*, yet progress on implementing Section 18 of the Act, which would enable the transfer of custody and guardianship responsibilities from the Secretary of the Department of Human Services to Aboriginal Community Controlled Organisations has been negligible. During this time the number of Aboriginal children and young people subject to custody and guardianship orders has increased by 66 per cent (from 550 in 2005–06 to 913 in 2013), a clear indication that current policy settings are failing.^{29 30}

A renewed sense of urgency is required. This presents a great opportunity for the incoming government to begin seriously tackling the over-representation of Aboriginal children and young people in Victoria's child protection system by fully implementing Section 18.

27 Cummins P, Scott D. and Scales B., 2012, Report of the Protecting Victoria's Vulnerable Children Inquiry, State of Victoria, Department of Premier and Cabinet, Session 2010–12 PP. No 112

28 Commissioner for Children and Young People, *Koorie Kids: Growing Strong in their Culture, Five Year Plan for Aboriginal Children in Out of Home Care*, A joint submission from Victorian Aboriginal Community Controlled Organisations and community service organisations accessed at <http://www.ccyp.vic.gov.au/downloads/submissions/submission-koorie-kids-growing-strong-in-their-culture-nov13.pdf> on 15th August 2014

29 Australian Institute of Health and Welfare, *Child Protection Australia 2005–06*

30 Australian Institute of Health and Welfare, *Child Protection Australia 2012–13*

The Centre calls on the incoming Victorian Government to:

- Fully implement s18 of the *Children, Youth and Families Act, 2005*.
- Invest in initiatives designed to improve Aboriginal Community Controlled Organisation workforce capacity.
- Resource Aboriginal Community Controlled Organisations to ensure Aboriginal children can stay connected to their culture.

Culturally and linguistically diverse communities

About one quarter of Victoria's population was born overseas and includes communities from more than 230 countries.

The Cummins Report found children from culturally and linguistically diverse (CALD) backgrounds faced special challenges and that services had difficulties responding to their needs.

Cultural connectedness and support, and targeted service planning is made difficult by the absence of data relating to children from CALD backgrounds. Cummins recommended the collection of such data by the Department of Human Services.³¹ The Centre advocates that collection of this data be a priority spend for any new government.

Cross-cultural family mentoring has been shown to be an effective prevention and early intervention mechanism to help vulnerable children of migrant or refugee families. Family Mentors are paraprofessionals who combine local knowledge of community services and support with bilingual skills to assist families navigate the care system. These services are vital in local areas with migrant and refugee communities.

The Centre calls on the incoming Victorian Government to:

- Implement the Cummins recommendations around collection of information about the needs of CALD children.
- Expand the availability of cross-cultural family mentors who are connected to Family Services and community support service networks.
- Establish a Commissioner for Children and Young People from CALD communities.

More parenting help for vulnerable families

The following early intervention services have a proven track record in helping to strengthen parenting skills and struggling families. It is vital that Victoria expands these services to reduce the number of children at risk of abuse or neglect.

³¹ Cummins P, Scott D. and Scales B., *ibid* p 317



Enhanced Maternal and Child Health Services

Maternal and Child Health Services (MCHS's) and Enhanced Maternal and Child Health services provide vital community and home-based support to new parents. All mothers of children born in hospitals in Victoria are referred to MCHS's.

They connect new parents with other parents and community activities, and provide important support and referral pathways for parents having difficulties with child-rearing.

The Centre recommends expanding the Enhanced Maternal and Child Health Service in areas of high need and in areas of rapid population growth.

Early Parenting Centres

Residential and day Early Parenting Centres (EPCs) are secondary intervention services that ensure that at risk infants and young children receive the care they require from their parents who in turn receive on going support and supervision. Early Parenting Centres work in partnership with parents to identify infant health, development and parenting needs to build parenting competence and to promote secure attachment

between the parent and child. There is strong evidence that their intervention improves parent wellbeing, improves child behaviours and improves the care of vulnerable children.^{32,33,34}

Victoria has three Early Parenting Centres. EPCs require a basic injection of funds to maintain their current level of service and to respond to increasing complexity of need. There has been no injection of funds to this program since 2002.

The Centre recommends an urgent review of Early Parenting Centres to consider:

- The adequacy of the basic unit cost.
- The need for additional residential services in regional locations.
- The merits of establishing a specialist Aboriginal Early Parenting Centre.
- The provision of a CALD supplement in recognition of the heightened needs of this client group.
- Future workforce requirements and development.

Cradle to Kinder and Aboriginal Cradle to Kinder

This program provides intensive support to vulnerable mothers and their preschool children identified as having multiple vulnerabilities but who have not had contact with the child protection system. Mothers are referred to the services from ante or post natal services. The program builds the capacity of parents: not only to nurture a child's safe, healthy development, but also to engage parents in education, training and employment.

Six programs were introduced in 2012, and a further four were announced in January 2014. In these four new locations, the service is aligned with local catchments of the Child and Family Services Alliances, enabling integration with local Integrated Family Services. This means that mothers and their children experience the combination of multifaceted support with long-term skill development. The Cradle to Kinder program should be available for all vulnerable young mothers to reduce the likelihood of their children entering the child protection system.

Cradle to Kinder and the Aboriginal Cradle to Kinder current service model should be extended to each ChildFIRST catchment.

32 Queen Elizabeth Centre, n.d., Research Briefs: Evaluation of QEC's 5-Day Residential Program

33 Lindsay, G and Cullen MA, 2010, Evaluation of the Parenting Early Intervention Programme: a short report to inform local commissioning processes, Department for Education, Research Report DFE-RR121(b)

34 Mildon, R. and Polimeni, M., 2012, Parenting in the early years: effectiveness of parenting support programs for Indigenous families, Australian Government, Australian Institute of Health and Welfare and Australian Institute of Family Studies, Closing the gap clearing house, Resource Sheet no 15, August 2012



Family Support Services help to protect children

ChildFIRST and Integrated Family Support Services

Child and Family Information, Referral and Support Teams (ChildFIRST) and Integrated Family Support Services support families whose complex problems are affecting their children's development.

The services work with mainstream services, specialist services and child protection and are effective in preventing children entering the child protection system.

The 2014 State Budget made a welcome commitment to invest in Integrated Family Services. However, with the government's recent Budget papers predicting a further ten per cent growth in reports about vulnerable children in 2014–15, it is vital that the new government continues to invest in services that get help to families earlier.³⁵

The Centre calls on the incoming Victorian Government to provide funding for the increased demand (ten per cent) being experienced by family support services.

³⁵ State of Victoria, Department of Treasury and Finance, 2014–15 Budget Paper No. Service Delivery, May 2014. p 168

Stronger families

Stronger Families is a program for children at risk of being placed in out-of-home care or who have recently been placed in out-of-home care for the first time. It aims to prevent placement or bring about the speedy reunification of the family through intensive case work for up to 12 months. It draws on specialist expertise, such as therapeutic services and can access flexible funding packages to ensure the most appropriate service response for each family.

In 2012–13 the government allocated \$29 million to deliver Stronger Families in four locations over four years, and three more programs were opened in June 2013. An independent evaluation has been completed.

The evaluation's report included a cost benefit analysis of the program. It calculated that for every additional dollar invested in the program, additional savings of \$1.23 were realised within child protection and out-of-home care. Children whose families took part were less likely to be in care when they finished the program, and were more likely to have been unified with their families. Similarly, they were less likely to be the subject of a subsequent re-substantiation and more likely to remain with their families.³⁶

The Centre calls on the incoming Victorian Government to extend Stronger Families across the state.

Responding to family violence

The Cummins inquiry identified the strong correlation between family violence and the abuse of children.³⁷ Referrals to family support services as a result of family violence have rapidly escalated. Government initiatives such as the Foundation to prevent violence against women and their children, improved funding of services, public awareness as a result of reporting of tragedies, proactive responses from Victoria Police and advocacy by peak bodies have seen improved responsiveness to children and women in situations of violence. But more work remains to be done.

Services and supports can only be effective when there is strong community understanding of and sanctions against family violence. A Royal Commission into family violence has been foreshadowed by the Labor Party. This is welcomed, as are proposed reforms to legislation and policing of the Government.

The Centre calls on an incoming Victorian Government to ensure policy and legislative initiatives are accompanied by appropriate resourcing.

³⁶ State Government Victoria, Department of Human Services, Stronger Families and Aboriginal Stronger Families KPMG Evaluation – Final Report, February 2014

³⁷ Cummins P, Scott D. and Scales B., 2012, p 35

Supporting vulnerable children in education

School attendance and engagement

Victoria has about 322,000 children aged between 5 years and 12 years.³⁸ Children in these ages are described as being in the 'middle years'. While much government effort has been placed in the high impact areas of early childhood there are indications that an important minority (perhaps 7 per cent) of children in the middle years are very vulnerable.

There is increasing concern about vulnerable children in the middle years who are not attending school on a regular basis or who have problems engaging with school.³⁹ Both family services and out-of-home care services report extreme difficulties in achieving enrolment and full time school access for children with vulnerabilities. Consistent school attendance in the primary years can do much to address wellbeing and developmental issues.

But the Centre's regional consultations have revealed that children as young as five are on part time attendance for behavioural reasons and that discouragement of attendance is wide spread. This further alienates child family and school.

Programs delivered through schools can encourage not just attendance but also a wide range of activities that foster development and engagement with children and parents who are vulnerable. Examples are arts, sports, homework clubs, play groups, material support, food clubs and after-school care. Critical to engagement are free child care services, assistance with transport, use of bilingual workers or interpreters where there are CALD populations, and incorporating a meal into the program. Continuity of program and therefore continuity of funding is important to engagement with vulnerable families.⁴⁰

Rewarding schools for reaching out to vulnerable children and their families requires targeted funding that allows schools to address attendance and engagement. An expanded payment such as the UK premium payment for each child enrolled from vulnerable groups should be considered. Accountability for the expenditure and its targeting is essential.

Education Maintenance Allowance

The Education Maintenance Allowance has supported families on low incomes with the costs of education. The Victorian Government has announced the termination of the EMA, affecting about 200,000 children. This will curb a parent's ability to make decisions in the best interests of their child's education and can result in further disengagement of vulnerable families.

The Centre recommends restoring direct financial support to low income households to ensure schooling costs do not present a barrier to educational participation.

38 Productivity Commission: 2014, 3A2

39 Centre For Community Child Health, *Our Tweenies: Are they flying along or falling through the cracks: impact of and causes for school disengagement in Hume*, Murdoch Children's Research Institute, Royal Children's Hospital Melbourne, September 2013.

40 Shellharbour City Council, Shoalhaven City Council, Wollongong City Council, *The In-Betweens: The Activities, Services and Programs Children Aged 9–12 Need*, accessed at <http://www.shellharbour.nsw.gov.au/FileData/PDF/SCCInbetweensReportWEB.pdf> on 15 August 2014

The Centre calls on the incoming Victorian Government to:

- Commit targeted resources to engaging at risk children aged 5 to 12 in education.
- Provide enhancement funding to schools committed to educating vulnerable children.
- Reinststate the Education Maintenance Allowance component paid directly to vulnerable families.



3. Out-of-home care for children

Children who are taken into care by the State should expect to be guaranteed safety, stability and the opportunity to grow and develop. Unfortunately, the current care system cannot provide this guarantee. There is growing awareness that pressures in the care system can harm children rather than protect them.

The Victorian child and family services system has a strong commitment to securing permanency for children and young people. A Permanent Care review by the Department of Human Services has identified the key barriers to achieving stable long-term placements for children who are no longer able to live at home. It is hoped that significant reforms to legislation will improve the timeliness of decision-making and access to permanent placements for children unable to live with their parents. Implementation must protect the rights of the child to remain with their siblings and to have contact with their families. These reforms will require significant resources to ensure that families have access to services when they need them.

Hearing children

Research by the Children's Society in the United Kingdom shows for a child, being able to exercise choice and being heard is vital to wellbeing.⁴¹ This was reinforced by Professor Eileen Munro's independent review of United Kingdom's child protection system where she heard from children in care about their experiences of the system. Professor Munro found it "puzzling that the evidence shows that children are not being adequately included in child protection work"⁴²

Further Munro reported that, "Children's experiences of bureaucracy are that their social workers are liable to change, that appointments are cancelled and that workers are under stress."⁴³ Further, when asked about their care needs, children reported that, "they value an on going relationship with their worker, that their needs and rights to protection should be at the heart of practice, that they should have a voice, and be listened to."⁴⁴

41 Rees, G, Goswami, H & Bradshaw J (2010) Developing an index of children's subjective well-being in England: The Children's Society, London

42 Munro, Eileen (2011) The Munro Review of Child Protection: Final Report: A child-centred system; Crown: London

43 Munro Eileen. *ibid* p 113

44 Munro Eileen *ibid* p 2

In their submission to the Cummins inquiry, the Create Foundation supported these views. Create reported that young people said that:⁴⁵

- They weren't always listened to and their views weren't considered in case planning processes;
- If they needed help or needed to confide in someone, they would go to a friend rather than a worker for there seemed to be a constant threat that the police would be called;
- They didn't see their workers enough in order for them to have a say in what was happening to them.

Further, one young person suggested that case managers and child protection workers, "should have to see their clients once a week, and if they didn't, they should call to explain why they weren't."⁴⁶

“I didn't even get a say about what was happening”

“We should have input about what we want to happen”

“If we ask for something, they say no straight away without negotiating”⁴⁷

The Auditor General revealed the lack of a complaints process for individual children in care and recommended an investigation into the establishment of an independent advocate to take complaints of children in residential care.⁴⁸ The Centre believes that the Commissioner for Children and Young People and the Aboriginal Commissioner for Children and Young People are widely regarded by the community as already having this role.

The Centre calls on the incoming Victorian Government to:

- Support further development of peer support programs for children in care and those moving on from care.
- Establish and resource the Commissioner for Children and Young People and the Aboriginal Commissioner as independent advocates receiving the complaints of young people in care.

Kinship care

Kinship care by kith or kin is the first choice for securing the future of children unable to live with their parents. About 3,000 children are in this form of care in Victoria. Kinship care placements are arranged and supported either by Child Protection services in the Department of Human Services or a community service organisation. Relatives or friends of Aboriginal children who cannot live with their parents provide Aboriginal kinship care. Eleven Aboriginal kinship services provide cultural and support services to children and their kinship carers across Victoria.

45 Create Foundation (2011) Final Report: Protecting Victoria's Vulnerable Children Inquiry Submission p 11

46 Create Foundation *ibid* p 11

47 Create Foundation (2011) Final Report: Protecting Victoria's Vulnerable Children Inquiry Submission p 11

48 Victorian Auditor General, 2014 , *op. cite.* p 22

Currently, only a quarter of kinship care placements (about 750 children) are supported by 16 community service organisations across Victoria. It is deeply concerning that many children and their carers in placements managed by the Department of Human Services are receiving inadequate support due to significant demand pressures within child protection.

Transferring responsibility for supporting these children to the community sector has the dual benefit of ensuring these children and their carers receive a decent level of support and at the same time freeing up capacity within child protection to better manage demand pressures.

The Centre calls on the incoming Victorian Government to:

- Transfer responsibility for supporting children and families in kinship care to community service organisations.
- Provide additional financial support to ensure Aboriginal kinship care services across Victoria.
- Undertake an evaluation of kinship care in Victoria to enhance services and support.

Kinship care for children whose relatives reside outside of Australia

For the approximately 25 per cent of Victorian families where relatives might reside outside of Australia, kinship care is difficult to consider without direct effort in reaching out to possible carers resident in other countries. Ensuring an adequate assessment of relatives' long term capacity to take on the care of the child is complex. Consequently opportunities for some children are not explored when they should be and the transnational barriers to securing care are not addressed.

The Centre calls on the incoming Victorian Government to resource kinship care arrangements for children in the care system whose relatives reside outside Australia.



Foster care

Foster care is an important option where a child's extended family is unable to take on their care. Current volunteer foster carers perform a central role in protecting Victoria's most vulnerable children. But there is growing alarm at the sustainability of current foster arrangements.

“In all jurisdictions except Victoria, a greater number of households commenced than exited foster care. With the need for foster carers increasing, the attraction and retention of appropriately skilled foster carers is a high priority across Australia (Table 3).”⁴⁹

Table 3: Number of households commencing and exiting foster care, 2012–13

Households	NSW	VIC	QLD	WA	SA	TAS	ACT	NT	Total
Households commencing foster care	663	442	481	235	185	64	37	141	2,248
Households exiting foster care	n.a	616	437	182	73	49	31	106	1,494

Source: AIHW (2014), Child Protection Australia 2012–13

There are many views on potential reform options including improved recruitment and retention, increased client expenses and brokerage funding, client based packages and increased carer reimbursement. Professionalised models of care should be developed as an important component of the care options for children and young people.

All these suggestions have merit but what is lacking in current debates is an informed, strategic assessment of all the available options.

The Centre recommends that an incoming Victorian Government initiates an independent inquiry into the sustainability of foster care in Victoria including the development of professionalised models of care.

Child related expenses

Carer reimbursements provide for the costs incurred by carers in the every day care of the child. There are other discretionary child related expenses, which are met out of supplementary regional funds, and an entitlement to an Educational and Medical Allowance of \$1,019.00 and an Education Assistance Initiative Payment of \$327.12 (Permanent Carers are not entitled to the latter payment). The entitlement payments are not sufficient to meet the additional medical and educational expenses of a child in home based care and are paid in arrears. Discretionary additional payments sought from divisions often involve long delays in accessing service or supports.

⁴⁹ AIHW (2014), *Child Protection Australia 2012–13*; p 59–60

The Centre calls on the next Victorian Government to increase direct client costs allowance for educational medical and special services to \$6,000 per annum per child in home based care. The carer would apply this sum for direct child costs consistent with the care plan. The carer has a degree of autonomy in determination of expenditure in relation to the best interests of the child.

Western Australia has moved payments of these kind to a debit card allowing full direct accountability for the nature of expenditure directly to government and allowing flexibility and timeliness for the services required by the child. Eligibility would be restricted to children placed in home based care by child protection services whether this placement be in foster care or kinship care or any other flexible therapeutic care alternative.

The Centre calls on the incoming Victorian Government to:

- Increase direct client costs allowance for educational medical and special services to \$6,000 per annum per child in home based care.
- Cut red tape and institute greater carer autonomy, flexibility and timeliness in determining day-to-day costs for caring for children within the above allowance.
- Equalize access to supplementary funding to children in kinship care and permanent care on the same basis as children in foster care.

Recruitment of foster carers

The Victorian Department of Human Services has undertaken significant reviews of foster care recruitment processes over the past year, especially around marketing approaches to improve recruitment rates of foster carers and care options for children. Barriers to people becoming foster carers include the level of financial and other direct support for carers. The lack of a systemic approach to recruitment is limiting the capacity of Victoria's out-of-home care system to cope with an increase of demand for care of children.^{50,51}

To overcome the chronic shortage of foster carers, it is essential that the Victorian government develops and funds a contemporary foster care publicity and recruitment strategy to attract new foster carers.

Carer reimbursement

Victoria reimburses carers based on the age of the child and their complexity of need. The funding model for foster care is based on three levels of intensity (general, intensive and complex), with carer reimbursements graduated accordingly. Victoria has the lowest rates of reimbursement".⁵² Kinship and permanent carers are eligible to receive reimbursements at the general rate regardless of complexity of need.

50 Centre for Excellence in Child and Family Welfare, 2013, *Pathways to caring: strategic engagement of potential foster carers*, Melbourne, Victoria at <http://www.cfecfw.asn.au/sites/www.cfecfw.asn.au/files/CFECFW%20Pathways%20to%20caring%20report.pdf>

51 Stevenson, A, 2014, *Pathways to Caring: profiling future carer families, issues for out-of-home care*, Presentation to 13th Australian Institute of Family Studies Conference 30th July to 1st August 2014. At <http://www.cfecfw.asn.au/sites/www.cfecfw.asn.au/files/Foster%20Care%20presentation%202014.pdf>

52 McHugh, M and Valentine K, (2011), *Financial and non-financial support to formal and informal out-of-home carers*. Occasional Paper No. 38. Department of Families, Housing, Community Services and Indigenous Affairs & SPRC, University of New South Wales

Table 4: Summary of state/territory payment age bands and rates⁵³

State/territory	Number of age bands (a)	Payment range, \$ per fortnight (b)
Australian Capital Territory	3	434–652
New South Wales	3	413–622
Northern Territory	5	256–451
Queensland	3	410–480
South Australia	4	279–603
Tasmania	3	351–464
Victoria	4	262–419
Western Australia	5	323–438

(a) Differential rates of payment based on age of child

(b) Minimum-maximum, base rate only, rounded to nearest dollar

The Centre calls on the incoming Victorian Government to:

- Bring all Victorian carer reimbursement rates to the national average.
- Bring kinship carer and permanent carer reimbursement rates to parity with foster carer reimbursements.

Therapeutic foster care

A significant proportion of children in out-of-home care face life-long challenges due to the abuse and neglect they have experienced. While some children may make a full recovery with no adverse effects, most children require specialised help and care to address the long-term impacts. Victoria has made sensible investments in recent years to expand what are known as ‘therapeutic care’ approaches for children in out-of-home care. This investment should be sustained and expanded, so that any child in out-of-home care needing specialised care is able to access such care.

The Circle Program is one such investment that has been shown to work. Evaluation of the Circle Program – Therapeutic Foster Care Model found:

- Increased stability – fewer unplanned exits compared to standard FC
- Significant developmental gains – reversal of developmental delay and improvement in emotional maturity, participation rates, cultural identity family relationships
- Continuity of care

⁵³ McHugh, M and Valentine K, (2011), *Financial and non-financial support to formal and informal out-of-home carers*. Occasional Paper No. 38. Department of Families, Housing, Community Services and Indigenous Affairs & SPRC, University of New South Wales



- Successful reunification
- Improved Carer satisfaction and retention.⁵⁴

The Victorian government committed in 2013 to a doubling of therapeutic foster care places (from the 97 therapeutic placements established in 2007).⁵⁵ Therapeutic foster care should be further expanded.

The Centre calls on the incoming Victorian Government to implement an expansion of therapeutic foster care.

54 La Trobe University & Centre for Excellence in Child and Family Welfare (2012). The Circle Program: an evaluation of a therapeutic approach to Foster Care.

55 The Hon Mary Wooldrige, 2013, Further reforms benefit vulnerable children and families, Media Release, Building for Growth, 2013–14 Victorian Budget, Tuesday 7th May.

Residential care

Residential care is characterised by a placement of a child in a residential house staffed by community service organisation employees. Residential care is mainly for children aged 12–17 years who are under the care of child protection. However, there are also a large number of residential units for younger children whose behaviours make home based care difficult to maintain, or for large sibling groups.

Children who are placed in residential care have typically experienced several placement breakdowns and are increasingly exhibiting difficult behaviours that can be attributed to deep and complex trauma or disability.

Ensuring adequate staffing levels in residential care

Currently a tiered funding model for residential care provides for different staffing levels in residential units according to client complexity. Around half of the residential units in Victoria are funded at a lower rate.⁵⁶ This model of care is identified variously as 'single parent model', 'intermediate' or 'RP2' placements and at best provides for one staff member who works alone for most of the shift until handover at the change of shifts.

The Auditor-General found that the majority of residential service providers use a 'single parent' staffing model in residential care.

This creates risks for both the child and the staff member, particularly in the event of a critical incident. The staffing model also makes it difficult for staff to make sure children get to school or to health appointments as staff cannot leave a child alone at the residential unit.

Most residential care providers in Victoria supplement this model of care with fundraising in a bid to improve child and staff safety. However this is a short term solution which does not really address the needs of children and young people. The Centre believes all residential care placements should be funded by government at the complex level.

Assessment of the needs of children and young people entering care

The Cummins Inquiry recommended the comprehensive assessment of the needs of children and young people entering out-of-home care.⁵⁷ The Auditor General found that the Department of Human Services and all community services organisations visited during the audit of residential care services for children identified poor placement matching as the greatest risk to the safety of children in residential care.⁵⁸ Centre members report that since the DHS restructure the quality of assessment and matching and the quality of referral information has significantly deteriorated.

A 2012 Ministerial Review, by the Child Safety Commissioner, examined a cohort of 16 young people who had all experienced multiple residential care placements. Ten of the 16 children in the case study had experienced, on one or more occasions, some form of sexual assault, abuse or predatory behaviour by co-residents. One of the children was also subjected to persistent bullying by two older residents. The main reasons given for these incidents were placement incompatibility and staff inexperience in handling challenging behaviours.⁵⁹

56 Victorian Auditor General op. cite. p 29

57 Cummins P., Scott D. and Scales B., p 256

58 Victorian Auditor General op. cite. p 8

59 Ibid

Lack of capacity

The lack of adequate capacity in residential care is a daily battle for the Department of Human Services and the residential care providers caring for these highly vulnerable children.

The Victorian Auditor General identified a 27 per cent gap between ongoing funded capacity and actual demand for placement.⁶⁰

Feedback could not be clearer: there is a regrettable but direct link between the lack of adequate placement capacity and the sexual abuse, exploitation, exposure to illicit drugs and high risk taking behaviours by vulnerable children in care.

A strategic approach to planning out-of-home care

In response to recommendations from the Cummins inquiry for a strategic approach to addressing the issues in out-of-home care in Victoria the Victorian Government released *Out-of-home care: a five year plan (The Five Year Plan)*.⁶¹ The Plan sets out a set of worthy aspirations including the promising introduction of tailored packages of funding for children but it lacks detail and compelling evidence that the investment set aside for implementation is sufficient. Investment is necessary to adequately address the lack of existing placement capacity highlighted by the Auditor- General.⁶²

The five year plan is premised on the assumption that deep cuts of an estimated 50 per cent can be made in the number of residential care placements by expanding the number of home based care placements. There are several constraints to this approach. These are:

- There is very limited funding to address existing and future demand pressures in out-of-home care with the limited additional funded placement capacity provided in the 2014 State Budget clearly unable to meet current demand growth.
- There does not appear to be a provision in the funding envelope for transition funding enabling the gradual decommissioning of some forms of residential care while allowing for the expansion of home based care.
- There is no funding to address the immediate quality of care issues in residential care, primarily the inadequate level of staff provided in the RP2 (single parent) model which accounts for just under half of all existing residential care placements.
- Funding confirmed to date only provides after four years a total of 188 therapeutic residential care beds, yet departmental projections indicate that there will be a requirement for over 600 residential care beds by 2017–18.⁶³
- Home based care including kinship care and foster care is under severe pressure in part contributing to further demand for residential care. Improved caregiver reimbursements supported by a professionalised foster care model would do much to support and grow home-based care.

Residential care providers are committed to working closely with the Department of Human Services on a range of measures to improve the safety and care of children in residential care. But these are likely to be band-aid solutions only until the fundamental problems of recurrent funding meeting actual demand and being sufficient to meet reasonable expectations are addressed.

60 Op. cite. p 31

61 Cummins P., Scott D. and Scales B., p 256

62 Ibid

63 Victorian Auditor-General, Residential Care Services, Figure 3B, 2014

Therapeutic residential care

“Therapeutic Residential Care is intensive and time-limited care for a child or young person in statutory care that responds to the complex impacts of abuse, neglect and separation from family. This is achieved through the creation of positive, safe, healing relationships and experiences informed by a sound understanding of trauma, damaged attachment, and developmental needs.”⁶⁴

The Victorian Government has a strong commitment to the expansion of therapeutic residential services. This is a very welcome direction and one universally supported by the community services sector.

The key program elements of therapeutic residential care

Therapeutic specialist who primarily works through the staff rather than providing therapy directly to the children or young people.

Trained staff and consistent rostering with additional staffing, flexible rostering, and more individualised support and supervision of the children and young people. Having a consistent pattern of staffing and additional staff members (usually double staff) is seen as a core feature that provides the predictability, stability and individualised client support that young people require.

The **engagement and participation of the children and young people** that occurs from prior to their entry to TRC and involves good transition processes and participation in decision making.

The importance of **client group matching** to create a mix that maximises the opportunities for all children and young people to benefit from the therapeutic approach.

Regular care team meetings that support a consistent approach, problem solving and solution development that would otherwise be unlikely.

Reflective practice by which staff develop their skills and practices through being aware of their actions, responses and impacts on the children and young people while they are working (practising). The workers also reflect on the young people's actions, interactions and triggers within a framework that attributes meaning to the young person's behaviour.

Organisational congruence involving a whole of organization approach to a therapeutic care culture that goes to all aspects of service provision – in this instance being the approach to therapeutic care.

The creation of a **home-like environment** that provides a sense of normality and ensures physical and emotional safety.

The critical nature of **exiting, exit planning and post exit support**.

Therapeutic residential care practice leads to better outcomes for children than standard residential care practice. But therapeutic residential care is not a mental health intervention. It is better characterised as trauma informed care with specially trained staff (secondary specialist supports) who provide attention to assessment, planning, support, and exit planning to work with the young people, recognising the physical, cognitive and psycho-social harms caused by childhood trauma.⁶⁵

64 Australian Institute of Family Studies; Therapeutic residential care in Australia: Taking stock and looking forward; NCPC Issues No. 35, 2011 online <http://www.aifs.gov.au/nch/pubs/issues/issues35/issues35a.html>

65 VERSO Consulting; Evaluation of the Therapeutic Residential Care Pilot Programs Final Summary & Technical Report November 2011; viewed online http://www.dhs.vic.gov.au/__data/assets/pdf_file/0005/712868/therapeutic-residential-care-report.pdf

Therapeutic approaches pay special attention to assessment, planning, stability and client matching. These models of care are by their nature difficult to operate in a care system under pressure to find quick solutions to immediate and critical placement needs.

The Centre calls on the incoming Victorian Government to:

- Recognise the need for adequate staffing levels in residential care by immediately funding all placements at the complex level (transferring RP2 to RP3 placements).
- Immediately implement comprehensive assessments of children and young people entering care.
- Implement a strategy which realistically addresses demand growth in residential care.
- Continue the expansion of therapeutic residential care while arresting any drift from the key elements that have been shown to be required to achieve success.

Lead tenant - an innovative residential option for 15-18 year-olds

Lead tenant is a supported semi-independent placement option developed for young people aged 15–18 moving to independence from out-of-home care. A volunteer lead tenant resides in the residential unit with young people who are still under the care of child protection and under 18 years of age.

While this placement option is an important component of the system and can be beneficial, it is unusual for a young person to move out of home into a share house while under 18 and while still in school or further education. Such a move can be traumatic. Therefore, volunteers who reside with these children need to be fully supported and trained. Nevertheless, Lead Tenant is also an important option for extended support to 18–21 year-olds moving on from care, as it mirrors normal group living arrangements that many young people moving from home to independent living will experience.

The Centre calls on the incoming Victorian Government to:

- Improve recruitment, support and training for the lead tenant workforce.
- Develop further lead tenant houses as a viable option for care leavers aged 18–21.

Supporting education for children and young people in out-of-home care

One of the best ways to support children who have experienced abuse and neglect is to ensure they get the best possible education. But sadly, many children in out-of-home care have very poor educational experiences and outcomes characterised by poor access to early childhood services, frequent changes of school, difficulties in enrolling and attending school and poor performance against national benchmarks. More needs to be done.

The Victorian Government through the Out-of-Home Care Education Commitment and the Early Childhood Agreement for Children in Out-of-Home Care have recognised the need for significantly more focus on the needs of vulnerable children. Such a focus is welcomed. This now needs to be backed up with adequate resources and investment to ensure the goals of these agreements are met.

In the United Kingdom all schools receive a pupil premium for each 'looked-after' pupil who has been in care for one day or more or who were adopted or subject to a guardianship order or a residence order. In 2014 schools received approximately \$3,452 per child to develop individualised programs for these children and these were overseen by a designated local authority Virtual School Head.⁶⁶ This program represents an option for resourcing the out-of-home care education commitment and allows direct outcomes management with targeted funding for children who are in out-of-home or permanent care.

The Centre calls on the incoming Victorian Government to:

- Fully fund the Out-of-Home Care Education Commitment and the Early Childhood Agreement for Children in Out-of-Home Care.
- Mandate a comprehensive funded education program through individual packages where this cannot be provided in a mainstream setting.

⁶⁶ Government U.K. Department for Education, Guidance: Pupil premium: funding for schools and alternative provision, May 2014 accessed from <https://www.gov.uk/pupil-premium-information-for-schools-and-alternative-provision-settings> on 15th August 2014



Mental health and alcohol and other drug services for children in out-of-home care

There has been radical reform in Mental Health and Alcohol and Drug support and rehabilitation services in the form of recommissioning in 2014. The reform redistributed service resources as well as streamlining service interventions, and service entry and assessment processes. In Mental Health services there has also been a radical reduction of service providers from approximately 160 providers of community based mental health supports to fewer than 20. While the new service arrangements are still in transition, the Centre is aware of significant service reductions for particular vulnerable cohorts of children and young people within the child youth and family services system. Many children and young people in out-of-home care experience high levels of mental illness as a result of complex trauma, particularly those in residential care and moving on from care. The Centre is concerned that the new service arrangements will prevent these clients from getting priority access to specialist mental health services.

The Victorian Government recognises the need for a specialist drug and alcohol service system for young people. However, specialist and targeted services directed towards young people in care have been lost to adult service models. This is not acceptable given the very high level of illicit drug use and high risk taking behaviours of too many young people in care.

The Centre calls on the incoming Victorian Government to:

- Ensure that children and families who are connected to the child protection system receive priority access to specialist mental health services.

Children and young people with disabilities in out-of-home care

There is a significant and growing number of children with disabilities in all child youth and family program types, regardless of whether children live with their families or extended families, in foster families or in rostered residential care. Indeed, children with a physical or intellectual disability are more likely than other children to come into contact with the child protection system.⁶⁷

OzChild, one of the Centre's member organisations, has said that despite the growing numbers of children with disabilities in family services or care, research into the extent and nature of disability is severely lacking.⁶⁸ There is also a lack of evidence about what works, the service gaps and what strategies to adopt to prevent further trauma and harm to child.

⁶⁷ Cummins P, Scott D. and Scales B., 2012 Vol. 2

⁶⁸ Mitchell, G. (2014) Children with Disabilities using Child and Family Welfare Services, Melbourne, Oz Child

The Centre calls on the incoming Victorian Government to:

- Provide supplementary financial support through client payments for children in kinship and foster care with a disability to ensure that financial pressures that exist because of the disability are addressed.
- Ensure availability of respite care for carers (including birth families) of children with very high care needs.
- Ensure the capacity to scale up and down support to all families (including foster families) to minimize placement breakdown.
- Provide additional support to families with high levels of complexity whose children are in out-of-home care to maximize constructive access and relationship building between children and their families.⁶⁹

⁶⁹ These recommendations are heavily drawn from research undertaken by OzChild Children with a disability in child and family welfare services, and their policy briefing paper published in January 2014.



4. How to support older teens moving on from care

“The issues and barriers impacting upon successful transitions for young people leaving care are well known, have been well researched and are uncontested.”⁷⁰

About 857 young people aged between 15 and 17 left state care in Victoria in 2011–12.⁷¹ Young people leaving out-of-home care consistently experience poorer health, income and quality of life outcomes.⁷² As well as representing complex and multiple disadvantages for these young adults, these issues result in significant costs to the community over the course of their lives: in 2006, Morgan Disney and associates estimated this cost as \$40,000 per person per year until they turn 60.⁷³

Because this stage of their development is so critical in determining how well these children do in life, it is an opportunity for genuine strategic investment. Effective support through this transition will result in improved quality of life and substantial savings to the state. It will also represent an investment in the well being of the entire Victorian community.

70 Department of Families, Housing, Community Services and Indigenous Affairs, “Transitioning from out-of-home care to Independence”, December 2010, p 12

71 Australian Institute of Health and Welfare 2013. Child Protection Australia 2011–12. Child welfare series no. 55. Cat. no. CWS 43. Canberra: AIHW. TableA21, p 78

72 Mendes, P. “Towards a Community Development support model for young people transitioning from out-of-home care”, Practice: Social work in action, Vol 23, number 2 April 2011

73 Morgan Disney and Associates, “Transition from Care – avoidable costs of Alternate pathways” quoted in Department Of Families, Housing, Community Services and Indigenous Affairs, “Transitioning from out-of-home care to Independence”, December 2010

The Staying Put program - a successful model that Victoria should trial

The Staying Put: 18 Plus Family Placement Programme ran across 11 local authorities in the United Kingdom. It aimed to improve outcomes for young people making the transition from care to adulthood and was targeted at young people who had 'established familial relationships' with their foster carers and offered them the opportunity to remain in their placement until the age of 21.⁷⁴

The results were encouraging. Young people who stayed put were more than twice as likely to be in full time education at 19 compared to those that did not (55 per cent and 22 per cent respectively). In addition, a slightly higher percentage of those who stayed put were in full time training and employment at 19 compared to those that did not (25% and 22% respectively). Berry Street has piloted a similar model in Victoria.

The Centre believes a staying put option should be developed building on the Berry Street pilot to assist with transitions.

Combined education and housing guarantee

The Council to Homeless Persons notes that "approximately half of the young people exiting out-of-home care go on to experience homelessness" [and proposes that] "the government establish a 'Leaving Care Housing Guarantee Fund'." CHP suggests that the fund would be combined with current supports for leaving care and should be available to assist all young people leaving state care who wish to secure housing in the private rental market up to the age of 25.⁷⁵

The Centre supports this proposal. However, it should include the development of appropriate 'FOYER like' leaving care programs and priority access to transitional housing for young people who are not yet ready to live independently. Together with a housing guarantee, every young person leaving care should have access to full fee relief by government to support better post compulsory education outcomes in University, TAFE and accredited training colleges. Priority access to transitional housing can be delivered within existing funding. Future FOYER model developments should be targeted toward this priority group.

Demand for case management support on leaving care significantly exceeds the resources available. This represents a significant failure on the part of successive governments to support these children to transition successfully to adulthood and prevent them from entering homelessness, mental health services or the criminal justice system. After all, the Department knows everything about children who are leaving the care of child protection. The lack of resources means support is not available when needed and community service organisations lack capacity to prevent deep and complex trauma and longer term interventions.

74 Munro E., Lushly C., NCAS, Maskell-Graham D. and Ward H., 2012 Evaluation of the Staying Put 18+ Family Placement Program, Final Report, Centre for Child and Family Research, Loughborough University, DFE RB 191, ISBN 978-165-064-4 February 2012 accessed on 15 August 2014 at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/197604/DFE-RB191.pdf

75 Council to Homeless Persons Pre-budget Submission, 2014–15, 23 December 2013 p 7



The Centre calls on the incoming Victorian Government to:

- Develop and pilot a ‘Staying Put’ options for Victorian 18 year olds in home based care.
- Provide all young people moving on from care with holistic support until they turn 21, at least. Support should be mandatory, not discretionary.
- Provide a combined education and housing guarantee for those moving on from care by providing full fee relief for post compulsory education and appropriately tailored support and housing packages, to the age of 25.
- Better plan for growth in demand for leaving care support resources to ensure that support is available and sufficiently flexible to scale up and down according to client need without having to re-enter the human services, health and corrections systems.

5. Building stronger services

Child safe organisations

The Betrayal of Trust Report of the Victorian Parliament and the ongoing work of the Royal Commission into Child Sexual Abuse in Institutions have revealed significant organisational failures to protect children from harm. The Victorian government in responding to the Betrayal of Trust report will introduce mandatory child safe standards for organisations and has anticipated a significant role for peak bodies in enhancing the responsiveness and capacity of organisations supporting children and young people. These initiatives will require resources to support the implementation.

The Centre calls on the incoming Victorian Government to:

- Resource child safe capacity building in child and family service organisations.

Information and data systems

The move towards evidence-informed outcomes based services model is reliant on robust and accessible information. There are gaps in the data and information about vulnerable children and families. There is an urgent need to consolidate the separate information systems that can apply to children involved with the child and family service system.

Shared data

The Centre considers the past record of the Victorian Government in providing access to key data has been poor. There has however been some promising progress in recent years with the development of the Victorian Child and Adolescent Monitoring System (VCAMS) maintained by the Department of Education and Early Childhood (DEECD). While the data available through VCAMS is of excellent quality much of the data is dated and therefore of limited value for planning purposes.

Much more can be done to share information about children's and young people's experience with the support and care system. The Commissioner for Children and Young People and the Aboriginal Children's Commissioner have an important role in ensuring the collection and sharing of aggregated data for the purposes of assessing the outcomes for children and their families and for service planning and development.

The Centre recommends:

- The new government directs all government departments that contribute data to VCAMS to improve the timeliness of data provision to DEECD, improve the accessibility of such data and that the data is made available to the community at the earliest opportunity.

Funding and Service Agreement (FASA)

CPI adjustments

Part of the price setting for services should ensure adequate provision for CPI increases. For several years children and family services have consistently had CPI increases below that in other portfolios. Indexation continues to be 2.5 per cent for the wages component of funding only, equivalent to 2.0 per cent of funding. Further, the mechanism to review unanticipated cost increases, especially those arising out of wage claims, should be clarified. Existing arrangements under the current Funding and Service Agreement (2012–15) for unanticipated cost increases are less clear than they were under previous agreements.

Superannuation adjustments

State Government has not funded the impacts of the superannuation guarantee levy in its programs for children and families. This is a legal obligation of employers. While starting from a low base and with incremental increases and a delayed implementation of the next tranche, the impact has been that the capacity of employers in the child and family services sector to provide services has been impacted. It is inevitable that the increased costs will result in reduced service capacity.

Equal remuneration order (ERO)

It has been a bipartisan commitment to fully fund improvements in pay for community service workers since Fair Work Australia made its Equal Remuneration Order. It is essential that this commitment remains strong. The Centre is concerned that forward budget estimates do not fully fund the Superannuation Guarantee and the Equal Remuneration Order wage increases. Failure to do so will see job losses, reduced services and increased risk for vulnerable children and their families.

The Centre calls on the incoming Victorian Government to:

- Return CPI and Superannuation Adjustments as guaranteed annual adjustments through appropriate clauses in the Funding and Services Agreement.

Workforce quality

Children and families in Victoria rely on both the paid workforce and a significant volunteer contribution for the services and support they receive.

The Cummins inquiry identifies the following common issues across the Victorian child and family services workforce:

- The need for increased skills and professional development
- The need to address issues with recruitment and retention
- The need for clear pay structure and career pathways.⁷⁶

Delivering better outcomes for children and young people in out-of-home care requires a skilled and competent workforce. There has been insufficient attention to the needs of the out-of-home care workforce and there is an urgent need to develop a comprehensive workforce strategy.

The Centre is currently undertaking a comprehensive workforce survey.⁷⁷ A workforce strategy for the child and family services sector should be developed jointly by government with the sector and unions. It should focus on recruitment, retention, skills development, and training especially in response to new demands arising out of recent legislative and service reform.

The Centre calls on the incoming Victorian Government to:

- Develop a comprehensive workforce strategy including integrated training arising out of recent legislative and service reforms:
 - current workforce profile
 - projected needs including growth demand, work types and skill profile
 - qualification, accreditation, skills development and professional development
 - issues with recruitment and retention
 - pay structure and career pathways
 - workplace safety.

⁷⁶ Cummins P, Scott D. and Scales B., 2012 Vol 2, p 421

⁷⁷ Centre for Excellence in Child and Family Welfare, 2014, Workforce Survey at <http://www.surveygizmo.com/s3/1746835/WF-Qn7>





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