

Guideline

Case management roles and responsibilities

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1. Purpose

All care workers are responsible for providing a high level of care to children under their supervision to maintain the safety, security and supervision of children. Care workers are required to work in line with the mandatory Care Plan that is produced by Families SA for the day-to-day care of the child. These Guidelines set out the role and responsibilities of care workers when assisting children in matters relating to providing a consistent case management approach.

2. Case management and Care Plans

Case management and Care Plans are fundamental processes for determining and managing the identified needs of children who are in out-of-home care.

- A Care Plan is used to organise and document the children's needs and strengths, current goals and associated actions.
- Each Care Plan contains a summary of the children's details which can provide useful information when care workers are orienting themselves.
- Families SA have an overarching responsibility to assess a child's needs and develop a Care Plan to coordinate services to meet those needs.
- Care workers are required to work with Families SA as required in formulating a Care Plan and Individual Safety Plan for each child.
- Families SA are required to review the Care Plan on a regular basis to ensure that it is meeting the child's identified needs and involve the care workers in the review process. Reviews are particularly important when there are significant changes in the children's life for example, when transition planning has commenced for a long term placement
- Care workers are required to implement actions allocated to care workers within the timeframe given, these will often relate to tasks that can be completed at the placement. An example may be for care workers to support a child to complete their homework on time.
- Care workers are required to attend and participate in Care Team Meetings as requested by the child Families SA Case Manager.

Practice Model

Families SA practice model is Solution Based Casework (SBC). Care workers are required to work in accordance with the principles of SBC. SBC promotes the participation of children in the Care Plan and case management process. Involving children in their case management is integral as there are a number of benefits that include:

- Providing the child with some ability to influence decision-making that is principally for and about them; and
- The child is more likely to work towards the developmental goals if they have had some input in their development and if the goals are written in language that they understand.

3. Responsibilities

Families SA Case Worker

The allocated Families SA case worker's role in the case management of children includes:

- Case planning in consultation with key stakeholders including the child, the care workers, education staff, the treating practitioners (e.g. medical and mental health) and the family;
- Formulation of a Care Plan with goals, timelines for achievement and allocated actions;
- Provide direction on issues related to children in out-of-home care;

- Provision of services and support to the child in collaboration with other stakeholders such as care workers, mental health professionals and medical specialist to work towards meeting the child's needs;
- Provide support to the child in accordance with identified needs as per the Care Plan;
- Organise Care Team Meetings and invite care workers and other relevant stakeholders;
- Review Care Plans regularly and seek the input of the child, care workers and other stakeholders; and
- Work with care workers/agency to develop a lead care worker model, where children require multiple care workers.

Agency Care Worker

Care Workers are required to assist in case work in consultation with the Families SA case worker and in line with the child's Care Plan. Some elements of the case plan include, but are not limited to:

- Liaising with connected agencies/services;
- Developing rapport with the child;
- Working directly towards the child's developmental goals;
- Developing strategies with the child in response to an identified issue or difficulty (eg, anger management);
- Undertaking tasks for the caseworker eg, access support;
- Supporting family access (note: agency/care workers are not responsible for the supervision of access); and
- Advocacy for the child.

4. Care Worker tools

In addition to the child Care Plan, care workers have access to other resources that can assist in the care and case management of children:

- Observational logbook – Care worker are encouraged to use the communication book to document basic care information such as house issues, cleaning, purchase of stores etc. Note: The communication book is a legal document and care workers must ensure that entries are documented in a professional manner. Please refer to the Observational Logbook Practice Guide.
- Client contacts - This form is used to document relevant contacts (phone numbers and addresses) for a child. This sheet should also identify contacts that the child is not allowed to have either determined via a court order or the allocated caseworker. All unapproved contacts should be written in red pen.
- Results of a medical/dental appointment form - Any medical appointment should be briefly written up by the care workers who took the child to the appointment. This form is designed to ensure that all medical requirements, medication, future appointments and referrals are actioned.
- Medication chart – Care workers must also monitor and maintain a medication chart when administering medication. If the medication or dosage is changed in anyway, care workers must document this in a new chart and the old medication chart must be placed in the child's medical treatment record/folder.
- Clothing records - This form is simply to keep a record of clothing purchases so that we can ensure that children are being supplied with appropriate levels of clothing.
- Carer checklist - This is a tool to assist the care worker to follow-up on the tasks as identified by the Families SA caseworker. There are two types of checklists available for care workers:
 - Critical incident report checklist
 - Admission/discharge checklists
- Authority for release of information consent form - This is a form designed to gain the child's permission to share relevant information with other agency's (eg, schools, CAMHS, medical

practitioners.). It needs to be explained by the caseworker and completed during the placement induction process. For further information refer to emergency care best practice resource on Confidentiality. Note: Agencies must ensure that care workers are provided with the above-mentioned forms and templates at the beginning of each placement.

5. Duty of care

In the care context, duty of care is a common law concept that refers to the responsibility of all staff (DECD/Families SA and staff employed by agencies contracted by the department) to provide children with an adequate level of protection against harm:

- It is usually expressed as a duty to take reasonable care to protect children from all reasonably foreseeable risk of injury
- Care workers must model ethical behaviour and practices at all times when caring for a child
- In their relationships with children, care workers are required to ensure that the physical and emotional welfare of children is safeguarded and that their own behaviour is guided by this duty of care both within and beyond the care setting.

Families SA and agencies are responsible to provide supervision, support, guidance and resources to all care workers working with vulnerable children to undertake their role. Agencies must provide care workers working with children with specific requirements (e.g., infants or children with therapeutic needs) with opportunities to develop the required knowledge and skills to fulfil their role. All agencies and their staff must comply with the Families SA standards of alternative care in South Australia.

6. Care Concerns

Care concerns can be defined as acts or situations that indicate there has been a failure to meet the agreed or minimum standards of care, which jeopardises the wellbeing of a child in placement. An act of omission, commission or permission which may constitute a deficit in quality of care is an act that:

- Causes physical or emotional harm or risk of harm to a child;
- Constitutes inadequate care to that expected of staff/caregivers;
- Is detrimental to the child's development.

These also include concerns where there has been alleged harm or non-accidental injury.

The DECD Care Concerns Investigation Unit examines all accidental and non-accidental harm, alleged harm, sexual abuse and deficit of care issues.

Please refer to the Crisis and Critical Incident Management Guide for an overview of Care Concerns and the required processes that care workers are required to undertake.

7. The Notification Process Procedure

The Notification Process Procedure describes the steps taken to notify any suspicion of abuse/breach of care to a child in their placement.

Reporting the abuse of a child

Child abuse (physical, sexual, emotional, psychological) may be disclosed to a care worker/staff member by a child in their care. Care workers may have observed or overheard another care worker acting inappropriately and abusively toward a child.

In either instance, the care worker with concerns about the abuse of a child needs to take the following steps:

Step 1

1. Notify the CARL request the appropriate area and make a notification;
2. Provide all details of the concerns and any information that might have been disclosed by the child.

Step 2

1. Inform the Families SA case worker. Depending on the nature of the concern the case worker will advise you and whomever else needs to be informed at this point and what you then need to document;
2. If the care concern/allegation of abuse is in relation to a departmental employee, seek further advice from CARL;
3. CARL will advise or ensure that the appropriate Families SA manager is informed of the allegation to further the investigation process;
4. If the care concern/allegation of abuse is in relation to another care worker employed by an agency, then alert the Families SA case worker and the agency supervisor.

Step 3

1. Once advised by Families SA case worker log information according to the practice guide in the Observation Log, diary, running sheet and medication records;
2. Once advised by Families SA case worker complete a Critical Incident report form and forward it to the case worker.

8. Confidentiality

Every child being cared for by Families SA has a right to their personal information being kept confidential by everyone concerned with their care. The following needs to be considered around confidentiality of children's personal information:

- Sharing of personal information is strictly on a need-to-know basis;
- Only the care worker working directly with a child has any right to personal information about that child and only in areas that it may impact on their ability to provide quality care to that child;
- To avoid other children and non-related staff and visitors overhearing information about a child confidential information should not be shared openly in the office or living area;
- A child can have access to their records. This can be done by making a formal Freedom of Information application (refer to Freedom of Information checklist). An application can be arranged through their caseworker;
- Exceptions to maintaining confidentiality:
 - A child may be in danger of abuse or neglect
 - A child's health or safety may be in danger either from their own, or the actions or inaction of someone else.

9. Related Documents

- Guideline - *Working with Children from a ATSI and CALD background*
- Guideline - *Crisis and Critical Incident Management*

10. Related forms

- Checklist - *Carer responsibilities*
- Template - *Carer placement information*
- Template - *Carer Update Sheet*
- Template - *Childs significant contacts*
- Template - *Clothing records*