

human.
services

Program requirements for home-based care in Victoria

July 2012

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*Minimum standards and outcome objectives for home-based care services
in Victoria* first published 2003

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Introduction

Placing the best interests of children at the heart of decision making and home-based care activity is at the centre of the Victorian Government's vision for giving children the best possible start in life.

This document sets out the program requirements for delivering home-based care services in Victoria. It provides a common benchmark for home-based care practice requirements for the Department of Human Services and community service organisation (CSO) staff to ensure a consistent approach to high-quality service delivery.

The term 'home-based care'¹ in the context of these requirements refers to contracted kinship care arrangements and all forms of foster care, including therapeutic foster care. For a more detailed description of home-based care types please refer to the current *Department of Human Services policy and funding plan*.

As part of a funding and service agreement with the department, these program requirements clearly document essential day-to-day prerequisites for providing a quality service for children in home-based care.

From 1 July 2012 the program requirements will be used in conjunction with significant program documents, the overarching *Department of Human Services Standards (2011)* (refer to section 5.4 *Quality assurance standards* for more information) and the *Children, Youth and Families Act 2005*.

Partnership in service delivery

Changing the experience and life trajectory of vulnerable children and families is a shared responsibility across community, government, service providers and individuals. The *Victoria's vulnerable children: our shared responsibility* directions paper highlights the five key action areas for protecting Victoria's vulnerable children:

- building effective and connected services
- enhancing education and building capacity
- making a child-friendly legal system
- providing safe, stable and supportive out-of-home care
- introducing accountability and transparency.

These five key actions will form the basis for the first-year initiatives, longer term commitments and areas to be further discussed and developed, that will feed into a whole-of-government vulnerable children and families strategy.

Effective practice requires good working relationships between services and working in partnership with families wherever possible. The decision to place a child into home-based care imposes responsibilities on all those involved to ensure the standard of care provided ensures their safety and stability, and promotes their healthy development. The *Best interests case practice model* (refer to the reference guide under *Best interests case practice model*) provides

¹ These program requirements will be applied by Disability Services to their funded alternative family placements (Family Options) during the six-month operational implementation period. Disability Services will work in partnership with their service providers to ensure these program requirements are applicable and able to be implemented by their providers.

the sector with a foundation for working with children and families and is based on sound professional judgement, a culture that is committed to reflective practice and respectful partnerships with families and service providers.

Partnership, collaboration and communication between CSOs, the department, carers, children and their families are essential to the successful implementation of these program requirements. This document identifies what is expected of organisations, staff and carers who care for children in home-based care.

At a statewide level, the department plays a critical role in specifying the type of services required, expected service outcomes, the framework under which services are funded, and how service delivery will be monitored.

At a local level, the department undertakes core monitoring of service delivery and engages with CSOs in relation to service demand and performance issues. The department is also responsible for: timely provision of information to CSOs and carers regarding children in home-based care; developing case plans (see *Case plan* and *Stability plan* in the glossary) for children; participating as active members of care teams (see *Care team* in the glossary); and negotiating with CSOs to ensure the best interests of children are met via delivery of services in accordance with case plan direction and goals.

CSOs are responsible for recruiting, assessing, training, supervising and supporting carers. Exceptions to this exist in the case of kinship care where the child protection program is responsible for recruiting and assessing statutory kinship carers.

CSOs support children placed in home-based care and take the lead role in developing and implementing care plans (see *Care and placement plan* in the glossary). In situations where they have contracted case management responsibility, they also act as case managers and are responsible for implementing case plans.

For voluntary clients, CSOs are responsible for establishing and monitoring the child care agreement in accordance with the policy and legislative requirements outlined in the *Administering child care agreements in voluntary out-of-home care handbook*.

Foster and kinship carers and their families play a vital role in opening their homes and volunteering their time and effort to care for and support children placed with them. They also play a critical role in developing and implementing plans for the care of these children. Carers require supervision, support, training, respect, validation and acknowledgement.

Home-based care and the purpose of program requirements

The Children, Youth and Families Act places the best interests of the child as the central consideration to inform all other processes. The child protection, placement and family services system must maintain a consistent focus on achieving three broad aims for every child:

- to ensure their safety
- to ensure their healthy development
- to achieve stability.

Achieving these aims may involve a range of interventions, including home-based care placements for children who are unable to live in the care of their immediate family.

In Victoria, the out-of-home care system comprises a range of placement types. The Children, Youth and Families Act states that the primary and preferred option for children is kinship care – a placement within the child’s wider family or community. Kinship care provides children with the security of being with family or adults from within their social network, promoting continuity, connectedness and stability in their lives.

When a kinship arrangement is not a possibility, placement in an alternative home-based care arrangement is preferred. Foster care is the temporary care of a child or young person up to 18 years of age, within a home-based setting, by an assessed, trained, accredited and registered foster carer. Foster care offers children exposure to a warm, nurturing and positive family environment. There is significant value for children in becoming a part of a carer’s family and community.

If home-based care services are to contribute successfully towards the three aims outlined above, they must operate to an appropriate standard. While these program requirements provide the essential prerequisites for a quality service to children in home-based care throughout Victoria, they also form the basis for ongoing monitoring, review and continual improvement.

Outcome objectives

A number of outcome objectives have been developed in relation to the broad aims of safety, healthy development and stability. These outcome objectives relate to what the home-based care system strives to achieve for the children for whom it has responsibility and reinforces the purpose of the program requirements.

The outcome objectives developed for home-based care are based on the seven life domains identified in the *Looking After Children* framework:²

1. health
2. emotional and behavioural development
3. education
4. family and social relationships
5. identity
6. social presentation
7. self-care skills.

The outcome objectives are aspirational statements and achieving them depends on a range of services. Home-based care alone cannot achieve each objective; however, providing care in a nurturing, positive family environment will play a vital role in helping a child achieve the outcomes. The term ‘as far as possible’ has been included in some of the outcome objectives to acknowledge the role that disability, illness and the impact of severe abuse and trauma may play in achieving these objectives for individual children.

² Parker, R, Ward, H, Jackson, S, Aldgate, J and Wedge, P (Eds) 1991, *Looking After Children: assessing outcomes in child care*, HMSO, London.

1. Health

The child has achieved their expected growth and development and has gained their maximum life opportunities through comprehensive health care while living in care.

2. Emotional and behavioural development

Acknowledging the range of personalities that exist and the impact of trauma, the child's emotional and behavioural responses are, as far as possible, age and situation appropriate.

3. Education

The child has achieved their educational potential and has gained their maximum life opportunities through active involvement with appropriate educational and training services.

4. Family and social relationships

The child has established meaningful, stable, appropriate and affectionate relationships with family, peers and others within their social network.

5. Identity

The child has developed a sense of self as a separate and valued person. They know their family background, are connected, as far as possible, in positive ways to their immediate or extended family, and have an understanding of and connection to their own religious and cultural background.

6. Social presentation

The child understands, as far as possible, the impact that their appearance and behaviour has on how they are perceived by others.

7. Self-care skills

The child, as far as possible, possesses the practical, emotional and communication skills required for achieving their age-appropriate level of independence.

Statement of values and principles

All service delivery within the area of home-based care will be guided by the following values and principles. These principles apply to carers, as well as departmental and CSO staff.

General area	Details
Safety	Children will reside in a safe environment that is free from abuse or neglect.
Potential	Children will receive high-quality care that aims to meet their physical, emotional, developmental, educational, cognitive, social, cultural and spiritual needs, and provides them with an opportunity to reach their full potential.
Participation	Children and their families will be provided with opportunities and assistance to participate in all decisions that affect them.
Respect	Children and their families will be treated respectfully and with dignity at all times and will not be spoken to or about in a derogatory manner.
Individuality	The individuality of each child will always be acknowledged. The ethnic origin, cultural identity, religion and language of each child and their family will be recognised and respected in the planning and provision of each placement.
Cultural safety	Children in home-based care come from a range of different cultures including children from Aboriginal communities. Each child will reside in an environment that acknowledges respects and highlights the importance of their cultural identity and heritage.
Gender and sexuality	Consideration will be given to the gender and sexuality of each child in the planning and delivery of services.
Disability	Consideration will be given to the gender and sexuality of each child in the planning and delivery of services.
Family focus	<p>Many children who reside in home-based care will return to the care of their family. Therefore support of family relationships is essential, wherever possible. Home-based care services will be delivered in a child-centred, family-focused manner, where the child and their family are respected. In accordance with the child's case plan, familial relationships will be nurtured and encouraged, and parents offered opportunities to maintain a parental role in the life of their child. A child's family:</p> <ul style="list-style-type: none"> · will be treated respectfully and with dignity at all times and their needs recognised and considered · will be acknowledged as possessing unique knowledge regarding their child · will participate in decisions affecting the life of their child and be offered opportunities to inform decision-making forums, such as case planning meetings · will be assisted to resolve any issues relating to the care of their child · will receive relevant information and access to timely grievance and appeals systems, which are fair, just and equitable · will be protected from discrimination at all times.
Primary attachment	Every child will be given the opportunity to maintain and form significant, consistent and enduring emotional connections with one or more individuals in their life. These relationships will be taken into account when decisions are made.

General area	Details
Stability	Stability in the lives of children is vital. Every effort will be made to: maintain the stability of a child's placement; minimise the number of staff and carers involved in their lives; and promote positive, caring, consistent and enduring relationships for a child with their family, peers, significant others, carers and schools.
Transitioning to adulthood (leaving care)	Equipping a child for life after care is vital. CSOs, care teams and carers will work with a child to develop the skills that are essential for a positive transition to adulthood.
Partnerships	Home-based care will be delivered through a partnership between the child, their family, CSO staff, carers and the department. The partnership will be coordinated using a care team approach. In addition to the care team, additional professional services may be involved. These partnerships will combine experiences and skills and share responsibilities. Each party is responsible for contributing to positive collaborative relationships with others, acknowledging each other's strengths and valuing each other's roles to maximise the quality of planning and service provision each child receives.
Commitment to carers and their families	<p>Carers and their families are central to providing quality home-based care. Their role must be acknowledged in meaningful ways by CSOs and the department. Carers and their family:</p> <ul style="list-style-type: none"> · will be treated respectfully and with dignity at all times and their needs will be recognised and considered · will be acknowledged as possessing unique knowledge regarding the child in their care · will receive adequate support to enable them to provide high-quality care to each child in their care · will receive training to develop their skills and maximise the quality of care they provide · will participate in the decisions affecting the lives of children placed in their care and be offered opportunities to inform decision-making forums, such as case planning meetings · will be protected from dangerous behaviours from children or their families · will be assisted in resolving conflict or issues associated with service delivery · will receive relevant information and access to a timely grievance and appeal system that is fair and equitable · will be protected from discrimination.
Privacy	Children in care, parents, family members and carers all have the right to privacy. Their wishes will be respected and considered by CSOs and the department, where ever possible.
Staff development	Effective recruitment, training and supervision of staff is vital in providing high-quality services. Every effort will be made to ensure staff are provided with opportunities to develop their skills and maximise the quality of services they provide for children and carers. Emphasis will also be placed on providing staff with a safe and rewarding work environment.

Format of the program requirements

Categories

The program requirements fall into the following five broad categories.

Client care requirements

These requirements concern the central importance of a child's safety, healthy development and stability. This section emphasises how the individual needs and cultural backgrounds of children must be respected and catered for.

Placement management requirements

These requirements concern the suitability of placements for meeting the individual needs of children and the need to plan, monitor, assess and review placements. This section emphasises the need for good communication and collaboration between all those involved with the child, to ensure all are kept informed and have opportunities to participate in decision making.

Carer and care environment requirements

These requirements concern the need to thoroughly select, assess, train, support and supervise carers. This section emphasises the importance of the care environment being suitable, safe and appropriate for children.

Human resources (CSO staff) requirements

These are pre-employment requirements including skills and attributes of staff, training, supervision and complaints procedures. The requirements address what is expected of CSO staff and what staff can expect of their employers.

Organisational requirements

These are the requirements for the operation and practices of CSOs that deliver home-based care services.

Components

Each category contains three components:

- a **principle statement**, which identifies why the particular category of program requirements is important
- a **summary of expectations**, which summarises the program requirements to apply to each category
- the **program requirements** themselves.

Section 1: Client care requirements

1. Client care requirements

Principle statement

The primary focus of home-based care services is to protect and promote the safety, healthy development and stability of every child while taking into account their individual needs, age, stage of life and culture.

Each child must be given the opportunity to reach their potential to participate fully in society, irrespective of their family circumstances or background.

Summary of expectations

CSOs and carers will provide support and supervision to children, will assist children to develop and maintain positive family and cultural relationships and will encourage children to reach their full potential.

On a day-to-day basis, carers play a nurturing and facilitative role in ensuring a child's growth, developmental and health needs are met. That children: are involved in education, training or employment; are provided with opportunities for familial, social and recreational activities; and develop self-care skills for when they leave care.

Carers are expected to meet these requirements while at the same time engaging the child to feel part of a natural family home environment and participate in the same type of everyday experiences as their biological children (where appropriate).

Program requirements

1.1 Safe and nurturing environment

- 1.1.1 Each child in home-based care will reside in a safe and nurturing environment that is free from physical, sexual and emotional abuse and neglect and supports healthy development and stability.
- 1.1.2 CSOs will use practice models and guidelines demonstrating consistency with the *Best interests framework* (refer to the reference guide under *Best interests case practice model – summary guide*).
- 1.1.3 CSOs will use the *Looking After Children* framework (refer to the reference guide under *Looking After Children*) to support the best interests of a child using a collaborative care team approach.
- 1.1.4 The *Charter for children in out-of-home care* (refer to the reference guide under *Charter for children in out-of-home care*) is accessible to CSO staff, underpins CSO practice and is provided to carers and children.
- 1.1.5 CSOs will ensure all staff, volunteers and carers have the requirements (skills, qualifications, knowledge, values, competencies and cultural competence) for their roles and responsibilities in order to meet the needs of infants, children and youth, and protect them from the risk of complex trauma, abuse and neglect.
- 1.1.6 CSOs providing contracted care will support parents and families to create and sustain a safe and nurturing home environment that supports the development and stability of children.

Section 1: Client care requirements

- 1.1.7 CSOs ensure children receive personal care items and possessions, adequate clothing, household provisions (including linen), educational items (including books and toys), an age-appropriate allowance, appropriate luggage as required, and any other culturally relevant and community resources to meet their individual needs.
- 1.1.8 CSOs will comply with all relevant legislation and departmental guidelines when responding to complaints about the quality of care being provided or any abuse in care allegations (refer to the reference guide for the *Guidelines for responding to quality of care concerns in out-of-home care*).

Related sections:

Statement of values and principles
 Section 2.10 Quality of care concerns
 Section 3.2 Assessment of carers
 Section 4.1 Pre-employment

1.2 Health

- 1.2.1 CSOs will promote a child's medical health needs being met. Health needs include general medical, dental, optical, auditory, mental health, disability and specialist needs.
- 1.2.2 Children entering home basedhome-based care for the first time (or for the first time during the current period of involvement) will have their medical health needs (including general medical, dental, optical, auditory) identified by a medical practitioner as soon as possible or within one month of entering care.
- 1.2.3 If a child is entering the placement from another placement, CSOs will confirm the last date on which the child received a health assessment (including general medical, dental, optical and auditory examinations) and will arrange any assessment that may be required.
- 1.2.4 CSOs will ensure children's medical health needs are monitored annually or more frequently if their health status requires, as detailed in their care plan.
- 1.2.5 CSOs will maintain up-to-date records detailing the child's medical health needs and health assessments, including records of any health treatments, ongoing and prescribed medication administration, and any specialist assessments and immunisations received. These records will be passed onto the child, their family or the relevant CSO when a child changes placement or at the conclusion of a placement.
- 1.2.6 Administration of non-prescribed medication should be recorded.
- 1.2.7 CSOs and carers will comply with departmental requirements concerning consent for medical, dental and other health assessments and treatment.
- 1.2.8 CSOs will ensure that training provided to foster carers, includes:
 - infection control procedures
 - procedures to be followed in medical and non-medical emergencies and accidents.
 In this regard, CSOs should encourage carers to hold an approved CPR and first aid certificate.
- 1.2.9 CSOs will have written policies and procedures that are readily accessible and familiar to staff and carers regarding the following:
 - the CSO policy on positive sex education for children (provided to foster carers in pre-service training, to staff through induction and to kinship carers when case management commences)

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- the CSO policy on substance abuse (including inhalants) by children, which considers issues of harm minimisation. This policy must stipulate that no illicit substances are permitted on the carer's properties and that substance use of any kind by children is not permitted on the carer's properties (other than appropriate use of legally prescribed medication where required).
- 1.2.10 CSOs and carers will comply with relevant guidelines concerning how management responds to inhalant use and comply with relevant alcohol and drug policies (refer to the reference guide under *Inhalant use and alcohol and drugs*).
- 1.2.11 CSOs and carers will ensure children are clothed in a manner that complies with reasonable community standards and expectations.
- 1.2.12 CSOs and carers will ensure children are provided with a diet that promotes good health, adheres to medical advice (including managing allergies), reflects community standards and expectations, and complies with their cultural and religious background.

Related sections:

Statement of values and principles

Section 1.8 Responding to the needs of children from culturally and linguistically diverse backgrounds

Section 1.3 Emotional and behavioural development

Section 2.9 Client records

Section 3.3 Carer training

1.3 Emotional and behavioural development

- 1.3.1 CSOs will work positively and effectively with children and their families, carers and other professionals to develop strategies and interventions to support a child's emotional and behavioural development.
- 1.3.2 CSOs and carers will support and supervise children in order to manage crises, minimise risk-taking and challenging behaviour and support positive approaches to behaviour management in line with departmental policies.
- 1.3.3 CSOs will ensure information and guidance is available for staff and carers on typical childhood development trends and on the appropriate management and developmental impact of attachment and trauma on children.

Related sections:

Statement of values and principles

Section 2.5 Supervision and support of children in home-based care

1.4 Education and employment

- 1.4.1 CSOs will ensure staff and carers are familiar with and participate in processes established by the partnering agreement titled *Out-of-home care education commitment* including student support groups and development and implementation of individual education plans for school-aged children (refer to the reference guide under *Education*).
- 1.4.2 CSOs will ensure an educational needs assessment for every child who has resided in home-based care for a period of three months or longer (coordinated by the school) occurs to identify their individual learning needs and to inform their individual education plan.
- 1.4.3 CSOs will assist children to commence and continue with education and employment programs (including playgroups, kindergarten, school, pre-employment and alternative day programs) to maximise the child's

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educational and training opportunities. Specific details of any assistance required in this area will be outlined in each child's care plan.

- 1.4.4 CSOs and carers will liaise directly with each child's school or pre-employment program on an ongoing basis (at least once every term), for the purpose of discussing progress and formulating strategies to respond to any identified issues.
- 1.4.5 CSOs and carers will record outcomes of formal liaisons with the child's school or pre-employment program. School reports will be kept and stored to ensure easy transfer of information to the relevant CSO if a child changes placement or for future access by the child when they return home or leave care.
- 1.4.6 Carers will provide children with an environment in which education and learning are valued and achievements are recognised. Carers will ensure children have an appropriate place to study and support to complete education-related tasks.
- 1.4.7 CSOs will ensure that children not able to be engaged in formal education are encouraged to participate in appropriate alternative programs and training.
- 1.4.8 Care teams will ensure that if a child changes placement, continuity of education is taken into account and given a high priority.
- 1.4.9 CSOs will ensure carers are made aware of the *18 years and school attending carer reimbursement policy* (refer to the reference guide under *Education*).

Related sections:

Statement of values and principles
 Section 2.3 Cooperation, collaboration and communication
 Section 2.6 Placement changes
 Section 2.9 Client records

1.5 Family and social relationships

- 1.5.1 CSOs and carers will support the development and maintenance of positive family and cultural attachments for children, in accordance with the child's case plan. Specific details of any action required in this area will also be outlined in each child's care plan.
- 1.5.2 CSOs will support carers, parents, families, siblings and significant others to access appropriate universal, secondary and specialist services that will assist to strengthen relationships with the child. Specific details of any action required in this area will be outlined in each child's care plan.
- 1.5.3 CSOs and carers will contribute to supporting parents, families and siblings to have opportunities to have contact with the child in a flexible manner in the best interests of the child, and in accordance with Children's Court orders. Specific details of any action required in this area will be outlined in each child's case plan.
- 1.5.4 CSOs and carers, together with the department, will hold a shared responsibility in facilitating familial access. This includes supervision, transportation and support for the child before, during and after access, promoting a positive access experience and environment. Specific details of any action required in this area will be outlined in each child's case plan.
- 1.5.5 In circumstances where case management is contracted to the CSO, the CSO will undertake the management of familial access (as outlined in 1.5.4) in

Section 1: Client care requirements

- accordance with the case plan and conditions of the Children's Court order (refer to the reference guide under *Access*).
- 1.5.6 CSOs and carers will involve the child's parents, siblings and extended family in the placement and care team as appropriate. Specific details of any action required in this area will be outlined in each child's case plan.
 - 1.5.7 CSOs and carers will treat children and their families respectfully. Children and their families will not be spoken to or about in a derogatory manner.
 - 1.5.8 CSOs and carers will support and encourage children to build and maintain relationships with their peers by granting them permission to participate in age-appropriate activities including birthday parties, school excursions, camps, overnight stays and other activities (refer to the reference guide under *Participation in activities*).
 - 1.5.9 Whenever possible, children will be provided with the opportunity to continue the recreational pursuits enjoyed before entering care.
 - 1.5.10 Children will be provided with regular opportunities, and the material they need, to participate in appropriate recreational activities to develop social confidence and skills in interacting with their peers. Specific details of any action required in this area will be outlined in each child's care plan.

Related sections:

Statement of values and principles

Section 1.7 Responding to the needs of Aboriginal children

Section 1.8 Responding to the needs of children from culturally and linguistically diverse backgrounds

Section 2.1 Care and placement planning and review

Section 2.3 Cooperation, collaboration and communication

Section 3.2 Assessment of carers

Section 4.2 Skills and attributes of staff

1.6 Identity and self-awareness

- 1.6.1 CSOs and carers will support and encourage the expression of each child's cultural and religious identity.
- 1.6.2 CSOs and carers will support and respect the expression of each child's gender identity and sexual orientation.
- 1.6.3 CSOs and carers will assist children to develop and maintain their individual and personal identity.
- 1.6.4 Through appropriate consultation, staff and carers will receive advice and information on typical childhood development trends, cultural and religious diversity, gender identity and sexual orientation to consider when caring for children.
- 1.6.5 CSOs and carers will ensure placement details, records of life experiences and achievements, school reports, medical records, photographs of meaningful and significant events, and the names of significant people involved in the child's life are collated in a portable format (see *Life story work* in the glossary) and kept it in a safe place so the child may take such memories with them when changing placement or leaving care.
- 1.6.6 CSOs and carers will consider improving a child's level of self-awareness as it relates to their social presentation, behaviour and appearance and will monitor the impact of community attitudes towards the child relevant to their age and stage of development.

Section 1: Client care requirements

1.7 Responding to the needs of Aboriginal children

- 1.7.1 The *Aboriginal cultural competence framework* (refer to the reference guide under *Aboriginal children and families*) will guide mainstream CSOs in developing culturally appropriate management strategies, policies and direct practice to ensure better outcomes for Aboriginal children and families.
- 1.7.2 CSOs will uphold the requirements of the *Aboriginal child placement principle* and the Children, Youth and Families Act to ensure the cultural identity, family and community connections of Aboriginal children are maintained and strengthened (refer to the reference guide under *Aboriginal children and families* and *Children, Youth and Families Act 2005*).
- 1.7.3 CSOs will be sensitive to the cultural diversity of Aboriginal children and will emphasise the need for respect for Aboriginal cultural identity and will tailor strategies and interventions to be culturally informed and respectful in the delivery of their services.
- 1.7.4 In circumstances where an Aboriginal child is placed with a non-Aboriginal carer the care team will maintain cultural safety in the placement, and support continued connections to the child's family and community (see *Cultural safety* in the glossary).
- 1.7.5 For Aboriginal children on guardianship to the Secretary orders or long-term guardianship to the Secretary orders, a completed cultural support plan in accordance with section 176 of the Children, Youth and Families Act is required (see *Cultural support plan* in the glossary).
- 1.7.6 The cultural support plan will be developed through a referral made by Child Protection to the regional Aboriginal Family Decision Making program.
- 1.7.7 The CSO staff and carers will ensure care planning is aligned with the cultural support plan, and will participate in developing and implementing the cultural support plan as required.
- 1.7.8 In circumstances where an Aboriginal child is placed with a non-Aboriginal carer, at the earliest possible time, CSOs will ensure the carer receives information and training on culturally appropriate caring, to ensure the child's cultural values, beliefs and practices are respected and upheld (refer to the reference guide under *Aboriginal children and families*).
- 1.7.9 CSOs will ensure staff and carers are aware of significant dates and events within the Aboriginal community. CSOs will assist staff and carers to build awareness of specific aspects of a child's Aboriginal culture, while supporting the ongoing development of their cultural competence.
- 1.7.10 In accordance with culturally competent practice, CSOs will develop links with appropriate Aboriginal services, family members and community networks as soon as possible.

Related sections:

Statement of values and principles

Section 1.5 Family and social relationships

Section 1.8 Responding to the needs of children from culturally and linguistically diverse backgrounds

Section 2.3 Cooperation, collaboration and communication

Section 1: Client care requirements

1.8 Responding to the needs of children from culturally and linguistically diverse backgrounds.

- 1.8.1 CSOs will be sensitive to the linguistic, cultural and religious diversity of children and will acknowledge the importance of these factors in planning and delivering culturally competent services.
- 1.8.2 CSOs will involve relevant members of the child's community and extended family as appropriate and, where necessary, use interpreters in communication with the child and family.
- 1.8.3 CSOs will develop links with culturally appropriate services as soon as a child is placed in care, or as soon as they become aware of the child's linguistic, cultural or religious identity.
- 1.8.4 CSOs will ensure the training carers receive provides information on culturally sensitive caring, to ensure that a child's cultural values, beliefs and practices are respected and upheld.
- 1.8.5 CSOs will ensure when a child is placed in home-based care that the carer is informed of specific aspects of a child's culture or religious identity, such as dietary laws, religious customs and beliefs and religious requirements, such as appropriate dress and behaviour. At the earliest possible time, carers will receive additional information and training concerning specific cultural issues, as required.

Related sections:

Statement of values and principles

Section 1.5 Family and social relationships

Section 1.7 Responding to the needs of Aboriginal children and young people

Section 2.3 Cooperation, collaboration and communication

Section 3.3 Carer training

1.9 Self-care skills

- 1.9.1 Children will be provided with a care environment that encourages growth in independence and problem-solving approaches, as appropriate to the child's age, developmental stage, disability, cultural or other circumstances.
- 1.9.2 Children will be assisted to develop self-care skills appropriate to their age, developmental stage, disability, cultural and other circumstances in preparation for the transition to adulthood and leaving care.

Related sections:

Statement of values and principles

Section 2.7 Transitioning to adulthood (leaving care)

Section 2: Placement management requirements

2. Placement management requirements

Principle statement

Individual placement planning is essential to ensure a child's safety, healthy development and stability. CSOs must ensure a placement meets a child's individual and varying needs throughout their time in care. For example, at the commencement of a foster care placement, the best possible match between carer and child should be made with carers adequately trained to ensure they have the competencies required to meet the individual needs of the child. Good communication and collaboration are essential to ensure all those involved with the child are kept informed and have opportunities to participate in decision-making processes.

Summary of expectations

CSOs must work to ensure that planning and delivery of services reflect what is currently known to be most effective. It is essential that CSOs continually review service provision to identify areas of possible improvement in systems, processes and practice approaches that meet the needs of children while they are residing in or leaving home-based care.

CSOs and carers play a vital role in contributing to the development and implementation of plans for children in their care. This includes case plans and care plans. They will provide appropriate levels of support and supervision to each child and will cooperate and collaborate with all services involved with the child during their time in care. CSOs and carers must provide care that encourages children to mature and grow, and to reach their potential according to their age and stage of development.

The CSO and carer will involve the child's family and keep them informed, maintain an up-to-date client record information system, and appropriately respond to complaints and quality of care concerns in a timely and efficient manner.

Program requirements

2.1 Care and placement planning and review

- 2.1.1 CSOs and carers will work in collaboration with the department to develop, contribute to and implement the statutory case planning directions for children placed with their CSO. The department holds the legal responsibility for case planning for all statutory clients in home-based care (with the exception of a delegation made to an Aboriginal organisation under section 18 of the Children, Youth and Families Act).
- 2.1.2 CSOs have the lead responsibility for care planning. They will coordinate and chair care team meetings and will manage, action and review the day-to-day care arrangements for children.
- 2.1.3 CSOs will conduct care planning within a specifically constituted care team for all children in foster care and in contracted kinship care arrangements.
- 2.1.4 The initial *Essential information record* will be completed within 14 days (30 days for kinship arrangements) of the child being referred to the CSO and the record will be kept up to date.
- 2.1.5 As soon as possible and within the first 14 days (28 days for kinship arrangements) of a placement, CSOs will, in conjunction with the care team, the department (child protection worker), carer, other relevant professionals, the child and their family (where appropriate), develop a care plan for the child (see *Care and placement plan* in the glossary).

Section 2: Placement management requirements

- 2.1.6 CSOs will ensure the agreed tasks allocated to CSOs or carers in the care planning process are completed in accordance with the care plan.
- 2.1.7 CSOs will ensure each child's care plan is updated after the *Looking After Children assessment and progress record* has been completed (refer to the reference guide under *Looking After Children*) and then six-monthly thereafter.
- 2.1.8 CSOs and care teams will use the *Looking After Children care and transition plan* (refer to the reference guide under *Looking After Children*) for children aged 15–18 years to document their aspirations, identified needs and the actions required to facilitate them.
- 2.1.9 Each party involved in the care planning must receive a copy of the plan and any future revised plans in a format that facilitates understanding.
- 2.1.10 All carers and children residing in extreme or higher risk bushfire areas as identified by the Country Fire Authority to be most vulnerable are required to have developed and maintained endorsed *Client bushfire leaving early* plans that will inform actions to relocate children to a safer area no later than the evening before a declared 'code red' day (refer to the reference guide under *Bushfires*).
- 2.1.11 For children whose custody and guardianship remains with their parents, CSOs will ensure that child care agreements are negotiated in accordance with the *Administering child care agreements in voluntary out-of-home care handbook* (refer to the reference guide under *Voluntary clients*).

Related sections:

Statement of values and principles

Section 2.4 Participation in decision making

Section 3.7 Carer participation and inclusion

2.2 Placement matching in foster care

- 2.2.1 CSOs will ensure children are matched with carers who are fully accredited for:
 - the type of care required
 - the numbers, ages and genders of children in placement.
- 2.2.2 CSOs will ensure children are placed with carers who are best able to meet the child's individual and special needs.
- 2.2.3 If a placement is requested outside of the carer's accreditation status, a preliminary agreement must be reached between the CSO program manager and the department placement coordination manager prior to the placement occurring. Further, the CSO will conduct a formal assessment and review of the carer's competency and accreditation status within 14 days.
- 2.2.4 CSOs will ensure that placement matching takes into account existing placements with the carer and does not have a negative impact on these placements.
- 2.2.5 CSOs will consider the carer family's capacity, routines, commitments and resources.
- 2.2.6 CSOs will take into account information from all relevant professionals, the child and their family, potential carers and their families and other children in the placement.

Section 2: Placement management requirements

- 2.2.7 CSOs will take into account siblings and their right to be placed together when it is in their best interests.

Related sections:

Statement of values and principles
 Section 2.3 Cooperation, collaboration and communication
 Section 3.1 Recruitment of foster carers
 Section 3.7 Carer participation and inclusion

2.3 Cooperation, collaboration and communication

- 2.3.1 CSOs and carers will work collaboratively with each other, the department, children and their families and relevant professionals to provide a service that is in accordance with the child's case plan goals and assists with fulfilling these goals.
- 2.3.2 CSOs will identify a caseworker or a contracted case manager (for case contracted arrangements) within their organisation for each child and will ensure the carer, the child's family and all other parties involved with the child are aware of who is the designated contact person.
- 2.3.3 Carers will be provided with all the information reasonably necessary to make a decision about whether to care for a child, and any medical or other information necessary to maintain the safety and promote the healthy development of a child in their care. This information should be provided to the carer before or at the time the placement is made.
- 2.3.4 CSOs and the department will clearly explain what is expected of a carer in relation to meeting the child's individual needs prior to a placement commencing. Where all relevant information is not available prior to the placement commencing, information will be provided as soon as possible thereafter.
- 2.3.5 CSOs and the department will continue to provide carers with all information reasonably necessary to enable the carer to provide appropriate care of the child they are being asked to care for.
- 2.3.6 Information is only disclosed outside of the care team to those who must need to know to maintain the safety and healthy development of the child.
- 2.3.7 CSOs will consult with carers regarding decisions that may impact on the carer or children in their care, such as changes to access arrangements.
- 2.3.8 CSOs will have written policies and procedures that are readily accessible and familiar to staff and carers regarding communication processes between the department, CSO staff and carers.
- 2.3.9 The *Charter for people in care relationships* and the *Carers Recognition Act 2012* (refer to the reference guide under *Charter for people in care relationships*) is accessible to CSO staff, underpins CSO practice and is provided to carers by the CSO.
- 2.3.10 CSOs will comply with departmental incident reporting requirements (refer to the reference guide under *Incident reporting*).
- 2.3.11 CSOs will include a collection notice on all forms provided to carers and will explain the purpose of the collection notice in terms of information sharing between the department and the CSO (see *Collection notice* in the glossary).

Section 2: Placement management requirements

Related sections:

Statement of values and principles
 Section 2.1 Care and placement planning and review
 Section 2.4 Participation in decision making
 Section 3.6 Carer support and supervision
 Section 3.7 Carer participation and inclusion

2.4 Participation in decision making

- 2.4.1 Children and their families will be assisted and supported by CSOs to have direct involvement in all planning and decision-making processes that concern them.
- 2.4.2 Care teams should always include the CSO caseworker, the department or the contracted case manager, the carer(s), the parents (unless this is deemed inappropriate) and any other adult with a significant caring role, and must be flexible to ensure all parties are able to contribute.
- 2.4.3 Care teams considering care and transition plans will include or consult children aged 15–18 years.
- 2.4.4 The views of children concerning the quality of care they are receiving will be actively sought. This will require CSOs to regularly meet with children in care face to face, not in the company of their carer, to discuss their needs their placement (taking into account their age and stage of development) and any issues that may exist.
- 2.4.5 Carers will be involved and consulted in decisions that have an impact on them and on the children in their care.

Related sections:

Statement of values and principles
 Section 2.3 Cooperation, collaboration and communication
 Section 3.7 Carer participation and inclusion

2.5 Supervision and support of children

- 2.5.1 CSOs will ensure carers provide children with an appropriate level of support and supervision at all times.
- 2.5.2 CSOs will ensure assessment to identify the strengths, risks and changing needs of the child in placement occurs on an ongoing basis.
- 2.5.3 CSOs will have practice guidelines that emphasise the need for children to meet regularly (a minimum of monthly unless otherwise agreed in a case plan) with the CSO worker or case manager in private, not in the company of the carer, to discuss their placement and any issues that may exist.
- 2.5.4 CSOs will have written policies and procedures that are readily accessible and familiar to staff and carers and outline:
 - detailed program guidelines for the types of home-based care provided
 - appropriate after-hours responses to assist with managing a crisis
 - appropriate responses and strategies (as deemed appropriate by care teams) for supporting children with a range of challenging behaviours such as high risk taking, violence or sexually abusive behaviours (refer to the reference guide under *Specialist practice resources*)
 - processes for alerting the department to an unacceptable level of risk to a child.

Section 2: Placement management requirements

Related sections:

Statement of values and principles
 Section 1.2 Health
 Section 1.3 Emotional and behavioural development
 Section 3.3 Carer training

2.6 Placement changes

- 2.6.1 Any placement change for a child must be approved by the department prior to the change occurring. When a decision is made that a placement change is required, the CSO will, as far as possible, maintain responsibility for care of the child until an alternative placement is located.
- 2.6.2 In circumstances where a kinship arrangement is no longer able to be maintained, Child Protection will assume responsibility for the placement change and will undertake suitability assessments and provide the endorsement required for any new kinship arrangements.
- 2.6.3 CSOs and carers will make every effort to minimise the number of placement changes that a child experiences.
- 2.6.4 CSOs will provide advice to the department regarding any planned or potential placement changes for a child as soon as possible.
- 2.6.5 Where there are indications that a placement may be disrupted, CSOs will meet with the child, the care team, the child's family (where appropriate) and other relevant parties to develop plans aimed at stabilising and securing the existing placement or moving the child to a more suitable placement.
- 2.6.6 CSOs will work with all parties concerned to ensure any placement change occurs in a way that is primarily sensitive to the child's needs and also to the carer's needs, including any necessary debriefing.
- 2.6.7 The placement change process will emphasise the importance of a smooth transition and the continuity of relationships for children. Specific details regarding the nature of continued relationships with carers no longer providing primary care will be agreed on a case-by-case basis with the department.
- 2.6.8 CSOs and the department will ensure that if a child changes placement, continuity of education is taken into account and given a high priority.
- 2.6.9 CSOs will ensure children and carers are involved in the decision-making process.
- 2.6.10 CSOs will ensure the child's personal belongings are safely transferred to the new placement in suitable (non-plastic) bags, luggage and boxes.
- 2.6.11 CSOs and carers will ensure that all information relevant to the good care of the child, *Looking After Children* records and any other documentation concerning the child is passed to the new carer and new case manager to ensure adequate transfer of information and consistency of care.

Related sections:

Statement of values and principles
 Section 2.3 Cooperation, collaboration and communication
 Section 2.4 Participation in decision making
 Section 2.9 Client records
 Section 3.2 Assessment of carers
 Section 3.6 Carer support and supervision

Section 2: Placement management requirements

2.7 Transitioning to adulthood (leaving care)

- 2.7.1 CSOs and carers will work with children aged 15–18 years during their time in placement to develop living skills that are appropriate to their age, developmental level and circumstance. The specific skills required may include but are not limited to:
- budgeting and managing money
 - managing family and other relationships
 - living with other people and conflict resolution
 - cooking, cleaning and personal maintenance
 - understanding their rights and responsibilities as an adult.
- 2.7.2 CSOs will use the *Looking After Children* care and transition plan to help the care team to identify the necessary strategies and actions required to assist each individual child's transition into adulthood. This plan will be developed in collaboration with the child from the age of 15 years, and will involve their family where applicable.
- 2.7.3 The final care and transition plan will be developed and known to the child at least six months prior to their actually leaving care. The care and transition plan will include a focus on the following areas of need:
- safe and sustainable accommodation
 - education or employment arrangements
 - sustainable income
 - access to health services (medical, dental and other specialist services as required)
 - information and referral to relevant post-care support services, health and community services, legal services, Centrelink, alternative housing options and culturally specific services such as Aboriginal organisations
 - post-care financial support (brokerage)
 - opportunities for children who have left care to link with others in the same situation, if desired.
- 2.7.4 Care teams will consult children aged 15–18 years regarding their personal aspirations and needs as they mature and transition towards adulthood.
- 2.7.5 CSOs will ensure a child's personal records and documents that are needed for 100 points of identification are collected and stored in a safe environment. These records and documents will be accessible to the child as required. Copies of these documents may be stored on a virtual website with appropriate security.
- 2.7.6 CSOs will ensure a child's personal possessions are safely stored and made available to them in good condition for when they are leaving care.
- 2.7.7 CSOs and carers will utilise departmental resources developed specifically to assist care and transition planning (refer to the reference guide under *Transitioning to adulthood*).
- 2.7.8 CSOs have responsibility to provide support to children in accordance with their care and transition plan, for up to three months after leaving care, unless a shorter time frame is negotiated with the department.
- 2.7.9 CSOs will provide post-care support, information and referral services to young people aged up to 21 years who have left care and contact the CSO seeking assistance (refer to the reference guide under *Transitioning to adulthood*).

Section 2: Placement management requirements

- 2.7.10 CSOs will ensure carers are made aware of the *18 years and school attending carer reimbursement policy* (refer to the reference guide under *Education*).

Related sections:

Statement of values and principles
 Section 1.9 Self-care skills
 Section 2.3 Cooperation, collaboration and communication
 Section 2.9 Client records

2.8 Privacy and confidentiality

- 2.8.1 CSOs will have written policies and procedures concerning the need to protect a child's right to privacy and confidentiality. These policies and procedures must be readily accessible and familiar to staff and carers and will comply with relevant legislation and departmental guidelines (refer to the reference guide under *Privacy, confidentiality and communication*).
- 2.8.2 The need for protection of a child's privacy must be balanced against the responsibility to protect children and families from harm and to act in their best interests.
- 2.8.3 CSOs and carers will ensure members of the care team are provided with information relevant to the care of the child.
- 2.8.4 The CSO will ensure the living environment supports the privacy and confidentiality of the child in culturally-, gender- and age-appropriate ways.
- 2.8.5 Policies, procedures and practice guidelines must provide for children to access private space as appropriate and have their belongings kept in a safe and private place.
- 2.8.6 CSOs and carers will securely store all personal information concerning children and their families. This information will only be provided to appropriately authorised people.
- 2.8.7 CSOs and carers will not disclose the personal circumstances, status or history of abuse of a child with any party outside the care team unless it is required to ensure the good care and safety of the child.
- 2.8.8 When promoting services to the public, or when publishing photographs and information likely to identify a child (including print or social media), CSOs will ensure children with statutory protective involvement are not used or identifiable in advertising or promotional material, unless permission is granted by the department in compliance with provisions of section 534 of the Children, Youth and Families Act (refer to the reference guide under *Children, Youth and Families Act 2005*).

Related sections:

Statement of values and principles
 Section 2.9 Client records
 Section 3.1 Recruitment of foster carers
 Section 3.5 Monitoring and review of carers

2.9 Client records

- 2.9.1 CSOs will ensure that *Looking After Children* and other personal records of a child are maintained and securely stored by the carer while the child is in their care. Personal records include details of a child's placement, their experiences and achievements, photographs of meaningful and significant events and the names of significant people involved in the child's life. This

Section 2: Placement management requirements

- information will be available to the child to refer to at all times. CSOs will also ensure this information accompanies them to any new placement, a return home or an independent living arrangement.
- 2.9.2 CSOs will ensure a child's records will be maintained and stored in accordance with relevant legislation and departmental guidelines concerning information gathering and privacy.
- 2.9.3 CSO staff will use the Client Relationship Information System (CRIS) or the Client Relationship Information System for Service Providers (CRISSP) to store and maintain client records (see *CRIS and CRISSP* in the glossary).
- 2.9.4 CSOs will accept the referral and create the placement in CRIS or CRISSP within one working day of the placement commencing.
- 2.9.5 Client records, case notes, reports and other key documents and records for each child will be aligned with statutory case planning and care planning and will be stored and maintained in CRIS and CRISSP.
- 2.9.6 CSOs will have written policies and procedures that are readily accessible and familiar to staff and carers and identify the type of information to be recorded and stored on a carer's file. This information will be gathered and stored in line with relevant legislation and departmental guidelines (refer to the reference guide under *Record keeping*).
- 2.9.7 CSOs and carers will ensure records are kept on each child in relation to significant events. This information will be communicated to the child's case manager and care team as appropriate and will be made available to the department.
- 2.9.8 CSOs will ensure records, including photographs, school reports and memorabilia for each child are appropriately maintained and stored to aid preservation. All records, photographs and school reports will be shared with the child's family and significant others, where appropriate.
Note: Section 178 (2) of the Children, Youth and Families Act describes circumstances where information may not be shared with parents.
- 2.9.9 CSOs will arrange the collection of essential identification records and documentation for children including birth certificates, Medicare and health care cards, tax file numbers, bank accounts and other documentation as appropriate.
- 2.9.10 At the conclusion of a placement, carers and staff will return all client records to the CSO.
- 2.9.11 At the conclusion of a placement, of the CSO will close the placement on CRIS or CRISSP within one working day.
- 2.9.12 At the conclusion of a placement client records and other information are safely and indefinitely stored by the CSO. This will enable subsequent retrieval should the child re-enter care or otherwise require access to their records.
- 2.9.13 The CSO must have policies and systems in place to allow children, families and former clients to appropriately access records regarding services provided to them in a timely manner in line with relevant legislation including the Health Records Act and the Information Privacy Act.
- 2.9.14 CSOs will ensure children and families are aware of the policies and systems in place to appropriately access records regarding services provided to them.

Section 2: Placement management requirements

Related sections:

Statement of values and principles
 Section 2.7 Transitioning to adulthood (leaving care)
 Section 2.8 Privacy and confidentiality
 Section 5.2 Financial viability and reporting

2.10 Quality of care concerns

- 2.10.1 CSOs will comply with relevant legislation and departmental guidelines when responding to issues reported as quality of care concerns. Concerns will range from minor quality issues through to physical or sexual abuse of a child in care.
- 2.10.2 CSOs must follow the mandatory steps outlined within the *Guidelines for responding to quality of care concerns in out-of-home care* (refer to the reference guide under *Quality of care*).
- 2.10.3 CSOs will ensure information about the mandatory processes required for investigating quality of care concerns and allegations of abuse in care and are known to staff and carers as part of their induction with the CSO.
- 2.10.4 When a concern about possible physical or sexual abuse, neglect or poor quality care of a child comes to the attention of a CSO staff member, the program manager must consult with the departmental quality of care coordinator within 24 hours of receiving the reported concern to determine the most appropriate response.
- 2.10.5 CSO staff must follow the departmental incident reporting requirements (refer to the reference guide under *Incident reporting*).
- 2.10.6 CSO staff must follow the departmental management and reporting requirements set out in *Responding to allegations of physical or sexual assault – departmental instruction* (refer to the reference guide under *Quality of care*).
- 2.10.7 CSO program managers must participate in quality of care screening consultations, planning and review meetings, interviews and panels as required in a timely manner.
- 2.10.8 CSOs must clearly document in carer files relevant details of all quality of care concerns raised including those managed to an outcome through support and supervision or formal care review.
- 2.10.9 CSOs will inform carers (as much as possible) about the progress and outcome of a quality of care concern investigation and of the process to appeal decisions that are made.
- 2.10.10 CSOs will provide carers who are the subject of a quality of care concern with the appropriate level of support, liaison, debriefing or counselling.
- 2.10.11 CSOs will provide children who are the subject of a quality of care concern with additional support as required.
- 2.10.12 Any historical quality of care concern regarding a current or previous carer that is brought to the attention of a CSO will be subject to the requirements of the *Guidelines for responding to quality of care concerns in out-of-home care* (refer to the reference guide under *Quality of care*).

Section 2: Placement management requirements

2.10.13 When an allegation of abuse or a quality of care concern is raised in relation to an Aboriginal child, the department and the CSO will ensure a relevant member of the child's Aboriginal community is included in any investigation.

2.10.14 CSOs will regularly review the quality of care concerns raised in relation to their carers and the children in their care and will consider their outcomes to inform policy and practice.

Related sections:

Statement of values and principles

Section 2.8 Privacy and confidentiality

Section 3.8 Carer complaints procedures

Section 4.5 Complaints procedures

Section 3: Carer and care environment requirements

3. Carer and care environment requirements

Principle statement

The competencies, skills and personal attributes of carers are central to providing high-quality home-based care services. It is essential that a sound working relationship be developed between CSOs and the carers they are supporting, based on mutual respect and trust. CSOs must make certain the care environment is suitable to ensure a safe and appropriate environment for children.

CSOs providing foster care are required to recruit, assess, train, supervise and support a pool of carers able to meet the varied needs of many children.

Summary of expectations

To ensure the provision of high-quality home-based care services, CSOs providing foster care are required to:

- have an effective carer recruitment strategy
- utilise the mandatory Victorian foster care assessment tools, panel approval and review processes for carers
- provide mandatory pre-service training prior to a carer taking on the care of a child, and provide targeted professional development thereafter
- monitor and address the quality of care provided by carers on an ongoing basis
- supervise and support carers effectively.

CSOs providing kinship care are required to:

- monitor and address the quality of care and the suitability of the home environment provided by carers on an ongoing basis
- identify suitable, targeted training and information sessions for carers as required and facilitate carer participation
- supervise and support carers effectively, including providing kinship carer support groups.

Program requirements

3.1 Recruitment of foster carers

- 3.1.1 CSOs will have an effective carer recruitment strategy that:
- is based on the individual, age, cultural and special needs of their client group
 - maximises opportunities to match a child to an appropriate carer
 - enables CSOs to meet placement demand and service agreement obligations
 - deals promptly with enquiries from prospective carers
 - provides prospective carers with timely and accurate information about: the skills and personal attributes required of carers, as well as the roles and expectations of carers, CSOs and the department; the support and training carers can expect to receive; and review procedures and conditions of approval.
- 3.1.2 CSOs will evaluate the effectiveness of recruitment campaigns to inform future campaigns.
- 3.1.3 CSOs will contribute to statewide data collections on recruitment and accreditation of carers for sector analysis and development.

Section 3: Carer and care environment requirements

Related sections:

Statement of values and principles

Section 1.7 Responding to the needs of Aboriginal children

Section 1.8 Responding to the needs of children from culturally and linguistically diverse backgrounds

Section 2.2 Placement matching in foster care

3.2 Assessment of carers

Assessment of foster carers

- 3.2.1 CSOs must ensure that prospective foster carers and their families are thoroughly screened and assessed to ensure their suitability to care for children in foster care. Screening and assessment must be fully completed prior to a child being placed with a carer.
- 3.2.2 *Step by Step Victoria* is the mandatory, competency-based carer assessment package to be used in the assessment of potential foster carers by CSOs in Victoria (refer to the reference guide and glossary under *Step by Step Victoria*).
- 3.2.3 The *Step by Step Aboriginal assessment tool* is the Victorian assessment tool used by Aboriginal community controlled organisations conducting assessments of potential foster carers for Aboriginal children. Use of either this tool or the *Step by Step Victoria* material is mandatory for Aboriginal community controlled organisations conducting assessments of potential foster carers for Aboriginal children (refer to the reference guide and glossary under *Step by Step Aboriginal assessment tool*).
- 3.2.4 CSOs will ensure staff who undertake assessments of potential carers using *Step by Step Victoria* (or the *Step by Step Aboriginal assessment tool*) have fully completed the relevant familiarisation training before undertaking assessments.
- 3.2.5 CSOs must comply with the following suitability and screening checks when considering a foster carer application:
- Prior to proceeding with assessment of a potential applicant CSOs must contact the department to confirm the prospective carer has not been disqualified from the *Register of out-of-home carers* (see *Carer register* in the glossary).
 - An up to date Working with Children Check for the prospective carer and any adult member of the household that will have a parenting role with the child must be completed (refer to the reference guide under *Working with Children Check*).
 - Direct contact must be made (face-to-face or telephone) with three responsible people to act as referees to the applicant. Referees must have known the applicant for a minimum of two years, must still be in contact with the applicant, must not be directly related and must have observed the applicant's interaction with children.
 - If an applicant has previously fostered with another CSO in Victoria or interstate, CSOs must contact these other CSOs to seek advice as to the applicant's suitability and competencies.
 - A new police check is required upon application to a CSO for every prospective carer and all members of their household who are 18 years of age and over who reside or regularly stay overnight (refer to the reference guide and glossary under *Police checks*).
 - For applicants and members of their household who are 18 years of age who have spent 12 months or more overseas during the past five years, an international police check must be conducted.³ If this is not possible, three additional referee checks from people who knew the applicant while in that country must be conducted.

³ (Note: Victoria Police does not conduct international checks. International checks are subject to the legislation of the country where the person was a resident. Any applicant from overseas should contact the relevant overseas police force to obtain a police check).

Section 3: Carer and care environment requirements

- If CSOs become aware of a disclosable police record in relation to an applicant, an adult member of the applicant's household or an existing carer and adult members of their household (see *Disclosable record* in the glossary) they must proceed in accordance with current departmental policy (refer to the reference guide under *Police checks*).
- 3.2.6 CSOs must ensure prospective carers provide evidence they are medically fit including providing a medical report from their general medical practitioner.
- 3.2.7 Part of the *Step by Step Victoria* assessment (or the *Step by Step Aboriginal assessment tool*) must include at least one home visit to conduct a 'home and environment check'. Plans must be developed to address any identified issues before proceeding (refer to Appendix 1: *Home and environment check*).
- 3.2.8 CSOs will thoroughly assess potential carers and their families to ascertain whether they possess the attitudes, skills, cultural competence and personal attributes required for caring.
- 3.2.9 CSOs will assess potential carers based on four key competencies identified as essential when undertaking effective foster caring:
- provides a safe environment that is free from abuse
 - demonstrates a personal readiness to become a carer
 - promotes the positive development of children in care
 - has the ability to work as part of a team.
- 3.2.10 The process of assessing suitability to become a carer involves all household members (including children) attending at least one information session. Full assessment of both adult partners (including new partners) is mandatory.
- 3.2.11 CSOs will ensure unsuccessful applicants are provided with a rationale.
- Assessment of kinship carers**
- 3.2.12 Preliminary assessment of all kinship carers will be undertaken by Child Protection utilising the *Part A preliminary assessment tool*. This assessment will consider:
- the capacity of the carer to promote the child's safety, healthy wellbeing and development
 - the criminal history of the carer and usual adult members of the household
 - the history of the carer and household members as it relates to them as carers of children (refer to the reference guide under Kinship care).
- 3.2.13 For kinship arrangements likely to proceed beyond three weeks, a comprehensive assessment will also be undertaken by Child Protection utilising the *Part B comprehensive assessment tool*. This assessment will focus on the carer's capacity to engage in longer term planning for the child, and their ability to meet the ongoing needs of the child.
- 3.2.14 Prior to the placement of a child in a kinship arrangement, a new police check is required for every prospective carer and all members of their household who are 18 years of age and over who reside or regularly stay overnight. These police checks will be undertaken by Child Protection (refer to the reference guide and glossary under *Police checks*).
- 3.2.15 For every prospective carer and members of their household who are 18 years of age or over and who have spent 12 months or more overseas during the past five years, an international police check must be conducted.³ If this is not possible, three additional referee checks from people who knew the applicant while in that country must be conducted. These checks will be undertaken by Child Protection.

Section 3: Carer and care environment requirements

Related sections:

Statement of values and principles

Section 1.5 Family and social relationships

Section 1.7 Responding to the needs of Aboriginal children

Section 1.8 Responding to the needs of children from culturally and linguistically diverse backgrounds

Section 2.3 Cooperation, collaboration and communication

Section 2.5 Supervision and support of children

Section 3.3 Carer training

Section 3.4 Foster care panels

3.3 Carer training

Carer training for foster carers

- 3.3.1 CSOs must ensure prospective foster carers and their families are fully trained to ensure their suitability to care for children in foster care. Pre-service training must be completed prior to a child being placed with a carer.
- 3.3.2 *Shared Stories Shared Lives Victoria* is the mandatory pre-service carer training package used by CSOs to train potential foster carers in Victoria (refer to the reference guide and glossary under *Shared Stories Shared Lives Victoria*).
- 3.3.3 *Our Carers for Our Kids* is the Victorian training package used by Aboriginal organisations training potential foster carers for Aboriginal children. Use of either this training package or the *Shared Stories Shared Lives Victoria* material is mandatory for Aboriginal community controlled organisations delivering training to potential foster carers for Aboriginal children (refer to the reference guide and glossary under *Our Carers for Our Kids*).
- 3.3.4 Potential carers and their partners (including new partners) and any other adult in the household who will have a parenting role are required to attend and participate in *Shared Stories Shared Lives Victoria* (or *Our Carers for Our Kids*) training.
- 3.3.5 CSOs will ensure staff who deliver training to potential carers in *Shared Stories Shared Lives Victoria* (or *Our Carers for Our Kids*) have fully completed the relevant familiarisation training before delivering training.
- 3.3.6 Carers, and other household members as determined by the CSO, will be required to attend subsequent training on a range of issues relevant to children in their care. Training will be scheduled to accommodate the commitments of carers (as far as possible).
- 3.3.7 CSOs will ensure training provided to carers includes:
- infection control procedures
 - procedures to be followed in medical and non-medical emergencies and accidents.
- In this regard, CSOs should encourage carers to hold an approved CPR and first aid certificate.
- 3.3.8 **Carer training for both foster and kinship carers**
- 3.3.8 CSOs will ensure carers have timely access to support, information and training that ensures they are competent to meet the specific needs of children in their care. For example, training may be required to ensure effective management of a medical condition, a disability, sexual assault, challenging behaviours, a therapeutic approach to care or any other special needs.
- 3.3.9 In circumstances where an Aboriginal child is placed with a non-Aboriginal carer, at the earliest possible time, CSOs will ensure the carer receives information and training on culturally appropriate caring, to ensure the child's cultural values, beliefs and practices are respected and upheld.

Section 3: Carer and care environment requirements

- 3.3.10 CSOs will ensure the training carers receive provides information on culturally sensitive caring, to ensure that a child's cultural values, beliefs and practices are respected and upheld.

Related sections:

Statement of values and principles

Section 1.2 Health

Section 1.7 Responding to the needs of Aboriginal children

Section 1.8 Responding to the needs of children from culturally and linguistically diverse backgrounds.

Section 3.2 Assessment of carers

3.4 Foster care panels

- 3.4.1 All CSOs providing foster care will participate in a formal foster carer panel, either regionally or CSO based, that formally approves or rejects carer applicants. The panel will consist of CSO management representatives, departmental representatives and other relevant people.
Note: A CSO foster care panel will not proceed without the participation of a representative from the department.
- 3.4.2 The CSO worker undertaking the assessment will attend the carer panel to discuss the accreditation of the potential carer they have assessed.
- 3.4.3 The CSO worker undertaking the assessment will present the following components of *Step by Step Victoria* (or the *Step by Step Aboriginal assessment tool*) to the panel members:
- a coversheet
 - confirmation of background checks, interviews and training (in the form of a checklist)
 - a geno-gram (or family tree)
 - a summary report including evidence of the four key competencies
 - a life history
 - the applicant's preferred options
 - a final report for the panel (this report will be partially completed by the worker undertaking the assessment with recommendations about an appropriate accreditation status).
- 3.4.4 When approving a carer, foster care panels must specify the accreditation status of the carer's approval. Panels must decide on a foster carer's accreditation for:
- the type of care (for example, respite or general pool)
 - numbers, ages and genders of the children
 - any special conditions attached to the approval
 - priority training needs identified
 - level and type of support to be provided by the CSO or other organisations
 - the review process.
- 3.4.5 An applicant is only considered approved and accredited after the foster care panel chairperson signs a final report.
- 3.4.6 The CSO will inform the department of the approval of a foster carer by formally registering the carer on the Carer Register within 14 days of the approval.
- 3.4.7 The final report will include details of foster care panel decisions as outlined in 3.4.4 and any other issues. This report will be kept as a formal record of the panel meeting.
- 3.4.8 CSOs will ensure successful applicants sign a copy of a code of conduct for approved foster carers.

Section 3: Carer and care environment requirements

- 3.4.9 CSOs will ensure unsuccessful applicants are provided with a rationale.

Related sections:

Statement of values and principles

Section 3.2 Assessment of carers

3.5 Monitoring and review of carers

- 3.5.1 CSOs will ensure that the safety of the carer's home and environment is monitored regularly through home visits and is formally reviewed annually using home and environment checks as part of the review process for carers (refer to Appendix 1: *Home and environment check (Step by step Victoria) (for foster care)*).
- 3.5.2 Home and environment checks will also be conducted following each carer change of address.
- 3.5.3 CSOs will monitor the quality of care provided by carers on an ongoing basis, using home visits and regular contact.
- 3.5.4 CSOs will formally review carers annually using visits to the carer's home and other checks in order to confirm their continuing appropriateness and availability and capacity to care. The review will be documented and will highlight their strengths, learning needs and any placement issues (refer to Appendix 2: *Kinship care annual review tool*).
- 3.5.5 Annual reviews must include:
- placements during the past 12 months
 - training received and required
 - currency of police checks
 - currency of Working with Children Checks (foster care only)
 - medical checks (foster care only)
 - home and environment checks
 - personal readiness and capacity to continue caring
 - ability to work effectively as part of a care team
 - ability to provide a safe environment free from abuse
 - ability to promote the positive and healthy development of children
 - quality of care reviews and any other relevant issues.
- 3.5.6 CSOs will ensure police record checks for carers and other members of the carer's household who are 18 years of age and over who reside and regularly stay overnight are updated every three years.
- 3.5.7 Processes will be in place for carers to inform CSOs if a person over 18 years has moved into the household or regularly stays overnight, and for a police check and an assessment to be undertaken by the CSO regarding the impact of this change on the safety and wellbeing of the child. (*Note: This includes tenants, lodgers, boarders, caravans and bungalows on the property.*)
- 3.5.8 If CSOs become aware of a disclosable police record in relation to an existing carer and adult members of their household (see *Disclosable record* in the glossary) CSOs will ensure they proceed in accordance with current departmental policy (refer to the reference guide under *Police checks*).
- Additional requirements for monitoring and reviewing foster carers**
- 3.5.9 CSOs conducting annual reviews of carers will include a formal review of the carer's accreditation status. A significant change in foster carer circumstances may also require a change to a foster carer's accreditation status (as outlined in 3.4.4).

Section 3: Carer and care environment requirements

- 3.5.10 A significant change to a foster carer's accreditation status as a result of an annual or other review will need to be approved by a foster care panel.
- 3.5.11 CSOs will ensure Working with Children Checks for carers and any adult member of the household who will have a parenting role with the child are updated every five years.
- 3.5.12 CSOs providing foster care will inform the department of the revocation of a carer's approval by removing them from the Carer Register within 14 days of the carer ceasing to provide foster care with their organisation.

Related sections:

Statement of values and principles

Section 3.2 Assessment of carers

Section 3.6 Carer support and supervision

3.6 Carer support and supervision

- 3.6.1 The *Charter for people in care relationships* (refer to the reference guide under *Charter (Victorian) for people in care relationships*), which is accessible to CSO staff, underpins CSO practice and is provided to carers.
- 3.6.2 CSOs will have written supervision policies in place which specify that each carer has an appropriately skilled CSO worker (or case manager when a case is contracted) as an identified supervisor or key contact.
- 3.6.3 CSOs will determine the level of supervision and support (see *Supervision* in the glossary) for a carer at the beginning of the placement by assessing the level of need of the child in care as well as the carer's needs (ensuring the minimum level of supervision while a child is placed with the carer is once per month).
- 3.6.4 CSO policy and procedures will be readily accessible and familiar to staff and carers. The level of supervision required will vary depending on the needs of the child and the carer. CSO policies and procedures need to consider:
 - the assessed level of need of the child, which will vary from time to time
 - the level of supervision and support required for new carers
 - the level of supervision required at the start and end of a placement
 - arrangements for after-hours support
 - supervision and debriefing after a critical incident
 - access to a CSO key contact (including when designated worker is not available) to obtain advice and support as needed.
- 3.6.5 CSOs will ensure that issues identified during supervision are recorded and acted upon appropriately to ensure the ongoing safety and healthy development of children in placement.
- 3.6.6 CSOs will ensure carers are receiving the appropriate level of carer reimbursement and financial assistance for which they are eligible while caring for a child. This will include relevant departmental and Commonwealth entitlements.
- 3.6.7 CSOs will ensure carer reimbursement documentation has been completed within three working days of the commencement, change of details, or ceasing of a placement.
- 3.6.8 CSOs will provide mechanisms for carers to link with other carers to receive and provide support, including establishing support groups.
- 3.6.9 CSOs will ensure carers are informed about the Victorian peak bodies available to provide them with independent advice, information, support and advocacy (refer to the reference guide under *Peak bodies*).

Section 3: Carer and care environment requirements

- Additional requirements for carer support and supervision for foster carers**
- 3.6.10 CSOs and foster carers will both sign an agreement that outlines their individual roles and responsibilities.

Related sections:

Statement of values and principles
 Section 2.3 Cooperation, collaboration and communication
 Section 2.5 Supervision and support of children
 Section 3.5 Monitoring and review of carers

3.7 Carer participation and inclusion

- 3.7.1 CSO policies and practices will reflect a participatory relationship with carers, where collaboration and good communication occurs and where the carer and their family's needs are recognised and respected.
- 3.7.2 Carers will participate in the decisions affecting the lives of children placed in their care and will be offered opportunities to inform key decision-making processes, such as care team meetings and case plans.
- 3.7.3 CSOs will have systems in place for carers to provide feedback about their experience of service delivery and management.
- 3.7.4 CSOs will continually seek to identify issues that may have an impact on the health, safety and wellbeing of carers and develop strategies to reduce risk.
- 3.7.5 CSOs will offer exit interviews or debriefing sessions (in a confidential environment) following a placement ending to provide carers with an opportunity to express their opinions, reflect on their experience and provide information that could assist the CSO to refine its policies and practices.

Related sections:

Statement of values and principles
 Section 2.1 Placement planning and review
 Section 2.3 Cooperation, collaboration and communication
 Section 2.4 Participation in decision making
 Section 3.5 Monitoring and review of carers

3.8 Carer complaints procedures

- 3.8.1 CSOs will have written policies and procedures for resolving disputes or complaints made by carers that are readily accessible and familiar to staff and carers. These policies and procedures will meet all legislative and departmental guidelines and should cover:
- natural justice principles (see Natural justice in the glossary)
 - where to direct disputes or complaints made by carers
 - the process for lodging and managing complaints made by carers
 - the steps to follow in assessing and resolving disputes or complaints made by carers
 - confidentiality
 - timeframes for responding
 - the process to appeal decisions.
- 3.8.2 CSOs and carers will ensure they have fully utilised the CSO dispute resolution procedures prior to accessing external bodies regarding a complaint or appeal process.
- 3.8.3 CSOs will ensure carers are informed about the Victorian peak bodies available to provide them with independent advice, information, support and advocacy (refer to the reference guide under *Peak bodies*).

Section 3: Carer and care environment requirements

- 3.8.4 CSOs will regularly review complaints and their outcomes to inform policy and practice.

Related sections:

Statement of values and principles
Section 2.8 Privacy and confidentiality
Section 2.10 Quality of care concerns
Section 3.6 Carer support and supervision
Section 4.5 Complaints procedures

Section 4: Human resource (CSO staff) requirements

4. Human resource (CSO staff) requirements

Principle statement

The values, skills, knowledge and experience of CSO staff have a significant impact on the lives of the children in home-based care. The support staff receive from employers will have a direct impact on their ability to fulfil their role in recruiting, assessing, training, supporting and supervising carers and in supporting and advocating for children and their families.

Summary of expectations

Staff must possess the skills and personal attributes that adequately equip them for their role.

Staff must be supported by their employers through: organisational structures; professional development opportunities; acceptable working conditions that comply with occupational health and safety and other legal requirements; and regular supervision and support. Those providing supervision and support must also possess skills and personal attributes that adequately equip them for their role.

Program requirements

4.1 Pre-employment

- 4.1.1 CSOs will have written policies and procedures that are readily accessible and familiar to staff and ensure all applicants for positions within the CSO are thoroughly assessed prior to being offered employment. This applies to paid employees, subcontracted workers, volunteers and student placement staff. Assessment will include:
- confirmation of qualifications and experience
 - confirmation that the applicant possesses the skills, personal attributes and competencies required to successfully fulfil the job they have applied for (initially through the interview process)
 - direct contact (either face-to-face or telephone contact) with two referees to confirm the applicant's suitability, including contact with the most recent employer
 - possession of an up-to-date Working with Children Check
 - completion of a police check in compliance with the current departmental policy (refer to the reference guide and glossary under Police checks).
- 4.1.2 CSOs will ensure that staff employed via an employment agency have been subjected to a police check by Victoria Police and possess an up-to-date Working with Children Check. For staff who have spent 12 months or more overseas during the past ten years, an international police check must be conducted.
- 4.1.3 If an international police check cannot be made for an applicant, referee checks must be conducted with three nominated referees who personally knew the individual while they were residing in the other country.³

Section 4: Human resource (CSO staff) requirements

Related sections:

Statement of values and principles

4.2 Skills and attributes of staff

- 4.2.1 Services will be delivered by CSO staff with relevant qualifications, interpersonal skills and personal attributes and the capacity to work collaboratively with carers and their families and children and their families, and to deliver a service that supports the varying needs of children and their families.
- 4.2.2 CSOs will maintain records of the academic qualifications and work history of staff. Non-identifying information concerning staff shall be made available to the department upon request.

Related sections:

Statement of values and principles

Section 2.3 Cooperation, collaboration and communication

4.3 New employees

- 4.3.1 CSOs will ensure all new staff receive appropriate orientation and induction to the organisation, where relevant information is provided on the:
- CSO policies and procedures
 - CSO mission statement and values
 - CSO structure, including lines of accountability and the roles and responsibilities of staff, carers and management.
- 4.3.2 CSOs will ensure all new staff are introduced to relevant people, including carers, children and their families.

Related sections:

Statement of values and principles

5.3 Training and supervision of staff

- 4.4.1 CSOs will provide supervision to staff (see *Supervision* in the glossary) and ensure as a minimum that:
- Every staff member has an identified supervisor, with whom they have regular contact.
 - Staff are provided with regular supervision that is:
 - uninterrupted
 - professional and confidential
 - documented in supervision or staff files
 - based on mutually defined expectations
 - based on clear and open communication
 - a responsibility shared between supervisor and staff.
 - Issues identified in supervision are acted on appropriately.
 - A formal process is put in place for debriefing after critical incidents.
- 4.4.2 Staff providing supervision should have the appropriate skills and qualifications required for this task. Staff providing supervision should also receive regular, ongoing supervision in their role from appropriately qualified and skilled senior staff.
- 4.4.3 CSOs will identify the developmental needs of staff and provide opportunities and resources required for their ongoing professional development.
- 4.4.4 CSOs will ensure staff have timely access to information and training that ensures they are competent to meet the specific needs of children in the care of the CSO. For example, training may be required in *Looking After Children*,

Section 4: Human resource (CSO staff) requirements

sexual assault, challenging behaviours, a therapeutic approach to care, effective management of a medical condition, disability or any other special needs.

- 4.4.5 CSOs will ensure staff who deliver training to potential foster carers in *Shared Stories Shared Lives Victoria* (or *Our Carers for Our Kids*) have fully completed the relevant familiarisation training before delivering training.
- 4.4.6 CSOs will ensure staff who undertake assessments of potential foster carers using *Step by Step Victoria* (or *the Step by Step Aboriginal assessment tool*) have fully completed the relevant familiarisation training before undertaking assessments.
- 4.4.7 CSOs will ensure staff receive information and training on culturally appropriate caring to ensure every child's cultural values, beliefs and practices are respected and upheld.
- 4.4.8 CSOs will have policies and procedures to assess the performance of staff and address performance issues.

Related sections:

Statement of values and principles

4.5 Complaints procedures

- 4.5.1 CSOs will have documented procedures for resolving disputes or complaints made by staff, carers, volunteers, children, families and the community.
- 4.5.2 CSO policies and procedures should be readily available, and will be in addition to the *Guidelines for responding to quality of care concerns in out-of-home care* and should cover:
 - natural justice principles (see Natural justice in the glossary)
 - when to defer to the Guidelines for responding to quality of care concerns in out-of-home care
 - where to direct disputes or complaints
 - the process for lodging and managing complaints made
 - the steps to follow in assessing and resolving disputes or complaints made confidentially
 - timeframes for responding
 - the process to appeal decisions.
- 4.5.3 CSOs will record all complaints and allegations made.
- 4.5.4 CSOs will regularly consider complaints and allegations and their outcomes to inform policy and practice improvement where appropriate.

Related sections:

Statement of values and principles

Section 2.8 Privacy and confidentiality

Section 2.10 Quality of care concerns

Section 3.8 Carer complaints procedures

4.6 Occupational health and safety

- 4.6.1 The CSO will provide a safe working environment for staff, carers and volunteers.
- 4.6.2 The office premises used by the CSOs should be suitable and appropriate for the purpose of the service.

Section 4: Human resource (CSO staff) requirements

- 4.6.3 CSOs will ensure office premises have effective information technology, communication and security systems.
- 4.6.4 CSOs must have policies and procedures governing occupational health and safety that comply with the relevant legislation (refer to the reference guide under *Occupational health and safety*).

Related sections:

Statement of values and principles

Section 5: Organisational requirements

5. Organisational requirements

Principle statement

The philosophies, practices and organisational structures of the CSOs delivering home-based care must support the provision of high-quality care for children.

Summary of expectations

CSOs must have philosophies, practices, management and an organisational structure that supports providing high-quality home-based care, the responsible use of funding, compliance with reporting requirements and ongoing quality improvement.

Program requirements

5.1 Service management

- 5.1.1 CSOs will comply with all Commonwealth, state and local government legislation and regulations applicable to their activities.
- 5.1.2 The CSO maintains effective governance policies that clearly document roles and responsibilities and delegations of authority for the governing body, management, staff and carers, and defines acceptable behaviours and practices.
- 5.1.3 Selection policies and procedures are aimed at recruiting board members with the skills, professional expertise, cultural competence and knowledge to fulfil the board's role. A code of ethics is in place for the board of management including procedures to manage conflicts of interest.
- 5.1.4 People involved in managing CSOs will have the necessary management, financial and business skills to manage the work efficiently and effectively.
- 5.1.5 People involved in managing CSOs will have the necessary knowledge and experience of home-based care to work in a professional manner in the leadership of staff. CSOs will ensure systems are put in place to determine priorities, monitor workloads and assign tasks to appropriate staff.
- 5.1.6 Policies, processes and practice guidelines are in place to promote the cultural competence of the board, management, staff and carers.
- 5.1.7 CSOs will adopt sound management practices that support effective service delivery, maximise positive outcomes for children and acknowledge the carer's role.
- 5.1.8 The roles, responsibilities and delegations of authority of the board, management, staff and carers are documented and available to staff, carers and the department.

Related sections:

Statement of values and principles

Section 5: Organisational requirements

5.2 Financial viability and reporting

- 5.2.1 CSOs will manage their financial resources in a responsible, accountable and prudent manner that maintains financial and organisational viability.
- 5.2.2 CSOs will comply with financial accountability requirements for funding received and submit the required financial reports in a timely fashion.
- 5.2.3 CSOs will adhere to all reporting requirements stipulated in the funding and service agreements (refer to the reference guide under *Service agreement*).
- 5.2.4 CSOs will collect, collate and submit minimum datasets and financial monitoring data in compliance with departmental requirements.
- 5.2.5 CSOs will use administrative systems and practices that adequately support staff to undertake effective service delivery.
- 5.2.6 Financial management and accounting practices meet Australian accounting standards and are aligned with the organisation's vision, strategic plan and goals.

6.2 Service agreement, monitoring and review

- 5.3.1 Organisations are required to deliver services in line with their service agreement with the department. Performance reporting and monitoring forms part of the agreement.
- 5.3.2 Organisations are required to regularly report on their service outputs through data collection and other reporting requirements as detailed in their service agreement. The specific requirements for monitoring, review and reporting are set out in the service agreement (refer to the reference guide under *Service agreement*).

The *Department of Human Services monitoring framework* is made up of three components:

- ongoing core monitoring
- an annual desktop review
- possible service review, where the desktop review indicates matters or issues requiring further attention.

7.2 Quality assurance standards

- 5.4.1 Services of the highest quality are required to provide children with their right to safety, stability and healthy development. The Children, Youth and Families Act requires CSOs providing out-of-home care services to be registered and to meet quality standards.

Registered services may fall within or across any of the three categories listed below:

- out-of-home care services
- community-based child and family services
- prescribed services (NB: there are currently no prescribed services).

- 5.4.2 Programs and services are expected to have systems in place to maintain quality service delivery and promote positive outcomes for clients.
- 5.4.3 The Department of Human Services Standards, implemented from 1 July 2012, are a single set of service delivery standards for a range of department-funded programs providing services to clients.

Section 5: Organisational requirements

Organisations will be externally reviewed against the Department of Human Services Standards once every three years by one of a panel of independent review bodies endorsed by the department.

Where a service provider receives funding of \$100,000 or less per annum from the department for activities in scope of independent review, it may, with the approval of the department, undertake a self-assessment rather than an independent review of its compliance with the standards.

The Department of Human Services Standards are summarised as:

- empowerment: people's rights are promoted and upheld
- access and engagement: people's right to access transparent, equitable and integrated services is promoted and upheld
- wellbeing: people's right to wellbeing and safety is promoted and upheld
- participation: people's right to choice, decision making and to actively participate as a valued member of their chosen community is promoted and upheld.

- 5.4.4 A service provider's governance and management systems are also reviewed using the standards of the independent review body.

The Department of Human Services Standards enable programs and services to both internally assess strengths and use emerging practice to reflect on and refine the way services are delivered, and to have an external critique of its service delivery that builds community confidence.

The evidence guide for the standards notes that reviewers will examine a service provider's systems, policies and practices to ensure they reflect the program requirements (refer to the reference guide under the Department of Human Services Standards).

Appendix 1

Appendix 1: Home and environment check (*Step by Step Victoria*)

This assessment tool is part of the mandatory foster carer *Step by Step Victoria* (and *Step by Step Aboriginal assessment tool*) assessment package. It will assist the CSO to make an assessment about a potential foster carer's capacity to provide a safe and nurturing environment for children in their home. The tool is used in an initial assessment, for a change of address or in an annual review. This tool will prompt the CSO and potential carer to jointly identify possible areas of risk, engage in discussion and collate information, and will also prompt the carer to address any concerns. A common sense and collaborative approach is required. Foster care staff trained in using these materials may access the full *Step by Step Victoria* package (and the *Step by Step Aboriginal assessment tool*) by clicking on the following link:

<http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/child-and-youth-placement-and-support/step-by-step-user-login-only>

Factors	Requirements	Issues to consider (not exhaustive)
General home environment	<p>The carer's home and property must be safe, hygienic and appropriately furnished in line with community standards and expectations.</p> <ul style="list-style-type: none"> ÿ Blind and curtain cords are secured and out of reach of children ÿ Areas where people may possibly trip over, for example, steps, loose cables or cords, are made safe ÿ Glass doors have safety glass or marking stickers ÿ Electric socket covers are fitted (if there are small children in the family) ÿ Safety locks are fitted on lower cupboards (if applicable) ÿ Food is appropriately and hygienically stored ÿ Stairs are fitted with safety gates (if applicable) ÿ Banisters are adequately secured (if applicable) 	<ul style="list-style-type: none"> · Overall cleanliness · Appropriate property maintenance (without the need for '<i>Urgent repairs</i>' – see glossary) · Security of the home · Living environment including outdoor areas are appropriate for the age and needs of the child
Smoke-free environment	<p>CSOs will ensure all children in home-based care reside in a smoke-free environment. Carers and their families must not smoke in their home or car while a child is in their care.</p> <p>CSOs will ensure potential carers are made aware of this requirement prior to commencing an assessment.</p> <ul style="list-style-type: none"> ÿ No smoking in the home while the carer is engaged in active care-giving responsibilities ÿ No smoking in the car while the carer is engaged in active care-giving responsibilities ÿ The external area used for smoking does not contaminate the internal environment of the home ÿ Cigarette butts are disposed of safely, with ashtrays not accessible to children 	<ul style="list-style-type: none"> · Secure storage of cigarette lighters and matches

Appendix 1

Factors	Standards	Issues to consider (not exhaustive)
Sleeping arrangements and privacy	<p>Sleeping arrangements for a child must be age appropriate and meet the child's individual needs, including when a child shares a bedroom.</p> <p>The following are the details of the child's bedroom:</p> <ul style="list-style-type: none"> ÿ Own bedroom ÿ Shares a bedroom with ÿ Space for appropriate furniture and storage ÿ Privacy and safety available for the child ÿ Space to lock or secure belongings 	<ul style="list-style-type: none"> • Are there enough beds? • Do beds and cots comply with Australian safety standards? • Is the linen clean and appropriate to the climate? • Are infant sleeping arrangements in line with SIDS safe sleeping recommendations?
Equipment and furniture	<p>All equipment and furniture used by a child must be safe, stable and appropriate and must comply with Australian safety standards where they exist (information can be sourced from www.consumer.vic.gov.au > <i>Banned & Regulated Products > Toy and Nursery Safety Line</i>).</p> <ul style="list-style-type: none"> ÿ Space and opportunity for play indoors and outdoors ÿ Cots, high chairs, prams, pushers and other relevant equipment used for infants and toddlers are safe and stable and comply with Australian safety standards ÿ Furniture, toys and recreational equipment are safe and stable ÿ The sandpit has a cover ÿ Play equipment is appropriate for the age of the children the foster carer is wanting to care for ÿ Toys or objects that are unsuitable for a younger child are able to be safely stored out of their reach ÿ The top bunk be is fitted with a safety rail 	<ul style="list-style-type: none"> • Are bunk beds safe and used age appropriately? • Are there any concerns about the outdoor play equipment including trampolines and swings? • Is the play area safe from cars reversing out of the driveway?
Hazardous and dangerous materials	<p>CSOs will ensure that hazardous or dangerous materials in a carer's home, including any materials that may be used as inhalants, will be securely stored and will not be accessible to children.</p> <p>Safe storage of:</p> <ul style="list-style-type: none"> ÿ Utensils and sharp knives ÿ Dangerous materials, garden chemicals, cleaning fluids, medicines and alcohol ÿ Machinery and other equipment ÿ Aerosol and toilet tablets (not stored next to a toilet) 	<ul style="list-style-type: none"> • The backyard, garages, sheds • Are electrical and gas appliances including heaters and barbecues safe?

Appendix 1

Factors	Standards	Issues to consider (not exhaustive)
Fire safety	<p>CSOs will comply with the most current departmental fire risk management guidelines to ensure children are appropriately protected from the risk posed by fire (refer to the Funded Agency Channel at http://www.dhs.vic.gov.au/facs/bdb/fmu/service-agreement/5.departmental-policies-and-procedures/5.1-fire-risk-management).</p> <p>The carer's home must be fitted with smoke detectors and, where the CSO considers appropriate, fitted with fire blanket and fire extinguishers.</p> <ul style="list-style-type: none"> ÿ Smoke detectors installed and working ÿ Doors and windows can be easily opened in the event of fire ÿ Fire blanket and fire extinguisher is fitted (as per CSO policy) ÿ An appropriate fire evacuation plan is in place ÿ There is safe storage of matches and lighters ÿ Open fires have fire guards fitted 	<ul style="list-style-type: none"> • Refer to the CSO policy on fire risk management. • Is this a bushfire-prone area? Refer to www.cfa.vic.gov.au. • Is the evacuation plan practiced and reviewed on a regular basis?
Vehicles	<p>Carers' vehicles must be registered and bolts for seat restraints must be fitted correctly.</p> <p>All children under 12 in foster care are required to sit in the back seat of a vehicle. All car seats used by a child must be fitted correctly, age appropriate and meet Australian safety standards. See http://www.vicroads.vic.gov.au/Home/SafetyAndRules/SaferVehicles/ChildRestraints/</p> <ul style="list-style-type: none"> ÿ Bolts for seat restraints are correctly fitted by an authorised service ÿ Sufficient room and a seatbelt is available in the family vehicle for the extra child ÿ The vehicle is registered and roadworthy ÿ The vehicle is insured ÿ A first aid kit is available in the vehicle 	<ul style="list-style-type: none"> • Does the carer have a current driver's licence?

Appendix 1

Factors	Standards	Issues to consider (not exhaustive)
Fencing	<p>Perimeter fencing on a carer's property must restrict a child's access to hazards, such as access to roads. Fencing for swimming pools (including spas) must comply with relevant legislation and not prove a hazard for children (www.buildingcommission.com.au > Swimming Pools & Spas or contact your local council for the current guidelines). Access to other waterways, dams, creeks, rivers, ponds and water features must not prove a hazard for children. It is acknowledged that this will require careful consideration by CSOs for carers living on farms or large properties. Where completely restricted access to waterways is impracticable, carers will be required to provide vigilant supervision of children.</p> <ul style="list-style-type: none"> ÿ Play areas are safely fenced ÿ Fencing for pools and spas complies with relevant legislation ÿ Access to other waterways, rivers, creeks, ponds, dams, farm-effluent ponds and water features do not present a hazard for children ÿ Gates can be locked and secured 	<ul style="list-style-type: none"> • Is all fencing secure?
Pets or animals	<p>Pets or animals kept by a carer must not present a risk to children in a placement. The CSO must assess where pets and animals must be kept in areas not accessible to children.</p> <ul style="list-style-type: none"> ÿ Appropriate and hygienic feeding, sleeping and waste disposal for pets or animals ÿ Fish tanks placed appropriately according to the age of the child ÿ Pets or animals kept by a carer do not present a risk to children in placement ÿ Carers have the capacity to secure animals away from children if required 	<ul style="list-style-type: none"> • Are dogs a restricted breed or have they been declared dangerous or menacing?
Firearms	<p>Carers who have a firearm must comply with relevant legislation (www.legislation.vic.gov.au > Acts > Firearms Amendment Act 2007 or contact your local police station for relevant guidelines) in relation to safe storage of firearms and cartridge ammunition and must have a current firearms licence, which has been viewed by the CSO.</p> <ul style="list-style-type: none"> ÿ Carer has a current firearms licence, which the assessor has seen ÿ Firearms and cartridges are adequately stored in separate lockable locations 	<ul style="list-style-type: none"> • Are all firearms registered and within the categories listed on the firearms licence? • Are spear fishing guns, crossbows and other dangerous sporting equipment stored securely?

Appendix 2: Kinship care annual review tool

Kinship care 12-month placement review

A formal review of long-term kinship care arrangements for children/young people – Complete in consultation with the extended family and, where appropriate, with the relevant kinship care placement provider.

The kinship care placement review is designed to assess issues such as attachment and bonding, nurturing and the extended families' commitment to the kinship care placement.

The aims of the kinship care placement review are:

1. to assess if the placement is meeting the child/young person's safety, stability and development needs
2. to identify what supports might be required to maintain the placement.

The review may also be used as an opportunity to update information requested in Part A and Part B of the kinship carer assessment report.

A copy of Part A and Part B of the kinship carer assessment report must be read before completing this review. A copy of all reports should be placed on the hard copy of the child/young person's file.

Within 12 months of the date of the child/young person's placement with their kinship carer(s), and every 12 months thereafter, for so long as the child/young person remains a client of Child Protection, Child Protection or the contracted CSO (where applicable) is responsible for reviewing the progress of the kinship care placement and stability plan for the child/young person.

Kinship care 12-month placement review

1. Placement review

Child protection worker name		Child protection region	
Community kinship care service		Community kinship care service worker name	
Placement review compiled by		Review dates	
Persons interviewed			
Other sources of information			
Is an interpreter required to help complete this assessment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name and contact details of interpreter <i>if applicable</i>	
Next court hearing dates			

2. Placement history

- (a) When did the current placement commence?
- (b) During the past 12 months, what has been the frequency and type of contact that Child Protection has offered:
- (i) the child/young person
 - (ii) the carer(s)
 - (iii) the mother
 - (iv) the father
 - (v) extended family
- (c) During the past 12 months, what has been the frequency and type of contact that the kinship care service (if applicable) has offered:
- (i) the child/young person
 - (ii) the carer(s)
 - (iii) the mother
 - (iv) the father
 - (v) extended family
- (d) Prior to this current placement, did the child/young person have any other out-of-home care placements? If, yes, how many and with whom? Yes No

(e) During this current placement, was the child/young person ever re-unified with their parent(s)? Yes No

If yes, how many re-unifications occurred and when?

(f) Has the kinship carer(s) been given details of the child/young person's placement history? Yes No

If no, why not?

Any additional comments regarding placement history:

3. Review of people in the household

3.1 People in the household (if the property where the child/young person will reside includes an on-site bungalow or caravan, include any tenant(s), lodger(s) or boarder(s) in the criminal record check (only complete if the household makeup has changed or if there is a new tenant, lodger or boarder).

Person in the household	Sex	DOB	Aboriginal or Torres Strait Islander	Relationship to child/young person	Will the person provide care to the child/young person? (*such as babysitting, transport, help with homework) 4(YES/NO)

If a new primary kinship carer is identified, a comprehensive kinship care assessment, (kinship care assessment Part B), needs to be completed with this carer.

CRIMINAL RECORD CHECK

Information of police check requirements is available online through the Child protection policy and practice manual advice no. 1524: Criminal records check.

(a) Have all new carers, household members or overnight visitors been interviewed for suitability? Yes No

(b) Has a criminal record check been undertaken on any new carer(s) and on new household members aged 18 years or older who reside in the house or sleep there overnight? Yes No

(c) Has the child/young person been residing with the carer(s) for three years or more? Yes NO

If yes, a new criminal record check needs to be undertaken on the carer(s) and on all household members aged 18 years or older who reside in the house or sleep there overnight.

(d) Have any criminal convictions been identified in the criminal record check? Yes No
If yes, explain:

Refer convictions identified via the criminal records check to the regional director through the child protection manager and the community care manager or equivalent. The placement must have the Regional Director's approval to proceed. All category 1 offences must have the Executive Director's

⁴ Not everyone who resides in the household will necessarily be one of the child/young person's carers. Those who will play a carer role need to be clearly identified.

approval for the placement to proceed.**4. CRIS record and home and environment check**

As a matter of good practice, the carer(s) and household member(s) should be informed that Child Protection will be checking its records.

(a) CRIS check on any new carer or household member reviewed on:
Refer to Q 2 in Part A

(b) Home and environment check reviewed on:
Refer to Q 4 in Part A

5. Current living arrangements and access plan

(a) Contact/visitation with parents, siblings, grandparents and other extended family members:

With whom	Number of visits in the past 12 months	Method (such as supervised, location)
-----------	--	---------------------------------------

Comments (such as quality, difficulties, safety concerns)

With whom	Number of visits in the past 12 months	Method
-----------	--	--------

Comments (such as quality, difficulties, safety concerns)

With whom	Number of visits in the past 12 months	Method
-----------	--	--------

Comments (such as quality, difficulties, safety concerns)

(Add additional lines as required)

(b) Are there any family members who the child/young person was close to who have not had contact with the child/young person? If so, who? Why has there been no contact? Is action required?

(c) What are the attitudes of the child/young person, parent(s), carer(s) and extended family about the child/young person's living arrangement and current contact plan?

(i) Child/young person

(ii) Mother

(iii) Father

(iv) Carer(s)

- (i) Child/young person
- (v) Extended family (specify who)

6. Interactions and family relationships

- (a) What have been your observations of the interaction patterns between:
- (i) The child/young person and his/her mother
 - (ii) The child/young person and his/her father
 - (iii) The child/young person and his/her carer(s)
 - (iv) The child/young person and the extended family (including siblings)
 - (v) The child/young person and household members and regular visitors
- (Include the mood, attitudes and behaviour the individuals display towards each other.)

(b) Who does the child/young person feel closest to now? How can you tell?

(c) Does the child/young person have any problems or difficult relationships in the household? Explain.

7. Interactions and family relationships

7.1 Best interests

- (a) Is the ongoing placement of the child/young person with the kinship carer(s) consistent with the agreed case plan for the child/young person, and will it be in the best interests of the child/young person? Yes No

Comments:

7.2 Cultural connectedness

(a) How have the parent(s), carer(s) and extended family been helping the child/young person maintain his or her cultural identity?

(b) During the past 12 months, what child/young person's memorabilia has been collected by the carer(s), parent(s) and extended family?

- (i) Who is safely storing this information for the child/young person?

7.3 Health

- (a) Have any additional health issues arisen since the comprehensive assessment was completed? Yes No

Current health:

- (i) Medical/physical Yes No

Comment on status:

- (ii) Behavioural/developmental needs Yes No

Comment on status:

(iii) Emotional needs
Comment on status:

Yes No

(iv) Mental health
Comment on status:

Yes No

(b) What is the carer(s) understanding and response to the child/young person's health needs?

(c) What assistance (if any) is needed to support the carer(s) to meet the child/young person's health needs?

For more detailed guidance on health issues that may need to be addressed see Looking After Children record 'Child/young person's care and placement plan'.

7.4 Education

(a) How is the child performing at school, both academically and socially?

(b) Have any additional educational issues arisen since the comprehensive assessment was completed?

Yes No

(i) Child/young person's perspective

(ii) Carer(s) perspective

(iii) School's perspective

(c) If learning, behavioural or special needs have been identified, comment on what the child/young person's education support plan is and how the childcare/school and carer(s) have been supporting the child/young person.

7.5 Sport, music and recreation

(a) Is the child/young person involved in any sporting, musical or recreational activities? Explain what activities the child/young person is involved in. If the child/young person is not involved in any activities, comment on what support the carer(s) and the support services can provide to help the child/young person's engagement with sport, music and recreational activities.

Yes No

8. Carer(s)

(a) How is the carer(s) coping with the care of the child/young person? (Both from the carer(s) perspective and from the agency/Child Protection's perspective)?

(b) During the past 12 months, has there been a change in the kinship carer's circumstances?

Yes No

If yes, provide details about the implications these change of circumstance might have for their role as a carer:

- (c) How does the carer(s) describe his or her attachment and relationship with the child/young person?
- (d) What three words would the carer(s) use to best describe the child/young person's temperament/personality? (Ask for at least one example that illustrates what they mean.)
- (e) What gives the carer(s) most satisfaction and joy about their relationship with the child/young person?
- (f) What (if anything) does the carer(s) wish they could change about their current relationship with the child/young person? *Imagine if the placement was going beautifully, what would be different? How/what would you notice?*
- (g) Does the carer(s) feel that their relationship with the child/young person has changed over the past 12 months? If yes, how?
- (h) Ask the carer(s) to tell a favourite story about the child/young person (something that has happened during the past 12 months). What do they like about this story?
- (i) Ask the carer(s) to look ahead towards the next 12 months, what do they think will be the most difficult time in the child/young person's development? How might the carer(s) be able to help the child/young person?
- (j) Are there any experiences that the child/young person has had in the past 12 months that the carer(s) feels may have set him or her back?
- (k) What has the carer(s) learnt to do 'more of' with the child/young person? What has the carer(s) learnt to do 'less of' with the child/young person? What is the carer(s) most proud of? What do they think the child/young person is most proud of?
- (l) What impact has the placement had on the carer's immediate family?
- (m) What impact has the placement had on the carer's relationship with their extended family?
- (n) How has the carer's relationship changed with the birth parents?
- (o) How does the carer think the child/young person feels about their birth parents and about the placement?
- (p) Give details of any carer's support needs identified that may not be met by the current placement agreement.

9. Working relationships

- (a) What is the carer's working relationship with the kinship placement support agency and Child Protection (both from the carer's perspective and from the agency/Child Protection's perspective)?

- (b) What kinship resources and agency services has the carer(s) accessed since the child/young person was placed with them? Determine if other referrals have been made that were not used, and whether the family needs help to engage with these services.

10. Finance

- (a) Is the carer(s) experiencing any financial pressure? If so, what support can be offered?

- (b) What financial concerns does the carer(s) have for the next 12 months?

Summary and analysis

List the benefits/strengths of this placement known at this time:

List the risks/vulnerabilities and stress points known at this time:

(1) Does a specific weakness or risk make the placement unsuitable? Yes No

Comment:

If yes, does this need further investigation? Yes No

(2) Are the above benefits greater than the stresses/risks in the long term (next 12 months)?

Yes No Possibly

Comment:

If YES to (1) or NO/POSSIBLY to (2) , speak to your team leader or a CPW4 to seek advice from the unit manager and/or principal practitioner to determine if further investigation is required, if the placement is approved, or whether the assessment suggests that the placement is unsuitable.

LIST the resources required for the placement TO CONTINUE, and who will provide these:

CHILD/YOUNG PERSON	
CARER	

ONGOING PLACEMENT APPROVED / NOT APPROVED (CIRCLE ONE)

Signed:

Child protection worker

Team leader / CPW4

Date:

Signed:

Child protection unit manager

Family group convenor
(If applicable)

Date:

Glossary

Aboriginal:	A person of Aboriginal descent. The term Aboriginal within this document includes Aboriginal and Torres Strait Islanders.
Aboriginal Child Specialist Advice and Support Service:	This refers to the service specifically funded by the department to provide an Aboriginal perspective of risk and good care for all Aboriginal children who have been notified to Child Protection. The ACSASS is a funded service that carries out the operational roles and responsibilities and obligations of the Victorian Aboriginal Child Care Agency (VACCA) under section 2 of the protocol between the department and VACCA.
Aboriginal kinship care:	Aboriginal kinship care is provided by relatives or friends for an Aboriginal child who cannot live with their parents, where Aboriginal family, community and Aboriginal culture are valued as central to the child's safety, stability and development.
Babysitting:	Babysitting is considered occasional child minding and is usually for a period of hours at a time. Babysitters are not formally assessed and approved carers, and are not eligible for carer reimbursement. The frequency, duration and assessment of the suitability of the babysitting arrangements will be determined by the carer and CSO in conjunction with the principles of the <i>Guidelines for overnight stays for children and young people in out-of-home care</i> .
Best interests framework:	The <i>Best interests framework</i> presents the best interests principles in a coherent framework to assist professionals to apply the principles in their day-to-day practice.
Best interests principles:	The best interests principles apply to the Children's Court, Child Protection and CSOs operating under the Children, Youth and Families Act. The principles are specified in section 10. The Children, Youth and Families Act provides that action must be taken to protect a child from harm, protect their rights and promote their development in age-appropriate ways. From this foundation additional consideration must be given to supporting and assisting families to keep children safe and meet their needs, promoting children's stability and promoting a child's cultural identity.

Care and placement plan (care plan): A care and placement plan (or care plan) records the detailed day-to-day arrangements for the care of the child. It identifies how their long- and short-term needs will be met and sets out who must do what and by when in order for the child's needs to be met while in placement.

The purpose of a care plan is to ensure all children in out-of-home care have a clearly developed plan that addresses their needs and all parties concerned with the care of the child are clear about what they are expected to do to achieve the plan. The care plan will be developed by the care team, will be lead by the CSO and is consistent with and a component of the case plan.

Care and transition plan: The *Looking After Children* care and transition plan (used instead of a care and placement plan) is developed and updated by the care team for children aged 15–18 years. This plan aims to capture the aspirations, individual needs and supports required for children as they transition into adulthood. It aims to prepare children to the best of their abilities for leaving care and for the expiry of a Children's Court order.

Care team: The composition of a care team will vary depending on the specific issues and needs of the child and family; however, it will always include the CSO worker, child protection practitioner, the child's case manager, the child's carer and parents (as appropriate).

The care team shares responsibility for assessment, planning and care. The members of the care team implement the tasks within the care plan. The child may have age and developmentally appropriate input into decisions.

Carer: Carers are approved volunteer foster and kinship carers who care for children in their own home.

The term 'carer' used in the program requirements may refer to one or more adult members of the household.

Carer register: Section 80 of the Children, Youth and Families Act requires the department to keep a register of out-of-home carers. It requires CSOs to ensure all foster and family options carers that are assessed and approved as suitable are entered and removed from the carer register within the legislated timeframes.

Carer reimbursement:	Carer reimbursements provide a financial contribution towards the ordinary costs associated with the care of a child. The reimbursement is not considered a 'payment' for being a carer and is not a source of income. Carer reimbursements are designed to contribute to (but are not limited to) household goods and services, food, transport, fuel, health and educational needs and personal care items (clothing, pocket money, gifts and entertainment).
Carer reimbursement helpdesk:	The carer reimbursement helpdesk is responsible for Statement of values and principles processing reimbursements once a request has been approved. Staff and carers may contact helpdesk staff on 1300 552 319 for queries concerning payment start and cease dates, special allowances, and amounts due. Helpdesk staff are not able to make decisions about eligibility or increasing reimbursement amounts.
Case manager:	This is the person allocated the primary responsibility of overseeing implementation of the child's case plan direction, goals and tasks. This can be either a departmental or CSO employee.
Case plan:	<p>The case plan is the formal plan endorsed during a statutory case plan meeting, which sets out general and specific goals to be worked towards for the child in the coming year.</p> <p>The case planner is an employee of the department to whom case planning responsibility has been delegated. Such employees are typically employed at a child protection unit manager level or above.</p>
Child:	A child or young person aged 18 years or younger who is residing in a home-based care placement.
Child Protection:	Statutory child protection services delivered by the department, in accordance with the Children, Youth and Families Act.
Child protection system:	The system of services provided to protect children from the risk of abuse or neglect. This includes services delivered by the department, CSOs and other agencies and professionals.
Children, Youth and Families Act 2005:	Victorian legislation that governs the way the Children's Court, Child Protection and community-based services make decisions in relation to the care of children.

Client:	Any child who resides in a home-based care placement. The majority of children referred to home-based care are the subject of protective services intervention. A small percentage of children enter the system on a voluntary basis subject to a child care agreement.
Collection notice:	<p>A collection notice (or privacy statement) must be included on every form where information is collected about an out-of-home carer. The collection notice informs prospective and current carers that the information they provide, including personal information, may be disclosed to the department if required. The collection notice should be tailored to reflect the specific purposes for which the information is being collected. For consistency with the <i>Information Privacy Act 2000</i> a collection notice needs to include information about:</p> <ul style="list-style-type: none"> · the purpose for which information is being collected · the consequence if information is not provided · the individuals or organisations (including the department) to whom information is likely to be disclosed · any law that requires the information to be collected · the identity of the organisation, who to contact to access the information, and the applicant's right to access the information.
Community service organisation (CSO):	A registered non-government organisation funded by the Department of Human Services to deliver home-based care (foster or kinship care) services.
CRIS:	The Client Relationship Information System is the electronic client and case record management system used by Child Protection and Disability Services and by CSO staff with case contracting responsibilities.
CRISSP:	The Client Relationship Information System for Service Providers is the electronic client and case record management system used by all CSOs providing out-of-home care.
Cultural competency:	Cultural competence is a set of behaviours, attitudes and policies that come together in a system, organisation or among professionals to enable the system, organisation or professionals to work effectively in a cross-cultural situation.
Cultural safety:	An environment that is welcoming, safe and respectful of a child's culture and identity.

Cultural support plan:

The Children, Youth and Families Act requires a cultural support plan to be developed for each Aboriginal child subject to a guardianship to the Secretary order or a long-term guardianship to the Secretary order.

Good practice is that a cultural support plan should be developed and continually reviewed for all Aboriginal children placed in out-of-home care, whether placed with Aboriginal carers or non-Aboriginal carers, to ensure the maintenance of the child's connections to their family, community and culture.

A cultural support plan addresses:

- the identity of the child's traditional Aboriginal community
- the continuing efforts to identify a suitable placement within the child's extended family or Aboriginal community
- the involvement of the child's family and extended family in cultural support, placement planning and decision making
- the maintenance of contact between the child and members of their family, extended family and community
- establishing or maintaining links with Aboriginal services
- ensuring the child's participation in cultural and community events.

Custodian (custody):

A legal custodian is responsible for the care of the child. When a custody to the Secretary order is made, the department is the legal custodian of that child and guardianship rights remain with the parents.

The department:

The Department of Human Services.

Disability:

Disability in a person is defined in the *Disability Act 2006* as:

- a) a sensory, physical or neurological impairment or acquired brain injury or any combination thereof which –
 - (i) is, or is likely to be, permanent; and
 - (ii) causes a substantially reduced capacity in at least one of the areas of self-care, self-management, mobility or communication; and
 - (iii) requires significant ongoing or long-term episodic support; and
 - (iv) is not related to ageing; or
- b) an intellectual disability; or
- c) a developmental delay.

Disclosable record: In Victoria, police have an information release policy that governs what information is released in a police check. The release of information may take into account the age of the police record, the purpose for which the information is being sought and the relevance of the criminal history. This is called the disclosable record. Disclosable records include all court outcomes that are findings of guilt.

Any disclosable records, court outcomes, outstanding charges or other information gained from a police check will be a key factor in relation to assessing risk to a child. An adverse police check result does not necessarily preclude a person from becoming a home-based carer; however, the assessment process will need to proceed in accordance with departmental police check policies.

Family options (alternative family placement)

These placements are funded by Disability Services and are home-based arrangements with an alternative family for children with a disability who are unable to be cared for by their families.

Foster care: Foster care is the temporary care of a child within a home-based setting by an accredited, trained and registered foster carer. Foster care includes therapeutic foster care and adolescent community placement programs.

Foster carer: Foster carers are volunteers who provide care for children in their own home. The term 'foster carer' used in this document may refer to one or more adult members of the household who have been assessed and trained, CSO panel approved and registered to provide foster care in Victoria.

Guardian (guardianship): A legal guardian is responsible for all decision making regarding a child. When a guardianship to the Secretary order is made, the department is responsible for all decision making in relation to the child in the way that a parent is. The person with the day-to-day care of a child (a carer) makes routine decisions on a daily basis in keeping with the broad case planning goals for the child.

Home-based care: The term 'home-based care' in the context of these standards refers to care provided by registered foster carers or kinship carers (statutory contracted arrangements) in their own homes for children unable to live at home due to risk of abuse and neglect.

Kinship care:

Kinship care is care provided by relatives or a member of a child's social network when a child cannot live with their parents. Statutory kinship arrangements occur as a result of Child Protection intervention and a subsequent decision being made to place a child with relatives or a friend. This may involve an order made by the Children's Court. Private kinship care (sometimes called 'informal' or non-statutory' kinship care) describes those arrangements where children are cared for by relatives or friends without any Child Protection intervention.

These program requirements are relevant for statutory kinship care arrangements that are case managed and case contracted by a CSO.

Kinship carers:

Kinship carers are relatives or members of a child's social network who provide care for children in their own home. The term 'kinship carer' used in this document may refer to one or more adult members of the household who have completed a pre-placement assessment and approval by Child Protection.

Life story work:

Life story work or 'life books' ensure information about a child's life prior to out-of-home care is readily available. Life story work then continues to record each child's 'story' while they are in care. Life books can take a range of forms including photo albums, folders, professionally published books, DVDs, videos or treasure boxes.

Children, carers, family members and workers will collect information, photographs, certificates and mementos and will record experiences that form a child's life story. Life story work is not a one-off activity but will continue until the child leaves care.

Natural justice:

The principles of natural justice concern procedural fairness and aim to ensure a fair decision is reached by an objective decision-maker.

Our Carers for Our Kids:

Our Carers for Our Kids is the pre-service training package for prospective Aboriginal and non-Aboriginal foster care applicants who apply to provide foster care of Aboriginal children. This package uses a selection of Aboriginal family stories to highlight how foster carers can provide safe and stable placements that meet the needs of Aboriginal children. *Our Carers for Our Kids* provides a Victorian Aboriginal equivalent to *Shared Stories Shared Lives Victoria*. The course consists of eight modules and complements and provides the context

for using the *Step by Step Aboriginal assessment tool*.

Out-of-home care:

Out-of-home care includes kinship and foster care, residential care and lead tenant arrangements.

Police check:

A police check is a mandatory screening mechanism required by the department and CSOs prior to engaging a home-based carer or a staff member. A police check may also be referred to as a police record check, a criminal records check or a criminal history check, and can be national or international. The outcome of the police check will be considered as part of a suitability assessment of the applicant.

Policy:

A framework of principles that guides decision making and activity.

Procedure:

Written prescriptions of behaviours.

Respite care:

Respite care is the time-limited, overnight placement of a child away from their primary carer. Respite care is formally arranged by the department, by CSOs with contracted case management in consultation with the department, or by CSOs in the case of a voluntary child care agreement. Respite carers are formally assessed and approved carers and are eligible for carer reimbursement.

Staff:

A paid worker (full time, part time or casual) employed by a CSO. This includes workers employed via an employment agency.

Shared Stories Shared Lives Victoria:

Shared Stories Shared Lives Victoria is the mandatory pre-service training course for all prospective foster carers (including adolescent community placements) in Victoria. The course consists of eight modules and complements and provides the context for use of *Step by Step Victoria*.

Stability:

Stability is a core dimension for considering a child's best interests. A child experiences stability through positive connections to their parents or other primary carers, family, friends, school, community and culture. These connections are made by developing and maintaining a child's key relationships through participation in the normal contexts of school, community and culture. All children need stability to thrive, develop and learn. Research shows stability is a key factor in building resilience in children.

Stability is the concept used to summarise the cluster of considerations referred to in the Children, Youth and Families Act for determining the best interests of a child, in addition to the need to protect

a child from harm, to protect the child's rights and to promote healthy development.

Stability plan:

A stability plan is a component of a formal case plan that outlines how a child will receive continuous, stable care away from home. A stability plan for an Aboriginal child must demonstrate compliance with the Aboriginal Child Placement Principle.

Step by Step Victoria:

Step by Step Victoria is the mandatory competency-based assessment package that includes tools and a clear framework for making assessments of foster care applicants based on evidence of their skills. It provides a systematic way to engage an applicant and guides the assessor to reach an informed decision about the applicant's suitability.

Step by Step Aboriginal assessment tool:

The *Step by Step Aboriginal assessment tool* is the Victorian Aboriginal equivalent of the *Step by Step Victoria* assessment tool. This tool is part of a package that provides a competency-based assessment framework and a systematic way to engage an applicant. The tool guides the assessor to reach an informed decision about the applicant's suitability.

Supervision:

This refers to support, direction and performance monitoring, including teaching, feedback, information provision and accountability functions, typically provided:

- to staff by a senior staff member
- to carers by a CSO worker.

Urgent repairs:

Urgent repairs, as defined in the *Residential Tenancies Act 1997*, means any work necessary to repair or remedy:

- a burst water service
- a blocked or broken lavatory system
- a serious roof leak (water penetrating into the dwelling)
- a gas leak
- a dangerous electrical fault
- flooding or serious flood damage
- a serious storm or fire damage
- a failure or breakdown of any essential service or appliance for hot water, cooking, heating or laundering
- a failure or breakdown of the gas, electricity or water supply
- an appliance, fitting or fixture that uses or supplies water and that is malfunctioning in a way that results, or will result, in a substantial amount of water being wasted

- a serious fault in a staircase (for example, loose treads and loose handrails) or any fault or damage that makes the property unsafe or insecure
- any damage of a prescribed class
- in addition to the above, any fault or damage that makes the property unsafe or insecure is considered an urgent repair.

Volunteer:

Unpaid person who voluntarily donates their time to working for a particular community service organisation.

Reference guide

The following guide provides useful and relevant documents, websites and resource materials on a range of issues.

Aboriginal children and families

Aboriginal child placement principle guide: for child protection and care workers (November 2002) can be found on the department website and the Department of Human Services Victorian Child Protection policy and practice manual:

<http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/reports-publications/aboriginal-child-placement-principle-guide-2002>

<http://www.dhs.vic.gov.au/cpmanual/out-of-home-care/placement-of-aboriginal-children-and-young-people/1432-aboriginal-child-placement-principle>

Aboriginal cultural competence framework (November 2008) can be found on the Department of Human Services website:

<http://www.dhs.vic.gov.au/about-the-department/plans,-programs-and-projects/plans-and-strategies/children,-youth-and-family-services/aboriginal-cultural-competence-framework-2008>

Caring for Aboriginal and Torres Strait Islander children in out-of-home care can be found on the Victorian Aboriginal Child Care Agency website:

<http://www.vacca.org/conferences-reports-and-guides>

Department of Human Services, *Victorian Aboriginal kinship care model: program and funding guidelines* (May 2011).

Protocol between the Department of Human Services child protection service and the Victorian Aboriginal Child Care Agency can be found on the Department of Human Services website:

<http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/dhs-and-victorian-aboriginal-child-care-agency-protocol-2002>

Working with Aboriginal children and families: a guide for child protection and child and family welfare workers can be found on the Victorian Aboriginal Child Care Agency website:

<http://www.vacca.org/conferences-reports-and-guides>

Access

Advice number 1426: *Access* may be accessed via the Department of Human Services *Victorian child protection policy and practice manual*:

<http://www.dhs.vic.gov.au/cpmanual/out-of-home-care/the-placement-process/1426-access>

Best interests case practice model

The *Best interests case practice model – summary guide* 2010 and related resources can be found on the department website and via the Department of Human Services *Victorian child protection policy and practice manual*:

<http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/child-protection/specialist-practice-resources-for-child-protection-workers/best-interests-case-practice-model-summary-guide-2010>

<http://www.dhs.vic.gov.au/cpmanual/best-interests-case-practice/best-interests-case-practice-advice>

Bushfires

The *Department of Human Services 2011–12 bushfire response: clients and services policy* (October 2011) can be found on the Department of Human Services website:

<http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/dhs-2010-11-bushfire-response-clients-and-services-policy>

Carer reimbursement

Queries regarding carer reimbursement *policy-related* matters should be directed to Department of Human Services regional placement coordination units.

Financial queries regarding carer reimbursements should be directed to the Department of Human Services Carer Reimbursement Helpdesk on 1300 522 319.

The *18 years and school attending carer reimbursement policy (Revised 20 February 2012)* can be found online through the Department of Human Services Funded Agency Channel for registered users within funded organisations:

www.dhs.vic.gov.au/fac

Charter for children in out-of-home care

The *Charter for children in out-of-home care*, together with resources to support embedding the charter into practice, can be found at:

<http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/charter-for-children-in-out-of-home-care>

<http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/child-and-youth-placement-and-support/charter-for-children-in-out-of-home-care>

Charter for people in care relationships

For more information on the charter (Victorian) for people in care relationships please visit the Department of Health website:

www.health.vic.gov.au/agedcare/policy/carers

The *Carers Recognition Act 2012* can be found on the Victorian Legislation and Parliamentary Documents website:

www.legislation.vic.gov.au

Child protection policy and practice manual

The Department of Human Services *Victorian child protection policy and practice manual* contains advice accessible to CSOs and may be accessed at:

www.dhs.vic.gov.au/cpmanual

Children, Youth and Families Act 2005

The *Children, Youth and Families Act 2005* can be found on the Victorian Legislation and Parliamentary Documents website:

<http://www.legislation.vic.gov.au>

Department of Human Services Standards

The *Department of Human Services Standards* June 2011 and the *Department of Human Services Standards evidence guide* December 2011 are available for download at:

<http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/department-of-human-services-standards>.

Education

The *Out-of-home care education commitment – a partnering agreement between the Department of Human Services, Department of Education and Early Childhood Development, Catholic*

Education Commission of Victoria and Independent Schools Victoria can be found on the Department of Education and Early Childhood Development website:
<http://www.education.vic.gov.au/region/hume/healthwellbeing.htm#H2N100C2>

The *18 years and school attending carer reimbursement policy (Revised 20 February 2012)* can be found online through the Department of Human Services Funded Agency Channel for registered users within funded organisations:
www.dhs.vic.gov.au/fac

Fire safety

The *fire risk management* policy can be found online through the Department of Human Services Funded Agency Channel within the *Service agreement information kit for funded organisations*:
<http://www.dhs.vic.gov.au/facs/bdb/fmu/service-agreement/5.departmental-policies-and-procedures/5.1-fire-risk-management>

Foster care

Department of Human Services foster care website:
<http://www.dhs.vic.gov.au/for-individuals/children,-families-and-young-people/kinship-foster-and-other-care/foster-care-information>

Home-based care handbook

The *Home-based care handbook (revised edition)* (2007) is available from the Department of Human Services website:
<http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/reports-publications/home-based-care-handbook>

Incident reporting

Critical client incident management instruction (2011), as well as other incident reporting forms and information, can be found online through the Department of Human Services Funded Agency Channel:
www.dhs.vic.gov.au/fac

Inhalant use and alcohol and drugs

Management response to inhalant use guidelines for the community care and drug and alcohol sector can be found on the Department of Human Services website:
<http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/reports-publications/management-response-to-inhalant-use-2002>

The *Chroming, alcohol and drug policy* (February 2002) can be found in the foreword section of the *Management response to inhalant use guidelines for the community care and drug and alcohol sector*.

Kinship care

The *Child protection kinship carer assessment report (Part A, B and C)* and Advice number 1435: *Kinship care and assessment* may be accessed via the Department of Human Services *Victorian child protection policy and practice manual*:
<http://www.dhs.vic.gov.au/cpmanual/out-of-home-care/kinship/1435-kinship-care-and-assessment>

Department of Human Services, *Victorian Aboriginal kinship care model: program and funding guidelines* (May 2011)

Department of Human Services, *Kinship care services: mainstream model – community service organisation provided* (November 2009)

Department of Human Services kinship care website:

<http://www.dhs.vic.gov.au/for-individuals/children,-families-and-young-people/kinship-foster-and-other-care/kinship-care>

Life story work

New South Wales Department of Community Services *Life story work* – an educational DVD (1999). This DVD is available as a component of the *Shared Stories Shared Lives Victoria* foster carer training material.

Looking After Children

Information and documentation for download related to *Looking After Children* can be found on the Department of Human Services website:

<http://www.dhs.vic.gov.au/about-the-department/plans,-programs-and-projects/programs/children,-youth-and-family-services/looking-after-children-in-victoria-lac>

The *Looking After Children* guidelines for disability service providers can be found on the Department of Human Services website:

<http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/looking-after-children-framework-for-disability-service-providers>

National standards

An outline of national standards for out-of-home care: a priority project under the national framework for protecting Australia's children 2009–2020, July 2011.

http://www.fahcsia.gov.au/sa/families/pubs/nat_std_4_outofhomecare/Pages/default.aspx

Occupational health and safety

The *Occupational Health and Safety Act 2004* can be found on the Victorian Legislation and Parliamentary Documents website:

www.legislation.vic.gov.au

The Department of Human Services occupational health and safety information can be found online through the Department of Human Services Funded Agency Channel within the *Service agreement information kit for funded organisations*:

<http://www.dhs.vic.gov.au/facs/bdb/fmu/service-agreement/5.departmental-policies-and-procedures/5.7-occupational-health-and-safety>

Our Carers for Our Kids

Our Carers for Our Kids training material is not available online. Please contact your Aboriginal community controlled organisation foster care program manager for further information.

Participation in activities

Guidelines for consent for participation of children and young people in out of home care in school excursions, camps and other non-school activities (1 March 2008) are available in the Department of Human Services *Victorian child protection policy and practice manual*:

<http://www.dhs.vic.gov.au/cpmanual/out-of-home-care/delegations-and-consents/1469-participation-in-excursions,-activities-and-overnight-stays-with-friends>

Guidelines for overnight stays for children and young people in out-of-home care (1 November 2007) are available in the Department of Human Services *Victorian child protection policy and practice manual*:

<http://www.dhs.vic.gov.au/cpmanual/out-of-home-care/delegations-and-consents/1469-participation-in-excursions,-activities-and-overnight-stays-with-friends>

Peak bodies

Foster Care Association of Victoria is the peak body for Victorian foster carers and foster carers who have converted to permanent care.

www.fcav.org.au

Kinship Carers Victoria is the peak body for all statutory and non-statutory kinship carers in Victoria.

www.kinshipcarersvictoria.org

Create Foundation is the peak body for children in out-of-home care in Victoria.

www.create.org.au/home

The Centre for Excellence in Child and Family Welfare is the peak body for registered community service organisations providing foster, kinship and residential care in Victoria.

www.cfecfw.asn.au

Police checks (criminal history checks)

Advice number 1524: *Criminal records check* may be accessed via the Department of Human Services *Victorian child protection policy and practice manual*:

<http://www.dhs.vic.gov.au/cpmanual/practice-context/child-protection-program-overview/1524-criminal-records-check>

The Department of Human Services *Police records check policy* can be found online through the Department of Human Services Funded Agency Channel within the *Service agreement information kit for funded organisations*:

<http://www.dhs.vic.gov.au/facs/bdb/fmu/service-agreement/5.departmental-policies-and-procedures/5.6-police-records-check-policy>

Policy and funding plan

The *Department of Human Services policy and funding plan 2010–2012* can be found on the Department of Human Services website:

<http://www.dhs.vic.gov.au/about-the-department/plans,-programs-and-projects/plans-and-strategies/key-plans-and-strategies/department-of-human-services-policy-and-funding-plan-2010-2012>

Privacy, confidentiality and communication

Advice number 1403: *Information sharing in out-of-home care* may be accessed via the Department of Human Services *Victorian child protection policy and practice manual*:

<http://www.dhs.vic.gov.au/cpmanual/out-of-home-care/overview-of-placement-of-children-and-young-people/1403-information-sharing-in-out-of-home-care>

For the *Department of Human Services privacy policy* please visit the Department of Human Services website:

<http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/department-of-human-services-privacy-policy>

The *Health Act 1958* can be found on the can be found on the Victorian Legislation and Parliamentary Documents website:

www.legislation.vic.gov.au

Note: Information about HIV and AIDS is governed by a specific provision – section 128 of this Act.

The *Health Records Act 2001* applies to health information, which is broadly defined to include information and opinion relating to physical and mental health, disability and aged care services, and can be found on the Victorian Legislation and Parliamentary Documents website:

www.legislation.vic.gov.au

The *Information Privacy Act 2000* can be found on the Victorian Legislation and Parliamentary Documents website:

<http://www.legislation.vic.gov.au>

The *Charter of Human Rights and Responsibilities Act 2006* can be found on the can be found on the Victorian Legislation and Parliamentary Documents website:

<http://www.legislation.vic.gov.au>

Note: Information about the right to privacy can be found in section 13 of this Act.

Quality of care

The *Guidelines for responding to quality of care concerns in out-of-home care* is the primary reference to be used when a quality of care concern is raised. Please find a copy of these guidelines and other reference material on the Department of Human Services website:

<http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/Guidelines-for-responding-to-quality-of-care-concerns-in-out-of-home-care>

Responding to allegations of physical or sexual assault – departmental instruction can be found online through the Department of Human Services Funded Agency Channel:

www.dhs.vic.gov.au/fac

Record keeping

For further information and advice in relation to record keeping, and the retention and disposal of child protection and family services records please refer to:

Guideline 2: Managing records of outsourced activity 2010, Public Record Office of Victoria

<http://prov.vic.gov.au/government/standards-and-policy/all-documents>

Authority: Retention and disposal authority for records of child protection and family services functions 2009, Public Record Office Victoria can be found on the Public Record Office Victoria website:

<http://prov.vic.gov.au/government/disposal-and-transfer/retention-and-disposal-authorities>

Service agreement (funding and service agreement)

The *Service agreement information kit for funded organisations* can be downloaded from the Department of Human Services Funded Agency Channel:

www.dhs.vic.gov.au/funded-agency-channel/home

Shared Stories Shared Lives Victoria

Shared Stories Shared Lives Victoria training material is not available on-line. Please contact your CSO foster care program manager for further information.

Fact sheet – Shared Stories Shared Lives Victoria and Step by Step Victoria (familiarisation training) and the *Fact sheet – Shared Stories Shared Lives Victoria and Step by Step Victoria (frequently asked questions)* are available on the Department of Human Services website:

<http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/child-and-youth-placement-and-support/step-by-step-user-login-only>

Sudden infant death syndrome

Information on the 'SIDS and Kids safe sleeping' campaign can be found at:

www.sidsandkids.org/safe-sleeping

Specialist practice resources

Specialist practice guides provide advice on information gathering, analysis and planning, action, and reviewing outcomes in cases where specific complex problems exist or with particular developmental stages in children's lives. Current guides include information on child development and trauma, cumulative harm, adolescents and sexually abusive behaviour. The guides are available for download on the Department of Human Services website:

<http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/child-protection/specialist-practice-resources-for-child-protection-workers>

Step by Step Aboriginal assessment tool

The *Step by Step Aboriginal assessment tool* is available online at the Department of Human Services *Step by Step* web page. These resources are available for staff to download and print as required. The site is password protected to ensure the material is only used by staff who have completed the relevant training.

<http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/child-and-youth-placement-and-support/step-by-step-user-login-only>

Step by Step Victoria

Step by Step Victoria material is available online at the Department of Human Services *Step by Step* web page. These resources are available for staff to download and print as required. The site is password protected to ensure the material is only used by staff who have completed the relevant training.

<http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/child-and-youth-placement-and-support/step-by-step-user-login-only>

Transitioning to adulthood (leaving care)

Information related to transitioning to adulthood and leaving care including access to various resources for download can be found on the Department of Human Services website at:

<http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/child-and-youth-placement-and-support/leaving-care>

Advice number 1418: *Planning for leaving care* may be accessed via the Department of Human Services *Victorian child protection policy and practice manual*:

<http://www.dhs.vic.gov.au/cpmanual/out-of-home-care/care-and-placement-planning/1418-planning-for-leaving-care>

Voluntary clients

The Administering child care agreements in voluntary out-of-home care handbook is available on the Department of Human Services Funded Agency Channel for registered users within funded organisations in the resource section:

www.dhs.vic.gov.au/fac

Department of Human Services voluntary care website:

<http://www.dhs.vic.gov.au/for-individuals/children,-families-and-young-people/kinship-foster-and-other-care/voluntary-out-of-home-care>

Working with Children Checks

For all information about Working with Children Checks please visit the Department of Justice website:

www.justice.vic.gov.au/workingwithchildren

Other relevant resources

Victoria's vulnerable children: our shared responsibility directions paper is available on the Department of Human Services website:

<http://www.dhs.vic.gov.au/about-the-department/news-and-events/news/general-news/victorias-vulnerable-children--our-shared-responsibility>