

EVERYDAY

CareSouth

THE ROYAL COMMISSION INTO INSTITUTIONAL  
RESPONSES INTO CHILD SEXUAL ABUSE

CARESOUTH SUBMISSION

*CONSULTATION PAPER, INSTITUTIONAL  
RESPONSES TO CHILD SEXUAL ABUSE IN OUT  
OF HOME CARE*

# Introduction

CareSouth welcomes the invitation from the Royal Commission to submit responses to their *Consultation Paper, Institutional Responses to Child Sexual Abuse in Out Of Home Care*. The inquiry into Out of Home Care has flagged important issues and concerns that are relevant to all organisations practising in this sector. Addressing the issues raised in the *Consultation Paper* will drive progress in supporting the wellbeing of some of the most vulnerable children in our nation; those in need of the state's protection from their birth parent(s).

CareSouth understands the particular vulnerability of children in Out of Home Care (OOHC) to sexual abuse and sexual exploitation. This vulnerability arises from:

- Increased exposure to prior sexual abuse and sexual exploitation in the care environments from which they have been removed.
- Trauma-induced vulnerabilities, such as neuro-developmental delay, impacting on relational skills, language development, sexualised behaviours and regulation of emotional arousal.
- Reduced stable and protective adult relationships, and restricted relational milieus.

In recognition of these vulnerabilities and the increased responsibility which this affords organisations managing OOHC, CareSouth has voluntarily enrolled to implement the Australian Childhood Foundation's Safeguarding Children Accreditation program. CareSouth commenced this program this year, and over the next 2-3 years, will work towards meeting all 7 standards required for accreditation, supporting the development of best practice in preventing institutional child sexual abuse. To our knowledge, we are the second NSW based OOHC organisation undertaking this accreditation, and one of only three OOHC providers across the country. CareSouth also will voluntarily build compliance with the ACCG 'Principles For Child Safety In Organisations'<sup>1</sup> into the development of the policies and processes required for Safeguarding Children accreditation, in order to adopt the highest standards in child safe practice.

Our commitment to protecting children and our experience in the OOHC sector has informed this submission. The following response covers the wide-ranging coverage of the *Consultation Paper* through the following topics:

1. Data collection and Information Sharing
2. Child Safe Organisations
3. Regulation and Oversight
4. Sexual Abuse Prevention
5. Therapeutic Care & Placement Stability
6. Support for Children and Young People & Access to Records

In particular, CareSouth is of the view that Australia's vulnerable children deserve nothing less than best practice in protecting them from harm. In order to achieve this, not only must the findings of the Royal Commission direct social policy reform, but governments at both levels of federation must lead community attitudes by directing sufficient resources to addressing the needs of children in care.

---

<sup>1</sup> Australian Children's Commissioners and Guardians. See *Consultation Paper*, p 81

## ABOUT CARESOUTH

CareSouth is a medium sized NGO operating in southern and south-western NSW (including the border regions of the Murrumbidgee and Riverina). It provides youth, child welfare and disability services, including Out of Home Care (OOHC) Residential and Foster Care. CareSouth also provides Supported Independent Living, a Supervised Contact service for birth parents and siblings of children in OOHC, and a mentoring program for foster care children. It is funded for its Out of Home Care (OOHC) services by the NSW Department of Family & Community Services (FACS).

CareSouth<sup>2</sup> has been operating since 1992. Its foster care program was established in 2000, and expanded in 2012 with the introduction of government policy which transitioned foster carers to NGO management in NSW. CareSouth has been providing a youth homelessness service since its commencement in 1992, Supervised Contact since 2005 and Residential OOHC since 2009. In 2015, CareSouth piloted a unique targeted residential OOHC therapeutic treatment program for extremely high-need children, *Our Place*.

Care South provides and supervises placements for 250 foster care children and has 16 children aged 12-16 living in residential homes. It is an accredited provider under NSW law (Office of the Children's Guardian).

## Data collection and Information Sharing

### DATA

Data collection and shared information are both key issues for the sector. Data collection, when supported by skilled analysis can be an important component in continuous improvement and achievement of outcomes. CareSouth agrees with the Royal Commission that improved data collection is vital if the incidence of institutional sexual abuse is to be monitored, and the outcomes of strategies to reduce this incidence are to be assessed. Data should be collected in a way that enables comparisons across jurisdictions and incorporates all forms of sexual abuse, including as sexual exploitation and grooming.

There are new Software as Solution information collection systems such as CSnet which allow organisations to record, monitor and report on outcomes in a manner which reduces rather than increases caseworker workload.

### INFORMATION SHARING

Although CareSouth operates within an information sharing jurisdiction (NSW), the Consultation Paper notes the limitations of that regime.

In particular, CareSouth's OOHC casework has been hampered by inadequate information sharing between the Department and the organisation, particularly where the Department has information that is relevant to the child's risk of victimisation, or of sexualised behaviours. CareSouth has received many referrals or transfers of care where there are significant information gaps. At times it appears that the

---

<sup>2</sup> Previously ShoalCare

withholding of information relevant to a child's trauma history and behaviours is a cultural issue for the department.

Other sources of information which are not provided to CareSouth are court-ordered assessments (including those pertaining to parental capacity) and historical information regarding issues arising in previous placements.

Where information is shared, timeframes are often too long and impractical. A best practice timeframe for response to information requests is recommended.

It is very difficult for CareSouth to manage risk in the absence of good practice in information sharing.

## Child Safe Organisations

CareSouth is deeply committed to, and understands the importance of, whole-of-organisation involvement in developing child-safe practice. As noted above, a substantial financial commitment has been made by CareSouth to advance this undertaking, through accreditation with the Australian Childhood Foundation's (ACF's) *Safeguarding Children* program. CareSouth is of the view that adoption of Child Safe standards such as those of *Safeguarding Children* or the new Victorian framework should be binding and should be a requirement for all organisations working in Out of Home Care and allied support services (such as Mentoring, Homework Clubs, Camps etc).

In order to be successful, the introduction of a national child safe system requires the establishment of an independent organisation, preferably under Commonwealth law (based on Australia's external obligations to CROC<sup>3</sup>, for example) which would be tasked to develop high standards (at least as high as those required by the ACF), administer processes for accreditation, and to undertake ongoing review and compliance monitoring. Adequate resourcing, bipartisan support and commitment at all levels of government is also required. A process of consensus building and agenda setting, such as that undertaken to develop the National Plan to Reduce Violence Against Women and Their Children, along with a dedicated standing COAG Committee to oversee and steer Child Safe accreditation and other national child protection measures, would support the emergence of a robust system of binding child-safe standards for OOHC. The issue of national standards and nation-wide consistency is developed later in this Submission.

## Regulation and Oversight

### Providers

CareSouth supports national adoption of the model currently in place in NSW, whereby the sector is independently monitored through the Office of the Children's Guardian. Both government and non-government providers must meet the same standards and be subjected to the same oversight. The role of the Ombudsman in complementing the oversight provided by the OCG is also supported. However, CareSouth also supports the expansion of the existing Home Visitor Scheme in NSW, as it provides an additional layer of accountability for organisations involved in OOHC, even if the disclosure rate to Visitors is low.

---

<sup>3</sup> UN Convention on the Rights of the Child

## Carers

CareSouth supports the adoption of a National Carer Register and interjurisdictional Working With Children Checks to assist providers such as CareSouth working in cross-border regions and to protect children against the movement of predators across state and territory boundaries. Such a scheme would require adequate resourcing.

Of concern, however, is the lower standards of screening and oversight for kinship carers. Given the incidence of sexual abuse within families, and the new directions in OOHC policy which promote kinship care above other forms of foster care, this appears to be an area where risk will escalate.

## Permanency

CareSouth is of the view that the new permanency laws in NSW (which support restoration to family) need to be closely monitored for unintended consequences, including restoration of children to families where the risk of sexual abuse is high. Processes for placing a child require adequate assessment time, whether that placement is with a foster carer, guardian, kin or the child is returned to the family. In addition, adequate monitoring and support post-restoration will be necessary to prevent risk.

## Reportable Conduct and complaints

CareSouth supports the existing scheme in NSW and is of the view that this should be adopted by other states and territories. Resourcing of investigators, particularly those working in regional or rural areas must be adequate, however.

# Sexual Abuse Prevention

CareSouth supports the development of targeted educational strategies to assist with the prevention of sexual abuse by informing children about:

- their rights,
- complaints/disclosure avenues,
- protective behaviours and
- predatory and grooming tactics.

In addition, the evidence base needs to be strengthened around the best ways to support both carers and caseworkers working with children who may have been sexually abused and/or who might be at risk of sexually harmful behaviours. Quality research and meta-analyses must be funded to establish best practice in:

- screening and risk assessment for potential sexually harmful behaviours (including child to child sexual abuse),
- training and workforce development needs, and
- therapeutic care and treatment models
- Trauma-informed practice.

The upskilling of services in this area also requires adequate resourcing.

# Therapeutic Care & Placement Stability

## TRAUMA-INFORMED CARE

Children in OOHC are frequently impaired by prior exposure to trauma, including the trauma of sexual abuse. While it is not possible to unpack the varying adverse experiences on mental health and neurodevelopment, it is likely that the conglomerated impact of incidents leading to the child's removal increase their vulnerability to harm caused by experiencing sexual abuse in OOHC. For this reason, trauma-informed therapeutic care is the optimal model for OOHC. However, resourcing, recruitment and capacity issues prevent this standard from being met universally across placements. A program to build capacity for trauma-informed therapeutic care within the OOHC sector would strengthen other prevention and support strategies for children.

Residential care should be funded appropriately so that therapeutic trauma-informed care can be consistently provided, particularly given that children in residential OOHC are usually those most impaired by prior trauma. Adequate funding for trauma-informed care would enable increased pay rates and hence recruitment of skilled, permanent employees and higher retention rates. Similarly, funding models should incorporate the costs of adequate supervision and other strategies for reducing risk of sexual abuse, such as buddy staffing.

Similarly, foster care providers should receive adequate resourcing so that carers are able to receive appropriate support and training to provide trauma-informed care. This may include funding for therapeutic interventions where necessary, including support for recovery and healing from abuse and exposure to domestic violence, as noted in the Consultation Paper (p10). CareSouth agrees that financial support for respite care, childcare, private health insurance and allied health interventions would impact on placement stability and the quality of foster carer. While CareSouth supports the professional development of carers through training and upskilling and supervision, it does not support the introduction of a professional foster care model. There are concerns about the impact of professionalisation on rostering, placement stability, longevity, engagement after the child turns 18 and recruitment.

# Support for Children and Young People & Access to Records

## LEAVING CARE

CareSouth recognises that many people who have been sexually abused in care do not disclose until after they have left care. Leaving Care plans are crucial to support disclosure and should:

- include information about supports for sexual abuse disclosure, such as Bravehearts, Living Well or ASCA<sup>4</sup>.
- include processes in the leaving care conversations with caseworkers to facilitate disclosure (which may include a sensitive, exit-style interview), and
- be compulsory for all funded OOHC providers across Australia.

---

<sup>4</sup> Australian Survivors of Childhood Abuse

Policies and processes within organisations which support post-care disclosures to the organisation should also be developed by all providers, given the lag time in reporting.

## ACCESS TO RECORDS

OOHC providers are guardians of children's life history and this means they have a responsibility to treat this with respect. Children and Young People need to know where they have come from in order to know where they are now and where they can hope to be in the future. CareSouth supports the ongoing work of the Royal Commission in investigating and promoting best practice around record keeping and access to records. Practice necessary to support this includes:

- a) non-judgemental, clear note-taking, and
- b) positive, completed Life Story work.

Whilst CareSouth supports the rights of children to know their history, we also recognise the vulnerability of children exposed to unredacted and often poorly collected records. It is imperative that children, young people and those who have left care are supported by a counsellor with experience in trauma work when they view or receive their files (and afterwards, if this is required). This is particularly important for young people with trauma histories, who may be chronologically 'adult' when they turn 18, but at different stages of cognitive and emotional development.

In practice, CareSouth has found that very few young people wish to view their records. For many, the need to know key events in their lives and the reasons they have been taken into care is sufficient for them. Some caseworkers provide a 'top sheet summary', similar to those used in medical practice around health records, which contains a chronology of key events (including positive events) from 0-18, and which includes a brief summary of the reasons the child is in care. This practice can also assist providers during transfers from other agencies and allows patterns to be reviewed across the placement history.

## Other Issues

### NATIONAL CONSISTENCY & CROSS-JURISDICTIONAL ISSUES

As mentioned throughout this submission, CareSouth supports greater national consistency across key areas related to sexual abuse in OOHC. Predators move across state and territory boundaries, as do carers in cross-border regions. And Australian children, no matter where they are living, deserve the same high standards of protection and support. In particular, national and/or cross-jurisdictional approaches are required in the areas of:

- Information sharing
- Working With Children Checks and registers, and
- Carer Registers.

## Resourcing

Organisations working in OOOHC work in a tight resourcing environment that does not financially support best practice across all the domains addressed by the Royal Commission. Many NGOs are already attempting to provide best practice, without being funded at the levels required to do this. Children in care have high needs across all human services, yet are not funded to receive the support that already

strained public systems cannot provide. Services such as specialised educational services, speech pathology, occupational therapy, trauma and recovery counselling, and mental health interventions are required for many children, including those who may be at risk of sexual abuse while in care. For regional providers in particular, it can be very difficult to resource services addressing children's complex needs, or to trigger timely responses to critical issues by teams such as JIRT in NSW, which is similarly underfunded for regional service provision.

Arguably, the funding required to implement best practice in OOHC service provision is a critical issue for consideration. CareSouth is of the view that the Royal Commission's recommendations need to address this issue; every area of the Consultation Paper has additional resourcing implications for service providers.

It is hoped that the traction gained by public interest in the Royal Commission's work can be used to leverage government commitment to increase funding for the work of the sector to the level that is required to do the best we can to support the growth, wellbeing and future of Australia's young people in care.

## Further Information

For further information about this submission, please contact Karen Wilcox, Manager, Policy & Research, 1300 554 260, [karen.wilcox@caresouth.org.au](mailto:karen.wilcox@caresouth.org.au).