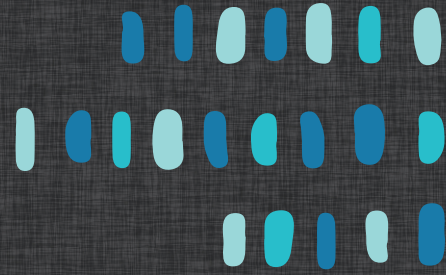


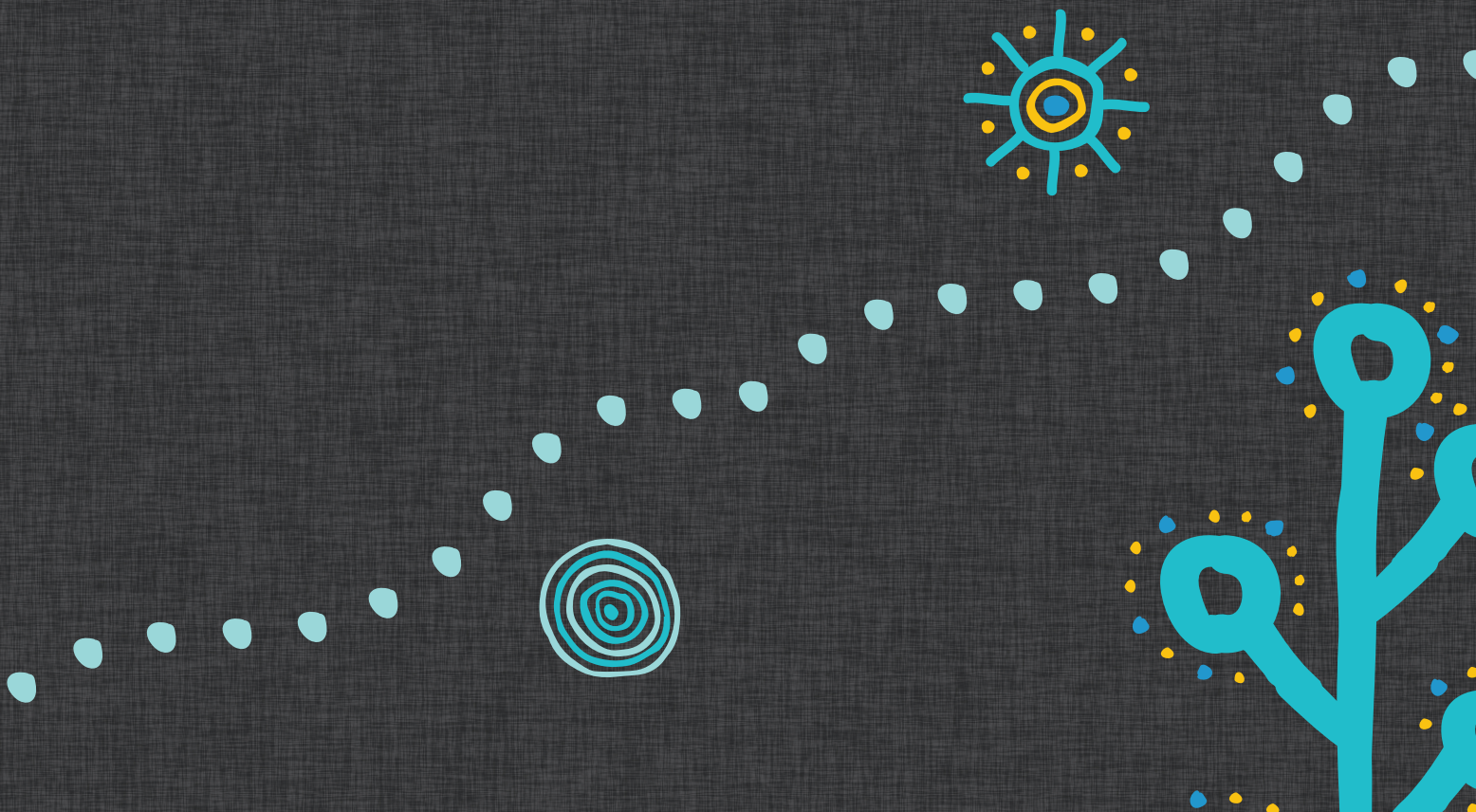


Government of Western Australia
Department of Communities



Better Care, Better Services

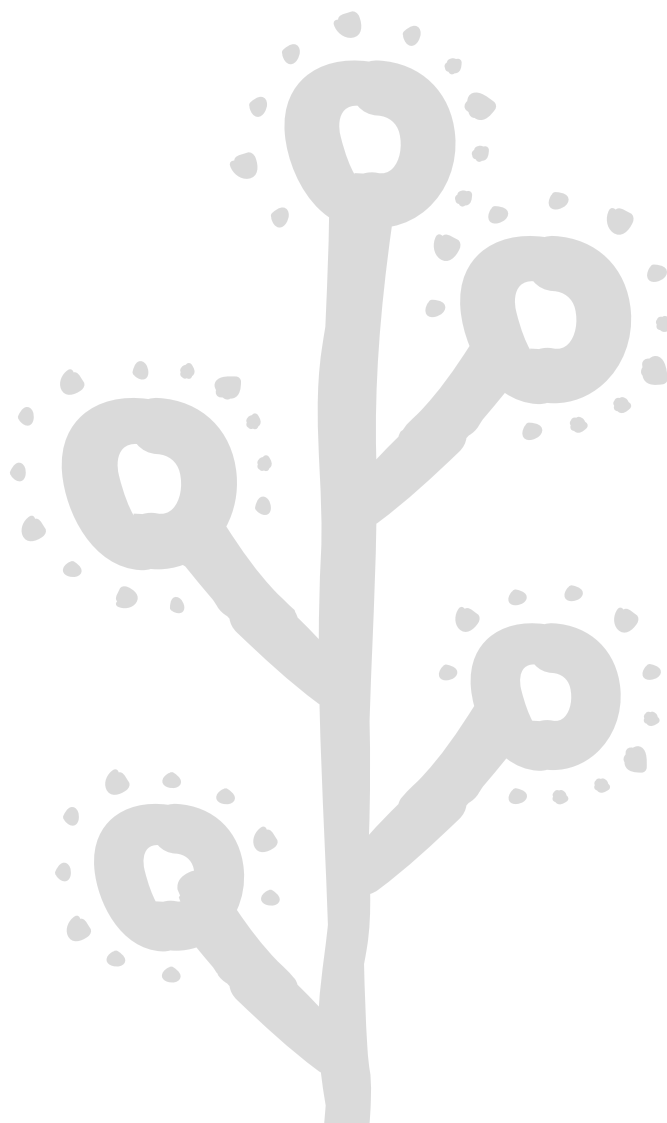
Safety and quality standards for children
and young people in protection and care



Acknowledgement of Country and Peoples

The Department of Communities acknowledges the Aboriginal and Torres Strait Islander peoples as traditional custodians of this land. It pays respect to their Elders past, present, and future.

It recognises the long history of Aboriginal and Torres Strait Islander peoples on this land and acknowledges that the past is not just the past. The past, the present and the future are, as they always are, part of each other – bound together.





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Foreword from the Acting Director General

The Department of Communities' (the Department) *Building a Better Future: Out-of-Home Care Reform in Western Australia*, April 2016, highlighted the need to improve system oversight in order to improve the safety and quality outcomes for children and young people in care in Western Australia.

A key reform action was to review and update the *Better Care, Better Services* Standards (the Standards), as the original standards were developed in 2006. The re-development of the Standards not only had to consider current practice, but also the Department's demographic changes in that time, particularly the increase of Aboriginal children and young people in out-of-home care. Sadly, as of 30 June 2017 54.3 per cent of children and young people in out-of-home care are Aboriginal. This significant overrepresentation of Aboriginal children and young people is an ongoing concern for the Department and has shaped our ambitious reform agenda.

The Standards recognise the importance of the continuous journey in achieving improved outcomes for children, families and communities that have contact with the out-of-home care system. In order to achieve outcomes, safety must be the first priority and as such the Department has included a sole overarching standard dedicated to safety, followed by a set of overarching quality standards.

Additionally, it was recognised that independent oversight of the out-of-home care system was needed, in light of the Department's role in providing, funding and monitoring standards of care. The Parliamentary Commissioner for Administrative Investigations, more commonly known as the Ombudsman, has been identified as the external Government agency that will monitor all organisations (Department and community services sector) that provide out-of-home care services against the safety standards, to improve independent oversight of the services delivered by the Department and community services sector.

To reflect the importance of providing the right services for our changing demographic, a devoted overarching standard prioritising outcomes for Aboriginal children and young people in care has been included. This builds on the Department's commitment to value and respect Aboriginal cultural systems and beliefs.

Listening to the voices of children and young people is vital in developing and growing our out-of-home care systems into the future. A consultation process, through the CREATE Foundation, was undertaken with children and young people who are currently, or have been in, out-of-home care to hear their views. The *Standards of Out-of-Home Care – the voices of children and young people, Western Australia 2017* report, is available on the Department's public website for review. The report includes feedback from children and young people on the draft Standards, hearing from them about what each of the draft standards meant on a practical and day-to-day basis for children and young people, and hearing their thoughts on what needed to be included to effectively measure the out-of-home care services from their unique perspective.

The Standards aim to deliver our shared aspirations with the community services sector, to give children and young people the opportunity they need to thrive into adulthood.

The Department would like to thank and acknowledge everyone who participated in the shared conversations that have informed and steered the development of the safety and quality Standards for Western Australia.

Grahame Searle
Acting Director General
Department of Communities

¹ Pending Government approval and Legislation changes to the *Parliamentary Commissioners Act 1971*



Better Care, Better Services:

Safety and Quality Standards for Children and Young People in Protection and Care.

Introduction

The out-of-home care sector in Western Australia is committed to striving for excellence in the standard of safety and quality responses for children and young people. *The Children and Community Services Act 2004* (the Act) provides the legislative framework for the development of standards for children and young people in care, or where there may be concerns regarding a child's safety. The Act contains a range of objects and principles that must be regarded in administering the functions under the Act.

Foremost of these are the principles that the best interest of the child is the paramount consideration and that the child participates in the decision making process. This means that in performing a function or exercising a power under the Act relating to a child, the considerations of highest priority must be the best interests of the child and child participation. The Act details a number of guiding principles that must be observed when determining the best interests of the child and child participation.

The *Better Care, Better Services* Standards represent only one aspect of an effective quality framework. The sector have a range of internal and external processes to examine all aspects of their service provision and assure the quality of the services they provide. This is done while identifying and implementing opportunities for continuous improvement.

Better Care, Better Services Standards complements legislation and other publications, including:

Children and Community Services Act 2004;

United Nations Declaration on the Rights of the Child 1990;

National Standards for out-of-home care July 2011;

Charter of Rights for Children and Young People in Care 2006;

Commissioner for Children and Young People Western Australia, Child Safe Organisations Guidelines April 2016; and

Royal Commission into Institutional Responses to Child Sexual Abuse, Creating Child Safe Institutions, July 2016.

These documents were drawn on to inform the development of the Standards to provide a contemporary context for working with children and young people in out-of-home care. Further to this the Department has

considered a number of matters raised by the *Royal Commission for Institutional Responses to Child Sexual Abuse* (the Royal Commission). The current Out-Of-Home Care Reform Agenda being implemented will ensure the Department is able to respond to concerns raised by the Royal Commission to improve the safety and overall quality of care provided to children.

The objectives of the Safety and Quality Standards are to:

- protect the children and young people's safety, wellbeing and stability;
- meet the needs of children, young people and their families and deliver positive outcomes;
- provide a guide to best practice;
- increase consumer confidence and expectations, and enhance the sector's image;
- provide consistent policy and process information to all staff and carers within the sector;
- provide a basis for staff and carer training;
- provide a reference model for continuous improvement and evaluation of services;
- provide a vehicle for the measurement of achievement in relation to the Standards; and
- provide a means of satisfying government funding and service accountability requirements.

The Department of Communities has a legislative role in safeguarding and promoting the wellbeing of children, and providing for their protection and care in circumstances where their parents have not given, or are unlikely or unable to give, that protection and care. In recognition of this responsibility, two standards were added to the nine standards in *Better Care, Better Services* that are applicable to the Department of Communities in their child protection and investigative role.

Each category of safety and quality standards contains:

- an overarching high level standard which outlines the intent of the Standard; and
- supporting standards to use as indicators for compliance, and to measure the overarching Standard.

This document is dynamic and will reflect continuous improvement changes over time.



Background

The *Better Care, Better Services Standards* (the Standards) were originally developed in 2006 due to a number of initiatives that commenced to enhance the ability of service providers across the sector to provide the highest safety and quality services to children and young people. The partnership between the Department for Child Protection, as it was known, and the community services sector was formed through a shared recognition that all children and young people in the Chief Executive Officer's (CEOs) care should receive a consistent standard of service that provides for their safety and wellbeing irrespective of where they were placed across the state of Western Australia. The monitoring of the Standards commenced with Department district offices in 2007 and expanded to include community service organisations funded by the Department to provide out-of-home care arrangements for children and young people in 2010.

Work began in 2015 with a consideration of potential stakeholders and potential changes to the independent oversight of out-of-home care. The original Standards were extensively reviewed and redeveloped in 2016 and 2017. This process included consultation with the out-of-home care sector, teams and staff across the Department, children in the CEOs care, and examination of relevant standards in other jurisdictions and sectors.

The Steering Group overseeing this process comprised representatives from the Alliance for Children at Risk; Children's Youth and Families Agencies Association; the Foster Care Association of Western Australia; the CREATE Foundation; Yorganop; and the Department of Communities, Child Protection and Family Support Division. A representative from the office of the Ombudsman was present at Steering Group meetings as an observer to remain independent to the process, except to provide advice where required; their contribution is recognised.

The Working Group began by reviewing a range of overarching themes of what quality care for children and young people looks like, what experience we would like for children and young people in care to have, and how these could be measured. These emerging themes helped inform the Quality Standards and resulting Indicators of Compliance.

The CREATE Foundation undertook a consultation with 25 children and young people with care experience, who provided feedback on what they should receive when in care under the themes of the overarching standards, this feedback is available on the Department's website.

Due to the changing demographics of the Department, extensive consultation occurred with Aboriginal specialist services, including Yorganop, who are the currently funded Aboriginal and Torres Strait Islander out-of-home care service provider. The Department is fortunate to have many points of engagement within the Department and is able to draw on our specialist teams and staff in the Districts who bring a wealth of knowledge and experience of working with Aboriginal families and communities.

Further to this, current out-of-home care service providers were consulted on the draft standards to engage the community service sector and draw on their expertise to ground the standards in daily practice. Representatives from the out-of-home care sector peak bodies were also consulted (and as part of both the Working and Steering Groups) helping to create a collaborative development of the Standards.

The work of the Working and Steering Groups are acknowledged and appreciated. Furthermore, the advice and assistance of the Commissioner for Children and Young People Western Australia is acknowledged, particularly given their valuable contribution to the sector on Child Safe Organisations. The extensive comments, suggestions and input the Steering Group received during the consultation process, while undertaking the review of the Standards, reflected the value placed on the Standards, and was highly regarded during the development of the Standards.



The Standards

SAFETY STANDARD

Organisations provide safe care

QUALITY STANDARDS

- Standard 1** Children and young people are provided with, and experience, stability and consistency during their time in care.
- Standard 2** Children and young people, and those important to them, are continually engaged to participate in planning and decision-making that impacts on their lives and their future.
- Standard 3** Aboriginal children and young people are supported to maintain meaningful connections to their family, community, land, and culture in accordance with the Aboriginal and Torres Strait Islander Child Placement Principle.
- Standard 4** Children and young people's needs are met through individualised assessment and child focused practices, encompassing all aspects of their lives and wellbeing.
- Standard 5** Children and young people are supported to develop their identity and a sense of belonging through their families, friends, culture, spiritual sources, and communities.
- Standard 6** Children and young people are adequately prepared and provided with timely and high-quality support, as they transition out of care and into adulthood.
- Standard 7** Children and young people are supported and empowered to know their rights, raise their concerns, and have these responded to and resolved in a timely manner.
- Standard 8** Children and young people are provided high quality and safe care by well trained and supported staff and carers.
- Standard 9** Organisations are child focused and accountable.

DEPARTMENT OF COMMUNITIES ONLY:

- Standard 10** The Department has a process of clarifying information to determine if action should be taken to safeguard or promote a child or young person's wellbeing.
- Standard 11** The Department undertakes comprehensive assessments of child protection concerns and, if required, takes action to safeguard or promote the child or young person's wellbeing.

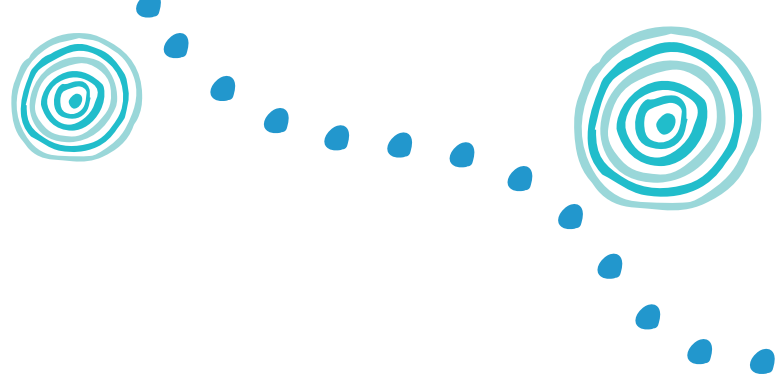


Better Care, Better Services – Safety Standard

ORGANISATIONS PROVIDE SAFE CARE

Indicators of compliance with the safety standard:

1. Children and young people's safety is embedded in the services' leadership, governance, and culture.
 - a) Coherent child safe policies and frameworks are applied in day-to-day practice to address safety concerns and protect children and young people from harm while in care.
 - b) Policies and procedures are child focused, easily accessible and clearly understood by staff, carers, children and young people, and families. Processes are in place for regular reviewing of policies, procedures, and practices.
2. People working with children and young people are suitable and well supported.
 - a) Services comply with the *Working with Children (Criminal Record Checking) Act 2004* and request Department Screening for employees, contractors, volunteers, and students. Services have procedures in place to deal with unsatisfactory screening results (in line with the Department's screening policies). Department screening includes National Criminal Record Checks, Department Client and Child Protection Checks and, as required, International Criminal Records Checks.
 - b) Foster carer applicants are assessed to determine their competency and are approved as foster carers prior to commencing care of children and young people.
 - c) Family and significant other applicants, who have a child urgently placed with them, are assessed against the competencies and are approved as family and significant other carers within six months of the child being placed.
 - d) Services provide staff and carers with ongoing development and training to respond to children and young people's needs and behaviours in a safe and therapeutic way.
3. Children and young people's individualised safety needs are met. Services provide a child safe environment for children and young people, and proactively minimise the opportunity for harm to occur.
 - a) Services ask children and young people about their safety needs and are responsive to these.
 - b) Services provide information to children and young people about risk and safety, and how to protect themselves and others from harm.
 - c) Services deliver trauma informed care and provide therapeutic supports that respond to the complex needs and behaviours of children and young people.
 - d) Services identify and assess risk and protect children and young people who are at risk of harming themselves or others.
 - e) Services mitigate risk in physical and online environments to keep all children and young people in a care arrangement safe.
 - f) Strategies are in place, maintained and reviewed, to support the safety of children and young people in line with their diverse social, emotional, and developmental needs.



Better Care, Better Services – Safety Standard continued

- g) Services meet the cultural needs of Aboriginal children and young people by implementing strategies in the child's culture and identity plan, so that children and young people are culturally safe. This is documented and reviewed at least annually.
 - h) Services document safety concerns for a child or young person in a written safety plan that clearly identifies risk and specific strategies to mitigate the identified risk. The Service is to have a review process for the safety plan.
- 4.** Children and young peoples' views are taken seriously and their concerns are responded to.
- a) Services support children and young people to raise their concerns and exercise their rights via child friendly mechanisms.
 - b) Children and young people have their concerns dealt with in a timely manner and are kept informed of the progress and outcome.
- 5.** Child focused processes exist to respond to critical incidents, standard of care concerns, and safety and wellbeing concerns in care².
- a) Staff and carers have an understanding of what constitutes a standard of care concern, a safety and wellbeing concern in care, and a critical incident.
 - b) Standard of care concerns, safety and wellbeing concerns in care, and critical incidents are reported to the Department in the required timeframe.
 - c) Where a standard of care concern or safety and wellbeing concern in care is raised, services work together to respond in a timely manner to enable the immediate and ongoing safety of the child or young person.
- 6.** Children and young people feel safe and know they have a right to feel safe.

² In accordance with the Department for Child Protection and Family Support and Non-Government Placement Agencies Protocol for Standard of Care and Safety and Wellbeing Concerns for Children in the CEO's Care December 2013.



Better Care, Better Services – Quality Standards

Standard 1

Children and young people are provided with, and experience, stability and consistency during their time in care.

INDICATORS OF COMPLIANCE:

- 1.1** Timely assessment for permanency planning is made³, with parallel planning occurring. Reunification with birth parents occurs, when safe to do so. Where reunification is not possible, children and young people maintain connections in a safe manner with their family, including extended family, and significant others, and in accordance with the child or young person's views⁴.
- 1.2** When planning for permanency, a thorough assessment of the child or young person's overall needs, views, individual circumstances, and best interests occur.
- 1.3** Children and young people are placed in care arrangements with their siblings, unless there are strong grounds for separation, and wherever possible and safe to do so, within their family and community.
- 1.4** At the start of a care arrangement, a referral containing information on the child or young person's immediate and ongoing day-to-day care needs is given to the carer or to the funded CSO. [Information for emergency care arrangements may be limited until a comprehensive assessment is completed.]
- 1.5** Children and young people and their carers are visited by the case manager or key worker within one week of a new care arrangement commencing. Staff are accessible to the child or young person and the carer for support, information, and advice on an ongoing basis.
- 1.6** Children and young people and their carers are provided with support to maintain stability and consistency of care arrangements. Case managers visit more frequently in the early stages of a care arrangement and during critical periods. Early response occurs when any risk to the care arrangement continuity is identified and effective action is taken to support carers and children and young people during these periods.
- 1.7** Children and young people and their families can name and know their case manager and any key workers involved in providing care and services, and know how to contact them. Transitions in workers are planned to include adequate handover and the new case manager or key worker are promptly introduced to the child or young person.
- 1.8** Changes to care arrangements are avoided, where possible, to promote stability and consistency. When a change is necessary, relevant information is shared and transition planning occurs. Planning includes the views of the child or young person and their care team.
- 1.9** When a child or young person is transitioned into a new care arrangement, the needs of all children and young people in a household are considered and planned for.
- 1.10** In instances where unplanned changes to a care arrangement occurs, the child or young person, their carers and staff are provided with debriefing and support.
- 1.11** Staff and carers develop a positive relationship and rapport with children and young people.

³ In accordance with the Department for Child Protection and Family Support's Permanency Planning Policy 2014.

⁴ When taking into consideration children's views, their age and developmental level must be a factor.



Standard 2

Children and young people, and those important to them, are continually engaged to participate in planning and decision-making that impacts on their lives and their future.

INDICATORS OF COMPLIANCE:

- 2.1** Children and young people are consulted, are listened to, and have their opinions considered when services make day to day or longer term decisions that affect their lives.
- 2.2** Services, case managers and key workers support children and young people to express their views, consider these views in decision making, and respond to their needs.
- 2.3** Children and young people are given information, assistance, and time to prepare and plan for meetings in order to participate in decisions that are likely to affect their lives.
- 2.4** Children and young people have input in the development of all required plans that affect their lives and their future.
- 2.5** Birth parents, extended family, significant others and other members of the care team are given information in a format they can understand. They are supported and given time to prepare and plan for meetings to promote their participation in the development of the child or young person's Care Plan.
- 2.6** All planning is inclusive of all relevant parties.
- 2.7** Decision making and planning is based on assessment. Clear rationales for decisions made are recorded in the planning document and/or Care Plan or Provisional Care Plan.
- 2.8** A copy of the Care Plan or Provisional Care Plan is provided with an explanation of the reasons for any key decisions made explained to the child or young person, each parent, the carer and any significant others.
- 2.9** Services comply with time frames and requirements for Care Plans or Provisional Care Plans as prescribed in the *Children and Community Services Act 2004*.



Standard 3

Aboriginal children and young people are supported to maintain meaningful connections to their family, community, land, and culture in accordance with the Aboriginal and Torres Strait Islander Child Placement Principle.

INDICATORS OF COMPLIANCE:

- 3.1** Aboriginal children and young people are provided with care arrangements in accordance with the placement hierarchy in the Aboriginal and Torres Strait Islander Child Placement Principle.
- 3.2** Aboriginal children and young people are aware of, and can identify, their family, community, land, and culture.
- 3.3** All Aboriginal children and young people have an up-to-date culture and identity plan that is specific to meet the child or young person's needs, is developed upon their entry into care, is reviewed at least annually, and when transitions occur.
- 3.4** Aboriginal children and young people and any members of their care team are part of the development and implementation of the child or young person's culture and identity plan.
- 3.5** Services acknowledge that extended family relationships are the core of Aboriginal kinship systems, and support the ongoing connection to extended family members throughout a child or young person's time in care.
- 3.6** Aboriginal children and young people experience a positive identity and cultural connection through interests, with appropriate role models in services, community and families, including access to learning from Elders and the community.
- 3.7** Carers are assessed and can demonstrate their ability to provide culturally appropriate care to Aboriginal children and young people.
- 3.8** Services provide staff and carers with ongoing training and development to meet the cultural needs of an Aboriginal child or young person.
- 3.9** Services actively engage and develop meaningful working relationships with the Aboriginal community and/or Aboriginal Community Controlled Organisations.



Standard 4

Children and young people's needs are met through individualised assessment and child focused practices, encompassing all aspects of their lives and wellbeing.

INDICATORS OF COMPLIANCE:

- 4.1** Care team members work together to promote and meet the overall needs of a child or young person with ongoing joint planning and regular communication.
- 4.2** The overall needs of a child or young person are met, in particular under the following dimensions of wellbeing:

Health

- a) Children and young people have their physical, developmental, and mental health needs assessed and managed in a timely manner.
- b) Children and young people are supported to attend health appointments and can expect any actions, concerns, and outcomes from these appointments to be communicated to and followed up by those responsible for planning and meeting their needs.
- c) Children and young people are provided with health treatments (including medication) and are supported to understand and manage their health needs over time.
- d) The child or young person's health requirements are recorded in a written document that is reviewed on a regular basis and at a minimum, annually.

Education

- e) Children and young people are provided opportunities to engage in activities that promote learning and have access to resources to support their educational development and potential.
- f) Children and young people are supported to engage in education, training and/or employment.
- g) Children and young people of compulsory school age, and not in formal education, are provided with assistance to participate in alternative education arrangements or vocational programs.
- h) Children and young people have a documented annual education plan that is reviewed as needed.

Emotional and Behavioural

- i) Children and young people are assessed and offered appropriate treatment and counselling to address the effects of trauma.
- j) Children and young people report they feel cared for and are provided with emotional support to assist with recovery from the effects of trauma.
- k) Children and young people have a plan that addresses their therapeutic needs, which is reviewed regularly.

Family and Social Relationships

- l) Contact with family and community is assessed, planned, and regularly reviewed in accordance with the child or young person's views and best interests.
- m) Contact arrangements are communicated with the child, young person, their parent/s, siblings (as appropriate) and carer.



Standard 4 continued

Identity and Culture

- n) The case manager, key worker, carer and staff will respect any special considerations for Culturally and Linguistically Diverse children, young people and their families.
- o) The case manager, key worker, carer, and staff are responsive to a child or young person's needs in relation to religion, spiritual sources, gender identity, and sexual orientation.

Recreational and Leisure

- p) Children and young people have opportunities to take part in recreational pursuits, social activities, and programs of their choice and are supported to develop their interests through regular participation in activities of interest to them.

Legal and Financial

- q) Prompt assessment will be undertaken to determine funding and resources required to support children and young people's needs.
 - r) Case managers and key workers are aware of potential legal claims, including Native Title, and case managers progress this when the child or young person's circumstances warrant this.
 - s) A child or young person who has an impaired decision making capacity, permanent or otherwise, is provided support and assistance through the Public Trustee to manage their financial affairs, or to act as a Trustee.
- 4.3** Case managers and key workers actively build a relationship with children and young people, and see or communicate with children and young people at least once a month or at a frequency determined by the child or young person's circumstances.
- 4.4** Case managers and key workers will meet with the child or young person alone, assess their needs, monitor the implementation of the Care Plan and culture and identity plan, and complete a quarterly care report that comments on the dimensions of wellbeing, every three months.
- 4.5** Children and young people's right to privacy will be respected, without compromising their safety.
- 4.6** Children and young people have their own belongings, such as toys, books, clothes, and games that remain with them throughout their time in care, including if they transition between care arrangements or leave out-of-home care.



Standard 5

Children and young people are supported to develop their identity and a sense of belonging through their families, friends, culture, spiritual sources, and communities.

INDICATORS OF COMPLIANCE:

- 5.1** Children and young people are aware of and can identify their culture, family history, religion, spirituality, community, and connections that are important to them.
- 5.2** Services, staff and carers have knowledge of children and young people's culture, family history, religion, spirituality, community, and connections that are important to them and facilitate the child or young person's understanding.
- 5.3** When it is not possible for siblings to live together, frequent contact is maintained, in line with the child or young person's views and best interests.
- 5.4** Children and young people are safely supported and encouraged to maintain and strengthen connections with their birth family, especially with their parents and extended family, irrespective of whether the child or young person will be able to return to their parent's or family's care.
- 5.5** Children and young people's existing social and community connections are maintained. Children and young people are also encouraged to establish new friendships and networks, hobbies and interests, and to be involved in the community.
- 5.6** Children and young people are supported to identify and to stay in touch with safe, trustworthy people important to them prior to coming into care, who care about their future, and who they can turn to for support and advice.
- 5.7** Children and young people are encouraged to develop a positive identity and sense of self, supported through enduring connections with family, community, and social networks.
- 5.8** Children and young people know their life story and are informed of the reasons why they are in care and are supported to understand this in an age appropriate manner. Case managers revisit the explanations, in conjunction with the care team, on an ongoing basis.
- 5.9** Children and young people are supported to participate in celebrations and events important to their family, community, culture, identity, religion, and spiritual beliefs.
- 5.10** Services, carers and other members of the care team collect and preserve children and young people's significant documents, records of achievements, photos, and items of sentimental value.



Standard 6

Children and young people are adequately prepared and provided with timely and high-quality support, as they transition out of care and into adulthood.

INDICATORS OF COMPLIANCE:

- 6.1** Leaving care plans are developed for young people from age 15 and identify their current and future needs and goals for a young person up to the age of 25 years.
- 6.2** Young people are involved in their preparation and planning for leaving care, and are supported to identify options that are available to them to meet their needs and aspirations.
- 6.3** With the involvement of the young person, leaving care plans will include, but are not limited to, exploring the young person's:
- a) accommodation or supported living arrangements;
 - b) independent living skills;
 - c) ongoing health needs;
 - d) education, training or employment;
 - e) mentoring and support through transition, including referral to other organisations or services;
 - f) obtaining their driver's licence;
 - g) ongoing support for their mental health, and recovery of trauma;
 - h) navigating family contact and changes in relationships;
 - i) transition between care arrangements or accommodation;
 - j) social and emotional supports;
 - k) income security and managing money, including any financial supports and benefits accessible through Centrelink;
 - l) identification requirements, such as proof of age card or passport;
 - m) access to case files and important documents; and
 - n) compensation, native title, and/or entitlements whilst in care and up to the age of 25.
- 6.4** Services, carers and other members of the care team coordinate their efforts to implement the leaving care plan and support young people to develop independent living skills, as they transition to independent living.
- 6.5** Leaving care plans are regularly reviewed and updated to remain responsive to the young person's needs, and to ensure that any steps or actions required are being followed.
- 6.6** Young people are aware of their rights as a young person leaving care, including what entitlements and supports are available to them up to the age of 25.
- 6.7** Personal materials and belongings are provided to young people when they leave care. Where a young person is unable to take them, the service or carer returns them to the Department, who holds onto them until such time they can be returned to the young person.



Standard 7

Children and young people are supported and empowered to know their rights, raise their concerns, and have these responded to and resolved in a timely manner.

INDICATORS OF COMPLIANCE:

- 7.1** Children and young people understand their rights in care, have a copy of the Charter of Rights, know where to access it, and have the purpose and meaning explained to them; at a minimum on an annual basis.
- 7.2** Children and young people know they have a right to share their concerns and are provided with regular opportunities to do so, through child friendly mechanisms.
- 7.3** Children and young people understand how their views have been taken into account when decisions are made about their lives. Where their wishes or concerns are not acted upon, children and young people are helped to understand the reasons why.
- 7.4** Children and young people know they will be listened to and believed, without fear of any consequences, when raising concerns. The boundaries of confidentiality will be considered and carefully explained to children and young people to avoid breaches of trust.
- 7.5** Children and young people can identify at least one trusted adult with whom they can raise their concerns, who will advocate for them, and will help them make sense of the decisions that have been made about their lives.
- 7.6** Children and young people know how to make a complaint, are provided with information about how to raise their concerns through a number of child friendly mechanisms, and are supported through the complaints process.
- 7.7** Children and young people are aware of individual bodies and/or agencies⁵, and the Advocate for Children in Care, who can assist them to resolve concerns about their care and decisions made about their lives.
- 7.8** Children, young people, their families and carers know if they do not agree with a decision made in their Care Plan, they can access the Care Plan Review Panel.
- 7.9** Children and young people understand their legal rights to get help and support to attend court proceedings. This includes being informed of their rights relating to legal claims and their right to independent legal representation.

⁵ The Department of Communities complaints management process, CREATE Foundation, Commissioner for Children and Young People Western Australia, and Ombudsman Western Australia.



Standard 8

Children and young people are provided high quality and safe care by well trained and supported staff and carers

INDICATORS OF COMPLIANCE:

8.1 Carers

- a) Strategies are in place to recruit quality carers who can respond to the needs of children and young people in a safe, therapeutic and culturally appropriate way.
- b) Carers are provided with a copy of the Foster Care Handbook.
- c) Carers understand their role and responsibilities.
- d) Carers are recognised as a part of the care team and understand their responsibility with regard to permanency planning with the child or young person.
- e) Carers are reviewed every twelve months to determine if they continue to meet the competencies.
- f) Regular reviews are conducted to support carers to identify their strengths and areas for ongoing learning and development, and a plan is developed to achieve this.
- g) Carers develop their skills through ongoing learning and development that is tailored to the individual needs of the child or young person in their care.

8.2 Staff

- a) A range of recruitment strategies for prospective staff are carried out, in particular referee checks.
- b) Staff employed are suitable and have appropriate skills or qualifications for their role to respond to the needs of children and young people in a safe, therapeutic, and culturally appropriate way.
- c) Staff receive orientation and induction that equips them to perform their duties.
- d) Staff have access to support and advice, and are provided with regular supervision by appropriately qualified and experienced staff.
- e) Staff receive regular performance appraisals that identify strengths and areas for improvement to support them to continuously develop.
- f) Staff receive ongoing professional development opportunities, and are given training in the appropriate documentation of file notes and incident reports.
- g) Staff apply contemporary and evidenced based practice in line with the organisation and the Department's frameworks and models of therapeutic care.
- h) Staff model professional behaviour abiding by relevant codes of conduct, and have strong ethics and boundaries.
- i) Staff use professional judgment in a transparent and accountable manner and all decisions are made in the best interests of the child or young person.

8.3 Where appropriate, staff and carers are provided with critical incident debriefing.



Standard 9

Organisations are child focused and accountable.

INDICATORS OF COMPLIANCE:

9.1 Management

- a) All relevant policies, procedures, codes of conduct and processes are written in language that is accessible and understood by children, young people, and carers.
- b) Services adhere to requirements and principles contained in legislation, and demonstrate diligence in the adoption of policies and processes, in the pursuit of the best outcomes for children and young people in care.
- c) Services maintain sound practice informed by literature, research, legislation, policies, and procedures as well as professional ethics and values. Case practice is evidence based and complies with contemporary community standards.
- d) Services have financial management reporting procedures in place and maintain financial records relating to service planning, resourcing, and delivery.
- e) Services have comprehensive human resources policies and procedures in place relating to implementation of best practice recruitment and retention policies that are inclusive of diversity and equal opportunity strategies.
- f) Services have a process for coordination and negotiation with other departments, agencies and organisations, to enable children and young people to access relevant services.
- g) Managers, staff and carers are clear about their roles and responsibilities. The level of delegation, responsibilities of managers, and the lines of accountability are clearly defined.

9.2 Accountability

- a) Services maintain clear, relevant, concise, timely, and up-to-date records, including electronic and hard copy case records, file notes, and incident reports. Records are maintained at all times.
- b) Services will ensure that original records are provided to the Department. The Department will keep these records in the child or young person's Child History folder.
- c) The rationale for decisions made in cases are clearly documented and endorsed by the appropriate staff.
- d) Services review the quality of documentation on a regular basis and continuously improve methods of recording.
- e) Services comply with relevant legislation and regulations for the protection of the confidentiality and privacy of the children and young people in care, and keep all documentation in a secure environment.



Standard 9 continued

9.3 Child Focused

- a) The best interests of the child or young person is the paramount consideration for the service.
- b) Services, staff, and carers promote child safety awareness.
- c) Services develop and implement strategies to promote the participation and inclusivity of children and young people.
- d) Services recognise and respond to the specific needs of those who may experience barriers due to their cultural background, religion, spiritual beliefs, disability, identity, or sexual orientation.
- e) Services are aware of and responsive to new challenges and remain child focused through continuous improvement.
- f) Information about how to make a complaint is made available to carers, staff, and external stakeholders.
- g) Services maintain a register of complaints and disputes.
- h) Services encourage an environment where complaints are seen as an opportunity for service improvement and will be taken seriously, without judgement or blame.
- i) Services undertake a thorough review at the earliest opportunity when a complaint has been made and is finalised to identify the cause of the problem, systemic issues and errors, organisational risks and areas for improvement.
- j) Services implement initiatives that support staff and carers to facilitate children and young people's safety and wellbeing particularly during times of stress and crisis, such as Employee Assistance Programs, vicarious trauma training, and promoting self-care practices.



Standard 10

The Department of Communities has a process of clarifying information to determine if action should be taken to safeguard or promote a child or young person's wellbeing.

INDICATORS OF COMPLIANCE:

- 10.1** The Department responds to a duty interaction and any subsequent assessment and actions in a planned and timely way, appropriate to the child or young person's circumstances, vulnerability and the degree of risk identified for the child or young person.
- 10.2** If a child or young person is from an Aboriginal or Torres Strait Islander background, duty interaction and any subsequent assessment or actions will be responsive to their individual family group, language, communication and cultural needs. This information is obtained from the child or young person's family and community where possible and discussed with an appropriate senior Aboriginal staff member.
- 10.3** Duty interaction and any subsequent assessment and actions are culturally responsive to people from culturally and linguistically diverse backgrounds and consider differences in language and communication.
- 10.4** Duty interaction and any subsequent assessment and actions will consider individual differences and needs including disability, gender identity, and sexual orientation.
- 10.5** The Department works collaboratively with other agencies and, where appropriate, timely disclosure and requesting of relevant information from other agencies occurs to clarify if the Department has an ongoing role and/or support a referral to an appropriate service.
- 10.6** Where appropriate, families are referred to relevant social services, with Aboriginal families referred to culturally appropriate services.



Standard 11

The Department of Communities undertakes comprehensive assessments of child protection concerns and, if required, takes action to safeguard or promote the child or young person's wellbeing.

INDICATORS OF COMPLIANCE:

- 11.1** The decision to undertake a Safety and Wellbeing Assessment (SWA) is approved by a senior officer within timeframes specified in Department policies and practice guidelines, and where a SWA cannot be completed within specified timeframes a rationale is recorded.
- 11.2** Staff undertake a SWA in a way that minimises trauma to children and young people, promotes natural justice and due process for families, and maximises the opportunity to engage parents, extended family and significant others.
- 11.3** Wherever possible and safe to do so, parents, extended family and significant others are informed about, included and engaged in the process of providing for the safety and wellbeing of the child or young person.
- 11.4** Staff sight the child or young person and, relevant to the child's age and development, interview the child or young person to seek his or her views.
- 11.5** Depending on the nature of the concern, the SWA includes but is not limited to:
 - a) consultation with line manager to agree on an action plan before commencing any actions;
 - b) interviewing the siblings, parents and carers, and other individuals who may have witnessed the alleged harm, as appropriate;
 - c) interviewing the person alleged responsible for the abuse;
 - d) observing the child or young person's environment, family interactions and behaviours;
 - e) disclosing or requesting information relevant to the child or young person's safety and wellbeing with other government agencies, including interstate or overseas child protection agencies, CSOs or persons with a direct interest in the child or young person;
 - f) obtaining current and previous medical, health, developmental and/or psychological assessments and reports from other relevant sources;
 - g) consultation with appropriate senior Aboriginal staff in a district;
 - h) consultation with appropriate culturally and linguistically diverse (CaLD) specialist staff; and
 - i) consultation with line managers, specialists and other staff.
- 11.6** Recording of approval of decisions will occur as outlined in Department policies and practice guidelines.
- 11.7** If the SWA outcome is that a child or young person is in need of protection, the Department takes action to safeguard or promote the child's wellbeing.
- 11.8** Safety planning in relation to the child or young person's safety and wellbeing is undertaken in consultation with the child or young person, their parents, extended family, and persons of significance to the child or young person.



Standard 11 continued

- 11.9** A written safety plan that addresses how the child or young person's safety will be managed is developed with the child or young person's parents, extended family and the safety network. The safety plan is reviewed and monitored on a regular ongoing basis.
- 11.10** Staff respond in a transparent manner using professional judgement and apply relevant legislation and Department frameworks, policies and practice guidance to their assessment and response. All decisions are child focused and in the best interests of the child or young person.
- 11.11** Where appropriate, feedback on the outcome of a SWA and/or an investigation is provided in a timely manner to the agencies that raised the concern with the Department and to those adults responsible for the child or young person's safety.
- 11.12** Where appropriate, families are referred to relevant social services to enhance the wellbeing of children and young people, including Aboriginal families referred to culturally appropriate services.



Glossary

Aboriginal and Torres Strait Islander Child Placement Principle (ATSICPP)

The aims of the ATSICPP are to:

- Recognise and protect the rights of Aboriginal children, families and communities.
- Increase the level of self-determination for Aboriginal peoples in child protection matters.
- Reduce the disproportionate representation of Aboriginal children in the child protection system.

This principle is in addition to, and does not override the principle that the best interests of the child are paramount. The best interests of the child is determined and has guiding principles as per the *Children and Community Services Act 2004* s.8 and 9.

As per section 81 of the *Children and Community Service Act 2004* (The Act) before making a care arrangement for an Aboriginal or Torres Strait Islander child, the CEO must consult with at least one of the following:

- an officer who is an Aboriginal person or Torres Strait Islander;
- an Aboriginal person or Torres Strait Islander who, in the opinion of the CEO, has relevant knowledge of the child, the child's family or the child's community;
- an Aboriginal or Torres Strait Islander agency that, in the opinion of the CEO, has relevant knowledge of the child, the child's family or the child's community.

In making a decision under this Act about the placement of an Aboriginal or Torres Strait Islander child, a principle to be observed is that any placement of a child must be considered as far as practicable in the following order of priority.

- Placement with a member of the child's family;
- Placement with a person who is an Aboriginal or Torres Strait Islander in the child's community in accordance with local customary practice;
- Placement with a person who is an Aboriginal or Torres Strait Islander;
- Placement with a person who is not an Aboriginal or Torres Strait Islander but who, in the opinion of the CEO, is sensitive to the needs of the child and capable of promoting the child's ongoing affiliation with the child's culture, and where possible, the child's family.

Aboriginal Community Controlled Organisation (ACCO)

An ACCO is 'an incorporated Aboriginal organisation, initiated based and governed by the local Aboriginal community to deliver holistic and culturally appropriate services to the Aboriginal community that it controls'⁶.

⁶ <http://www.nacho.org.au/aboriginal-health/definitions/>



Carers

The term 'carers' includes foster carers (both 'carer's residence' and 'other residence'), family carers, and significant other carers.

Care Plan

As per section 89 of the Act:

A Care Plan is a written plan that –

- (a) identifies the needs of the child;
- (b) outlines steps and measures to be taken in order to address those needs; and
- (c) sets out decisions about the care of the child including:
 - (i) decisions about placement; and
 - (ii) decisions about placement arrangements; and
 - (iia) secure decisions referred to in section 88G; and
 - (iii) decisions about contact between the child and a parent, sibling or other relative of the child or any other person who is significant in the child's life.

The following identifies the timeframes in the *Children and Community Services Act 2004* that relates to planning decisions:

Section 39 (2)

CEO must prepare a provisional care plan within seven working days of the child being taken into provisional care and protection.

Section 39 (4)

As soon as practicable after the CEO prepares or modifies a provisional care plan, the CEO must ensure that a copy of the care plan or modification, as the case requires, is given to the child, a parent of the child, any carer of the child and any other person considered by the CEO to have a direct and significant interest in the wellbeing of the child.

Section 89 (2)

As soon as practicable after a child first comes into the CEO's care, the CEO must prepare and implement a care plan for the child.



**Care Plan
(continued)**

Section 89 (6)

As soon as practicable after the CEO prepares or modifies a care plan, the CEO must ensure that a copy of the care plan or modification, as the case requires, is given to the child, each parent of the child, any carer of the child, any other person considered by the CEO to have a direct and significant interest in the wellbeing of the child.

Section 90 (1)

The CEO must carry out a review of the operation and effectiveness of every care plan at regular intervals not exceeding 12 months.

Section 90 (3)

The CEO must prepare a written report on the outcome of the review and must ensure that, where practicable, a copy of the report is given to the child, a parent of the child, any carer of the child and any other person considered by the CEO to have a direct and significant interest in the wellbeing of the child.

**Care Plan Review
Panel**

The Care Plan Review Panel (the Panel) has been established under the Act to review decisions that are made as part of a care plan for children in the care of the Chief Executive Officer (CEO) of the Department of Communities. The Panel makes a recommendation to the CEO of the Department Care Plan Review Panel 2015

Care team

Every child in OOHC will have a 'care team' comprising of a group of people important to a child and carer. The care team maintains and supports a child's care arrangement and their continued connection to parents, siblings, their wider family, network, community and culture. The emphasis is to create stability and reduce the disruption to lifetime connections that a child has when they enter OOHC, and maintain and increase the naturally occurring networks they belonged to before coming into care. For further information refer: *Care Team Approach Practice Framework 2016*

Case manager

Refers to the child's Department child protection worker.

CEO

Unless otherwise specified CEO refers to the Chief Executive Officer of the Department of Communities.

Charter of Rights

It is a requirement of the Act that all children in care know their rights. For further information and to view the rights refer to: *Charter of Rights 2006*

**Children and young
people**

Means a person who is under 18 years of age, and in the absence of positive evidence as to age, means a person who is apparently under 18 years of age.

**Child History
Folder**

Under the Act, the CEO must ensure that records are kept for every child who is or has been in the CEO's care. The records must contain information prescribed under r.5 of the *Children and Community Services Regulations 2006* (the Regulations).



Critical Incidents	Any incident that results in, or is likely to result in, a child experiencing significant loss, harm or injury, or that may result in a potential viable legal claim for a child.
Cultural and Linguistically Diverse Child Placement Principle	<p>This principle is in addition to, and does not override, the principle that the best interests of the child are paramount. The best interests of the child is determined and has guiding principles as per the <i>Children and Community Services Act 2004</i> s.8 and 9.</p> <p>The object of the principle is to preserve and enhance a child’s cultural, ethnic and religious identity. In making a decision about the placement of a Culturally and Linguistically Diverse child, any placement must be considered as far as practicable in the following order of priority:</p> <ul style="list-style-type: none"> • The child is to be placed within the child’s family of origin; • The child is to be placed with a carer from the same culture and religion; • The child is to be placed in a placement that is accepting and respectful of the specific cultural and religious needs of the child. <p>Should placement with a carer who is not from the same culture and religion and who is not a family member be required, such placement will require:</p> <ul style="list-style-type: none"> • the permission of the CEO, and • the Care Plan to include references to the ongoing affiliation for the child with family and/or for cultural and religious connections to be consistently maintained.
Foster Carer Competency	The competencies for carers are defined under r.4 in the Regulations.
Foster Carer Handbook	Developed by the Foster Care Association in collaboration with the Department.
Culture and Identity Plan	Outlines the steps to be taken so that an Aboriginal child maintains their links with safe and protective family, community, and cultural supports, and remains connected to country. It is important that Aboriginal children who are placed in out-of-home care remain connected to their families, communities, culture and country. Strong and comprehensive culture and identity plans for Aboriginal children entering OOHC care reflect this importance.
Cultural safety	Is concerned with whether or not Aboriginal children and families engaged in the service system are ‘safe’ from covert and overt cultural abuse. It is a reflection of Aboriginal families’ experiences of services and processes, and is achieved when they feel safe to be themselves. It is concerned therefore, with whether or not the service is welcoming for Aboriginal peoples. <i>Department for Child Protection and Family Support Aboriginal Services and Practice Framework 2016-2018</i> , p15.
Key worker	Refers to any relevant funded CSO staff member.

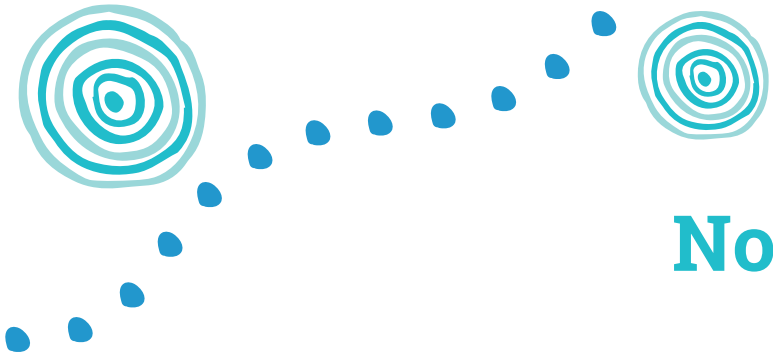


Out-of-Home Care	Out-of-home care incorporates a variety of models and forms and are inclusive of, but not limited to, pre-adoptive care; emergency care; temporary or permanent foster or family care; community foster care, group foster home or multiple foster care; short break support care; temporary care houses and residential care.
Records – Prescribed Information	<p>The following information is prescribed for the purposes on section 128 of the Children and Community Services Act 2004:</p> <ul style="list-style-type: none">• the child’s name;• the child’s date of birth and place of birth to the extent that such information is available;• a copy of the child’s care plan or provisional care plan and any modifications to it;• information about the child’s health, including a copy of any medical records and immunisation records – relating to the period the child is in the CEO’s care or otherwise provided to the CEO;• information about the child’s education, including a copy of all school reports relating to the period in which the child is in the CEO’s care or otherwise provided to the CEO;• information about the child’s cultural, ethnic, religious and family background to the extent that such information is available; and• any other information considered by the CEO to be relevant to the child, relative of the child or a person who is important in the child’s life.
Relevant parties	Are birth parents, any carer, significant others and any other members of the care team in accordance with the Department Care Team Approach Practice Framework 2016.
Safety and Wellbeing Concern in Care	Any disclosure or allegation that indicates a child has experienced or is at risk of significant physical, emotional, psychological, sexual harm or serious neglect.
Services	The term service is used to describe both funded community services sector and services provided by the Department of Communities.
Significant other	Is a person who has a positive relationship with the child or young person as identified by the child or young person, having regard to the child’s age and level of understanding, and/or a person considered by the CEO to have a direct and significant interest in the wellbeing of the child or young person.
Staff	Refers to the child protection worker, residential care worker, and any funded community services sector key workers.
Standard of Care Concern	Are acts or situations that indicate that a foster carer has failed to meet the foster carer competencies, but significant harm or risk of significant harm has not occurred.



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