



Family &
Community
Services

Permanency Support (Out of Home Care) Program

Appendix 2: Service Overview - Preservation



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This appendix should be read in conjunction with the 'Permanency Support (OOHC) Program – Program Description' and all relevant appendices.

Appendix 2: Overview - Preservation

1 Introduction

As part of the child protection continuum, permanency support services have a responsibility to do everything possible to prevent children and young people entering care. They also provide flexible support and services that help individuals find a safe and permanent home.

Family Preservation and Relative/Kinship (Preservation) Initial Case Plan Direction Packages are not placements as these children and young people have not been brought into Out-Of-Home-Care (OOHC). The Case Coordination Package that children and young people receive will provide the case management support to co-ordinate the supports and services to safely sustain a child or young person in their home environment to avoid the need to enter OOHC.

The Case Coordination Package is based on the standard activities and costs of providing case management services excluding irrelevant areas. For example, a carer allowance or provision for household expenses.

Family Preservation or Relative/Kinship (Preservation) Initial Case Plan Direction Packages are allocated by FACS in cases where it is determined by FACS that it is in the child or young person's best interests to remain in the care of their parent/s, guardian or relatives/kin.

Children and young people receiving the Family Preservation or Relative/Kinship (Preservation) Package can also access a Child Needs Package. In order to determine the level of need the CAT will be applied.

As the service system evolves, a greater proportion of the funds will be invested in maintaining children and young people safely at home with their parents or relatives/kin rather than bringing them into OOHC where it is determined to be safe to do so.

2 Preservation

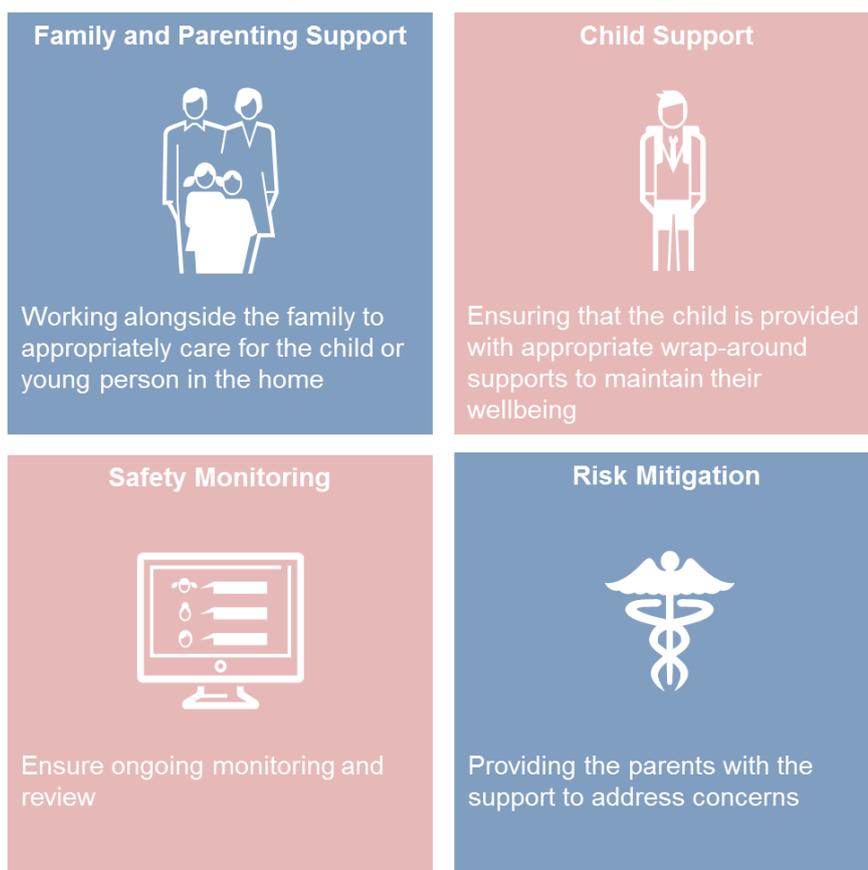
Family Preservation and Relative/Kinship (Preservation) Initial Case Plan Direction Packages aim to keep children and young people in their home in a safe, stable and nurturing family or relative/kinship environment by:

- Helping families to change by improving parenting capacity and family functioning
- Improving children and young people's wellbeing
- Preventing unnecessary placement in OOHC
- Strengthening family bonds, reduce family conflict and improve safety
- Increasing parenting skills
- Developing better household living conditions
- Developing sustainable household routines
- Expanding social support for families/kin
- Enhancing problem solving and budgeting skills
- Expanding networks of supports

3 Operational Characteristics of Preservation

3.1 Initial Case Plan Direction Packages - Family Preservation

This package provides wrap-around services to maintain a child or young person safely at home with their birth parent/s or guardian and prevent their entry into care. This package recognises the intensive work and services required for the birth parent/s to bring about change and focuses on supporting families in four key areas:



It is expected, that by providing these therapeutic wrap-around supports to the child or young person and their family for up to two years under the Preservation Package, the child or young person can be effectively support and maintain a safe environment and home life and reduce the risk and/or need for them to enter into the OOH system.

Services include, but are not limited to:

Family and parenting support	Respite, parent/child interaction, family relationship counselling and in home practical support and brokerage
Child focussed support	Child care, Educational and Learning assistance, counselling and psychological or clinical services
Safety monitoring	Service support and assistance to decrease potential risk through case review, contacts and monitoring visits
Risk mitigation	Access to Drug and Alcohol, Mental Health or Family Violence services

Funding: Provided for a period of up to two years to achieve a safe and sustainable family arrangement.

Review Period: Every three months to review that the Initial Case Plan Direction is still appropriate to achieve permanency for the child or young person with their family.

3.2 Initial Case Plan Direction Package - Relative/Kinship (Preservation)

This package provides wrap-around services to support a child or young person at home with relatives or kin. This Initial Case Plan Direction Package was originally designed to recognise the work done with families and kinship networks to establish safe arrangements for children and young people to divert entry to care.

The package recognises that for some children and young people, living with relatives/kin in safe and stable environments is the most appropriate arrangement. The package provides time limited and individually tailored services to support the permanency of relative or kinship arrangements.

The Relative/Kinship (Preservation) Package is similar to the Family Preservation Package, as it enables a child or young person to be maintained in a relative or kin’s home. The services provided by this package focuses on therapeutic wrap-around supports that are similar to the Family Preservation Package and focuses on supporting relative and kin placements in three key areas:



It is expected that by providing these services as part of the Relative/Kinship (Preservation) Package for up to two years, the child or young person can be effectively and safely maintained in a relative or kin’s home, with stable and healthy connection to their birth family, reducing the risk and/or need for the child or young person to enter into the OOHC system.

Services include but are not limited to:

Family and parenting support	Respite, parent/child interaction, family relationship counselling and in home practical support and brokerage
Child focussed support	Child care, Educational and Learning assistance, counselling and

	psychological or clinical services
Safety monitoring	Service support and assistance to decrease potential risk through case review, contacts and monitoring visits

Funding: Provided for a period of up to two years to achieve a safe and sustainable family arrangement.

Review Period: Every six months to review that the Initial Case Plan Direction is still appropriate to achieve permanency for the child or young person with their family.

4 Roles and Responsibilities

4.1 Service Providers

As each family situation is different, Service Providers have the flexibility to determine the types of services they offer children, young people and their families/kin to meet their individual and specific needs.

For services to be effective, Service Providers must:

✓	Consult with children, young people and their family/kin
✓	Maintain connection to the children, young people and their family/kin's culture and community Draw on and build the family/kin's strengths, available resources and social supports to increase the children's and young people's safety and enhance parenting capacity
✓	Provide intensive support, particularly in relation to health and wellbeing, parenting, household management (including budgeting), practical support and social integration
✓	Promote the rights of children, young people and their family/kin
✓	Meet reporting and record keeping requirements
✓	Use FACS mandated tools relating to assessment and measurement of outcomes as requested
✓	Undertake exit planning to support stability when service provision concludes
✓	Use competent and suitably trained staff with the appropriate qualifications, skills and knowledge required to deliver these packages
✓	Deliver services using evidence informed practice
✓	Respect the privacy of children, young people and their families

Case management will be undertaken in a collaborative and joint way between FACS and the Service Provider as part of achieving the Initial Case Plan Direction Packages and child outcomes through partnership. Service Providers will receive a Case Coordination Package to support this. The Service Providers must consult with FACS, parents, children, young people, other relevant family members, kin and agencies.

Service Providers must report to FACS about progress made towards the achievement of the Initial Case Plan Direction and advise of current or upcoming vacancies, either on a quarterly basis or at agreed times.

4.2 Requirements for kinship and relative carers

The assessment of relative and kinship carers may require a different approach to because of the prospective carer's relationship to the child and/or birth parent/s and the ability for the family arrangement to meet the safety and protection needs of the child or young person in the longer term without ongoing intervention and support.

Relative and kinship placements can minimise the disruption to a child's life when separated from a parent and provide a sense of comfort for the child in a time of stress.

Such arrangements may also help maintain continuity in the child or young person’s attachments to their family community and culture.

However, relative/kinship placements can also present challenges including:

- Placing a child or young person at a higher risk of harm due to continuation of exposure to intergenerational patterns of dysfunction
- Assuming children are at lesser risk because they are placed with family or kin
- Unauthorised, unsupervised and inappropriate contact with parents, potentially exposing the child or young person to further risk of harm
- Relative and kinship carers not effectively managing boundaries, roles and responsibilities in relation to the child’s parents
- Relative and kinship carers underestimating or denying the impact of abuse or neglect on the child. This can lead to a failure to provide appropriate protective measures or supports to address the impact of abuse or neglect.

These potential risks need to be assessed and balanced against the strengths that a relative or kinship placement offers to ensure that the placement best meets the child or young person’s safety and care needs.

4.3 Consultation

Service Providers must undertake genuine, ongoing consultation with children, young people and their parents, relatives and kin, and:

✓	Enable families/kin to participate in decisions about how their needs are best met
✓	Assess each family’s needs individually and provide an appropriate service mix to children, young people and their family/kin that matches their specific needs
✓	Ensure decisions are transparent and communicated respectfully
✓	Service Providers are expected to provide evidence that they have consulted with children, young people and their family and kin about the services they provide and how those services are delivered.

4.4 Culture and community

Where the family or child is of Aboriginal or Torres Strait Islander background, Service Providers must ensure the services provided take into account the context and support system, and the Aboriginal or Torres Strait Islander concept of family and community.

Where the child, young person or family is of migrant or refugee background, Service Providers must:

✓	Ensure the services provided take into account of their cultural, linguistic and religious background
✓	Organise and use interpreters where required

4.5 Reporting requirements

The Service Providers must report to FACS about whether the family is on track to meet the Case Plan Direction every three months.

Depending on the nature of progress, and also at any time while a service is underway, FACS in consultation with the Service Provider may decide that:

✓	The level of service intensity needs to change to meet the child's, young person's or their family or kin's different needs
✓	Reviews indicate the service is not effective in improving the safety and wellbeing of the child or young person and the service will cease
✓	The child or young person needs to be placed in care, or
✓	A transfer to a different Service Provider would better meet the child, young person or their family or kin's needs.

4.6 Dispute resolution

Where families/kin receiving services raises issues, or where FACS and the service provider disagree, the service provider must contact their FACS caseworker in the first instance. FACS will use the dispute resolution process described in the Program Level Agreement as required.

Service Providers should use the local FACS contract manager as the first point of contact for raising a contractual issue or dispute.

4.7 FACS

Only FACS may refer a family to a Family Preservation or Relative/Kinship (Preservation) Initial Case Plan Direction Package based on an assessment of safety, risk, families need, and the suitability and availability of alternative preservation services.

Where there is sufficient evidence the family or kin will respond positively to intensive supports, FACS will decide the most appropriate Service Provider, based on the child and family/kin's needs and service availability.

When making a referral, FACS will:

- Complete a Safety and Risk Assessment (SARA)
- Obtain the consent for referral from at least one parent and the child or young person, if they are aged 14 -18 years
- Discuss the referral, and the family's needs with the Service Providers and confirm the Service Provider:
 1. Understands the safety, risk and wellbeing issues for the children and young people
 2. Understands the family or kin's needs
 3. Will contact or make persistent efforts to contact the family on the day of referral, or at the latest, by end of the next working day.

After the Service Provider accepts the referral, FACS will retain a signed copy for the referral records.

FACS will establish a meeting time to confirm the Initial Case Plan Direction with the Service Provider and the family/kin within three working days.

FACS works with Service Providers to plan and deliver effective services. In so doing, FACS will:

- Keep the safety and needs of children and young people as its paramount concern
- Share information with Service Providers, and
- Work collaboratively to resolve issues and disputes.

FACS will assess each three month review provided by Service Providers. Where FACS determines that little or no progress has occurred toward achieving Initial Case Plan Direction, FACS will decide if these packages remain viable or if alternative supports are required.

4.8 Transfers

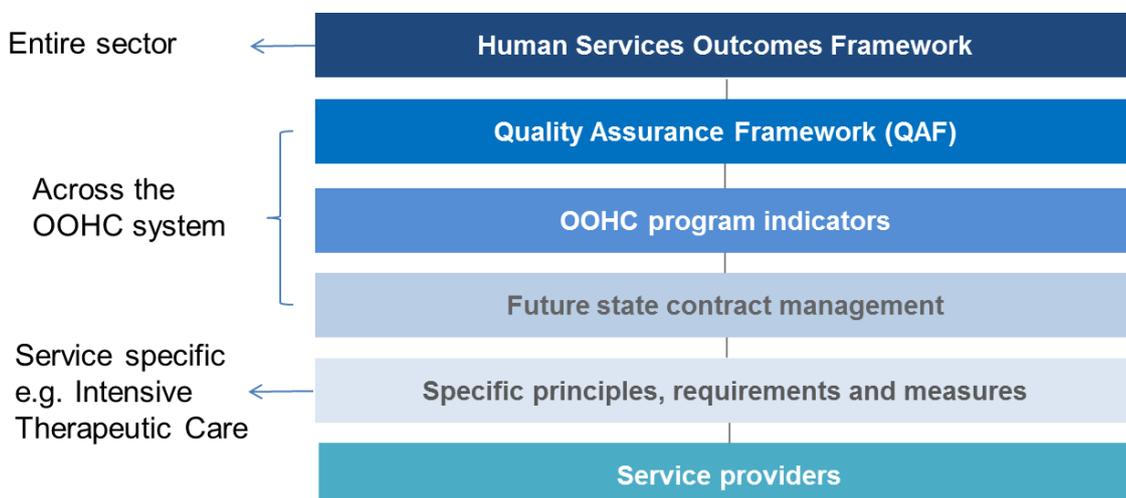
FACS wants stability and continuity of service provision for children, young people, families or kin, so a transfer to another service or service type will occur in only exceptional circumstances and at FACS' request.

4.9 Parental Capacity Orders (PCO) or Parent Responsibility Contracts (PRC)

FACS may make a Parental Capacity Order (PCO) or a Parent Responsibility Contract (PRC) requiring a parent to participate in supports provided under a Family Preservation or Relative/Kinship (Preservation) Initial Case Plan Direction Packages. This allows parent/kin to build or improve parenting skills and encourage parents/kin to accept greater responsibility for the child or young person.

5 Key Performance Indicators

An outcome and monitoring framework provides continuity from the level of broader human services outcomes to service delivery.



From 1 October 2017, outcomes and indicators will be used to inform financial abatements and incentives for contracted Service Providers. The development of measures for foster care will be influenced by the Quality Assurance Framework trial.

Indicators will be tracked and enhanced over time for Service Providers and FACS to understand the impact of the OOHC care program on children and young people and are outlined below.

All outcomes and indicators in the Permanency Support (OOHC) Program will form Schedule 2 (Performance and Outcomes Data Reporting) of the Program Level Agreement (PLA).

Schedule 2 of the PLA sets out FACS' performance and outcomes data reporting requirements for the Program, including the Key Performance Indicators and other outcomes measurement data that Service Providers will be required to report on.

5.1 Safety

Outcome	Indicator
<p>Safety – children and young people receiving Family Preservation or Relative/Kinship (Preservation) Initial Case Plan Direction Packages are safe and protected from harm.</p>	<ol style="list-style-type: none"> 1) Number and percentage of children and young people who achieve their Initial Case Plan Direction within two years. 2) Number and percentage of children and young people receiving a Family Preservation or Relative/Kinship (Preservation) Initial Case Plan Direction Package who do not enter OOHC (measured at 6/12/18/24 month periods). 3) Number and percentage of children and young people who do not receive a risk of significant harm (ROSH) report while receiving a Family Preservation or Relative/Kinship (Preservation) Initial Case Plan Direction Package (measured at 6/12/18/24 month periods). 4) Improved safety/reduced maltreatment outcomes: <ul style="list-style-type: none"> • (Where there is Domestic Violence in families) Mother reports sense of control, safety and independence. • (Where there is drug and alcohol use in families) Abstinence from drug use. (Note these indicators will be developed over time) <p>Note these indicators will be developed over time.</p>

5.2 Achievement of Permanency Case Plan Direction

Outcome	Indicator
<p>Achievement of permanency Initial Case Plan Direction– children and young people have a stable and permanent home and family relationships</p>	<ol style="list-style-type: none"> 1) Number and percentage of children and young people who achieve their permanency case plan direction within two years. 2) Number and percentage of children and young people who did not enter care during the two year period where Family Preservation or Relative/Kinship (Preservation) Initial Case Plan Direction Package were provided. 3) Number and percentage of children and young people who did not enter care 12 months after Relative/Kinship (Preservation) Initial Case Plan Direction Package ended. 4) Improved family functioning/parental behaviour - (e.g. positive responses to the child, meeting child needs, responses to challenging behaviour) 5) Service utilisation - (reduced reports to Helpline; youth/parent participation in mental health or substance use treatment, reduced contact with the criminal justice system) <p>Note these indicators will be developed over time.</p>

5.3 Wellbeing

Outcome	Indicator
<p>Improved child wellbeing</p> <p>Improved parental wellbeing</p>	<ol style="list-style-type: none"> 1) Improved child wellbeing; sleep, relationships with others and self-esteem. 2) Improved parental wellbeing and mental health (e.g. anxiety, depression, mood, psychological distress). <p>Note these indicators will be developed over time.</p>

5.4 Improved educational outcomes

Outcome	Indicator
<p>Improved educational outcomes – children and young people’s educational achievement depends on stability, advocacy and parental involvement</p>	<ol style="list-style-type: none"> 1) Number of children and young people who are enrolled and regularly attend: <ul style="list-style-type: none"> • A quality preschool program at least two days per week (age three and over), or • School (age 5-16) and/or vocational programs (16 years and over), employment or meaningful activity. <p>Note these indicators will be developed over time.</p>