

Permanency Support (Out of Home Care) Program

Appendix 3: Service Overview - Foster Care



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

Appendix 3: Service Overview - Foster Care

1 Foster Care

1.1 Overview

Service Providers providing Foster Care services must:

✓	Ensure children and young people are safe from harm
✓	Prevent entries into OOHC by providing family preservation support services to support families to safely care for children and young people at home
√	Ensure children and young people in care return home as quickly as possible, where it is safe to do so
✓	Support children and young people who cannot return home to exit care into guardianship or open adoption as quickly as possible, preferably within two years
√	Decrease the time children and young people spend in OOHC
✓	Decrease re-entries into OOHC
√	Achieve lasting permanency outcomes for children and young people
✓	Provide OOHC supports that are matched to a child or a young person's needs and circumstances, including immediate placement and appropriate placements for children and young people stepping down from Intensive Therapeutic Care (ITC) services. FACS will provide information about children and young people to facilitate this process
✓	Improve health, education, wellbeing and quality of life outcomes for children and young people
✓	Support children and young people to maintain safe, positive relationships with their family and significant others, participate in their community, and be connected to their culture
√	Provide wrap-around support including trauma treatment
✓	Ensure children and young people 15 years and over have a meaningful and comprehensive futures plan and are provided access to support services to support their transition to independence.

In the first instance, all children and young people currently in OOHC must have a permanency goal identified as part of the case plan review.

For new entries, and to drive this approach, FACS will use Parental Responsibility Contracts (PRCs), Parental Capacity Orders (PCOs), Registered Care Plans, short term and interim orders and will generally not support long term orders of parental responsibility to the Minister through the Children's Court unless there are exceptional circumstances.

Children and young people should receive services that promote their wellbeing and deliver permanency regardless of their case plan goal, location or which agency is supervising their placement.

1.2 Client group

The client group for foster care services is:

- Children and young people who have been identified at risk of significant harm as defined in the Act. These children (aged 0-15) and young people (aged 16-17 years) require care and protection by the Minister or Secretary
- Children and young people entering care under section 151 of the Act (Temporary Care Arrangements)
- Families of children and young people in OOHC or at risk of entering OOHC
- Children and young people aged 15-25 years who have left formal care. The
 discretion to provide after care assistance applies to individuals after they turn 25
 years of age and is determined as "the Minister considers necessary" with regards to
 their safety, welfare and wellbeing.

1.3 The role of FACS, Service Providers, peak organisations and regulatory bodies

FACS' primary roles as a parent, steward of the OOHC service system and as an OOHC service provider are detailed in Section 1.8 of the Program Description.

Information/Requirements	Reference
The role of Service Providers	Appendix 6: Section 5.1
The role of Peak Organisations	Appendix 6: Section 5.3
The role of Regulatory Bodies	Appendix 6: Section 5.4

1.4 Implementation of the vision for Foster Care

FACS Vision 2016-19

All people are empowered to live fulfilling lives and achieve their potential in inclusive communities

OOHC Vision

Children and young people are safe and developing optimally in a stable and supportive environment

Quality Assurance Framework

Children & young people have the opportunity & support needed to ensure that they are physically & psychologically safe & free from maltreatment.

Children & young people have permanency & stability in their living situations & the continuity of family relationships & connections is preserved

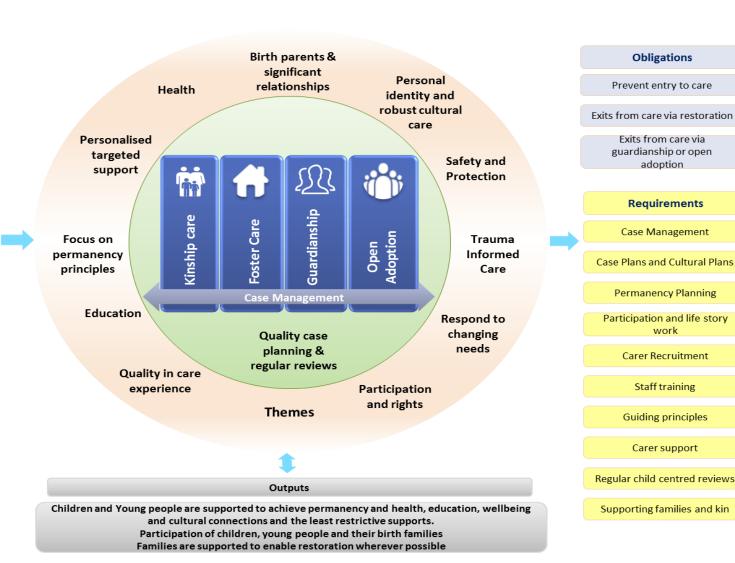
Children & young people have the opportunity & support needed to maximise their intellectual ability & functioning & to achieve educational success to their fullest potential

Children & young people have the opportunity & support needed to maximise their physical health, strength & functioning

Children & young people have the opportunity & support needed to manage their mental health & wellbeing

Children & young people have the opportunity & support needed to cultivate a strong & resilient self-identity, to develop supportive & nurturing relationships, & to feel hopeful about life & the future.

Children & young people have the opportunity, encouragement & support needed to engage with, & develop, their own culture, ethnic & spiritual identity.



2 Operational Characteristics of Foster Care

Initial Case Plan Directions Packages are provided for up to two years to facilitate children and young people having a safe, permanent home.

Restoration/Guardianship/Adoption Packages are all for a period of up to two years. Extensions to time may be granted in some circumstances.

Long Term Care Packages require a review every twelve months to identify if other permanency arrangements such as restoration or adoption may be appropriate. Ongoing activity to find family for the purposes of restoration has been incorporated into the service package cost. Intensive support must be provided to identify and achieve a permanency outcome over time.

Minimum review periods have been established requiring assessment of whether the Initial Case Plan Direction is still appropriate to achieve the safety and permanency outcome for the child or young person. It is expected that reviews are undertaken jointly by FACS and the Service Provider. For Aboriginal children and young people, mechanisms must be in place for Aboriginal community controlled organisations to oversight these reviews. Minimum review periods have been set at the following standard:

- Family Preservation three monthly
- Relative and Kinship (Preservation) six monthly
- Restoration/ six monthly
- Guardianship/Adoption six monthly
- Long Term Care annually.

Review periods outlined above will be monitored through the regular contractual review process. Failure to meet review times and progress permanency may result in financial or other abatements.

For a small number of children and young people currently in Foster Care, longer term support may be required to sustain the family unit prior to moving to a Restoration, Guardianship or Adoption Initial Case Plan Direction. For this reason, these children or young people may be provided a 'Long Term Care Initial Case Plan Direction Package' prior to moving home or to Guardianship or Adoption. It is mandatory these children are moved to permanency arrangements. Foster Care is geared towards moving a child or young person from long term care to any other Initial Case Plan Direction type leading to a safe and permanent home.

There is a separate Baseline Package for Aboriginal Foster Care. Appendix 4 provides further detail about Aboriginal Foster Care.

Each child and young person will receive a Child Needs Package determined using the Child Assessment Tool (CAT). This package is focused on the child's assessed needs. Low, Medium or High Needs Packages are available.

Other Specialist Packages have been developed to address those circumstances where individuals require additional funding to achieve results that cannot be managed through

the structured service cost packages described. Other Specialist Packages may be applied on a case-by-case basis. These packages are:

- Cultural Care Plan (Aboriginal)
- Culturally and Linguistically Diverse (CALD)
- 15+ Years Old Reconnect
- Leaving Care (called futures planning)
- 4+ Siblings Placement Option
- Complex Needs

Service Providers will be required to accept all children and young people referred regardless of their level of need and use the Child Needs Package, and if relevant Other Specialist Packages, to wrap supports around the child or young person. A pattern of not accepting children will be considered a negative indicator of performance.

3 Obligations of Foster Care Services

The following service requirements are specific to the delivery of Foster Care services.

3.1 Threshold obligations

Delivery of Foster Care in NSW must:

- Provide intensive wrap-around supports to children and young people and their families to enable them to safely return home (in the case of Restoration)
- Where Restoration is not possible, support children and young people to move to Guardianship or open Adoption within two years of entering care.

Agencies funded to provide Foster Care services must:

✓	Comply with legal obligations including OCG accreditation and compliance with governance principles and financial viability
✓	Undertake performance and data reporting using the mechanisms developed by FACS and the National Disability Insurance Agency (NDIA)
✓	Support Aboriginal children and young people according to the Aboriginal and Torres Strait Islander Principles as outlined in section 2 parts 11-14 of the <u>Children</u> and Young Persons (Care and Protection) Act 1998
✓	Provide culturally competent care for children and young people of CALD backgrounds
√	Develop positive working relationships with children and young people's birth parents and families and deliver family-centred and strengths-based practice
√	Participate in mandatory sector-wide standardised training as it is developed for all new carers and optional training for existing authorised carers
✓	Provide adequate support levels for authorised carers, including access to up to 24 nights of respite per year. This must be flexible and based on the assessed needs of the child or young person, their family and carers.
1	Provide immediate and new placements
✓	Use evidence based services and interventions to support families to care for their children safely at home

Provide services across the continuum of care or develop partnerships to ensure a continuum of necessary wrap-around support is provided to a child or young person and their family Organise and implement an effective program for counselling and therapeutic services and provide access to evidence based child specific trauma-informed practice and care Facilitate and support birth family contact as an integral part of case planning and support children and young people to safely maintain relationships with their birth family, significant others and maintain connections with their communities Undertake regular case reviews in line with the Initial Case Plan Direction Ensure that children in care receive an appropriate education (and related services), including access to special education services and ensure all children of school age have an individualised education plan that is reviewed at least annually Ensure that children in care receive appropriate medical care and have a Health Management Plan that is reviewed at least annually for children five years and over or every six months if they are under five Provide support and referral to a child or young person who may be a victim of crime Assist children and young people with a disability to access the NDIS, including: identification and formal diagnosis where required; development, implementation and review of their NDIS plan; and collaboration as required with FACS, birth parents, carers, and relevant Health, disability services and NDIA staff Promote and uphold the Charter of Rights for Children and Young People in OOHC Provide futures planning casework and aftercare support from 15 years of age that is consistent with Transitioning from OOHC to Independence: A nationally consistent approach to planning and the Ministerial Guidelines on the Provision of Assistance after Leaving OOHC Promote lifelong connections (to carers, caseworkers and community) for young people who have left care as a result of turning 18 Provide support to young care leavers to 25 years of age.

3.2 Capability requirements

Service Providers are not expected to be currently providing all wrap-around services defined under the new service model. However, Service Providers will be required to demonstrate their capacity to do so under a new contract. Alternatively, they must demonstrate that they have or can establish working relationships with other Service Providers and government agencies who can deliver the additional services needed to meet a child or young person's identified permanency and case plan goals. For children with a disability, this will include facilitating access to the NDIS and participating in the planning process.

Foster Care providers must deliver services across the continuum of care to ensure consistency for children and young people. This includes the provision of 'Step-Down' support for children and young people who are transitioning from more intensive placements to less intensive support to meet their Permanency Case Plan Direction, including:

- Children and young people transitioning from ITC to Foster Care or Restoration who will be provided with individualised packages based on their needs
- Children and young people transitioning from Foster Care to Restoration, Guardianship or Adoption.

Children and young people transitioning from ITC may be supported in a Foster Care setting (with a relative/kinship carer or foster carer) with intensive wrap around-services, for example intensive therapeutic support, to achieve Restoration. This support is determined on the needs of the child or young person and the adults responsible for their current day to day care or their future care (i.e. foster carer, relative/kinship carer, birth parents or potential guardians/adoptive parents).

This 'Step-Down' approach requires that as a child or young person's needs become less intensive they receive individualised services in a family based setting. If appropriate relatives or kin cannot be identified to support children and young people stepping down from ITC, agencies must recruit carers who are able to meet their more complex needs.

In addition to meeting all of the threshold obligations, Foster Care providers must have capability, either independently or in formal partnership with other Service Providers, to:

√	Deliver permanency outcomes in line with the permanency planning principles – that is, Restoration to birth family, Guardianship and open Adoption
✓	Recruit, assess and authorise carers/prospective guardians/prospective adoptive parents in line with permanency planning principles – that is, identify permanent placement options as early possible, including tailored recruitment, from within each child or young person's support network
✓	Provide or access evidence based trauma treatment programs such as Multi- Systemic Therapy for Child Abuse and Neglect (MST-CAN) and Family Functioning Therapy – Child Welfare (FFT – CCW)
✓	Where required provide children and young people with complex needs with a specialist carer trained in social work, psychology, mental health nursing or education to support achievement of the case plan direction including to enable very complex children to Step-Down from ITC
√	Support authorised carers including provision of mandatory training and respite.

3.3 Positive behaviour support

The effects of past abuse, neglect and trauma often shape the behaviour of children and young people in care.

Service Providers must:

✓	Have a positive behaviour management policy outlining behaviour support and management practice which focuses on prevention in line with Clause 45 (2)(d) of the Children and Young Persons (Care and Protection) Regulation 2012
✓	Ensure behaviour support plans are developed by a relevant specialist such as a psychologist, psychiatrist, education or health professional. The plan should be developed with help from the caseworker and in consultation with the child or young person and their carer, and must be reviewed regularly
✓	Where a child is prescribed psychotropic medication, a behaviour support plan is required to be developed by law. This means that children and young people receive any additional supports in relation to their needs in accordance with the plan.

For further information access the OCG guidance <u>Designated agency behaviour support/</u> <u>management guidance tool</u> and the FACS publication <u>Administration of psychotropic drugs</u> <u>to children and young people in out-of-home care – caseworker guide.</u>

4 Case Management

Information/requirements for case management are located in the following documents and sections:

Information/Requirements	Reference
Case management also involving	Appendix 6: Section 3.1
services from Juvenile Justice	
Casework responsibilities	Appendix 6: Section 3.2
Requirement to work with birth families	Program Description: Section 2.4.1
and significant others	

5 Matching of Children and Young People to Carers

5.1 Carer recruitment

Authorised carers (foster, relative and kin) must be recognised and supported for their contribution, through the good and challenging times.

Authorised carers may also be prospective guardians or prospective adoptive parents and in that case should be supported for both their immediate care role and their future care role as a permanent parent or guardian.

Fostering NSW (or other appropriate bodies) and FACS will provide a support role to assist Service Providers to enhance recruitment and training, as per the Carer Strategy and Aboriginal Carer Strategy.

Service Providers must:

Service	Service Providers must:	
✓	Seek to recruit carers from a child or young person's family and kinship network in	
	the first instance	
✓	Attract potential carers/guardians/adoptive parents to support short term,	
	restoration supports, or to become guardians or prospective adoptive parents	
1	Have additional authorised carers who are able to accept immediate placements	
	who can work with birth families to support restoration	
1	Recruit carers who are able to care for children and young people stepping down	
	from Intensive Therapeutic Care (ITC) to family based placements	
1	Coordinate general community awareness-raising activities with local targeted	
	recruitment campaigns (including working with FACS where appropriate)	
1	Gain a thorough knowledge of local demand and supply to better target recruitment	
	campaigns	
✓	Target couples or individuals with the competencies required to effectively care for	
	children and young people and work towards permanency outcomes	
	Target prospective carers from relevant backgrounds with competencies to meet	
	the diverse needs of children and young people requiring placement. Diversity of	
V	backgrounds and competencies should include those relevant to children of	
	Aboriginal and diverse cultural, linguistic and religious backgrounds. Specific	
	strategies may need to be developed to recruit these carers	
1	Meet the identified number of placements within the geographical areas as	
	determined by their funding deed	
V	Support authorised carers to be active in positive 'word-of-mouth' recruitment	
✓	Be aware of the skills and competencies required and be able to access training	
	Provide authorised carers/prospective adoptive parents with training, support and	
√	development Services including providing necessary respite where and when it is	
	needed, to support the maintenance of caring roles	
1	Ensure the necessary skills to undertake recruitment activities	
	Support carer mobility across Service Providers where required and in the best	
V	interests of the child	

√

Have efficient processes in place so that prospective carers are responded to in a timely and professional manner.

5.2 Carer authorisation

Service Providers must provide prospective carers with information about the permanency planning principles and the prioritisation of permanent care options over long term Foster Care from the application/recruitment stage. This is because authorised carers/prospective adoptive parents have a pivotal role in achieving permanent placements according to children and young people's Initial Case Plan Direction of Restoration, Guardianship or Open Adoption. Authorised carers' participation and support of birth family and extended family contact is crucial in this regard. This role can be enhanced in carer recruitment, training and support.

Service Providers that can dually accredit carers to provide Foster Care and Adoption Services can be well placed to achieve permanency outcomes by creating a pathway to a permanent home via guardianship or open adoption to that carer.

Service Providers must conduct a series of probity and suitability checks before authorising a prospective foster, relative or kinship carer or prospective adoptive parent¹ in line with legislative requirements. These are outlined in Schedule 2, Children and Young Persons (Care and Protection) Regulation 2012.

Service Providers are also legislatively required to record information about those who apply to be authorised carers and the outcome of their probity and suitability checks on the NSW Carers Register.²

5.3 Carer assessment processes

Service Providers must:

Develop and implement intake and assessment processes that facilitate the matching of children and young people with suitable carers/prospective guardians/prospective adoptive parents, and promote the successful establishment of the placement and achievement of permanency and case plan goals

Undertake thorough assessments of prospective carers, guardians and prospective adoptive parents, utilising an assessment format such as the Step by Step 2016 assessment package that focuses on carers' competencies. Assessment packages should be tailored for use with prospective carers from Aboriginal and CALD backgrounds

Authorise carers, guardians and prospective adoptive parents in accordance with the Children and Young Persons (Care and Protection) Act 1998 and the Children and Young Persons (Care and Protection) Regulation 2012

Conduct genuine, ongoing consultation and facilitate participation of prospective carers, guardians and prospective adoptive parents in decision-making processes.

¹ A person can be dually authorised as a foster carer and a prospective adoptive parent through a single assessment process. Approval as an authorised carer does not result in automatic approval as a prospective adoptive applicant. This is particularly important for relative and kin carers and Aboriginal foster carers. There are some additional checks that must be completed for prospective adoptive parents, which are outlined in Schedule 2 of the Children and Young Persons (Care and Protection) Regulation 2012.

² The NSW Carers Register is a centralised database of persons who are authorised, or who apply for authorisation, to provide statutory or supported OOHC in NSW.

Information/requirements for matching children and young people to carers is located in the following documents and sections:

Information/Requirements	Reference
Requirements for kinship and relative	Appendix 2: Section 4.2
carers	
Carer training	Appendix 6: Section 4.1
Support for authorised carers	Appendix 6: Section 4.2
Respite care	Appendix 6: Section 4.3
Reviews of authorised carers/prospective	Appendix 6: Section 4.4
guardians/prospective adoptive parents.	

6 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 are located in Schedule 2 (Performance and Outcomes Data Reporting) of the Program Level Agreement (PLA) will apply to the provision of Foster Care.

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.