



NSW Out-of-Home Care Strategy

A long-term plan to strengthen and transform the out-of-home care program in NSW

February 2026

Communities and Justice





Acknowledgement of Country

The NSW Department of Communities and Justice (DCJ) pays respect to the Traditional Custodians throughout NSW. We listen and learn from the knowledge, strength, and resilience of Aboriginal communities. We extend our respects to all Elders past and present, and to Stolen Generation Survivors and their descendants. We celebrate the diversity of Aboriginal peoples and their ongoing cultures and connections to the lands and waters of NSW. We recognise the important role that families and communities play in providing children with a sense of safety, belonging and resilience.

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Minister's foreword



For too long, the out-of-home care (OOHC) program in NSW has failed to deliver the safety, stability and healing that children and families deserve. A range of system reviews and inquiries have made it clear that in the current OOHC program, accountability has been blurred, oversight has been weak, and practice has been inconsistent. It has also relied for too long on costly short-term arrangements instead of providing the stable homes and therapeutic supports that help children recover.

This Strategy puts children and their futures first. It marks a turning point, and sets a clear direction for OOHC in NSW - one that restores confidence in the system, re-establishes the role of government as system steward, and delivers clear accountability for the outcomes we expect. It provides a roadmap to rebuild the OOHC program so it is transparent, financially sustainable and focused on high quality care.

The Strategy responds directly to the findings of recent system reviews, confirming the need for stronger oversight, clearer roles and more effective commissioning. It outlines a phased approach to reform that will allow us to redesign services and reshape the mix of providers while maintaining continuity and stability for children.

Government will take a more active role in critical parts of the system, including service delivery where specialist and complex supports are required, while working with non-government providers in areas where they have demonstrated capability and strengths.

A new System Design Framework and strengthened accountability settings will guide future commissioning to ensure value for money and consistent quality across all providers.

This is a substantial reform, but change has already begun. We are strengthening performance management, improving program oversight and reducing reliance on emergency arrangements. We have also commenced work to redesign the OOHC service streams of restoration and home-based care, with residential care and specialist aftercare to follow, to ensure the program is more coherent and better aligned to the needs of children.

The Strategy sets out a realistic, sequenced plan for delivering this transformation. Change of this scale takes time, but our goal is clear: a world-class OOHC program that keeps children safe, supports recovery and delivers the stability and opportunity that every child and young person deserves.

A handwritten signature in blue ink, appearing to read 'Kate Washington'.

The Hon Kate Washington MP
Minister for Families and Communities
Minister for Disability Inclusion

Systemic reform of out-of-home care



The NSW Out-of-Home Care Strategy (the Strategy) represents the NSW Government's commitment to improving outcomes for children in OOHC so they can thrive in supportive and stable environments connected to family and community.

This Strategy sets out a comprehensive, long-term reform program to address persistent and structural challenges to the way OOHC has been delivered in NSW.

We are rebuilding the OOHC program so that it is transparent and accountable and enables children, families and carers to be better supported. Where OOHC is only used when necessary, for the shortest time possible, in ways that provide stable care environments that offer healing, recovery and connection.

Key challenges

Over recent years, multiple system reviews and inquiries have confirmed longstanding issues with the way OOHC has been delivered in NSW. Together, these reviews have made over 100 recommendations and a clear case for significant change to how we design, commission and deliver OOHC. Reviews have found that the OOHC program lacked clear lines of responsibility, consistent oversight and effective performance management, resulting in variations in service quality, weak financial controls and limited visibility of children's experiences.

The **System Review into OOHC** concluded that the program was not fit for purpose, with fragmented accountability, inadequate contract governance and insufficient outcomes monitoring.

The **IPART Review of OOHC Costs and Pricing** identified a complex pricing model with poor visibility of services and costs, recommending a simplified, cost-reflective structure aligned to outcomes and carer supports.

Key oversight bodies have also identified systemic problems in governance, complaint handling, cultural safety, and performance transparency.

In summary, the OOHC program has lacked the stewardship, accountability and capability to consistently deliver safe, stable and healing environments for children and young people. Until recently, it also operated with persistent budget overruns, driven by escalating costs associated with high-cost emergency arrangements and fragmented service models intensifying financial strain.

The key challenges include:

- Although the number of children entering OOHC has been decreasing (including Aboriginal children), the OOHC program has not been delivering **improved outcomes for children within the allocated budget.**
- Fewer children are being **restored to their families.**
- Too many children are entering **ineffective, unsuitable high-cost emergency arrangements** rather than stable home-based or residential placements.
- We do not have **enough new foster carers or relative and kinship carers**, and existing carers tell us that they don't have enough support.
- The outsourcing of case management and service provision has led to systemic confusion about **the roles and responsibilities of government**, and the accountabilities required between government and its commissioned providers.

This Strategy has been developed as a government-led response to longstanding system challenges and the findings of multiple independent reviews and inquiries. The Strategy outlines:

- the suite of measures already underway to **stabilise** the program – including initiatives and actions being undertaken giving effect to key reform directions.
- the next steps for program reform through a phased approach to **rebuilding** the OOHC program giving greater transparency and accountability at every level so government can confidently invest in it.

We will **redesign the whole OOHC program** to enable children, families and carers to be better supported, where OOHC is only used when necessary, for the shortest time possible, and in ways that support stable care environments that enable **healing, recovery and connection.**

What is the OOHC program?



OOHC is the care provided to children and young people who cannot live with their parents and who are placed in the care of the state via legal orders.

In NSW, these children are under the parental responsibility of the NSW Minister for Families and Communities.

The new OOHC program sits at the tertiary end of a broader service ecosystem that supports child safety and wellbeing, depicted below.

The OOHC Strategy underpins the redesign of four DCJ OOHC service streams:

- home-based care
- restoration
- residential care and independent living
- specialist aftercare.

Implementing this Strategy will enable DCJ to reinvest resources where they will have the greatest impact. This includes evidence-based programs that help more children in OOHC to be restored to their families, drive healing and recovery, and support families earlier.

How OOHC fits into the broader service ecosystem

Child and family services	Child Protection		Out-of-Home Care (OOHC)			
	Screening, intake, referral	Assessment and response	Restoration	Home-based care	Residential care and independent living	Aftercare
Non-statutory services Targeted and specialist services for eligible families: <ul style="list-style-type: none"> • Health • Mental health • Educational supports • Alcohol and other drugs • Housing • Domestic and family violence services 	Mandatory reporting, screening, intake and referral to address child protection concerns	DCJ child protection casework services Family preservation services	DCJ casework Restoration services and programs	Placement Casework and case management Carer recruitment and support Therapeutic interventions and supports	Placement Casework and case management Housing Care worker management Therapeutic interventions and supports	Post-care support

A photograph of a woman and a young child sitting in a car. The woman is on the left, looking towards the child on the right. Both are laughing and smiling broadly. The child is wearing a striped shirt. The car's interior, including the headrest and window, is visible.

Our vision for world-class OOHC

As a follow-up to the current suite of stabilising measures, this Strategy will drive the next round of changes to rebuild the program.

Our vision...

is for a world-class OOHC program that enables children to thrive in supportive, stable environments, and sees recovery and restoration for more children and families.

The OOHC Strategy is underpinned by a range of guiding principles, reform directions and new policy shifts that together will guide the OOHC program transformation and enable us to track progress.

Guiding principles of the OOHC Strategy

Consultations and key reviews highlighted that *how we work* to achieve the best possible outcomes for children in OOHC is as important as *what we do*. The four guiding principles (below) reflect how we will work to achieve this Strategy's vision.

Safe	OOHC should be an intervention of last resort, used only when necessary, and for the shortest time possible to keep children safe. Children in OOHC feel safe and loved in stable care environments that support them to heal and recover.
Connected	Children are placed, restored or connected to family, kin, or community wherever it is safe to do so, recognising the critical importance of identity, culture, belonging, and the continuity of loving, lifelong relationships.
Thriving	Quality services and evidence-informed programs drive meaningful outcomes, enabling children in OOHC to maximise their potential. These programs support recovery and healing for children and families, fostering resilience and long-term wellbeing.
Accountable	Government stewardship ensures strong oversight, clear accountability, and transparency in the delivery of services. This commitment supports public confidence and ensures value for money, driving better outcomes for children, families, and communities.

Key reform directions of the OOHC Strategy

Eight key reform directions below set out the structure of the Strategy, defining the key areas of OOHC reform.

1. Keep children with family and community	Strengthen restoration and kinship care pathways to support safe reunification and maintain family and community connections for children in care.
2. Strengthen recovery, healing and wellbeing	Expand access to therapeutic supports, embed trauma-informed practice across all care types, and improve outcomes in health, education and emotional wellbeing.
3. Empower service users	Elevate the voices of children, families and carers in decision-making, service design and program processes.
4. Expand Aboriginal-delivered OOHC	Strengthen Aboriginal-led delivery to support cultural identity, community connection and improved long-term outcomes.
5. Recognise carers as key service partners	Improve carer recruitment, support, retention and participation, with a focus on kinship and culturally responsive care.
6. Increase service quality	Design and implement evidence-based care models and strengthen performance monitoring, ensuring services are safe, consistent and outcomes-focused.
7. Improve oversight and accountability	Clarify program roles, strengthen governance, and enhance transparency across all providers, ensuring no child is overlooked.
8. Deliver value for money	Introduce a new pricing structure, improve commissioning, integrate and improve systems, and ensure public investment delivers measurable impact.

These reform directions will be implemented through a suite of initiatives, some already underway, others in planning or development.

The transformation has already begun



Our reform work had begun before these reviews and inquiries. They now confirm the direction of our reform efforts with the expertise shared in each of these reports guiding our transformation.

The NSW Government has already begun reforming OOHC with **urgent stabilising changes** underway, listed below.



Ended unaccredited **Alternative Care Arrangements** – for the first time in 20 years there are no children in unaccredited emergency accommodation



Achieved a **35% reduction** in the use of High Cost Emergency Arrangements



Expanded capacity in **Intensive Therapeutic Care** by adding **150 placements** through an expansion tender



Increased recruitment of **foster carers** – recruited **253 emergency foster care households**



Expanded government-run residential care services – **new Waratah Cottages**



Insourcing more OOHC support services, including family time workers and foster care assessments



Expanded Aftercare across the state, with 45% of service provision by Aboriginal Community-Controlled Organisations



The 2025-26 NSW Budget includes a **landmark \$1.2 billion Child Protection Package** to support reform, with **\$143.9 million** to fund a 20 per cent increase to the Foster Care Allowance from 1 January 2026 – a long overdue step to better support carers. This is the **first real increase to the foster care allowance in 20 years**.

The package also funds:

- **\$797.6 million:** support for children and young people in OOHC and program design
- **\$49.2 million:** 44 new or upgraded government owned residential care homes
- **\$191 million:** to recruit and retain more caseworkers.

Urgent changes

To stabilise the current OOHC program, we introduced urgent measures to address immediate risks, improve service quality, restore oversight and control of expenditure. These changes have also built important foundations to rebuild the OOHC program.

Key achievements:

Ending Alternative Care Arrangements

We have ended the use of Alternative Care Arrangements (also known as ACAs) where unaccredited providers cared for children and young people in places like motels and hotels with rotating 24/7 shift workers instead of authorised foster carers.

Reducing High-Cost Emergency Arrangements

A major problem has been the use of high-cost emergency arrangements (also known as HCEAs) which have been a focus for reform. They are not the best care for children and are incredibly expensive - costing upwards of \$2 million per child per year.

DCJ has now created a central unit to oversee emergency care. The use of HCEAs is down by 35 per cent and in some districts HCEAs are down by over 50 per cent.

Expanding Intensive Therapeutic Care

We have expanded placement capacity in Intensive Therapeutic Care –or ITC –which is our therapeutic residential care stream for children and young people over 12 years with high and complex needs.

ITC expanded from 648 to 800 placements, including being delivered by the first ever Aboriginal Community-Controlled ITC provider.

New residential care models

We are currently rolling out two new residential care models, focused on immediate transitions and therapeutic care, further reducing reliance on ineffective high-cost emergency arrangements.

DCJ carer recruitment

DCJ has always assessed and authorised relative and kinship carers, but for many years, it outsourced foster carer recruitment to the non-government sector. DCJ has now recommenced direct recruitment of all types of carers.

Insourcing family time workers

DCJ now has family time workers who can supervise and support family time for children in out-of-home care. We now have up to 300 new family time workers across the state. 20 per cent of these family time worker positions will be filled by Aboriginal people so that Aboriginal families can be supported by someone who understands their culture.

New Waratah Care Cottages

For the first time in 20 years, the NSW Government is directly delivering residential care. Waratah Care Cottages offer safe homes where children receive trauma-informed care and therapeutic interventions and are cared for by highly trained staff. We have opened five new Cottages in Greater Western Sydney, with more on the way.

This will provide children and young people with a stable, quality home until they can be placed with a relative or kinship carer or foster carer, or they are restored to family.



How we will achieve the vision



Our approach

The OOHC Strategy sets out our high-level vision and directions for the rebuilding phases of the transformation of statutory OOHC.

DCJ will redesign and simplify the OOHC program to embed trauma-informed and therapeutic models and improve outcomes for children and young people.

Detailed changes will be carefully sequenced and be supported by a comprehensive workforce reform agenda, including new competency frameworks, cultural capability initiatives, and strengthened support for frontline staff across government and non-government sectors.

We will begin by redesigning home-based care and restoration to be launched on 1 July 2028, followed by redesigned residential care to be launched on 1 July 2029 and redesigned specialist aftercare to be launched on 1 July 2030.

This means DCJ will wind down the Permanency Support Program over the next four years. A new System Design Framework will be introduced to improve future commissioning decisions, ensure best provider fit and public value for money.

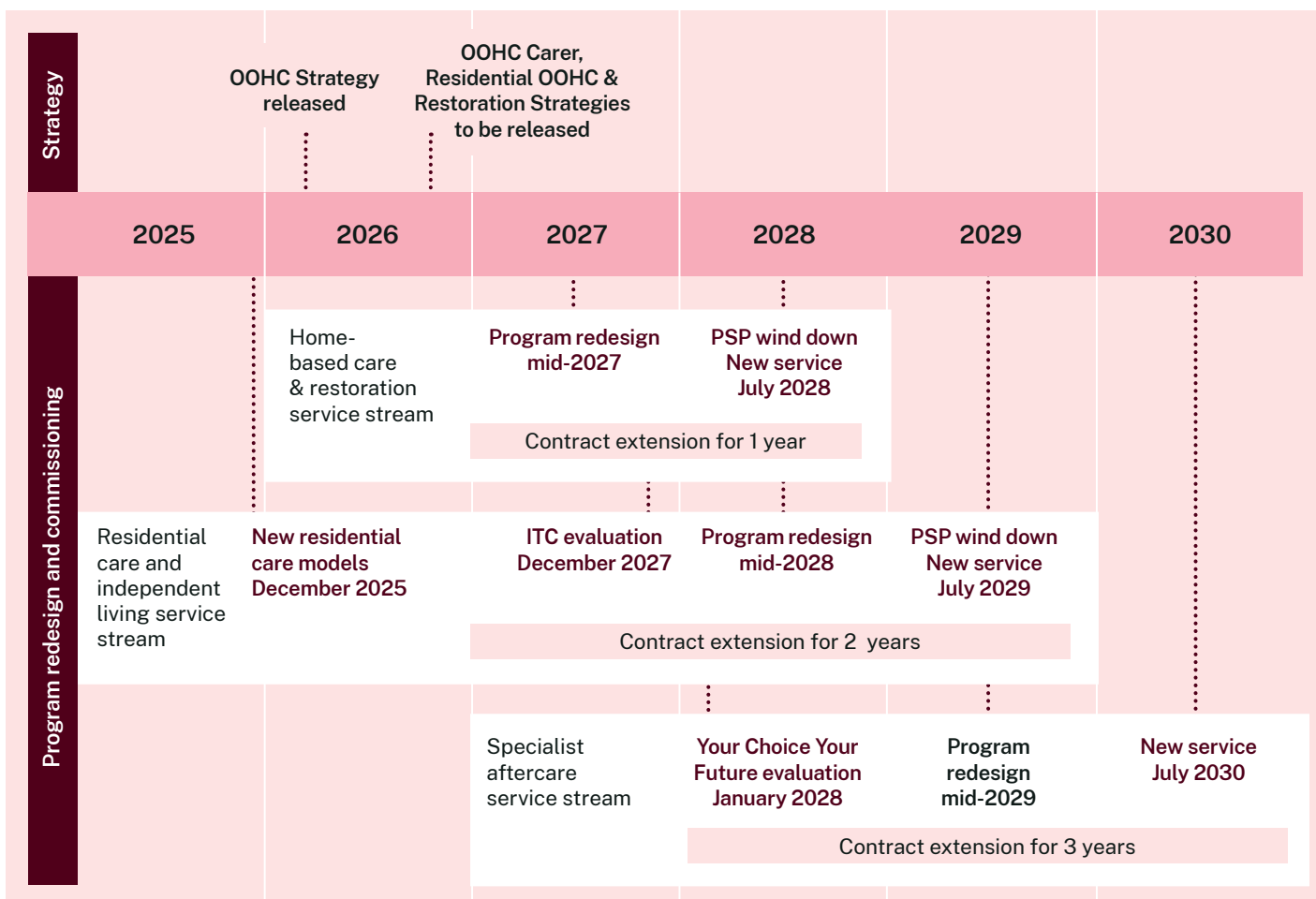
Providers delivering services in line with the framework will be offered contract extensions for one year for home-based care, two years for residential care and independent living, and three years for aftercare.

The OOHC Strategy sets the overarching direction. It will be followed by the progressive release of a suite of cascading strategies that provide the next layer of detail and guide implementation:

- an **OOHC Carer Strategy** to uplift recruitment, support and partnership with carers;
- and a **Residential OOHC Strategy and Restoration Strategy** to redesign those service streams.

Each strategy is anchored in the same vision, principles and reform directions, translating them into aligned service models, commissioning settings and performance measures.

Reform sequencing



Scope of the redesign

Redesign will cover all aspects of the OOHC program, as follows:

Oversight and accountability



Strengthen governance, commissioning and funding arrangements.



Clarify provider roles.



Embed performance management.



Enhance capability to monitor service quality, compliance and outcomes.



This work will include the following new frameworks:

- OOHC Accountability Framework.
- Integrated Quality Assurance Framework that includes:
 - OOHC Outcomes Framework
 - performance measures and reporting processes
 - practice and service quality measures
 - client feedback and complaint mechanisms.



System Design Framework.



Policy hierarchy to clarify OOHC policy settings.

Program redesign



Simplify the OOHC program structure.



Embed trauma-informed, therapeutic care and relational models to better achieve positive outcomes for children.



Introduce a simplified pricing structure.



Four service streams will be redesigned to better meet the needs of children in OOHC:

1. **Restoration** – supporting safe reunification of children with their parents, family or kin.
2. **Home-based care** – providing care in family-based settings with authorised carers.
3. **Residential care and independent living** – delivering staffed care for children with more complex needs, and placement and support through transition to independent living.
4. **Specialist aftercare** – supporting young people as they transition from statutory care to adulthood.



Redesigning the OOHC program



The OOHC Strategy outlines a phased approach to the OOHC transformation: rebuilding the program so that it has greater transparency and accountability at every level and so that government can confidently invest into it.

We will redesign the whole OOHC program to enable children, families and carers to be better supported, where OOHC is only used when necessary, for the shortest time possible, and in ways that support stable care environments with healing, recovery and connection.

To achieve this, **key policy shifts** will be made to how OOHC operates in NSW (outlined below).

	Current state	Future state
Overarching OOHC program	<p>Unclear accountability with overlapping roles between government and non-government</p> <p>Government has limited oversight of children in non-government care and the services delivered</p> <p>Fragmented and siloed service system with variable capacity and capability</p> <p>Provider mix based on providers delivering a continuum of care</p> <p>Funding model is complex, built up on the packaged care service model</p> <p>Caseworkers driven by compliance, administration and service coordination</p> <p>Aboriginal children have insufficient access to Aboriginal-delivered care and connection</p>	<p>Government-led system stewardship with stronger oversight and control of system outcomes</p> <p>Government has visibility of all children, and their case plan goals and services they receive</p> <p>Integrated service system based on child need and best-fit provider</p> <p>Provider mix based on specific segments, service types and cohorts by best-fit provider</p> <p>Simplified funding model aligned with program outcomes and activities</p> <p>Increased direct service delivery with reduced reliance on system navigation to access support</p> <p>Aboriginal children are supported by Aboriginal Community-Controlled Organisations (ACCOs) and connected to family, kin, community and culture</p>
Restoration	<p>Role confusion between government and non-government providers for matters before the court</p> <p>Rates of restoration are declining with no consistent model of support</p>	<p>DCJ retains responsibility and accountability for matters before the court</p> <p>Targeted support for families will be delivered through dedicated restoration initiatives</p>
Home-based care	<p>The funding model results in carers and placements being the resource of the authorising provider</p> <p>Limited ability for carers or children to move between the case management of different providers</p> <p>Foster care recruitment is spread across many providers with potential for conflicting incentives</p> <p>Non-government diversity is largely determined by the type of carer placement</p> <p>Positive exits from care are low with most children leaving care at 18 years of age</p> <p>Provider performance has limited impact on commissioning decisions</p>	<p>Carers are recognised as critical partners in delivering care within an integrated system</p> <p>Carers move to and from providers based on need, performance and/or carer preference</p> <p>Recruitment of foster carers is government-led to support a harmonised and integrated system</p> <p>Non-government organisations (NGOs) support children in long-term care within a placement hierarchy</p> <p>Government will lead targeted casework to drive more positive exits from care</p> <p>Commissioning will identify providers who align with the system design framework</p>

New policy settings for home-based care and restoration

A set of new policy settings will guide transformation of the home-based care and restoration service streams. These new positions will inform program redesign, policy and contractual changes and future commissioning processes.

Implementation of these new policy settings will occur over time. Program and service model changes will occur where children in OOHC may continue in existing arrangements while new models are phased in gradually.

1. Government leads OOHC carer recruitment

Government will take the lead in recruiting carers to create a simpler, more consistent entry point for people wanting to care for children. This strengthens oversight of the statewide pool of foster carers and ensures recruitment is targeted to where demand is highest, helping to reduce over-reliance on emergency arrangements and improve placement stability. Carers will also be given greater autonomy and choice to move between providers based on need and preference.

2. Government retains responsibility for matters before the court and is the main provider of restoration and guardianship casework

DCJ will manage court matters and the casework that supports restoration and guardianship so that statutory decisions are handled with clear accountability and consistent practice. This strengthens safety and speeds up permanency decisions for children, responding to system review findings about delays and fragmented responsibility.

3. NGOs provide long-term care for children with lower support needs

NGOs will focus on delivering long-term home-based care where they have demonstrated capability, supporting children who need stable, lower-intensity placements. Aligning roles in this way ensures children experience continuity and strong relationships, while enabling government to concentrate on more complex statutory and specialist functions.

4. Government leads the provision of specialist and therapeutic supports

Government will take primary responsibility for providing specialist, therapeutic and higher-complexity supports for children in home-based care. This ensures children with greater needs receive coordinated, high-quality support and improves direct oversight of the most resource-intensive parts of the program.



Government leads OOHC carer recruitment to help make it easier for people to become carers and build a stronger, more integrated care system



Government retains **responsibility for matters before the court** to strength accountability, and is the **main provider of restoration and guardianship casework** to help more children exit care



NGOs provide long-term care for children with lower support needs to enable them to thrive in supportive, stable environments



Government leads the provision of specialist and therapeutic supports to ensure children in home-based care receive the help they need



Aboriginal children in home-based care are supported by ACCOs to enable Aboriginal communities to care for Aboriginal children



Home-based care will be delivered by providers of varying size based on location

5. Aboriginal children in home-based care are supported by ACCOs

The program will increase the proportion of Aboriginal children supported by ACCOs. Strengthening Aboriginal-led delivery supports cultural identity, community connection and improved long-term outcomes, in line with review findings and state commitments.

6. Home-based care will be delivered by providers of varying size based on location

A redesigned provider mix will ensure services are delivered by the provider best placed for each area with contract sizes and roles adjusted to reflect local needs, workforce capacity, and performance. This creates a more sustainable, accountable provider mix and improves service continuity, particularly in regional and remote communities.

The NSW Government will work closely with children, families, carers, and the sector to gradually implement these new policies.

New policy settings will be finalised for residential care and aftercare following release of this Strategy.

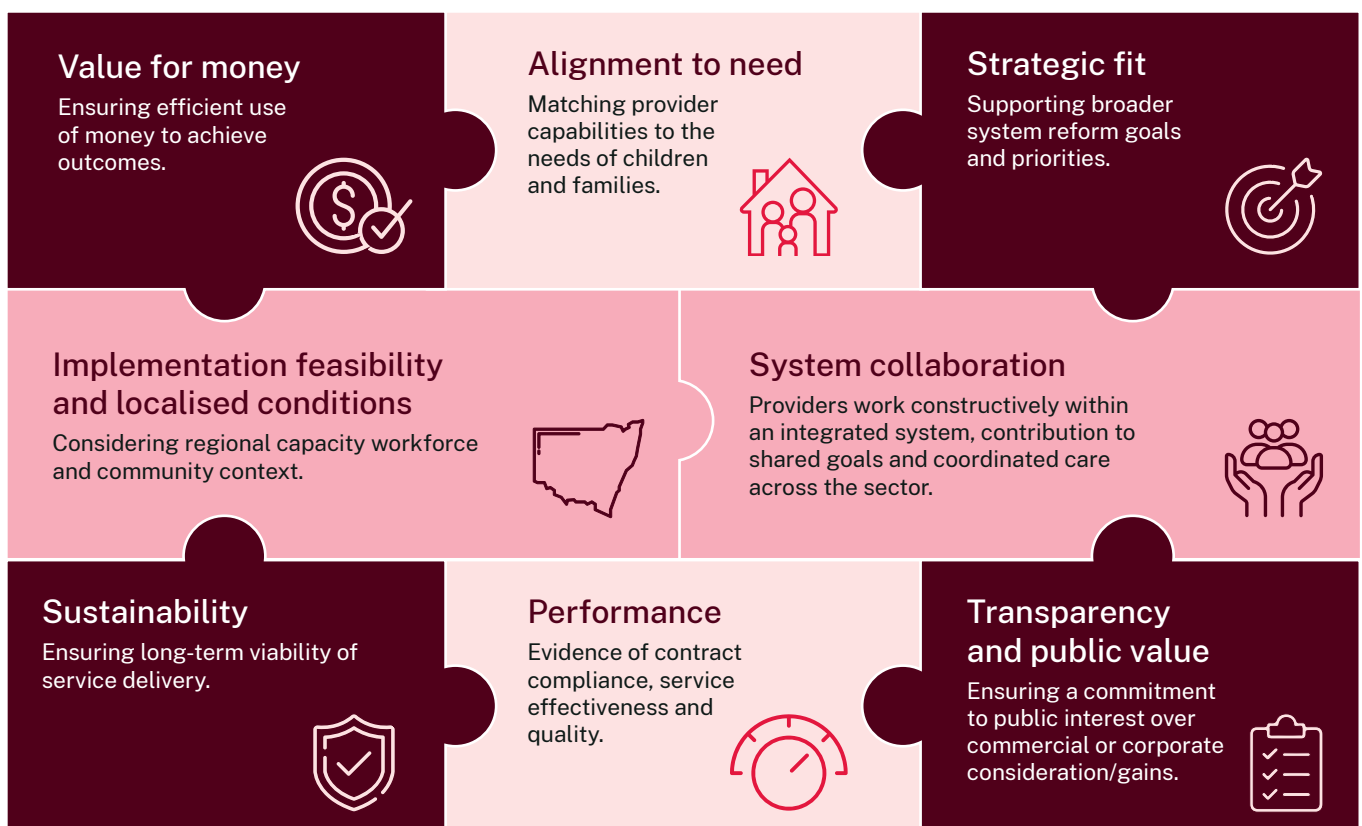
A new system design framework to guide commissioning

A new system design framework will guide the allocation of service delivery responsibilities across government, NGOs and ACCOs.

The framework will apply structured criteria to determine which providers are best placed to deliver services tailored to specific regions, cohorts, and care types.

Key criteria will include:

- **Value for money** – ensuring efficient use of money to achieve outcomes.
- **Alignment to need** – matching provider capabilities to the needs of children and families.
- **Strategic fit** – supporting broader system reform goals and priorities.
- **Sustainability** – ensuring long-term viability of service delivery.
- **Performance** – evidence of contract compliance, service effectiveness and quality.
- **Implementation feasibility and localised conditions** – considering regional capacity, workforce, and community context.
- **System collaboration** – providers work constructively within an integrated system, contributing to shared goals and coordinated care across the sector.
- **Transparency and public value** – ensuring a commitment to public interest over commercial or corporate considerations/gains.



Implementing the reform

Next steps

Cascading strategies

The Strategy will guide a suite of aligned cascading strategies that will provide greater detail on specific components of reform. These include:

- **OOHC Carer Strategy**, which focuses on uplifting carer support, capability and experience for children in home-based care.
- **Residential OOHC Strategy and Restoration Strategy**, which set out targeted reforms for these service streams.

Each of these cascading strategies are aligned with the same vision, guiding principles and reform directions as this overarching OOHC Strategy.

Contract extensions

Existing providers who have demonstrated alignment with the new system design framework will be offered contract extensions to support continuity of service delivery.

Timeframes

DCJ is progressing multiple phases of reform and commissioning concurrently and is extending service contracts to allow sufficient time for redesign, consultation and transition. Program redesign and commissioning will be undertaken for restoration and home-based care first, followed by residential care and specialist aftercare. The NSW Government will work with key stakeholders during design and implementation phases.

Additional policy changes, contract changes and program improvements will be developed in the coming months and years as we implement this Strategy.

Home-based care and restoration services under the new OOHC program will begin from 1 July 2028. This will set the foundations for a long-term transformation that drives healing and recovery and helps more children to be restored to their families in NSW.





The OOHC Strategy's reform directions will be implemented through a suite of initiatives, some already underway, others in planning or development.

Reform directions	Initiatives and activities
<p>1. Keep children with family and community</p>	<p>Strengthen restoration and kinship care pathways to support safe reunification and maintain family and community connections for children in care.</p> <ul style="list-style-type: none"> • Develop a Restoration Strategy and design a new restoration model • Introduce a reunification and restoration initiative for Aboriginal children and families • Ongoing implementation of Active Efforts
<p>2. Strengthen recovery, healing and wellbeing</p>	<p>Expand access to therapeutic supports, embed trauma-informed practice across all care types, and improve outcomes in health, education and emotional wellbeing.</p> <ul style="list-style-type: none"> • Establish a cross-agency Child Safety and Wellbeing Reform Forum • OOHC program redesign to include more integrated, government-led therapeutic service models
<p>3. Empower service users</p>	<p>Elevate the voices of children, families and carers in decision-making, service design and program processes.</p> <ul style="list-style-type: none"> • Deliver DCJ complaint management reform • Expand client voice and experience mechanisms
<p>4. Expand Aboriginal-delivered OOHC</p>	<p>Accelerate the transition to ACCOs as primary providers for Aboriginal children.</p> <ul style="list-style-type: none"> • Leverage Aboriginal partnerships to support OOHC redesign and new service models • Develop Aboriginal Sector Development Strategy • Accelerate Aboriginal OOHC Transition with carers offered a choice to confirm a preferred provider
<p>5. Recognise carers as key service partners</p>	<p>Improve carer recruitment, support, retention and participation, with a focus on kinship and culturally responsive care.</p> <ul style="list-style-type: none"> • Release and implement OOHC Carer Strategy • Centralise government-led OOHC carer recruitment • Undertake annual OOHC carer survey to inform continuous improvement • Deliver advocacy and support services to carers
<p>6. Increase service quality</p>	<p>Design and implement evidence-based care models and strengthen performance monitoring, ensuring services are safe, consistent and outcomes-focused.</p> <ul style="list-style-type: none"> • Release and implement Residential OOHC Strategy • Implement digital solutions to drive better placement matching • Design new assessment and placement tools • Conduct evaluation of ITC • Develop sector-wide competency frameworks for caseworkers and residential care workers
<p>7. Improve oversight and accountability</p>	<p>Clarify program roles, strengthen governance, and enhance transparency across all providers, ensuring no child is overlooked.</p> <ul style="list-style-type: none"> • Re-establish DCJ as system steward • Implement OOHC Accountability Framework • Develop overarching Integrated Quality Assurance Framework, including OOHC Outcomes Framework • Strengthen contract management framework
<p>8. Deliver value for money</p>	<p>Introduce a new pricing structure, improve commissioning, integrate and improve systems, and ensure public investment delivers measurable impact.</p> <ul style="list-style-type: none"> • Develop new cost and pricing structures • Introduce a new system design framework to improve future commissioning processes • Deliver new fit-for-purpose government-owned ITC properties

