Safety in Care - Pre-Assessment Consultation (PAC) – Resource

The Safety in Care mandate requires you to invite the Reportable Conduct Unit to a PAC if you have received allegations relating to a carer, household member or Alternate Care Arrangement staff. This resource is ONLY to be used in the event that an RCU staff member is not available. It will help guide you to respond in ways that meet our obligations to the safety of a child, while simultaneously meeting obligations under the Reportable Conduct Scheme.

When responding to the safety of children in care, where allegations are made against a DCJ authorised carer, other adult household member or Alternative Care Arrangement staff, it is important to understand the two parallel processes that assess a child's safety and the viability of their placement;

- ***alternate assessment***
- ***reportable conduct investigation***

This resource will assist practitioners to plan for Alternate Assessment responses when the Reportable Conduct Unit are unable to attend the PAC.

The PAC is central to preparing and planning your assessment of danger and risk for children/young people in care. It is here that you consider allegations, the impact of these on a child/young person and their family and ways to connect and hear from all of the important people in their network. This is often a key source of information in a reportable conduct investigation and as such **you must take verbatim notes when talking to carers, household members and children during this assessment, specifically recording the words you use to raise the allegation and the response provided by the carer, child and any other witnesses.**

Reporting Allegations of Criminal Offences to Police

If there is an alleged serious indictable offence or less serious indictable offence, which meets the criminal threshold, you must report this information to police before conducting the response. Please use the link indicated for further guidance on how and when to report to Police. This will ensure that any potential criminal investigations are not jeopardised. Community Service Centres (CSC's) should ask Police to give them a timeframe for their investigation, so DCJ can ensure risk issues are managed in a timely manner. Reporting information is important because not all criminal offences are referred to the Joint Child Protection Response Program (JCPRP).

If a matter is referred to the JIRT Referral Unit (JRU) it does not need to be separately reported to the Police. If the matter is accepted at the JRU, the Joint Investigation Response Team (JIRT) intervention will include a criminal investigation. If the matter is rejected at the JRU, the JRU will ensure it is referred to the Police if required.

Unless there is compelling evidence the alleged conduct was lawful, trivial or negligible, the matter should be reported to Police. The decision to report is made at a district level, when the information is first received (via helpline report, disclosure etc.). Delegation for assessing the decision to report an allegation of criminal offence is made by a Manager Casework. If the allegation is NOT going to be reported to police, the PAC must include a rationale for decision-making.

To report a serious or less serious indictable offence to the police:

1. Report the matter to the Local Police Station and ask to speak to the Crime Manager (or Police Supervisor). Inform them that you have information about an offence that you need to report to them. Ask how they would like to receive this information (email, phone, fax

etc.). Sometimes Police will ask you to complete and send a send a Serious Criminal Incident Report (PDF, 404.95 KB).

2. Record the name of the Officer, event number, along with the information provided and any correspondence, within your PAC.
3. If Police are unable to provide you with a timeframe for when they will respond, make a decision about responding to safety in care based on the immediate risk to the child.

Please refer to the Reporting allegations of criminal offences to Police mandate for further information.

Reportable Conduct Unit (RCU) - The importance of partnership.

When responding to the safety of children in care where the carer has been alleged to have caused harm, it is important to ALWAYS consult and partner with the Reportable Conduct Unit (RCU). An RCU investigator must be invited to your Pre Assessment Consultation (PAC) and a rationale provided in your PAC record if they are unavailable to attend.

This collaboration can stop the potential for children and carers being re-interviewed and will simultaneously gather the evidence needed for both the alternate assessment and the RCU investigation. Timely assessment maintains a child's safety, preserves important relationships, limits contamination[1] and upholds the dignity of children and carers. The RCU tip sheet provides more information around the process and thresholds of RCU investigations.

Your priority is the safety of the child**. The alternate assessment is likely the first time carer allegations and their impacts are discussed with both the child and the carer.** Your assessment assesses if the child's experience of these dangers are 'immediate' and if they are 'safe, safe with plan or unsafe.'

Note: Any safety plans or placement changes made as a result of your assessment will require the approval of the DCS. When there are quality of care concerns a Carer Review is ALWAYS completed.

Safety in Care Pre Assessment Consultation- have you…

PRACTICE APPROACHES	QUESTIONS (not limited to)

Been curious about culture?
 	
I need you to… Work with me, my family and community to support me to keep learning about my culture, living my culture and to keep me connected to family who have the answers.
	• Is the child in a culturally appropriate placement?
	• Have you consulted Aboriginal or culturally and linguistically diverse caseworkers about the reported concerns and discussed your response?
	• Have you planned the next cultural consultation?
	• How are you building cultural safety into your visit? Consider these questions-
	  ○ Tell me more about your culture and the way it shapes your life and parenting?
	  ○ How would you like to talk about the role of your culture and community today?
	  ○ How can we best involve any of the supports or leaders from your community to support you and the family?
	• How have we supported the child's cultural and identity needs in their current Cultural Support Plan?

	• Plan your conversations with a child, ideally they should only be formally interviewed once.

[1] Contamination occurs when investigators impede or negatively influence the interview process, thereby causing the subject to provide inaccurate information.

Thought about ways to connect with and listen to children? *I need you to think about my safety regardless of where I live. Be open-minded and remember that people can change. Work with me and those who love me to create change in a way that suits us.*	○ Planning may involve ways to connect with the child using safety centred practice approaches. ○ Document conversations verbatim. • Have we considered who we need to talk to first? ○ Children should be interviewed first to support the child's safety and wellbeing, unless there are exceptional circumstances. ○ Consider how talking with the child, particularly if they confirm an allegation, might impact their future safety. What do you need to do to minimise any adverse consequences? ○ The sequence and location of interviews must take into account the risk of any parties' accounts being influenced or contaminated by prior interviews. ○ Where is the child being spoken to (location) and who is there to offer support? ○ When there are siblings involved, speak to the children individually- this will limit anxiety if they worry about how their experience will be viewed or heard by their siblings. • Ask usual routine questions -e.g. if it happened on the weekend say '*tell me about your weekend*'. If you cannot get particulars on where the allegation occurred, ask other identifying questions such as; ○ Do you remember when this happened? ○ When did this happen? daytime or night-time? How do you know? ○ Was it a school day or weekend? ○ Tell us exactly what happened? ○ Who was around at the time? ○ What did they do/say? ○ Where did this happen; which part of the house/property? ○ Where were you standing/sitting etc.? ○ Did you tell anyone about what happened? If so, who did you tell and what did you tell them? • When questioning children about disclosures of physical abuse, where appropriate, try to obtain further details (*consider the age and development of the child when planning questions*); ○ I'm wondering if you can tell me more about how hard you were hit- If 0 was not hard and 10 was the hardest you've ever been hit- what number would you tell me? ○ Tell me more about what the skin looks like where you were hit? ○ Tell me more about how many times (insert name) hit you? ○ How many times on each occasion? ○ Where on the body? (using a body chart and guide can be helpful for this). ○ What was used (hand, implement etc.)? ○ If a hand was used – what was the hand like (i.e. open hand, a fist or something else)? ○ Who else was there? ○ What happened just before you were hit? (try to ensure you use language consistent with the allegation i.e. hit, strike, kick, burn etc.). ○ Were you threatened? ○ What was said by the people there?

	○ What did you do when this happened? ○ Tell me more about the ways you kept yourself safe? ○ I'm wondering where you learnt how to do this? ○ How did people around you respond? ○ Has the child told anyone else?
Thought about ways to connect with and listen to carers *I need you to think about my safety regardless of where I live. Be open-minded and remember that people can change. Work with me and those who love me to create change in a way that suits us.*	• Call the carer before your visits to let them know who you are and why you need to speak to them. • ***Note- Ensure that carers are not informed about allegations prematurely, unless there are exceptional circumstances. It is important that children are interviewed prior to any conversations with carers about allegations. Children need to be able to have trust in caseworkers when disclosing allegations, and have confidence that their experiences are being heard without prejudice.*** • Let carers know that they can have a support person while you talk. *I need to come and speak to you about the worries we have for <insert child/young person aka Charlotte> and the way she is being cared for in your home. These conversations can be hard and we will need you to be open with us about the way you are parenting Charlotte. We want to make sure Charlotte is happy and safe and we want you to be a part of these conversations. We will also hear from you and listen to the ways you care for and connect with Charlotte. Having a person you can talk with or take a break with is important in these conversations. We want you to feel supported. Is there a person who can support you during our conversation? We will be there at 2:00, is there anything else we can do so you feel more comfortable?* • ***Note – this support person should not be the other carer especially if there are allegations about both carers or one of them is identified as a witness to the allegations.*** **Examples of a support** ***person may include a representative from My Forever Family, a community or cultural member etc.*** • It must be clear that support people are not advocates. The carer and the support person may talk privately by asking for a pause but the support person is not able to involve themselves in the interview. • Take verbatim notes of both the questions asked and the responses given. • Speak with all members in the household - both adults and children. • ***Note- An adult residing in the home of longer than 3 weeks are considered a household member and subject to reportable allegations***. • Speak to each carer separately. This is particularly important where there are serious allegations. • When questioning carers about harm, obtain further details; ○ Tell me more about how you care for Charlotte? ○ I'm wondering what happens when Charlotte has something to celebrate- how do you recognise and reward good things in your home? ○ I'm wondering what happened when Charlotte has not followed the family rules- how do you talk about discipline in your home?

	• If you cannot get particulars on where the allegation occurred, ask other identifying questions such as;
	  ○ Tell us more about what happened yesterday/last week/on the weekend etc?
	  ○ I'm wondering if anything happened that I would be worried about?
	  ○ I'm curious how you think Charlotte or people wanting to keep Charlotte safe might have responded to this?
	Note- Carers may have questions about the allegations and they have a right to understand how they will be involved in the investigation. The safety of children remains the paramount consideration, and we must ensure that we are not revealing information to the carer that they are not entitled to, such as: the identity of the reporter; any witnesses that may be interviewed; what information has been obtained by DCJ; and, whether the allegations were made by the victim or another person etc.

Considered the way you need to record and document?
 	
I need you to ….
Be fair and honest with your words – when talking and writing. Let me know when and why you are writing notes. Check with me that the information you are recording is correct, respectful and clear.
	• Record your conversations as verbatim including;
	  ○ questions asked
	  ○ responses given
	  ○ whether or not allegations were directly raised with them.
	• Notice and record observations at the time your assessment;
	• This may include:
	  ○ How the child or young person presented (their body language during interview)
	  ○ Any relevant observation about their appearance (marks, injuries, general hygiene etc.)
	  ○ How the Carer presented during the interview
	  ○ Descriptions of the home i.e. any hazards or layout of the home if relevant to the concerns.
	• Attach any photographs[2] that may have been taken by other investigators (health, Police etc.) this includes photos of the home, injuries etc.
	• **The RCU will access your recording and documentation via ChildStory. This will inform part of the information/evidence in their Reportable Conduct Investigation.**

Language Matters.

Caring for a child is a huge commitment of your time, family, resources and heart. In assessing the safety of children in care it is important we work to both hear and value the experiences shared by children as well as respect and support the carers and family that surround them. It is important that the language that we use to raise allegations with a carer for the first time does not make any assumptions about whether or not the allegations are true. It is also important that carers understand all allegations if there is more than one. Be clear and specific about the concerns that have been reported. If the child raises new concerns when interviewed, you should also raise these with the

[2] If photos are taken, please ensure that they are attached to ChildStory where appropriate and accompanied by a brief description including date and time the photo was taken, whom the photo is of and details about the injury. A photo of an injury should include one picture that contains both the child's face and the injury.

carer. Use your PAC to plan how you will raise any new allegations, and how this will be considered when determining the child's imminent safety.

If at times you need to respond to assess a child's safety in care and RCU are unable to partner in the assessment process use the following words to explain what is happening next.

Talking with a child

Thank you for sharing this with me. A home where you are safe, connected and loved is your right and I can hear that this is not what you had/have right now. We are going to spend some time planning with your family/foster family (refer to them as the child does) so that this changes. We want you to help us with the ideas and words needed in these plans. We want to know what it is you and your parents/carers need so that you and your home are safe.

Other people from DCJ will be working with your carers/parents about how their choices have broken some of the commitments they made about the way they would take care of you. They may have some work to do so that the way they care for you changes.

Finding ways for the two of us to talk during all of this will be important. I want to know how things are changing and what this means for you. Here is my information, call me if you need anything. I will talk to you again – (fill in details, be specific about a time and place)

Talking with a carer

A home where <insert child name aka Charlotte> is safe, connected and loved is her right. We know that this is important to you too, you have been taking care of Charlotte for X years/months.

It is important you understand that DCJ assesses safety for Charlotte differently. Because she is in care, our threshold for danger and risk is lower- she needs more of your care, connection and support. Charlotte has already experienced trauma and can't live with her parents, she needs a home to grieve, heal and recover in order to be safe. There have been allegations made about Charlotte in your care <insert allegation>, while allegations like this are being made we worry Charlotte is not safe.

Tell us more about what happened…

We need to work together to plan around the changes that have to happen today <name allegation> so that Charlotte is safe and happy. This will involve planning together so that we better understand what you and Charlotte need. Changes need to happen today- both yours and Charlotte's ideas will be important here.

The Reportable Conduct Unit (RCU) will be working with you about how your choices may have broken the commitments you made in the carer code of conduct. I will talk to you about safety plans and ongoing action plans. RCU will discuss their process with you and will undertake their own assessment of this information and share their findings with you. All of our worries will come together later in a carer review.

RCU will make contact by first phoning you. They will then send you a detailed letter outlining their concerns.

This work can be hard, I want to make sure you have the people you need and trust around you. Let's talk to a carer support worker (district based and/or accessed through My Forever Family) and the people in your life that help you when things are difficult. Here is my information, call me if you need anything. I will talk to you again (fill in details, be specific about a time and place).

An ethical and balanced approach

It is important that you are also willing and able to hear about the good times in a child's home or a carers experience. Think about ways to engage your holistic assessment skills to hear about these times too-

Tell me about a time when you did feel safe and supported at home? What was happening then? What could we bring back now?

Tell me about a time when you were able to offer Charlotte the care she most deserves. What was different then? Who was around you? What could we bring back now?

Safety Planning or Placement Change

If your assessment results in a 'safe with plan' or 'unsafe' outcome you must consult with your DCS for approval to either;

* develop a safety plan with the carers

* change a child's placement.

Read more about Safety Planning and the importance of reviewing Safety plans in the 'Safety Planning Guidance' resource.

Working with Carers

It is important that you remain curious about the experience of the carer, the questions you ask to hear more about how a carer;

- parents the children they care for
- manages stress and anxiety
- marks milestones and joy
- finds safety in the anchors of community.

This will build relationship and better assess the safety needs of the whole family.

It will be important to consider:

Family Context	• Has there been a recent family death or trauma? • Further placements and collaboration with other CSC's across the district or across the state. • Have carers experienced/experiencing significant stress- natural disaster, pandemic or lockdown worries.
Reputational Risk	• If the carer lives in a small community, who is in a position of authority?
Media Risk	• If the concerns are serious and there is media interest.
Employment	• If the carer works in secondary child related employment (i.e. they are also a childcare worker, teacher etc.), the concerns may need to be shared under ch16a with the employer which may have an immediate impact on their employment.
Document if…	• If there are extenuating circumstances that will affect the way the assessment is carried out, document a rationale within the PAC.

It will be important to…

Through ongoing casework, monitor the safety and risk to the carer and child's mental and physical wellbeing now that the allegation has been discussed with them. Further plans for monitoring this should be discussed in the assessment consultation.

RCU will be in contact…

Let carers know that a DCJ RCU investigator will make contact to speak to with them further about the allegation. The information discussed in today's assessment will be shared with RCU to support their assessment of the carer's conduct.

Explain to the carers that the Office of the Children's Guardian is responsible for overseeing and monitoring the way DCJ assess reportable allegations made against employees, including authorised carers and their household members. Their role is to ensure investigations are properly conducted and that appropriate action is taken to manage risk. In some instances, information from RCU investigations will be reported to the OCG and can influence a carer's Working with Children Check (WWCC). This is for serious assault and allegations of a sexual nature.

In most cases Carers can continue to care while an RCU investigation is ongoing and will continue to receive payments. It will be important that carers continue to commit to plans that manage the danger and risk to the child/young person in their care. This includes ongoing visits and conversations with the child in care and the whole extended family.

Let carers know they can also call and speak to RCU investigators if they are worried or would like further information about the process. Provide the Carer with the Information for Carers about RCU investigations resource. Encourage carers to read this resource and reach out to the RCU if they have further questions.