



Enabling the Community Sector to respond to the Wood Inquiry

**Response by the Australian Association of Social Workers
to the Special Commission of inquiry into Child Protection Services in NSW
(The Wood Inquiry)**

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Executive Summary

The Association recognises that problems in Child Protection in NSW and in other Australian jurisdictions have come about as a result of complex pressures. These are political, organisational and structural, and therefore, we do not apportion blame to practitioners, managers or senior executives within the bureaucracies and agencies delivering services. On the contrary, the AASW regrets that the efforts of human services professionals in this field go largely unrecognised. Many have worked long and hard to improve the lives of children, young people and their families and have done so amid a chorus of personalised criticism from those who do not fully understand the complexity of their task. We honour their talents and their resilience.

In NSW and across Australia, there are concerns about the capacity of child protection agencies to cope with demand, the quality of practice, children in out-of-home care and outcomes for children and families generally.¹ The AASW submission into the Wood inquiry focused on the need for structural and systemic change in NSW, arguing for change in the existing set of assumptions and paradigms that underpin Child Protection Services. We called for ethical, value driven and relationships based practice that is

grounded in neighbourhood and community based social care systems.

A major barrier to enhancing child protection systems in NSW has been problems in recruitment and retention of a skilled workforce. It is important that Departmental policies and procedures are implemented to support a well-trained and highly skilled workforce, working from a diverse base. We are pleased that workforce issues featured prominently in the Report.

We are pleased that the development of partnerships with the non-government sector has been highly prioritised. However, we are disappointed that the issue of parity of pay, adequate conditions and a lack of community infrastructure were not properly addressed. Without due attention to the resources and the capacity needed in the community sector, the sector will struggle to provide high quality services to vulnerable children and their families.

The AASW is strong in its support for a focus on prevention and early intervention services. A focus on prevention would enhance responses at all levels of government, meeting a broad

range of family needs. Furthermore, it is clear that the current child protection system has become unsustainable and is struggling to meet demand.ⁱⁱ Significant efforts are therefore required to reduce the number of children being reported in NSW, and the number removed from families and taken into state care. We are disappointed that the report did not hand down stronger recommendations in this area.

Frontline child protection services in NSW and elsewhere must reorient their focus to the child in the context of the family, and on family assessment. This approach recognises that prevention is the first and foremost task of all child protection services. At a national level, a threefold categorisation of services as primary, secondary and tertiary would be helpful,

as it would harness a programs responding to family need, such as child care and income maintenance.

We congratulate the Inquiry for making strong and specific recommendations to address the needs of Indigenous children, their families and communities. The over-representation of Indigenous children in child protection systems across the country is a major cause of concern to social workers. While we reject calls for income management or quarantining unless they are supported by the Indigenous people involved, there is clearly a welcome attention to the needs of Indigenous organisations, and a willingness to work with Indigenous communities and the strengths they already have, which can lead to positive outcomes for these children.

Summary of Recommendations

Workforce

The NSW Government must actively develop a strategy to attract, recruit and retain high quality and dedicated human services professions. Working cooperatively with employers, training providers, unions and professional associations, the strategy must have the aim of supplying adequate qualified staff to meet the demand for services that will increase in the event of a transfer of services to the community sector.

Social work, and associated human service professional qualifications, must remain at the heart of the entry qualifications to the child protection system, both in government and in the community sector.

The NSW Government should work with employers, professional associations, unions and training providers to develop improved learning pathways for staff in the public and community sectors, with the AASW accredited Child Protection Practice Standards a useful model.

The NSW Government should introduce incentives to attract and retain students and new graduates. Such measures may include increased practice placements in child protection agencies (both public and community sector); better pay and conditions for staff in both sectors; and better pay progression for increased experience and recognised skills improvement through an accredited model of CPE (continuing professional

education).

Duty of Care

The NSW Government must be clear about whether the State or the community sector agencies carry the 'duty of care' for children and their families not reported to DoCS under the proposed amendments.

The NSW Government should consult widely on what is required to enable the community sector to adequately meet the new demand for services from vulnerable children and their families.

Accreditation

The NSW Government should investigate the options for professional accreditation of staff working in the child and family services, public and community sector, looking at existing models for other professions in Australia and for human service professions in other jurisdictions, such as New Zealand and the UK.

The NSW Government should reform the funding arrangements for the community sector to allow for longer contracts, an end to competitive tendering and other measures to ensure a high quality staff and best practice systems can be introduced.

Introduction

The Australian Association of Social Workers (AASW) is the professional body representing social workers in Australia.

Social workers are employed at the interface between the person and their environment, and AASW members provide a range of services across a number of different areas. These include child and family welfare, child protection, disability, rehabilitation, income support, corrections and juvenile justice, housing support and homeless services, health and mental health. According to the Australian Bureau of Statistics, 13,500 professional social workers are currently practicing in Australia.ⁱⁱⁱ

The social work profession has a long history of engagement with child and family welfare systems in Australia and internationally. It is a major field of practice for social work graduates who work in multidisciplinary teams in human services departments and non government agencies throughout Australia and at all organisational levels in operational and policy areas. In thirty years of inquiries and other high profile reviews of the actions of systems and individuals within these systems, social workers have featured largely as practitioners and decision makers.

No other profession is as inextricably linked to child protection and well-being. Indeed in many cases “social work” is seen as synonymous with child protection, and the term “social worker” is used at times to describe staff in child protection agencies, even though many frontline staff in these agencies are not social workers. Throughout the States and Territories, social workers play leading roles in child protection agencies.

Social workers are also widely employed in the community sector, with many in management or senior roles, as well as others employed as face to face staff in not-for-profit agencies. The sector and the profession share many values, such as compassion for people experiencing stressful life events, a commitment to work in the best interests of clients, and a critique of the structural factors which impinge on the lives of poor and disadvantaged people.

Social workers undertake studies in sociology, psychology, social policy, child, adult and family development, mental health, intellectual disability issues and the law as it applies to child protection. In its role as the accreditation authority for all Australian social work programs, the AASW has recently developed curriculum standards on child protection. All accredited social work programs at

Australian Universities will need to show that their graduates meet these high and uniform standards.^{iv} Social work students, as part of their training, also complete substantial periods of supervised practice in a range of health and community service settings, and often these include child protection services. Few other professional disciplines are so immersed in the areas of knowledge essential for quality relationship based child protection practice. As a result, social workers are recognised throughout the world as the core professional group in child protection policy, management and practice.

This short report is not a comprehensive response to all of the recommendations of the Special Commission of inquiry into Child Protection Services (the Wood Inquiry). Given the short period of consultation between the release of the recommendations in November 2008, and the NSW Government's commitment to respond by March 2009, there is not scope for that here. The urgency shown by the NSW Government in committing to respond publically and quickly is appreciated, as are the Government's efforts to work collaboratively with representative agencies of the community sector and the relevant unions.

This report will focus on one of the central recommendations from the Wood Inquiry, the proposals to 'contract out' services to the community sector for children and their families judged not to be at significant risk of harm. The AASW welcomes the broader involvement of the community sector in working with vulnerable children and their families, but is concerned that without adequate infrastructure, both human and financial, the sector will not be able to provide the best possible services to these vulnerable clients, resulting in families and children remaining vulnerable, unsupported and at risk of harm.

The report summarises the issues that will need to be addressed to ensure the community sector is able to provide these children, and their families, with the services they need to improve their well-being and reduce the risk of harm and neglect.

The appendix provides a short response on a number of the most relevant recommendations to the AASW.

“Contracting out” to the community sector

The Wood Inquiry makes it clear that at present the vast majority of children identified as not at high or immediate risk receive no service from DoCS.

These families are often experiencing stress or crisis, and / or have little or limited coping strategies. When they are identified in other parts of the child protection system, it is often a social worker making the notification to DoCS, usually aware that the system will not provide the child or family with the support needed.

Therefore, the AASW supports strongly the recommendations to enable the community sector to provide these children and their families with the support and assistance they need.

That said, concerns exist in the community sector, and among its workers, about the responsibility being passed over to it from the Government. In essence, this question centres on the ownership of risk and responsibility for ‘contracted out’ families – that is, those children not at significant or immediate risk, but identified as in need of support.

If the community sector is to be enabled to adequately support these children and their families, DoCS is going to be required

to address a number of critical issues which currently inhibit the community sector from fulfilling this role to a high standard. This paper addresses a number of these issues. Unless the sector is resourced to enhance its capacity to meet the needs of its potential clients, it cannot be assumed to be carrying the risk for these services, and responsibility for failure will lie jointly with the Government, for failing to adequately resource the sector agencies, and with the agency for failing to meet the needs of its vulnerable clients. This is a recipe for continued risk avoidance and blaming, a feature all too apparent in the existing child protection system.

Workforce Issues

For NSW and other jurisdictions to specifically deal with its workforce shortages, considerable effort is required to address the resource issues of supply and demand of the workforce, now and into the future. It is important, for example, as a specific workforce planning issue for the sector to recognise that there are human factors that strongly impact on the nature, retention and quality of the care and protection workforce. The work of protecting children involves a complex and wide set of skills, abilities, experience and knowledge in order to be effective in a challenging and changing work environment.

Whilst we recognise the need for recruitment from a range of different disciplines to increase the pool, and provide the range of relevant skills, we are concerned about recent proposals to further diversify educational backgrounds to include, for example, police, nurses and those with diploma qualifications will not be an effective strategy. The AASW is concerned that the core of child protection agencies should continue to be built upon human service professionals, such as social workers, whose training and professional disciplines are consistent with values of support and empowerment.

We therefore strongly support the measures and recommendations in Chapter 3 aimed at ensuring that all managers have a tertiary qualification and experience in child protection. Social workers in child protection caseworker positions have accredited tertiary qualifications which includes curriculum on child protection and well-being, they have specialised skills and, when they are AASW members, are accountable under the AASW Code of Ethics. Social work is the one profession which focuses on the interface between care and control, and enables its practitioners to work within such contested fields, applying a strong base of knowledge and values. These are important skills and safeguards for children and families who find themselves involved with child protection agencies. Attracting and retaining this workforce should be made a key priority.

In particular, we have suggested that recruitment continue to be primarily focused on graduates with professional qualifications, eg, social work, psychology and welfare. We are not convinced that a broadening of the range of qualifications in large numbers is either appropriate or effective.

We also hope recruitment will be assisted by DoCS developing stronger relationships

with tertiary providers to encourage more child protection specific curriculum in undergraduate degrees and increase field placement opportunities. Social work departments at some universities are investing resources in the development of child protection specific curricula, with one Queensland university offering a Graduate Certificate in Child Protection Practice through their social work department.

The introduction of other incentives, such as funding support to students, internships and hand higher pay for those graduates who have specialised child protection knowledge and experience will help to achieve these goals.

We are also very supportive of suggestions and recommendations in Chapter 9 aimed at providing the workforce increased training and professional opportunities. We believe the effect of this will be two-fold – as well as helping to build skills in the workforce, it is also likely help retain staff for longer periods.

We believe that a powerful strategy to ensure that staff have the appropriate knowledge, values and skills leading to increase retention is the provision of specialised professional development. This can occur at an undergraduate level with specific child welfare input and

opportunities for child protection field placements.

Other solutions include accredited courses at the post-graduate level, providing study assistance and other support to staff wishing to further their skills and knowledge at the post-graduate level to assist workers to further develop the more specialist skills and knowledge required for child protection practice. There is evidence from the ACT that retention of staff who are engaged and supported to complete postgraduate study has increased.

The AASW would welcome the opportunity to work cooperatively with Government, not-for-profit employers, unions and training providers (both TAFE and Universities) on pathways for continuing professional development and education of newly recruited staff.

Who carries the risk?

In any Government process of contracting out to the non-Government sector (whether not-for-profit or the community sector), one of the key issues is certainty over who carries risk and responsibility. In the private sector, this is usually understood as who carries the risk for making a financial loss, or stands to make a financial profit, in any operation. In the community sector, the reward and risks may include financial incentives, but they also include the risk of failure in the duty of care to clients. The 'costs' of this failure is more children entering the child protection system, and potentially more tragic child deaths.

The Government must be clear in its response in March where it stands on the ownership of risk in the event of failure. Working with people, especially people under stress, is inherently challenging, and in any system things will not go perfectly, but the child protection systems must do everything they can to safeguard the welfare of vulnerable children. When things go wrong in the contracted out services, should it be the agency explaining to a Commission of Inquiry about the lack of a rigorous process, a lack of oversight, or a lack of safeguards, or, should it be the Department explaining why they have not provided adequate governance arrangements and resources to the agencies charged with delivering the services?

Primary responsibility for the care and well-being of children rests, rightly, with families. In the event of families not being able or willing to bring up their children safely, communities must step in through their elected Governments and through the agencies that have dedicated themselves to working with vulnerable children and their families. It is only in the small number of cases of failure that these questions are important, but given that system failure can lead to tragic outcomes, the importance of ownership of risk and responsibility cannot be overstated or ignored.

It is not clear from the recommendations of the Inquiry who Justice Wood recommends to carry responsibility, but it is important that the Government makes this clear in its decisions over the coming weeks and months.

If the NSW Government hands over to the community sector ownership of the risk, the community sector is obliged to demand of the Government that it is adequately resourced to minimise this risk of failure. In human services, the critical resource is human resources, which means adequate, high quality, motivated staff. Carrying the risk without the resources to do so is a recipe for continued blame shifting in the event of failure. And all too often, failure in community services results in tragedy.

What the NSW Government must do to minimise the risk of failure

Other jurisdictions have faced these same problems in child protection, and in both New Zealand and in the UK, the response from Government has been to take steps to ensure the safety of children within the child protection systems by ensuring high quality staff and high quality systems are in place.

1. Accreditation of staff

In the UK and New Zealand, all child protection front line staff are registered. That is, they have a minimum set of qualifications, their details are kept on record by a Government agency, they are accountable to a Board of Registration in NZ and the General Social Care Council in the UK for their professional standards, their continuing professional development and also in the event of any complaints on their performance. They are bound by standards on supervision and the maximum caseloads they can carry at any period. These measures exist to ensure the protection of the vulnerable clients they work with.

Similar client or customer protections exist within Australia for a number of health professions, including nursing and medicine, and for other professions including law, engineering, teaching and architecture. The accreditation of these

employees provides Government with increased security that the services offered are professional, provides employers with security that employees have the skills and aptitude to carry out their responsibilities and provides clients and families with the reassurance that they are receiving a service from someone qualified to do so professionally. The community services industry lags behind other sectors by not having yet moved to ensure a high quality of service to clients, business and the Government in this way.

In Australian jurisdictions, the regulation of the professions working with vulnerable children and their families is largely left to voluntary membership of a professional association (the AASW or the AIWCW - Australian Institute of Welfare and Community Workers). Alternatively, agencies have their own internal procedures in place to ensure professional standards of practice, but these vary, and are frequently undermined by a lack of funding. Governments across Australia have struggled to ensure a high quality, trained and experienced workforce is delivering services.

The Wood Inquiry is an opportunity for the Government to investigate the accreditation of all staff working in frontline delivery of services to children and their families. At least, the Government must better resource agencies to improve the level of professionalism in the delivery of services to vulnerable children and their families. Failure to take this opportunity would be an opportunity missed to ensure high quality services for vulnerable children and their families.

The NSW Government must address the manner in which services are to be funded, and must set minimum standards for staffing, supervision regimes, staff development and training, minimum lengths of funding contracts to ensure a good quality service. Such standards are commonplace across other industries tendering for contracted services from the Government, and must be put into place for the community sector.

2. Reform of funding arrangements

The method of funding must also be addressed. Competitive tendering and short term contracts put pressure on industry to cut costs. In human services, the largest cost is staffing, and services are therefore under continual pressure to reduce wages and conditions, recruit staff with fewer or no qualifications, and minimise staff training and development opportunities. One of the few safeguards in place has been maximum caseloads, allowing agencies to report that they had no space in their services for new clients. This must remain, or alternate methods found to allow staff to have manageable caseloads. While no one disputes that there are examples of excellent agencies and excellent unqualified staff, it cannot be in the best interests of vulnerable children and their families for this funding regime to continue.

What is required to accredit the community sector

The one benefit of lagging behind other sectors in Australia, and similar sectors in other countries, is that there is ample opportunity to learn and improve on previous experiences.

There are many good models available which can be adapted for the particular challenges of the community sector in NSW. Some the common elements are:

1. A Board of Registration, which sets standards for skills, values and qualifications required for staff, and provides a right of redress for clients for allegations of negligence or malpractice.

The AASW provides a number of these services for AASW members, but this does not include the majority of staff in the community sector.

2. A model of continuing professional education. The sector is complex, with some staff unqualified but experienced, others with VET qualifications and others with University degrees, including social work. The approach here will have to be carefully nuanced to account for these differences and to recognise existing skills.

3. A specific pathway for Indigenous workers. There are useful models in the health sector, with Indigenous health worker qualifications, and in child care as well.

The NSW Government should explore comparable sectors in Australia, such as teaching, or some of the allied health professions, and models for “social care” outside Australia, for models of staff accreditation. This will have the effect of increasing professional standards, and so providing better services to children and their families.

Appendix: Summary responses to key recommendations of the Wood Inquiry

Chapter 3 DoCS Workforce Capacity

Recommendation 3.1

From 1 July 2009 all appointed Managers Casework should be required to possess a relevant tertiary qualification, in addition to experience in child protection work.

Recommendation 3.2

A review should be undertaken to identify tasks that could be appropriately delegated by caseworkers.

The AASW strongly supports these recommendations, aimed at enhancing the skills and qualifications of the child protection workforce. The AASW also supports measures aimed at building capacity within the workforce.

Chapter 6 Risk of harm reports to DoCS

Recommendation 6.1

DoCS should revise its case practice procedures to develop clear guidelines for classifying risk of harm reports made and information given to the Helpline. Information which does not meet the statutory test for a report should be classified as a contact and not as a report. Information which meets that test should be classified as a report. The circumstances in which reports are referred for further assessment or forwarded as information only should be clarified and consistently applied.

Recommendation 6.5

Targeted training strategies for each of the key mandatory reporters, namely the NSW Police Force, NSW Health, each Area Health Service, The Children's Hospital at Westmead and the Department of Education and Training in relation to the circumstance in which reports need to be made and in relation to the information required, so as to ensure its

relevance and quality, should be developed and implemented by each agency in collaboration.

Following introduction of *The Children and Young Persons (Care and Protection) Act 1998*, significant resources have been utilised to train mandatory reporters in the identification of risk of harm and to encourage reporting of cases where there is a relatively low threshold of actual or potential harm. The introduction of a higher threshold for reporting risks a return to under-reporting and a return to past attitudes where child protection was seen as the business of specialist services rather than a whole of government and whole community approach.

The adoption of this recommendation will allow reporting to DoCS of cases requiring urgent intervention but it requires a considered approach in its introduction. Adequate resources and a reasonable timeframe are required to ensure that training is of an sufficient standard to equip those working in health, policing juvenile justice and education to clearly identify cases requiring referral to either the local "Unit" or directly to DoCS (as in recommendation 10.1).

Chapter 7 Early Intervention

We are disappointed that no specific recommendations were handed down to enhance early intervention responses. We stress the importance of well integrated, locally based systems of social care, which not only provide primary, secondary and tertiary level programs, but use specific cross sectoral strategies to bridge the interface between these strategies.

The AASW has suggested that early intervention models be developed, aimed at:

- Engaging early with families who are hard to reach;
- Better integrating State, Commonwealth and local Government programs; and
- Building a whole of systems approach.

Good examples are the *Sustained Nurse Home Visiting* programs in Victoria and South Australia, the *Schools as Communities Program* in the ACT and the *Strong Families* program in WA.

We hope further consultations take place to help develop early intervention models.

Chapter 8 Assessment and response

Recommendation 8.5

The NSW Government should develop a strategy to build capacity in Aboriginal organisations to enable one or more to take on a role similar to that of the Lakidjeka Aboriginal Child Specialist Advice and Support Service, that is, to act as advisers to DoCS in all facets of child protection work including assessment, case planning, case meetings, home visits, attending court, placing Aboriginal children and young persons in OOHC and making restoration decisions.

The intention to develop the capacity of Indigenous organisations is supported and should be informed by proper consultation with the relevant agencies, such as AbSec in NSW.

Chapter 9 Assessment and response: issues arising

Recommendation 9.5

For all caseworkers and casework managers there should be a structured program for ongoing professional development which is incorporated into annual Personal Planning and Review agreements.

Recommendation 9.7

DoCS should develop models of professional support for novice caseworkers, such as those offered in other disciplines like medicine, which involve safety and risk factors in decision making.

The AASW supports steps to build professional development and support in the child protection workforce. Effective professional supervision and the introduction of an integrated, specialised professional development program is required to increase retention of practitioners. These elements are present in the *AASW Practice Standards - Supervision*.^v

Chapter 10 Directions for the way forward

The creation of different pathways

Recommendation 10.1

Members of the community and mandatory reporters who are not those described below, who suspect that a child or young person is at risk of significant harm (“the statutory threshold”) should report their concerns to the Helpline. Reports should be as comprehensive as the knowledge and professional or expert experience of the reporter permits.

Recommendation 10.2

The Regional Intake and Referral Service described above should be operated and staffed by an NGO, with one or more child protection caseworkers seconded from DoCS. Where the child protection caseworker forms the view that the child or young person may be at risk of significant harm, the caseworker should perform a history check on KiDS and, if in the caseworker’s view, the statutory test is met, the caseworker should refer to the matter to the Helpline. There should be at least one Regional Intake and Referral Service in each DoCS Region.

The introduction of such Units could represent a positive change in localising the identification of risk of harm and providing pathways for early intervention, but will require a significant investment in human resources including adequate numbers of staff with education and experience to adequately perform this task.

Failure to adequately resource such units will simply push current failure to adequately classify and address child protection risks to a different level, the creation of another layer of reporting without the capacity to respond.

Service availability

Recommendation 10.4

Services should be integrated, multi-disciplinary and co-located, wherever practicable and child and family services should be established in locations of greatest need, by outreach if necessary.

NGOs and state agencies should be funded to deliver services to the children, young persons and families at risk. These services should cover the continuum of universal, secondary and tertiary services and should target transition points for children and young persons.

Recommendation 10.5

g. Co-located child and family centres servicing Aboriginal communities, involving health and education services should be developed.

Recommendation 10.6

The capacity of NGOs, Aboriginal and non-Aboriginal, to staff and deliver services to children, young persons and families, particularly those who present with a range of needs including those which are complex and chronic, should be developed. The principles underpinning performance based contracting should apply.

The AASW supports the further development of integrated, multi-disciplinary co-located services. We also support the provision of outreach services. It is, however, also important to ensure the skills, qualifications and conditions of the non-government workforce where services are delivered by the non-government sector.

We therefore support Recommendation 10.6, aimed at assessing the capacity of non-government organisations to deliver services and developing strategies to meet the challenges.

Workforce needs

Recommendation 10.8

A workforce strategy should be established which takes into account the needs of NGOs to employ additional staff and to accommodate the progressive transition of early intervention and OOHC (see Chapter 16) casework to the NGOs.

NGOs should receive sufficient funding to develop the infrastructure needed to attract experienced staff, and be assisted in providing uniform training for caseworkers and carers.

We support better coordinated approaches between government agencies and non-government organisations. An appropriate workforce investment, which includes education, training and professional development is critical for reform to be sustainable. A comprehensive learning approach that aligns with system reforms, including a differentiated response to children's wellbeing and safety, will be essential. These are important components to developing the capacity of the non-government sector to deliver services.

Chapter 18 Aboriginal over representation in child protection

The AASW is disappointed by the focus on punitive approaches to addressing this issue, such as income management, night patrols and restrictions on the sale of alcohol. If adopted, these measures must be taken in partnership and with approval of Indigenous communities.

The AASW calls for more resources, both money and personnel, to at least progressively reduce, if not immediately remedy, all of aspects of Indigenous social disadvantages. When addressed, these matters are likely to help reduce the incidence of child abuse and neglect in Indigenous communities.

AASW supports the Aboriginal placement principle that is now embodied, in most, if not all State and Territory Acts dealing with child protection. The AASW is aware that recruiting and retaining Indigenous foster carers is a difficulty faced by all child protection authorities.

The AASW recommends specific and appropriate programs that harness the existing capacity of Indigenous communities and work with them to reduce the incidence of child abuse and neglect, which is several times higher than the rest of the NSW population. Such programs include child care programs, school breakfast clubs, and home visits for parents of new-born babies.

We trust that further consultation will be undertaken in the development of approaches aimed at addressing the over-representation of Aboriginal and Torres Strait Islander families in the child protection system.

Chapter 17 Domestic and family violence in child protection

Recommendation 17.3

DoCS caseworkers should receive domestic violence specific training, jointly with other relevant agencies and NGO workers.

The AASW is aware of the poor record of existing systems in adequately addressing the relationship between child safety and domestic violence.

We therefore strongly support the provision of domestic violence training to caseworkers, and would be pleased if these training opportunities were extended to the non-government workforce.

Chapter 16 Out-of-home care

Recommendation 16.1

DoCS OOHC/NGO OOHC caseworkers should become involved with children and young persons in OOHC at an earlier stage than final orders and have a responsibility to identify and support the placement of the children or young people, where it has been determined that there is not a realistic possibility of restoration.

Recommendation 16.2

Over the next three to five years, there should be a gradual transition in the provision of OOHC for children and young persons as follows:

- A. Most children and young persons in OOHC should be supported by one of the two following models:**
 - i. DoCS retains parental responsibility and a non-government organisation is responsible for case management, placement and casework services. The agency has responsibility for assessment, case planning, implementation, review, transition and case closure as well as the placement of a child or young person with an authorised carer, and for any decision to remove a child or young person from a carer. DoCS retains the key decision making**

- role in restoration decisions, developing and approving the initial care plan and has a role in implementation. DoCS and the agency have joint responsibility for decisions to apply to change Court orders and for providing after care assistance.
- ii. DoCS delegates parental responsibility and transfers case management, placement and casework services to a nongovernment organisation (while retaining residual powers) subject to consultation with the Children's Guardian.
 - iii. Children and young persons with significantly complex needs or who are assessed as at high risk of immediate or serious harm or whose case management requires high level collaboration with other government agencies will remain case managed by DoCS.
- B. At an early stage, DoCS should progressively commence the transfer of long term kinship/relative carers to NGOs so as to allow the NGOs to carry out any necessary training and to provide ongoing support for these carers.
- C. At an early stage, DoCS should progressively reduce its role in the recruitment of foster carers and transfer current long term foster carers to NGOs.

The AASW would have liked to see recommendations addressing:

- **Children's participation in decisions that affect them**

It is imperative that children and young people participate, both formally and informally, in decision making and are able to express their feelings and wishes. This could be achieved by:

- Increased use of models of family decision making and problem solving such as Family Group Conferencing;
- Children and young people being provided with information about child protection processes including how to make complaints; and
- Children and young people being informed as soon as possible, preferably the same day, of legal and administrative decisions which affect them.

- **Increased resources and support for children leaving care**

The Association joins the call for uniform in-care and leaving care standards across Australia. It also joins the call for an affirmative action plan to provide them with the "same ongoing resources and opportunities that any responsible parent in the general population would offer their child".

- **Greater attention to Kinship Care**

We note the lack of Australian research into outcomes for children in kinship care compared to children in other forms of out-of-home care. There is a need for research to increase understanding of the needs of and issues confronting kinship carers. There is also a need for greater social, financial and service supports in view of what can only be regarded as a

serious crisis in the availability of carers for children in out of home care, and policy rhetoric about the importance of extended families.

- **Relevant models of Residential Care**

Further development of workable models of residential care for the 21st century is required and research into feasible models which have a therapeutic orientation becomes a priority for the research agenda.

- **Direct assistance to children and young people**

There is a need for highly trained child practitioners who can help children construct positive narratives about their families and their futures. This is a significant workforce issue for DoCS and for the other systems which have a responsibility to help children heal and to build the capacity of those who care for them to sustain the healing process.

We hope further consultation is undertaken in these areas.

Chapter 24 Interagency cooperation

Recommendation 24.1

The legislation governing each human services and justice agency should be amended by the insertion of a provision obliging that agency to take reasonable steps to coordinate with other agencies any necessary decision making or delivery of services to children, young persons and families, in order to appropriately and effectively meet the protection and care needs of children and young persons.

Recommendation 24.6

The Children and Young Persons (Care and Protection) Act 1998 should be amended to permit the exchange of information between human services and justice agencies, and between such agencies and the nongovernment sector, where that exchange is for the purpose of making a decision, assessment, plan or investigation relating to the safety, welfare and well-being of a child or young person in accordance with the principles set out in Chapter 24. The amendments should provide, that to the extent inconsistent, the provisions of the Privacy and Personal Information Protection Act 1998 and Health Records and Information Privacy Act 2002 should not apply. Where agencies have Codes of Practice in accordance with privacy legislation their terms should be consistent with this legislative provision and consistent with each other in relation to the discharge of the functions of those agencies in the area of child protection.

This issue of interagency cooperation is supported in principle by the AASW. However, while it appears sensible, any measures taken need to consider the responsibilities of agencies to

the protection of private information that may have been provided to one service, agency or worker that is no business of anyone else and has no bearing or relevance to a particular case at hand.

It is the ability to discriminate between what information should be shared, which in many cases will be all the available information, and what information should remain privileged that is important. Careful consideration of this, in light of the ethical standards expected from social workers and other professionals in the community sector and in Government agencies, will require ongoing consultation with relevant parties.

The other question is what strategies are put in place to ensure that clients and their families have accurate information about the processes of sharing information and are able to give fully informed consent about this. The AASW's view is that people have the right to have information clearly stated, and that training for staff across all systems will be necessary to ensure they are appropriately skilled in how to provide this information to people in a sensitive way.

Endnotes

ⁱ Tilbury, C. (2006) *Accountability via Performance Measurement: The Case of Child Protection Services*. Australian Journal of Public Administration. 65(3): p. 61.

ⁱⁱ Department of Families, Housing, Community Services and Indigenous Affairs (2008) *Australia's Children: Safe and Well. A National Framework for Protecting Australia's Children*. Department of Families, Housing, Community Services and Indigenous Affairs: Tuggeranong, ACT.

ⁱⁱⁱ Australian Bureau of Statistics (2008) *Labour Force, Australia*. Australian Bureau of Statistics: Belconnen, ACT.

^{iv} Australian Association of Social Workers, (forthcoming) *Curriculum Standards on Child Protection*, Barton ACT.

^v Australian Association of Social Workers, (2000), *AASW Practice Standards – Supervision*, Barton ACT