



OOHC Case Management Policy Redesign

Information Sheet 3

Workshopping and refining (phase 2)

Practitioner and key stakeholder workshops

As part of the Permanency Support Program (PSP) reforms, the Out of Home Care (OOHC) Case Management Policy and Guidelines (2015) are being redesigned. They will be replaced with the new Permanency Case Management Policy, Rules and Practice Guidance spanning the continuum of care from early intervention and family preservation to aftercare.

A series of consultation workshops were hosted across the state throughout August 2017, including 16 workshops for casework practitioners from Family and Community Services (FACS) and (external) service providers (non government organisations or NGOs). An additional four workshops were held with non-casework FACS staff, including legal practitioners, managers practice support and program leads from Commissioning Division. The workshops built on [feedback](#) from the [discussion paper](#) to ensure the policy was developed with input from stakeholders and informed by practitioner expertise.

This paper collates and summarises the key points of feedback received across all the workshops.

Across the continuum of care

What are we doing well?

You see the value of good relationships and appreciate the constant communication required to build and maintain them. You have said everyone in the sector has similar values including:

- a willingness to work around barriers to achieve the best outcome for the child
- commitment to helping and enabling families/kin to make changes
- commitment to seeing and supporting more families/kin
- being child focused and being inclusive.

What are our roadblocks?

You've told us the hardest thing to manage as a casework practitioner is building and maintaining relationships.

This can be due to:

- turnover of staff and a lack of time due to high workloads
- not having the same information to inform casework across FACS and service providers, particularly in relation to risk and not understanding the other's perspective
- high turnover of carers
- our expectations of carers are the same as those of an employee (sometimes greater) but we treat them and pay them as volunteers.

The Permanency Support Program reform, combined with implementation of ChildStory and Their Futures Matter, will be a challenge across the sector as casework practitioners struggle with the volume, frequency and intensity of change.

What should we be doing differently?

Some of the consistent themes for improvement include:

- more discussion around sharing case management responsibilities
- outposting/secondment opportunities for casework practitioners across FACS and service providers
- policy that provides clear rules for behaviour but allows flexibility in service delivery
- using common language between FACS and the service provider
- publishing the policy in a user friendly and interactive way
- creating guiding principles to deliver better permanency outcomes, such as family preservation.

You see opportunities for more consistency throughout the sector. You want to see FACS and service providers use the same tools in safety and risk assessment. You want to improve consistency between FACS and service providers' processes and forms. This could be achieved by working more closely together and hosting gatherings, meetings or training together.

How should we be working together?

From the beginning of engaging with a family/kin, you want to see regular meetings to ensure:

- open and honest communication between FACS and service providers
- a clear understanding of everyone's roles and responsibilities
- children, their parents, family/kin are involved in decisions
- casework practitioners can network with other agencies and services

- an opportunity to collectively reflect, review and change as required
- greater accountability and a process to resolve disagreements.

Family Preservation

What are we doing well?

You've told us the sector is keen to work earlier with families/kin, ensuring we keep children safe at home and reducing entries into OOHC. With the current system focused on OOHC, you are excited to see reform of the system to focus on keeping children at home with their family/kin.

Things you are doing well include:

- When everyone is focused on family preservation, the assessments accurately identify the needs of the family/kin. This enables us to match the right service to the family/kin from the earliest point possible.
- Early collaboration leads to better, more targeted planning between FACS and service providers.
- Consistent understanding of child protection systems and processes between FACS and service providers improves how we think about the issues needing to be addressed.
- FACS and service providers are improving how we manage risk to ensure we get better outcomes for children and young people.
- Introducing Family Group Conferencing (FGC) early, and an increasing focus on Family Finding, has supported many of our families/kin to stay together.
- Service providers are in strong positions to build relationships within their communities.

What are our roadblocks?

The lack of specialist providers to tailor family preservation services make it difficult to keep families/kin together. This is a greater concern in regional and remote communities. Delays in intervention between a critical event and accepting the referral impact on our ability to help a child remain safely at home with their family/kin. This often leads to issues escalating while families/kin are waiting for a service to become available.

Even when there are specialist services to support the family/kin, FACS and the service provider may have different goals. They may also disagree on the intensity of work required. When the service provider or other support services do not understand or see the same risks and dangers as FACS, support for the family/kin may be further delayed.

The huge practice change to ensure our priority is on keeping children and young people safe within their home where possible will be challenging. Many service providers have not been previously funded to provide family preservation services, so there is a lack of experience. The effectiveness of casework in the early stages of intervention will need to be developed over time.

What should we be doing differently?

You have said family preservation should collaboratively engage the child, their parents and family/kin, FACS, the service provider and other support services working with the family, when addressing risk and safety concerns and conducting case planning.

You also want to see FACS and service providers undertaking joint home visits where there is agreement that this would be of benefit to the family or strengthen assessment.

We should be exploring family/kin networks early using tools such as Family Finding or FGC. Service providers can play an important role in supporting the child and family/kin during FGCs.

You would like to see a consistent referral process, possibly by using a single (sector-wide) referral form containing all information needed by a service. Referrals should:

- identify the strengths, need and goals of the parents and significant family/kin members
- be clear about the dangers and risks present in the home that impact on safety to enable us to correctly match the service to the family/kin's needs.

You want the policy to reflect how we assess strengths and needs and who is best placed to do this. You would also like to see the policy address when the service provider will become involved with a case – possible key points are the SARA stage or the case planning stage. You would also like the policy to define other key review and decision making points, such as when family/kin disengage from the service, the end of the case plan or where there is escalation of risk.

How should we be working together?

In each workshop, you highlighted relationships are the most important factor in getting positive outcomes. To support families/kin in keeping their children safely at home, communication between everyone involved needs to be ongoing and regular. Communication between FACS, all services working with the family/kin and the family itself should focus on increasing the depth of understanding around the safety issues or risks for the child, as well as clarify roles and responsibilities.

Professional and group supervision was also frequently mentioned across the state as an opportunity to collaborate, ensuring we have common and agreed goals.

You have also said FACS should be working with service providers on cases 'side by side' to share and develop skills. Sharing skills and knowledge across FACS and service providers will benefit the families/kin we work with by improving our practice across the continuum of care.

You are excited about the release of ChildStory, as it will allow us to work more closely together through a consistent communication platform. Service providers want more information from FACS and ChildStory is expected to improve this.

Restoration

What are we doing well?

You are excited to see an increased focus on returning children and young people to their families/kin. The sector recognises changes are needed in this space and many of you are already reflecting on our practice. They are thinking 'outside the box' and questioning whether some children really need to be in OOHC.

As a sector we are becoming more comfortable and effective in sharing and managing risk that is required to support restoration.

Many of you are becoming focused on restoration from the beginning rather than introducing it later. You recognise restoration is more likely to be successful if it's attempted not too long after the child enters OOHC. Having an FGC early involves the child's wider family/kin network and helps us make better, quicker decisions for the child, leading to better chances of a successful restoration. Bringing the family/kin together ensures the right support services are involved at the right time.

There are great examples across the sector where there is strong collaboration in achieving restoration. You recognise the best results are achieved from a holistic approach, when all services working with the family/kin are communicating well and working towards the same goal.

Other significant factors in several successful restorations were proactive and continuous planning, as well as regularly assessing and adjusting contact.

What are our roadblocks?

Again, you said the main roadblock to restoration will be the practice change needed to ensure our focus is on returning children and young people to their family/kin. You have seen the difficulties in restoring children and young people to their families/kin when the expectations are not clear. Poor communication and collaboration between FACS and service providers can hamper the success of restorations. When the goals of FACS and service providers working with the family/kin are misaligned, this leads to inconsistent decision making and information not being effectively shared.

There is also confusion about responsibilities between FACS and service providers, in relation to court work, for example when a Section 82 report is required.

Another roadblock to effective restoration is inflexible contact arrangements and difficulties in changing them. It is difficult for a service provider to change legal orders in relation to contact. You think it would work better if the service provider had an opportunity to provide more input (in relation to contact arrangements) early during the court proceedings.

Some service providers have had limited or no involvement in restoration or ongoing work with birth families/kin to achieve this. You are also worried there is a lack of carers with the suitable skills to support a successful restoration. Although training can be provided, this will take time.

What should we be doing differently?

You want to become more effective in sharing and managing risks and testing the viability of restoration with many more children in OOHC. You would like to see referrals being made to the best-fit service for the family/kin and their needs.

For a successful restoration, FACS and service providers need to build better relationships with all stakeholders involved. This includes all family/kin members and any services involved, such as health, education, housing, etc. Taking a holistic approach and meeting regularly with everyone involved will help maintain relationships and improve communication.

You are excited that the new funding model will provide more incentive for service providers to work towards restoration. You would like to see family/kin contact being flexible rather than fixed to the minimum amount specified in the court order, and you believe the new funding model will help with that.

You see restoration as vital to reducing the number of children and young people in OOHC. This requires specific training for casework practitioners and carers about their roles and responsibilities when they are supporting restoration of a child to their family/kin. Casework practitioners also want training in how to have tough conversations when working with families/kin.

How should we be working together?

Many casework practitioners think joint home contact visits, where FACS and the service provider can observe the family/kin together, will enable us to work better. You would like to see more collaboration, involving the service provider as early as possible. Open and honest communication with families/kin about all aspects of the restoration is key to building trust and increases the chance of a successful restoration.

You want to see our service provider partners being involved in the court process earlier. You also want to see a flexible system to reduce duplication of paperwork in relation to legal proceedings and court work.

A 'workers meeting' of casework practitioners directly involved from FACS and the service provider was suggested as an opportunity to clarify tasks and timeframes and ensure everyone agrees on their roles and responsibilities.

You would like to see FACS and service providers involved in joint supervision and reflective practice sessions, in particular, increasing the communication on complex cases.

Guardianship

What are we doing well?

You've told us you are very good at identifying family/kin and carer placements suitable for guardianship. Service providers see their placement matching as strong as they often lead to guardianship.

You also understand the importance of permanency that guardianship gives to a child in care and how it helps their sense of identity. When children or young people are self placing with family/kin, you are open to exploring the placement and the possibility of this being suitable for guardianship.

Having specific guardianship casework practitioners and casework specialists has been valuable. They help other practitioners who are unclear about procedures and policies or those who just need guidance through the process.

You've told us you like the positives of guardianship for the carer, helping them feel empowered by acknowledging their strengths. The close relationship service providers have with their carers enables effective support and helps carers develop confidence, especially in areas such as supporting birth family contact.

You've told us service providers and FACS try hard to work together to make sure the guardianship process is collaborative, ensuring all strive for a common goal.

What are our roadblocks?

Some carers are uncertain and fearful about becoming guardians, and this can stop guardianship progressing. Carers who have been foster carers for a long time may fear the change in role and the possibility of no longer receiving formal case management support from FACS or their service provider. Carers are also unclear about how guardianship changes their responsibilities including uncertainty about managing birth family/kin contact.

You have also said the legal process is complicated when making a guardianship application. Some legal representatives, including magistrates, are not keen to apply for or make a guardianship order right away. This can make it difficult when deciding to make an application for Parental Responsibility to the Minister or Parental Responsibility to Relative.

Carers also fear an uncertain future, including the possibility of:

- placement breakdown and what that would mean for them and the child
- possible legal costs if a section 90 application is made by parents to rescind or vary the orders.

These issues need to be jointly worked through by the service provider, FACS and carer.

What should we be doing differently?

As the sector is still developing a greater understanding of guardianship, you want to see more exploration of all options for the child to stay with family/kin using Family Finding and FGC.

You also want to see family/kin involved in the decisions made from as early as possible. Engaging a larger family/kin network from the beginning will also increase the child's connections for life. You want Family Finding training for casework practitioners to ensure we engage the whole of family/kin network.

You want to see increased support for carers to ensure they are ready for guardianship. This will include FACS or the service provider doing more work to ensure the carer has a clear

understanding of guardian responsibilities before final orders are made. You would like to see more ongoing support for carers once guardianship orders are finalised.

You have suggested the service provider could identify placements suitable for guardianship when they have established relationships with the child and carer. The service provider should have open discussions with the family/kin about guardianship and why it would be the most suitable option for the child.

You have suggested FACS should have a mentoring or educating role for service providers, to develop their skills in exploring placement suitability and assessing guardianships.

How should we be working together?

Guardianship should be a collaborative process with all parties involved in making decisions. Involving all parties will improve everyone's understanding and challenge myths about guardianship.

You want to see more open communication between FACS and service providers around a child's history, including assessments of possible placements.

You want to see the process start with a joint meeting to agree on roles and responsibilities. This is where specific tasks can be allocated or shared. The Permanency Coordinator will need to be involved and be independent from the casework, focusing on the permanency outcome. You want clear roles and responsibilities for FACS and service providers in determining permanency goals.

The guardianship process should be more collaborative by sharing the legal work between FACS and the service provider. When the initial assessment indicates guardianship is appropriate, the service provider and FACS casework practitioners should meet with the Permanency Coordinator to ensure the right packages are put in place.

You see FACS leading the court process, but FACS should involve the service provider throughout. FACS and the service provider should meet at decision points or when there is a significant change or safety concern.

Open Adoption

What are we doing well?

You are more involved in pursuing open adoption for children and young people and are building strong relationships with families/kin and supporting them through the process. Open conversations between FACS and the service provider from the beginning improve the working relationship throughout the adoption process. As adoption involves more legal processes, information sharing between FACS and the service provider is also very strong.

Specialist practitioners, such as adoptions casework practitioners or the adoptions taskforce, have been a great support to other practitioners working through the adoption process.

Service providers accredited to manage the adoption process are discussing the possibility of adoption with families/kin and carers early. They are very good at matching the child to

the right adoption placement. Service providers are also able to provide the required information due to their close relationship with the family/kin, child and carer.

Introducing the adoptions allowance has been well received and improved the way we support adoption placements.

What are our roadblocks?

You've told us the way many people across the sector perceive adoption is still a roadblock. This may stem from a poor understanding of adoption by some casework practitioners, legal representatives or magistrates. There is strong push-back, especially from family/kin, due to the perceived loss of identity for the child. You've told us that parents and family/kin have expressed they have lost hope of their child ever returning home.

Often the time to reach final orders is too long and the carer or child become frustrated and disengage with the process. The timeframes are also impacted on when service providers are not able to make decisions in a timely manner.

Changing the mindset of some carers who have been caring for a long time will be difficult. There are also difficulties when a carer has to manage contact with birth family/kin without support of a casework practitioner.

Carers concerned about potential changes after final orders have been made and involvement from FACS or a service provider has ceased, may prevent carers pursuing adoption. For example, adoptive carers' circumstances may change (when they are adoptive parents) and they may no longer have the capacity to care for the child. Or there could be a placement breakdown due to a lack of formal support.

What should we be doing differently?

You've told us FACS and the service provider should get everyone together early. This would allow for a transparent discussion with the parents, carer and child about adoption and what it would mean. This also builds relationships between the carers and the child's family/kin, potentially improving contact arrangements in the future. It allows the parents an opportunity to discuss what open adoption means for them and their child.

Case work tasks, such as establishing paternity and Aboriginality, should be completed as early as possible. This is vital for the child's identity, and necessary information for the adoption process.

You also want to recruit the right carers for adoption. When recruiting carers you want applicants to be given the option of being authorised as an adoptive carer. Providing information and education about what open adoption is and what it means for a child, carer or parent would help applicants consider becoming adoptive carers. You also believe the current list of carers should be reviewed and assessed to identify OOHc placements suitable for adoption.

With the important role the legal system plays in the adoption process, you want to see legal representatives and magistrates provided training about the reforms so we are working towards the same goals. You want to see training for casework practitioners about the adoption process, as well as legal and court processes. You believe current carers who are eligible for adoption should also receive training.

How should we be working together?

You have said you want to see clearly defined roles and responsibilities when working together towards adoption. You see the adoption process as collaborative from start to end, involving:

- the Regional Adoptions Caseworker as early as possible
- working together to assess permanency goals for children as well as during the court process, for example, in the development of the Care Plan
- learning from each other, including from service providers with extensive adoption experience
- FACS or the service provider continuing to work with families/kin and carers, while the Regional Adoptions Caseworker and the Permanency Coordinator participate in advisory roles.

Out of Home Care (OOHC)

What are we doing well?

You are involving family/kin and other significant people in the child's life through tools such as Family Finding. This builds a greater network for the child and helps you to match a child to a placement that best meets the child's individual needs. You also recognise the benefits of relative and kinship over foster care placements.

FACS and service providers are building stronger relationships at the casework practitioner level resulting in better outcomes for children. A strong collaboration between FACS and service providers allows easier information exchange. You have also found joint home visits, when required, allow FACS and the service provider to engage with the child and family/kin at the same time and gather the same information.

You have strong relationships with carers developed through regular and purposeful home visits. Service providers are also building strong relationships with the child's birth family/kin. This helps you to involve the family/kin in decisions such as sibling contact.

You have said the sector is becoming more aware of trauma-informed practice, improving our understanding of the needs of children in care. This helps you make better decisions for the child and better meet their needs.

What are our roadblocks?

You have said the current case management policy doesn't support permanency for a child who has been removed from their family/kin. While the policy clearly identifies roles and responsibilities, it can result in silos of practice and doesn't facilitate collaboration. It also doesn't support exploring other options, such as restoration, once a final order has been made.

There is a lack of carers and placements. We don't have a pool of carers that can meet the demographics of the children in the system. Many carers see younger children as suited to their household, but there are very few who can take on older children.

You have noted the lack of information available to the responsible casework practitioner increases the difficulty of making decisions for the child. Sometimes the case plan or client information form (CIF) isn't up to date when the casework practitioner receives the information. This could be due to poor information exchange between FACS and the service provider or between service providers.

Many service providers provide services across multiple FACS Districts, and so they must deal with different processes and expectations. This results in inconsistent decisions for children and carers supported by the service provider.

You've told us everyone wants to get the best outcomes for children but there are some constant roadblocks including:

- the difficulty of the Health Referral Pathway and the lack of information resulting from the assessments
- constant pressure meeting accreditation standards
- limited skills and capacity within the service provider resulting from high staff turnover
- different views and priorities among all stakeholders.

What should we be doing differently?

Regular meetings between FACS and the service provider should include discussions about whether OOHC is the most appropriate option for the child, exploring any changed circumstances and considering whether restoration is now possible. Exploring restoration options could free up placements for other children entering the system.

You want to see FACS and the service provider planning together from the initial stages. This means having a case plan meeting early to ensure:

- shared understanding of the child's needs and how they should be supported
- clear outcomes of what is expected for the child, their parents and family/kin.

You see the case management transfer meeting as critical to ensuring continuous support for the child. You want the transfer process to be clear and consistent and include more detail about roles and responsibilities. You want to also ensure transfers include detailed information, including child protection history and court materials. You have also said the transfer meeting is an opportunity to review contact arrangements and kin assessments.

You see the use of Family Finding and FGC as a necessary step before final orders are made for a child to be in OOHC. Family Finding and FGC would involve both FACS and the service provider working together to ensure the process is collaborative. As FGC is a family/kin-led process, it empowers family/kin to make better decisions for the child, including placement options and contact arrangements. You would also like to see Family Finding done before a child enters OOHC, and 12 months afterwards. You have suggested specialised Family Finding teams may allow casework practitioners more time to focus on other demands.

You agree we need to address the need for a greater number and variety of carers to meet the individual needs of each child. This will allow better matching and better outcomes for

each child. You want to see carers with specific capabilities, such as emergency care or support for children being restored to their families/kin.

You want the legal process and court proceeding to better include the service provider. This means inviting and involving service providers in dispute resolution conferences. You see the Care Plan as the responsibility of FACS but want to mandate service provider involvement in developing the Care Plan. With the increased involvement of service providers in the legal process, you want service providers offered training to develop skills and knowledge of the legal proceedings.

You see other opportunities for shared training across service providers and FACS, such as increasing training for trauma-informed practice and Life Story Work. You would like to see service providers being able to access the same training opportunities and practice guides as FACS practitioners and to complete training jointly.

How should we be working together?

You expect as we have jointly worked through the other permanency options for a child, we should already be working closely together. For children and young people requiring OOHC you see a close working relationship where we should be:

- working together on Family Finding
- including service providers in more group supervision, interagency and reflective discussions
- collaborating better with other government agencies including NSW Health, Juvenile Justice, Police, Housing, National Disability Insurance Agency (NDIA) and Education/TAFE
- ensuring the child and their family/kin actively participate in decision making
- addressing disagreements by having discussions and sharing information
- more time to communicate and exchange the right information at case management transfer.

Further information

Please visit the [Permanency Support Website](https://permanency.support@facs.nsw.gov.au), and send any questions to permanency.support@facs.nsw.gov.au