Business Rules: Permanency Support Program (PSP) Family Preservation Case Plan Goal Package

Service Period: Commencing 1 October 2018
Version: 1.0

Note: These business rules should be read in conjunction with the Preservation Package Framework and Program Logic and will continue to be revised and updated across the life of the PSP. Subsequent updates, once made, will be communicated to all stakeholders.
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PSP Packaged Care Service Model

From 1 July 2018, with the exception of Family Preservation and Relative/Kinship Preservation, the full PSP Packaged Care Service Model be applied. The purchase of Preservation Packages will commence from 1 October 2018.

<table>
<thead>
<tr>
<th>Case Plan Goal Packages</th>
<th>Baseline Packages</th>
<th>Child Needs Packages</th>
<th>Other Specialist Packages</th>
</tr>
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<tbody>
<tr>
<td>Family Preservation</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>$39,508$</td>
<td>Case Coordination</td>
<td>Low Needs</td>
<td></td>
</tr>
<tr>
<td>$16,049$</td>
<td></td>
<td>$4,591</td>
<td></td>
</tr>
<tr>
<td>Relative/Kinship (Preservation)</td>
<td>$22,615</td>
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**PSP Family Preservation Package**

The PSP Family Preservation Package has been designed to provide the supports to maintain children safely at home with their families where there are no other existing funded preservation services available or appropriate.

Funding is provided for up to two years to enable the delivery of supports including child and family counselling, parenting skills, in-home supports and services to address specific identified risks. Services working with Aboriginal and Culturally and Linguistically Diverse (CALD) children and families will be required to do so in a culturally competent and safe manner.

**PSP Relative/Kinship Preservation Package**

Relative/Kinship Preservation Packages will not be allocated in the initial implementation stage as a number of legal issues remain under consideration. Once resolved, separate eligibility rules will be developed for these Packages and further advice will be provided. Finalisation of this work is expected in late 2018.

**Package details including eligibility criteria**

**FAMILY PRESERVATION CASE PLAN GOAL PACKAGE**

A service provider will receive a Case Plan Goal Package of Family Preservation based on the child’s approved case plan goal recorded in ChildStory. Case plan goal packages are mutually exclusive (i.e. each child can only have one case plan goal package at a time) and must be approved by FACS.

<table>
<thead>
<tr>
<th>Family Preservation</th>
<th>Description</th>
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<tbody>
<tr>
<td></td>
<td>The Family Preservation Package enables the provision of wrap-around services aimed at supporting children to remain safely at home with their family. Service Providers$^3$ will be expected to deliver services according</td>
</tr>
</tbody>
</table>

$^1$ Annual package value
$^2$ Throughout this document, ‘child and young person’ is shortened to ‘child’; ‘children and young people’ is shortened to ‘children’.
$^3$ Throughout this document, ‘service provider’ refers to a funded external service provider / non government organisation (NGO) unless otherwise indicated.
to relevant PSP documents, including the PSP Service Requirements, and the Family Preservation Program Framework. Other FACS funded family preservation programs must be fully utilised (where the program will meet the family’s needs) prior to accessing a PSP Family Preservation Package. See Appendix 1: Referral Guide.

At a minimum, the Package will deliver the Core Components of:

- **Family and parenting support**, including family relationship counselling, parenting skills, in-home practical support and brokerage
- **Child focused support**, including counselling or psychological services according to the level of identified need, services to address health needs, educational and learning assistance
- **Safety monitoring**, including monitoring visits
- **Risk mitigation**, including referral to targeted services to address risk factors, such as family and domestic violence services, mental health or drug and alcohol services

In addition, services working with Aboriginal and CALD families will be expected to conduct the mandatory activities outlined in the Family Preservation Package Program Framework.

Also refer to *Permanency Case Management Rules and Practice Guidance*.

<table>
<thead>
<tr>
<th>Package duration</th>
<th>Up to two years</th>
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<tbody>
<tr>
<td></td>
<td>Extensions may be granted by FACS delegated approval at the Executive Director (Category 5) level or above.</td>
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<tr>
<td></td>
<td>Requests for extension are to be discussed during the 3 monthly review and should be raised at least 3 months prior to the package end date. FACS will provide a decision within 3 weeks.</td>
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</table>

<table>
<thead>
<tr>
<th>Minimum Review Period</th>
<th>3 monthly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligibility</td>
<td>The family⁴:</td>
</tr>
<tr>
<td></td>
<td>• consists of at least one child who is the subject of a current Risk of Significant Harm (ROSH) report</td>
</tr>
<tr>
<td></td>
<td>• application of a Safety and Risk Assessment (SARA) for the same child/ren has resulted in a safety outcome of ‘safe’ or ‘safe with plan’ and a risk outcome of ‘high’ or ‘very high’ ⁵</td>
</tr>
<tr>
<td></td>
<td>• is not receiving services funded through another Case Plan Goal Package</td>
</tr>
</tbody>
</table>

⁴ A family is a household group where a child and their siblings are living with and being cared for by one or both birth parents; one or more children, who may or may not be related, are living with and being cared for by one of their birth parents and that parent’s partner; a child is living with and being cared for by, one or both adoptive parents; or A child is living with a relative or kin under an informal arrangement which the birth parents have agreed to.

⁵ It should be noted that although a risk assessment may return an outcome of ‘high’ or ‘very high’, the Community Services Centre may make a decision to close the case due to current competing priorities, with a rationale that the family may be well engaged with services, for example.
• is not receiving services from a funded preservation program: Newpin, Resilient Families, Brighter Futures, Youth Hope, Intensive Family Preservation (IFP), Intensive Family Based Services (IFBS), Multisystemic Therapy for Child Abuse and Neglect (MST-CAN®) or Functional Family Therapy – Child Welfare (FFT-CW®)

• has not previously received services funded under a PSP Family Preservation Case Plan Goal Package unless it has been reviewed and approved.

Service providers are no longer eligible to receive this service package if:

• the case plan goal has been achieved

• a closing SARA determines the level of risk for the relevant child/ren has reduced to ‘low’ or ‘moderate’, with a minimum of two consecutive assessments required where the risk is deemed ‘low’ or ‘moderate’

• the child/ren identified in the initial SARA is/are no longer living with their parent/s

• the child/ren identified in the initial ROSH enter OOHC or is/are the subject of any court order allocating parental responsibility to someone other than the parent/s or previous legal guardian/s.

<table>
<thead>
<tr>
<th>Approval</th>
<th>Recorded by FACS Caseworker.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Approved by FACS Manager Casework.</td>
</tr>
</tbody>
</table>
A service provider will receive a Child Needs Package at the default level of Low Needs for each child in a family in receipt of a PSP Family Preservation Package.

Needs related to the child’s disability will be met by the NDIS. Other needs arising will be met through the Child Needs Package.

The Low Needs Package includes Education Supports, General Allied Health Provisions, Mentoring and Counselling.

### Low Needs

<table>
<thead>
<tr>
<th>Description</th>
<th>Package may include:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• educational supports</td>
</tr>
<tr>
<td></td>
<td>• general allied health provisions</td>
</tr>
<tr>
<td></td>
<td>• mentoring</td>
</tr>
<tr>
<td></td>
<td>• counselling</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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</tr>
</tbody>
</table>

| Eligibility | The family is receiving services funded through a Case Plan Goal Package of Family Preservation. |

| Approval | Recorded by FACS Caseworker. Approved by FACS Manager Casework. |

### Specialist Packages

The stream of Specialist Packages under the PSP has been developed to support children and young people in out-of-home care (OOHC) with specific needs, such as cultural connection and leaving care. Children and families in receipt of services through a Family Preservation Package are ineligible for Specialist Packages.

### Implementation of the Permanency Support Program (PSP) and relationship to other FACS Funded Preservation Programs

Family Preservation Packages will become available from 1 October 2018.

The implementation of PSP Packages is occurring alongside other FACS funded programs. This includes Brighter Futures, Youth Hope, Newpin, Intensive Family Preservation (IFP), Intensive Family Based Service (IFBS), Multisystemic Therapy – Child Abuse and Neglect
(MST-CAN®) and Functional Family Therapy – Child Welfare (FFT-CW®). Maps of service locations can be found at Appendix 2.

Other FACS funded family preservation programs must be fully utilised (where in the best interests of the child and will meet the family’s needs) prior to accessing a PSP preservation package. For example, a funded program may not be suitable due to the family’s cultural needs, additional or specialist support as a result of a child’s disability, or level of intensity to support the child’s case plan goal.

A family cannot be in receipt of a PSP Family Preservation Package and a FACS funded preservation program at the same time.

Also see Appendix 3.

**Other funded Family Preservation Services**

<table>
<thead>
<tr>
<th>SERVICE MODEL</th>
<th>AGE COHORT</th>
<th>GOAL</th>
<th>LENGTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brighter Futures</td>
<td>Birth – 9 years or unborn children.</td>
<td>Early intervention and family preservation.</td>
<td>18 months (up to 24 months in exceptional circumstances).</td>
</tr>
<tr>
<td>Youth Hope</td>
<td>9 – 15 years.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intensive Family Preservation (IFP)</td>
<td>Birth – 18 years.</td>
<td>Family preservation, restoration support or OOHCP placement stability.</td>
<td>6 months (up to maximum 9 months in exceptional circumstances).</td>
</tr>
<tr>
<td>Intensive Family Based Service (IFBS)</td>
<td>Birth – 18 years For Aboriginal families only.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newpin</td>
<td>Under 6 years.</td>
<td>Family preservation and restoration.</td>
<td>12–18 months.</td>
</tr>
<tr>
<td>Resilient Families</td>
<td>6 years or under.</td>
<td>Family preservation.</td>
<td>Up to 12 months.</td>
</tr>
<tr>
<td>Multi-Systemic Therapy – Child Abuse &amp; Neglect (MST-CAN)</td>
<td>6 – 17 years.</td>
<td>Family preservation and restoration.</td>
<td>6-9 months.</td>
</tr>
<tr>
<td>Functional Family Therapy – Child Welfare (FFT-CW)</td>
<td>Birth – 17 years.</td>
<td>Family preservation and restoration.</td>
<td>Up to 9 months (low stream) or 6 months (high).</td>
</tr>
</tbody>
</table>
Referrals

Only FACS may refer a family to receive services under a Family Preservation Package. This will be based on an assessment of safety, risk, family need, and the suitability and availability of alternative preservation services.

Where there is sufficient evidence the family will respond positively to intensive supports, FACS will decide the most appropriate service provider, based on the child(ren) and family’s needs and service availability.

When making a referral, FACS will:

- Complete a Safety and Risk Assessment (SARA)
- Confirm that the family is eligible for an available package in the relevant district, noting that 37% of packages have been allocated specifically to Aboriginal families
- Obtain informed consent for the referral from at least one parent and the child(ren) or young person(s), if they are aged 14-18 years, engaging the service provider or other networks of support, where necessary
- Discuss the referral and the family’s needs with the service providers and confirm the service provider:
  1. Understands the safety, risk and wellbeing issues for the children and young people
  2. Understands the family’s needs
  3. Will contact or make persistent efforts to contact the family on the day of referral, or at the latest, by end of the next working day.

After the service provider accepts the referral, FACS will retain a signed copy for the referral records. FACS will establish a meeting time to confirm the Case Plan Goal of Family Preservation with the service provider and the family within three business days.

FACS will work with service providers to plan and deliver effective services. In so doing, FACS will:

- Keep the safety and needs of children and young people as its paramount concern
- Share information with service providers, and
- Work collaboratively to resolve issues and disputes.

Priority referral to Aboriginal and CALD service providers

FACS is committed to the Aboriginal and Torres Strait Islander Child Placement Principle and the five core elements of prevention, partnership, placement, participation and connection. The core elements relates not only prevention and appropriate placement of Aboriginal and Torres Strait Islander children and young people in OOHC, but also how families and communities should participate in decision making, including assessment.6

When seeking to refer a family, FACS and PSP service providers will take into consideration the cultural context of the family and identify local services likely to provide an appropriate fit.

Wherever possible and appropriate, an Aboriginal Community Controlled Organisation (ACCO) delivering services under a PSP Family Preservation Package, should be engaged to work with an Aboriginal family. Where an ACCO does not exist or is not delivering Family

Preservation Packages yet, a service able to provide suitably qualified and supported Aboriginal staff to work with the family is the next preferred option. Similarly, wherever possible and appropriate, specialist CALD service providers should be engaged to work with CALD families.

It must not be assumed, however, that a family will always prefer referral to a culturally specific service provider. In some cases, for reasons such as privacy, a family may prefer referral to a mainstream service, which has demonstrated cultural capability and works in a way that is appropriate and sensitive to the cultural needs of a family.

To ensure that families are being referred to an appropriate service provider, caseworkers from both FACS and PSP service providers, must provide families with information on available service providers and engage with them to fully understand their perspective and preferences. Caseworkers must then seek to meet the family’s needs to the extent possible.

Where local PSP providers do not offer an appropriate cultural fit for a family, and the family has a preference for specialist cultural service provider, the PSP provider with the capability to subcontract a suitable organisation\(^7\) or caseworker is the next best option. For more information regarding the subcontracting of Aboriginal and CALD service providers, please see the relevant section below.

**Work with Aboriginal or CALD families by non-Aboriginal or non-CALD specific services**

In the case that all options for an identified service or staff member have been exhausted, a service must provide evidence that the subcontracting of appropriate organisation or caseworker has been investigated and found unviable. Documentation of the process undertaken to ascertain this is considered sufficient evidence.

**Priority referral to service providers with previous experience with a family**

Initial investigations, including discussions with the family, may identify a previous family history with a particular PSP service provider. The nature and effectiveness of that relationship should be taken into account when selecting a provider for referral. For example, where a family has an existing positive relationship with a service, the increased likelihood of success with that provider, should be considered.

**Case Coordination**

A Baseline Package of Case Coordination will be paid to service providers in conjunction with the Family Preservation Package in order to support the administrative functions associated with delivery. While case coordination sits with the service provider, FACS remains the agency responsible for overall monitoring of risk. FACS will fulfil this responsibility by conducting a safety and risk reassessment every three months as part of the review process. Where circumstances suggest a change in case plan goal is required, ultimate decision making responsibility will lie with FACS.

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\(^7\) A CALD background alone is insufficient for description as a suitable organisation. The organisation and staff must also have relevant qualifications, skills and experience working with families to protect children.
Case management in the context of family preservation

Case management in the context of family preservation is different to that undertaken for children in OOHC, with a necessary emphasis on the needs of the family as a whole.

Case management for family preservation is a process whereby a family’s needs are identified and services are coordinated and managed in a systematic way. The core elements of case management include assessment, case planning, implementation (service delivery), monitoring and review. The case management process aims to improve outcomes for vulnerable children, young people and families through integrated and coordinated service delivery.8

Consistent with a family-centred approach, the plans developed for a family are known as Family Action Plans, rather than case plans.

Case Management Transfer

Case Management Transfer, and the process through which it occurs, will be guided by the Permanency Case Management Policy: Rules and Practice Guidance.

Family Group Conferencing and Family Finding

While not the primary aim of these activities, FACS caseworkers are able to use Family Finding and Family Group Conferencing (FGC)9 during the initial assessment stage to assist in gauging the viability of successful family preservation. In relation to Aboriginal families, an FGC undertaken with an Aboriginal facilitator, or an alternative model of Aboriginal Family Led Decision Making, may be utilised.

Where initiated by FACS, outcomes from these activities will be provided to service providers from whom a family preservation package is being purchased to support on-going Family Action Plan development and coordination.

Where Family Finding and FGC have not been undertaken, service providers will need to initiate these activities. When a family consents to an FGC, the service provider must contact the FACS caseworker to arrange one. The cost of the FGC will be borne by FACS.

Family Finding and FGC work by PSP service providers will help ensure involvement and support from extended family and friends is encouraged and maintained. In the case of FGC, follow up conferences provide the opportunity to review outcomes and make amendments to overcome any barriers that may have presented.

Continued Family Finding and FGC work responds to the fact that situations often change and first attempts to engage extended family members will not necessarily draw out all relevant parties and circumstances.

Managing Risk

The SARA structured decision making tool will be the primary instrument for measuring risk associated with families receiving preservation services. This tool can only be applied by FACS caseworkers, who are trained in its use. It is possible, however, for PSP service providers to participate in the SARA process, as outlined in the Permanency Case Management Policy.

9 FGC is a voluntary program, therefore families cannot be forced to participate.
Eligibility for the PSP Family Preservation Package requires completion of a SARA with a safety outcome of ‘safe’ or ‘safe with plan’ and a risk assessment of ‘high’ or ‘very high’. As such, service providers will begin work with a family from a starting point acknowledging the child or children involved are at risk of harm.

**Minimum review period and service provider involvement in risk assessment**

A minimum review period of three months has been established for the case plan goal of Family Preservation. To inform the process, the service provider should review progress with the family, prior to each three monthly review. The three monthly reviews will include a 90 day risk reassessment conducted by the FACS caseworker, who will apply the SARA tool. Family preservation cases will be kept open by FACS to facilitate the monitoring of risk and taking of any further action required. Provided requirements under the Permanency Case Management Policy are met, the service provider may also participate in the SARA risk reassessment process.

The 90 day review period allows the service provider, in collaboration with FACS, to confirm that the child continues to be safe within the home and to review the progress being made towards Family Action Plan outcomes. Depending upon progress towards Family Action Plan goals, the service provider and FACS may decide that:

- Work with the family should continue as agreed
- The level of service intensity needs to change
- The service is ineffective and will cease
- A transfer to a different service provider would better meet the family’s needs
- The child/ren will need to be placed in OOHC.

**Next steps if risk does not reduce or increases**

The 90 day review provides an opportunity for risk to be reassessed through application of the SARA tool and for service providers to discuss outcomes with the FACS caseworker. Where the SARA risk reassessment process fails to indicate a reduction in risk, the service provider and FACS will engage with the family to discuss and assess the situation, including progress towards goals, and to decide on next steps.

**When is risk too high?**

Regardless of previous experience in family preservation work, the nature of all work with children and families is such that service providers will have a fundamental understanding of child protection and their requirements as mandatory reporters. The requirement to report concerns regarding children at risk of harm to the Child Protection Helpline remain the same for services delivering family preservation, including subcontracted and brokered services.

Situations in which a new concern arises or there is escalation of an existing concern, service providers are to apply the Mandatory Reporter Guide (MRG) tool to guide their decision making on reporting. If FACS receives a RO SH report about a child or young person, while the family is receiving a Preservation Package, FACS will review the case in consultation with the service provider to decide if family preservation remains a viable option.

Where a PSP service provider has concerns regarding risk to a child and the risk has not warranted a report to the Helpline, the service provider should seek to discuss the matter with the FACS caseworker at the next review.
Involvement of Aboriginal Community Controlled Mechanisms

The involvement of Aboriginal Community Controlled Mechanisms, such as Local Advisory Groups (LAGs), in risk monitoring, will be guided by the Aboriginal Case Management Policy.

Legal options to support preservation, including Parent Responsibility Contracts and Parent Capacity Orders

FACS caseworkers have a number of legal options, including Parent Responsibility Contracts (PRCs), Parent Capacity Orders (PCOs) and Supervision Orders, which may support family preservation. These options may highlight the significance of issues to be addressed and emphasise the need for parental action. While a PSP service provider may identify the potential usefulness of a contract or order, they will need to work collaboratively with FACS to investigate the matter further and undertake the work required. FACS will be the lead organisation on all work related to obtaining contracts and orders.

PRCs and PCOs outline what is required of parents in a more structured and formal manner than a Family Action Plan and can have legal consequences when breached. Breach of a PRC, for example, may lead to the Children’s Court establishing a Supervision Order. Parents must consent to enter into a PRC, however, consent is not required in the case of PCOs. Free legal advice for parents is available through the Family Law Early Intervention Unit of Legal Aid NSW. If a PRC or PCO is going to be entered into it is important that parents receive early legal advice. More information about PRCs and PCOs can be found on the FACS website.

Where considered beneficial, families should also be encouraged to identify and engage with any other tools or approaches that might work best to support them in achieving their goals and aspirations.

Triggers

A PRC may be considered where the goals of a Family Action Plan are not being achieved and it is agreed that a more formal arrangement may help the parents take greater responsibility for ensuring their child's safety. There must be a belief in the parent's ability to change but recognition that assistance is required for them to understand the seriousness of the concerns.

When deciding if a PRC is appropriate think about:

- Why the parents might be struggling to meet the Family Action Plan goals
- Whether the Family Action Plan is adequately supporting the parents to address risk
- How a PRC will help the parent build safety for their children.

A PCO may be considered where a service provider identifies issues impacting on parenting capacity that could be resolved if the parent engaged in a specific service, program, course or treatment and this engagement has not successfully occurred through Family Action Plan development. If considering a PCO, it is important to find out if there is an appropriate and available service, program, course or treatment to address the issues impacting on parenting capacity.

Taking action

Where a service provider feels a legal option could support progress towards the case plan goal of family preservation, they should discuss the matter with the relevant FACS
caseworker. Where it is agreed that a legal option could be useful, the service provider may then raise the idea with the parent and provide them with the contact details for legal advice.

Although consent is not required for a PCO, seeking consent remains best practice and where this is not provided, serious consideration should be given regarding whether or not to proceed.

To undertake further action, the service provider will need to continue working with the FACS caseworker who will be able to access assistance from FACS Care Legal Support.

**Roles and Responsibilities**

**Children, families and communities**

**Children and Families**
- Engage with program workers, being honest and upfront
- Participate in and contribute to assessment processes, including Aboriginal Family Led Decision Making
- Participate in decision making, informing workers when plans or activities are not working
- Work with the caseworker to identify and additional roles and responsibilities that might be needed

**Communities**
- Aboriginal Community Controlled Mechanisms, such as Local Advisory Groups (LAGs) will develop approaches for engaging and involving local Aboriginal people to identify avenues of decision making in the care and protection of Aboriginal children
- Participate in and contribute to assessment and decision making processes, where appropriate, including Aboriginal Family Led Decision Making
- Aboriginal and CALD communities will have roles and responsibilities consistent with cultural practice.

**FACS**

**Caseworker**
- Conduct work in a culturally capable manner, consistent with the NSW Practice Framework and Practice Standards, and the Aboriginal Cultural Capability Framework
- Discuss the report and its nature with the family
- Effectively engage with and create meaningful opportunities for families and communities to participate in assessment processes, including Aboriginal Family Led Decision Making
- Conduct SARA and identify case plan goal in collaboration with the Permanency Coordinator, for recommendation to Manager Casework
- Assess eligibility and identify appropriate funded family preservation services
- Discuss available PSP service providers for Family Preservation Packages
- Work with the family to identify the most appropriate service provider where options are available
- Contact PSP service provider to commence referral process
- Conduct a warm referral to the service, including introduction of the family to the service provider
• Provide all relevant information to selected PSP Service Provider
• Record all relevant plans, actions and outcomes in ChildStory
• Attend initial home visit with the service provider practitioner
• Participate in Family Action Plan meetings as required
• Conduct 90 day risk reassessment in collaboration with PSP service provider
• Organise an FGC following request from a service provider
• Work collaboratively with service providers, where required, including support to conduct activities including FGC
• Lead work associated with investigating and obtaining legal options to support family preservation, including PRCs and PCOs
• Make recommendations in relation to case closure and undertake associated work on approval
• Make decisions regarding the appropriateness of the case plan goal and undertake work related to case plan goal changes, including the removal of children in cases where risk has become excessive.

Manager Casework
• Review and approve recommended case plan goal
• Provide guidance to FACS caseworkers working collaboratively with PSP Family Preservation Service Providers.

Permanency Coordinator
• Provide guidance and quality assurance in relation to case plan goal allocation
• Participate in three monthly review process as required and where capacity exists, to ensure the case plan goal of Family Preservation remains appropriate
• Participate in final reviews following closure of the case with FACS
• Provide assistance in situations where a change in case plan goal is being considered
• Provide advice to service providers seeking agencies for referral and brokerage purposes
• Review Preservation Packages, both on an individual basis and on a systems/cohort level
• Understand what is being purchased, what is being achieved and what development is needed
• Support implementation and review of Packages.

District, including Commissioning and Planning, and Child and Family District Unit (CFDU)
• Monitor full utilisation of FACS funded preservation services and availability of PSP Family Preservation Packages across the district
• Advise Community Services Centre (CSC) staff regarding services with PSP Family Preservation Package delivery capacity and support effective referrals to the service system
• Verify payment data and number of packages to be paid to each service provider
• Relevant contract manager to:
  o complete contracting
  o manage service provider contracts and monitor performance
  o support service providers to improve performance through networking and training opportunities
  o facilitate information exchange between district and central office with regard to contract delivery matters.
• Monitor subcontracting
• Act as the key interface between funded service providers and FACS in relation to children by:
  o coordinating referrals to funded service providers to provide services for children and families
  o supporting funded service providers to administer case management
• Provide advice to funded service providers regarding:
  o operation of Permanency Case Management Policy, Rules and Practice Guidance
  o local district structure and operating models (unique to a specific district)
• Act as the point of contact for funded service providers where there has been a significant change in relevant circumstances for the child and their family/that requires review.
• Liaise with appropriate internal stakeholders when contacted by funded service providers about:
  o providing information and data in relation to the achievement of case plan goals
  o proposals to change a case plan goal
  o notifying intention to cease case management and
  o case management transfer.

Central Office
• Provide information in relation to PSP Family Preservation Package service requirements, including the Program Framework and Business Rules
• Manage implementation of the overall PSP, including Family Preservation Packages
• Ensure frameworks and systems are in place to support district and service provider staff deliver and monitor packages
• Make payments to PSP service providers
• Monitor overall program success
• Work with districts, service providers and peaks to identify issues and continuously improve the package.

PSP Service Providers
• Ensure models used to deliver the PSP Family Preservation Package are evidence-based or, at a minimum, evidence-informed
• Deliver work in a culturally capable manner
• Effectively engage with and create meaningful opportunities for families and communities to participate in assessment processes, including Aboriginal Family Led Decision Making
• Ensure staff delivering PSP Family Preservation Packages are sufficiently qualified and trained
• Accept all suitable referrals and make contact with families, including conducting the first home visit in partnership with the FACS caseworker
• Conduct case coordination work as outlined in the PSP PLA, Family Preservation Package Program Framework and Family Preservation Package Business Rules
• Consult with children and families
• Work collaboratively with children and families to identify needs and strengths
• Support children and families’ connection to extended family/kin, community and culture
• Promote the rights of children and families
• Respect the privacy of children and families
• Participate in the 90 day risk reassessment collaboratively with FACS
• Enter into licence or certification agreements with model developers, where relevant
• Maintain fidelity to any evidence-based models being utilised, along with the core components and mandatory activities outlined in the PSP Family Preservation Package Program Framework
• Ensure an appropriate evaluation framework is in place to build evidence where required
• Identify appropriate services for referral and brokerage
• Monitor service delivery conducted by brokered providers
• Organise and conduct Family Action Plan meetings
• With assistance from FACS, organise FGC, where required
• Liaise with FACS, including district staff, to facilitate work towards Family Action Plan goals and program outcomes
• Undertake exit planning to support stability when service provision concludes
• Record all relevant plans, actions and outcomes in ChildStory
• Conduct safety monitoring including risk reassessment work in partnership with FACS caseworker
• Identify any potential risks and address through appropriate channels, working collaboratively with the CSC wherever possible
• Collect data to support monitoring of client outcomes
• Report on outcomes as required by the PSP PLA
• Work with central office and commissioned evaluators to measure and monitor program and client outcomes, and participate in any relevant research activities.

Dispute resolution

Where families/kin receiving services raise issues, or where FACS and the service provider disagree, the service provider must contact their FACS caseworker in the first instance. FACS will use the dispute resolution process described in the Program Level Agreement as required.

Service Providers should use the local FACS contract manager as the first point of contact for raising a contractual issue or dispute.

Subcontracting and brokerage

It is unlikely that PSP Family Preservation Package providers will be able to deliver the full spectrum of services required to achieve outcomes for children and parents. Where possible, accessing available universal services, such as NSW Health services or NDIS funding, is encouraged. While it is possible that children and parents may be able to access some funded services, it can be expected that, in order to achieve Family Action Plan goals, providers will need to subcontract or broker some services. Service providers will be expected to use package funds to cover transport costs, including those associated with contact and attending appointments, as well as any drug testing required.

Funding provided through the Case Coordination Package is expected to adequately cover the work relating to subcontracting and brokerage of other supports and services. No additional funding will be provided, through Non-Placement Support Services (NPSS) or otherwise, to manage this work.
Adequate records must be kept regarding any subcontracted or brokered, services or items. This includes noting the need for such services or items in the Family Action Plan and maintaining a list of purchases with their value and relevant review dates.

**Subcontracting of service providers**

Where a provider intends to subcontract a service considered essential to effective package delivery, an application for consent to subcontract, must be made. For more information about subcontracting, please read the following fact sheet. The application covers the following three arrangements, considered to be subcontracting:

- Consortium
- Fee-for-service arrangement
- Labour-hire arrangement.

The Guide to applying for consent to subcontract FACS funded services provides more information about the application and links to application forms.

Service providers should also refer to Section 4.2 of the PSP Program Level Agreement (PLA) Subcontracting of the Services for guidance on subcontracting.

**Services that may require subcontracting**

- Parenting skills programs
- Domestic and family violence programs
- Aboriginal case workers
- CALD case workers
- Language services

**Services likely to require brokerage**

- Family relationship counselling
- Domestic and family violence counselling/services
- Alcohol and other drug treatment
- Adult psychology/psychiatry
- Child psychology/psychiatry
- Allied health services, such as occupational and speech therapists
- Child care
- Respite
- Educational supports
- Home maintenance and cleaning services.

**Purchase of material aid**

The Family and Parenting Support component of the package includes scope for the purchase of material needs for families. This allows providers the option to purchase items, such as white goods and furniture, where these have been identified as basic essentials.

**Respite**

Respite is a non-mandatory activity under the PSP Family Preservation Package Program Framework. The rationale for this is to encourage extended family and community networks to support parents by providing care for children. Where additional support to care for children through family or community networks is not available, respite services may be purchased.
The cost of respite has been factored into the unit price of the Family Preservation Package as it is considered a likely expense under the Family and Parenting Support component. As this is the case, no other supplementary funding to pay for respite services will be available.

**Purchase of a place in a FACS funded family preservation service**

Prior to the purchase of a PSP Family Preservation Package from a PSP service provider, FACS will assess the availability and appropriateness of any FACS funded family preservation services in their local area. Where an appropriate service is not available, FACS will seek to purchase a package from a PSP provider.

If the PSP provider feels that access to an appropriate family preservation service would be beneficial for the family, the PSP service provider may negotiate the purchase of a place in that service through a fee-for-service arrangement. Where necessary, the PSP service provider may also seek to purchase only one or more components of the program, as relevant to the needs of the child and family.

**Reporting**

Service providers must report to FACS about whether a family is on track to meet their case plan goal every three months.

Depending on the nature of progress, and also at any time while a service is underway, FACS, in consultation with the service provider, may decide that:

- The level of service intensity needs to change to meet the child or family’s different needs
- Reviews indicate the service is not effective in improving the safety and wellbeing of the child and the service will cease
- The child or young person needs to be placed in care, or
- A transfer to a different service provider would better meet the needs of the child and family.

Service providers should refer to Schedule 2, Performance and Outcomes Data Reporting, of their Program Level Agreement (PLA) for information on reporting requirements.

**Transfers**

FACS wants stability and continuity of service provision for children and families, so a transfer to another service or service type will occur in only exceptional circumstances and at FACS’ request. Client voice will be a relevant factor in provider choice, to the extent permitted by local resources.

Should a family plan to move interstate, FACS will review the Family Action Plan with the PSP service provider to assess the need for further work. Where further work would be beneficial, and the family provides consent, FACS will provide advice to interstate colleagues regarding the family’s needs.

**Closing a case**

According to the *Permanency Case Management Policy: Rules and Practice Guidance*, a service provider ceases to have responsibility for case management when FACS and the
service provider agree that the family preservation case plan goal has been achieved. The case plan goal will be considered achieved following:

- the expiry of any orders that support achievement of the case plan goal, for example a parent capacity order or
- where assessed risk of abuse or neglect falls to, and remains, low or medium risk.

In relation to the PSP Family Preservation Packages, where the level of risk has reduced to low, one risk assessment will be sufficient for FACS to close the case. Where the outcome is medium, a minimum of two consecutive assessments at that level, will be required.

Once a case has been closed by FACS, the service provider will work towards ceasing work with the family within 3 months, depending on the circumstances. The Permanency Coordinator will work with the service provider to review the case during this period.

Withdrawal of package funding

FACS will work collaboratively with PSP service providers to monitor child and family outcomes on a quarterly basis. In some cases, outcome monitoring may indicate that services provided through the PSP Family Preservation Package are no longer appropriate. Where it is determined that the program is not right for a family, FACS may take back responsibility for the case. This will include the withdrawal of package funding from the service provider.

When a decision is made to remove a child

In situations where a decision is made to remove a child, every effort must be made to place the child with a provider and family, with whom they are familiar. Caseworkers must also actively seek to identify possible placement options within families and communities to minimise the impact of removal and placement with strangers. FACS and service providers will also demonstrate efforts to comply with the Aboriginal and Torres Strait Islander Child Placement Principle, including upholding the rights of Aboriginal children and young people.

Disengagement of a family

Should a family disengage from services under a PSP Family Preservation Package, FACS will work with the service provider to reach an agreement regarding case closure and the availability of that package for another family.
Appendix 1: Referral Guide

A guide for casework practitioners referring to services providing family preservation in NSW.

FACS funded service providers include those providing services under Brighter Futures, Youth Hope, Newpin, Resilient Families, IFP, IFBS, MST-CAN® and FFT-CW®.

NOTE: FACS will only contract one service at a time. This means that a child or their family cannot be in receipt of any type of PSP service package and another funded program at the same time.

<table>
<thead>
<tr>
<th>Step one</th>
<th>Are there funded family preservation services available locally?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• If the answer is YES skip to step 2.</td>
</tr>
<tr>
<td></td>
<td>• If the answer is NO consider making a referral to a service provider using the PSP Family Preservation package following consultation with your district Permanency Coordinator.</td>
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<tr>
<th>Step two</th>
<th>Does the family meet the eligibility criteria for a funded family preservation program as identified in the child’s case plan goal and will it meet the needs of the child and family?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• If the answer is YES skip to step 3.</td>
</tr>
<tr>
<td></td>
<td>• If the answer is NO consider making a referral to a service provider using the PSP Family Preservation package following consultation with your district Permanency Coordinator.</td>
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<tr>
<th>Step three</th>
<th>Is there a vacancy with the funded program identified for the family in step three?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• If the answer is YES make a referral for the relevant funded family preservation program using established referral processes.</td>
</tr>
<tr>
<td></td>
<td>• If the answer to question is NO consider making a referral to a service provider using the PSP Family Preservation packages following consultation with your district Permanency Coordinator.</td>
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</tbody>
</table>
Appendix 2: FACS Funded Preservation Services Maps

A larger version of these maps is available on the FACS website for NSW and Greater Sydney.

FACS Funded Preservation Services
Greater Sydney region

1 = Brighter Futures (BF)
2 = Newpin
3 = Youth Hope (YH)
4 = Intensive Family Preservation (IFP)
5 = Intensive Family Based Service (IFBS)
6 = Protecting Aboriginal Children Together (PACT)
7 = Multisystemic Therapy for Child Abuse and Neglect (MST-CAHN)
8 = Functional Family Therapy through Child Welfare (FFT-CWW)
Appendix 3: Eligibility Criteria for other funded programs

Note: the following criteria are correct as at the time of writing. Users should check with relevant programs as to the most up-to-date referral criteria before making a referral.

### Eligibility criteria for FACS funded family preservation programs in NSW

Each of the below funded family preservation programs have clear referral criteria which must be met for the family to be accepted by the service.

**Brighter Futures (BF)**

BF is an early intervention child protection program. The program works with families where the ROSH report is for a child aged 0-8 years including during pregnancy. The program offers home visiting, parenting programs, childcare and brokerage.

**The eligibility criteria are:**

- The family must have at least one child under nine years of age living at home, OR be expecting a child who will be at high risk of entering the statutory child protection system; and
- The parent/primary carer’s capacity to parent and/or the child’s safety and wellbeing might be adversely impacted by one or more vulnerability:
  - domestic and family violence
  - drug or alcohol misuse
  - parental mental health issues
  - parent with significant learning difficulty or intellectual disability
  - lack of parenting skills.

**AND**

- The family has been the subject of three or fewer ROSH child protection reports in the last twelve months with a response need of less than 10 days or less than 72 hours, or
- A SARA has been completed within the last 28 days and the Safety Decision is “safe” and the family’s final risk level is “high” or “very high”, but there is no current risk of a child being removed from the family.
  
  or

There has been a “step down” referral from an Intensive Family Preservation (IFP) service provider, the IFP intervention was considered a success and there is no longer a risk of removal for the children. These referrals should be counted as ROSH referrals even when they are made directly by an IFP service through the community referral pathway.

Brighter Futures is not suitable for all families. **Referrals must not be made where any of the following apply:**

- the ROSH is so high that a Brighter Futures service is unlikely to adequately ensure a child’s safety
- there are indications of long-standing, deliberate physical or psychological abuse/harm in the family, or on-going risk of child sexual abuse/harm or possible exposure to sexual abuse/harm
• a household member or adult with caring responsibilities is the subject of current criminal proceedings and/or a current Joint Investigation Response Team (JIRT) investigation relating to an allegation of abuse or neglect of a child or young person
• a child or young person who is in OOHC, has a current care order, or is the subject of proceedings to assign parental responsibility to a person other than the parents
• families where there are children or young people with Guardianship orders
• a parent/primary carer is the authorised carer of a child in OOHC
• the safety of workers or others when working with the family would be seriously compromised and the service provider cannot reasonably manage the risk to their staff, or
• families that have a case plan goal of restoration.

Family histories should be reviewed comprehensively before a decision is made about eligibility for Brighter Futures. Information about children or young people with historical relationships to adults in the home should also be considered in the application of the above criteria. This may be completed by the Community Service Centre (CSC) or the FACS Brighter Futures Unit (BFU) pending the referral pathway.

**Youth Hope (YH)**

YH works with families where the ROSH report relates to a child aged 9–15 years. The program works with the whole family including siblings. The program works with children to re-engage them with education and to support them as well as working with parents to improve parenting.

The eligibility criteria are:

- The child is aged between 9-15 years and 11 months
- The child has a current ROSH report which is not older than 1 month.

Cases that will not be referred to Youth Hope include:

- The primary child at ROSH is under 9 years old at the time of referral.
- The young person at ROSH is older than 15 years 11 months at the time of referral.
- The child/young person is currently in OOHC.
- The child/young person lives out of the agreed program area.

**Intensive Family Preservation (IFP)**

IFP works in family preservation, placement stability and restoration. The program works with families with children aged birth – 18 years. It is a six month program and aims to keep children in their home in a safe, stable, nurturing family environment; improve parenting capacity and family functioning; improve child’s wellbeing, prevent or reduce placement in OOHC, where appropriate.

IFP provides multi-faceted individually tailored support services (parenting program, childcare, brokerage support, advice, referral to other services, counselling, linkage to community networks, etc.) are delivered flexibly usually at home or in the community setting.
The eligibility criteria are:

- At least one parent/authorised carer is willing and available to work with the IFP service towards reaching the agreed case goals.
- Key child/children aged 14 -18 years agree to receive and participate in the IFP service.
- The family has some strengths, or available resources or social supports that can be used to increase the children’s safety and enhance parenting capacity.
- Intensive case management and support, particularly in relation to health and wellbeing, parenting, household management (including budgeting), practical support and social integration, are needed to address the family issues that place the child at ROSH.

Where the service is working towards ensuring family preservation the child has been assessed as being at risk of significant harm at least one of the following criteria must apply:

- A SARA has been completed and the safety decision is either “Safe” or “Safe with plan” and the family’s final risk level is “High” or “Very High”.
- The child is considered to be at risk of entering OOHC without intensive intervention.
  or
  The child is living with an authorised carer AND there are significant concerns for placement stability, identified through a risk assessment.
  or
  The child is in OOHC, and a restoration assessment indicates that intensive support is required.

**Intensive Family Based Services (IFBS)**

IFBS works with Aboriginal families in family preservation, placement support and restoration. IFBS aims to protect children by working with families and carers to minimise immediate ROSH concerns, to stabilise crises and prevent unnecessary placement into OOHC. It also aims to facilitate the safe restoration of children from OOHC and provide support to children in care, and their carers, where placements are at risk of breaking down.

The eligibility criteria are:

- Aboriginal and/or Torres Strait Islander families subject to safety and risk concerns who are experiencing some form of crisis.
- A completed Safety Assessment where the child has been assessed as being ‘safe’ or ‘safe with plan’.
- Completed Risk Assessment outcome being ‘high to very high’.
- The case is open and allocated at the referring CSC.
- There is no commencement of court proceedings for statutory intervention, except current orders (such as supervision orders) and
  orders stipulating a child can only remain in the home with the assistance of IFBS.
Functional Family Therapy (FFT-CW®)

FFT-CW® is an evidence based intervention being rolled out across NSW to reduce entries into care and support exits from care.

The eligibility criteria (for family preservation services) are:

- Families with a child/young person living in the home ages 0-17 years.
- Families experiencing risk factors which could place the child at risk of OOHC placement.
- SARA outcome must be ‘high’ or ‘very high’.
- Pre-natal reports are on a case by case basis.
- Appropriate for families where there is minimal engagement and acceptance of services.
- Guardianship order: families where ROSH received and SARA outcome high or very high. General eligibility criteria apply.
- No order: families where ROSH received and SARA outcome high or very high. General eligibility criteria apply.

NB: Children subject to PRR order are not eligible for referral to the program.

The provider will determine whether to place the family in the low or high track (if both tracks are available in the location).

Multisystemic Therapy – Child Abuse and Neglect (MST-CAN®)

MST-CAN® is an evidence based intervention being rolled out across NSW to reduce entries into care and support exits from care.

The eligibility criteria (for family preservation) are:

- Families who come to the attention of FACS due to the physical abuse and/or neglect of a child or the children in the family.
- The family may be a “frequent user” of the FACS system and services and multiple referrals and service engagement have not previously achieved change. SARA Risk Assessment outcome must be ‘high’ or ‘very high’.
- Reports are received by the Helpline where a significant incident and/or ROSH report has occurred within 180 days and a SARA has been completed indicating suitability, i.e. physical abuse, neglect, particularly where reports include drug and alcohol and/or mental health risk factors.
- Families with a primary child between the ages of 6 and 17 while siblings may be other ages.
- Families where the primary child and/or other children are at imminent risk of removal.
- Half of all places are allocated to Aboriginal children across the entire project/state. The target for Aboriginal service use in each location will be managed by the FACS Central Referral Unit (CRU).
- Child aged under 18 years who has been physically abused and/or neglected and has been identified for family preservation (e.g. may be homeless ‘couch surfing’).
• A child who has been physically abused and neglected and has longstanding peer relationship problems – social isolation, membership of inappropriate peer group or inappropriate boundaries with peers.

• Parents and/or children who have been physically abused and neglected and may be involved in substance abuse.

Newpin

Referrals for Newpin are managed centrally by the FACS Contract Manager who will identify families who meet the eligibility for referral.

Cohort 1 - Restoration

The eligibility criteria for restoration is:

• Families with at least one child aged less than 6 years in statutory OOHC for at least 3 months. If a child has been in OOHC for less than 3 months but is highly likely to remain in OOHC for over 3 months, the family can still be referred.

• Any sibling who is also in OOHC, or who is unborn and likely to enter OOHC, and who has been assessed as suitable for restoration. The Children’s Court proceedings do not need to be finalised in order for the family to be referred. However, FACS should have formed an opinion that restoration is a possibility.

Additional eligibility criteria
In addition, to be included in a cohort participating in the Newpin SBB pilot, families referred to Newpin must:

• reside in the local area of the Newpin centre or be able to travel to the Newpin centre, and

• their children, aged less than 6 years, must be able to attend the program with the parent (including OOHC contact visits).

Cohort 2 – Family preservation

Families with at least one unborn child or a child aged less than 6 years at risk, and a SARA has commenced and the child has been assessed as ‘safe with plan’; or, a supervision order is in place and the family is likely to benefit from the Newpin service in the opinion of the referring CSC.

Cohort 3 – Family preservation

Families with at least 1 child aged less than 6 years who does not meet the criteria for Cohorts 1 and 2 but who have been referred to Newpin, this may include:

• a SARA has been completed and the children have been assessed as ‘safe’ and at ‘low’ or ‘moderate’ risk and the CSC plan to close the case, or

• families where child protection concerns exist, but do not meet the ROSH threshold and who are referred by sources other than FACS including self-referrals.

Resilient Families

In addition to residing in a Resilient Families catchment suburb, families referred to the program will meet the following criteria:

• the family has at least one child who is aged six years or younger and is currently
the subject of an open plan where a SARA has commenced;

- the current SARA was commenced in the proceeding 35 days and the outcome of the initial Safety Assessment was "Safe with Plan";
- the child who is aged six years or younger lives with the primary carer in the family and is not in Statutory or Supported OOHC and/or the Minister does not have Parental Responsibility for the child;
- none of the children of the co-located family are subject to current proceedings to assign Parental Responsibility to another person;
- sexual abuse was not an issue identified in the current SARA;
- no member of the co-located family is the subject of criminal proceedings and/or a current JIRT investigation that relates to an allegation of abuse or neglect of a child or young person; and
- the family is not currently receiving an intensive family support type service.