Pathways of Care Longitudinal Study: Outcomes of Children and Young People in Out-of-Home Care

Study Design and Data User Guide
Pathways of Care Longitudinal Study: Outcomes of Children and Young People in Out-of-Home Care in NSW

Technical Report No. 2
Study Design and Data User Guide
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Preface

The Pathways of Care Longitudinal Study (POCLS) is funded and managed by the New South Wales Department of Communities and Justice (DCJ). It is the first large-scale prospective longitudinal study of children and young people in out-of-home care (OOHC) in Australia. Information on safety, permanency and wellbeing is being collected from various sources. The child developmental domains of interest are physical health, socio-emotional wellbeing and cognitive/learning ability.

The overall aim of this study is to collect detailed information about the life course development of children who enter OOHC for the first time and the factors that influence their development. The POCLS objectives are to:

• describe the characteristics, child protection history, development and wellbeing of children and young people at the time they enter OOHC for the first time

• describe the services, interventions and pathways for children and young people in OOHC, post restoration, post adoption and on leaving care at 18 years

• describe children’s and young people’s experiences while growing up in OOHC, post restoration, post adoption and on leaving care at 18 years

• understand the factors that influence the outcomes for children and young people who grow up in OOHC, are restored home, are adopted or leave care at 18 years

• inform policy and practice to strengthen the OOHC service system in NSW to improve the outcomes for children and young people in OOHC.

The POCLS is the first study to link data on children’s child protection backgrounds, OOHC placements, health, education and offending held by multiple government agencies; and match it to first-hand accounts from children, caregivers, caseworkers and teachers. The POCLS database will allow researchers to track children’s trajectories and experiences from birth.

The population cohort is a census of all children and young people who entered OOHC for the first time in NSW over the 18 month period between May 2010 and October 2011 (n=4,126). A subset of those children and young people who went on to receive final Children’s Court care and protection orders by April 2013 (2,828) were eligible to participate in the interview component of the study. For more information about the study please visit the study webpage www.facs.nsw.gov.au/resources/research/pathways-of-care

The POCLS acknowledges and honours Aboriginal people as our First Peoples of NSW and is committed to working with the DCJ Aboriginal Outcomes team to ensure that Aboriginal children, young people, families and communities are supported and empowered to improve their life outcomes. The POCLS data asset will be used to improve how services and supports are designed and delivered in partnership with Aboriginal people and communities.
DCJ recognises the importance of Indigenous Data Sovereignty (IDS) and Indigenous Data Governance (IDG) in the design, collection, analysis, dissemination and management of all data related to Aboriginal Australians. The POCLS is subject to ethics approval, including from the Aboriginal Health & Medical Research Council of NSW. The DCJ is currently in the process of scoping the development of IDS and IDG principles that will apply to future Aboriginal data creation, development, stewardship, analysis, dissemination and infrastructure. The POCLS will continue to collaborate with Aboriginal Peoples and will apply the DCJ research governance principles once developed.
# Abbreviations

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<tr>
<td>ACASI</td>
<td>Audio computer assisted self-interview</td>
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<td>CALD</td>
<td>Culturally and linguistically diverse</td>
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<tr>
<td>CAPI</td>
<td>Computer-assisted person interview</td>
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<tr>
<td>Caregivers</td>
<td>Birth parents, foster carers, relative/kinship carers, residential care workers</td>
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<tr>
<td>CASI</td>
<td>Computer-assisted self-interview</td>
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<td>ChildStory</td>
<td>Child protection case management system (DCJ) implementation commenced in November 2017 (previously KiDS)</td>
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<td>CHEReL</td>
<td>Centre for Health Record Linkage</td>
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<td>Children</td>
<td>Children and young people</td>
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<td>CIW</td>
<td>Corporate Information Warehouse (DCJ).</td>
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<td>DCJ</td>
<td>NSW Department of Communities and Justice</td>
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<tr>
<td>District</td>
<td>There are 15 DCJ administrative districts to deliver services (16 if State-wide Services included) which are aligned with the local health districts in NSW</td>
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<tr>
<td>FACS</td>
<td>NSW Department of Family and Community Services (now DCJ)</td>
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<td>FACSIAR</td>
<td>NSW Department of Family and Community Services Insights, Analysis and Research</td>
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<td>FSPs</td>
<td>Funded Service Providers (previously known as non-government organisations (NGOs)</td>
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<td>HREC</td>
<td>Human Research Ethics Committee</td>
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<tr>
<td>KiDS</td>
<td>Key Information and Directory System (FACS) (replaced by ChildStory)</td>
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<td>NSW</td>
<td>New South Wales</td>
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<td>OOHC</td>
<td>Out-of-home care</td>
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<td>POCLS</td>
<td>Pathways of Care Longitudinal Study</td>
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<tr>
<td>ROSH</td>
<td>Risk of significant harm</td>
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<td>SURE</td>
<td>Secure Unified Research Environment (Sax Institute) where the POCLS data is securely stored.</td>
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1 Introduction to this Guide

The Pathways of Care Longitudinal Study (POCLS) has been established to follow the trajectories and wellbeing of a cohort of children and young people (hereafter referred to as children) placed in out-of-home care (OOHC). The aim of the study is to provide significant new knowledge that will inform policy to improve the outcomes of children in OOHC.

The POCLS databases hold a large number of variables spanning many topics relevant to life-course trajectories, the OOHC service system and service use and outcomes measures. At the time of writing, the first four waves of the POCLS data were available for researchers.

This Study Design and Data User Guide (Technical Report 2) serves as a reference for the users of the POCLS data sets up to Wave 4. It documents up to date information about the POCLS, including the aim of the study, study design, data sources, file structure and data access in the Secure Unified Research Environment (SURE). This report will also direct the reader to other reference documents including the questionnaires, data dictionaries, data books and technical reports. The POCLS Objectives and Strategic Research Agenda (Technical Report 1) Appendix 1 contains a full list of resources for data users.

Study protocol

Study webpage
All study publications including technical reports, research reports and evidence-to-action notes can be found on the study webpage www.facs.nsw.gov.au/resources/research/pathways-of-care

Data user support and training
User support and assistance with queries can be obtained by contacting the POCLS project team at Pathways@facs.nsw.gov.au. User training workshops are offered by the POCLS project team. The training workshops will be advertised on the study webpage https://www.facs.nsw.gov.au/resources/research/pathways-of-care/POCLS-updates

Feedback
This Study Design and Data User Guide will develop over time. The POCLS project team would appreciate any feedback about the Guide. If you have any comments, suggestions or queries, please email pathways@facs.nsw.gov.au
2 The POCLS Study

Aim
The POCLS is the first large-scale prospective longitudinal study of children in OOHC in Australia. The aim of the POCLS is to provide significant new knowledge that will inform policy and practice to improve the outcomes of children in OOHC. The outcomes include children's permanency, safety and wellbeing including their physical health, socio-emotional and cognitive/learning development. With large numbers of children in OOHC, statutory agencies have a duty to understand how OOHC and other services influence child development so that the service system can be improved.

This study provides unique, high-quality information about the wellbeing trajectories of children in OOHC, with immediate relevance to policy and practice decision making, regarding: the length of time in OOHC; placement type and exiting care; recruiting, training and supporting caregivers; family contact; the provision of casework, services and supports; improved resource allocation; and improvements to the utility of the administrative data.

Objectives of the study
The research will address the following objectives:

- to describe the characteristics, child protection history, development and wellbeing of children at the time they enter OOHC for the first time
- to describe the services, interventions and pathways for children in OOHC, post restoration, post adoption and on leaving care at 18 years
- to describe children's experiences while growing up in OOHC, post restoration, post adoption and on leaving care at 18 years
- to understand the factors that influence the outcomes for children who grow up in OOHC, are restored home, are adopted, or leave care at 18 years
- to inform policy and practice to strengthen the OOHC service system in NSW to improve the outcomes for children in OOHC.

Key research questions
The key research questions for the POCLS are:

On entry to OOHC:

- What are the backgrounds and characteristics of the children entering OOHC, including their demographics, child protection history, reasons for entering care, and duration of the legal order?
• What is the physical health, socio-emotional and cognitive/learning development of the children entering OOHC compared with other children in the community?

• How are the Aboriginal Child Placement Principles used in placement assessments and placement decision making for the Aboriginal children entering OOHC?

During OOHC:

• What are the placement, assessment, service intervention and case planning pathways for the children during their time in OOHC or following their return home (post restoration)?

• What are the developmental pathways of the children during their time in OOHC or post restoration?

• How safe are the children during their time in OOHC or post restoration?

• How prepared are they for restoration or the transition out of care at 18 years?

Outcomes from OOHC:

• What are the placement characteristics and placement stability of the children and how do these influence their outcomes?

• In what ways are assessments and service interventions (including service models and methods of delivery) related to the outcomes for the children and how is this affected by their developmental status when they entered care?

• In what ways do the characteristics of the child, carer, home/family and community affect children’s developmental pathways, and how do these differ from similarly situated children in the general population?

• How does contact between the children in OOHC and their birth parents, siblings and/or extended family influence their outcomes?

• How does type of placement for children in OOHC (such as foster care or kinship care) influence their outcomes?

• How well does the administrative data capture the relevant information about the process and quality of care for assessments, case planning and permanency planning and how can it be improved?

The key research questions will address the OOHC population in general as well as key sub-populations in OOHC including Aboriginal children, children from culturally and linguistically diverse backgrounds, children with high needs and/or disabilities.
Conduct, governance & ethical oversight
The DCJ funds and leads the POCLS, with a team of external and internal experts providing advice. Details of the POCLS governance bodies are available in the POCLS Objectives and Strategic Research Agenda 2019-2020 (Technical Report Number 1).

Consultation during the design phase occurred with DCJ District and operational staff and OOHCR peak bodies including: the Aboriginal Child, Family and Community Care State Secretariat (AbSec); the CREATE Foundation; and Connecting Carers (now My Forever Family NSW).

Ethical approval for the POCLS was provided by the University of NSW Research Ethics Committee (HC10335 & HC16542) and the NSW Aboriginal Health and Medical Research Council Ethics Committee (No. 766/10). Ethical approval for NSW linked services data was provided by NSW Population and Health Services Research Ethic Committee (HREC/14/CIPHS/74; Cancer Institute NSW: 2014/12/570). Approval for the teacher survey was provided by the State Education Research Applications Process (SERAP) (Approval Number 2012250) and the Catholic Education Office (CEO) Sydney (and relevant Diocese).

Project timelines
The POCLS began in 2010 and collected baseline information about the children on entry to OOHC as well as collecting ongoing information on their life experiences and the various factors that influence their overall development. Data are collected from children, caregivers, caseworkers, parents and teachers and are linked to administrative data from multiple government agencies to track client outcomes to better support children in OOHC.

As shown in Figure 1, the POCLS sample recruitment began in 2010-2011 and data collection commenced in 2011. Data collection will continue in waves until 2020 (Wave 1 from 2011-2013; Wave 2 from 2013-2015; Wave 3 from 2014-2016; Wave 4 from 2017-2018; Wave 5 from 2019-2020).

This study adopted a staggered approach to data collection in Wave 1, with data collection occurring first with caregivers of children aged 0–35 months in March 2011 and in July 2011 with caregivers of children aged 3–17 years.

The interval between waves of data collection is approximately 18 months between Waves 1-3 and 24 months between Waves 4-5.

To date, 4 waves of data collection have been completed. By the end of Wave 5 in late 2020 the POCLS will have 10 years of in-depth data on children’s OOHCR experiences (including exits and re-entries) and developmental outcomes.
Next steps
To maximise the benefit of this rich data asset to policy and practice, and longitudinal approach to examine the long-term outcomes of the cohort of children who entered OOHC for the first time, the following data collections are being considered:

- Further waves with repeat questions and measures to track the cohort of children overtime
- Addition of a new cohort of children entering OOHC for the first time aged 0-5 years old
- Additional record linkage collections
- An aftercare sub-study to follow the cohort after they turn 18 years old
- Qualitative sub-studies to provide a deeper understanding in key policy and practice areas.
Figure 1: POCLS sample recruitment and data collection timelines

Key:
- Online surveys
- Face-to-face interviews with children and caregivers: interval between Waves 1-3 = 18 months; Wave 4-5 = 24 months.
- Children’s ages at each wave: W1 9 months-17 years; W2 2 years-17 years; W3 3 years-17 years; W4 5 years-17 years; W5 7-17 years
- POCLS interview cohort recruitment
- Record linkage to child protection, health, education and offending data
3 Study overview

Policy context
The Children and Young Persons (Care and Protection) Act 1998 governs the child protection system in NSW. The Act specifies how children under the age of 18 years at risk of significant harm (ROSH), or being harmed, should be protected. This includes guidelines around reporting, assessments and the provision of services, including OOHC. The Act specifies care types, including Interim care orders (S69) (Interim Orders) and Parental Responsibility Orders (S79A) (Final Orders). The Children's Court may make an Interim Order prior to determining whether the child is in need of care and protection. In seeking an Interim Order, DCJ needs to satisfy the Children's Court that it is not in the best interests of the safety, welfare and wellbeing of the child to remain with their parents or other persons having parental responsibility. Subsequently, the Children's Court may allocate, by Final Order, all or some aspects of parental responsibility for a child until permanent restoration, guardianship or adoption is arranged. Some children may remain in long-term care until they reach 18 years of age.

OOHC includes home-based care (relative/kinship care and foster care), therapeutic intensive care (replacing residential care) and independent living. At June 2018, there were 17,387 children in OOHC in NSW of which 38% were Aboriginal. Around half (53%) of the children were placed in relative/kinship care while 44% were in foster care and 3% in residential care. The transition of case management to the NGO sector for children in statutory care began in 2012. By June 2018, 56% of the 13,935 children in statutory care were with accredited and DCJ funded OOHC agencies. Please see the POCLS report on the OOHC Policy Landscape (Technical Report Number 17) for further details about the policy context in NSW during the POCLS data collection.

OOHC is an intervention of last resort if early intervention and family preservation services are not an option. The goals for OOHC in NSW are that children are safe, are developing well in a stable environment matched to their needs and, where possible, are successfully restored to their family. The key policy and practice principles state the importance of: providing children with a family for life as early as possible (permanency); maintaining cultural identity and connections with family/community; involving children in appropriate decision-making; and supporting caregivers to care for children.

Existing research literature
Significant literature shows that children growing up in OOHC are at greater risk for negative outcomes than their peers in the general population in terms of their physical health, socio-emotional wellbeing and cognitive/learning ability. While placement in OOHC protects children who are at risk of abuse, they are more likely to come into contact with the juvenile justice system, drop out of school early and suffer poorer general and emotional health (Cashmore & Paxman, 2006; Fernandez, 2009;
The degree to which this compromised life experience is due to the earlier maltreatment, removal from their family of origin, or by their experiences in OOHC is not known. Recent research audits undertaken about OOHC in Australia (Cashmore & Ainsworth, 2004; Bromfield & Osborn, 2007; McDonald, Higgins, Valentine & Lamont, 2011) indicate that more research is needed to understand the linkages between children’s developmental status at entry to care, their experiences in care, and later developmental outcomes. Existing research is limited by cross-sectional designs, single sites, low response rates, small sample sizes and a lack of validated measures. There is a clear need for a large-scale prospective longitudinal study of children and young people in OOHC to examine developmental trajectories over time in order to identify factors that improve wellbeing. Prospective longitudinal studies are the most appropriate to examine developmental trajectories. Please see the POCLS Literature Review (Research Report Number 6) for existing literature on the factors that influence the outcomes of children who have experienced OOHC.

The POCLS design

Theoretical framework

The POCLS has adopted an ecological and developmental framework. First, as the title of the study suggests, ‘pathways of care’ refers to the sequence of placement and other service events that combine to shape a child’s pathway through the child protection system. Second, the study is concerned with the children’s development over time. The developmental domains of primary importance are safety, cognitive/learning, socio-emotional wellbeing, and physical health. The study is designed to show how children’s placement and other service experiences influence their development while taking the characteristics of the child, caregiver, family and neighbourhood into account.

A developmental perspective emphasises ‘the person-in-interaction-with-environment and the person-over-time’ as the fundamental unit of analysis (Lawrence, 2008). Thus, it is the combination and reciprocity of individual characteristics of a child (pre-natal experiences, genetics, age, gender, culture, disability) with environmental contributions (such as parents, family, caregivers, neighbourhood, community) that shape development. Among the environmental influences, family and neighbourhood are especially important. In particular, the role of neighbourhood effects on child development in Australia is now beginning to be better understood (Coulton, et. al., 2007; Edwards, 2005; 2006; Edwards & Bromfield, 2009).

In this way, a person’s life is not pre-determined—development is always a dynamic, interactive process and, in particular, children are ‘a work in progress—unfinished and in process’ (Lawrence, 2008: 88) which means that their past, present and future are interconnected across time.
Conceptual overview
The developmental domains of interest include children’s safety, physical health, socio-emotional wellbeing and cognitive/learning ability. These developmental outcomes over time will be affected by:

- Characteristics of the children (gender, disability, age on entry into care and cultural background) and their child protection history (parental risk factors, the type, severity and chronicity of maltreatment) on entry into OOHC

- System response, type of court order and different pathways through the OOHC system, including access to and uptake of services (interventions) and movement between different living arrangements (placement stability)

- Characteristics of the caregivers and placement - broadly (relative/kinship, foster or residential) and specifically (e.g., parenting styles, warmth, experience, community support)

- The interactions between child characteristics, socio-cultural context, and the characteristics of the care provided (the services/interventions, characteristics of the carer and placement).

The conceptual overview of factors influencing outcomes of children in OOHC is shown in Figure 2. The data items to match the conceptual framework are shown in Figure 3.
Figure 2: POCLS conceptual overview of the factors influencing the outcomes of children and young people in OOHC
Figure 3: Data items to inform the conceptual overview of factors influencing outcomes of children and young people in OOHC
4 Study cohorts and comparison groups

Population cohort (n=4,126)
The study population cohort is all children aged 0–17 years who entered OOHC for the first time under the Children and Young Persons (Care and Protection) Act 1998 across NSW within an 18-month period between May 2010 and October 2011. The sample frame of first-time entries into OOHC provides the opportunity to understand the developmental pathways of children placed in OOHC, while preventing the confounding influence of past OOHC experiences.

The cohort includes all geographic areas, all age groups and all developmental transitions points in a child’s life. As such it provides a comprehensive picture of who is coming into OOHC and the issues pertaining to development and the Department’s responsibility for their wellbeing. It means that the outcomes and experiences of all children in OOHC across all developmental stages can be reported on – without missing important groups of children in care. As such, the sample provides a comprehensive picture of the issues facing various groups of children (e.g. Aboriginal, CALD, children with high needs, placement type, type of abuse).

The population cohort includes two sub-cohorts – the ‘No final care and protection orders’ cohort and the ‘Final care and protection orders’ cohort (See Figure 4 and Table 1) and further information in the POCLS Sample: examining differences in final orders and no final order cohorts over time (Technical Report Number 18). The criteria to be in each cohort was legal status at one point in time. Those who were ‘No final orders’ by 30 April 2013 might have received a final order later, be returned to their birth parents, adopted or received a guardianship order. Similarly, those on ‘Final orders’ might have returned to their birth parents or exited OOHC to guardianship or adoption. Legal status needs to be considered when interpreting the results of analysis. This is explained further below.

No final care and protection orders cohort as at 30 April 2013 (n=1,298)
A subset of the population cohort is the ‘No final orders’ cohort. This cohort consists of children who entered OOHC for the first time between May 2010 and October 2011 but did not receive final care and protection orders by 30 April 2013. Most would have been assessed as being able to return to their parents’ care with appropriate services and supports while others may have received final orders after 30 April 2013 or re-entered OOHC after 30 April 2013 (see Figure 5; and POCLS Cohorts: examining differences in the final order and the no final order cohorts over time (Technical Report Number 18).

Data available for this cohort are record linkage to child protection, health, education and offending. This cohort was not eligible for face-to-face interviews as the focus of the study is the outcomes of children in long-term OOHC.

Final care and protection orders cohort as at 30 April 2013 (n=2,828)
The other subset of the population cohort is the ‘Final orders’ cohort (n=2,828). This cohort consists of children who entered OOHC for the first time ever between May 2010
and October 2011 and who went on to receive final care and protection orders from the Children's Court by 30 April 2013, allocating to the Minister full aspects of parental responsibility (PR), shared aspects of PR, or no aspects of PR (e.g. full aspects of PR to a relative and thus in supported care).

Children in the ‘Final orders’ cohort could have several legal and placement pathways after 30 April 2013, including remaining in long-term OOHC with or without placement changes; or exiting OOHC to restoration, guardianship or adoption. Some children who exit OOHC may also re-enter OOHC at a later date (see Figure 5).

Data available for this cohort are record linkage to child protection, health, education and offending. Children and their caregivers are also eligible to participate in a face-to-face interview.

**Final care and protection orders interview cohort (n=1,789)**

The ‘Final orders interview’ cohort is a subset of the ‘Final orders’ cohort where the caregiver gave verbal consent for DCJ to pass their contact details to the third party data collection agency for a face-to-face interview. Before each wave of data collection this cohort are invited to participate in an interview unless a hard refusal was received at any wave. Written informed consent is requested from the current caregiver before each interview. While participation in every wave of data collection is ideal, the study allows children and caregivers to skip waves.

Children in the ‘Final orders interview’ cohort restored to their parents during Wave 1 before an interview was scheduled were invited to participate from Wave 2 due to practical and ethical considerations.

Children who exit OOHC to restoration, guardianship or adoption remain in the study and are contacted at each wave of data collection.
Figure 4: Overview of the POCLS cohorts and eligibility for an interview Wave 1-5

Population cohort
All children entering OOHC on interim care and protection orders in NSW between May 2010 - October 2011 (n=4,126)
Record linkage to child protection, health, education and offending data (n=4,126)

Final orders cohort
Children who received final orders by 30 April 2013 (n=2,828)
Eligible for a face-to-face interview

No final orders cohort
Children who did not receive final orders by 30 April 2013 (n=1,298)

Interview cohort (n=1,789)
Verbally invited to a face-to-face interview
Agreed to have their contact details provided to a 3rd party to organise an interview.
Written consent sought before each interview.

Hard refusals
No longer want to be contacted about the study (n=102)

Wave 1 interviews (n=1,285)  No interview (n=504)
Wave 2 interviews (n=1,200)  No interview (n=589)
Wave 3 interviews (n=1,033)  No interview (n=756)
Wave 4 interviews (n=962)  No interview (n=827)
Wave 5 interviews (in field)  No interview (in field)

Notes:
* Children restored during Wave 1 before an interview was arranged joined the study at Wave 2 and their birth parent was interviewed.
* The ‘No final orders’ and ‘Final orders’ cohort status was determined according to whether the child received a final order by 30 April 2013. Subsequently some children may have taken different pathways by exiting or re-entering OOHC. Please see Technical Report Number 18 for more information.

Children’s legal status trajectories overtime
The ‘No final orders’ and ‘Final orders’ cohort status was determined according to whether the child received a final order by 30 April 2013. Subsequently some children may have taken different pathways by exiting or re-entering OOHC. Changing legal status may need to be considered in interpreting results of analysis (see POCLS Cohorts: examining differences in final order and no final order cohorts over time (Technical Report Number 18). The POCLS database will have a flag to indicate which children have exited OOHC to restoration, guardianship or adoption; and who has re-entered OOHC after 30 April 2013. To illustrate changes in legal status, 26% of the 2,828 children on ‘Final orders’ had been restored to their parents, 11% were on
guardianship orders and 1% had been adopted by 30 June 2016. Similarly, 9% of children not on ‘Final orders’ at 30 April 2013 (n=1,298) were on final orders by 30 June 2016. Figure 5 illustrates the theoretical changing legal status of children overtime in the POCLS ‘No final orders’ and ‘Final orders’ cohorts.

In addition to changes in legal status, children can also change placement status due to a placement breakdown or planned move. It is estimated that between 18% and 36% of the 1,285 children in the interview cohort at Wave 1 had subsequently changed carers by 30 June 2016. Please note, children changing legal status often stay with the same caregivers if exiting to guardianship or adoption.

Figure 5: Theoretical changing legal status over waves of data collection for children in the POCLS
Cohorts of interest and comparison groups

Comparisons between and within cohorts can be undertaken (see Table 1). The linked administrative data and interview data can be used to compare the outcomes of children entering OOHC on final care and protection orders for the first time with children who entered OOHC because of similar child protection issues but did not receive final orders (subject to the limitations that are discussed in Technical Report Number 18). Geographic comparisons of children in OOHC in similarly advantaged or disadvantaged areas can also be undertaken.

Sub-populations and trajectories of interest:

- Children at risk of harm who do not enter OOHC on final care and protection orders
- Children on final care and protection orders who exit OOHC to restoration, guardianship or adoption
- Young people who exit OOHC because they turn 18
- Children who enter OOHC as infants
- Young people who enter OOHC in middle childhood and as teenagers
- Aboriginal children in OOHC
- CALD children in OOHC
- Children at risk of significant harm with high and complex needs
- Children at risk of significant harm with disabilities
- Districts, neighbourhoods, postcodes.

Table 1 below shows the key characteristics of the POCLS sample in the ‘Final orders’ and ‘No final orders’ cohort; and then for each subsequent wave of data collection.
Table 1: POCLS sample characteristics over Waves 1-4: children and young people who entered OOHC for the first time between May 2010-October 2011

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<tr>
<td>Exit to independence</td>
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<td>129</td>
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<td>70</td>
<td>3.9</td>
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<td>180</td>
<td>6.4</td>
<td>132</td>
<td>7.4</td>
<td>74</td>
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<td>Northern NSW</td>
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<td>4.3</td>
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<td>5.3</td>
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<tr>
<td>Total</td>
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<td>100.0</td>
<td>2,828</td>
<td>100.0</td>
<td>1,789</td>
<td>100.0</td>
<td>1,285</td>
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</table>

\(^1\) The POCLS has administrative data for the population cohort and survey data for the final orders interview cohort.

\(^2\) See Technical Report Number 12 for on the counting rule used to derive the child’s cultural background.

\(^3\) The exit status was derived based on DCJ administrative data as at 30 June 2016. As such, it refers to the exit status by 30 June 2016, rather than at the time of interview. A child would be counted at each wave and in the final orders cohorts if he or she participated in each wave’s interview.

\(^*\) Interviews with young people 18 years or older will commence in 2020 during Wave 5. Data forthcoming.
5 Sample size, recruitment and retention

Sample size required for the longitudinal analysis

Sample size estimates were based on a similar US study and were determined to be able to detect differences between sub-groups in terms of their cognitive and physical development. Sample sizes of at least 500 children from a homogeneous group were estimated to be required to measure differences between sub-groups for child development linear and quadratic growth curves from the National Study of Child and Adolescent Well-Being (NSCAW). A 5% statistical significance level and 80% statistical power were used in sample size estimates. For more detailed information on sample size and statistical power, please see the POCLS report on Statistical Power, Selection Bias and Non-Response Correction (POCLS Technical Report Number 5).

The issue of small sample sizes can be found due to the use of multiple skip patterns and are likely to pose challenges to statistical analysis (i.e., lack of statistical power). Small sample sizes can also be found in the sub-samples, such as children aged 12 years and older, children in residential care, CALD children, children adopted and some Districts. For example, there were only 124 young people aged 12 years and older at Wave 1 and there were only seven children in the Far West District at Wave 1. Table 1 above details the characteristics and sample sizes of the POCLS cohorts.

Verification of the study eligible sample

As shown in Figure 4 above, children were recruited to the study using information from the Key information Directory Service (KiDS)\(^1\) extracted through the Corporate Information Warehouse (CIW). KiDS (now ChildStory) contained information on all DCJ clients in OOHC and child protection for case management purposes. Prior to recruitment of children to the study, the KiDS data was verified by regional staff to ensure the demographics and OOHC data was up to date.

Once a child or young person is recruited to this study, the POCLS will follow their progress for the life of the study regardless of changes to the placement (same caregiver or new caregiver) or legal orders (exits from OOHC to restoration, guardianship, adoption or turning 18 years of age; or re-entries to OOHC). Young people who leave OOHC at 18 years of age will be followed-up by a sub study commencing during Wave 5.

Sample recruitment process

All children who met the eligibility criteria were recruited to the study. When the study child was verified as having progressed to being on a final order (parental responsibility is transferred to the Minister or a relative) their information was uploaded into the POCLS sample recruitment database and they were allocated a unique Study ID.

\(^1\) The implementation of ChildStory that replaced KiDS commenced in November 2017.
Figure 6 shows the steps for recruitment, verification and data collection of children in the POCLS.

A pre-approach letter and the study brochure was sent to the study child’s caregiver. A follow-up phone call was made to the study child’s caregiver by DCJ to ascertain if they were agreeable for their data to be securely transferred from DCJ to the independent data collection agency. Information is only shared between DCJ and the independent data collection agency for the purpose of recruitment.

If the study child’s caregiver agreed for their data to be transferred, the independent data collection agency contacted the study child’s caregiver to seek their participation in the study. If they agreed to participate, the independent data collection agency obtained written informed consent from them and the child (if appropriate) and completed the baseline (Wave 1) face-to-face interview/s.

Caregivers and/or children who decline participation in a wave are invited to participate in subsequent waves of data collection. In order to examine outcomes for all children in the study, children who exit OOHC to restoration, guardianship or adoption remain in the study and are contacted at each wave of data collection.

Before each wave of data collection the DCJ administrative data held in Childstory is used to verify that the child’s contact details are the same. If the child is placed with a new carer, the new carer is recruited to the study. If the child is living outside of NSW but still case managed or receiving an allowance from DCJ, they are eligible to be in the study.
Figure 6: Steps for recruitment, verification and data collection of children in the POCLS

1. Children who match the study’s selection criteria are identified using KiDS extracted through CIW.
2. CIW extract uploaded into the Recruitment Database and a unique study ID for each selected child is created.
3. The eligibility of the child is confirmed (first time entry to care during recruitment period and on final orders during the data collection period)

Steps to verify the sample prior to recruitment:

4. The Child Study Checklist was populated from the Recruitment Database and emailed from pathways@facs.nsw.gov.au to the designated POCLS regional e-mail box for verification.
5. The regional officer who managed the regional e-mail box forward the Study Child Checklist to the appropriate CSC staff to check.
6. CSC staff:
   a. Verified the child and carer details on the Study Child Checklist and updated KiDS if required
   b. The updated Study Child Checklist was emailed to the regional e-mail box.
7. The regional officer who managed the regional e-mail box forwarded the Study Child Checklist to pathways@facs.nsw.gov.au within 5 days.
8. Once the completed Study Child Checklist was received from the region, the updated information was extracted from KiDS through CIW and uploaded into the Recruitment Database.

Steps to recruit the sample Wave 1 to Wave 5

9. DCJ re-confirms the eligibility of the child and current carer (e.g. the carer is the same as the previous wave or different to the previous wave)
10. If the child is still eligible and with same carer, I-view approach the same carer for the next interview. If the child is with a different carer, DCJ send a pre-approach letter and the study brochure to the new carer.
11. DCJ then seek permission from the carers by phone for the contact details to be sent to I-view.
12. If carers agree, DCJ securely transfers the data to I-view.
13. I-view contact carers to seek their willingness to participate in the POCLS.
14. If carers agree to participate I-view makes an appointment for the interview.
15. I-view administers the consent forms and conduct the face-to-face interviews with carer and/or child and young person.
16. The de-identified data is be loaded into the study database for analysis and reporting.
Incentives
Children under 7 years who complete an interview are given an age appropriate quality book while children aged 7-11 years are given a $20 Coles Myer gift voucher and young people aged 12-17 years are given a $30 Coles Myer gift voucher. Caregivers are given a $50 Coles Myer gift voucher. The amount was assessed as appropriate to reimburse study participants for their time and contribution without being coercive. The incentives have remained the same since the study commenced.

Sample retention
The data asset created by the POCLS is of national and international significance and is likely to have greater explanatory power than other studies because of the large sample size and high retention rate across waves. Table 2 and Table 3 show the number of children and/or their caregivers who participated in each wave, the number in the ‘tracked sample’ who participated in all 4 waves (n=734), and the number in the ‘untracked sample’ who participated in at least one wave (n=1,507). Young people age out of OOHC at 18 years and by Wave 4, 70 young people in the POCLS interview cohort had turned 18 years and were not eligible for an interview. An aftercare study starts in Wave 5 to track the outcomes of young people during adulthood.

Table 2: Number of POCLS final orders interview cohort who completed interviews by Wave 4

<table>
<thead>
<tr>
<th>Wave number</th>
<th>Wave 1 n</th>
<th>Wave 2 n</th>
<th>Wave 3 n</th>
<th>Wave 4 n</th>
<th>All Waves n</th>
<th>At least 1 Wave n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wave 1</td>
<td>1285</td>
<td>1032</td>
<td>906</td>
<td>845</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 2</td>
<td>1200</td>
<td>983</td>
<td>858</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 3</td>
<td></td>
<td>1033</td>
<td>824</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 4</td>
<td></td>
<td></td>
<td>962</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All Waves</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>734</td>
<td></td>
</tr>
<tr>
<td>At least one Wave</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,507</td>
<td></td>
</tr>
</tbody>
</table>

Note: There were 70 young people in the final orders interview cohort turned 18 years by 30 June 2016 and are not eligible for an interview at Waves 1-4. An aftercare study starts in Wave 5.
Table 3: Supplementary information: number of POCLS final orders interview cohort who completed interviews by Wave 4

<table>
<thead>
<tr>
<th>Wave combinations</th>
<th>Number completed (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waves 1 and 2</td>
<td>1032</td>
</tr>
<tr>
<td>Waves 1, 2 and 3</td>
<td>882</td>
</tr>
<tr>
<td>Waves 1 and 3</td>
<td>906</td>
</tr>
<tr>
<td>Waves 1 and 4</td>
<td>845</td>
</tr>
<tr>
<td>Waves 2 and 3</td>
<td>983</td>
</tr>
<tr>
<td>Waves 2 and 4</td>
<td>858</td>
</tr>
<tr>
<td>Waves 3 and 4</td>
<td>824</td>
</tr>
<tr>
<td>Waves 2, 3 and 4</td>
<td>791</td>
</tr>
</tbody>
</table>
6 POCLS data asset

Multiple data sources and their relationship
The data asset created by the POCLS is of national and international significance and is likely to have greater explanatory power than other studies because of the large sample size and high retention rate across waves.

The breadth of information in the data asset is extensive and includes:

- Detailed information about the child including their physical health, socio-emotional wellbeing, cognitive development, how settled they are, temperament, activities and friends, education and work, services and supports, casework, and birth family contact

- Detailed information about the caregiver including their relationship with the child, parenting style, caregiver experience and training, informal support network, casework support, satisfaction with being a caregiver, health/mental health, relationship with partner, finances and housing, and neighbourhood

- Information from the caseworker about their current involvement, how well they know the child, placement and child needs, child’s birth family, birth family contact and case planning

- Information from the child’s teacher (childcare, preschool or school) about the child’s socio-emotional wellbeing, school attendance, education plans, progress with schoolwork, extra activities and friends

- Details of child protection reports and OOHC placements.

The POCLS survey data was deterministically linked to administrative data held by NSW DCJ and probabilistically linked to data from:

- Perinatal information about mothers and babies

- Information about presentations to the emergency departments of public hospitals in NSW

- Information about all admitted patient services provided by NSW public hospitals

- Information from the NSW Mental Health Ambulatory Data Collection which is dedicated to the assessment, treatment, rehabilitation or care of non-admitted patients. It may include mental health day programs, psychiatric outpatients and outreach services (e.g. home visits)

- Death and cause of death information
• Information about the use of the Medicare Benefits Scheme (MBS) and Pharmaceutical Benefits Scheme (PBS) for children in the POCLS\(^2\)

• Information on contact with the juvenile justice system including offending and custodial sentences

• Indicators of the children’s development in their first year of full-time school using the Australian Early Development Census (AEDC)

• Details of educational performance using the National Assessment Program – Literacy and Numeracy (NAPLAN).

Information from the NSW My Personal Health Record (Health Blue Book) was scanned at the Wave 1 face-to-face interview if provided by the caregiver. The scanned information has been redacted.

**Study key**

The third party holder of the unique study key is the independent data collection agency. The study key is applied before the interview data (excluding identifying information such as names and address) are transferred via FTP from the independent data collection agency to the study repository in DCJ (separate from the DCJ administrative database).

All files can be linked using the study key/ unique participant identifier POCLS_ID.

The POCLS data asset is shown in Figure 7.

\(^2\) New linkage data being added to the POCLS data asset in 2020.
Figure 7: POCLS data asset

Department of Communities and Justice Child Protection Data

POCLS population cohort of children entering care between May 2010 and October 2011 (n=4,126)

Early intervention, child protection reports and OOHC placements

Combined DCJ administrative, interview and on-line survey data

POCLS ID (3rd party study key)

POCLS Database in the Secure Unified Research Environment Interview and on-line survey data linked to DCJ, health, education and justice administrative data

CHReL for data linkage

Australian Early Development Census (from 2009)

National Assessment Program: Literacy and Numeracy (from 2008)

Re-Offending Database (from 2003)

Medicare Benefits Schedule & Pharmaceutical Benefits Scheme (from 2010)

Register of Births, Deaths and Marriages (from 2000)

ABS Mortality Data (from 2000)

NSW Perinatal Data Collection (from 1994)

NSW Emergency Department Data Collection (from 2005)

NSW Admitted Patients Collection (from 2001)

Mental Health – Ambulatory Data Collection (from 2001)
Mode of data collection
The POCLS has a multi-informant approach and includes five waves of in-depth face-to-face interviews from children and their caregivers\(^3\); and cross-sectional online surveys with caseworkers, childcare teachers and school teachers to collect the data items not available in the administrative data to answer the study’s key research questions (see Figure 3). Interview data is collected using both Computer Assisted Personal Interviewing (CAPI) and Computer Assisted Self Interviewing (CASI). The interviews are conducted by I-view, an independent organisation that specialises in social research data collection.

Consent and approval
Interview data
The relevant Minister using their authority as ‘Parental Responsibility/ Authorised Carer’, approved the POCLS project and for caregivers and children in OOHC to voluntarily participate in interviews. The DCJ attempted to contact the caregiver of every child in the ‘Final orders’ cohort to inform them of the POCLS and seek permission to pass on their contact details to the independent data collection agency (I-view) – which would in turn invite them to participate in an interview. The caregivers who agreed made up the ‘Final orders interview’ cohort.

Before each face-to-face interview, the parent/caregiver is asked to provide written consent to:

- Informed voluntary participation in the POCLS face-to-face interview for themselves and their child aged 3-17 years old
- The child’s teacher being invited to complete a voluntary online survey about the child’s experiences at school
- Linkage to routinely collected data, including education, justice and health data (at Wave 1 only).

Caregivers are given an information sheet prior to the child interview so they are informed of the types of questions asked of children 7-17 year olds. If the child is uncomfortable with any part of the interview, they can skip a question, a module, an activity or stop the interview. If the child is unable to complete the questions on their own the interviewer can assist them.

Child and parent/caregiver participants received a gift voucher as an acknowledgement of the time given to the study.

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\(^3\) Funding for more waves of data collection will be sought
The caseworker online survey was sent to the ‘Final orders’ cohort (both those in the interview cohort and not in the interview cohort) to collect data to supplement the OOHC administrative data held in ChildStory.

Record linkage data
A waiver of consent for use of the children’s DCJ administrative and linked services data was sought for all children not in the ‘final orders interview’ cohort at Wave 1 (Figure 4). The HREC approval to waive consent was sought and granted for the following reasons:

- Consent would be difficult to obtain from the families in the ‘no final orders’ cohort and those in the ‘final orders’ cohort not participating in the Wave 1 interview because having involvement of child protection services was likely to be sensitive and cause distress
- Families who have been re-housed to a confidential address to escape domestic violence may feel especially concerned by contact from the researchers.

At Wave 5, an amendment to the waiver of consent to link records for the POCLS was requested because the legal and placement status of individual study children changes frequently over time as they move from care and protection interim orders to final orders, from one carer to another and from OOHC to being returned to their parents or guardians – and sometimes re-entry back into OOHC. The fluidity in legal and placement status reflects changes in parents’ circumstances, policy changes with regard to the role of guardians and the considerations of the Court. The DCJ is not able to identify the children who have changed placements since the Wave 1 interview due to data confidentiality and is therefore unable to seek written consent from the child’s new carer to link administrative data. The least intrusive and most practical approach is to waive consent for linkage data for the entire cohort of children.

Questionnaire development
Questionnaire modules were selected and developed based on the information required to answer the Key Research Questions of the study. Where possible existing standardised measures and validated questions were sourced.

To inform the questionnaire development, the POCLS study design included:

- A consultation process with regional staff, stakeholders and experts
- Focus groups to discuss the characteristics of successful and unsuccessful placements with caregivers (including Aboriginal, Muslim and Vietnamese caregivers); caregiver support workers, caseworkers and their managers
- Development of criteria to inform the selection of the standardised measures and questions which included robustness of the measures; minimal respondent
burden; ability to track the child as they grow and develop; culturally sensitive; and comparable with other Australian and international studies

- Consultations with children in care to seek their opinions about how best to involve children in the POCLS
- A pilot study undertaken from October to December 2010 which also tested the sample recruitment, interviewer training and field work process. A summary of the pilot study is published in a technical brief and available on the study webpage.

The following criteria were used to inform the selection of the standardised measures for the study:

- Measures should demonstrate capacity to measure central theoretical constructs underpinning the study
- Measures should have established reliability and validity and, where possible, with relevant norms for an Australian population
- Measurement procedures should be as cost-effective as possible, should have a high degree of acceptability for respondents and minimise as far as possible respondent burden
- There should be comparability with other international and national studies such as the Longitudinal Study of Australian Children currently being conducted by the Australian Institute of Family Studies
- There should be a lack of redundancy (the data is not available elsewhere or through other data collection methods)
- Measurement scales should be able to be used to track the child or young person as they grow and develop
- Measures should be appropriate for, and sensitive to, people from diverse cultural backgrounds including Aboriginal people and people from culturally and linguistically diverse backgrounds
- The most appropriate tools should be used for assessing the domains of interest for the study and answering the key research questions.

**Qualitative data**

**Caregiver questionnaire**
The POCLS is largely a quantitative longitudinal study however there is the option to provide text responses in the POCLS questionnaires.
There are three levels of qualitative questions - please search for ‘TEXT BOX’ in the questionnaires to find them:

- Open ended questions not coded
- Other comments which are coded
- Other specify questions which are coded.

In the caregiver interview there are four open ended questions in the caregiver questionnaire from Wave 1. These questions are not coded and the confidentialised verbatim text are in the dataset.

The other text responses or other comments are mostly at the end of each module and are coded when the response was common across respondents. The responses that were not common were left uncoded and the verbatim text are in the database.

Most pre-coded questions have the option of ‘other specify’ in case the pre-coded responses were not comprehensive. These responses have been coded if common across respondents. Please search for ‘TEXT BOX’ in the questionnaires to find them.

The uncoded verbatim responses for coded responses are in a database that is accessible by request only.

For further information see Section 7.

**Child and young person questionnaire**

Children 7 years and older are asked one open ended question at the end of each module and the children are instructed: “Remember, if you have other things you would like to tell the researchers, please write them by tapping into the ‘Other stuff you'd like to say’ ‘Have your say’ button in the main menu!” There are some open ended responses after pre-coded questions. In the child and young person interview no text responses have been coded.

For further information see Section 8.

**Caseworker, childcare and school teacher questionnaires**

The childcare, school teacher and caseworker online surveys also have some open-ended questions. The text responses in other questions were coded when the response was common across respondents. The responses that were not common were left uncoded and the verbatim text are in the database.

The uncoded verbatim responses for coded responses are in a database that is accessible by request only.

For further information see Section 9 and 10.
NSW Health My Personal Health Record scans
NSW Health My Personal Health Record (the Blue Book) holds information about a child’s health and development. It records valuable information about a child’s health, illnesses, injuries, immunisation, growth and development. The child’s Blue Book was scanned during the Wave 1 data collection with caregivers if (a) the caregiver had the child’s Blue Book and (b) provided consent to do so. The scans have been redacted. For more information please see the data brief available at www.facs.nsw.gov.au/resources/research/pathways-of-care/pocls-publication/questionnaires-pocls

Interviewer ratings
Once the interviewer left the place the interview was conducted, they answered questions about how the interview went for example, was the environment noisy, was the child distracted or tired, reason why the measures were not completed. This will assist in understanding low response rates for some questions or activities. The interviewer rating frequencies for each wave will be available in a data book in the Sax Institute’s Secure Unified Research Environment (SURE) where the data are stored.

Data quality assurance
Data quality reports on the first 100 interviews at the beginning of each wave are produced to review the quality of the data management procedures. The DCJ undertakes quality assurance checks over the data during the data collection. At the end of the collection at each wave the independent data collection agency prepares the data, back-codes other specify questions if they fit into the existing codes, and develops coding frames for other specify questions that do not fit into the existing codes.

When the full dataset is delivered from the independent data collection agency to the DCJ a number of quality assurance procedures are undertaken by the DCJ. These include checking if the data were collected according to the questionnaire and coded accurately with correct skip patterns, deriving variables (e.g., placement type at the time of interview, cultural background, etc.), and scoring measures. The Sax Institute contracted to undertake data management services apply new variable names and labels using the POCLS variable naming convention and check consistency across waves before merging the data together in a long format. The final POCLS datasets are uploaded to and accessible from the SURE.

The POCLS Data Books providing frequency counts for every survey question are available in SURE for approved data users.
7 Face-to-face interviews with caregivers

Sample and method
As noted earlier, the parents or caregivers of the 2,828 children on final care and protection orders were invited to participate in the interview component of the study. Parents or caregivers for 1,789 (63%) children agreed and interviews were successfully conducted with 1,285 (72%) parents/caregivers at Wave 1, 1,200 (67%) parents/caregivers at Wave 2, 1,033 (58%) parents/caregivers at Wave 3 and 962 (54%) at Wave 4.

Reasons for not completing an interview included withdrawal of consent, inability to schedule a time with the parent/caregiver usually because the parent/caregiver were busy, unable to contact, and the child changed placement before the caregiver could be interviewed.

To ensure that caregivers have sufficient knowledge about the child, the study child has to have lived with the caregiver for a minimum of one month before data collection can take place.

While it is preferred that both that the caregiver and child or young person participate in every wave, the interview is completed only if the caregiver or the child/young person agrees to participate in the interview.

Also, caregivers and children can skip a wave of data collection and remain in the study. For example, just under half of the children (n=734) have participated in all 4 waves and 1,507 children have participated in at least one wave.

For sibling groups living with the same caregiver, at the first interview the caregiver completed the full interview and in subsequent interviews about the siblings the caregiver socio-demographics questions were skipped due to repetition and the data copied over by the independent data collection agency.

The questionnaire was programmed in the Computer Assisted Person Interview (CAPI) and was a face-to-face interview led by a trained interviewer. Due to the sensitivity of some of the questions and the possible discomfort a caregiver may feel in answering these questions in the presence of the interviewer, a Computer-Assisted Self Interview (CASI) is programmed in the middle of the interview. The CASI contains questions regarding the child’s behaviour (BITSEA/CBCL), caregiver’s general and mental health, their relationship with their partner, and the Kessler (K10) Mental Health and Wellbeing standardised measure.

Questionnaire
The questionnaire for the POCLS is complex and varies by type of caregiver and wave. Caregiver types are:
In OOHC

- Relative or kin of the children
- Foster carers who are not related to the child
- Residential care workers, for young people in residential care or independent living.

Exited OOHC

- Birth Parent, where children had been restored to their care
- Guardians, where the OOHC caregivers are granted parental responsibility (usually relatives or kin)
- Adoptive parent, where children have been adopted.

Because the type of caregiver affects the expectations and type of interaction that takes place between the child and the caregiver, many questions were tailored to the respondent type: carer (foster, relative or kinship), birth parent or adoptive parents.

In addition, many elements of the question wording and question filtering vary according to whether the child is living with the same caregiver as in the previous wave or a new caregiver, the age of the child at the time of interview, their cultural background and the caregiver’s response to the previous question.

The questionnaire is divided into sections about the caregiver and about the study child. Survey modules about the caregiver and birth parent cover the following topics, where appropriate:

- Caregiver experience and training
- Caregiver’s own support network
- Caseworker support and services
- Caregiver relationship with the child
- Parenting – monitoring, hostility and warmth
- Caregiver difficult behaviour self-efficacy
- Caregiver physical health and mental health (Kessler K10)
- Caregiver relationship with their partner
- Caregiver satisfaction with foster/relative/kinship caring
- Caregiver neighbourhood social cohesion
- Caregiver socio-demographic characteristics (including education level, finances and housing)
- Caregiver household grid
- Birth parents' restoration experience.

The caregiver survey modules about the child or young person cover the following topics, where appropriate:

- Introduction to the child and caregiver
- Setting up the placement
- Child physical health
- NSW Health Blue Book
- Services and support for the child
- Child education
- Child work and further education
- Family activities, social skills, peer relationships
- Birth family contact
- Child cultural background and cultural activities
- Child's socio-emotional wellbeing
  - Ages and Stages Questionnaire (ASQ-3) for children 9-66 months
  - Brief Infant Toddler Social Emotional Assessment (BITSEA) for children 12-35 months (in Wave 1 only)
  - Child Behaviour Checklist (CBCL) parent report and teacher report for children 1.5-17 years
  - Abbreviated Temperament Scales, adapted from the Revised Infant Temperament Questionnaire, the Toddler Temperament Questionnaire and the Childhood Temperament Questionnaire for Children and the School Aged Temperament Inventory (short form) for children 9 months-17 years
- Cognitive and language ability
  - Communication and Symbolic Behaviour Scale Infant and Toddler Checklist (CSBS ITC) for children 9-23 months old
MacArthur Communicative Development Inventories (MCDI-III) — Short form for children 24-29 months old

MCDI-III for children 30-35 months old.

Qualitative questions
There are four open ended questions in the caregiver questionnaire from Wave 1. These questions are not coded and the confidentialised verbatim text are in the dataset.

- CHILD1: Thinking back to the time when [Study Child] first came to live here, can you tell me what you remember most about the day [he/she] arrived? Describe (only asked at the first interview for each caregiver at subsequent waves)
- CHILD4: Please describe the best things about [Study Child]? (asked at each wave)
- CHILD5: What concerns you most about [Study Child]? (asked at each wave)
- CHILD13 –Is there anything else you would like to say about how [Study Child] is settling into your family? (asked at Wave 1 only).

The other text responses in other questions were coded when the response was common across respondents. The responses that were not common were left uncoded and the verbatim text are in the database. The uncoded verbatim responses are in a database that is accessible by request only. To find the qualitative questions search for ‘TEXT’ in the questionnaire.

Data user resources
The Wave 1 Baseline Statistical Report (Research Report Number 1) provides and overview of the key data items by child age, cultural background and placement type and is available on the study webpage https://www.facs.nsw.gov.au/resources/research/pathways-of-care/pocls-publication/pocls-research-and-statistics-reports


The POCLS Data Books providing frequency counts for every survey question are available in SURE for approved data users.

**Data files**
The datasets that include all of the in-depth interview data collected from children and caregivers at each wave are available in SURE in the file INTV_cypc_w1234_long.

**Limitations and issues**
Children restored to their birth parents before the Wave 1 interview was scheduled did not participate in Wave 1 due to practical and ethical reasons. Therefore the POCLS is missing the Wave 1 baseline data for children restored before the Wave 1 interview (n=192).

Some questions in the questionnaire were changed/revised/removed in the middle of a wave. Some questions were added or re-introduced in subsequent waves. Missing data in these cases have been coded ‘-7’ (“Question not asked”) and consistency in naming and code frames has been ensured (see Section 13: Data cleaning and coding).
8 Face-to-face interviews with the child or young person

Sample and method
At each wave, the study child has to be living with the carer for a minimum of one month before each interview takes place to ensure carers have sufficient knowledge about child. The study will continue to follow up children restored to parents, adopted or aged out of OOHC at 18 years.

The data collection techniques adopted for the child are conducted in the carer’s home or at an alternative location that the carer selects. From ages 3 years and up, study children are involved in one or more interviewer-administered measures. Children aged 7 years and older are interviewed face-to-face with an I-view trained interviewer about their views and experiences. The children watch the POCLS DVD https://www.facs.nsw.gov.au/resources/research/pathways-of-care/videos before they are interviewed and are given a Participant Information Sheet seeking their agreement to be interviewed before each wave. This ensures they understand they are voluntarily participating in a research study. When requested, I-view arranges for interpreters and Aboriginal interviewers.

Overview of the POCLS data collection methods with children 3-17 years

<table>
<thead>
<tr>
<th>Language development assessment for ages 3-17 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>This child is completing the Peabody Picture Vocabulary Test (PPVT-IV; Dunn &amp; Dunn, 2007) with a trained I-view interviewer. The child was asked to point to the ‘leaf’.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Non-verbal reasoning assessment for ages 6-16 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>This young person is completing the Matrix Reasoning Test, Wechsler Intelligence Scale for Children (WISC-IV; Wechsler, 2003) with a trained I-view interviewer. The young person is asked to point to the picture that completes the sequence of patterns.</td>
</tr>
</tbody>
</table>
Felt security activity for ages 7-17 years
This child is completing the activity to show who they feel close to including members of the household where they are currently living and also family members who they are not currently living with (adapted from the Kvebaek Family Sculpture Technique: Cromwell, Fournier & Kvebaek, 1980). A trained I-view interviewer instructs the child how to use the checker board and figurines to complete the activity.

Face-to-face interview for ages 7-11 years
This child is completing the Computer-Assisted Personal Interview (CAPI) with a trained I-view interviewer. This is a short questionnaire with both qualitative and quantitative questions about school, friends, feelings, behaviour, casework, support and where they are living. The interviewer asks the child if there is anything else they would like to say.

Self-complete interview for ages 12-17 years
This young person is completing the Audio Computer-Assisted Self Interview (ACASI) on an iPad, with the voice recording done by a person who grew up in care. ACASI allows for the young person to answer the questionnaire in a confidential setting.

This picture shows the custom-designed ACASI survey with a space theme to make the experience more engaging. Questions asked are about school, work, friends, health and wellbeing, behaviour, casework, support, where they are living, leaving care and living skills. There is a text box for other thoughts.

The self-complete ACASI self-interview allows for privacy and standardisation in the interview. A “play” button allows the question to be repeated. ACASI benefits young people who have difficulty reading and understanding written concepts without additional aids. There are games on the iPad for the young people to play when they have completed the questionnaire.

Survey questions using ACASI are completed by children aged 7-17 years (this could be administered with the assistance of the interviewer where children were unwilling or unable to complete the survey on their own) using iPads. Questions vary by the child’s age. For Waves 1-3 the ACASI featured a custom designed space theme to make it
more child-friendly; and for Waves 4-5 this was updated to a computer game theme. Unlike the linear structure that most questionnaires take, the self-completion section is scripted to allow children and young people to select the order that they answer the question sections.

The direct measures (PPVT, Matrix Reasoning Test (WISC IV)) and the felt security activity are administered before the interview when possible. Data collection and scoring for the standardised measures was programmed by I-view in the online survey, accessed on an iPad. The interviewers are prompted with questions and measures specific to the study child’s age. Scoring automatically occurs within the survey to ensure the correct sections are asked and the test is stopped at the required level. All interviewers are trained in the administration of the standardised measures.

Table 4 shows the number of children aged 3-17 years who completed the different components of the data collection at each wave. Please note 70 young people in the final orders interview cohort turned 18 years by 30 June 2016 and were not eligible to participate. An aftercare study is planned to start in Wave 5.

Table 4: Number of children completing interview cohort who completed interviews by Wave 4

<table>
<thead>
<tr>
<th>Wave number</th>
<th>Wave 1 n %</th>
<th>Wave 2 n %</th>
<th>Wave 3 n %</th>
<th>Wave 4 n %</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPVT (3-17 years)</td>
<td>656 91.4</td>
<td>870 89.3</td>
<td>926 89.6</td>
<td>885 92.0</td>
</tr>
<tr>
<td>MR Test (WISC VI) (6-16 years)</td>
<td>403 88.8</td>
<td>451 87.2</td>
<td>475 83.5</td>
<td>817 88.6</td>
</tr>
<tr>
<td>Felt Security Activity (7-17 years)</td>
<td>331 87.8</td>
<td>282 69.8</td>
<td>232 54.2</td>
<td>577 82.5</td>
</tr>
<tr>
<td>Interview – CAPI (7-11 years)</td>
<td>229 90.5</td>
<td>267 88.4</td>
<td>254 84.9</td>
<td>473 89.9</td>
</tr>
<tr>
<td>Interview – ACASI (12-17 years)</td>
<td>108 87.1</td>
<td>141 87.6</td>
<td>141 81.5</td>
<td>191 88.0</td>
</tr>
</tbody>
</table>

Note:
- There were 70 young people in the final orders interview cohort turned 18 years by 30 June 2016 and are not eligible for an interview at Waves 1-4. An aftercare study starts in Wave 5.
- See Table 6 for more details about the felt security activity respondents

Questionnaire
The Child and Young Person Interview Questionnaire was specifically designed to be administered to children aged 7-17 years.

The interview survey questions provided to the children were divided into 5 modules:

- School and friends
- Health
- Feelings
• Caregivers
• Casework and support
• Other thoughts and comments

Additionally, young people aged 12-17 years were asked questions on:
• Further education and work (15-17 years)
• Health concerns
• Smoking, alcohol and drug use
• Leaving care planning (15-17 years)
• Personal contact details (to support ongoing contact with the young person (14-17 years)

Standardised measures included:
• Socio-emotional wellbeing
  o School Problems Scale for children 12-17 years
  o School Bonding Scale for children 12-17 years
  o Short Mood & Feeling Questionnaire for children 12-17 years
  o Self-Report Delinquency Scale for children 10-17 years
  o Emotional Responsiveness Scale from the Parenting Style Inventory II (adapted version) for children 7-17 years
  o Felt security activity (adapted from the Kvebaek Family Sculpture Technique) for children 7-17 years
• Cognitive and language ability
  o Peabody Picture Vocabulary Test (PPVT-IV) for children 3-17 years
  o Matrix Reasoning Test - Wechsler Intelligence Scale for Children (WISC-IV) for children 6-16 years.

Qualitative data
There was one open ended question at the end of each module and the children are instructed: “Remember, if you have other things you would like to tell the researchers, please write them by tapping into the ‘Other stuff you'd like to say' ‘Have your say' button in the main menu!”
In Wave 4 additional questions were added which were both pre-coded and open-ended responses. The open-ended responses have not been coded. The verbatim responses are in the database:

- Can you say why you don't feel happy? Click in the box to type your answer [TEXT BOX]
- Can you say why you don't feel settled? Click in the box to type your answer [TEXT BOX]
- Can you say why you don't feel safe? Click in the box to type your answer [TEXT BOX]
- What else do you want to change about contact with your birth family? You can select 'nothing', or click in the box to type your answer
- Remember, if you have other things you would like to tell the researchers about where you are living or your birth family, you can write them into the box below
- Remember, if you have other things you would like to tell the researchers about how you are feeling, you can write them into the box below
- Remember, if you have other things you would like to tell the researchers about the support you receive from your caseworker, you can write them into the box below
- What are two or three things that adults could do to help children who are not able to live with their birth parents?
- If there is anything else you would like to tell us please write it in the box below
- What job or career do you hope to get into? Click in the box to type your answer.

The questions above are examples and not an exhaustive list of open ended questions in the POCLS questionnaires. Please search for TEXT BOX in the questionnaire to find them.

**Data user resources**

The Wave 1 Baseline Statistical Report (Research Report Number 1) provides an overview of the key data items by child age, cultural background and placement type and is available on the study webpage

The Felt Security Activity (Technical Report Number 11) describes the activity, the data and the scoring and is available on the study webpage


The POCLS Data Books providing frequency counts for every survey question are available in SURE for approved data users.

**Data files**

The datasets that include all of the in-depth interview data collected from children and caregivers at each wave are available in SURE in the files INTV_cypc_w1234_long.

The datasets that include felt security activity are available in the files the INTV_felt_w1234_long.

**Limitations and issues**

It was identified that data was missing for a number of cases in Waves 1-3 of the ACASI for respondents 12-17 years due to software errors where the interview timed out for 10 minutes or more while the respondent was in the process of completing this section (see Table 5). These errors have no effect on 7-11 year-old interview data, or on the PPVT, Matrix Reasoning Test (WISC IV) or felt security activity.

**Table 5: Summary of interview data missing for respondents 12 years and older due to a software error by wave**

<table>
<thead>
<tr>
<th>Module</th>
<th>Wave 1</th>
<th>Wave 2</th>
<th>Wave 3</th>
<th>Wave 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>School, work and friends</td>
<td>12</td>
<td>26</td>
<td>31</td>
<td>NA</td>
</tr>
<tr>
<td>Health and feelings</td>
<td>14</td>
<td>20</td>
<td>31</td>
<td>NA</td>
</tr>
<tr>
<td>Where you are living</td>
<td>6</td>
<td>26</td>
<td>30</td>
<td>NA</td>
</tr>
<tr>
<td>Caseworker and Support</td>
<td>6</td>
<td>11</td>
<td>20</td>
<td>NA</td>
</tr>
<tr>
<td>Total ACASI affected</td>
<td>13</td>
<td>34</td>
<td>33</td>
<td>NA</td>
</tr>
<tr>
<td>Total ACASI completed</td>
<td>337</td>
<td>408</td>
<td>398</td>
<td>667</td>
</tr>
</tbody>
</table>
Some questions in the questionnaire were changed/revised/removed in the middle of a wave. Some questions were added or re-introduced in subsequent waves. Missing data in these cases have been coded ‘-7’ (“Question not asked”) and consistency in naming and code frames has been ensured (see Section 13: Data cleaning and coding).

The felt security activity was replaced with ACASI felt security questions at Wave 2 and Wave 3 for all young people aged 12-17 years based on feedback from some interviewers that the young people did not like the activity. However, at Wave 4 and Wave 5 all 7-17 year olds were asked to complete the felt security activity and if they refused they were asked the related ACASI questions. Table 6 summarises the number of children and young people who completed the felt security activity.

Table 6: Summary of the children completing the felt security activity or interview questions by wave

<table>
<thead>
<tr>
<th>Module</th>
<th>Wave 1</th>
<th>Wave 2</th>
<th>Wave 3</th>
<th>Wave 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children aged 7-11 years:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Numbers completing the felt security activity</td>
<td>230</td>
<td>249</td>
<td>232</td>
<td>453</td>
</tr>
<tr>
<td>Young people aged 12-17 years:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Numbers completing the felt security activity</td>
<td>101</td>
<td>33</td>
<td>0</td>
<td>122</td>
</tr>
<tr>
<td>- Numbers completing the felt security ACASI questions</td>
<td>NA</td>
<td>57</td>
<td>94</td>
<td>43</td>
</tr>
<tr>
<td>Total felt security responses (both activity and ACASI) completed when aged 7-17 years</td>
<td>331</td>
<td>339</td>
<td>326</td>
<td>618</td>
</tr>
</tbody>
</table>
9 Online survey of caseworkers

Caseworkers are a key professional group and work with caregivers and children on a daily basis. Caseworkers complement the perspectives of teachers, caregivers and children, and provide vital information regarding the child’s background and services received. Caseworkers are important informants about risk and protective factors for children.

Sample and method
The Caseworker Survey was administered to the final orders cohort (n=2,828) by I-view and was completed online by the OOHC caseworker (DCJ or Funded Service Provider (FSP)), who was nominated as knowing the child best. Letters were sent out to 151 Community Service Centres (CSCs) and FSPs across NSW. Caseworkers were asked to complete the survey even if the child had left OOHC and no longer had case management. Where the child was restored, with guardians, adopted or had aged-out of care at 18 years, the caseworker was asked to complete the survey for the period the child was being case-managed. Where children had exited OOHC more than 12 months ago, the survey was shortened. If no-one in the agency knew the child well, a caseworker completed a short version of the survey using the child's case file notes and KiDS/ChildStory.

Participation in the survey was voluntary. Caseworkers for 1,625 (57%) of the 2,828 children in the ‘Final orders’ cohort completed surveys during Wave 3 (May 2015 to April 2016). The survey is closed.

Questionnaire
The topics covered by the Caseworker Survey were:

- Child characteristics
  - Whether the child was deceased at time of interview
  - The child’s siblings, including half or step siblings
  - Child’s Aboriginality
  - Life status of birth mother and father
- Case characteristics
  - Agency providing case management and length of case management
  - Number of placements with the agency
  - Information provided when the child was transferred to the agency (e.g. birth certificate, Medicare number, health records (including NSW My Personal Health
Record [Blue Book]), health plan, education plan, Family photos and Life Story Book, current case plan, court orders, care plan)

- Current placement type
- Siblings placed with child
- Case plan goal
- Case allocation
- Case closure

- Caseworkers’ involvement and relationship with the child
  - Current working role with the child
  - Length of time the caseworker has known the child
  - Frequency and type of contact between caseworker and child
  - How well caseworker knows child’s birth mother and birth father
  - Other relatives that play a key role in the child’s life and how well the caseworker knows them
  - Birth parents’ and child’s acceptance of case plan goal
  - Birth parents’ interest in restoration
  - How well caseworker knows the caregivers or adoptive parents
  - Other relatives that take a key role in the child’s life and how well the caseworker knows them
  - Assessment of the child’s understanding of the reason he/she cannot live with his/ her birth parents
  - Child’s involvement in case planning and review
  - Assessment of the child’s understanding of the reason he/she is in OOHC, what a caseworker’s job is, how to contact a caseworker, case plan, permanency plan

- Views and understanding of the child’s placements
  - Placement breakdown and what could have averted it
  - How challenging it was to find another long-term placement
  - Planned moves for the child in the next 12 months
• Child's needs and issues
  o Concerns about child (special needs)
  o Improvement/deterioration in the child’s wellbeing since the caseworker first met him/her
  o School
    ▪ Currently enrolled
    ▪ Change in schools (frequency and reasons)
    ▪ Attendance at a specialist school
    ▪ Difficulties experienced at school
    ▪ Presence of an Education Plan with the Department of Education and Communities and whether it meets the child’s needs
  o Challenges that caregivers face caring for this child
  o Strengths/best things about the child
• Current arrangements for contact with birth family
  o Contact with mother and father
    ▪ Where do mother and father live now in relation to the child
    ▪ Whether there are court ordered contact arrangements
    ▪ Frequency and type of contact arrangements with mother and father
    ▪ Whether contact with mother and father increased or decreased since being case managed by the OOHC team and reasons for this
    ▪ Whether the mother and father have received any services/support to assist contact
- How well the current contact arrangements are working and reasons for this
  - Contact with siblings in another OOHC placement
    - Number of siblings in another OOHC placements
    - Frequency and type of contact arrangements
    - How well the current contact arrangements are working and reasons for this
  - Contact with siblings who are not in OOHC
    - Number of siblings who are not in OOHC
    - Frequency and type of contact arrangements
    - How well the current contact arrangements are working and reasons for this
- Restoration
  - Restoration status
  - Whether restoration is going according to plan and reasons for this
  - Services that the parents received/are receiving to support restoration
  - Whether restoration is meeting the child’s need in terms of timing
  - Composition of child's household now
- Child’s readiness to transition from care
  - Leaving care plan been developed
  - Whether the child has skills to look after themselves when they turn 18
  - Areas that the young person will require help in
  - Plan for accommodation after leaving care
- Support for caseworkers
  - Rating on level of support caseworkers receive from workplace to work with families in OOHC
  - Rating on training or skill development to work with families in OOHC
- Other comments on this child’s placement and case plan.

**Data user resources**
The Caseworker Survey Statistical Report (Research Report Number 3) provides and overview of the key data items by child age, cultural background and placement type.
and is available on the study webpage


The POCLS Data Books providing frequency counts for every survey question are available in SURE for approved data users.

Data files
The dataset that includes the Caseworker Survey is available in SURE in the file SURV_CW.

Limitations and issues
Not every child in the interview cohort has a caseworker survey completed and triangulation with the caregiver and teacher collections is not always possible. A question about whether the child was deceased was added after interviewing had commenced and was not asked for 164 children. Note the health record linkage data will hold this information.
10 Online survey of childcare and school teachers

Teachers provide an important, independent perspective on a child's behaviour in a school environment. Having training in child development and experience through interaction with many different children, teachers also have insight into appropriate child behaviour and can give a normative perspective on a child's progress. Teachers are also likely to be important informants about risk and protective factors that are likely to be predictive of the child's educational outcomes and wellbeing.

Sample and method
From Wave 2, caregivers who provided consent to take part in a face-to-face interview (n=1,789) were asked to provide consent for the child's childcare teacher or school teacher to be invited to complete an online survey. Where caregiver consent was provided, I-view contacted the school principal of government and non-government schools, or the childcare centre director to identify the teacher who knew the child best and then asked the teacher to complete the survey. Ideally the teacher should have known the study child for at least 2 months. Where this was not possible teachers were asked to wait and complete the survey after knowing the child for at least one month. Teacher participation was voluntary. A total of 771 of 1,789 childcare and school teachers completed the online survey during Wave 2 to Wave 4 (43%). The cross-sectional survey commenced in November 2013 and ended in November 2018. This survey is now closed.

Questionnaire
The topics covered by the Childcare Teacher and School Teacher Survey were:

- Childcare worker and school teachers’ characteristics
  - Length of time the childcare worker or school teacher has known the child
  - How well the childcare worker or school teacher knows the child
  - How well the childcare worker or school teacher gets along the child

- Child care and school characteristics
  - Hours spent in childcare
  - Type of school (pre-school or primary school onwards; co-educational or single sex; specialist school)

- Grade characteristics
  - What school year/grade the child is currently in
  - Whether the child is or has repeated a grade
- Reason/s repeating a grade

- School performance
  - Child’s academic performance in various school subjects (reading and English; human society and its environment; maths; science and technology; personal development, health and physical education; and creative arts)
  - How often homework is completed to an acceptable standard compared to typical students the same age

- School involvement and engagement
  - Whether the child has had frequent absences in comparison to their same-age peers
  - How involved the child is with extracurricular activities
  - How hard working the child is compared to their peers
  - How much the child is learning compared to their peers
  - How happy the child is compared to typical their peers
  - Proportion of the child’s peers that like and accept them

- Child behaviour
  - How appropriately the child is behaving compared to their peers
  - Whether the child has any behaviour or discipline problems
  - Whether the child has been suspended or expelled
  - Full standardised Child Behaviour Checklist for preschool children (1.5-5 years) and school-age children (6-18 years) providing composite scales for measuring internalising, externalising and problems, as well as eight empirically-based syndrome scales:
    - Aggressive Behaviour
    - Anxious/Depressed
    - Attention Problems
    - Rule-Breaking Behaviour
    - Somatic Complaints
    - Social Problems
- Thought Problems
- Withdrawn/Depressed.

- OOHC education plan
  - Main reasons for child needing additional assistance
  - Whether the child has an education plan or not
  - How well the child's education plan is being implemented
  - Who ensures the child's education plan is being implemented
  - How well the child's education plan is meeting the child's educational or academic needs
  - How well the child's education plan is meeting the child's behavioural needs
  - How well the child's education plan is meeting the child's cultural needs
  - How involved is the child's caregiver in their education

- Other comments on the child's educational outcomes.

**Data user resources**


The POCLS Data Books providing frequency counts for every survey question are available in SURE for approved data users.
Data files
The dataset that includes the Childcare Teacher and School Teachers Survey is available in SURE in the file SURV_TEA.

Limitations and issues
As children move into secondary school, teachers generally have less day-to-day involvement with the students and thus a number of school teachers who were contacted did not feel they knew the child well enough to participate in the survey.

Not every child in the interview cohort has a teacher survey completed and triangulation with the child, caregiver and caseworker collections is not always possible. The education record linkage data holds complimentary information.
11 DCJ administrative data

The DCJ Administrative Data provides historical data on child protection reports, legal status and OOHC placements for the study population cohort (n=4,126). The DCJ Administrative Data provides a sense of the child’s history with an emphasis on those reports considered to be risk of significant harm (ROSH) (frequency, type, severity and duration of maltreatment), the parental risk factors involved, the system’s response (whether there was an office-based assessment, a face-to-face interview and if the maltreatment was substantiated or not) and whether or not the child was considered in need of care and protection. It also records, the type of care (foster, relative/kinship or residential) the number of times a child re-enters OOHC, the number of placements, the number of different households experienced, and whether children exited OOHC to return to their birth family, guardianship, adoption or through aging-out at 18 years.

Sample and method

DCJ Administrative Data is obtained from the DCJ Key Information Directory System (KiDS) and ChildStory. At the time of writing, the administrative data is being updated to 30 June 2019, corresponding to the completion of the Wave 4 survey.

The three DCJ Administrative Data datasets are:

- Child protection events (file name DCJ_CP_REPORT)
- OOHC care events (file name DCJ_OOHC_EVENT)
- A linked file comprising selected variables from the child protection events and OOHC care periods files (file name DCJ_SUMMARY).

Data user resources


The POCLS Data Books providing frequency counts of selected variables are available in SURE for approved data users.

Data files

The DCJ administrative datasets are available in SURE in the files FACS_CP_REPORT, FACS_OOHC_EVENT and FACS_SUMMARY.

Limitations and issues

The DCJ Administrative Data relies on the office-based recording of information being filled out by caseworkers. The data is re-purposed for use in the POCLS and consequently may be less reliable than primary data collections.
The DCJ Administrative Data includes data for everyone in the population cohort (n=4,126) and covers the longest time period (i.e. prenatal ROSH reports). However, the data is less rich and robust than the survey data collections.
12 Record linkage to external agencies’ administrative data

Sample and method

In addition to the DCJ Administrative Data, the study links the POCLS survey data to data held by the NSW Ministry of Health (hospitalisations; emergency department attendances; perinatal data; ambulatory mental health services; deaths); NSW Department of Education (National Assessment Program - Literacy and Numeracy (NAPLAN)); NSW Bureau of Crime Statistics & Research (Reoffending Database); the Australian Early Development Census; and the Australian Institute of Health and Welfare Medicare Benefits Schedule (MBS) and Pharmaceutical Benefits Scheme (PBS) from mid-2020).

Electronic scans were taken of the NSW My Personal Health Record (Health Blue Book) if provided by the caregiver at the face-to-face interview at Wave 1 and is also available.

The data provides service use measures and broad outcome indicators for children in the cohort. Indicators of child outcomes derived from linked administrative data can be considered to fall into domains which mirror the domains of interest addressed at the interviews. That is, ‘safety’, ‘cognitive/learning ability’, ‘socio-emotional wellbeing’ and ‘physical health’.

Linked data is available on the entire POCLS population cohort (n=4,126), where the child has accessed a service covered by the datasets.

The linked datasets are:

- Australian Early Development Census (file name AEDC)
- National Assessment Program - Literacy and Numeracy (file name NAPLAN)
- NSW Bureau of Crime Statistics and Research (file name BOCSAR - Custody)
- NSW Bureau of Crime Statistics and Research (file name BOCSAR – Proven)
- NSW Perinatal Data Collection (file name PDC)
- NSW Admitted Patient Data Collection (file name APDC)
- NSW Emergency Department Data Collection (file name EDDC)
- NSW Mental Health-Ambulatory Data Collection (file name MH-ADC)
- NSW Deaths Registry, Fact of Death (file name RBDMS)
- NSW Cause of Death (file name COD-URF).
Data user resources

The Guidelines for using record linkage data (Technical Report Number 15) provides details of the available data sets and is available at the study webpage


The External Linkage Data Dictionary provides a full list of variables available for each dataset and is available at the study webpage


Record linkage to these administrative datasets was completed by the NSW Centre for Health Record Linkage (CHeReL). Further description of the data linkage process and further detail of the linked datasets is available at the CHeReL website


Electronic scans of the NSW My Personal Health Record (Health Blue Book) are described in a Data Brief available at the study webpage


The POCLS Data Books providing frequency counts of selected variables are available in SURE for approved data users.

Data files

The linkage datasets are stored in SURE and will be only available on request after a research proposal that involves the use of linkage data has been approved (refer to the Guidelines for using record linkage data (Technical Report Number 15).

Limitations and issues

Record linkage brings together information that relates to the same individual from different administrative data sources. The data sets are linked using probabilistic matching software that makes use of the participants’ first, middle and last names (including aliases), date of birth, sex and residential address. Because the linkage is probabilistic there is a small probability that linked records across one or more datasets are not for the same person. Further detail on probabilistic linkage is available from the CHeReL website http://www.cherel.org.au/how-record-linkage-works.
13 Accessing the POCLS data for analyses

Secure Unified Research Environment
The POCLS data is securely stored in the Secure Unified Research Environment (SURE). SURE provides a secure virtual research project workspace and individual researcher computing environment and is accessible over encrypted internet connections. The virtual computer desktops are furnished with a range of proprietary and open source data manipulation and analysis software, along with a range of Microsoft products. A project workspace is established for each POCLS research study hosted by SURE. Further information about SURE is available from the SURE website https://www.saxinstitute.org.au/our-work/sure/.

The databases in SURE are linked by the study key and do not contain any identifying information; different access levels are allowed and there are systems in place to ensure appropriate security and to monitor and log access.

All analyses are conducted in the SURE environment and anything uploaded or downloaded passes through a curated gateway monitored by delegates at DCJ to ensure no unit record data is taken out of SURE and small numbers are suppressed where necessary to ensure participants confidentiality. Further de-identification is required for case-studies as approved by the POCLS Chief Investigator.

Business rules for uploading and downloading files for the POCLS study have been developed and are available at the study webpage in <title> (Technical Report Number ?) www.facs.nsw.gov.au/resources/research/pathways-of-care. A copy of the document is also available in SURE.

Data user training and support
Approved researchers are required to undertake data user training before they can access the POCLS data in SURE. Information on data user training will be provided when the SURE application paperwork is complete. The POCLS team can provide support to researchers on request. The Data User Training Slide Deck provides an outline of the POCLS data user training workshop and is available at the study webpage https://www.facs.nsw.gov.au/resources/research/pathways-of-care/pocls-publication/data-user-guides-pocls.

File structure
Caregiver, child and young person
The datasets that include all of the in-depth interview data collected from children and caregivers at each wave are merged together and available in the file INTV_cypc_w1234_long. The data at each wave is cross-sectional in nature, i.e., one record per person for each measurement occasion.
The Caregiver Interview Questionnaire and the Child and Young Person Interview Questionnaire presented questionnaire items in topic modules. The data are similarly arranged in these modules (see the section below - Variable Naming Convention). The modules are presented in Figure 8 and Figure 9.

Figure 8: Caregiver interview modules

<table>
<thead>
<tr>
<th>Caregiver question modules</th>
<th>Module ID</th>
<th>Collection mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview details</td>
<td>IV</td>
<td>CAPI</td>
</tr>
<tr>
<td>Caregiver socio-demographic characteristics</td>
<td>CD</td>
<td>CAPI</td>
</tr>
<tr>
<td>Child socio-demographics characteristics</td>
<td>KD</td>
<td>CAPI</td>
</tr>
<tr>
<td>Placement characteristics/Where the child is living</td>
<td>PL</td>
<td>CAPI</td>
</tr>
<tr>
<td>Introduction to the child and caregivers</td>
<td>IN</td>
<td>CAPI</td>
</tr>
<tr>
<td>Setting up the placement and ongoing casework</td>
<td>PC</td>
<td>CAPI</td>
</tr>
<tr>
<td>Child health, development and services</td>
<td>HS</td>
<td>CAPI</td>
</tr>
<tr>
<td>Child cognitive and language development</td>
<td>LA</td>
<td>CAPI/CASI</td>
</tr>
<tr>
<td>Child temperament</td>
<td>TE</td>
<td>CAPI</td>
</tr>
<tr>
<td>Childcare and preschool education</td>
<td>CC</td>
<td>CAPI</td>
</tr>
<tr>
<td>Child school education and friends</td>
<td>SC</td>
<td>CAPI</td>
</tr>
<tr>
<td>Child work and further education</td>
<td>WE</td>
<td>CAPI</td>
</tr>
<tr>
<td>Child activities</td>
<td>AC</td>
<td>CAPI</td>
</tr>
<tr>
<td>Birth family contact</td>
<td>FC</td>
<td>CAPI</td>
</tr>
<tr>
<td>Child personal identity</td>
<td>PI</td>
<td>CAPI</td>
</tr>
<tr>
<td>Caregiver informal support</td>
<td>IS</td>
<td>CAPI</td>
</tr>
<tr>
<td>Caregiver formal support and satisfaction</td>
<td>FS</td>
<td>CAPI</td>
</tr>
<tr>
<td>Relationships – child and others (caregiver, family, friends)</td>
<td>RC</td>
<td>CASI</td>
</tr>
<tr>
<td>felt security and parenting style</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child behaviours, feelings and support</td>
<td>BE</td>
<td>CASI</td>
</tr>
<tr>
<td>Relationships – caregiver and partner</td>
<td>RE</td>
<td>CASI</td>
</tr>
<tr>
<td>Caregiver health and wellbeing</td>
<td>CH</td>
<td>CASI</td>
</tr>
<tr>
<td>Leaving care (including independent living skills)</td>
<td>LE</td>
<td>CAPI</td>
</tr>
<tr>
<td>Caregiver neighbourhood social cohesion</td>
<td>NE</td>
<td>CAPI</td>
</tr>
<tr>
<td>Caregiver household grid</td>
<td>HH</td>
<td>CAPI</td>
</tr>
<tr>
<td>Child other comments</td>
<td>OC</td>
<td>CAPI</td>
</tr>
<tr>
<td>Birth parent cohort Wave 2 onwards</td>
<td>CP</td>
<td>CAPI</td>
</tr>
<tr>
<td>Birth parents experiences before removal (child protection background)</td>
<td>CP</td>
<td>CAPI</td>
</tr>
</tbody>
</table>
Birth parents experiences during OOHC (including family contact and restoration work) | SD | CAPI
---|---|---
Birth parents experiences of restoration | RT | CAPI
Adoption cohort Wave 2 onwards | | |
Adoption from OOHC | AD | CAPI

Note, the questionnaire can be linked to the data dictionary by a module and question

**Figure 9: Child and young person interview modules**

<table>
<thead>
<tr>
<th>Child/youn person question modules</th>
<th>Module ID</th>
<th>Collection mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview details</td>
<td>IV</td>
<td>CAPI/ACASI</td>
</tr>
<tr>
<td>Child cognitive and language development</td>
<td>LA</td>
<td>Direct assessment</td>
</tr>
<tr>
<td>Relationships – child and others (caregiver, family, friends), felt security and parenting style</td>
<td>RC</td>
<td>Direct assessment/CAPI/ACASI</td>
</tr>
<tr>
<td>Birth family contact</td>
<td>FC</td>
<td>CAPI/ACASI</td>
</tr>
<tr>
<td>Child activities</td>
<td>AC</td>
<td>CAPI/ACASI</td>
</tr>
<tr>
<td>Child school education and friends</td>
<td>SC</td>
<td>CAPI/ACASI</td>
</tr>
<tr>
<td>Child work and further education</td>
<td>WE</td>
<td>CAPI/ACASI</td>
</tr>
<tr>
<td>Child personal identity</td>
<td>PI</td>
<td>CAPI/ACASI</td>
</tr>
<tr>
<td>Child health, development and services</td>
<td>HS</td>
<td>CAPI/ACASI</td>
</tr>
<tr>
<td>Child behaviours, feelings and support</td>
<td>BE</td>
<td>CAPI/ACASI</td>
</tr>
<tr>
<td>Setting up the placement and ongoing casework</td>
<td>PC</td>
<td>CAPI/ACASI</td>
</tr>
<tr>
<td>Leaving care and independent living skills</td>
<td>LE</td>
<td>CAPI/ACASI</td>
</tr>
<tr>
<td>Child other comments</td>
<td>OC</td>
<td>CAPI/ACASI</td>
</tr>
</tbody>
</table>

Note, the questionnaire can be linked to data dictionary by the questionnaire original variable name.


**Felt security activities (age 7-17 years)**

The felt security activity is adapted from the Kvebaek Family Sculpture Technique (Cromwell, Fournier, Kvebaek;1980). This activity measures the children’s view of how close they feel to people (distance and cluster scores). There are two parts to the felt security activity:

For those in OOHC placements with families:

- Part A: Closeness to OOHC family
• Part B: Closeness to birth family or others outside the OOHC placement

For those living independently:

• Part A: Closeness to birth family
• Part B: Closeness to extended family and friends

The child or young person places figures (which represent the child and the people he/she feels close to) on an 8x8 grid board.

The felt security activity dataset contains the horizontal and vertical reference for the figure placement, along with other data items. The datasets that hold all of the felt security activity data are available separately in the files INTV_felt_w1, INTV_felt_w2, INTV_felt_w3. The dataset at each wave is cross-sectional in nature, i.e., one record per person.


Caseworker

The dataset that includes the Caseworker Survey is available in the file SURV_CW, which is a one-off survey and cross-sectional in nature.

The Caseworker Survey questionnaire presented questionnaire items in topic modules. The data are similarly arranged in these modules (see the section below Variable Naming Convention). The Caseworker Survey modules are presented in Figure 10.
Figure 10: Caseworker survey modules

<table>
<thead>
<tr>
<th>Caseworker question modules</th>
<th>Module ID</th>
<th>Collection mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview details</td>
<td>IV</td>
<td>Online survey</td>
</tr>
<tr>
<td>Child socio-demographic characteristics</td>
<td>KD</td>
<td>Online survey</td>
</tr>
<tr>
<td>Casework – child/family</td>
<td>PC</td>
<td>Online survey</td>
</tr>
<tr>
<td>Relationships – child and caregiver/placement</td>
<td>RC</td>
<td>Online survey</td>
</tr>
<tr>
<td>Placement characteristics</td>
<td>PL</td>
<td>Online survey</td>
</tr>
<tr>
<td>Child health, development and services</td>
<td>HS</td>
<td>Online survey</td>
</tr>
<tr>
<td>Child education</td>
<td>SC</td>
<td>Online survey</td>
</tr>
<tr>
<td>Birth family contact</td>
<td>FC</td>
<td>Online survey</td>
</tr>
<tr>
<td>Restoration from OOHC</td>
<td>RT</td>
<td>Online survey</td>
</tr>
<tr>
<td>Leaving care</td>
<td>LE</td>
<td>Online survey</td>
</tr>
<tr>
<td>Support to caseworkers</td>
<td>SU</td>
<td>Online survey</td>
</tr>
</tbody>
</table>

Note, the questionnaire can be linked to data dictionary by the questionnaire original variable name.


Childcare and school teacher

The dataset that includes the Childcare Teacher and School Teacher Survey is available in the file SURV_TEA. As with the caseworker survey, the Childcare and School Teacher survey was a one-off and cross-sectional in nature.

The teacher questionnaire presented questionnaire items in topic modules. The data are similarly arranged in these modules (see the section below - Variable Naming Convention). The teacher modules are presented in Figure 11.
Figure 11: Childcare and school teacher survey modules

<table>
<thead>
<tr>
<th>Teacher question modules</th>
<th>Module ID</th>
<th>Collection mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview details</td>
<td>IV</td>
<td>Online survey</td>
</tr>
<tr>
<td>School education:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- childcare and preschool</td>
<td>SC</td>
<td>Online survey</td>
</tr>
<tr>
<td>- support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- absences</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- progress</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- plan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child behaviours</td>
<td>BE</td>
<td>Online survey</td>
</tr>
<tr>
<td>Child socio-demographic characteristics</td>
<td>KD</td>
<td>Online survey</td>
</tr>
</tbody>
</table>

Note, the questionnaire can be linked to data dictionary by the questionnaire original variable name.


Linkage Datasets

The three DCJ Administrative Data datasets are:

- Child protection events (file name FACS_CP_REPORT) – person-period format. Each person has multiple records – one for each child protection concern report. If a child has one report only, the child will have one single record.

- Detailed OOHC events (file name FACS_OOHC_EVENT) – person-period format. Each person has multiple records – one for each OOHC event. Each row in the dataset represents a single care event. A new care event (and therefore new row) is generated when there is a change in the particulars of the child’s arrangement(s) such as: caregiver, placement provider, placement purpose, legal order/Parental responsibility or case. One or more care events (and therefore multiple rows) make up a single placement. One or more placements make up a single care period. A child may enter and exit placements multiple times over a period of time. When the placements overlap or have a gap of less than 30 days between the end of one placement and the start of another, these placement are joined to form a care period. Therefore, a care period is a continuous time period in OOHC and may consist of multiple placements.

- A linked file comprising selected variables from the child protection episodes and OOHC spells files (file name FACS_SUMMARY) – person-level format. Each child has one record and multiple variables contain summary data from each report and each care period. This format can be converted into the person-period format.

The other linked datasets are:

- Australian Early Development Census (file name AEDC)
- National Assessment Program - Literacy and Numeracy (file name NAPLAN)
- NSW Bureau of Crime Statistics and Research (file name BOCSAR - Custody)
- NSW Bureau of Crime Statistics and Research (file name BOCSAR – Proven)
- NSW Perinatal Data Collection (file name PDC)
- NSW Admitted Patient Data Collection (file name APDC)
- NSW Emergency Department Data Collection (file name EDDC)
- NSW Mental Health-Ambulatory Data Collection (file name MH-ADC)
- NSW Deaths Registry, Fact of Death (file name RBDMS)
- NSW Cause of Death (file name COD-URF)


Data dictionaries


All Data Dictionaries follow a common structure. Not all attributes described in the Data Dictionaries are relevant to all datasets, consequently several data attributes may contain no information, depending on the dataset.

The attributes presented in the Data Dictionaries are described in Figure 12.

The POCLS Data Books providing frequency counts for every survey question are available in SURE for approved data users.
Variable naming convention

Each variable is named using a standard naming convention. The variable naming convention was developed so that variables have predictable names across questionnaire modules, waves and informants, and so that thematically linked variables have similar names wherever possible. The variable name structure is:

Module_ Informant_QuestionDescriptor_Answer_Suffix

The module name and module identifier are described in the Data Dictionaries and in Figures 8-11 above.

Informant identifiers are:

- Caregiver (CRR)
• Child or Young Person (CYP)
• Caseworker (CW)
• Teacher (TEA).

For example, the variable regarding changes to the caregiver's family routine in preparation for the child's arrival is PC_CRR_PREP_FAMILY.

The structure being:
• Module: Setting up child’s placement and ongoing casework (PC)
• Informant: Caregiver (CRR)
• Question descriptor: e.g. Preparation (PREP)
• Answer: Family routine (FAM).

Response to a questionnaire item is often split across several related variables. Standard suffixes are used to indicate variables for which free-text response is one of the available response options (CODE) and the actual text response (TXT). Only variables that have a free-text response option may be coded this way.

That is, for example the variable AC_CRR_CHORES_JOBA_CODE (recording responses to question “Please list any jobs or chores [study child] has. For example: paper route, babysitting, making bed, working in store, etc.”, for up to three jobs, A, B and C) has responses Yes/Text response recorded, No, Not Applicable. Where the response to AC_CRR_CHORES_JOBA_CODE is Yes/Text response recorded the associated variable AC_CRR_CHORES_JOBA_TXT will be populated with free text.

Similarly, the Caregiver question “Do you know what things about your family were considered as suitable for the child’s placement here?” has the allowed responses ‘Yes (WRITE IN) [TEXT BOX]’, ‘No’, ‘DON’T KNOW’, ‘REFUSED’. That is, the questionnaire item requires that a ‘Yes’ response is accompanied by further, free-text, explanation. The text responses are captured in the variable IN_CRR_FAM_SUIT_TXT. For this example, the free-text response has also been coded and is available from the variables IN_CRR_FAM_SUIT_FAM, IN_CRR_FAM_SUIT_SAFE, ...... IN_CRR_FAM_SUIT_OTH (with responses yes, no, not asked, not applicable).

You can see that analysis of this question may require inclusion of three levels of variables, namely the basic coded response, the recoded free-text variables, and uncoded free-text.

Sorting the dataset by the variable name will group related variables. Information has been included in the data dictionary to revert to the original variable order.
Close review of the POCLS Questionnaires, response options and codes are essential prior to and during analysis of the POCLS data.

As indicated in Figure 12, each Variable will have an associated Variable Label. The Variable Label is based on the Questionnaire item from which the Variable is derived.

The Label contains descriptors which indicate the Informant (e.g. CARER), whether the data is derived from administrative sources (PREFILLED), whether the variable contains free-text (FREE TEXT), and whether the data were back-coded from a free-text response to a predetermined response (RECODE).

**Data cleaning and coding**

The following rules were applied for data cleaning and coding:

Coding and Cleaning: ‘other specify’ responses where they could be aligned with an existing pre-coded variable were back-coded. Responses directly answered by the caregiver within the CASI module or by the young person in the ACASI module have not been edited and are left verbatim.

De-identifying verbatim responses: Any names referred to in the verbatim responses which could possibly identify the study child or another individual have been removed.

Checking data after edits: frequency counts were run and checked against raw data.

Commonly used minus codes in the POCLS data:

- **Don’t Know**: coded as ‘-2’
- Refused: coded as ‘-3’
- No_response: coded as ‘-4’
- Qualitative data coding: coded as ‘-5’
- Missing data because question added/removed during Wave 1: coded as ‘-7’
- Missing data due to technical/scripting error: coded as ‘-8’
- Skip_missing because Not Applicable: coded to ‘-9’.

While other minus codes can be considered as non-meaningful categories, the category ‘don’t know’ is a valid response for most of the questions in the POCLS.

Users are reminded to check the frequency distributions of the relevant variables as part of the initial/preliminary analysis before making a decision on how to treat the ‘don’t know’ category, e.g., whether to recode it, combine it with other category or exclude it from the analysis. The POCLS Data Books provide the frequency tables for all numeric variables from each wave and are available to approved researchers in SURE.
Scoring standardised measures

The standardised measures (described in the sections above on Face-to-face interviews with caregivers, Face-to-face interviews with the child or young person, Online Survey of childcare and school teachers) have been scored and standardised scores added into the main dataset. Only the standardised scores are retained in the final datasets, with all raw variables that were used in the scoring removed. These raw variables will be made available to researchers by special request only.

The standardised measures are all domain and age-specific. Many of these have subscales to measure the specific aspects of an outcome, e.g. internalising behaviour, externalising behaviour etc. Some measures have scores in both continuous and categorical forms while others are categorical only (e.g. ASQ). The use of cut-off points also differs – many are based on standard deviations from the mean whereas some are based on percentile ranks.

Figure 13, the Measures Manual (Technical Report Number 8) and the Consistent Use of Measures (Technical Report Number 9) provide information about the standardised measures used in the POCLS.

Figure 13: Standardised Measures

<table>
<thead>
<tr>
<th>Domain</th>
<th>Standardised measures and activities</th>
<th>Scored Wave 1</th>
<th>Scored Wave 2</th>
<th>Scored Wave 3</th>
<th>Scored Wave 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child measures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical health and development</td>
<td>Ages and Stages Questionnaire (ASQ3; Squires &amp; Bricker, 2009)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>NA</td>
</tr>
<tr>
<td>Child socio-emotional development</td>
<td>Abbreviated Temperament Scales adapted from the Revised Infant Temperament Questionnaire (Carey &amp; McDevitt, 1978), the Toddler Temperament Questionnaire (Fullard, McDevitt &amp; Carey, 1978) and the Childhood Temperament Questionnaire (Thomas &amp; Chess, 1977)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>School Aged Temperament Inventory (SATI; McClowry, 1995) – short form</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Brief Infant Toddler Social Emotional Assessment (BITSEA; Briggs-Gowan et al, 2004)</td>
<td>Yes</td>
<td>NA, not asked at W2</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Child Behaviour Checklist 1.5–5 and 6–18 (CBCL; Achenbach &amp; Rescorla, 2000; 2001)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Ages and Stages Questionnaire (ASQ3; Squires &amp; Bricker, 2009)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>NA</td>
</tr>
<tr>
<td>School Problems Scale (Prior, Sanson, Smart &amp; Oberklaid, 2000)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Domain</td>
<td>Standardised measures and activities</td>
<td>Scored Wave 1</td>
<td>Scored Wave 2</td>
<td>Scored Wave 3</td>
<td>Scored Wave 4</td>
</tr>
<tr>
<td>---------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------</td>
<td>---------------</td>
<td>---------------</td>
<td>---------------</td>
<td>---------------</td>
</tr>
<tr>
<td>School Bonding Scale (O’Donnell, Hawkins &amp; Abbott, 1995)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Short Mood &amp; Feeling Questionnaire 13-item scale (Angold et al, 1995) and additional questions on mood&lt;sup&gt;2&lt;/sup&gt;</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Felt security activity to show who they feel close to (adapted from the Kvebaek Family Sculpture Technique; Cromwell, Fournier &amp; Kvebaek, 1980)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Cognitive and language development</td>
<td>Communication and Symbolic Behaviour Scale Infant and Toddler Checklist (CSBS ITC; Wetherby &amp; Prizant, 2003)</td>
<td>Yes</td>
<td>NA, not asked at W2 – children too old NA NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MacArthur-Bates Communicative Developmental Inventories (MCDI-III; Fenson et al, 2007)</td>
<td>Yes</td>
<td>Yes</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>MacArthur Communicative Development Inventories—Short form (Fenson et al, 2000)</td>
<td>Yes</td>
<td>Yes</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Peabody Picture Vocabulary Test (PPVT-IV; Dunn &amp; Dunn, 2007)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Matrix Reasoning Test from Wechsler Intelligence Scale for Children (WISC-IV; Wechsler, 2003)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Caregiver measures</td>
<td>Kessler K10 (Kessler et al, 2003)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Caregiver psychological distress</td>
<td>Social Cohesion and Trust Scale (Sampson, Raudenbush &amp; Earls, 1997)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Social cohesion</td>
<td>Parenting – Warmth (Paterson &amp; Sanson, 1999)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Parenting practices/ style/self-efficacy</td>
<td>Parenting – Hostility (Institut de la Statistique du Québec, 2000)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Parenting – Monitoring (Goldberg et al, 2001)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Difficult Behaviour Self-Efficacy Scale (DBSES; Hastings &amp; Brown, 2002)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Emotional Responsiveness Scale from the Parenting Style Inventory II, adapted version (PSI-II: Darling &amp; Toyokawa, 1997)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Satisfaction with support from services</td>
<td>Satisfaction with Foster Parenting Inventory (SFPI) – Social Service Support Satisfaction Scale (Stockdale et al, 1997)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>
POCLS cohorts of interest and variables to identify them

For consistent reporting we have listed commonly used variables that should be used to identify the POCLS cohorts as shown in Figure 14.

Figure 14: POCLS cohorts of interest and variables to identify them

<table>
<thead>
<tr>
<th>Variable name</th>
<th>Label</th>
<th>Comments/Rationale for chosen source</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGE_ENT_1</td>
<td>Age at entry into OOHC – first care period</td>
<td>Age enter OOHC</td>
</tr>
<tr>
<td>KD_ADMIN_CHILD_AGE</td>
<td>Study child age group at interview</td>
<td>Age at each wave</td>
</tr>
<tr>
<td>IV_RESTORATION_FLAG</td>
<td>Restoration at the wave</td>
<td>Restoration</td>
</tr>
<tr>
<td>IV_ADOPTION_FLAG</td>
<td>Adoption at the wave</td>
<td>Adoption</td>
</tr>
<tr>
<td>IV_GUARDIAN_FLAG</td>
<td>Being on guardianship order at time of interview</td>
<td>Guardianship orders</td>
</tr>
<tr>
<td>KD_ADMIN_CHILD_CULT</td>
<td>Derived study child cultural background</td>
<td>Cultural background child</td>
</tr>
<tr>
<td>CD_CRR_CARER_CULT</td>
<td>Caregiver interviewed cultural background</td>
<td>Cultural background of caregiver</td>
</tr>
<tr>
<td>BE_CRR_CBCL_PROBSCL_CUT</td>
<td>CBCL total problems scale cut-off</td>
<td>Clinical range for behaviour</td>
</tr>
<tr>
<td>LA_CYP_PPVT_CUT</td>
<td>PPVT cut-off</td>
<td>Below average for verbal cognitive learning ability</td>
</tr>
<tr>
<td>LA_CYP_WISC_CUT</td>
<td>WISC cut-off</td>
<td>Below average for non-verbal cognitive learning ability</td>
</tr>
<tr>
<td>PL_ADMIN_CHILD_PLACEW1</td>
<td>Child placement type at interview</td>
<td>Placement type</td>
</tr>
<tr>
<td>IV_ADMIN_HOUSE_ID</td>
<td>Caregiver household ID</td>
<td>Same household as previous wave</td>
</tr>
<tr>
<td>OOHC_EXIT.1 and</td>
<td>OOHC exit status and exit reason</td>
<td>Exit care due to age 18 years</td>
</tr>
<tr>
<td>OOHCE_EXITREASON.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DERIVED_DISTRICT</td>
<td>District at the time of interview</td>
<td>District</td>
</tr>
<tr>
<td>WAVE</td>
<td>Wave of interview</td>
<td>Tracked sample</td>
</tr>
</tbody>
</table>

Study child’s siblings and members of the household

Figure 15 shows the household grid questions answered by caregiver at each wave. From the household grid, the POCLS collects data about the study child’s siblings:

- Full or half-siblings, including any children who were relinquished or removed at birth
- Step-siblings
- Adopted children in the same household, not biologically related
- Children born into the family and their foster/adopted siblings
- Other close relatives or non-relatives living in the same kinship home (i.e., cousins, aunts, uncles, grandparents, niece, nephew, etc)
- Foster children in the same family
- Orphanage mates or group-home mates with a close, enduring relationship (i.e., POCLS question in household grid asks about those in residential care)
- Children of the partner or former partner of the child’s parent
- Individuals conceived from the same sperm or egg donor (i.e., if the sibling is from the same donor, they would be considered as half-siblings (i.e., the first dot point above).

The household grid in the POCLS asks the caregiver to report on their relationship to the household member and the study child’s relationship to the household member. From this data you determine:

- Sibling related to the study child – either full or half sibling
- Sibling related to the study child – step sibling
- Sibling related to the study child (and adopted by the caregiver)
- Sibling unrelated to the study child (including birth, adopted, step, unrelated, foster children of the caregiver).

The POCLS also collects the sex, age, cultural background and health of siblings. The POCLS also ask what has changed since the previous interview if same caregiver household.

Figure 15: POCLS household grid questions: caregiver report

<table>
<thead>
<tr>
<th>Question</th>
<th>Response options</th>
</tr>
</thead>
<tbody>
<tr>
<td>How many residents are living in this household, other than [Study Child]?</td>
<td>_______; DON’T KNOW; REFUSED</td>
</tr>
<tr>
<td>So beginning with the oldest, what was their age last birthday?</td>
<td>I.I.I years</td>
</tr>
<tr>
<td></td>
<td>DON’T KNOW</td>
</tr>
<tr>
<td></td>
<td>REFUSED</td>
</tr>
<tr>
<td>So beginning with the oldest resident, what was their age last birthday?</td>
<td>I.I.I years</td>
</tr>
<tr>
<td>What is their sex?</td>
<td>Male</td>
</tr>
<tr>
<td></td>
<td>Female</td>
</tr>
<tr>
<td></td>
<td>DON’T KNOW</td>
</tr>
<tr>
<td></td>
<td>REFUSED</td>
</tr>
<tr>
<td>Question</td>
<td>Options</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------</td>
</tr>
<tr>
<td>What is this person’s relationship to you/caregiver?</td>
<td>biological child, adopted child, step child, sibling, parent, grandchild, grandparent, great grandparent, aunt/uncle, niece/nephew, cousin, other relative/in-law, unrelated child, foster child, unrelated adult, DON'T KNOW, REFUSED</td>
</tr>
<tr>
<td>What is this person’s relationship to [Study Child]?</td>
<td>step sibling, sibling, parent, grandchild, grandparent, great grandparent, aunt/uncle, niece/nephew, cousin, other relative/in-law, unrelated child, unrelated adult, DON'T KNOW, REFUSED</td>
</tr>
<tr>
<td>Is this person of Aboriginal or Torres Strait Islander origin?</td>
<td>No, Yes, Aboriginal, Yes, Torres Strait Islander, Yes, both Aboriginal and Torres Strait Islander origin, DON'T KNOW, REFUSED</td>
</tr>
<tr>
<td>Does this person have any medical conditions or disabilities that have lasted, or are likely to last, for six months or more?</td>
<td>No, Yes, DON'T KNOW, REFUSED</td>
</tr>
<tr>
<td>Specify medical conditions or disabilities</td>
<td>[TEXT BOX]; DON'T KNOW, REFUSED</td>
</tr>
<tr>
<td>What has changed in the family since the last interview?</td>
<td>[TEXT BOX]; Nothing, DON'T KNOW, REFUSED</td>
</tr>
</tbody>
</table>

**Derived variables**

There are a number of derived variables in the Child, Young Person and Caregiver datasets. These include children’s Aboriginal status, CALD status, whether the household is an Aboriginal household and a number of administrative variables at the time of the interview for each wave.
Definitions of Aboriginality and Culturally and Linguistically Diverse (CALD)

For the POCLS, a child is counted as Aboriginal if they were identified as Aboriginal in the DCJ administrative data that was available at the time for Wave 1 or 2, or in the Wave 3 caregiver response. This definition applies to children who participated in the interviews only. For children who were in the no final orders cohort and final orders cohort but did not participate in the interview, their Aboriginal status is based on the administrative data.

The CALD status is defined following the same approach.

For more information on the child’s cultural background counting rule see Identifying the cultural background of children in the study (Technical Report Number 12). The variable for Aboriginal household ‘PL_CRR_HH_ATSI’ was derived based on the Aboriginal status of either the caregiver or his/her spouse. The Aboriginal status of other people (adults/children) who stayed in the same household at the time was not considered (but available in the household grid).

The administrative data at the time of each interview

To provide additional information that wasn’t collected by the survey, such as the DCJ district where the child resides, start date of the current placement, a list of administrative variables at the time of the interview for each wave was derived from DCJ administrative data. It involved comparing the relevant dates with the interview dates and determining the most appropriate value for the selected administrative variables. Figure 16 provides the list of administrative variables at the time of the interview at each wave.

Figure 16: Administrative data at the time of the interview

<table>
<thead>
<tr>
<th>Variable name</th>
<th>Label</th>
<th>Comments/Rationale for chosen source</th>
</tr>
</thead>
<tbody>
<tr>
<td>PL_ADMIN_CSC_INT</td>
<td>CSC at interview</td>
<td>Consistent with placements information</td>
</tr>
<tr>
<td>PL_ADMIN_DISTRICTS</td>
<td>District (DETAILED) at interview</td>
<td>Consistent with placements information</td>
</tr>
<tr>
<td>PL_ADMIN_PL_STARTDATE</td>
<td>Start date of current placement at interview</td>
<td>Consistent with placements information</td>
</tr>
<tr>
<td>PL_ADMIN_PL_PURPOSE</td>
<td>Purpose of current placement at interview</td>
<td>Purpose of the current placement at the time of interview</td>
</tr>
<tr>
<td>PL_ADMIN_FIRST_ENTRYDATE</td>
<td>Date of first ever entry into OOHIC</td>
<td>Consistent with care period information</td>
</tr>
<tr>
<td>PL_ADMIN_PLACEMENT_N</td>
<td>Time between placement start date and interview (months)</td>
<td>Length of time from the start of current placement to the time of interview</td>
</tr>
<tr>
<td>Field</td>
<td>Description</td>
<td>Notes</td>
</tr>
<tr>
<td>------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>PL_ADMIN_ORDER_STATUS</td>
<td>Order status of the last order before the child’s interview</td>
<td>Taking the legal information from the legal file based on dates of orders and the interview date will provide more accurate data.</td>
</tr>
<tr>
<td>PL_ADMIN_PR_STATUS_GRP</td>
<td>Current legal status of child at interview</td>
<td>As for order_status</td>
</tr>
<tr>
<td>PL_ADMIN_ALLOW_LAST</td>
<td>Last allowance level paid to the caregiver prior to the interview</td>
<td>The level of the Allowance payments to a caregiver can be used as a proxy for the level of care required for the child. Allowances are usually only available for children in DCJ OOHC placements rather than NGOs.</td>
</tr>
<tr>
<td>PL_ADMIN_ALLOW_MAX</td>
<td>Maximum allowance level paid to the caregiver prior to the interview</td>
<td>As above</td>
</tr>
<tr>
<td>PL_ADMIN_ALLOWDATE_LAST</td>
<td>Date of last allowance paid to the caregiver prior to the interview</td>
<td>As above</td>
</tr>
</tbody>
</table>

There are 15 DCJ administrative districts (16 if State-wide Services included), which are aligned with the local health districts in NSW. These districts can be combined into larger areas, as shown in Figure 17.

Figure 17: Geographic classification

<table>
<thead>
<tr>
<th>Geographic level 1</th>
<th>Geographic level 2</th>
<th>Geographic level 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metro</td>
<td>South Eastern, Northern &amp; Sydney Districts</td>
<td>South Eastern Sydney</td>
</tr>
<tr>
<td></td>
<td>South Western Sydney Districts</td>
<td>Northern Sydney</td>
</tr>
<tr>
<td></td>
<td>Western Sydney &amp; Nepean Blue Mountains Districts</td>
<td>Sydney</td>
</tr>
<tr>
<td></td>
<td>Sydney</td>
<td></td>
</tr>
<tr>
<td>Regional/remote</td>
<td>Illawarra Shoalhaven &amp; Southern NSW Districts</td>
<td>Illawarra Shoalhaven</td>
</tr>
<tr>
<td></td>
<td>Mid North Coast &amp; Northern NSW Districts</td>
<td>Southern NSW</td>
</tr>
<tr>
<td></td>
<td>Murrumbidgee, Far West &amp; Western Districts</td>
<td>Far West</td>
</tr>
<tr>
<td></td>
<td>Murrumbidgee</td>
<td>Murrumbidgee</td>
</tr>
<tr>
<td></td>
<td>Western NSW</td>
<td>Western NSW</td>
</tr>
<tr>
<td></td>
<td>Hunter New England &amp; Central Coast Districts</td>
<td>Hunter New England</td>
</tr>
<tr>
<td></td>
<td>Central Coast</td>
<td>Central Coast</td>
</tr>
</tbody>
</table>
POCLS datasets for analysis and publications

Figure 18 lists the POCLS datasets in SURE.

Figure 18: POCLS datasets: names and descriptions

<table>
<thead>
<tr>
<th>Name of dataset</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTV_CYP_C_W1234_LONG</td>
<td>Combined Wave 1-4 interview data in the long format (i.e., person-period) for caregiver and children</td>
</tr>
<tr>
<td>INTV_FELT_W1234_LONG</td>
<td>Combined Wave 1-4 data in the long format (i.e., person-period) for the felt security activity</td>
</tr>
<tr>
<td>SURV_CW</td>
<td>Caseworker survey data</td>
</tr>
<tr>
<td>SURV_TEA</td>
<td>Childcare and school teachers survey data</td>
</tr>
<tr>
<td>DCJ_CP_REPORT</td>
<td>Child protection events, e.g., ROSH reports, investigations and substantiations</td>
</tr>
<tr>
<td>DCJ_OOH_C_EVENT</td>
<td>OOH care events, e.g., placements, care periods</td>
</tr>
<tr>
<td>DCJ_SUMMARY</td>
<td>A linked file comprising selected variables from child protection events and OOH care periods files</td>
</tr>
<tr>
<td>AEDC</td>
<td>Linked Australian Early Development Census data for 2009, 2012 and 2015</td>
</tr>
<tr>
<td>NAPLAN</td>
<td>Linked NAPLAN data from 2008-2014</td>
</tr>
<tr>
<td>OFFENDING</td>
<td>Linked re-offending data from 2003-2015</td>
</tr>
<tr>
<td>CAUSE_DEATH</td>
<td>Linked ABS death registrations data from 2000-2013</td>
</tr>
<tr>
<td>CHILD_DEATH</td>
<td>Linked RBDM death registrations data from 2000-2016</td>
</tr>
<tr>
<td>EMERGENCY</td>
<td>Linked emergency department data from 2005-2016</td>
</tr>
<tr>
<td>HOSPITAL_ADMISSIONS</td>
<td>Linked hospital admissions data from 2001-2015</td>
</tr>
<tr>
<td>MH_AMBULATORY</td>
<td>Linked mental health ambulatory data from 2001-2015</td>
</tr>
<tr>
<td>PERINATAL</td>
<td>Linked birth registrations data from 1994-2011</td>
</tr>
</tbody>
</table>

Guidelines to access and publish the POCLS data are detailed in:

- POCLS Guidelines for accessing survey data and publication (Technical Report Number 14)
- POCLS Guidelines for record linkage data (Technical Report Number 15)

All publications using the POCLS data will be reviewed by the POCLS team prior to publishing. The review process and relevant templates are detailed in the above mentioned reports that are available at the study webpage [www.facs.nsw.gov.au/resources/research/pathways-of-care/poclspublication/poclstechnical-reports](http://www.facs.nsw.gov.au/resources/research/pathways-of-care/poclspublication/poclstechnical-reports).

Contact the POCLS team by email if you require technical support [Pathways@facs.nsw.gov.au](mailto:Pathways@facs.nsw.gov.au).
14 Important data issues

Data confidentialisation

The POCLS data is de-identified and confidentialised to help prevent individual study children from being identified. The data is however potentially re-identifiable, particularly when linked to several other data sources or when aggregated results combined together over time (i.e., cumulative risk) due to the increased level of detail available. There is therefore a potential risk to the privacy of participants through accidental re-identification. Creating substrata of small sizes for analyses may also make the data more readily re-identifiable.

The risks of potential re-identification are managed as follows:

- Every child or carer was assigned a random ID with personal names removed. In addition, the data has been confidentialised as follows:

<table>
<thead>
<tr>
<th>Variable</th>
<th>Confidentialised in the datasets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburb</td>
<td>Removed</td>
</tr>
<tr>
<td>Postcode</td>
<td>Removed</td>
</tr>
<tr>
<td>Height</td>
<td>Replaced with BMI</td>
</tr>
<tr>
<td>Weight</td>
<td>Replaced with BMI</td>
</tr>
<tr>
<td>Child Date of Birth (DOB)</td>
<td>Replaced with Month and Year of Birth</td>
</tr>
<tr>
<td>Carer DOB</td>
<td>Replaced with Month and Year of Birth</td>
</tr>
<tr>
<td>Carer spouse DOB</td>
<td>Replaced with Month and Year of Birth</td>
</tr>
</tbody>
</table>

- All linked data are managed within the Secure Unified Research Environment (SURE). SURE provides virtual research project workspaces and individual researcher computing environments and is accessible over encrypted internet connections. A user views a facsimile of the screen of their remote virtual computer desktop on their local computer screen.

- Research outputs are only to be viewed by the investigators listed in the study protocol and potentially identifiable information is only to be viewed from within SURE.

- All incoming and outgoing files on the SURE gateway are curated by a delegate of DCJ. Only aggregate data can be taken outside SURE and shared outside the project team and no results are to be released in such a way as to allow the identification of individuals or communities. Techniques, such as recoding categorical key variables into fewer categories, and suppressing specific values of key variables for some units, should be employed where necessary. See more details in the POCLS report on the Guidelines for reporting results with small

- The Principal/Lead Researcher of each project has the responsibility to ensure confidential information is protected and not copied, published or reproduced as per the Service Agreement and no published information of any form (e.g., research report, journal paper, conference presentation etc) can lead to the re-identification of individuals in the POCLS.

Looping, conditional branching and skip patterns
The POCLS Child and Young Person, Caregiver, Teacher and Caseworker survey questionnaires include questionnaire items (questions) that, depending on the response to the question, require the interviewer to ‘loop’ back to a previous question, repeat (‘loop’) the current question, or ‘skip’ a question.

‘Looping’ is typically required where: (i) a question has multiple potential responses and further information is needed on each of the responses; or (ii) where the response to a question needs to be checked against an earlier question. An example of the former is found in the Child, Young Person & Caregiver Interview Questionnaire, where the question “What are three things you like doing?” allows the respondent to provide up to three responses. Where the respondent provides activities of interest, the follow-up question asks, “…. how often do you get to do these activities?”. Each of the activities requires a frequency response. Hence at data collection the “… how often do you get to do these activities?” needs to be repeated (‘looped’ through) up to three times.

An example of the latter use of ‘looping’ is found in the Caregiver questionnaire, where the respondent is asked “What were the main services and supports you received…” A follow-up question asks, “What services or supports did you really need for yourself but didn’t get…”. The interviewer/Computer Assisted Person Interview (CAPI) system is required to ‘loop’ back to the earlier question and exclude from the response any services that were reported as being received.

‘Skip’ patterns, also called conditional branching, branch logic and skip-logic, force the respondent to take a customised path through the survey which will vary based on the response to the questions.

The consequence of ‘looped’ questions is that the dataset may contain multiple response variables per question (one for each of the “three things you like doing”, for example) and each of these may align with multiple other variables (the corresponding “how often do you get to do these activities” variable, for example). Where possible, the related variables in the POCLS Study Analysis Dataset have a common route-label, allowing them to be aligned. However, the only accurate way to ensure the appropriate variables are identified and aligned is to refer to the relevant questionnaire and data dictionary.
Similarly, the consequence of skip-patterns is that for a particular respondent a particular question response may be missing (blank) in the dataset (as it is not relevant to that respondent), thus affecting frequency counts and having direct influence on selecting the denominator for calculation of proportions. Again, the best way to ensure the appropriate use of variables is to refer to the relevant questionnaire and data dictionary.


Weighting the data
The POCLS was designed as a census (i.e., no sampling) in which all eligible people were approached and there was no explicit sampling process. However, at each wave a proportion of the study population did not respond, failed to provide information for various reasons, or provided insufficient information to produce estimates. Non-response occurred at Wave1 and each following wave, reducing the sample size.

Also, unless non-respondents are Missing Completely at Random (MCAR), non-respondents and respondents may differ in key characteristics so that estimates obtained from the sample of respondents may differ from the characteristics of the population, leading to biased estimates. To reduce bias due to non-response, adjustments can be made to the estimates calculated from the responding sample. One general approach to adjustment is weighting. A range of weights have been prepared for the POCLS data.

For the purposes of weighting, the POCLS final orders cohort (n=2,828) is divided into two sub-populations: restored, who were not included in Wave 1, and those in OOHC (in-OOHC), who were included in Wave 1. The population consisted of 2,309 in-OOHC cases of which 1,285 were fully responding in Wave 1, a response rate of 55.7%. There were 519 restored cases in the population, none of which were included in Wave 1 and 96 which responded in Wave 2, giving a response rate of 18.4% in Wave 2.

The use of the weight variable ‘inOOHC_w123’ will weight up the sample to the population of those in OOHC (n=2,309). This is based on the cases of n=882 where children participated in all three waves. By definition, the restored component is not included as those children did not participate in Wave 1.

In general, the two components of the population (in-OOHC versus restored) should be analysed separately, not least for the practical reason that there are no restored cases in Wave 1. If there are analyses that substantively make sense to combine the two components, that can be achieved using the weights that have been calculated. For estimation of the variances and standard errors of estimates each component should be treated as a stratum in the statistical software being used. The weights calculated will result in each component being represented in proportion to their relative population
size. The weights in each component should not be scaled to the sample size in that component as that will lead to each component being represented in proportion to their relative sample size, which is not appropriate because of the much lower response rate in the restored component. If there are substantial reasons to include both components in the analysis, users should use the variable ‘Strata’ in the dataset and specify it in their statistical procedures.

When any estimation or analysis is carried out using the weights, users should use the complex survey option in the software used to perform the analysis. For example, in SAS, the survey’s design features should be incorporated by employing PROC SURVEYFREQ, PROC SURVEYREG or PROC SURVEYLOGISTIC.

The POCLS_Weights file is provided separately and contains 8 weights:

- inOHC_W1 – weights for cross-sectional Wave 1 response
- inOHC_W12 – weights for longitudinal Wave 1 and 2 analyses
- inOHC_W123 – weights for longitudinal Wave 1,2 and 3 analyses
- inOHC_W2 – weights for cross-sectional Wave 2 response
- inOHC_W3 – weights for cross-sectional Wave 3 response
- restored_W2 – weights for cross-sectional Wave 2 response
- restored_W23 – weights for longitudinal Wave 2 and 3 analyses
- restored_W3 – weights for cross-sectional Wave 3 response.


**Write and save statistical analysis scripts**

Until recently, analysis of the POCLS data has been undertaken by members of the POCLS Study Working Group. The POCLS data asset is now being used by a larger number of approved researchers to answer the Study’s key research questions. While data quality assurance has been performed over the data, given the size and complexity of the datasets, issues may arise as more analysts use the data. We
recommend that analysts write and save scripts for all their analyses in SURE in case they need to be re-run due to corrections of data errors or releases of updated versions.
15 Resources for POCLS data users

An up to date list of resources available to researchers using the POCLS data set is available in the POCLS Objectives and Strategic Research Agenda (Technical Report Number 1) and available on the study webpage.

Data documentation

- **Questionnaires**


  The questionnaires used at the child, young person and caregiver face-to-face interview, the childcare and school teacher online survey, and the caseworker online survey, are essential to the proper development of research questions, understanding the data and the optimal approach to analyses. The questionnaires should be consulted as a priority. Other data collections include the felt security activity and scans of the child’s NSW Health My Personal Health Record known as the Blue Book.

- **Data dictionaries**


  Data dictionaries are available on all POCLS datasets and should be consulted when designing and implementing study analyses. The data dictionaries provide variable level information for each of the data sets. They include variable names, codes, eligibility, applicability, type, length, module, and mode of questioning. Data dictionaries are available for the: child, young person and caregiver face-to-face interviews, the felt security activity; the caseworker online survey; the childcare and school teacher online survey; DCJ administrative data; and the linked external data.

- **Data Books**

  Data books are available to approved researchers in SURE only.

  The POCLS data books for the survey data are intended to be used by researchers to help to understand the data structure, the frequency of responses to survey questions and as a resource to cross-check during analyses. For obvious reasons, frequency tables have not been prepared for text response variables. There is also a data book for the linkage data, which provides frequency counts of selected variables by care and protection order type.
Forthcoming is a data book on interviewer ratings which collects data on the quality of the interview, reasons why the interview and/or activities were not completed, and the environment where the interview took place.

- **Data user training slide deck**
  

  Data user training slide deck provides an outline of the POCLS data user training workshop. The slide deck includes information provided by the data custodians to assist analysts using record linkage data.

**Technical reports**

Technical reports papers have been prepared to aid use and interpretation of the POCLS data including non-response and data weights, felt security activity, measures manual, consistent use of measures in analysis, framework to analyse child development. Please see POCLS Objectives and Strategic Research Objective (Technical Report Number 1) for a full list.

All such resources are available at the study webpage


**Interactive Dashboards**

The dashboards provide a high level interactive introduction to key components of the study. The dashboards may answer high level questions for Districts, and may provide some direction for more specific research questions. The dashboards will be available at the study webpage.

**POCLS Publication Clearinghouse**

Research reports, technical reports, evidence-to-action notes, interactive dashboards, presentations and information for participants on the POCLS webpage

16 Useful References


