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***Practice Guidelines***

***Reducing Preventable***

***Police Call-outs to Residential***

***Care Services***

***Guide 2 – Residential Care Providers***





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* CREATE Foundation
* Queensland Aboriginal and Torres Strait Islander Child Protection Peak
* Queensland Family and Child Commission
* Queensland Police Service
* Office of the Public Guardian
* Non-government service providers

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Disclaimer

This document is a general guide to appropriate practice. The guidelines are designed to provide information to assist decision-making and are based on the best available evidence at the time of development of this publication.

This guide interfaces with multiple other resources, including:

* *Hope and Healing Framework for Working with Children and Young People Living in Residential Care in Queensland.* Department of Child Safety, Youth and Women 2018
* *Information Sharing Guidelines.* Department of Child Safety, Youth and Women 2018
* *Joint Agency Protocol to Reduce Preventable Police Call-outs to Residential Care Services*. Queensland Family & Child Commission 2018
* *Minimum Qualification Standard for all residential care workers working in Queensland*. Department of Child Safety, Youth and Women 2017
* *Police Powers and Responsibilities Act,* Queensland Government 2000
* *Positive Behaviour Support Policy,* Department of Child Safety, Youth and Women
* *Queensland Human Rights Act 2019*. Human Rights Commission 2019
* *Queensland Government Protocol for Joint Agency Response When a Child in Care is Missing*. Department of Child Safety, Youth and Women 2016
* *Reporting missing children: Guidelines for approved carers and care services.* Department of Child Safety, Youth and Women 2016
* *The Hope and Healing Framework for Working with Children and Young People Living in Residential Care.* PeakCare Queensland 2015
* *United Nations Convention on the Rights of the Child (UNCRC*) *1989*,the *Child Protection Act 1999* and the principles in the *Youth Justice Act 1992*

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# Definitions

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| Term | Definition |
| Absent child in care | An *absent child* is a child who is absent for a short period without permission, whose location is known or can be quickly established. |
| Criminal Justice System | The criminal justice system includes the Queensland Police Service, Department of Justice and Attorney-General (including the Office of the Director of Public Prosecutions), Queensland Courts, Department of Children, Youth Justice and Multicultural Affairs (Youth Justice Services) and Queensland Corrective Services. For children and young people under the age of 18 the experience of criminal justice will be through the youth justice system. |
| Child Safety Officers (CSO) | CSOs are employed by Department of Children, Youth Justice and Multicultural Affairs (Child Safety Services), and are responsible for delivering statutory child protection services including assessment, intervention, casework and case management. |
| Department of Children, Youth Justice and Multicultural Affairs (DCYJMA) | DCYJMA has a statutory obligation to respond to children in need of protection, and maintains responsibilities for the child’s care, protection, support and wellbeing in that time. |
| Criminalisation | Criminalisation refers to the process of transforming behaviours and individuals into crime and criminals. In practice this includes stigmatising children, labelling their behaviours as criminal, and adopting a criminal response to actions that would not be criminalised in a family home. |
| Evolve Therapeutic Services (ETS) | ETS provides specialist intensive trauma-informed mental health services for children and young people aged 5-17 years (inclusive). The children and young people who come to ETS are on child protection orders and in care. They experience severe and/or complex psychological and behavioural support needs. |
| Harm | *The Child Protection Act 1999* defines harm as ‘any detrimental effect of a significant nature on the child’s physical, psychological or emotional wellbeing.’ |
| Hope and Healing Framework | The *Hope and Healing Framework for Working with Children and Young People Living in Residential Care in Queensland* is the fundamental and mandatory practice framework for all residential care workers to work to. |
| Human Rights | The civil, political, economic, social and cultural rights as contained in the Queensland *Human Rights Act 2019,* Part 2, Divisions 2 and 3 |
| Incident and episode | Within the guide,   * an incident is any unplanned or unintended event or circumstance that has occurred within a residential care setting or community which could have resulted or did result in harm to a young person, other young people, residential care workers or the community. * an episode is used to describe a young person leaving the house without permission, which could have resulted or did result in harm to a young person or the community. |
| Missing child in care | A *missing child* is any child whose location is unknown and for whom there are fears for their safety or concern for their welfare. |
| PeakCare Incorporated | PeakCare Queensland Incorporated is a state wide child protection peak body which provides support, advice and advocacy to government and service providers in order to ensure safe and well children and families in Queensland. |
| Placement Support Units (PSU)  Placement Support Services (PSS) | PSU/PSS provide the interface between Child Safety Service Centres and the non-government organisations funded to provide placement services. Child Safety Service Centres contact PSU/PSS when they have a placement need and the PSU/PSS attempts to meet this needs through communication with the placement services. |
| Positive Behaviour Support | The DCSYW *Positive Behaviour Support Policy (604-3*) is the current policy guiding how to support children and young people who demonstrate challenging or at risk behaviour. |
| Preventable police call-outs | A preventable police call-out refers to when police are called by a residential care service to respond to an incident or situation for which other, non-police responses would be more appropriate. |
| Queensland Family and Child Commission | The Queensland Family and Child Commission's role is to promote the safety, wellbeing and best interests of children and young people; promote and advocate the responsibility of families and communities to protect and care for children and young people; and improve the child protection system. |
| Queensland Police Service (QPS) | QPS provides policing services, in collaboration with communities, government and nongovernment partners. Key objectives for the QPS include to stop crime, and make the community safer. |
| Residential care | Residential care is provided to a young person in residential premises (not a carer's or young person's own home) by paid or contracted workers and/or volunteers. Children living in residential care are primarily between the age of 12 and 18, however they can be of any age up to 18 years old. |
| Residential care provider | A residential care provider is responsible for the management of one or more residential care services, including training, finance, rostering, policy and procedures. A residential care provider is licensed and funded by the DCSYW and delivered through non-government service providers consistent with requirements in the Investment Specifications for Placement Services. |
| Residential care service | Residential care services provide placements for children and young people in houses where care is provided by a team of rostered employees. Children and young people are usually referred to residential care because foster care is not appropriate or available at the time.  There are four service types that deliver residential based services:   * Residential care * Supported Independent Living * Safe Houses * Therapeutic Residential Care |
| Residential care worker | Staff working in residential care services are responsible for creating and maintaining a safe, therapeutic, homelike, and caring environment for young people in care. |
| Safety and Support Network | A Safety and Support Network is made up of a range of people, and could include family members, professionals, carers, and community members. These network members will support children and young people to develop and maintain safety through case and safety planning. |
| Trauma | The experience of an event by a child that is emotionally painful or distressing, which often results in lasting mental and physical effects. The concept of trauma includes disrupted attachment, complicated grief and loss, and other negative developmental impacts. |
| Young Person | In the *Child Protection Act 1999*, the term 'child' is used for individuals under the age of 18. Within residential care services, while not officially agreed nor consistently used, individuals aged 11 and below are referred to as children, while individuals aged 12 and above are considered young people. As the majority of children living in residential care are primarily between the age of 12 and 18, the guide refers to individuals as young people. |

# Introduction

## Objective

In August 2018, the Queensland Family and Child Commission released the *Joint Agency Protocol to Reduce Preventable Police Call-outs to Residential Care Services (Joint Agency Protocol*).

The *Joint Agency Protocol* aims to improve responses to children and young people living in residential care, referred to in the guide as young people, by:

* addressing the issues that result in unnecessary involvement of the police which contributes to a young person’s risk of exposure to the criminal justice system; and
* providing strategies to prevent police involvement where other responses are more appropriate.

All agencies, residential care providers and residential care workers involved in providing care to young people living in residential care are responsible for implementing and monitoring the *Joint Agency Protocol*.

## Aims

The *Practice Guidelines for Reducing Preventable Police Call-outs to Residential Care Services* consists of two parts:

1. Guide for residential care workers to prevent and respond to day-to-day incidents and episodes.
2. Guide for residential care providers to undertake planning and reviewing.

The Guides aims to:

* give specific meaning to the strategies contained in the *Joint Agency Protocol*
* provide young people, residential care workers and residential care providers with practice guidelines on how to reduce preventable police call-outs
* provide information about how to build effective planning and cooperation between various stakeholders to ensure Missing Child Reports are appropriate
* provide ways of dealing with incidents in-house and the community that do not lead to unnecessary involvement of the police which contributes to a young person’s risk of exposure to the criminal justice system; and
* enable a state-wide approach to working across residential care providers to develop consistency of responses.

The suite of documents that need to be read and implemented in conjunction are –

* *Joint Agency Protocol to Reduce Preventable Police Call-outs to Residential Care Services*
* *Positive Behaviour Support Policy (604-3)*
* *Queensland Government Protocol for Joint Agency Response When a Child in Care is Missing*
* *Reporting missing children: Guidelines for approved carers and care services*

This Guide and the accompanying Guide for residential care workers provides overarching principles which can guide residential care providers in systems to improve outcomes for young people and their staff in their responses to young people.

## Background

‘All children have the right to feel safe, protected and free from harm’[[1]](#footnote-2). Residential care workers also have the right to feel safe and be free from harm in their workplace.

Young people living in residential care can have complex needs often resulting from abuse or neglect, including exposure to substance abuse or domestic and family violence[[2]](#footnote-3). ‘For Aboriginal and Torres Strait Islander young people there is the added impact of discrimination, intergenerational trauma and disconnection from culture that concurrently adds to the complexity of supporting them in residential care’[[3]](#footnote-4). For many young people, the impact of these experiences may manifest in difficulties with interpersonal skills and relationships and an inability to regulate behaviours appropriately.

The inability to regulate behaviours appropriately can result in residential care workers contacting police for assistance, especially if they involve harm or high risk of harm to themselves, other young people or the community.

The involvement of police, and contact with the criminal justice system, can have a negative impact on many aspects of a young person’s life, both during childhood and into the future. Criminalisation occurs through stigmatising children, labelling their behaviours as criminal, and adopting a criminal response to actions that would not be treated as criminal in a family home[[4]](#footnote-5).

It is appropriate for residential care services to contact police and other emergency services to respond to incidents or episodes where there is an immediate safety risk or a criminal concern. The intent of the *Joint Agency Protocol* is not to restrict access to police where this is necessary, rather to reduce unnecessary police involvement.

Examples of common preventable police call-outs are:

* when a young person's behaviour appears to be escalating and residential care workers don’t feel confident or skilled in appropriate techniques to de-escalate and ensure safety
* inappropriate reporting of a young person as missing
* transferring responsibility for transporting young people from residential care workers to police.

## Shared Systems Response

The following systems will support the goal of reducing preventable police call-outs to residential care houses:

* **Active engagement** of young people in planning and decision-making for their own future, thereby ensuring that their views and opinions have been listened to, leading to plans that are more likely to be suitable for each individual. Encouragement and facilitation of young people to become actively involved in the development and review of their case plan, care plan, safety plan, individual crisis management plan and cultural plan will work toward improved outcomes.
* **Matching** of young people is essential in preventing incidents or episodes from occurring, noting it is also important young people are supported to manage and navigate interpersonal relationships with their peers, and appropriately respond to situations which may lead to conflict, as a key life skill. The matching process will be carried out by CSOs, residential care providers and other stakeholders and balanced with the need to support developmental relationships between young people. A matching assessment with the Safety and Support Network involved will lead to safer living conditions for young people together. It is important that if the residential care providers are of the opinion that the suitability of the house or placing particular young people together will pose a risk to the young people, a residential care provider can either request additional support to manage the assessed risks or review other residential care house options.
* **Careful entry processes** such as introduction to residential care workers and other young people of the proposed house that respect the views of all young people involved will assist to reduce anxiety and potential clashes.
* **Connection to culture** has been shown to enhance young peoples’ sense of well-being and safety. People identified as connections for young people should be invited to join the Safety and Support Network. Cultural support plans are essential living tools for keeping connections current and relevant.

**For Aboriginal and Torres Strait Islander young people** who are over-represented in the child protection and youth justice systems, cultural safety may lead to restoration and healing**.**

* **Purposeful programming** will assist to reduce boredom that can lead young people to engage in stimulating inappropriate or illegal activities. Making meaningful, purposeful and engaging activities available for each young person on a daily basis is essential to reducing risk of escalations and incidents.
* **Information sharing** is essential to supporting reductions in incidents and episodes. Information held by CSOs, PSUs or PSS’, Safety and Support Networks and previous residential care providers must be transferred to the new residential care service in accordance with the *Information Sharing Guidelines 2018*.
* Residential care providers have responsibility for ensuring staff are compliant with the **Minimum Qualification Standard**, consisting of minimum **Certificate IV in Children, Youth and Family Intervention – Residential** and the **Hope and Healing Framework**. By taking a trauma-informed therapeutic approach and by building and maintaining positive relationships between residential care workers and young people, the risk of incidents and episodes occurring can be reduced.
* **Accompanying Minimum Qualification Standard** is training in de-escalation techniques using a framework of the residential care providers choice. Knowledge about how to assess and respond to an incident can make residential care workers feel more confident in their crisis intervention and de-escalation skills and therefore reduce the need to contact police or other emergency services. Additional advanced techniques are required for young people who exhibit extreme behaviours.

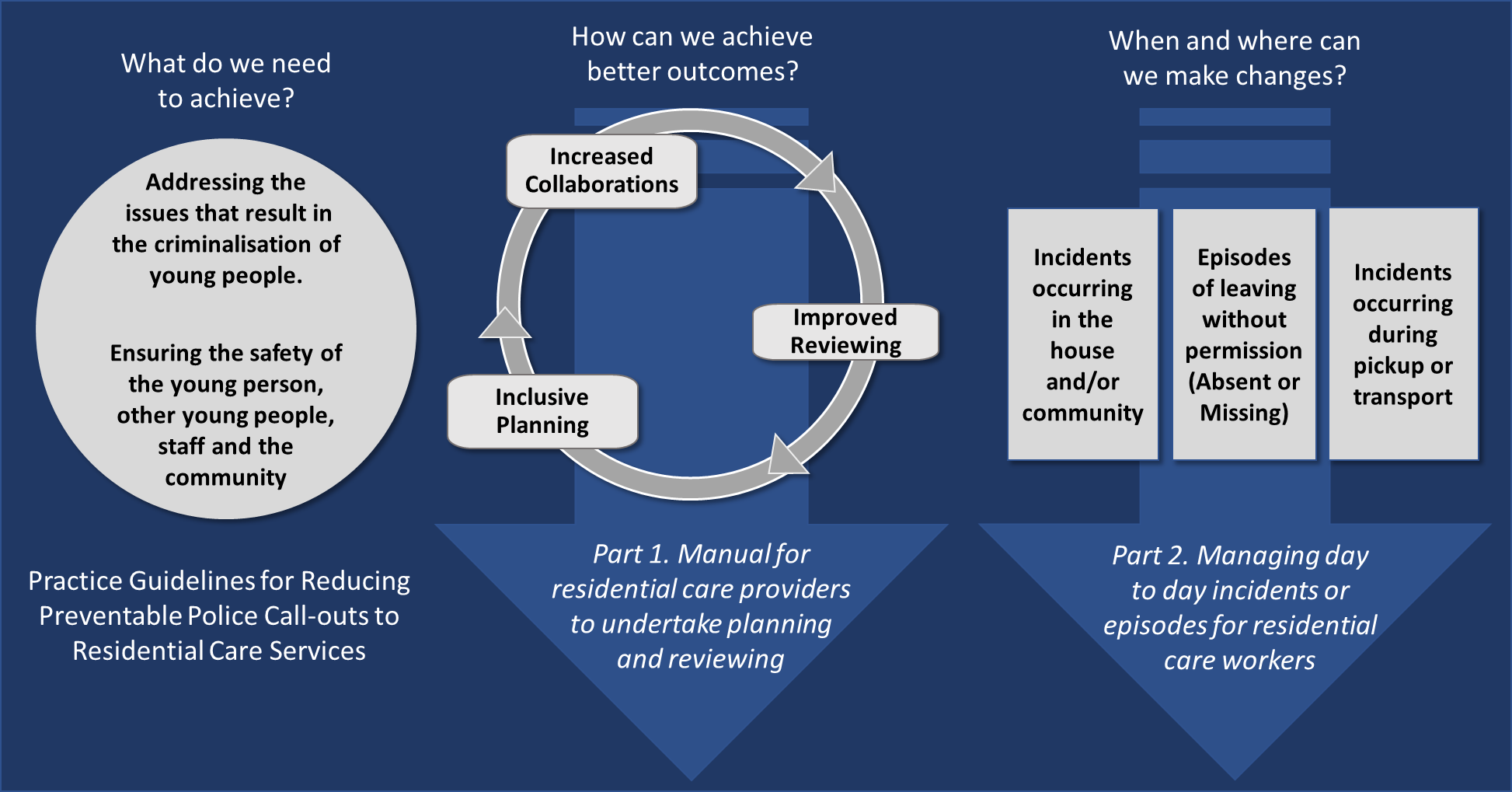
In addition, residential care providers are required to train staff in the use of **positive behaviour support techniques.** The DCSYW *Positive Behaviour Support Policy (604-3)* focusses on proactive responses which aims to prevent challenging or at risk behaviour occurring where possible and includes:

* + creating an environment that meets the young person’s needs and supporting skill development in areas such as self-regulation and coping strategies
  + a graded approach to responding to escalations that allow carers to effectively respond to behaviour and de-escalate when the behaviour is low risk.
* Residential care providers have responsibility for ensuring residential care workers are **skilled communicators** and **confident, competent and self-aware individuals**. They also need to be genuine and transparent in all interactions and relationships with young people and assessment of these traits must occur during recruitment and probation.
* **Regular supervision and performance appraisal** to develop and motivate, review practice and behaviours and focus on professional development is essential for all residential care workers engaged in working with young people.
* **Structured debriefing** and counselling that supports all people involved in an incident will result in repair of relationships and planning towards improved approaches to reduce incidents.
* **On-call systems** that gives residential care workers access to line managers and therapeutic support, 24 hours, seven days per week are essential to improving decision-making.
* **CSOs** have a requirement to regularly meet with young people in order to maintain a strong relationship that provides another support for young people as well as support for residential care workers and their managers.
* **Safety and Support Networks** are invaluable resources that comprise of a team of family, friends, community members, carers, CSOs and professionals that are willing to plan with young people and work together to keep the young person safe.
* **PSUs and PSS’** have the ability to share information (such as a list of residential care house locations and contact details of a residential care liaison staff member) with QPS, as negotiated locally, so that police responses are tailored to the needs and location.

# Guide Overview

The guide addresses three key questions:

1. What do we need to achieve?
2. How can we achieve better outcomes?
3. When and where can we make changes?



1. What do we need to achieve?

* Address the issues that result in unnecessary involvement of the police which contributes to a child’s risk of exposure to the criminal justice system[[5]](#footnote-6).
* Ensure the safety, rights and interests of a young person, other young people, residential care workers and the community.

1. How can we achieve better outcomes?

To prevent incidents or episodes, the guide also provides practice guidelines on:

* inclusive planning processes
* increasing collaborations
* improved reviewing processes.

1. When and where can we make changes?

Refer to the accompanying guide for residential care workers.

**Inclusive planning processes.** The Youth Justice Strategy 2019 – 2023 reinforces the importance of developing partnerships between businesses and organisations to support children and young people’s development to reduce offending and provide positive pathways[[6]](#footnote-7).

Linking non-government and government services will assist to provide integrated responses to children and young people with complex needs and challenging behaviours, such as DCYJMA, QPS, Queensland Health, Emergency Services Queensland, Education Queensland and other social services.

As well as minimising contact with police and the criminal justice system, ensuring the safety of the young person, other young people, residential care workers and/or the community is a responsibility for all stakeholders and requires a coordinated approach. Further to coordination, shared responsibility has been identified as the most effective way to support young people in their recovery from trauma.[[7]](#footnote-8)

**Increased collaborations.** Collaboration refers to individuals or organisations working together to address problems and deliver outcomes that are not easily or effectively achieved by working alone. Collaboration is when two or more people or groups work together through ideas sharing and thinking to accomplish a common goal.

**Improved reviewing processes.** A crucial part of a response when a critical incident does occur will be ascertaining what occurred, the causes or triggers for the occurrence and then determining what can be done in future to prevent a reoccurrence.

The following events and locations are areas where preventable police call-outs could be reduced:

* incidents occurring in the house and/or community
* episodes of leaving without permission (Absent or Missing)
* incidents occurring when a young person is picked up or transported.

The accompanying *Practice Guide for Reducing Preventable Police Call-outs to Residential Care Services – Guide for Residential Care Workers* address these areas through providing actions that can be taken by residential care workers and should be used in conjunction with this guide for service providers to teach, lead and mentor residential care workers.

# Preventing and responding to incidents occurring in the house or community

## Planning

Young people living in care have particular physical, emotional and behavioural needs related to their earlier experiences before they came into care. These earlier experiences have an influence on brain development and attachment behaviour.

In addition, all young people have strengths, desires and interests that guide and shape the ways in which adults involved in their lives can assist young people to feel safe, supported, cared for and valued.

A holistic and accurate **assessment** will lead to decision-making about the multidisciplinary supports to be provided, where and when needed. It is important that services are provided in a timely manner to prevent the escalation of challenging behaviour and reduce the risk of relationship breakdown. These should be based on a young person's needs rather than on service availability[[8]](#footnote-9).

The assessment commences before the young person transitions into a residential house. However, before an assessment can be completed, critical information needs to be collected from the various stakeholders and analysed.

## Using existing groups to plan

The stakeholder members consult, advise, and support the young person, residential care workers and other involved stakeholders to reduce incidents during transitioning in and out of a residential care house and during a young person’s time of living in a house.

The structured groups that are already in existence will be used to plan for each young person and for groups of young people to ensure that incidents are prevented and responded to appropriately. The following groups have significant roles:

**Safety and Support Networks.** A Safety and Support Network is a team of family, friends, community members, carers, CSOs, mental health professionals, youth justice officers, residential care team members and educators who are willing to meet with the young person and work together to keep the young person safe. At times these networks will include the police if there has been significant engagement.

**Suspected Child Abuse and Neglect (SCAN) Team**. The purpose of the SCAN team system is to enable a coordinated, multi-agency response to young people where statutory intervention is required to assess and meet their protection needs. Core member agencies are Child Safety Services, the QPS, Queensland Health and Education Queensland.

**Specialist Services.** DCYJMA Specialist Services aim to provide quality, evidence-based, well-coordinated support to young people in contact with the Child Safety system who have a disability, mental health needs, and/or complex and high risk behavioural, psychological, emotional needs.

## Collaborations

If a current way of approaching an issue is not increasing safety, involving a small group of people and coming up with ideas that are ‘outside the box’ can resolve an issue. Collaborations are often developed at a local level and can include people of the existing groups or people not previously involved.

There is a responsibility for residential care providers and Child Safety to lead collaborative efforts to improve outcomes for young people. Delegation of authority to speak on an organisation’s behalf will need to be taken into account and should appear in policy.

## Sharing information

No single agency, organisation or practitioner can have a full picture of a young person’s strengths, needs and circumstances. Everyone who comes into contact with a young person has a role to play in sharing information and providing appropriate supports. Sharing information between agencies is carried out in accordance with the *Information Sharing Guidelines 2018.*

Examples of information that will support improved outcomes are:

* the young person’s goals as identified by them
* the young person’s strengths and vulnerabilities
* support networks the young person engages with (e.g. family members, previous carer, therapists)
* people approved to have contact with the young person
* the interests of the young person
* places the young person likes to go to
* known triggers
* known challenging behaviours that are a response to stress
* risks to safety of the young person, other young people, residential care workers and the community
* contributing factors such as physical, developmental or intellectual disability, mental health challenges and other medical conditions, and substance use.

## Development of individual plans

Child Safety provides a Case Plan from which the residential care provider will develop a Care Plan with a young person, their safety and support network and other stakeholders. Sitting with the Case and Care Plans are the Individual Safety Plan, Cultural Safety Plan, Individual Crisis Management Plan and Positive Behaviour Support Plan. Other plans may include responses to health issues as required. All plans will be reviewed regularly with the young person to ensure they are current and everyone is aware of their content. It is the responsibility of the residential care provider to ensure residential care workers are working with young people to achieve the goals of plans daily.

Every plan is individualised, but some common elements include:

* young person’s demographic information (full name, DOB, contact information, etc)
* young person’s strengths, preferences, wishes and views
* family, friends and safety and support network members
* connections to culture
* current agencies, organisations, mental health or other professionals involved
* description of specific unsafe behaviours
* known triggers and pain-based responses
* contributing factors (i.e. current stressors)
* strategies that support
* strategies that have been demonstrated to be less effective than others
* what residential care workers, the young person, and other safety and support network members will do to lessen the likelihood of unsafe behaviour
* when to consider contacting police or other emergency services to safeguard a young person from any risk of harm.

The following section describes how to plan with young people and Queensland Police.

## Planning with police

Planning between the police and residential care houses can help with addressing preventable call-outs and reduce levels of police contact. The development of strong working relationships can lead to significant improvements across the board in reducing the number of call-outs.

There is a difficult balancing act between breaking down barriers to improve relations between the police and young people and unnecessary interaction between young people and police which might contribute to a young person’s risk of exposure to the criminal justice system.

Research has shown that police engagements, even preventative engagements, can put young people on the track towards engagement in the criminal justice system. One study found that early targeted intervention with young people perceived to be at risk of police involvement could label and stigmatise them, creating a self-fulfilling prophecy resulting in more, not less, involvement with the criminal justice system[[9]](#footnote-10). For example, a ‘friendly’ introductory meeting with a police officer in a house when a young person moves to the house can send a message that the police expect the young person to offend, as can the regular presence of a police officer in the home for catch-up meetings with the residential care workers.

Young people living in care often report that what they want more than anything is to feel ‘normal’ [[10]](#footnote-11); it is not normal for the police to visit your home – and police interaction should not be ‘normalised’ because a young person is living in a residential care house.

However, if young people have already had contact with the criminal justice system, interventions to work on building positive relationships between police and young people could be beneficial to establish a relationship that could influence future behaviour and lead to young people seeing police as allies when they are in need.

Relationships with individual houses opens opportunities for the police and houses to highlight challenging circumstances and recommend protocols and systems for police engagement. Police who take a child-focused approach are also using relationships with houses to help improve the support for young people who are at risk of exposure to the criminal justice system.

If requesting police assistance

It is recognised that to provide and maintain a safe living environment for all young people, it may be necessary in certain situations to seek assistance from the police. Senior members of staff need to satisfy themselves that residential care workers have taken all reasonable steps to divert/diffuse or reduce escalations through frameworks and response tools provided by residential care providers before engaging the police.

Where planning indicates the risk of serious harm within the house or to the community is likely in certain scenarios, residential care workers should seek prior approval from more senior staff of the residential care provider to contact the police if the scenario unfolds and cannot be de-escalated. Agreement should be sought from the CSO or Child Safety Service Centre Manager during planning and review processes.

In emergency situations where there is an imminent threat to the safety of other children and young people in the house, residential care workers or to the community, residential care workers may be required to act without seeking agreement or permission to call emergency services. Residential care workers will inform managers in their organisation, Child Safety and other stakeholders of the action taken and the rationale for it when it is safe to do so.

When police respond to an incident

If the situation permits, when police attend a residential house for an incident, a member of staff will meet police outside the house to discuss the current situation and agree on a course of action. However, it is important to note that police have their own protocols to follow when responding. These may include use of discretionary powers to take no further action or diversion where these are viable alternatives to charging.

After an incident, police and service provider representatives may exchange details to enable a review of the incident if required.

Formal complaints

Residential care providers and individuals will need to make decisions about whether to make formal complaints as a result of significant harm or damage based on the impact on the well-being, rights and best interests of all parties involved. This may be the young person who has escalated, other young people, residential care workers or other staff present and the residential care provider. A young person who is a victim will have the same opportunity and be supported by the residential care provider to make a complaint, should they choose to do so.

Unless the situation is one where there is a significant risk to the young person concerned, other young people, residential care workers, community or the damage to the property is extensive it is not necessary to request police to attend the incident at the time.

If damage to the property is significant, some organisations lodge formal complaints with police that are subsequently attached to insurance claims. It is important to note, that not all insurance agencies require the formal complaint process to have been undertaken, so it is important that you make inquires with your insurer to clarify this.

If your insurer requires a formal complaint to police to be submitted as part of the claim process, a senior member of staff is to travel to a local police station in the days following an incident to submit a written statement, pictures of the damage and estimated cost. Providing a statement to police regarding significant damage should never be done at the residential care house.

If significant damage has been caused to personal property belonging to a resident or member of staff then the decision to make a complaint to police rests with the individual concerned. In all cases both the young person who caused the damage and the individual who sustained the damage should be offered the opportunity to discuss the situation with a person from the Safety and Support Network, team leader, line manager or CSO.

Young people are also entitled to legal advice and support and it is a requirement under recent changes to the *Youth Justice Act 1992* and *Police* *Powers and Responsibilities Act 2000* that this access is facilitated. Therefore, it is the responsibility of the services and agencies to make sure this has occurred or will occur.

For incidents outside of business hours:

**Youth Legal Advice Hotline**

1800 LAQ LAQ (1800 527 527)

Monday to Thursday 8am to 9pm, Friday 8am to Sunday 5pm

**Aboriginal and Torres Strait Islander Legal Services**

1300 650 143

Responses to assault

If a residential care worker is assaulted by a young person, the staff member has the right to make a formal complaint. The residential care worker, residential care provider and Child Safety will need to consider their actions in the context of trauma-informed responses to stress and implications for ongoing relationships. The worker will need to be given an opportunity to discuss the situation with a team leader or other senior manager. The residential care provider will make available an Employee Assistance Program, and any other support mechanisms thought appropriate at the time. It must always be the case that consideration is also given to the rights and needs of the young person involved in the incident.

Where one young person harms another young person and the young person harmed expresses a desire to make a formal complaint to the police, residential care workers are required to support the young person to do so.

## Planning with young people

Inclusion of young people in the development and review of case plans, care plans, safety plans, individual crisis management plans, positive behaviour support plans and cultural plans is critical to improving outcomes. Plans need to clearly state actions to be taken in the event of behaviours that compromise safety.

Providing young people with the opportunity to express their views and interests in a setting that is safe for them is key for them to actively participate in the planning and implementation of their safety plan.

Planning and reviewing recommendations with a young person must be done in a developmentally appropriate manner and in a way that is meaningful to the individual young person. In addition to experienced trauma, hormonal swings and growth spurts, young people are coping with the tremendous developmental task of establishing an identity that is mostly based on peers and separation from adults.

## Assisting residential care workers to respond to incidents

Residential care providers have a responsibility to adequately train, resource and support residential care workers to respond to incidents.

## Reviewing Incidents

Successful reviews of incidents can be complex and demanding. Through the investigation of incidents, the residential care provider is able to analyse and learn about causes and triggers, which in turn will lead to greater capacity to prevent and respond to incidents.

The purpose of incident investigations is also to determine the ‘root cause(s)’ of an incident, so the needs of a young person can be met and the strengths of the young person can be built on to change the trajectory.

This guide does not explore the details of how to conduct a review as most residential care providers have their own review processes, involving management structures, Human Resources, policy and procedures and training systems. However, the guide will provide an overview of the processes involved in a review.

## The Review Process

The review process can contain 3 steps:

1. gather information
2. determine causes (direct and indirect)
3. corrective action(s).

The following sections briefly describe each step:

Gather Information

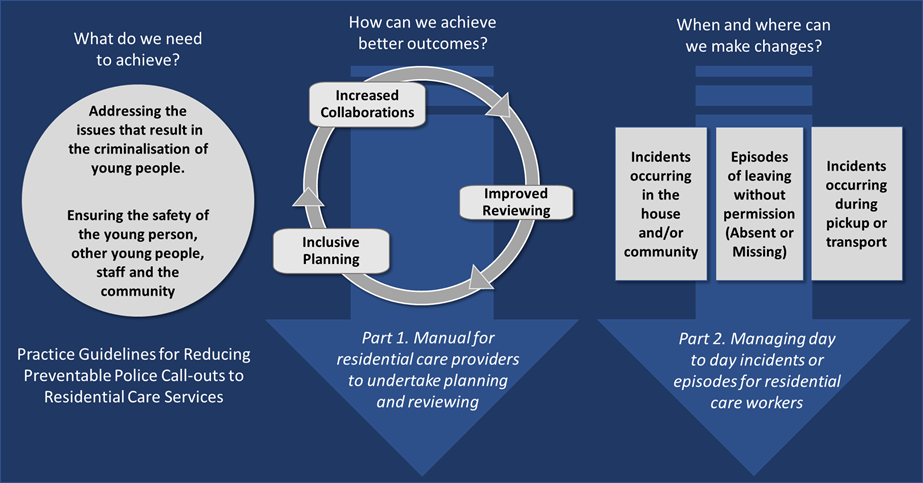
Before commencing this process, it is very important to select the correct stakeholders to conduct a review such as:

* team leader
* CSO
* therapist (e.g. ETS)
* Safety and Support Network members
* a stakeholder who has a good relationship with the young person.

As the selected stakeholders gather information, it is important to investigate the behaviours involved in an incident from both the young person(s) and residential care worker(s).

Gathering information from the residential care worker(s)

Debriefing is usually carried out within 24 to 72 hours of the critical incident when residential care workers have had enough time to take in the experience. Debriefing is not counselling. It is a structured voluntary discussion aimed at putting an event into perspective and reflect on its impact.

The debriefing process can be a helpful learning opportunity to identify what went well and what could have been done differently in order to build common understanding and reach agreements.

Although often distressing for those involved, a crisis situation can be used for a revision of policies and procedures in order to improve responses to similar situations in the future. This proactive approach will assist planning in a way that is consistent with continuous quality improvement, thus contributing to planning to prevent and reduce incidents.

Gathering information from the young person(s)

It is important to find out from other staff members or witnesses exactly what happened. It may also be a responsibility of managers/supervisors of the residential care team to speak to the young person involved – decisions about who does this are made based on:

* Strength of the relationship with a young person
* Involvement in the incident, i.e. residential care workers involved would not undertake the discussion with the young person
* Any concerns there may be about the conduct of residential care workers involved that may have led to the incident
* Experience and training in undertaking such interviews.

Determine Root- Causes (direct and indirect)

Determining root-causes is important to identify what happened, why did it happen and can it be prevented from happening again.



Root-Causes fall into two categories: direct and indirect. Direct causes are generally easily identified, and in most cases the incident investigation ends here. However, indirect causes require more effort to investigate and bring to the surface and this is usually an indication of a breakdown in communication, not following instructions, not observing signs a young person becomes agitated or a failing management system.

In a residential care setting it is useful to think about identifying direct and indirect causes in the following way:

|  |  |  |  |
| --- | --- | --- | --- |
| **Why did the incident occur? And who has expressed this view of why?** | **Could an escalation be predicted?** | **Could the incident have been prevented?** | **What can be done differently in the future?** |
| *Add as many rows as possible to identify ‘why’s ’that will be direct and indirect* |  |  |  |

Using a table of this nature will greatly assist managers to conduct a comprehensive review.

Corrective Actions

Once the investigation team completes the investigation and generates a report that identifies how the incident occurred, direct and indirect causes, the next step is to identify corrective actions that will address the incident. The residential care provider management representatives will:

* determine required corrective action (e.g. residential care worker training)
* ensure short and long-range plans are amended
* ensure the young person is involved in changes and is aware of the changes going into plans
* ensure residential care workers are aware of and working to the changed plans
* recommend changes to organisational policy, procedure and/or practice arising from the matter; and
* consider restorative practices options.

Restorative practices

Restorative practices are based on restorative justice principles, however, are implemented after an incident or episode without involving police. Restorative processes aim to explore an incident or situation, help the young person to reflect, explore responsibility, look at ways to avoid a similar situation in the future and to find a way to move on.

Restorative practices achieve this by bringing all parties together to explore what has happened, who has been affected and reach an agreement as to how the harm can be repaired and how to avoid the same situation happening again in the future.

# Episodes of leaving the house without permission

## Introduction

It is of concern that young people may be incorrectly reported as missing and in doing so, increasing their engagement with police unnecessarily. Service providers must be clear in policy and practice about the expectations of residential care workers to respond to young people who leave without permission in accordance with the *Reporting missing children: Guidelines for approved carers and care service* and *Queensland Government Protocol for Joint Agency Response When a Child in Care is Missing.*

*Reporting Missing Children* contains clear definitions of ‘absent ‘ and ‘missing’ that are provided here in order that residential care providers can ensure residential care workers are clear in their decision making about when a young person is considered either absent or missing and thus clear about the actions to be taken.

Every absence or missing episode warrants professional attention, offering a consistent and clear response that safeguards young people and the community.

An **absent** child is a child who is absent for a short period without permission, and where the child's location is known or can be quickly established.

A **missing** child is any child whose location is unknown, and there are fears for the safety or concern for the welfare of that child.

Similar to young people who run away from home, any absent or missing episode should be considered for whether it is an indicator that something is not right in the young person’s life. This may not always be the case, as young people explore their independence, however each episode should trigger a response by the residential care provider, through the actions of its residential care worker, to facilitate safe return and attention to what led to the young person leaving.

In this context, the following safeguarding principles have been adopted for this protocol:

* the safety and wellbeing of the young person is paramount
* locating and returning the young person to a safe environment is the key objective
* If you have significant concerns for the immediate safety of the young person or others (e.g. the young person is making credible threats of harm to self or others), contact emergency services.

**Each missing episode for any individual young person requires a consistently high level of response**

## Collaborating

Working collaboratively with other residential care providers and the Safety and Support Network will increase the likelihood that young people who are missing or absent will return safely. In small communities or where there is a cluster of residential care houses, providers have an opportunity to pool resources for establishing location, establishing risk and collecting young people, working jointly to bring all young people home safely where they have met up.

Collaboration is crucial during a period when a young person is either absent or missing. It is also helpful to collaborate with others who can provide information about where young people are.

## Establish a young person’s location

Residential care providers need to ensure residential care workers take immediate actions to **locate** a young person as described in the *Reporting missing children: Guidelines for approved carers and care services*. It is vital that workers respond quickly and appropriately and make all reasonable attempts to locate the young person.

This includes:

* calling and leaving messages on the young person’s phone
* searching the house and premises, including the garage, grounds and surrounding area
* checking the young person’s social media including facebook, Instagram, Whats app (time last seen)
* posting messages through social network sites used by the young person
* asking friends or neighbours if they have seen the young person
* alerting the young person’s friends and networks that you are looking for them and asking for their help to find the young person (where this is appropriate)
* contacting the young person’s school
* checking places the young person frequently attends, such as shops, the park, friends’ homes or other special places they may go
* engaging with other members of the young person’s safety and support network
* contacting the young person’s CSO. [[11]](#footnote-12)

It may also be appropriate to contact the young person’s parents or family members to ask if he or she is with them. Alternatively, it may be preferable for the CSO to talk with the young person’s family.

## Complete a risk assessment to determine the most appropriate actions

Residential care providers have a responsibility to ensure residential care workers complete a risk assessment for every young person who is absent or missing, after all reasonable attempts have been made to try to locate the young person.

The purpose of the risk assessment is to help determine the level of risk for the young person, and aid action, information sharing and recording to inform single and multi-agency agency decision-making and planning to locate an absent or missing child.

To assist with the risk assessment, it is recommended residential care workers complete the concerns/risk/vulnerability for the child section within the *Missing Child Checklist* (see appendix one *- Missing Child Checklist)* as a priority. This can be completed in conjunction with the Child Safety Officer and/or other workers who know the young person well (e.g. a support worker, school teacher).

The risk assessment should take into consideration any factors which might have a bearing on the level of risk to the young person or to others, including:

* age
* trauma history and its known impact
* behaviours known to be commonly triggered that may compromise the young person’s safety
* emotional needs e.g. whether there has been any variation in their mood or whether they have expressed any intention to harm themselves or others
* current mental state
* behaviour as influenced by peer groups or others
* whether they are perceived as running to/running from someone/something
* level of protective skills
* risk of offending; and
* risk that they are being targeted for exploitation.

# Transporting young people

Residential care providers will support their staff through clear policies regarding use of service vehicles to transport young people. Training residential care workers in the safest ways to transport, as contained in the accompanying to *Managing day to day incidents or episodes for residential care workers* will be beneficial to staff bringing young people home.

## Collaborations

Collaboration between residential care services can make it safer when picking up or transporting young people. Service providers will need to demonstrate that they support each other in ensuring the safety of all young people.

Collaboration can also include sharing resources when picking up or transporting young people. Some residential care providers may have several houses located in close proximity and can pool resources, or alternatively, if several residential care services from different residential care providers are located close together pooling resources across providers may be achieved through agreements or memoranda of understanding. Negotiation with Child Safety may be required in order to achieve flexibility of funding under Service Agreements and responsibilities under each young person’s Authority to Care.

## Transport Risk Assessment

Residential care providers will support residential care workers to make a safety assessment of transport risk. Decisions about transporting may need to be made at management level and involve Child Safety.

It is important for providers and Child Safety to work closely together to ensure there are adequate resources to enable transport. At times, the safest option will be to engage a member of the Safety and Support Network in providing transport from locations they can attend but residential care workers cannot safely do so.

Police cannot be called to provide transport – their role sits purely with safety of all members of the community. Ambulance have a role in serious injury or medical emergency and the decision to engage them is based on these concerns.

# Reviewing leaving without permission episodes

When a young person is found or returns, they must be offered a return interview. Return interviews provide an opportunity to hear from young people about any reasons for leaving and what may have occurred while they were away. Concern for safety can be reinforced and the strengths that the young person used to remain safe and be able to return can be acknowledged and built upon. The interview may also uncover other information that can help protect young people from the risk of leaving again and from risks they may have been exposed to while away[[12]](#footnote-13).

Looking at the young person as an individual, having an insight into what type of personality they are, and knowing more about them, will be crucial steps in assessing risk. This is particularly important for young people who repeatedly leave without permission, who are often seen by some as a nuisance, rather than a vulnerable young person.

The interview should be carried out within 72 hours of the young person returning to their care setting and is best carried out by a person whom the young person trusts. The person needs to be trained to carry out these interviews and able to follow-up any actions that emerge.

The interview and actions that follow from it should:

* identify and address any harm the young person has suffered
* understand and try to address the reasons why the young person left
* help the young person feel safe and understand that they have options to prevent repeat instances of them leaving
* provide them with information on how to stay safe if they choose to leave again, including helpline numbers.

The assessment of whether a young person might leave without permission again should be based on information about:

* their individual circumstances, including family circumstances
* their motivation for leaving
* their potential destinations and associates
* their recent pattern of absences
* the circumstances in which the young person was found or returned, and
* their individual vulnerabilities and resilience.

Following the return interview, residential care providers, Child Safety, police and other stakeholders, including significant others, work together:

* to build up a comprehensive picture of why the young person left
* to understand what happened while they were away
* to understand who they were with and where they were found, and
* what support they require upon returning to the house.

The residential care provider management representatives will:

* determine required corrective action (e.g. residential care workers training)
* ensure short and long range plans are amended
* ensure the young person is involved and in agreement with changes going into plans
* ensure residential care workers are aware of and working to the changed plans, and
* recommend changes to organisational policy, procedure and/or practice arising from the matter.

# Implementation

Residential care providers have a responsibility to work towards improved outcomes for young people living in residential care, including reducing their exposure to the criminal justice system. This reduced exposure will come about when residential care providers establish and maintain safe environments, build residential care workers skills in working in a trauma-informed and child-focussed way, establish and implement policies and procedures that are aligned with The Charter of Rights, *Child Protection Act 1999*, *Human Rights Act 2019* and *UN Convention on the Rights of the Child 1989* and work in effective and collaborative partnerships across the sector.

The *Joint Agency Protocol* states that ‘Government and non-government agencies have a responsibility to drive change to improve outcomes for children. Reducing the high rate of preventable police call-outs to residential care services requires all agencies and services to understand their role and take responsive action.’[[13]](#footnote-14)

This guide and *Guide 1. for Residential Care Workers* are designed to be read in conjunction by management representatives of residential care providers in order that they are able to lead and guide residential care workers to achieve the commitment of the *Joint Agency Protocol*, which is:

**All children living in residential care receive individualised and trauma-informed responses**

1. [Joint Agency Protocol to Reduce Preventable Police Call-outs to Residential Care Services, QFCC QLD 2018](https://www.qfcc.qld.gov.au/sites/default/files/Joint%20agency%20protocol%20to%20reduce%20preventable%20police%20call-outs%20to%20residential%20care%20services.pdf) [↑](#footnote-ref-2)
2. [The criminalisation of children living in out-of-home care in Queensland, QFCC QLD 2018](https://www.qfcc.qld.gov.au/sites/default/files/The%20criminalisation%20of%20children%20living%20in%20out%20of%20home%20care%20in%20Queensland.pdf) [↑](#footnote-ref-3)
3. [Framework to reduce criminalisation of young people in residential care, DHHS VIC 2020](https://providers.dhhs.vic.gov.au/program-requirements-out-home-care-services) [↑](#footnote-ref-4)
4. [The criminalisation of children living in out-of-home care in Queensland, QFCC QLD 2018](https://www.qfcc.qld.gov.au/sites/default/files/The%20criminalisation%20of%20children%20living%20in%20out%20of%20home%20care%20in%20Queensland.pdf) [↑](#footnote-ref-5)
5. [The criminalisation of children living in out-of-home care in Queensland, QFCC QLD 2018](https://www.qfcc.qld.gov.au/sites/default/files/The%20criminalisation%20of%20children%20living%20in%20out%20of%20home%20care%20in%20Queensland.pdf)  [↑](#footnote-ref-6)
6. [Youth Justice Strategy 2019–2023, DYJ QLD 2019](https://www.youthjustice.qld.gov.au/resources/youthjustice/reform/strategy.pdf) [↑](#footnote-ref-7)
7. [Joint Agency Protocol to Reduce Preventable Police Call-outs to Residential Care Services, QFCC QLD 2018](https://www.qfcc.qld.gov.au/sites/default/files/Joint%20agency%20protocol%20to%20reduce%20preventable%20police%20call-outs%20to%20residential%20care%20services.pdf) [↑](#footnote-ref-8)
8. [Looked-after children and young people, NICE UK 2009](https://www.nice.org.uk/About/NICE-Communities/Social-care/Tailored-resources/LACYP/Statement-5) [↑](#footnote-ref-9)
9. Youth crime and justice: McAra and McVie, 2010. [↑](#footnote-ref-10)
10. Children's messages on care; Morgan, 2010; [↑](#footnote-ref-11)
11. [When a child in care is missing DCSYW QLD](https://www.qld.gov.au/community/caring-child/foster-kinship-care/information-for-carers/rights-and-responsibilities/carers-responsibilities/child-in-care-is-missing) 2018 [↑](#footnote-ref-12)
12. [The value of return home interviews and follow up when young people go missing, Railway Children UK 2015](http://www.socialvalueuk.org/app/uploads/2016/03/the-value-of-return-home-interviews-full-report.pdf) [↑](#footnote-ref-13)
13. [Joint Agency Protocol to Reduce Preventable Police Call-outs to Residential Care Services, QFCC QLD 2018](https://www.qfcc.qld.gov.au/sites/default/files/Joint%20agency%20protocol%20to%20reduce%20preventable%20police%20call-outs%20to%20residential%20care%20services.pdf) [↑](#footnote-ref-14)