



# Starting out training

## Module 6 – Carer support and advocacy

# Acknowledgement of Country

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## Content disclaimer

*Please note that some content discussed during this module may be challenging.*

*We acknowledge that it may be difficult to engage with this content, and encourage you to care for your safety and well-being.*

*If the content covered today brings up any distress or discomfort for you, we encourage you to seek assistance through your foster and kinship care support worker or Child Safety.*

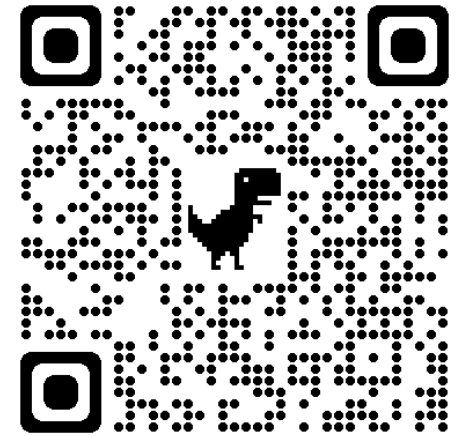


# Acknowledgement

This module has been created in partnership with Queensland Foster and Kinship Care (QFKC).

QFKC are the peak body for informing, supporting, representing and advocating for carers and the children and young people for whom they care for.

For more information on QFKC please scan the QR code or visit: <https://www.qfk.com.au>



**Queensland  
Foster and  
Kinship Care**

Represent • Advocate • Inform • Support • Excel



# Learning outcomes

- Roles, rights and responsibilities of the care team
- Your role as an advocate
- Advocacy tools available to you
- Vicarious trauma – how to manage
- Grief and loss
- How to raise your complaints
- Where to go for support





# Statement of Commitment

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# The Statement of Commitment



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- The Statement of Commitment is a formal commitment between the State and key stakeholders that includes the provision of support and resources to foster and kinship carers (carers).
  - This commitment has authority under the *Child Protection Act 1999 (7i)* and is founded on collaboration to ensure the safety, wellbeing and sense of belonging for children in care.





# The Origins of the Statement of Commitment

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- The Statement of Commitment was originally developed in 2002
- There have been 3 versions of the Statement of Commitment since this time but the most recent version signed off by Child Safety and peak bodies in 2020, represents a modern and contemporary document that can provide a platform for care team members to understand roles, rights and responsibilities for carers and key stakeholders.





# Framework

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The Statement of Commitment is underpinned by Principles that are consistent with the overall legislative framework in which Child Protection is delivered in Queensland such as:

Paramount Principle

Charter of Rights

Statement of Standards

Five elements of the Aboriginal and Torres Strait Islander Child Placement Principle (ATSCPP)

*Human Rights Act 2019*

Child and young person's participation in decisions

Kin as first option for care arrangement



# Principles

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In addition to the legislative framework, additional Principles have been included as follows:

- The Statement will be consistent with *'Our Way: a generational strategy for Aboriginal and Torres Strait Islander children and families'*.
- Carers will receive and should expect support that will help them provide a safe and caring environment in which the needs of children and young people are met.
- Carers will be respected and recognised as having significant relationships with the children and young people in their care.
- As members of a child or young person's safety and support network and care team, all participants will be treated fairly and equally with courtesy, respect and personal dignity and will be recognised for their unique knowledge and contributions to safety and case planning.





# Platform for discussion

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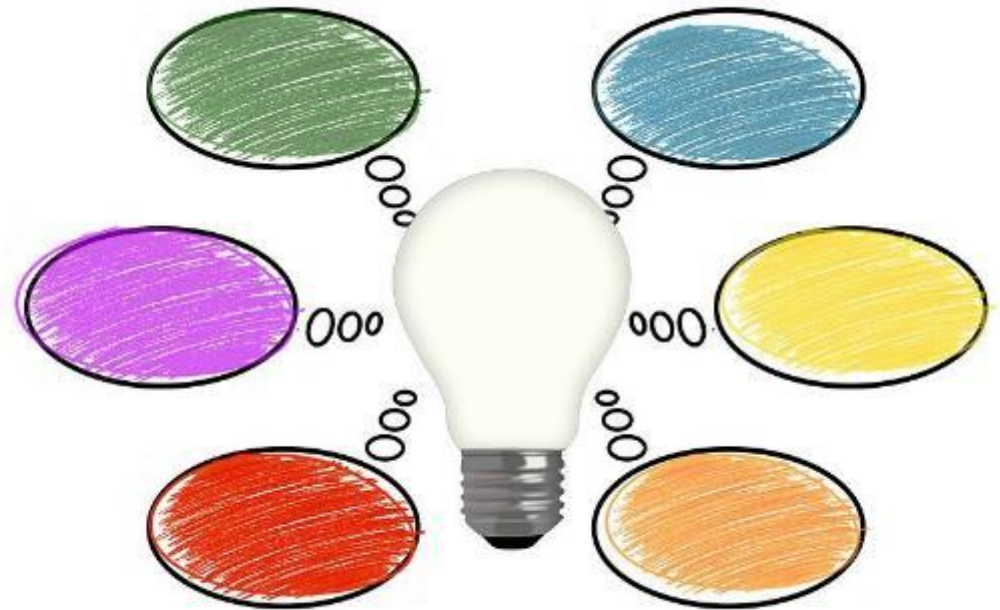
- The Statement of Commitment is a critical tool that provides shared understanding and therefore a platform for discussion around the critical roles each partner plays in the care of children and young people.
  - This document can also provide a safe space for partners to observe accountability – it provides a clear and consistent message to all key partners, regardless of the demographic in Queensland, as to how we work together to keep children and young people safe in family-based care.
  - Each component of the Statement is critical, rights are not without responsibilities and every partner should have a shared understanding of each other's roles.
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# Activity

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We will now consider some everyday carer experiences where having knowledge and understanding of the Statement of Commitment will empower you to advocate for both yourself and the children and young people you provide care to.





- What is great about the Statement of Commitment is that it is genuinely reflective of the care team approach – it recognises that everyone has a role to play in the lives of children and young people and it sets out what these roles are.
- We have explored through scenarios the role of carers within the child protection system and now it is time to explore the role of two other critical care team members:
  - Child Safety and
  - the foster and kinship care agency.





# Child Safety's role

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The overall role of Child Safety is to ensure the safety, belonging and wellbeing of children and young people. When this cannot be achieved safely with parents, Child Safety will place children and young people in a care environment that best meets their needs by:

- Ensuring care is consistent with the Statement of Standards, Charter of Rights and Aboriginal and Torres Strait Islander Principles.
- Consulting with children and young people and support them to participate in decisions affecting their lives.
- Actively supporting and facilitating participation of Aboriginal and Torres Strait Islander families and communities in processes, decisions and actions about their safety and wellbeing of their children in accordance with the five elements of the Aboriginal and Torres Strait Islander Child Placement Principles.



# Child Safety's role continued....

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- Working with parents to address concerns, so that children and young peoples permanent care is, where possible, provided by their parents.
- Ensuring that when reunification is not possible, concurrent planning allows for the child or young persons safety, belonging and wellbeing to be met through an alternative permanency option that meets the child's legal relational, physical and cultural needs.
- Working with non-government community-based foster and kinship care services to undertake the role of identifying recruitment, training and support of carers.
- Ensuring placement needs and supports for children are clearly documented, updated and understood through case plans and care agreements.





# Foster and kinship care agency role

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- Work with Child Safety to identify kinship carers, recruit foster carers and assess, train and support carers.
- Involve carers in the planning and delivery of training, ensuring it is timely, relevant and culturally appropriate.
- Advocate for carers needs and supports.
- Respond to requests for placements from Child Safety in a timely manner to meet the needs of the child or young person.
- Respond to carers requests for support in a timely manner to meet the needs of the child or young person.





# Foster and kinship care agency role continued...

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- Work with Child Safety to assist and support carers to implement and achieve the agreed goals and outcomes of the child or young persons case plan.
- Provide ongoing support for carers through a range of services and resources.
- Work with Child Safety to provide access to training, both initial and ongoing.
- Raise community awareness of the role of carers and encourage people who are interested to seek further information and make application.
- Advocate for the importance of Aboriginal and Torres Strait Islander children to be placed with kin.
- Advocate for Aboriginal and Torres Strait islander children to be connected to kin and the community.



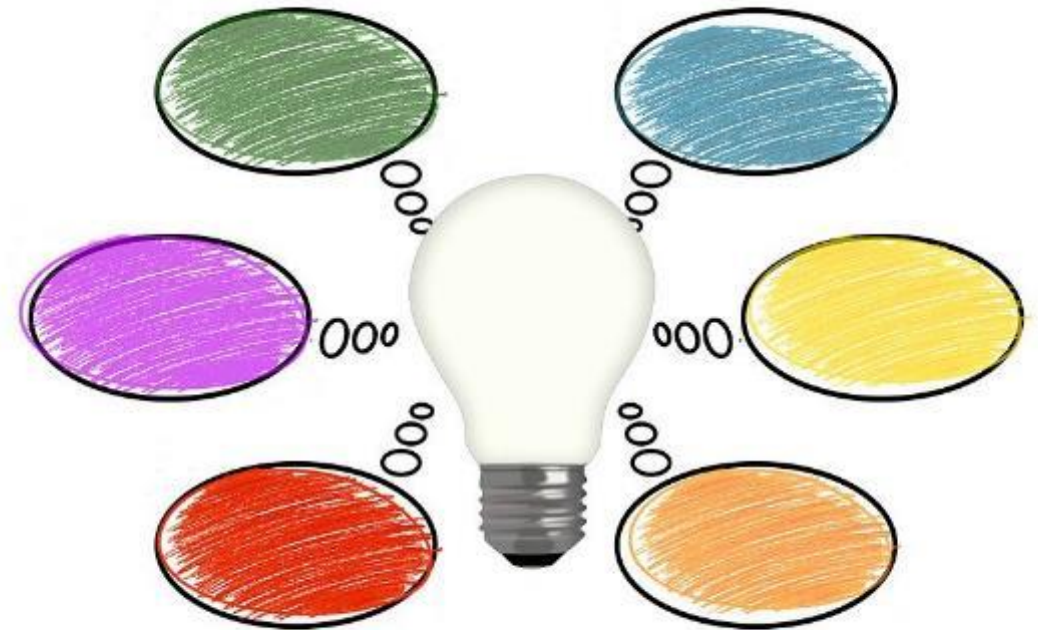


# Activity

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When considering the roles of Child Safety and the foster and kinship care services, we can now go back to the scenarios that we explored earlier and apply the roles of both Child Safety and the foster and kinship care service to these scenarios

Remember caring for children in a statutory system requires a care team approach and outlining everyone's roles clearly supports this approach.





## Statement of Commitment

To Queensland's foster and kinship carers

# Statement of Commitment Summary

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- No matter what scenario you find yourself in as a carer, the Statement of Commitment provides a platform for you to understand what your roles, rights and responsibilities are, and what the roles of key stakeholders are within the context of your situation.
- This then allows you to approach advocacy in a way that relies on factual and considered information. It helps to take the emotion out of what can often complicate situations.
- The Statement of Commitment should be placed in your toolbox as carers and relied upon to help you navigate the Child Protection system.
- Remember, not all Stakeholders will be familiar with the Statement of Commitment, so you sharing your knowledge and experience of the Statement of Commitment with your care team, will help everyone to understand their roles, and experience a shared understanding and platform for discussion.

# Human Rights Act 2019

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## Human Rights Act 2019

Current as at 25 May 2020





# *Human Rights Act 2019*

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The Queensland *Human Rights Act 2019* aims to protect and promote human rights and to help build a culture in the Queensland Public sector that respects and promotes human rights. The *Human Rights Act 2019* intends to help promote a dialogue about the nature and meaning of human rights.

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The Queensland Human Rights Commission acknowledges Aboriginal and Torres Strait Islander peoples as the First Australians and recognizes their culture, history, diversity and their deep connection to the land, waters and seas of Queensland and the Torres Strait.

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(Introduction to the Queensland *Human Rights Act 2019*, Participant workbook)



# The main objectives

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- To protect and promote human rights
- To help build a culture in the Queensland public sector that respects and promotes human rights; and
- To help promote a dialogue about the nature, meaning and scope of human rights.

The Act binds all persons and applies to:

- Public entities;
- Courts and tribunals; and
- Queensland Parliament.



Queensland  
**Human Rights  
Commission**



# What rights are protected in the Qld *Human Rights Act 2019*

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There are 23 Human Rights that are protected as per the Human Rights Act 2019 section 15 to section 37





# Public Entities – what are they?

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There are two types of public entities:

**Core public entities** are those that are considered public entities at all times, regardless of the functions they are performing i.e., a State government department, a public service employee and a Minister.

**Functional public entities** are those that are only considered entities when they are performing certain functions. The introduction of functional public entities reflects the modern operation of the government, where non-government entities, including non-government organisations, private companies and government owned corporations are engaged in various ways to deliver services to the public on behalf of the government or another public entity i.e., a private company managing a prison, a non-government organisation providing a public housing service.





# Carer responsibilities

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As functional entities, carers have a responsibility to ensure that a child or young person's human rights are being upheld.

When a carer is meeting the Statement of Standards and Charter of Rights for a child or young person in their care, they are effectively meeting their responsibilities under the *Human Rights Act 2019* to the child or young person.

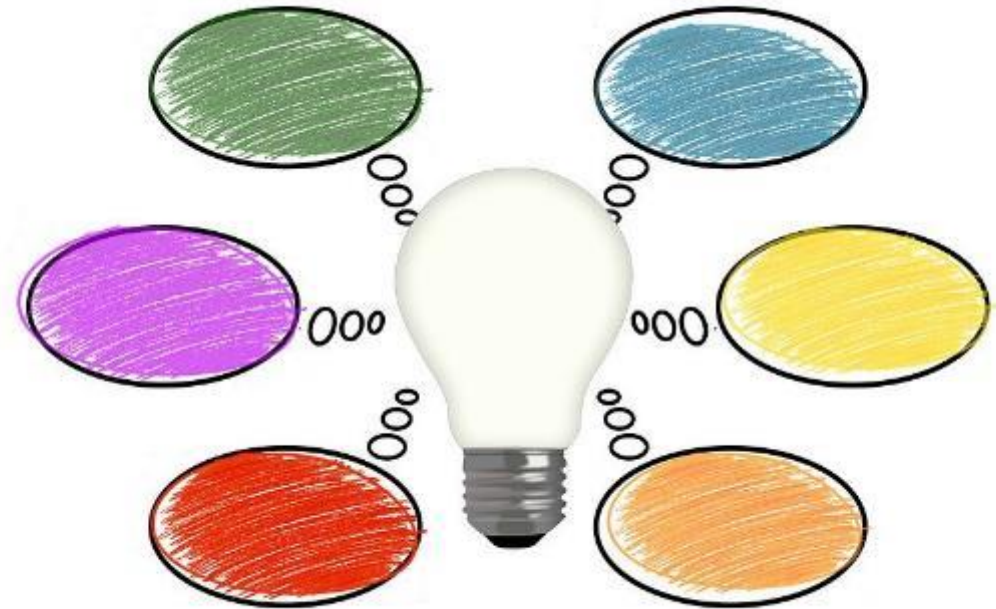
# Activity

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You will be provided with a list of the Rights as outlined in the *Human Rights Act 2019* which provide detail about what each right means.

You will also be provided with a list of the Statement of Standards and Charter of Rights.

Now let's explore some scenarios in small groups ...



# Care team approach

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- Carers cannot meet the Statement of Standards and Charter of Rights in isolation, it takes a care team approach.
- Therefore, to meet the Human Rights for children and young people, it also takes a care team approach.
- Whilst carers have responsibilities to meet a child or young person's human rights as functional public entities, Child Safety also play a role in meeting a child's human rights as core entities.



Queensland  
**Human Rights  
Commission**

# Carer rights under the *Human Rights Act 2019*

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Carers also have rights under the *Human Rights Act 2019* – for example:

- Section 20 – Freedom of thought, conscience, religion and belief
- Section 21 – Freedom of expression
- Section 25 – Privacy and reputation
- Section 26 – Protection of families and children
- Section 27 – Cultural rights –generally
- Section 28 – Cultural rights – Aboriginal peoples and Torres Strait Islander peoples

The Statement of Commitment also supports many of these rights through commitments made by Child Safety to carers



# When Human Rights are not being met

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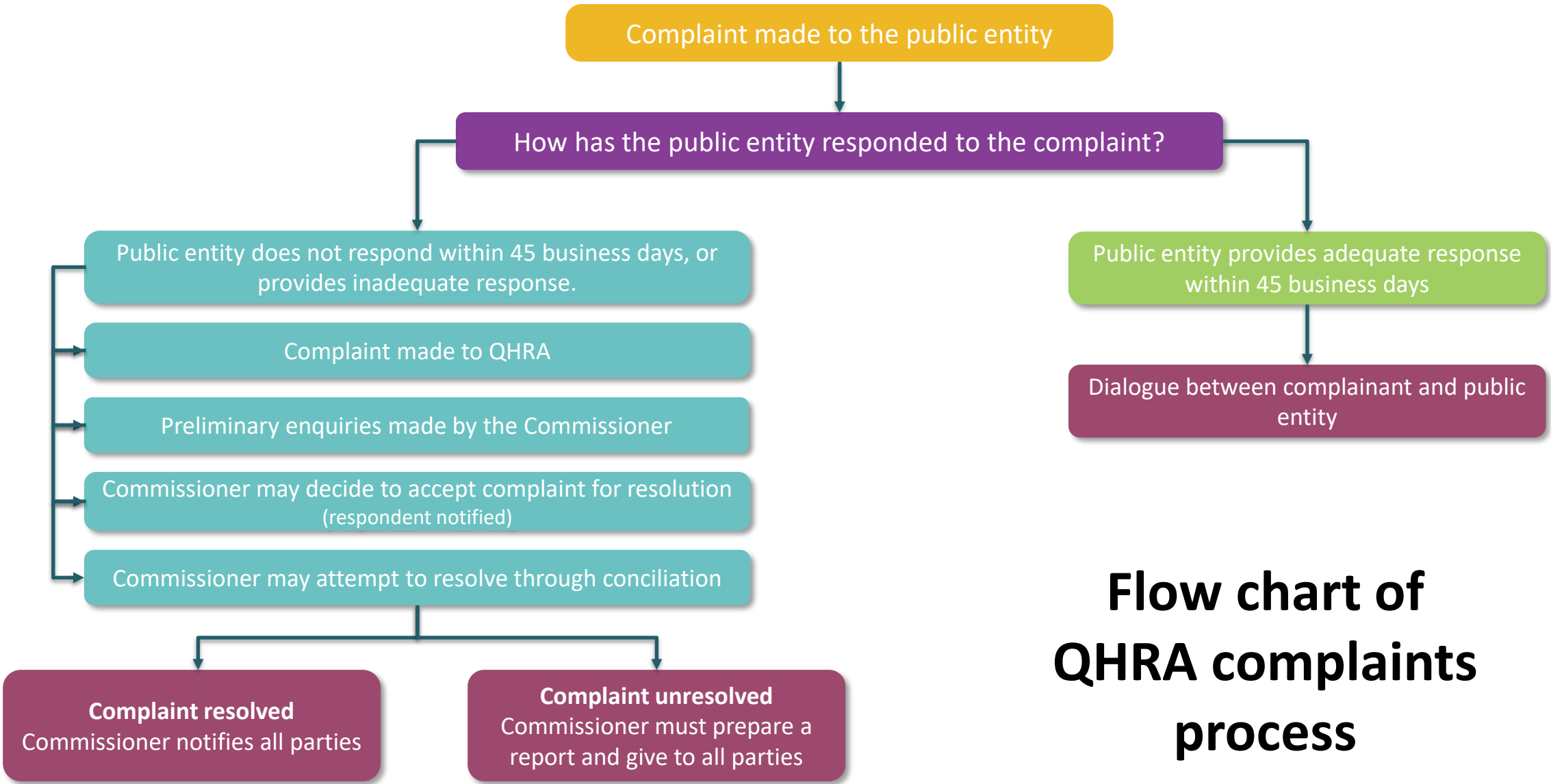
In the first instance, the complainant must attempt to resolve the complaint through the usual means available to them through the public entity – we will explore internal complaint process soon.

Only where a child or young person or carer does not believe they have been heard in their complaint would they then lodge a complaint with the Human Rights Commission.

If the complaint is accepted by the Commissioner, the process of resolution promotes a dialogue model – much like conciliation.

There is no financial compensation element to this model.





**Flow chart of QHRA complaints process**



# Public Entity reporting

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Public entities identified under the *Financial Accountability Act 2009* (this includes the Department of Children, Youth Justice and Multicultural Affairs) are required to produce an annual report and from 2020, this report will be required to include information relating to their compliance with the *Human Rights Act 2019*. This information will include:

- Details for any actions taken during the reporting period to further the objects of the legislation;
- Details of any human rights complaints received by the entity including number and outcomes; and
- Details of any review of policies, programs, procedures, practices or services undertaken in relation to their compatibility with human rights.





# Summary

## *Human Rights Act 2019*

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- Should be seen as a tool that can promote good advocacy for children and young people's needs to be met and for children and young people and carers rights to be upheld.
- The *Human Rights Act 2019* will also provide for the protection of rights relating to families and therefore birth parents.
- Important that on all occasions, all appropriate steps are taken to resolve the conflict as per the processes set out by the public entities that would already be in place i.e., complaints processes.
- Only when these attempts have not been successful, should there be access to the Human Rights Commission.





# Placement agreements

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# Placement agreements

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## Section 84 *Child Protection Act 1999*

Agreements to provide care for children:

- 1) If an approved carer agrees to care for the child, the chief executive and approved carer must enter into a written agreement for the child's care.

*Note - Provisions of the agreement may be included in the child's case plan.*

- 2) The terms prescribed under a regulation must be included in the agreement.



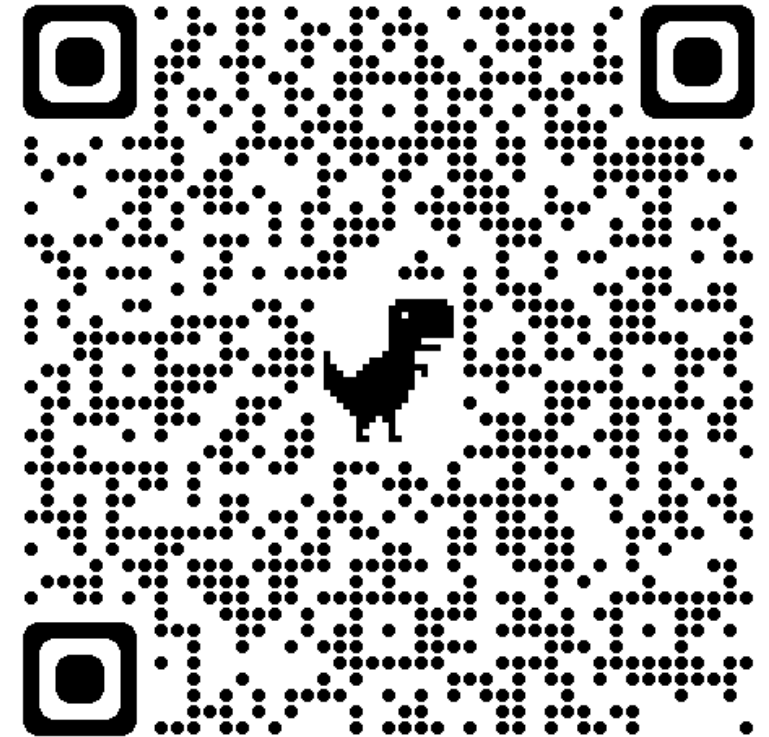
**Child Protection Act 1999**



# Purpose of Placement agreements (PA)

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- Provides those responsible for the child's daily care with the most recent information about the child's needs
- Responds to the need for additional supports to meet the child's needs or to assist those caring for the child to meet the child's needs.
- Reflects the changing family contact schedules and cultural contact arrangements.
- Shares responsibility for meeting the child's needs.
- Helps the parties to be clear about their role and responsibilities, and that of others in the child's safety and support network.
- Placement agreements should be completed at least 6 monthly.



QR code = [CSPM Support a care arrangement](#)



## If PAs are not completed...

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- Care team not understanding support needs of care arrangement i.e. respite/short break requirements, child care needs, etc.
- Increased risk of care arrangement breakdown
- No record of verbal agreements which can lead to miscommunication and ultimately care arrangement breakdown.
- Sharing of information not occurring as it should leading to potential risk to other children in care arrangement and household members.
- No clear expectations and understanding leading to increased phone traffic to CSSC.





## If PAs are not completed continued...

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- Cultural and Religious needs not being met or understood by care team.
- Health, Education and therapy needs not being met or understood by care team.
- The Care team does not have the very document that is reviewed when it is found that Standards of Care have not been met for a child in care.

Essentially a care team is not meeting their overall goal of creating safety for a child by not completing a Placement agreement.



# Support and training for approved carers

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# Chief executive's responsibility to provide support and training

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- On May 21<sup>st</sup>, 2023, section 148E of the *Child Protection Act 1999* was enacted which refers to the Chief Executive responsibility to carers to provide support and training

*What does this mean for carers?*



**Child Protection Act 1999**



# Section 148 E

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## Child Protection Act 1999

The Chief executive must provide the approved carer with or ensure the approved carer has access to the following:

- a) support to help the carer care for the child, including for example
  - i. information about financial assistance for approved carers
  - ii. Information and advice about providing care for children
  - iii. Respite care
  - iv. access to support persons



# Section 148E continued...

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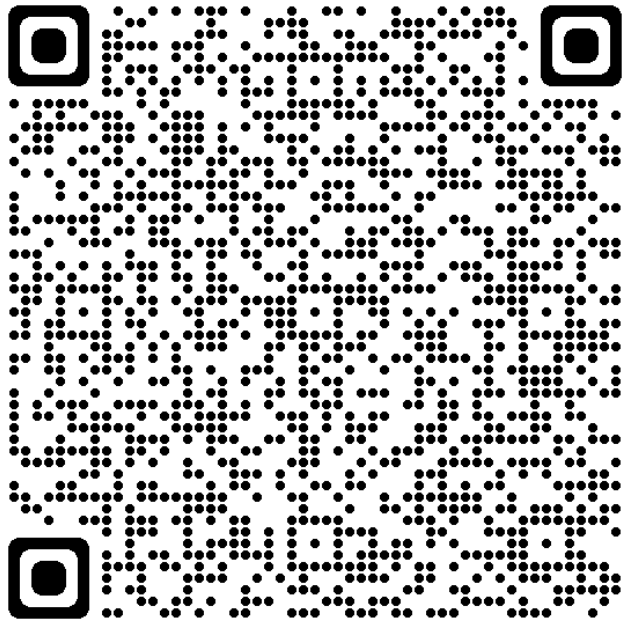
- b) Training programs that maintain or develop the carer's ability to care for the children
  
- 3) The chief executive need only comply with subsection to the extent the chief executive considers that
  - (a) It is practicable to do so and
  - (b) The support or training is appropriate in the circumstances.



**Child Protection Act 1999**

# Section 148E continued...

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QR code for more information on the changes to Queensland's child protection laws



**Child Protection Act 1999**



# Complaints Management

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# Where does the Complaints unit sit



## Child Safety Service Centres (CSSC)



## Regions

- Brisbane and Moreton Bay
- Far North Queensland
- North Queensland
- South East
- South West
- Sunshine Coast and Central



## Central Office

- **Complaints Unit**
- Information Privacy & Governance
- Professional Standards
- Information Access and Amendment
- Child Safety After Hours
- Central Screening Unit

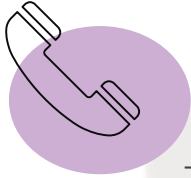


# Office of the Chief Practitioner (OCP) - Specialised Areas

- Complaints Unit
- Systems and Practice Review
- Child Safety Training
- Child Protection Practice
  - Domestic and family violence
  - Alcohol and other drugs
  - Disability
  - Mental health
  - Sexual and gender identity
  - Indigenous practice
  - Practice advice and support
  - Child Sexual abuse practice
- NDIS Interface Team
- Delegated Authority
- Child Safety Practice Manual Team



## Complaints Process | Overview



### First Attempt at Resolution

#### Local Early Resolution

The department encourages a local early resolution of your concerns. Contact your Child Safety Officer or Senior Team Leader in the first instance. If you are having trouble getting hold of them you can contact the Complaints Unit to raise a FAAR.



### Complaint

#### Formal Written Response

If you remain dissatisfied after your FAAR or the CSSC has not responded to you within the FAAR timeframe, you can contact the Complaints Unit to escalate your concerns to a complaint. Complaints Unit may devolve your complaint.



### External Review

Queensland Ombudsman  
Industrial Relations Commission  
Qld Human Rights Commission  
Information Commissioner Qld

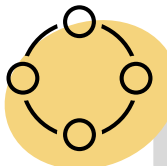
If you still remain dissatisfied you can pursue external review options.



### Internal Review

#### Merit & Process Review

If you remain dissatisfied with the findings of your complaint (merit) or how your complaint was managed (process). You can request an Internal Review through the Complaints Unit



### Foster and kinship agencies

All funded agencies are required to have their own complaint management process, if you lodge a complaint through your agency and are not satisfied with the outcome, you can then lodge a complaint through the Child Safety Complaint's unit.

# Complaints Management – key points

## Mode of complaints

Complaints can be made via phone, email or through the Complaints Unit feedback function via Child Safety website



## Complaints management policy and procedure

Driven by Policy and Procedure found on Child Safety's website and updated 1<sup>st</sup> July 2022



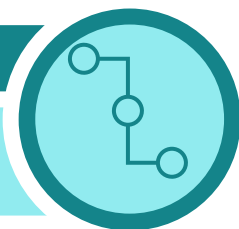
## Timeframes

Simplified complaint and Internal Review timeframes to 45 days



## Guiding Principles

Child Safety commits to guiding Principles in policy around complaints management



## Mandatory complaint training

All departmental staff are enrolled into complaints training



## Decision-maker level

Decision-maker is at the same level or higher than the decision-maker for the complaint



## Written findings letters

All complainants receive a written outcome letter which includes the findings for each allegation raised







# First Attempt at Resolution



- Prior to a complaint process
- Resolved at the point of service
- Early resolution
- Forms part of case work
- Can have flexible responses and outcomes



A guide to making a complaint  
QR code



# Complaint

- Occurs after a First Attempt at Resolution where applicable
- The concerns are investigated by an appropriate officer
- The complainant is provided a findings letter with the outcome of the investigation
- The complainant is entitled to provide feedback in relation to the findings
- The complainant is provided information on where to escalate their concerns if they remain dissatisfied



# Internal Review



## Internal Process Review

- Reviews the process of a finalised complaint e.g. you were not given the opportunity to provide feedback
- Backwards facing
- Focused on the complaint process



## Internal Review

- Investigates the original concerns raised
- Forward facing
- Solutions focused
- Collaborative
- May include a review of the previous complaint process



Complaint Management | Scenarios



Phil, Kinship Carer

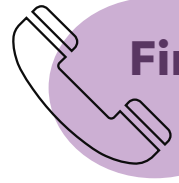


Pauline, Foster Carer



Brooke, Kinship Carer





## First Attempt at Resolution (FAAR)

Local Early Resolution



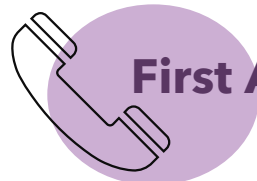
Phil, Kinship Carer

Phil is a Kinship Carer for Carl and his sister Bianca.

Phil wants to take the children on a holiday interstate next month. He emailed Carl and Bianca's CSO about the trip to seek approval. Phil emails the CSO again a few days later when he has not received a reply. Phil phones the CSO few more days later when he still has not received a reply and is advised that the CSO is currently not available and takes his message.

Almost two weeks have passed since Phil's initial email to the CSO. Phil is frustrated at the lack of response to his fast approaching holiday.





## First Attempt at Resolution (FAAR)

Local Early Resolution

### First Attempt at Resolution | Scenarios



## Where?

There are a number of ways Phil might consider raising his concerns

Phone the CSSC and ask to speak to a senior officer

Phone the Regional Office and ask to raise a complaint with the complaints Senior Advisor

Phone, email or complete the online web form for the Complaints Unit

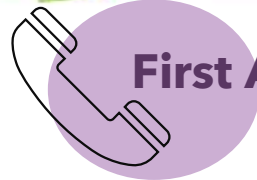
Talk to Carl and Bianca's Community Visitor

Phone or email the Ministers Office

Phone or email the Queensland Ombudsman

Queensland Civil and Administrative Tribunal (QCAT)

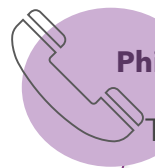
Queensland Human Rights Commission



## First Attempt at Resolution (FAAR)

Local Early Resolution

### First Attempt at Resolution | Scenarios



#### Phil phones the Queensland Ombudsman (QO)

The QO records Phil's concerns. Phil advises the QO that he has raised his concerns previously with the department.



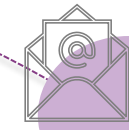
#### The QO emails the Complaints Unit (CU)

2 days later the QO emails the Complaints Unit to determine if Phil has raised his concerns with the department.



#### The CU replies to the QO

The CU checks the departments record keeping systems and 2 days later emails the QO advising Phil has not raised his concerns with the department



#### The QO Replies to the CU

2 days later, the QO emails CU to assess and progress Phil's concerns



#### The CU assess Phil's concerns

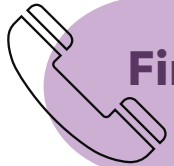
The advisor records Phil's concerns and decides to progress them as a FAAR to try and get the issue resolved as quickly as possible



#### First Attempt at Resolution Local Early Resolution

Phil's concerns are referred to the STL as a FAAR. Phil receives a call the next day from the STL who apologises for the CSO failure to respond due to unexpected leave and arranges the paperwork and approval process.

9  
working  
days to  
finalise



## First Attempt at Resolution (FAAR)

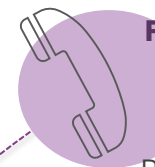
Local Early Resolution

### First Attempt at Resolution | Scenarios



#### Phil phones the Complaints Unit

The advisor records Phil's concerns and decides to progress Phil's concerns as a FAAR to try and get the issue resolved as quickly as possible

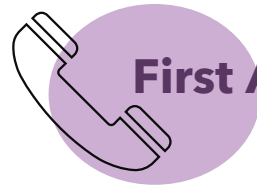


#### First Attempt at Resolution

Local Early Resolution

The next day Phil's concerns are referred to the STL as a FAAR. Phil received a call the following day from the STL who apologises for the CSO failure to respond due to unexpected leave and arranges the paperwork and approval process.

**2**  
**working**  
**days to**  
**finalise**



## First Attempt at Resolution (FAAR)

Local Early Resolution

### First Attempt at Resolution | Scenarios

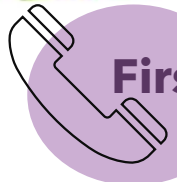


Pauline, Foster Carer

Pauline is a Foster Carer for Max.

Max recently came into Pauline's care, Max has special needs and requires additional supports. Pauline applied for Complex Support Needs Allowance (CSNA). Pauline received a letter from the CSSC Manager advising her that her application was not approved. Pauline did not agree with the Managers decision and wanted the decision reviewed.





## First Attempt at Resolution (FAAR)

Local Early Resolution

### First Attempt at Resolution | Scenarios



## Where?

There are a number of ways Pauline might consider raising her concern

Phone the CSSC and ask to speak to a senior officer

Phone the Regional Office and ask to raise a complaint with the complaints Senior Advisor

Phone, email or complete the online web form for the Complaints Unit

Talk to Max's Community Visitor

Phone or email the Ministers Office

Phone or email the Queensland Ombudsman

Queensland Civil and Administrative Tribunal (QCAT)

Queensland Human Rights Commission



## Complaint

Formal Written Response

### Complaint | Scenario



Pauline decides to phone the Complaints Unit



The advisor records Pauline's concerns and checks the departments record keeping systems. Because the concerns relate to a decision made by a Manager, the advisor decides to progress the concerns as a Complaint to be managed by the Complaints Unit.



## Complaint

Formal Written Response

Pauline's concerns are referred to a CU, Senior Advisor.

The complaint has a 45 day timeframe.



## Complaint

Formal Written Response

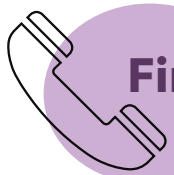
### Complaint | Scenarios



Jane, the complaint investigator contacts Pauline to discuss her concerns and confirm her allegations.

Throughout the investigation, Jane works collaboratively with the departments NDIS specialist, the CSSC Manager and Pauline. The NDIS specialists suggest a NDIS assessment and the CSSC Manager supports the CSNA.

Jane sends Pauline an outcome letter indicating that further actions are required. Pauline is happy with the outcome and does not provide any feedback. The complaint is closed.



## First Attempt at Resolution (FAAR)

Local Early Resolution

### First Attempt at Resolution | Scenarios

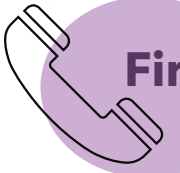


Brooke, Kinship Carer

Brooke is a kinship carer for her niece, Ruby.

Brooke takes Ruby to have contact with her father every second week. At the last two visits Ruby's Uncle has been there, Brooke noted that he had been drinking. Brooke phoned Ruby's Child Safety Officer to tell her about it. The following week Brooke takes Ruby to have contact with her father and Ruby's Uncle is there again and he has been drinking. Ruby tells Brooke she does not want to go to contact with her dad anymore if her Uncle is going to be there.





## First Attempt at Resolution (FAAR)

Local Early Resolution

### First Attempt at Resolution | Scenarios



Brooke, Kinship Carer

## Where?

There are a number of ways Brooke might consider raising her concern

Phone the CSSC and ask to speak to a senior officer

Phone the Regional Office and ask to raise a complaint with the complaints Senior Advisor

Phone, email or complete the online web form for the Complaints Unit

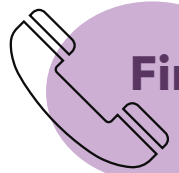
Talk to Ruby's Community Visitor

Phone or email the Ministers Office

Phone or email the Queensland Ombudsman

Queensland Civil and Administrative Tribunal (QCAT)

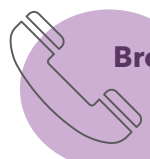
Queensland Human Rights Commission



## First Attempt at Resolution (FAAR)

Local Early Resolution

### First Attempt at Resolution | Scenarios



Brooke decides to phone the Complaints Unit

The advisor records Brooke's concerns, checks the departments record keeping systems and makes the decision to progress Brooke's concerns as a FAAR, to try and get the issue resolved as quickly as possible.



## First Attempt at Resolution

Local Early Resolution

Brooke's concerns are referred to the Senior Team Leader as a FAAR.

Brooke receives an email telling her that she can expect an response within 5 days.



## Complaint

Formal Written Response

### Complaint | Scenarios



Brooke did not hear back from the CSSC about her concerns.

Ruby has told Brooke that she doesn't want to go to her father's house if her Uncle is there. When Brooke arrives for contact her Uncle is there, Brooke returns home and decides not to take Ruby to contact.

1 month later, a CSO visits Brooke at her home and advises her that they are conducting a Standards of Care (SOC) review because she is not taking Ruby to contact with her father.

Brooke tells the CSO that she raised a complaint about the Uncle being at the house and no one got back to her. Brooke tells the CSO that Ruby does not want to go to contact while her Uncle is there. The CSO advises Brooke that she will look into it.

Brooke disagrees with the SOC and still does not want to take Ruby to contact if her Uncle is there.



## Complaint

Formal Written Response

### Complaint | Scenarios



# Where?

There are a number of ways Brooke might seek to formalise her concern

Phone the CSSC and ask to speak to a senior officer

Phone the Regional Office and ask to raise a complaint with the complaints Senior Advisor

Phone, email or complete the online web form for the Complaints Unit

Talk to Ruby's Community Visitor

Phone or email the Ministers Office

Phone or email the Queensland Ombudsman

Queensland Civil and Administrative Tribunal (QCAT)

Queensland Human Rights Commission





## Complaint

Formal Written Response

### Complaint | Scenario



Brooke decides to fill out the online complaints form



The advisor records Brooke's concerns, checks the departments record keeping systems. Records show that Brooke already raised concerns about the contact and that the CSSC did not respond. The advisor decides to raise the concerns as a complaint to be managed by the Region



## Complaint

Formal Written Response

Brooke's concerns are referred to the Complaints Senior Advisor in the Region. The complaint has a 45 day timeframe.



## Complaint

Formal Written Response

### Complaint | Scenario



Jason, the Senior Advisor at the region, emails Brooke to confirm her allegations.

Brooke raises two allegations:

1. The CSSC have failed to respond to her concerns about Ruby's Uncle being at her father's house during contact.
2. She is dissatisfied with the CSSC's decision to undertake a SOC review because she refuses to take Ruby to contact while her Uncle is there.

The allegations are sent to the CSSC Manager for Investigation. The CSSC Manager emails Brooke an outcome letter with the findings of the complaint.





## Complaint

Formal Written Response

### Complaint | Scenario



Brooke receives a findings letter via email from the CSSC Manager advising her that;

1. Her concerns about Ruby's contact were substantiated and that contact between Ruby and her father will now be supervised and at the CSSC.
2. Her concerns about the SOC review were not substantiated and the SOC review will continue.

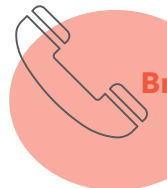
Brooke provides feedback that she is still unhappy that the SOC review is going ahead despite the Manager agreeing that the Uncle should not be at contact. Brooke is advised the outcome has not been changed and is provided with information on how to raise an Internal Review. The complaint is closed



## Internal Review

Merit & Process Review

### Internal Review | Scenario



Brooke phones the Complaints Unit to raise an Internal Review



The advisor records Brooke’s concerns, checks the departments record keeping systems. Records show that Brooke already raised a FAAR and a complaint with similar concerns and the complaint was finalised within the past 28 days. The advisor decides to raise an Internal Review



## Internal Review

Merit & Process Review

Brooke’s concerns are referred to the CU, Senior Advisor.  
The Internal Review has a 45 day timeframe





## Internal Review

Merit & Process Review

### Internal Review | Scenario



Jane, the Senior Advisor contacts Brooke to discuss her concerns and confirm the Terms of Reference (TOR) for her internal review.

Based on the TOR Jane decides to conduct an Internal (Merit) Review. Throughout the investigation, Jane works collaboratively the CSSC Manager and Brooke.

During the investigation the SOC was finalised with outcome that standards were met. In addition it was identified that Ruby may benefit from seeing a counsellor.

Brooke receives a written outcome letter advising her of the findings of the investigation and that the CSO will be in contact to arrange a time for Ruby to see a counsellor. Brooke is happy with the outcome. The Internal Review is closed.





# Agency

- Slide left blank for agencies to add in their complaints management process



# Supporting Young People to Raise Complaints

*The Complaints unit doesn't get a lot of complaints from young people*

## Things the Complaints unit have done

- Partnered with the OPG to collaborate of the management of complaints raised on behalf of young people.
- Adopted CREATE Foundation's child friendly complaint reporting form.
- Utilise child friendly complaint response templates.
- Supported CREATE Foundation consultation with 25 care experience young people to explore their encounters in making complaints.

**What could you do to support young people  
raising complaints**







# Grief and Loss

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# Grief and Loss

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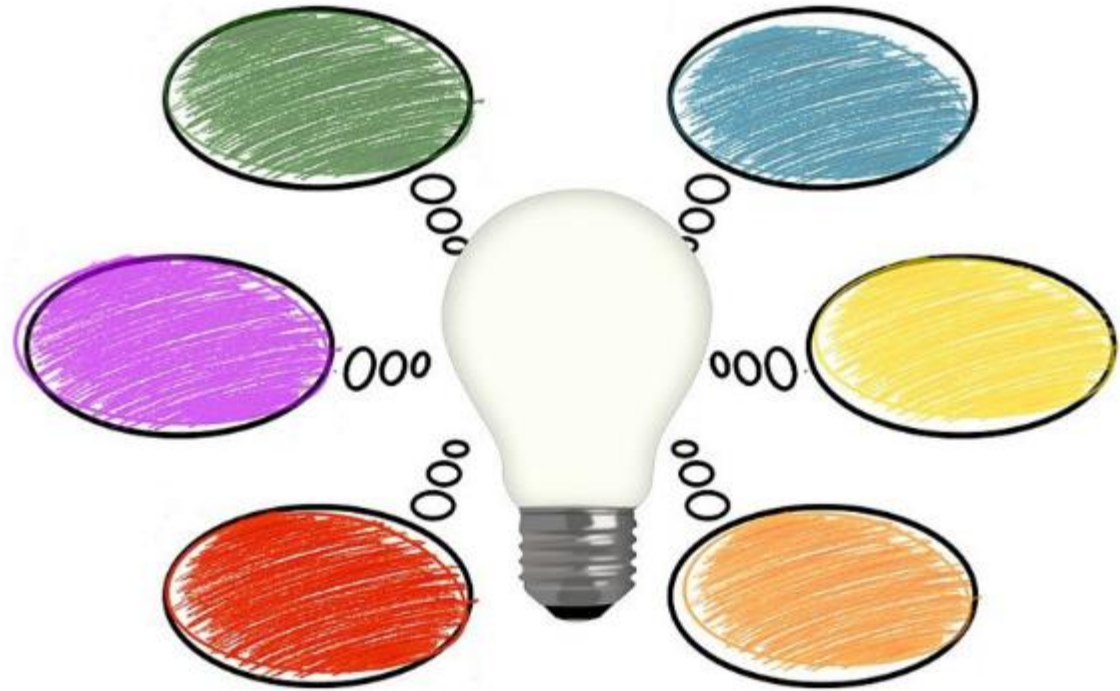
- Grief and Loss is a normal, natural and healthy experience for all carers to go through when saying goodbye to a child or young person in their care.
- There are different types of grief and loss dependent on experiences i.e., Complex, Anticipatory, disenfranchised
- Attachments would and should have been formed throughout the course of the time children have been in your home – your emotional responses to children and young people leaving is natural and expected.

# How to assist Grief and Loss

## Activity

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What are some of the things you do in your families to assist you through your grief and loss and your family's grief and loss?

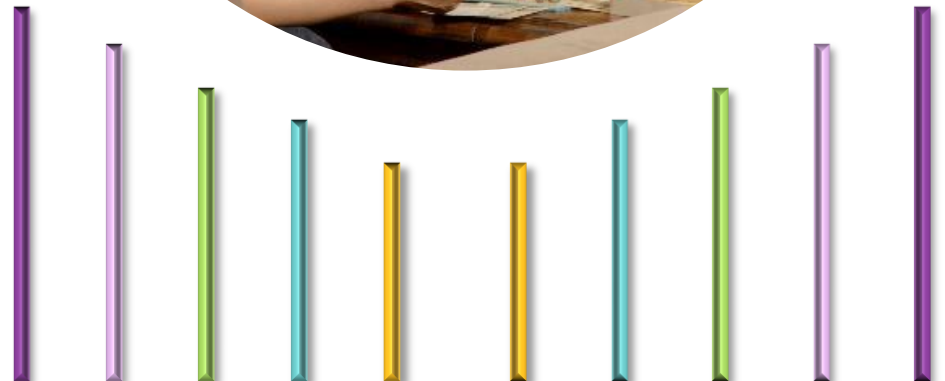


# How to assist Grief and Loss

## Ideas.....

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- Scrapbooking for your own child/ren and child/ren leaving to assist them in creating and holding onto memories.
- Special celebration dinners.
- Allow yourself and your family to cry.
- Prepare special keepsake items to go with child/ren.
- Know that you have done good and made a difference.





# How to assist Grief and Loss

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- If carers and birth parents have been encouraged to develop and maintain relationships throughout the reunification process, children that you are successfully able to reunify home are more likely to continue to be part of your life.
- The development of these relationships can be key to a successful reunification that is sustained – you may become part of that family's extended network for life. The benefits for the child in this cannot be underestimated as children are encouraged to maintain relationships of significance to them and continue to have a safety net surrounding them through the challenges life will throw at the family.





# Support for carers

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- Whilst Grief and Loss is a natural and normal experience for carers to go through, it is important that responses to grief and loss do not negatively impact on children and young people.
- Remember to reflect on services available to you if you need help to manage your grief and loss. The Statement of Commitment supports carers accessing counselling on issues relating to their caring experience.



# Vicarious Trauma

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# Vicarious trauma - what is it?

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Vicarious trauma occurs when you are exposed to the traumatic experiences of another person. It can happen either by witnessing the traumatic experience, for example seeing a child constantly hurting another child in your care or hearing about it, for example listening to a CSO tell you the harm experienced by children in your care.

*Source: Australian Childhood group foundation*

Saakvitne and Pearlman state that Vicarious trauma is not something that clients do to us, it is a consequence of knowing, caring and facing the realities of trauma.







# Signs to watch out for

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Remember everyone's signs are different, the list below is for guidance only and when experienced for pro-longed periods, Carers should be proactive in their self care and reach out for help.

Remember everyone may feel some of the below at different times in their life, but when a combination of some of these indicators becomes your default way of functioning day to day, something is not right.

*Source: Australian Childhood Trauma group*

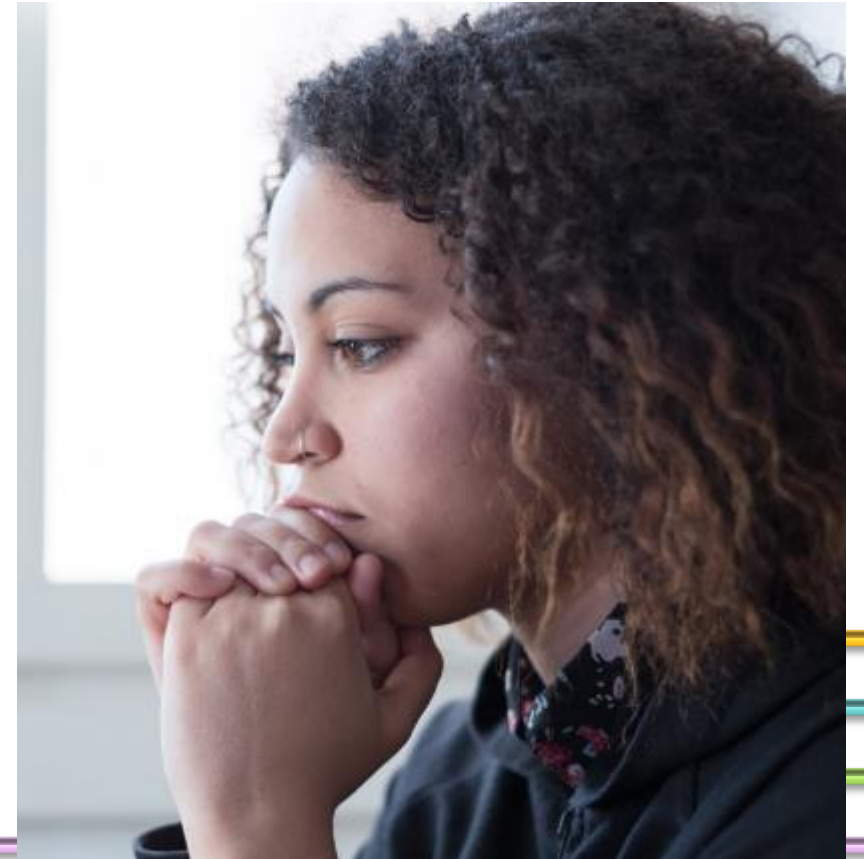




# Signs to watch out for continued...

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- Difficulty empathising with children you are caring for.
- Increased feelings of cynicism, sadness or seriousness.
- Increased irritability.
- Compassion fatigue.
- Reduced sense of personal accomplishment.
- Avoiding situations, you perceive as potentially dangerous.
- Having no time or energy for self or others.
- Procrastination.
- An increased sensitivity to violence and other forms of abuse i.e. when watching TV.





# Signs to watch out for continued...

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- Feeling overwhelmed by emotions such as anger, fear, grief, despair, shame, guilt.
  - Anxiety.
  - Depression.
  - De-personalization (feeling detached from oneself ).
  - Low self esteem.
  - Feeling profoundly distrustful of other people and the world in general.
  - Disruptions in interpersonal relationships.
  - Sleeping problems.
  - Substance abuse.
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# Strategies to manage vicarious trauma

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- Ensure that you use your monthly home visits with your agency to your advantage, debrief and let your agency know what your support needs are.
- Ensure Placement agreements and Foster Care Agreements are reflective of placement needs, learning and support needs specific to your carer household.
- Ensure that you have a strong and positive peer network surrounding you.





# Strategies to manage vicarious trauma continued...

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- Ensure you make time for yourself where self care strategies are identified and implemented – you can't look after others well, if you are unwell yourself.
- Recognise and don't feel ashamed to reach out for professional help if needed. Seeking professional help is a sign of proactive insight into your needs as a carer.
- Remember your rights under the Statement of Commitment i.e., ability to seek and accept professional support.





# Where to access support

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# Foster and Kinship Carer Support Line

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**Foster and Kinship Care Support Line Number: 1300 729 309**

The Foster and Kinship Carer Support Line (FKCSL), has been operating since 30<sup>th</sup> April 2007. It is co-located with the Child Safety After Hours Service and works in a collaborative manner to provide the best service possible for children in out of home care, after hours.

The usual hours of operation are;

- 5.00pm – 11.30pm Monday to Friday.
- 7.00am – 11.30pm Saturday and Sunday.

Specialist staff man this service during these times, however the phone line is then diverted to Child Safety Afterhours after this.

The Foster and Kinship Care Support Line provide task-focused, problem-solving support to carers who access the service after hours, including:

- information provision in relation to current departmental policies, procedures and existing resources, both financial and emotional;
- positive behavioural support for carers facing complex issues such as children and young people with special needs and/or significant behavioural issues; and
- brief counselling and support.





# How the OPG helps children and young people we visit

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- The Office of the Public Guardian plays a monitoring and oversight role and advocates for individual children and young people by:
  - developing a trusting and supportive relationship with them, so far as is possible;
  - promoting and protecting their rights and interests;
  - ensuring their voices are heard;
  - assisting them to understand care and resolve disputes;
  - ensuring they are involved in making decisions that affect their care;
  - working with service providers to promote and protect the interests of children and young people.

*The OPG does this through its:*

- Community Visitors (CVs) and
- Child Advocate Legal Officers (CALOs).

# How can a Community Visitor help children and young people?



- The functions of a Community Visitor are set out under [section 13](#) and [section 56](#) of the *Public Guardian Act 2014* (PGA).
- When visiting a visitable home, a Community Visitor may do any of the following:
  - look around the home and assess its appropriateness for the accommodation of the child under care.
  - have access to the child under care and talk with the child out of the hearing of other persons at the home.
  - require a carer staying at the home to give the visitor reasonable help to exercise the visitor's powers. A person must comply with any such requirement (e.g. a requirement to provide a space to speak with the child/young person in private).
- A child or young person living in a visitable site can communicate with a CV—by phone, SMS message or email and they [can also request the CV to visit the site](#), in addition to the CVs regular visits, if they want.

- [Community Visitor Factsheet](#)





# How can a Child Advocate help children and young people?

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- A Child Advocate will provide individual legal advocacy for a child/young person. The functions of a Child Advocate are set out under [section 13](#) of the *Public Guardian Act 2014* (PGA).
- Child Advocates are different from CVs. The main difference is all Child Advocates are lawyers who help young people with legal issues.
- A Child Advocate can only provide advocacy to children and young people who fit the definition of '[relevant child](#)' under section 52 of the PGA – in summary this means the child/young person and their family must have some involvement from Child Safety (e.g., Care Agreement, interim court orders).
- Priority legal areas: child protection proceedings, education advocacy, youth justice advocacy and QCAT matters.
- [Child Advocate Referral Form](#) - Anyone can make a referral for a Child Advocate including foster or kinship carers of a child in care.

- [Child Advocate Factsheet](#)





**QFKC**



