FOSTER & KINSHIP CARERS SURVEY 2018 REPORT

Moreton Region



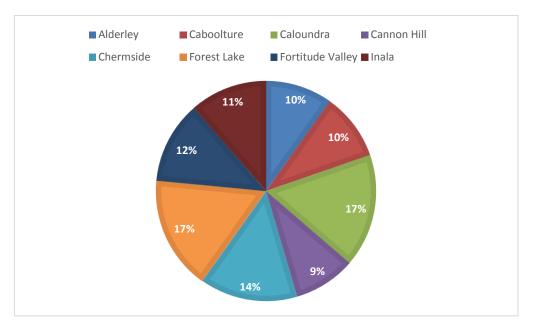
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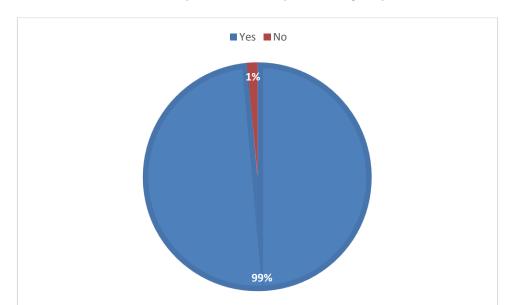
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About the Carer

In Moreton Region 228 Foster and Kinship Carers completed the carer survey and were represented in the following Child Safety Service Centres, noting every CSSC was represented in the survey.

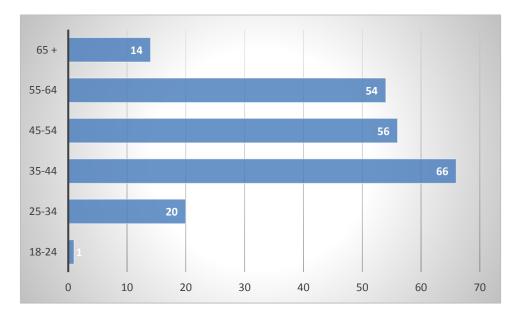


Of those who responded in Moreton Region, 163 identified as Foster Carers (77%), 51 identified as Kinship carers (24%) and 2 identified as provisionally approved carers (1%).



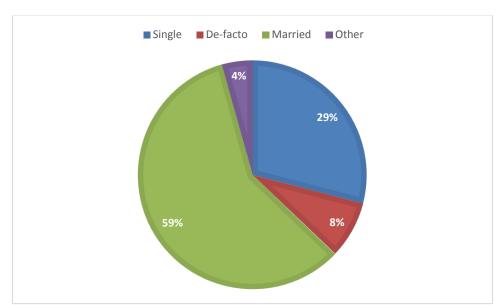
Carers were asked if they were supported by a fostering and kinship carer agency with the vast majority of carers in Moreton who completed the survey confirming they were.

Carers were asked to identify the age group they fitted into.

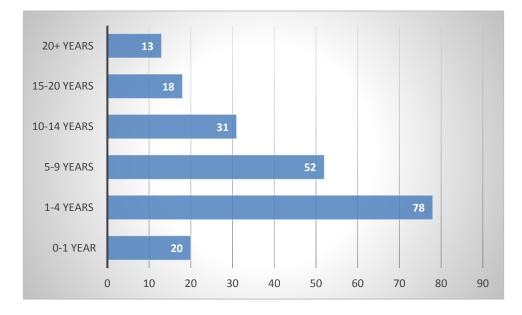


Aboriginal and Torres Strait Islander

Sixteen carers in Moreton who completed the survey identified as Aboriginal. No carers identified as Torres Strait Islander and no carers identified as Aboriginal and Torres Strait Islander.

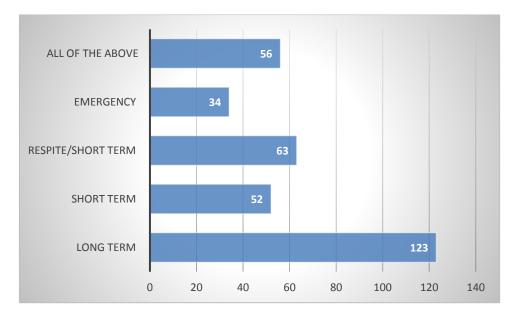


Relationship Status



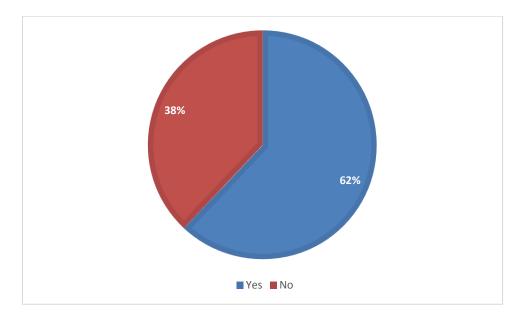
Carers were asked how many years they had been providing care for.

Carers were asked which type of care they provide, please note that carers were able to tick more than one type of care.



Cultural Diversity

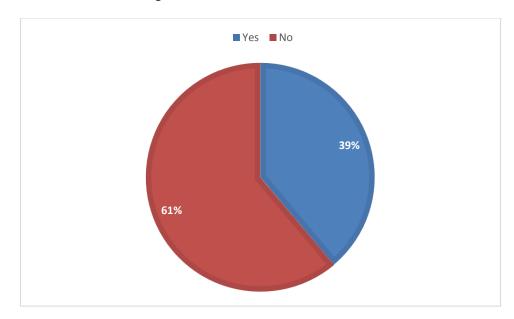
Carers were asked a range of questions relating to care of Aboriginal and Torres Strait Islander children as follows:



Are you caring or have you ever provided care for an Aboriginal and/or Torres Strait Islander child?

Given that only 16 carers identified as Aboriginal in this survey, the majority of those carers who have responded yes to this question would not identify as Aboriginal or Torres Strait Islander.

Carers were then asked if they had answered yes to the above question, whether they had a Cultural Support Plan in place. Only 37% answered yes to this question, leaving 63% of children placed in care where they identified as Aboriginal or Torres Strait Islander either without a Cultural Support Plan or where the carer had no knowledge of its existence.

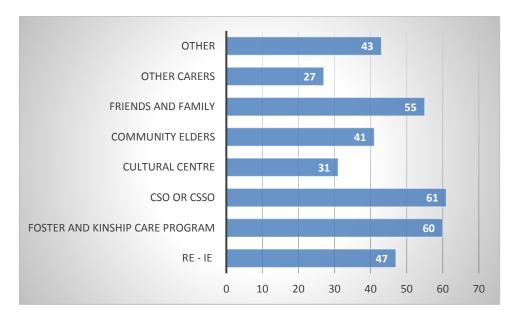


Carers were then asked if they were provided with cultural awareness training to assist them to care for a child who identified as Aboriginal and/or Torres Strait Islander.

As evidenced above, more than half of the carers who responded identified they did not receive any training to assist them in building their cultural knowledge in their care of Aboriginal and Torres Strait Islander children.

Carers were asked whether they understood the Aboriginal and Torres Strait Islander principle. This principle is explored with Foster Carers in the Pre-Service Quality Training, however it must be noted that carers are inundated with information during this training and if this is not followed up with further education and information, it is likely it won't be retained by carers. The majority of carers reported understanding the Aboriginal and Torres Strait Islander principle with 75% confirming understanding and 25% identifying not understanding the principle.

Carers were then asked where they accessed their cultural information from. Please note that carers were able to tick multiple boxes as sources of information for this section.

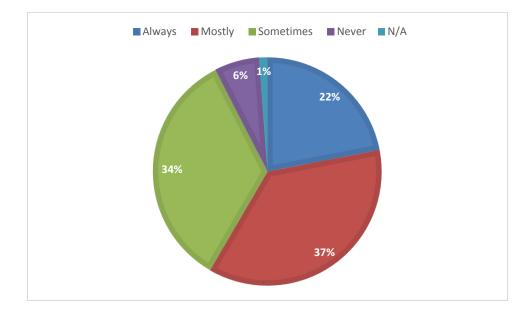


CALD Community

This is the second survey FCQ has sought to gather information from our carer community regarding the CALD community, specifically how many of our carers identify as being from a CALD community and whether carers have provided care for children and young people from a CALD community.

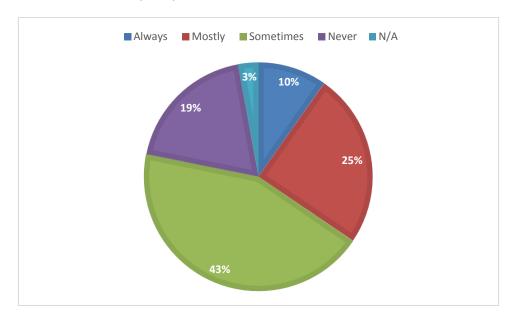
Just 5% (8) of carers who completed the survey in the Moreton Region identified from a CALD community and 10% of carers in Moreton who completed the survey reported they either were or had provided care to children who were from the CALD community. Carers who had provided care to children from a CALD community were asked whether they were provided with appropriate training to assist them to provide culturally appropriate care. Unfortunately only 17% advised that they had been provided with training.

How satisfied are you with Relationships with Staff at Child Safety Services



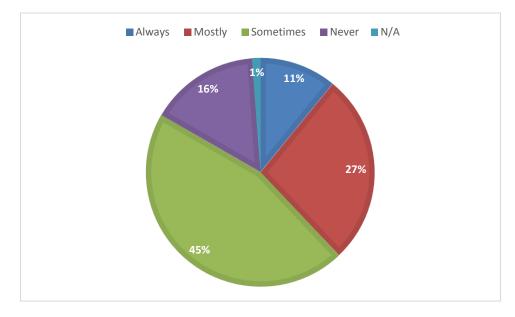
Carers were asked whether they felt respected by their CSSC.

A total of 59% of carers reported feeling respected either always or mostly which is positive; that does leave 40% of carers however who reported only feeling respected sometimes or never (1% reported this as being N/A).



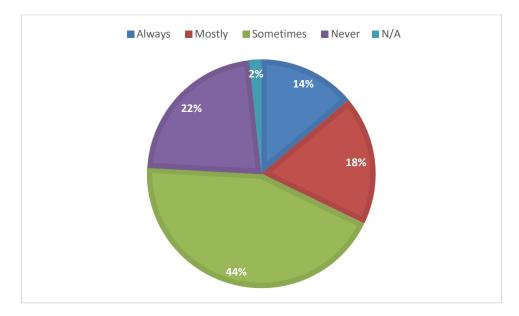
Carers were asked whether they felt part of a team.

62% of carers reported feeling like part of the team only sometimes or never, with 35% of carers feeling like they were either always or mostly treated as part of the team. (3% reported this as being N/A)



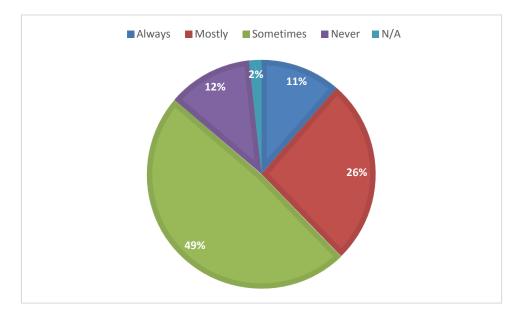
Carers were asked whether they feel as though their views are heard.

Only 38% of carers reported feeling that they feel their views are either always or mostly considered. This leaves the majority of carers who were surveyed in Moreton stating that they feel that their views are only heard sometimes or never.



Carers were asked whether they feel as though there is consideration given to their whole foster or kinship family.

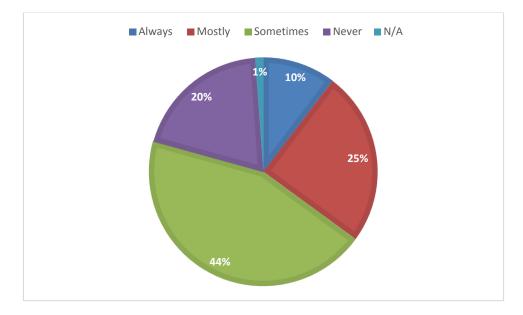
22% of carers reported that they felt as though there is never any consideration given to the whole of family with 44% stating that they feel as though consideration for the whole of family is only provided sometimes. Having a total of 66% of carers with a view that their family is never or only sometimes considered is concerning. Families are more likely to leave the fostering system when they see their whole of family being effected negatively and given little consideration.



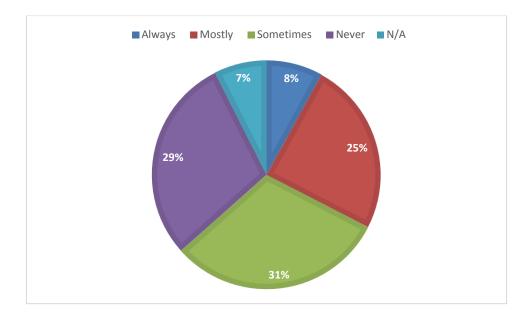
Carers were asked whether Child Safety is responsive to calls and emails.

37% of carers reported that their CSSC was responsive to emails and phone calls, 61% reported only sometimes or never and 2% marked N/A.

Carers were asked if the CSSC creates a supportive environment.

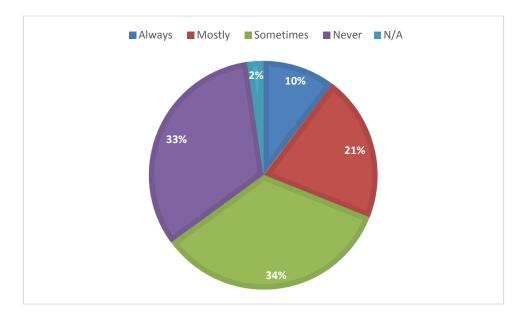


Carers were asked if they are assisted in completing applications for reimbursements/claims in a timely manner.

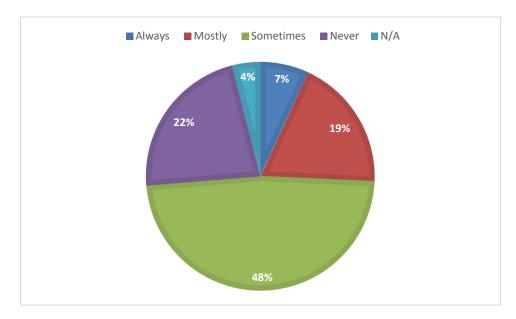


60% of carers reported that they feel that the CSSC only sometimes or never assists in this area. As stated in 2016 Carer Survey, financial stress can very much impact on placement stability and is often overlooked as a stress factor in foster and kinship families despite financial stress being one of the most recognised sources of stress in normal everyday families.

Carers were asked whether their CSOs let them know when they are going on leave or are going to be unavailable.



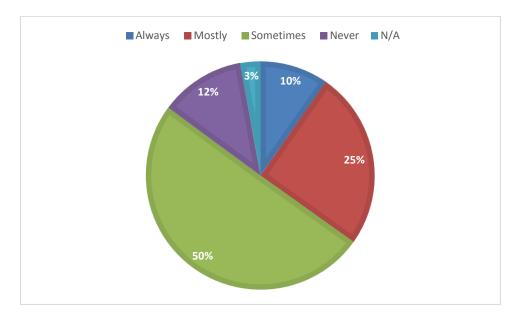
Advising the care team when planned leave or unavailability is occurring is a basic communication requirement in order to build a respectful and supportive care team. Carers are expected to let the care team know when they are going away or are going to be unavailable, therefore it would be an expectation that this same courtesy is provided to carers, however only 31% of carers reported that they are either always told or mostly told when this occurs leaving a large proportion of carers in the dark during these times.



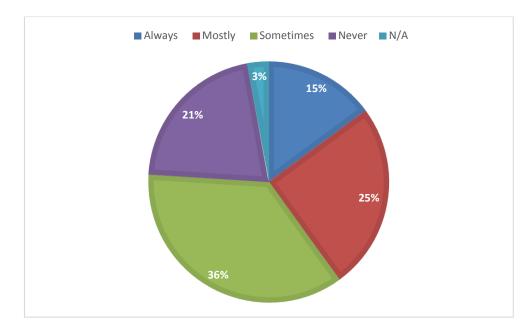
Carers were asked whether they are given ongoing information about the child in their care.

70% of carers reported that they only sometimes or never get updated information about children in their care. This percentage is extremely high given the legislative requirements of the Child Protection Act 1999 that require carers to be provided with information that allows them to provide safe and appropriate care to the child and other children in their care.

Carers were asked whether support and assistance were provided to them by CSSC for the children in their care.



Unfortunately, nearly one third of carers (62%) who responded felt that support and assistance for children in their care was only provided sometimes or never.

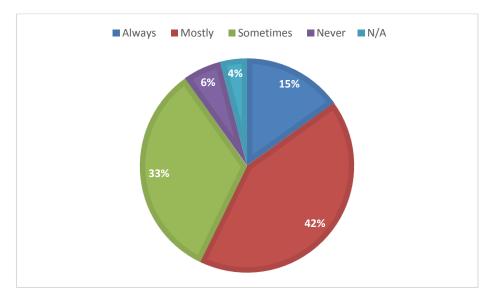


Carers were asked whether they were respected to advocate on behalf of the children in their care for resources, goods and services.

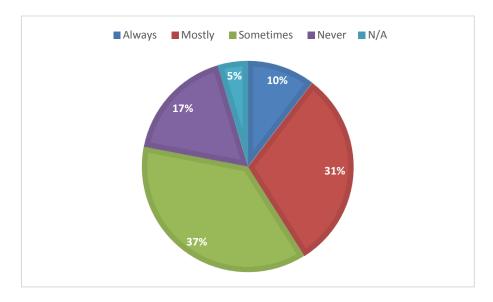
57% of carers reported that they sometimes or never feel that they are respected to advocate on behalf of children in their care. Carers are assessed against their ability to be considered a suitable person to provide care through many criteria, one of these being their ability to appropriately advocate on behalf of children. Stakeholders can hold different views; however it is important that all members of a child's safety and support network feel empowered to advocate on behalf of a child. This leads to accountability, transparency and best practice overall.

Child Safety Processes

Carers were asked whether they were satisfied with the approval and reapproval processes as carers.

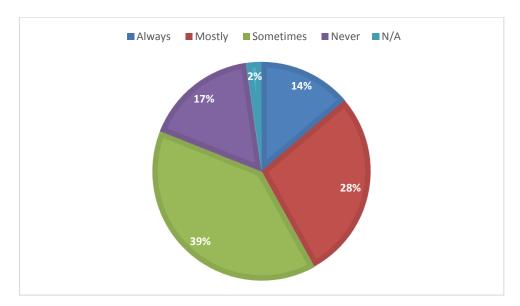


It is positive to see that more than half of carers (57%) reported feeling either always or mostly satisfied and that overall only 6% of carers reported never feeling satisfied in this area.



Carers were asked if they were satisfied with the completion of Placement Agreements.

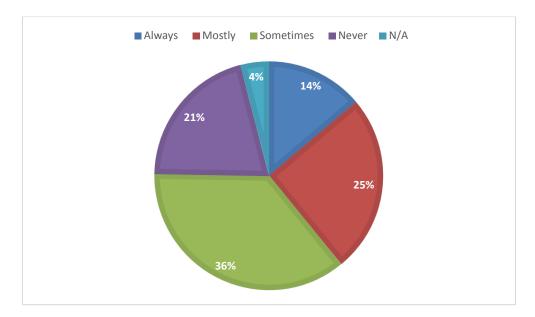
This area is explored in more detail further into this report. It is concerning however that given Placement Agreements are a legislative requirement that 64% surveyed reported only feeling satisfied sometimes or never in relation to the completion of Placement Agreements.



Carers were asked if they were satisfied with home visits being completed by Child Safety.

56% of carers reported feeling sometimes or never satisfied in relation to home visits being completed. It is acknowledged this question would need to be more detailed to examine whether the answer to these is based on frequency or quality of visit and this will be noted for the 2020 survey.

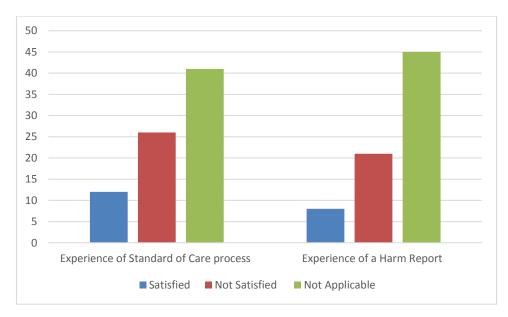
Carers were asked if they feel satisfied with their ability to engage in Case Plan meetings for children in their care.



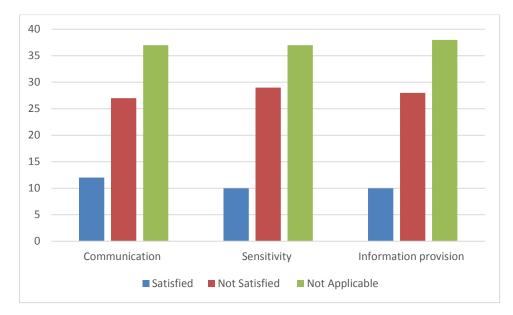
57% of carers report feeling satisfied only sometimes or never. Given statements within the Statement of Commitment that recognise a critical role in participating in decisions effecting children in their care, these figures should reflect a much higher percentage.

Standard of Care/Harm Processes

Carers were asked whether they were satisfied in respect to Standard of Care and Harm processes they had been through.



Carers were asked a range of questions around the process relating to the quality of communication, sensitivity and information provision.

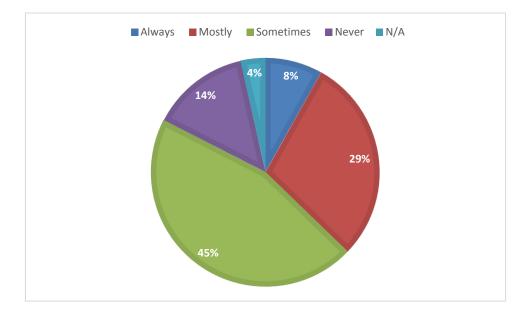


Carers were then asked if they were satisfied with the timeliness of the outcomes 42% reported feeling unsatisfied with the timeliness of the process and 11% reported feeling satisfied with the remaining percentage stating it was not applicable.

Carers were then asked if they were satisfied with the review process that took place if they were not happy with the outcome of the Standard of Care and/or Harm Report, of those who thought this question was applicable to them (30 carers) 70% reported not feeling satisfied with the review process.

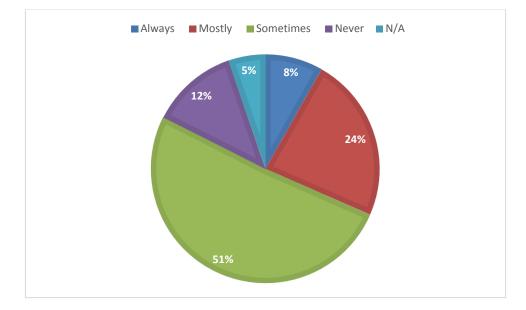
Confidentiality

Carers were asked if they were satisfied with information provision provided to them about the children in their care.

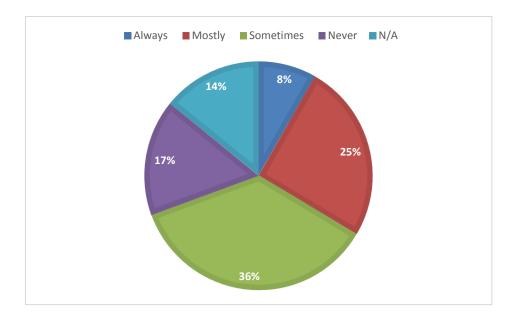


59% of carers reported they are only satisfied sometimes or never.

Carers were then asked if they were satisfied that information was provided to them about the child as it became available to Child Safety.

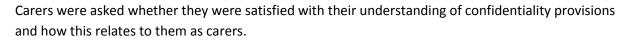


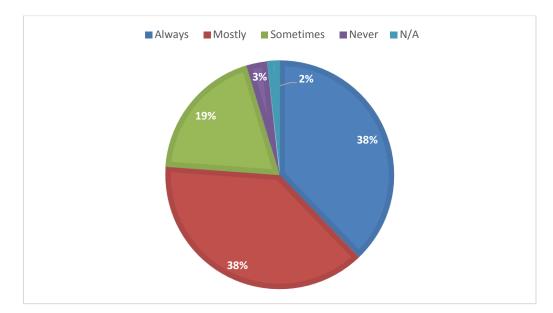
Whilst it is recognised Child Safety very rarely have all the information at time of placement, over time Child Safety gathers information which is vital to pass on to carers as this allows the carers to understand a child's trauma better and provide care in accordance with this. Unfortunately 63% of carers reported that they feel ongoing information about a child is only shared with them sometimes or never.



Carers were asked whether they were satisfied with the information provided to them in respect to the safety checks being completed prior to identifying information being given out.

53% of carers surveyed reported only feeling satisfied sometimes or never regarding communication in this area. 33% felt satisfied always or mostly in this area with 14% advising the question was not applicable (likely to be kinship families).



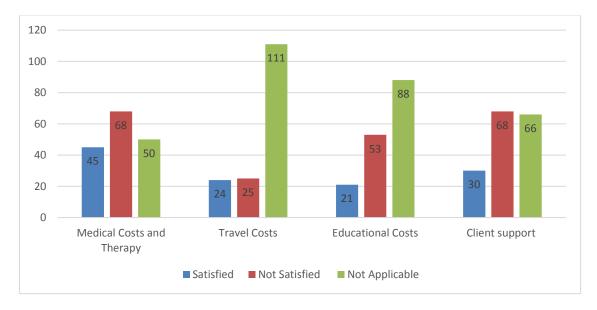


76% of carers reported a good understanding of confidentiality provisions.

Financial

This is an area where typically Child Safety have had high rates of satisfaction. This was observed to have decreased in the 2016 survey reporting only a 65% State wide average satisfaction rate with the amount of which the fortnightly fostering allowance is paid at (down from around 80%). In 2018 this figure has gone down even further at a State average. In Moreton Region 56% of carers reported feeling satisfied with the amount at which the fostering allowance is paid at and 40% reporting not being satisfied (4% ticked not applicable).

Of those carers who felt that the question relating to requests for HSNA and CSNA was applicable, 30% (49 carers in total) reported not feeling satisfied with their requests being met in this area.



Carers were asked about a number of Child Related Costs that sit outside of the fostering allowance and whether they felt satisfied in relation to the payment of them.

Carers highlighted a high rate of dissatisfaction in all four identified areas of Child Related Costs.

On 2nd July 2018, children in care across Australia became eligible for the Australian Child Care Subsidy at Risk through the Department of Education and Training. This was a significant accomplishment for Child Protection systems right across Australia. In order to access, carers must be informed and have access to the appropriate documentation through Child Safety. FCQ asked carers in the survey whether they were satisfied with their provision of required documents to access the free child care through the Australian Child Care Subsidy for children in care. 164 carers answered this question, and of those who answered 37% reported feeling not satisfied, 26% reported feeling satisfied and 37% felt the question was not relevant to them. This is an area that requires a lot of education through the sector to help not only carers understand the changes, but also Department staff and Fostering and Kinship Care staff.

Carers were asked about their knowledge to apply for ex-gratia (special payments) and whether they were encouraged to apply for these when applicable. Only 9% of carers reported having knowledge and being encouraged to apply for special payments. 61% reported not feeling satisfied in this area with the remaining feeling the question was not applicable to them.

Carers were asked about their satisfaction in respect to the provision of Dual Respite – 90 carers felt this question was relevant to them and of these carers, 37 (41%) reported not feeling satisfied in this area. The area of Dual Respite is one that FCQ is constantly receiving calls about – there appears to be a lot of inconsistency across the State in respect to application of Dual Respite and for this reason, FCQ continues to advocate for policy and procedure that reflects clear guidelines for Managers in respect to the approval of Dual Respite.

Finally carers were asked if they were satisfied about overall information provision relating to Child Related Costs - 60% of carers reported feeling dissatisfied in this area.

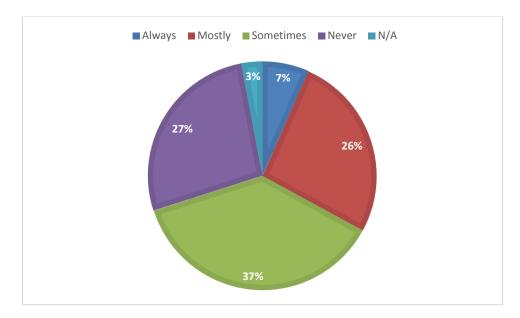
How satisfied are you with local practices of CSSC

Always Mostly Sometimes Never N/A

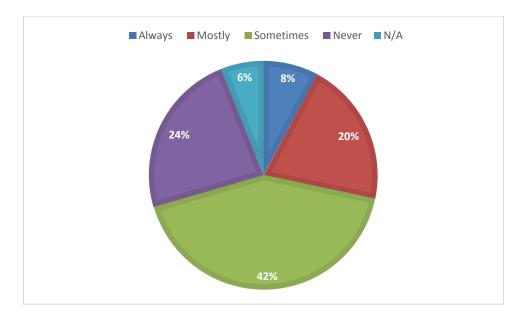
Carers were asked how satisfied they were regarding information in relation to changeover of CSO.

63% of carers reported feeling either sometimes or never satisfied regarding information relating to CSO hand over.

Carers were asked whether they were satisfied with the knowledge of the history regarding the child/ren in their care.

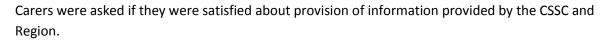


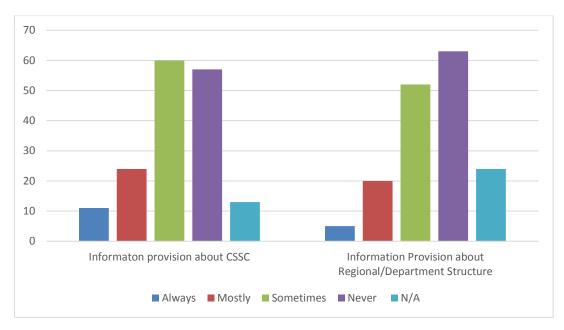
64% of carers reported feeling only sometimes or never satisfied at the level of knowledge CSOs have in relation to the children placed in their care.



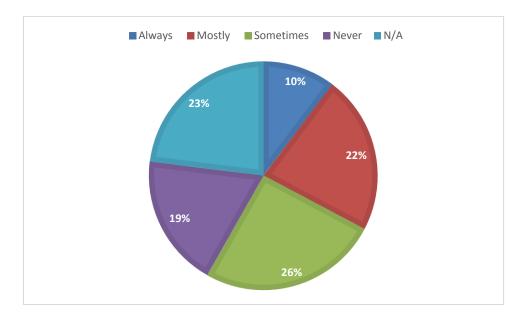
Carers were asked if they were satisfied with the timeliness and provision of Case Plans.

Only 28% of carers reported that they were always satisfied or mostly satisfied in this area, leaving 66% of carers in Moreton feeling that Case Plans were only done in a timely manner and/or provided to carers some of the time or never (6% N/A)



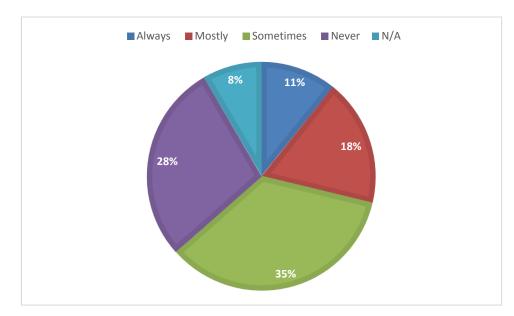


As demonstrated in above graph, carers expressed overwhelmingly that they are not kept up to date about changes in either their CSSC or Region/Departmental structure. Whilst the Sector may think that through the use of email, all carers will be kept updated, it must be acknowledged that all carers are individuals and should be communicated with in a way that meets their needs. For some this will be via email, for some this will be via phone or sometimes face to face. It is hoped that in two years' time, this area will be vastly improved with the introduction of the new Carer Connect App and through carers becoming more familiar with the newly introduced carer website. FCQ acknowledges Child Safety's efforts to improve this area from the previous survey through Partners in Care and subsequent recommendations.



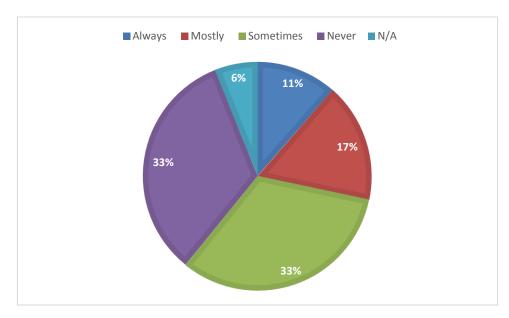
Carers were asked if they were satisfied with their ability to access respite.

45% of carers reported feeling that they were either only sometimes supported to access respite or never. Respite can be an essential element of placement support, when used appropriately, it can create an extended network for children in care and provide self-care opportunities for carers.



Carers were asked whether they were satisfied in respect to being consulted regarding Family Contact.

63% of cares reported feeling only sometimes or never satisfied in this area. Once again this does not appear to align with the Statement of Commitment where carers should be consulted in respect to decisions effecting children in their care. Carers often have critical observations and information to input into decision making. Consultation does not mean that carers make the decision, it means that Child Safety spend time accessing critical information the carer holds in experience of providing 24/7 care to the child.



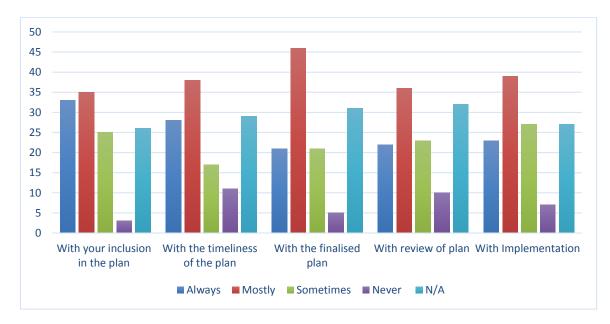
Carers were asked whether they felt they were supported to meet their own family commitments.

66% of carers felt that their family needs were sometimes or never taken into consideration, and only 28% of carers reported that they felt their family commitments were always or mostly taken into consideration.

Education Support Plans

Carers were asked if they had a current ESP plan in place for the child/ren in their care, 58.6% reported having an ESP plan. This is down by approximately 15% from last survey.

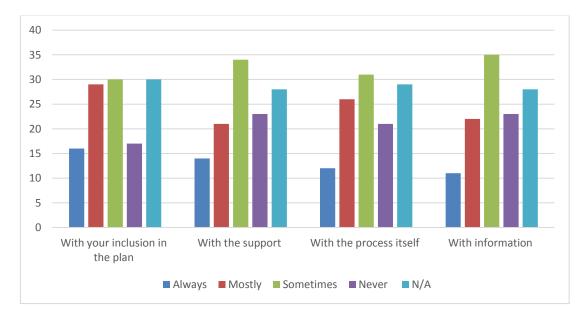
Carers were then asked a range of questions relating to the ESP process and their satisfaction with this as follows.



It would seem from the data above that in the most part carers are reporting that they are either always or mostly satisfied with the processes surrounding ESP plans. Satisfaction rates did seem to go down a bit in respect to the actual review and implementation of plans.

Child Health Passports

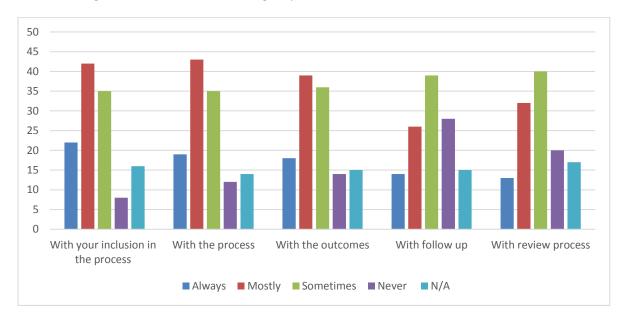
Carers were asked if the child/ren in their care had a current Child Health Passport, 55% of carers reported having a Child Health Passport.



Carers were then asked a range of questions relating to the processes of Child Health Passports and how satisfied they were, carers reported as follows:

Placement Agreements

Carers were asked if they had a current Placement Agreement generated from a placement meeting, 62% of carers reported they do.



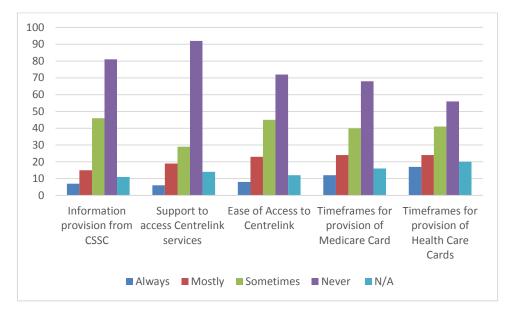
Carers were asked a range of questions relating to their satisfaction around the processes of Placement Agreements with the following responses.

It is positive to see that across the areas of inclusion, process and outcomes, that carers are reporting a high level of satisfaction. The follow up and review process appears to be the areas identified by carers in Moreton that require attention. One stand out seems to be lack of satisfaction with follow up. Carers seem mostly satisfied with Placement Agreement processes and their inclusion in this process which is great to see.

Carers were then asked whether they received a copy of the placement meeting minutes, unfortunately only 28% reported they did.

Centrelink

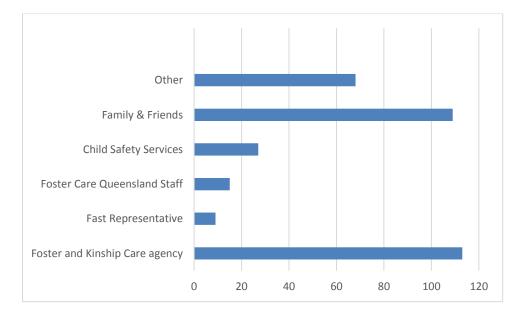
Carers were asked a range of questions relating to Centrelink and how they were supported to access services through Centrelink from the CSSC, responses were as follows.



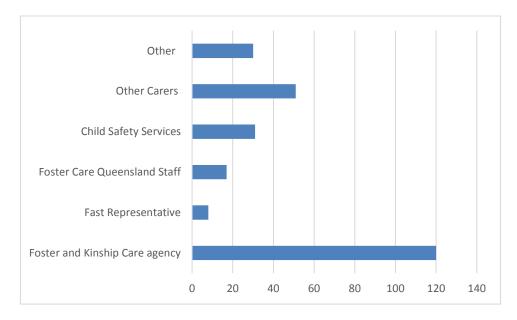
It is evident through this data that carers are feeling a high level of dissatisfaction in this area with the majority of carers feeling that they never receive information or support from their CSSC in relation to how and what they can access from Centrelink.

Carers were then asked question relating to ease of access to Medicare Cards for the children in their care and Health Care Cards. 73% of carers reported only sometimes or never feeling satisfied with the timeframes associated with accessing Medicare Cards. 61% of carers reported feeling only sometimes or never satisfied with time frames associated with accessing Health Care Cards.

Support



Carers were asked where they accessed the majority of their support from.

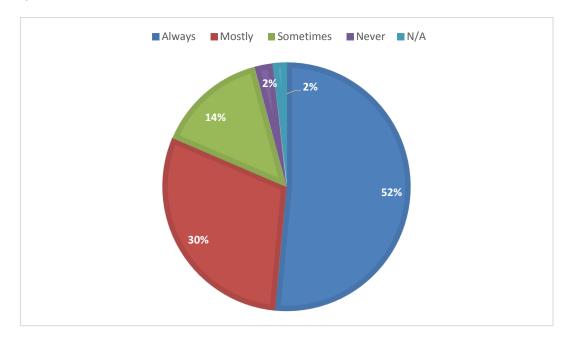


Carers were asked where they access the majority of their information from as carers.

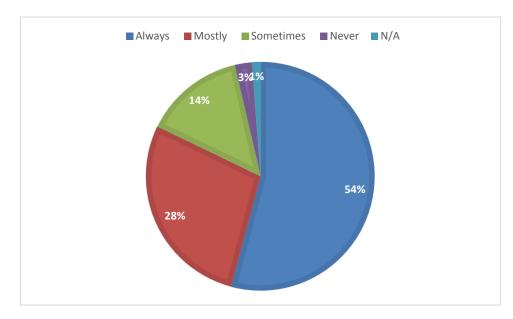
Foster and Kinship Care Services

Carers were asked a range of questions relating to the support provided by Fostering and Kinship Care Agencies. Firstly carers were asked if they were attached to a Fostering and Kinship Care Agency, only 1 carer in Moreton who completed the survey identified they were not attached to an agency.

Carers were asked if they were satisfied in respect to regular support visits occurring (at least monthly).



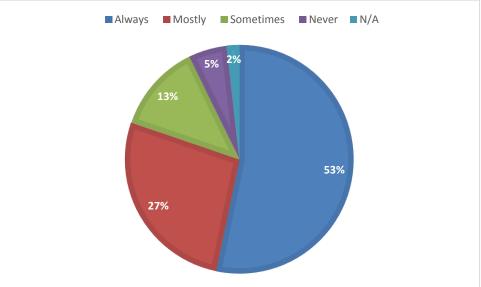
It is very positive to see that 72% of carers reported always or mostly always feeling satisfied with the regular support visits occurring.



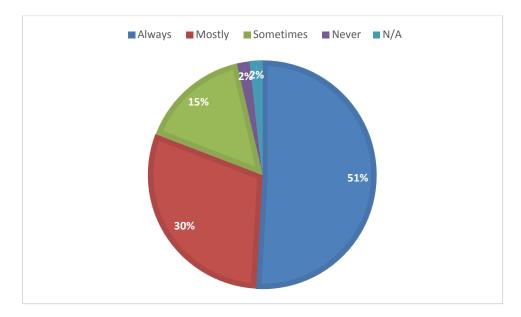
Carers were asked whether they were satisfied with response to contact with their agency.

82% of Carers reported feeling always or mostly satisfied with responses relating to contact with their Fostering and Kinship Care Agency.

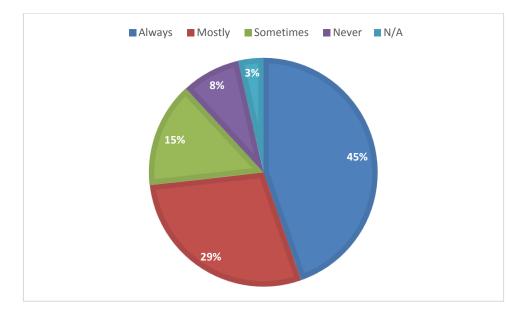
Carers were asked whether they were satisfied with assistance provided by their agency to complete paperwork.



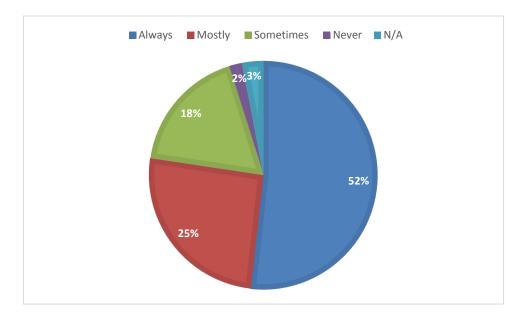
Carers were asked whether they were satisfied with their workers knowledge of current policy and procedure.



Carers were asked whether they were satisfied with their access to support networks through their agency.

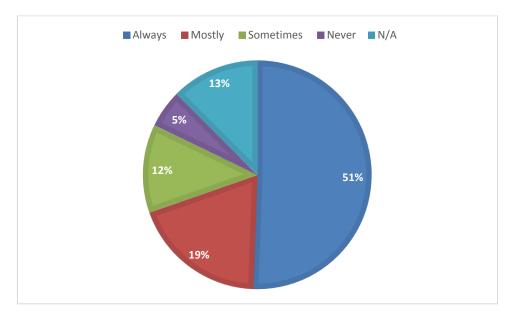


Whilst the majority of carers have reported either always or mostly feeling satisifed in this area,23% of carers have identified they are only sometimes or never satisfied with their access to support networks through their agencies. This is an area worth exploring further between agencies and carers they are supporting in the Moreton Region.



Carers were asked if they were satisfied with their access to training.

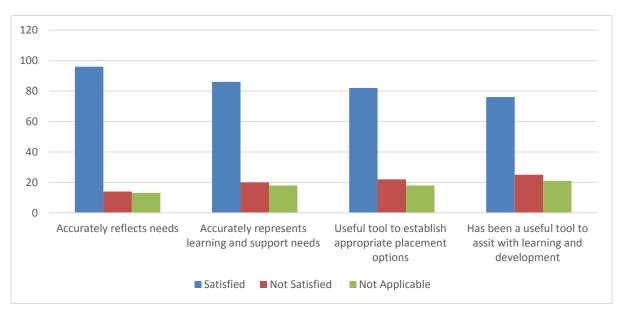
Whilst again we have the majority of carers feeling always or mostly satisfied in this area, there is still 20% of carers who identify they only sometimes or never feel satisfied. It is important that carers have access to relevant and up to date training that assists them to provide quality care to children and young people place in their care.



Carers were asked if they were satisfied with the on call service provided by their agency.

Foster Care Agreements

Carers were asked if they had a current Foster Care Agreement, 71% reported they have one, 18% reported they did not and 11% reported they did not know what one was. It is likely that most of those carers who reported they don't have one are in fact Kinship Carers who don't require one. Kinship Carers could also account for some of those who did not know what one was.



Carers were then asked a range of questions relating to the usefulness of the Foster Care Agreement as follows.

Carers have reported high levels of satisfaction across the board in relation to the Foster Care Agreement.

Training

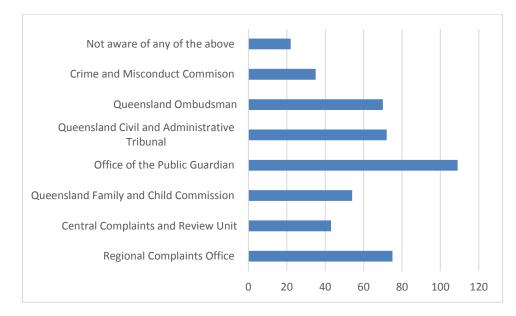
Carers were asked a range of questions relating to their training experiences as follows.



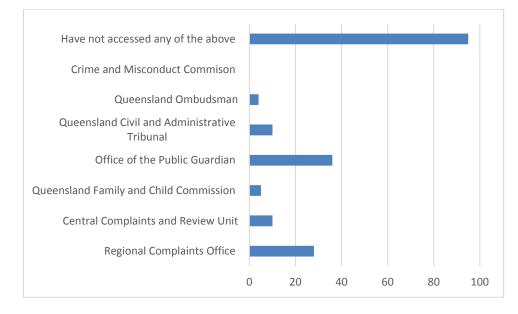
Carers were also asked whether they were satisfied with provisions of or support to access child care during training. Only 31% of carers reported feeling always or mostly satisfied in this area.

Complaint/Concerns Processes

Carers were asked to identify which complaint/appeal processes they were aware of.



Carers were then asked if they had accessed any of the above processes.

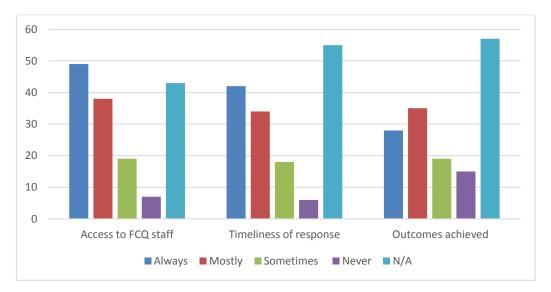


Carers were asked if they felt heard and were satisfied with the outcome regarding their contact with the above services. 45% of carers reported they felt heard, however only 48% of carers felt satisfied with the outcome achieved.

Foster Care Queensland

Carers were asked a range of questions relating to Foster Care Queensland (FCQ). Firstly carers were asked if they were satisfied in respect to information provision regarding FCQ, 73% of carers reported satisfaction. In respect to knowledge and understanding of services provided 67% of carers reported feeling satisfied. With approximately 18% of carers feeling neither of these questions were applicable that leaves nearly one third of carers in Moreton having little understanding or knowledge about FCQ.

Carers were then asked a range of questions relating to their experiences if they had contact with FCQ, please note that carers who have put not applicable, have not been included in this data as it is not relevant.

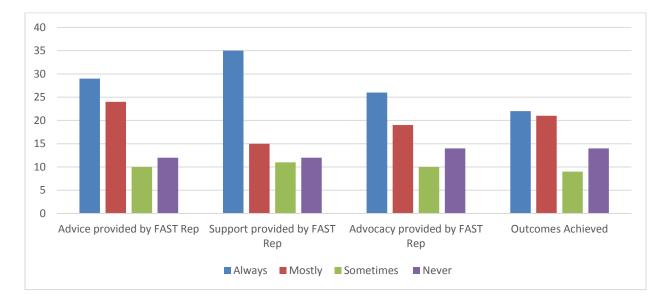


FAST Program

Carers were asked a range of questions relating to the FAST program attached to FCQ.

Carers were asked if they were satisfied with provision of information about FAST, of those carers who felt the question was applicable to them 64% reported feeling satisfied.

Carers were asked a range of questions relating to their experiences of accessing a FAST Representative, please note only responses from those carers who felt these questions were applicable have been included.



Of those who accessed their FAST Rep, 41% did by social media, 15% by email and 54% via phone.

Partners in Care

FCQ included a section in this year's survey on Partners in Care, the following results were received:

- 26 carers who completed this survey from Moreton have attended a Partners in Care Workshop
- 31 Carers identified they have received information about the Partners in Care initiative since 2017
- 10 carers reported seeing a positive difference since Partners in Care was established
- 80% of carers identified they would like to attend future forums similar to Partners in Care Workshops in the future.

Looking Forward

During this section of the report, carers were asked a range of questions relating to their future as carers and what they would like to see change.

Firstly carers were asked how long they intended on continuing to provide care for. 84% of carers reported they intended on caring for more than 3 years. 13% stated they only intended on caring for another year and the remaining 3% stated they intend on caring for another two years.

Carers were then asked if there was support that would influence that decision – 53% of carers stated that the support they received would influence this decision. The following comments were provided:

- 1. Child Safety needs to support placement permanency.
- 2. If reunification ever occurred for our LTG child.
- 3. CSOs need to stay with the child for more than a couple of months.
- 4. Our health.
- 5. Not sure how long we will continue, we would like to remain until the children in our care are independent, however, dealing with DOCS is our biggest problem at this stage. We are still considering our position.
- 6. Not supported with last foster child.
- 7. Raising teenage boys is expensive. Unfortunately, money needs to be a factor in my future decision making.
- 8. If I don't continue to get support with one of my kids it will end in a placement breakdown
- 9. The attitude of one particular Team Leader at {CSSC de-identified} would make any normal person never want to do this again.
- 10. My health.
- 11. Our health.
- 12. Communication and consideration from the CSO.
- 13. I am not able to continue as a carer due to life threatening reactions to vaccines, which are now compulsory for foster carers. Our journey is ending.
- 14. We need regular respite of one weekend a month and occasional holidays to handle the stress of being carers to a traumatised child. We also feel the foster care allowance is woeful when compared to the real costs of adequately supporting a traumatised child.
- 15. Reimbursements to be paid in a timely manner.
- 16. If we believe our little one is being returned to an unsafe environment which we believe is going to happen then we will not continue being foster carers anymore.
- 17. My availability as a respite carer is dependent upon my work commitments.
- 18. Well with children in long term care we hope they continue to stay with us for the full 18 years. We also would like to welcome more children into our home asap.
- 19. I believe in it. If I don't who will. I am also a strong woman who is passionate about my role in influencing change and in doing my part to make things better. I bring extensive healthcare and business experience, passion and commitment. I see my role as a support (to other carers, parents, CSOs and the babies and children I look after) and as an advocate to help make things better. The most difficult part for me is the insecurity and dynamic nature of the role. It's an emotional rollercoaster that is in itself a full time job and requires fortitude, emotional intelligence, high level communication skills and resilience.
- 20. HNS.
- 21. Lots, but need help dealing with Centrelink.

- 22. I would choose a placement that would be better suited to my family and would ensure that the foster child is younger than my biological children.
- 23. Most isolating experience I have ever endured.
- 24. I am a little disillusioned by what we do with kids in care. It is a complex arrangement, not sure if I should not advocate for children in a different role. I have senior business management background and I am studying a masters of social work. My debate is personal do I try and change the world from inside.....or do I support one more child. Can I do both?
- 25. Child Safety and their stupid decisions
- 26. I just read comment on your FB page where somewhere mentioned about a change to legislation re carers and vaccinations. If it's true, we would also be forced to resign. Be a Shame!! We've just started this journey after years of wanting to and planned on doing for a long time.
- 27. If I had to deal with {CSSC de-identified} or if all offices became as disheartening, I will stop. To be honest if they were the first I ever dealt with I would not still be a carer.
- 28. No support through agency or Child Safety trying to change agency.
- 29. I would like to be legal guardian of my grandson.
- *30.* We want to care until our children reach 18.
- 31. Lack of support from Child Safety, poor communication and lack of care for the child from CS, they care about numbers and ticking boxes not the child's best interest.
- 32. My address kept private. Timely decision making. Consistency of care team. If our current placement continues to quardianship, we will continue but if not we are not sure if we will continue under the current system. Children are not the principle concern of Child Safety, the parents are. Carers are treated like long term babysitters, the CSO changeover is insane (7 CSOs in 3 1/2 yrs), the inability of anyone to actually have the time or knowledge to follow policy and procedure with children paying the price for poor case planning, reunification at all cost culture and a chronic lack of timely decision making. Your life is in a state of uncertainty for years at a time, the children have challenging behaviours that takes huge amounts of time and effort to improve, you have to make yourself available multiple times a month for visits etc which gets tiresome, intrusive and time consuming, you have to be flexible to meet the visitation needs of the families which often regularly change due to their interesting lives (again for years at a time). I am dedicated but the system is draining and my experience and that of many other carers and my support workers and CSOs is that it is the child not so safety system. Hence why the constant CSO changes, the mass exodus of carers and the constant increase in the number and complexity of children in need of protection.
- 33. Acting as respite carer for foster child who was reunified and now in residential. Unable to return to our care or go home due to escalated behaviour due to no support being provided by Child Safety. Continuation of this care depends on the child accessing the support they need and the safety of our family as the child is now quite violent.
- 34. My biggest issues are mostly with the Department of Child Safety, the families of children in care and the amount I have to deal with them and also on the occasion with my agency.
- 35. I would consider at the time of a new placement. We may switch from short term to only respite or emergency care. I would like respite to be available if we took on a primary placement and the child to be at the local school, so far, I have had to do transport across town for all placements.
- 36. Financial and better CSOs.
- 37. Support in the fact that I am only able to do limited care at the moment.
- 38. If the Department was better to deal with and if carers were given more respect, we would likely care for longer. Permanency placements may also influence us.
- *39.* Being able to work well with CSO and being treated with respect.

- 40. Open communication.
- 41. I feel that by not receiving appropriate and timely support, I was unable to prevent a placement from breaking down.
- 42. Carers need to be given stronger clear and transparent provisions to advocate for their children in every facet of a child's time in their care and engagement of life; and provisions for this must be made into standardised written protocols.
- 43. I feel there is an overall problem with the foster system with so many complex issues that if I continued to be a foster carer for too long, I would become part of the problem. It is very soul destroying over a period of time and the lack of humanity when dealing with these families who need so much more support than the system delivers is at times inexcusable.
- 44. Regular once a month respite break is needed {identifying information removed}. I am looking after children aged 2-18 (one has transitioned out of care but has learning difficulties and still needs a lot of support and is not able to go independent).
- 45. Will continue to do it for as long as we feel we can make a positive difference.
- 46. Inadequate support (a: literally and b: incompetence) if it is available. {identifying information removed}.
- 47. Child Safety's abysmal lack of care for us and the young people in our care. They are not people focused and despite carers having 24/7 care of these precious people staff dismiss concerns etc if it suits their agenda. We came close to finishing up recently due to the absolute lack of care or concern of this system that puts vulnerable young people last.
- 48. Yes, the more that Child Safety put absent parents before hurt and traumatised children the more carers will be lost. It takes its toll.
- 49. Centrelink. My family's situation.
- 50. If I was to have a CSO that did not respect me or the role my family have in a child's life then we could decide not to do this anymore, which would be a shame because I really do love what I do and have been told by Dept staff and parents I do it very well and it is my passion but everyone has to feel valued.
- 51. In home support. Respite isn't the only way to give someone a break. Another set of helping hands would make all the difference.
- 52. Issues with Child Safety Officers and Team Leaders. It makes it hard to want to continue to be a carer when you are faced with professionals who lie, withhold information and bully.
- 53. Department and the removal of a child due to being aboriginal.
- 54. NO information available for carers regarding financial support under new PCO's, despite pressure and expectation for concurrent permanency planning. {Identifying information removed}. I may end the placement and leave fostering, depending on outcome of my enquiries into PCO details. If so, I will not foster anymore. I have grieved for the loss of several children already and cannot keep going for the sake of my own emotional health and the effect it has on my general wellbeing.
- 55. The order is up in December 18.
- 56. We will remain his carers but are hoping to leave the care system ASAP {identifying information removed}.
- 57. If I have to deal with {CSSC de-identified} Child Safety.
- 58. If the child in our care was returned to his biological parent, we would probably never be foster carers again. Being part of a system that makes my husband and I be part of abusing a child is not what I signed up for {identifying information removed}.
- 59. Too much stress for minor insignificant issues from Dept people.

- 60. Continued financial payments (CSNA) once NDIS roles out, to ensure all the therapies we access at the present time will continue to be funded through this for our child who I will possibly not be eligible for NDIS but needs specialist intervention.
- 61. Child Safety and the CSOs who make decisions without discussing it with the carer beforehand.
- 62. Major shakeup with Child Safety, respect of carers and quick responses and reimbursements. Finance department needs a major shakeup with poor skills.
- 63. Only because I committed to the children in my care
- 64. Permanency, support for LTG-other.
- 65. *Will not continue caring due to the department.*

Carers were asked if they had any suggestions to improve services for Foster and Kinship Carers. The following comments were provided:

- 1. Many.
- 2. Continuing care from both the carer and the CSO.
- 3. Less swapping of CSOs more staff on after hours.
- 4. As volunteers I think carers are treated badly by DOCS, this has to change.
- 5. Yes, the department listen to carers and to put the child's need before the parents.
- 6. Listen when they beg for help.
- 7. Transparency, better CSOs in general, limit change over in CSOs,
- 8. Help to make it easier to add children through Centrelink.
- 9. Have people who care work there. Don't leave the big decisions in the hands of 20 something year old women fresh out of a degree with no idea about children and babies.
- 10. Better networking options available outside work hours.
- 11. Get rid of CSOs with the old fashion mindset that carers are basically to be used and abused and employ CSOs who actually respect the carers.
- 12. Get lawyers.
- 13. More transparency regarding availability of respite. More access to counselling and other forms of support. More inclusion in decisions around timing of family contact and more information about the family and what the child has experienced prior to coming into care. We are very happy with our foster agency, {agency de-identified}, but have found dealing with the department stressful and time consuming (to the degree where it has affected my work) and has often left us not feeling respected and important. It would be great if the foster carers were treated more as part of the family unit when Child Safety is making decisions ... as we are there parenting these kids every day.
- 14. Don't let us be insulted by being the last to know decisions.
- 15. Respite carers should be included in care plans and given more information about the children in their care.
- 16. More communication, more access to training. I have done training with other carers in private homes where we weren't able to attend some training. More support generally.
- 17. More training on communication, emotional intelligence. Being an active team member, firsthand information not last in line, hearsay or snippets. Respect of our role and unique position within the team. More training on working with and being a therapeutic resource for parents, how to protect yourself. More transparency and accountability from CS about their decision making. Greater access to the actual decision makers within a Service Centre.
- 18. Carers need to be listened to more, we are not always treated well. We are JUST a carer, we have no rights.

- 19. Bring in processes and restrictions that would only allow foster carers to foster children younger than their biological children. I had no idea how problematic having older foster children could be.
- 20. Be honest with carers about the harm that they and their families are being placed in and then respect the outrage when people are harmed. Children in care are dangerous to themselves and others. While this is not their fault there should be more support and respect provided to prevent incidents occurring.
- 21. Increase allowances.
- 22. Involve the carers and listen to their concerns.
- 23. MORE RESPITE CARERS.
- 24. Look after your CSOs; less workload, better rewards for senior CSOs, more administrative support. Stop the turnover, rotations out - if managing a complex case, so they can provide support for all kids on their book of work. Consistency of policy information across the state.
- 25. More communication.
- 26. Yes; get more people that have actually lived some life and have some knowledge of how children are.
- 27. Better training times and support to attend.
- 28. The real change will come not from policy or practice manual changes but instead from a change in culture of the Service Centre staff. CSOs don't value carers, we were told by a CSO and by our child's community visitor that most carers in the {CSSCs de-identified} area are uneducated people using foster care to supplement their benefits. This is sad attitude to have towards carers. That certainly isn't our situation or the carers we know. Improvement will come from a change in culture and attitude towards carers.
- 29. Yes, have CS listen to their carers and trust them.
- 30. More visits and support.
- 31. Don't change CSOs so often.
- 32. Yes, give kinship carers including informal the same financial, social, medical, training and welfare supports that foster carers get.
- 33. Full disclosure of child before placement starts. Don't force children to see their parents who don't have any part of the child's life.
- 34. If the system actually protected children and decisions were made in children's best interests in a timely manner carers would stay and support such a system. Treat carers as family because that's what many are to these children.
- 35. Have support in dealing with Child Safety that is easy to access, makes a difference and is available outside of business hours for working carers.
- 36. Not to expect carers to do most of the leg work with contact. It brings too much chaos into our homes/lives having to deal with these children's families constantly. Especially when they are so unreliable, irrational etc.
- *37. More communication.*
- 38. New carers require far more knowledge from the day a child arrives on day to day administration requirements. So many get lost with Centrelink and school requirements without guidance. They need help.
- *39. Networking events for carers who live nearby each other.*
- 40. Think about the children not ticking boxes.
- 41. Counselling for all kids in care.
- 42. Respite Payments and fuel allowance claims need to be paid within two weeks of being submitted we currently have to wait anywhere from 1 month to 4 months for these reimbursements to be paid.

- 43. Greater advocacy for the importance of carers and influence of how we are treated.
- 44. The Adult Guardian needs to be more decisive and practical when making decisions.
- 45. Make Centrelink process easier and quicker.
- 46. No. I am sure everyone does the best they can within the framework of govt.
- 47. Child Safety Officers should not think of carers as the enemy. Should be more team work involved. Carers should be well informed. You cannot make an informed decision without correct and up to date information. Don't hold back information. It would seem to me over the years that decisions are made to suit the parents and the Legislation clearly states that decisions should be made in the best interests of the child.
- 48. Active foster carers need to be given greater allowances and freedom to a degree to engage with communities and be heard. I believe communities will only come forward to offer themselves and their homes if those whom currently do have provisions to speak freely and openly about their experiences - without the advent of repercussions for such speaking being held over their heads.
- 49. I cannot help but feel in a very general way if Carer's are supported more in being able to parent these children and advocate for them. Then we can get better Carer's and work our way up the system. Some of the Carer's I have met I cannot understand how they are given the care of our vulnerable young people. We cannot improve a system if we don't improve the individual within it.
- 50. Yes kinship caters deserve more support and be told that they have to be same access as a foster carer.
- 51. Trust us as kinship carers to know what is best for the child.
- 52. It's all well and good to have procedures in place to assist carers, such as CHP but not much point if Child Safety Officers ignore them or blame the parents for not providing the information.
- 53. Employ more competent people (salaries have to increase?). Find that few have emotional intelligence.
- 54. Close the loop to make sure carers are aware of how things should be. Look for individual CSOs/Team leaders with the same complaints over and over. Manage staff who do not complete Placement Agreements for prolonged periods of time.
- 55. Encourage staff to be proactive instead of reactive. Prevent crisis situations rather than deal with them after. Honesty and sharing intention and information with carers. Make decisions in a timely manner. Put the children before processes. Encourage good FGM's not just the tick and flick process. Easier access to, and quicker resolution of complaints. Consider carers as another resource and treat them with respect and not as second rate. Listen to their concerns and act on them when appropriate.
- 56. We feel like we are always the last to know decisions in regard to our child in care. We seem to be a forgotten link.
- 57. Yes, so many... no time to write now... but you'll hear from me!
- 58. I think more thought has to be put into when placement ends and particularly when it has been 1/2/3 years we have no rights to stay connected to that child so for them it's their other family (us) and that's very much the way they think of us as here one day and gone the next; what does that do to the child as far as attachment goes. I was told by a grandmother that it broke her little grandson's heart when they took him, and we are powerless to help him.
- 59. No. I might of once when I was bright eyed and new, now I'm battle weary and had enough. My personal solution is to get out of fostering.
- 60. Better communication between dept and Centrelink to make claims easier and quicker for carers.
- *61. Communication with the department.*
- *62. Better communication with the department.*

- 63. Provide timely information with empathy and understanding. Don't blackmail carers emotionally i.e. use your love of the children in your care to force agreements / compliance.
- 64. Being listened to and taken seriously.
- 65. The role of carer needs to be professionalised. That it becomes a job with the associated responsibilities and supports.
- 66. For long term carers to be better acknowledged.
- 67. Communications 101 training for the Department.
- 68. The first three years of fostering were the hardest. Intensive support options could reduce carers leaving the system. Formal partnering of new carers with more experienced carers could help in dealing with Child Safety as this was the biggest source of problems for us even with children with extreme behavioural problems.
- 69. Don't keep carers in the dark, treat foster children with respect, treat families with respect, look at what's best for child, and provide respite when carers ask for it.
- 70. To be included more as a valuable member of the care team and be involved with decision making along the care journey for each child.
- 71. Superannuation what happens to those carers that have given up everything to be carers. What do they live on after 30 years or more caring.
- 72. Providing more information to carers regarding children in their care, their needs, their backgrounds etc.
- 73. Yes, become an independent body who strongly advocates for the carers and children in their care, instead of aligning themselves with the department and not giving the carers enough recognition for their insight and concerns about decisions made about these children.
- 74. Training for kinship carers if they want it
- 75. Treat carers as they deserve to be treated... be partners not dictators.
- 76. Better communication by CSO and Department.
- 77. Buddy up new carers with more experienced carers.

Carers were then asked if they could change two things about the Child Protection System tomorrow, what would they be. Carers left the following comments:

- 1. The system should work for the best interests of the child. Each child's individual circumstances need to be considered instead of a sole focus on reunification. Placement permanency should be established much quicker. Carers should be part of the team making decisions for the child instead of being treated like babysitters.
- 2. Fewer chances for biological parents' access to adoption after a suitable period.
- 3. When you FC has had 7 CSOs in 18 months and you don't currently have one or a Team Leader. There needs to be consistency.
- 4. Long term foster children should be given a better opportunity to have a normal life by automatically being offered guardianship or adoption. Review DOCS policies and procedures.
- 5. Children's needs put first not the parents.
- 6. More information provided on children, better matching kids with carers.
- 7. Clear up what decisions can be made by the carer, and if it's a department decision then speed up process for getting approval; allow foster/kinship carers to adopt their foster children.
- 8. It would be run by people who understand children and their needs/attachment. They would be higher paying jobs as to not need to take the new grads to make big decisions that will impact a

family forever. One more and most importantly- change the culture of {CSSC de-identified}. Their culture is toxic and harming many people.

- 9. Better networking options available outside work hours. Better communication even advice around the lack of information available. More funding for more Dept. Child Safety Officers.
- 10. More decision making for long term carers to support the children in their care.
- 11. Provide carers with more respite.
- 12. The legislation re standards for reunification. Min. time frames for parents to sort their lives or permanent families found for their children. Especially when in care from birth.
- 13. I would increase the access foster carers have to access about both the child in their care and the child's family. I would increase the foster care allowance substantially.
- 14. Better trained staff; to be treated respectfully.
- 15. Make it about the welfare of the child rather than parents. Clean up the Child Safety Office.
- 16. Adoption of foster children should be encouraged where appropriate and the process made easier. Provision of more information to carers about the child in their care on a timely basis.
- 17. Constantly being out of pocket and fighting to get reimbursed agreed expenditure.
- 18. Start listening to the children; start putting them first; stop giving the parents what they want. Child Safety should be just that.
- 19. That foster carers be seen as an integral part of the care team and that we be brought into the organisation as an employee with accountability and rights etc. That communication and relationship building be extended to foster carers and the teams at the Service Centres.
- 20. CSOs need to recognise that carers are people too with a family. We are also the ones that spend the most time with the children. We know a thing or two about what will upset them and what they need/don't need feeling as an actual part of the team instead of babysitters would be a positive step as well change and create an easier system for carers to access child care subsidy and FTB and faster access to Medicare Cards and birth certificates.
- 21. Better communication around intended orders for children.
- 22. better communication between department and carers- considering more the needs of the child instead of the parents open adoption for children in long term care
- 23. Confidentiality from The Department and approving HNSA as needed by families struggling with children with diagnosed illness such as ADHD.
- 24. Carers given more input into decisions on behalf of the kids. Change the need to place children with biological family to get them out of the system. Family isn't always the right choice, hence why they were taken in the first place.
- 25. Earlier support of families at risk; higher pay for employees so that greater talent is drawn to the sector.
- 26. Parents knowing our address and payments.
- 27. Camps for our kids; Super.
- 28. No residential homes, individualised homes. We need to consider, dare I say it, a form of orphanage/ care complexes, with high calibre professionals I'd love to examine all the variety of supports in place and brainstorm solutions.
- 29. More thought for the children & less for parents who do not do the right thing for the children.
- 30. The whole set up of Child Safety needs a whole reboot they have no clue about real life. A bit more consideration for carers that are DNA connected with children in care.
- 31. Better communication. More support/information.
- 32. That the child's needs come before anyone else's not just a statement written on their website but a genuine drive every day to do what is best for them. Adoption from foster care, they have the legislation and processes to do it and have done so since 2009 but haven't used it. Permanent

care orders are a step in the right direction, but open adoption would give these children genuine security and families for the future. It will be interesting to see how many children are actually given a permanent care order - the Service Centres are already watering down the intent and legislation changes to get out of making these orders. In our opinion this is to avoid the work and also to avoid managing the parents' issues through the process.

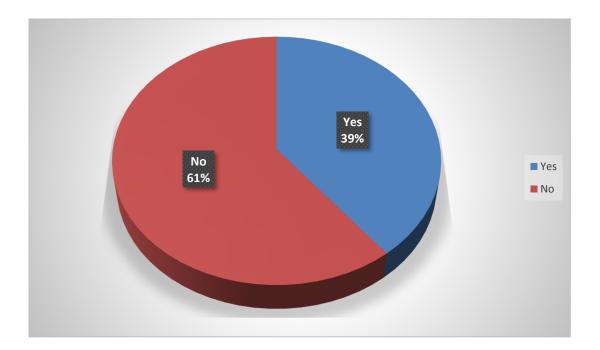
- 33. Placement of children, being given more info and if that is not available more support, also nonschool age children going to full time carers who have to put them in 5 days a week day-care. I know of some there 10 to 12hrs. That is not fair on the child. Secondly, dual respite should just be mandatory, everyone needs a break sometimes and it is unfair that the payment stops. If we work you get paid loading and no one is asking for that, but we still provide nappies, medication which we pay for and supply to the carer.
- 34. Listen to opinions of carers more. Return phone calls/emails in a timely fashion.
- 35. Have CSO people with experience in parenting, not just young people without any experience to support you. And ones that aren't power hungry.
- *36. I would love to have nothing to do with {CSSC de-identified} and use other departments.*
- *37. More outcome focused not process focused. More child focused not budget focused.*
- *38.* The follow through of things agreed to at department or agency meetings.
- *39.* Maintain more stability of CSOs. Improved listening and consideration of the child and foster family.
- 40. More communication between carers and between CSOs.
- 41. Equality for all kinship carers with foster carers informal and formal.
- 42. Take into consideration the carers point of view on what best for child they live with them 24/7 not just talk to them in a controlled environment for a short period. Likewise listen to their teachers (not just the GO or Principal who has second hand info or just data to go on).
- 43. Centrelink did not go off our Tax return.
- 44. Make it about "what is the best interests for the child" After 12 months of a child being in foster care the parent loses all rights until the child can make their own decisions.
- 45. Treat child abuse as crime with the same consequences as if you had done it to any other child. Stop treating child abuse as a family dysfunction to be supported with mass taxpayer funded parental support services that have no evidence to prove they actually reduce the incidence of child abuse and neglect or reduce the need for OOHC services. Biology should minimize the impact of torture, neglect, deprivation of liberty, starvation etc. Timely permanent decision making in the child's best interests that takes into account science of brain development and attachment.
- 46. Putting our children first after 12 months in care and getting permanent placements happening for them or adoption.
- 47. Have the system allow adoption of child when there is no real chance of reunification, not push this due to the child being indigenous and provide all children in care with the psychological and medical support they need as a matter of process, not the carers having to fight for every little bit of support and not being heard by Child Safety and the system. The system that is set up to help vulnerable children is instead destroying them and the families that care for them.
- 48. Implement professional foster carer program monthly phone in stakeholder.
- 49. Carers not having to deal with the child's family often or at all. And limited contact with Child Safety. There are too many fish in the pond as well.
- 50. Putting the children's needs always first.
- 51. New carers need help not left to swing on their own that's why they give up. Love, care and hugs are given to the children who looks after the carers??

- 52. More resources to deal with issues when identified. Ensuring that information is passed on and that schools work with the team to address issues faced by the child.
- 53. Forcing children into negative contact. Pay CSOs better to get some quality staff instead of the rubbish employed.
- 54. Less pressure on carers to take/keep kids and be open to recruiting part time carers to get more and better carers.
- 55. Provide Department staff with the resources, training and awareness to focus on the whole foster care team, in particular the carers. Make the focus more about the children and less about the parents. We understand that research shows children do better in a family environment, but this leads to an unbalanced focus on the parents and not the best interests of the child.
- 56. Listen to carers, when they say there could be things going on when children go home. As children most likely will tell the Carer before they tell the CSO.
- 57. Less involvement with lawyers and the current legal system.
- 58. To have more stability with CSOs we have a 2 1/2 year old he has had 7 CSOs and our other children in care over the years have had a multitude. When placements end and you have had a child 1/2/3 years to have more rights to see the child we are asked to take a child/children in to our homes love them, to be part of our family then to be taken sometimes to.
- 59. More CSOs & support staff so that there are smaller caseloads, less staff turnover, staff felt engaged & were encouraged to form bonds with the children & families within their caseload. Ongoing & evolving training & support for the above to ensure CSOs were able to build & contribute to a better system for all. Especially the children in care & the carers.
- 60. More teamwork. More rights as a carer.
- 61. Removing children earlier from abusive situations. Being able to deliver appropriate support and assistance to a child while still maintaining a conventional adult/child relationship. E.g. A child not aware of stranger danger due to the amount of adults in her life and their pity was misguided as she assumed ALL adults had her best interest. She was also unable to develop relationships with her peers as they would not 'give in' to her demands.
- 62. More relevant information when being offered a placement. CSO and agency workers should not lie to carers.
- 63. I believe relationships established between children and their carers are often a lifeline for children in care; if not sometimes the only one. I believe if we are to truly lay claim to being "a child focused system" that relationship needs not just simply to be encouraged post reunification but actively supported and enabled. Anything less, without being driven by the child's best interests, is almost as dangerous and destructive to that child's development as not having had that person in the first place.
- 64. More relationship based interaction as it takes a village of people working together to help a family and more proactive decisions instead of reactive. E.g. funding available for a child who is entering grade 6 unable to write and read and starting to have challenging behaviour instead of waiting for a school suspension or expulsion and then placement breakdown due to increased stress. Then having a child placed in a resort with no boundaries and 24 hr youth work support. Why would that young person settle into another placement with boundaries and the structure of school. We have to stop setting these kids up to fail.
- 65. Foster care allowance for teenagers is insufficient.
- 66. Visits with biological parents who are using drugs. Belief in our ability to assess trauma caused by such visits.
- 67. Automatic healthcare card for children in care. Providing an honest and open account of reasons for children being in care, not hide facts behind confidentiality excuses.

- 68. Have carers as full-time salary role so that 24/7 support can be provided to the child. Introduce honesty into the process at the beginning so carers can better prepare for the challenges that happen.
- 69. The one eyed focus on indigenous children.
- 70. That even though Child Safety's job is to work towards reunification. They treat children as people with hearts and minds that are growing. And giving them a voice and showing them that they are heard. And there needs today and in their future come before making the paperwork look good for court. If a child looks like they are hurting inside work WITH the carer to make sure contact is s positive, safe experience.
- 71. Open and honest communication no secret squirrel rubbish disguised as confidentiality. Better access to resources when changes happen i.e. info passed on about how we can access info when changes happening advice on what can be included in the Case Plan ... this mysterious and secret info.
- 72. Put the child and their safety first not the parents. Carers not the last to know of decisions made.
- 73. Legislate- should a child be removed from a person. Then that person right to have more children also be removed.
- 74. Child comes first, more support for carers.
- 75. Dept and a lot of the people in it.
- 76. Changes need to be made to end of placement especially if they have been for a long period, we are asked to take them in treat them as family love them and build trust and a lot of the time just to end abruptly and all that we have built up is destroyed and the child is the victim again.
- 77. Try to limit how many CSO changes there are for a child so that a relationship can be formed every child I have had has had a multitude of CSOs the little boy we have now has been with us 2 1/2 years and has had 7 it is how mistakes are made and information lost it is an issue that really has to be address.
- 78. Early education on parenting skills in primary school/early high school. Not sex ed, but family relationships etc. I can't imagine the bang for the buck that would get in the long run.
- 79. More respectful interaction with Child Safety and being kept informed about what is happening and planning for children in my care.
- 80. Stop giving parents so many chances when their situation hasn't changed.
- 81. More support.
- 82. Listen to the carers. Cut the time it takes to get LTG orders. It's taking too long, kids need stability.
- 83. Aboriginal children and non-aboriginal carers and the push to send children home.
- 84. That the department are respectful of the carers & the children being cared for by them.
- 85. Ignorance of Child Safety workers in relation to the daily, short term and long term considerations/ challenges of carers. 2. Realistic expectations for carers and adequate support for real situations.
- 86. Assess cases more individually and not by the boxes to be ticked. That prevention is better than cure.
- 87. Get in {name de-identified} to do a review and wipe the slate clean. Start again. Spend more time and money on children that actually are being abused or at risk of abuse and not on children doing really well and have been for years.
- 88. More adoptions for children not going home. Make it easier for foster carers to keep the children if the families cannot have them.
- 89. Time and funding.

- 90. Staff recruitment and retention. You need to ensure you keep the good staff. Many seem to go. We have had so many CSOs and the good ones always leave.
- *91. More efficient court processes. Open adoption for long term foster children.*
- 92. I haven't had a good experience since I was transferred from {CSSC de-identified} office. Very disheartened and seen Child Safety cause a lot of unnecessary stress on my family and the child in my care. I believe they are the ones causing harm to this child. Maintain CSO and support officers. Listen to carers when they ask for help.
- 93. I want to feel part of the team. I want to be like the professionals and contribute as an equal. Child Safety needs to become accountable to us, not just the child. I feel they use us and when things go wrong, we don't get acknowledged in any way.
- 94. That the needs of each individual child be taken more into account. That communication be consistent, accurate and respectful. That carers are on a journey too. Advise on how child behaviours fit into the context of that particular child's journey. That Team Leaders and actual decision makers have more contact with carers. CSOs often give information that is inaccurate and guess work rather than factual. This is not helpful and increases stress when it doesn't need to.
- 95. Communication and respect for careers and value their opinion.
- *96. More CSO staff. Pay them more if needed.*
- 97. Speed up the process so that Long Term Guardianship can be offered earlier. I understand that changes are coming in in October that will work towards this. I am pleased about this. {identifying information removed}. Parents never turn up for visitation. An LTO should have been issued long ago. Take into consideration that not only does a child get attached to the carer the carer gets attached to the child. Look after the welfare of the carers better.
- 98. More support for carers that take on children from out of their region. For travelling. i.e. support for travelling to visits and counselling. Especially when you have other children.
- 99. More communication.
- 100. More recognition of the value of input from foster carers when making any decisions regarding the children in their care - after all, we spend the most time with them and as such, have a pretty good idea of their fears as well as their wants. No forced bio contact when the contact with the parent is exposing these children to the very reason they were removed in the first place perpetuating the fear and trauma.
- 101. Let the child be heard and for better communication with CSOs.
- 102. More focus on what is best for child and not the parents who have done the wrong thing.
- 103. Put child not parents first always. Payments.
- 104. Child First, biology second. Contact to be based on child no bio parents, CSO ignorance of DT or unwritten 'policy'.
- 105. More communication from Child Safety Officers.
- 106. Communication and support.
- 107. Family contact decision making.
- 108. Stop treating it like the secret service.
- 109. Children to be the primary focus. Respect for carers as an equal member of the team.

Comments with any identifying or sensitive information about a child or young person in care, names of workers and/or locations have been removed from the public copy of this report to ensure confidentiality of children, young people and their carers are maintained. However comments have been included in a version submitted to the Department of Child Safety, Youth and Women to ensure that carers' voices are heard.



Finally – carers were asked if they would recommend fostering to a friend.