

# FOSTER AND KINSHIP CARE

2018 Carer Survey Report

# **Executive Summary**

Region	Completed surveys*	Total carers in Region	% of carers who completed survey**
Central Queensland	150	822	18.2%
Moreton	228	1384	16.5%
Northern Qld	67	894	7.5%
South East	157	1150	13.6%
South West	170	990	17.2%

<sup>\*</sup>Total includes 12 surveys where multiple regions have been selected. For the purpose of the report we have only included surveys where single regions were selected (760 in total)

In total 760 carers completed a carer survey, as of June 2018 there were a total of 5240 registered carers according to the records of the Department of Child Safety, Youth and Woman. Therefore a total of 14.5% of carers in Queensland completed a carer survey which represents a significant sample size to gather and analyse information from and an increase in sample size from the 2016 survey by 3.5%.

# **Overall State Data**

#### **Demographics**

- 95% of carers reported being attached to a Fostering and Kinship Care Service
- 79% of carers identified as Foster Carers, 21% as Kinship and 2% as provisionally approved
- 88% of carers identified as being over the age of 35 years old with 58% being between the age of 35 -54 years of age
- 8.6% of carers (65) who completed the survey identified as Aboriginal and/or Torres Strait Islander
- The majority of carers reported being married at 59%, with 10% identifying as being in a defacto relationship, 27% single and 4% identified 'Other'
- 61% of carers reported having been a carer for nine years or less 16% identified they had been carers for 10-14 years and the remaining 13% identified having spent 15 years plus as a carer.
- 54% of carers reported providing long term care with 23% providing short term care and 30% providing respite and short break care (note carers were able to list more than one type of care).
   32% identified they provide all types of care including long term, short term, emergency and respite.

It is positive to note that the vast majority of carers who completed the survey are being supported by a Fostering and Kinship Care Agency, only 37 carers out of the 760 who completed the survey identified they were not with an agency. The carer surveys continue to evidence that the majority of carers experience positive support through being attached to a Foster and Kinship Care Agency.

The 2018 survey has seen an increase in the number of carers who have been carers for longer than 10 years choose to engage in the survey, this was up by approximately 15% from FCQ's 2016 report. Whilst the majority of carers who completed the survey have been carers for less than ten years, this survey provides a good representation of views of carers across many years of experience.

<sup>\*\*</sup>Source: Department of Child Safety, Youth and Women 2018

# **Cultural Diversity**

As with the 2016 survey, there is a vast gap between the amount of carers who have identified as Aboriginal and/or Torres Strait Islander and the number of carers who have identified looking after an Aboriginal and/or Torres Strait Islander child throughout their carer journey. This of course continues to evidence the over representation of Aboriginal and/or Torres Strait Islander children in care who are being cared for by non-indigenous carers. In this survey 64 carers identified as Aboriginal and/or Torres Strait Islander and 443 carers advised they had cared for an Aboriginal and/or Torres Strait Islander child.

If Aboriginal and/or Torres Strait Islander children cannot be placed within kin or community in line with the Aboriginal and Torres Strait Islander placement principle, the sector has a responsibility to ensure that their cultural needs are being appropriately met through their placement. Unfortunately as with the 2016 Carer Survey results, this still does not appear to be reflected in practice.

Of the carers who stated they have cared for Aboriginal and Torres Strait Islander children, 59% stated they did not have a Cultural Plan for the child or young person in their care and 58% stated they had not had any Cultural Awareness Training. Furthermore 24% of carers reported not knowing what the Aboriginal and Torres Strait Islander Placement Principle means. These figures demonstrate that there has been no improvement and in fact an overall decline in results of 5-8% when compared to the 2016 survey results.

The introduction of new legislation on 29<sup>th</sup> October 2018, compels the Department to place Aboriginal and Torres Strait Islander children in a placement where there is 'demonstrated capacity' if having to place in a non-indigenous placement (Section 83 5 (d) (ii) states – 'if it is not practicable to place the child in the care of a person mentioned in paragraphs (a) to (c), a person who (11) has a demonstrated capacity for ensuring the child's continuity of connection to kin, country and culture'. This is further highlighted in Principles 5C (e) which states

'The principle (the connection principle) that a child has a right to be supported to develop and maintain a connection with the child's family, community, culture, traditions and language, particularly when the child is in the care of a person who is not Aboriginal or Torres Strait Islander'

Meeting the cultural needs of Aboriginal and Torres Strait Islander children requires a commitment from the entire safety and support network. Carers require a cultural plan they understand and are committed to meeting, they also require appropriate training to assist them to navigate the complexities of caring for a child from a different culture to their own. Carers require assistance to connect children and young people in their care to community in a meaningful way.

Carers were asked where they accessed the majority of cultural information and the majority of carers reported from family and friends (40%). In this survey it was positive to see an increase in carers seeking advice and support from community elders (29%). Other carers identified that their Foster and Kinship Care Agency was a source of support and advice (39%) and the RE (28%).

Carers provided over 370 comments relating to ways in which they meet the cultural needs of children placed in their care. All of these comments have been included in the respective regional reports. Overall these comments included carers understanding the importance of connection to family and community through supporting contact, taking children back to country and engaging with local elders where appropriate. Other themes included attendance at relevant cultural events, ensuring that books, art, music, dance and food are an everyday part of the carer family life, having children attend Aboriginal kindy programs and playgroups and carers themselves learning about the child's mob and community. Of concern was a number of carers who were of the view that given the young age of the child they had or did care for, that cultural considerations in their care of the

baby/toddler was not relevant. This demonstrates a real lack of understanding in the overall meaning of immersing a child in their culture. A baby or toddler can have their culture embedded into their everyday life through stories, song and art to name a few. These perceptions must be challenged by Safety and Support networks so that meeting a child's cultural needs regardless of culture is seen as something that is relevant from birth.

It is important given significant changes to the Act as stated above that carers who have identified they are able and willing to care for Aboriginal and Torres Strait Islander children who are non-indigenous are provided with an in-depth module of training that helps them to understand what the changes to the Child Protection Act means in practice. This is not only about their obligations to meet the child's cultural needs, but also in respect to understanding changes to the Act that promote Self Determination and family led decision making for Aboriginal and Torres Strait Islander families. This should cover matters involving the role of the Independent Entity, what it means to be a carer with Demonstrated Capacity, what is meant by Self Determination and family led decision making, the additional principles covered in the Act relating to Aboriginal and Torres Strait Islander families and the cultural considerations when making decisions around permanency for Aboriginal and Torres Strait Islander children. This module of training should be made mandatory alongside the other three modules in the first year of caring for those carers who wish to provide care for Aboriginal and Torres Strait Islander children who are non-indigenous.

# CALD (Culturally and Linguistically Diverse) Community

FCQ once again sought information regarding our CALD Community, only 31 carers who completed the survey identified from the CALD community. 62 carers identified they had provided care to a child from the CALD community. When asked if they had been provided with cultural awareness training and information, 79% stated they had not.

Given the increasing numbers of children and young people entering the care system from CALD communities, the sector has a responsibility to ensure that carers have the knowledge and training to provide culturally appropriate care. Once again the Care Team has a responsibility to meet the Standards of Care as outlined above; this includes meeting the cultural and ethnic needs of every child. This data evidences that there is much work to be done in this space.

# **Child Safety Services**

Carers were asked a range of questions relating to their experiences with Child Safety which are specifically outlined in the individual regional reports. Carers were provided options of answering 'always, mostly, sometimes, never or n/a'. FCQ kept the same options provided in the 2016 report following feedback from carers that in some instances with CSO's and CSSC's they had good experiences and others they did not. For this reason it was felt that providing options that reflected a carers experience across their years would be a more reflective and accurate record of carers' views.

With this in mind the following responses were provided in respect to the following question.

Are your satisfied that staff at your local office are;

Respectful	59% reported feeling always or mostly respected (64% 2016)
Treated as part of a team	37% reported feeling always or mostly part of the Team (42% 2016)
Considering your views	39% reported feeling that their views are always or mostly considered (42% 2016)
Consider your family as a whole	37% reported feeling that their family as a whole is always or mostly considered (40% 2016)
Are responsive to your calls and emails	43% reported staff are responsive to calls and emails (41% 2016) – question was worded differently in this survey, rather than asking if responses were within 24 hours, question was just asked whether response provided.
Provide a supportive environment	39% reported feeling mostly or always supported by their local CSSC (42% 2016)

As demonstrated in above data, there has been no positive identified areas of change for carers since the 2016 Carer Survey with less carers reporting feeling mostly or always satisfied in all areas other than being responsive to calls and emails which was up slightly.

41% of carers identified overall they feel mostly or always satisfied with Child Safety's respect in advocating on behalf of children and young people in their care for resources, goods and services. Carers are assessed against their ability to undertake this very task in their initial approvals and subsequent renewal of approvals. It is absolutely vital that carers are encouraged to advocate on behalf of children in their care with an understanding that whilst all stakeholders may not always have the same view, all views can always be respected and responded to appropriately.

34% of carers identified that they were mostly or always satisfied in respect to their CSO letting them know when they are going to be away on leave or unavailable. Whilst it is acknowledged that unplanned leave can occur, carers should be afforded the knowledge of any planned leave. This can be an extremely frustrating area for carers when they are not being responded to and have no idea as to why not. This could be one of the reasons that contributes to a carer not feeling respected, valued and/or supported.

# **Child Safety Processes**

Carers were asked a range of questions relating to Child Safety processes and their satisfaction. Once again carers were provided options of 'always, mostly, sometimes and never'

Approval and Renewal of Approval	57% always or mostly satisfied (63% 2016)
Placement Agreement completion	37% always or mostly (44.5% 2016)
Home visits being completed by CSO	44% always or mostly (43% 2016)
Ability to engage in case plan for children in care	40% always or mostly satisfied (35% 2016) – question worded differently to 2016 which was focused on ability to engage in FGM rather than case plan

There has not been much shift from 2016 with the majority of carers reporting feeling dissatisfied with Placement Agreement completion and their engagement in case plan. Carer's rights to be included in both these processes are reinforced through legislation i.e. Child Protection Act 1999, 51W (1) (d) – speaks to participation in case planning and specifically provides an example of an approved carer and Section (84) which speaks to Placement Agreements. Participation of carers in these crucial processes are also reinforced through Departmental Policy and Procedure and the Statement of Commitment. All of these platforms recognise the crucial role that carers play in children and young people's lives in their 24/7 care of them and therefore the criticality of consultation through these processes.

It is acknowledged that the question relating to home visits was changed slightly from 2016, rather than asking whether carer was satisfied with home visits being completed monthly, the question was instead asked 'home visits being completed by CSO'. This question now raises some gaps as it is not known whether carers have responded to the quality or timeliness of the home visits.

# **Standard of Care/Harm Report Process**

Carers were asked a range of questions relating to their experiences of Standard of Care Reviews and Harm Reports. For the purposes of this section, those carers who felt the question was relevant to them have been analysed.

Carers were asked if they were satisfied or not satisfied – the following responses were provided;

	Satisfied	Not Satisfied	%
Standard of Care	71	128	35 % Satisfied
Review process			53% Not Satisfied
			(12% more carers less satisfied than 2016)
Harm Report process	51	87	37% Satisfied 63% Not Satisfied (15% more carers less satisfied than 2016)
Communication during process	67	137	33% satisfied 67% Not Satisfied

			(11% more carers less satisfied than 2016)
Sensitivity during process	77	127	38% Satisfied 62% Not Satisfied
process			(10% more carers less satisfied than 2016)
Information provision during process	59	143	29% Satisfied 71% Not Satisfied (8% more carers less satisfied than 2016)
Timeliness of process	56	149	27 % Satisfied 73 % Not Satisfied (14% more carers less satisfied than 2016)
Review of Process if not satisfied with outcome	38	102	27% Satisfied 73% Not Satisfied (19% more carers less satisfied than 2016)

The further decline in satisfaction rates since the 2016 survey across the board in respect to the Standard of Care process highlights the needs for review of policy, procedure and practice across Qld. It still does not appear that the intended practice from the creation of the policy and procedure in 2013 has in fact taken place. CSSC culture continues to play a crucial element in lived experience of SOC reviews or Harm Reports for carers. Carers will continue to leave the system if responded to in a way that is punitive and blame driven through the Standard of Care process. This procedure recognises the shared responsibility needed in tackling Standard of Care matters, however in FCQ's experience practice can still drive a blame driven approach that is punitive in nature.

# Confidentiality

It is important that carers have all the relevant information in order to provide safe and appropriate care to not only children and young people in care, but other children and household members too. It is also important that carers and the care team as a whole have a comprehensive understanding of the confidentiality provisions of the act (Child Protection Act 1999, Section 186, 187, 188) and what this means in terms of providing day to day care. It is just as important that all workers in the Child Protection sector also have a comprehensive understanding and these understandings are shared.

Carers were asked a range of questions relating to confidentiality and the sharing of information;

- 61% of carers felt that they were only sometimes or never provided with information relating to the child or young person at the time of placement – there was an increase of 7% from the 2016 survey of carers feeling this way
- 63% of carers felt that they were only sometimes or never provided with information about a child or young person as it became available to Child Safety. This figure represented a 2% increase from the 2016 survey of carers feeling this way
- 57% of carers reported only sometimes or never feeling satisfied in relation to safety checks being completed prior to their identifying information being given out. This figure represented a 6% increase of carers feeling this way

76% of carers felt that they did have a good understanding of the confidentiality provisions
of the act and how this related to them as carers. This figure represented a 1% increase in
carers feeling this way

It remains a concerns for FCQ that carers are identifying they are not receiving all the information at the beginning of a placement or as the information becomes available to Child Safety. Carers require information to provide a care environment that takes into account a child's trauma history, not only in terms of providing safe and appropriate care to the child in question, but also to other children in the placement or biological children. Child Safety have a legal responsibility as per Section 83(A) of the Child Protection Act (1999) to provide information to carers that informs placement matching. The need to share information is also contained in the Statement of Commitment and Departmental procedure. It is understood that Child Safety is working with key stakeholders to implement recommendations that came out of the Queensland Family and Child Commission Review that should enhance placement matching and hopefully allow for better sharing of information.

Recommendation 26 of the Queensland Family and Child Commission, Blue Card and Foster Care Systems Review 2017 states -

It is recommended that the Department of Communities, Child Safety and Disability services puts in place checks and balances confirming Child Safety Services and foster and kinship care services are meeting their obligations to provide carers with information about children that will

- help carers make an informed decision about accepting a placement
- help the carers meet the children's needs
- protect carers and members of their household from potential harm

Within two years of the date of this report, the Department of Communities, Child Safety and Disability Services should undertake a performance audit of this part of the annual program of audit referred to in recommendation 6

### **Financial**

Carers were asked a range of questions relating to their satisfaction around financial matters.

Generally in past carer surveys this has been an area of high satisfaction and whilst this year there is still an above average satisfaction rate, it has come down from the 2014 and 2016 Carer Surveys. In 2014 carers reported an 83.6% satisfaction rate, two years later in the 2016 Survey carers reported a 65.04% satisfaction rate and in now in the 2018 Carer Survey, carers are reporting a 59% satisfaction rate, a further decline of 6%.

Carers were also asked about their satisfaction in respect to CSNA and HSNA requests being met, of those who felt that the question was relevant to them (394 carers) 62% reported not feeling satisfied with this area. These figures represented a further 9% decline in satisfaction from carers since the 2016 Carer Survey.

In respect to Child Related Costs (CRC's), carers were asked whether they were satisfied in relation to a range of CRC's, only those who felt the question was relevant to them has been included in the following and these results have then been compared with the 2016 Carer Survey to provide some additional context and meaning;

CRC	Percentage 2018	Percentage 2016
Medical/Health/Therapy	Not satisfied – 63%	Not satisfied – 57%
Kilometric Allowance (over 250km allowance)	Not satisfied – 58%	Not satisfied – 63%
Educational Costs	Not satisfied – 71%	Not satisfied – 61%
Client Support	Not satisfied – 67 %	Question not asked

It is disappointing to see such high rates of dissatisfaction amongst carers with regards to CRC's – in all areas, other than kilometric allowance the dissatisfaction rates have increased since 2016.

Carers were asked in the 2018 survey about their provision of Dual Respite which has not been asked in previous years. 43% of carers identified not being satisfied in this area. FCQ has raised our frustrations with the provision of Dual Respite over many years, issues centre on the inconsistency across the State regarding the application of Dual Respite. FCQ is of the firm view that policy and procedure surrounding Dual Respite should reflect guidelines for Managers that provide consistency for carers in decision making. At the present time a carer with the exact same circumstances could be provided with very different outcomes in relation to their ability to access Dual Respite dependant on the CSSC they are attached to.

On 2<sup>nd</sup> July 2018, the Australian Federal Government through the Department of Education and Training extended the Australian Child Care Subsidy at Risk category to include all children in care across Australia. This was a monumental moment for the Child Protection System, unfortunately however the knowledge around the implementation of this was somewhat limited with communication from Commonwealth to State slow and therefore the messaging to carers in the community has been somewhat limited. FCQ put the question to carers in the 2018 survey about whether they were satisfied with the provision of required documentation from Child Safety in order for them to access the Australian Child Care Subsidy – 363 carers felt this question was relevant to them and of these carers 56% reported not feeling satisfied in this area. It is important that the sector continues to educate each other in terms of the use of this subsidy for children and young people in care as it could absolutely make a difference in terms of carer capacity, retention, placement stability and more.

Carers were also asked if they were encouraged to apply for ex-gratia payments; only 55 carers reported that they were satisfied in this area, 412 carers felt this question was relevant to them meaning that 87% of carers across the State reported not feeling satisfied in this area. It is interesting to note that the policy and procedure for this area remains locked on Child Safety's website making it difficult for carers to access specific information about their rights relating to these applications. FCQ recommended in the 2016 survey that if the policy and procedure relating to Special Payments was to remain locked, that a fact sheet should be developed for carers information, it is acknowledged that information relating to ex-gratia payments can now be found on the new carer website and FCQ will promote the link to this information for carers through our means of communication.

Finally carers were asked about their satisfaction in relation to information provision relating to Child Related Costs – of those carers who felt the question was relevant to them, 67% reported feeling dissatisfied in this area.

# Local Practice in CSSC

Carers were asked a range of questions relating to their interactions with their CSO and CSSC. Communication is a key factor to carers feeling like part of a care team, if communication is healthy and transparent, carers are more able to cope with some of the other challenges faced with parenting in the context of a statutory system.

Carers want to know when there is a new CSO through being told by the CSO who is leaving, not by calling the CSSC to find out they have already left. Only 27% of carers reported always or mostly feeling satisfied in the way a changeover of CSO occurs for children in their care. Carers then report only a 28% satisfaction rate with CSO's knowledge of the history of the child in their care, this figure represents a further 8% decline in dissatisfaction from the 2016 survey. Partners in Care which ran throughout 2017 highlighted the importance of re-establishing relationships between CSO's and carers which seemed to have been lost as an unintended consequence of Foster and Kinship Care Agency support. It would appear that over the years a culture had been developed whereby the view was that carers receive their support through agencies only. Meeting the needs of children in care will always require a consistent care team approach from all stakeholders, the relationship between CSO's and carers is critical as Child Safety remains accountable for statutory case planning. Good case work involves key stakeholders having frequent and open communication where relationships are built and maintained. The Partners in Care initiative will continue to address this area of growth required in the sector as Child Safety demonstrate a real commitment to reestablishing strong and effective relationships with carers.

Case Plans and Placement Agreements are both areas where carers should play a key role in the development and implementation. Carers were asked about their satisfaction with the timeliness and provision of approved case plans, only 27% of carers reported feeling always or mostly satisfied in this area, with 70% identifying they were only sometimes or never satisfied and 3% feeling the questions was not applicable to them. In order for carers to actively engage in case plans and assist the department and family to work towards reunification as per the Principles of the Child Protection Act (1999), a carer must have an understanding of the case plan goals. The Child Protection Act (1999) allows for the sharing of case plans with 'anyone else affected by the plan or who the Chief Executive considers should receive a copy' Section 51 (Y). Although the entire case plan may not be relevant to the carer, the case plan activity relating to the child whom they are providing 24/7 care to is. Carers are assessed against many criteria when applying or reapplying to be a carer, one of these is their ability to be 'able to help in appropriate ways towards achieving plans for a child's protection'. In order to help to achieve this for children, carers must have access to relevant information.

FCQ is currently developing a training 'Achieving Permanency' that will address changes to the Child Protection Act and assist carers to understand their roles and responsibilities in case planning for children and young people. Changes relating to restrictions on the number of Short Term Orders that can now be made by the Children's Court means more so than ever before that the safety and support network surrounding a child in care, inclusive of birth parents, carers, departmental staff, agency staff, therapeutic services and stakeholders, must work together in a way that is collaborative, inclusive and consistent.

In the 2016 report carers overwhelming provided feedback that they were not satisfied with the level of information provided by either their local CSSC's or regional offices, with around 80% of carers expressing only feeling that information was forth coming either sometimes or never. The Partners in Care initiative provided an opportunity for carers to come together and be heard on those matters that challenged them as carers and this area was highlighted as a concern for carers across all areas. Lack of communication links to a carers feeling of being devalued and unsupported in their role. The figures for 2018 are unfortunately no better than 2016 with 77% of carers

identifying they only feel satisfied sometimes or never in respect to information provision from their local CSSC and 86% feeling only sometimes or never updated about regional department updates. It is hoped new initiatives such as the Carer Connect App will in time help to keep carers updated in respect to matters relating to CSSC and regional/department change. What must be noted here is that often carers are simply advised through one communication means only, this could be for example by email. There can be an expectation from the sector that if an email has been sent out, then a carer is informed. This is not a realistic expectation to have and does not take into account the individual support and learning needs of over 5200 carers across Qld. Whilst email may be an effective means of communication for some carers, it simply will not be for others and therefore the intended message will never be received. CSO and Agency workers should have a working knowledge of communication style that best works for their individual carers and communicate through this method, this may mean a text message, an email or a call. The Carer Connect App together with the introduction of the carer information website provides further platforms for carers to access information and demonstrates a commitment from Child Safety to keep carers informed.

Carers were asked if they felt supported to access respite, whilst 19% felt that this question was not relevant to them, 51% stated they only felt supported some of the time or never to access respite – this dissatisfaction rate has increased by 8 % since 2016. As in 2016 we are still in a space where a complicating factor in this area is the lack of respite placements available, so whilst Child Safety may actually support the concept of respite, it could very well be a matter of not being able to find appropriate options.

Carers were asked about family contact and whether consultation takes place, 63 % of carers reported feeling only sometimes or never satisfied in this area (increased dissatisfaction of 7.5% from 2016 survey). The issue of no consultation around the decisions relating to family contact continues to be a consistent theme for FCQ from carers contacting the office. This particular question aligns with questions regarding whether a carers whole of family is considered when decisions are made, the matter of contact can be the very source of conflict in this area as carers are told about when contact will occur, sometimes without any thought to the carer's own family commitments. Again these figures do not represent a culture that is considerate of the Statement of Commitment which recognises a carers views as being important to seek in decision making given the 24/7 care provided by them and which also recognises the importance of a carers family being recognised and respected when making decisions about children in care as follows:

- 6.1 Foster and kinship carers have the right to participate in the decision affecting the lives of the children or young people in their care and have their knowledge and opinions inform decision making processes to ensure the best interests of the child
- 6.3 Foster and kinship carers' right to feel supported; to have the needs and rights of their own family recognised and respected when considering decisions regarding the child or young person in their care

#### Education

# Please note – 202 carers skipped this question with 558 answering

Overall 60.3% (60.9% in 2016) of carers reported having an Education Support Plan (ESP) for children and young people in their care.

- 57 % felt always or mostly satisfied with their inclusion in the process (60.4% 2016)
- 54% felt always or mostly satisfied with the timeliness of the plan (56.7% 2016)

- 55% felt always or mostly satisfied with the finalised plan (56.6 % 2016)
- 50% felt always or mostly satisfied with the review of the plan (51.6% 2016)
- 49% felt always or mostly satisfied with the implementation of the plan (50% 2016)

Please note that between 19% - 21% of carers felt that this question was not relevant to them, therefore the dissatisfaction rates where more so between the 20-30%. As evidenced above, there has not been much shift in this area since 2016 for carers.

These are figures that need to be shared with the Department of Education to help them understand where there may be gaps for carers and the children they care for.

# **Child Health Passports**

#### Please note 214 carers skipped this question with 546 answering

Of those who answered only 49% identified they have a Child Health Passport for children in their care

- 34% felt always or mostly satisfied with their inclusion in the process (43% 2016)
- 28% felt always or mostly satisfied with the support provided (34% 2016)
- 28% felt always or mostly satisfied with the process itself (36% 2016)
- 26% felt always or mostly satisfied with information provided (35% 2016)

Please note that between 26-27% of carers identified that the above question was not applicable therefore leaving dissatisfaction rates between 40-50%.

FCQ has been part of the Executive Committee for the Strengthening Health Framework and it is hoped that this system will be a much more effective and beneficial system that will actually respond to the health needs of children and young people in care in line with the National Clinical Assessment Framework for Children in Out of Home Care developed through the Australian Government, Department of Health. Key elements to this framework include:

- A Preliminary Health Check that commenced as soon as possible and ideally no later than 30 days after entry into out of home care to determine immediate areas of concern
- A Comprehensive Health and Developmental Assessment that should be completed within 3 months of placement
- Further specific assessments and management following the Preliminary Health Check and/or the comprehensive Health and Developmental Assessment in accordance with the needs of the individual child or young person

The National Framework also speaks of development of Health Management Plans, follow up monitoring and having specific workers within the sector that are assigned to specifically navigate the health needs for children in out of home care. FCQ is very supportive of the Strengthening Health Assessments initiative and look forward to seeing the difference it will make in the lives of children and young people in care.

#### **Placement Agreements**

#### Please note that 214 carers skipped this question with 546 answering it

Carers were asked whether they had a current Placement Agreement that had been generated from a placement meeting.

Overall 61% of carers stated that they did have a current placement agreement (63.9% 2016)

- 53% felt always or mostly satisfied with inclusion in process (56% 2016)
- 50% felt always or mostly satisfied with the process (53%)
- 49% felt always or mostly satisfied with the outcomes (50%)
- 38% felt always or mostly satisfied with follow up (42% 2016)
- 38% felt always or mostly satisfied with review process (41% 2016)

Please note that around 9-14% of carers reported this question was not applicable to them leaving between 36-51% of carers not feeling satisfied in this area.

77% of carers reported they did not receive a copy of the minutes from the placement meeting (74% 2016).

Placement meetings and the subsequent minutes are crucial processes and documents that provide clear direction and understanding to carers about expectations of the placement. This is a vital communication tool and if not completed and/or communicated appropriately subsequent to the meeting — we will continue to see situations where there is misinterpretation and conflict. Furthermore carers will be forced to contact their agency and department more because they simply do not have the information in front of them to go by.

#### Centrelink

Carers reported low satisfaction rates in this area, demonstrating a lack of understanding and communication. This can be a very complex area to understand and it is accepted that some Child Safety staff may also struggle to understand the complexities of the system.

- 76% of carers reported feeling that information from the department about Centrelink only sometimes or never happens (62% 2016)
- 73% of carers reported feeling that support provided by department to access Centrelink services only sometimes or never happens (64% 2016)
- 72% of carers reported they only feel satisfied sometimes or never in respect to the ease of access to Centrelink services (61% 2016)
- 70% of carers reported they only sometimes or never feel satisfied in respect to timeframes for provision of Medicare Cards (65% 2016)
- 63% of carers reported they only sometimes or never feel satisfied in respect to timeframes for provision of Health Care Cards. (58% 2016)

FCQ was recently contacted by the Australian institute of Family Studies. Dr Deborah Kirkwood who is a Senior Researcher for the Child, Family Community Australia sector spoke to FCQ about what services would make a difference to our sector. FCQ raised the need for there to be a dedicated resource to assist carers across Australia caring for nearly 50,000 children in out of home care to understand their entitlements as carers. This resource should include information relating to the exemption to work, access to Medicare and Health Care Cards, Family Tax Benefits, the Australian Wellbeing Child Care Subsidy and all other matters relevant to providing foster care and formal

kinship care through Child Protection orders in Australia. There is some fundamental support that is required for carers during the initial stages of placement around financial matters and practical matters such as Medicare and Health Care Cards. Centrelink can be a very difficult system to navigate and carers and workers alike often are provided with different responses depending on who they speak to. This resource would greatly assist carers, but also would provide clear guidance to the sector as a whole. FCQ would welcome the sectors support in continuing to advocate for such a resource to be developed.

# Support

Carers were asked a range of questions relating to where they access their support from. Carers were able to tick more than one source of support; mostly carers ticked their fostering agency at 61% (64% 2016). However also high up on the list was family and friends 62% (59% 2016), other carers 34% (35% 2016) and then Child Safety 17% (22% 2016). 17% of carers also stated that they mostly contact FCQ and/or FAST Representatives for support (16% 2016).

In relation to where carers access their information from, once again fostering agencies were the most highest source 68% (72% 2016), with other carers coming in second, 31% (28% 2016) CSSC 18% (22% 2016) and FCQ/ FAST 17% (18% 2016).

# Fostering and Kinship Care Programs

Carers were asked a range of questions relating to the support provided by their Foster and Kinship Care Agencies. 96% of carers reported being supported by an agency and reported the following in relation to their experiences of support;

- 79% reported feeling always or mostly satisfied with the regular support visits (at least monthly) (84% 2016)
- 76% reported feeling always or mostly satisfied with response provided by their agency to their (the carers) contact (83% 2016)
- 76% reported feeling always or mostly satisfied with support to complete paper work (80% 2016)
- 76% reported feeling always or mostly satisfied with information provided (80% 2016)
- 68% reported feeling always or mostly satisfied in respect to access to support networks (76% 2016)
- 72% reported feeling always or mostly satisfied in respect to access to training (77% 2016)
- 69% reported feeling always or mostly satisfied with the on call service (9% felt this was not relevant to them leaving 22% feeling only sometimes or never satisfied) (77% 2016)

As shown above, there has been a decline in satisfaction rates for carers when providing feedback in relation to the services provided by their Foster and Kinship Care Agencies. Whilst the vast majority of carers are still reporting satisfaction always or mostly in these areas, the decline should be taken note of by agencies and conversations during home visits could explore with individual carers how they feel their support needs are being met and what could be done to improve if needed, particularly in the area of providing access to support networks.

FCQ provides a wide range of supports to Fostering and Kinship care Agencies across Qld and our role has continued to grow. FCQ receives daily phone calls and emails from Foster and Kinship Care Agency staff across Qld seeking legislation, policy and procedural advice. FCQ also plays a significant role in the professional development of Foster and Kinship care staff and assist in the professional

development of carers attached to their programs. FCQ continues to reach the staff from over 80 Foster and Kinship Care Agencies across Qld via email with all relevant information that is then able to be passed onto their carer communities.

# Foster Care Agreements

Carers were asked if they had a current Foster Care Agreement. 75% of carers stated they did with 16% stating they did not and 9% stating they did not know what one was. Given that Kinship Carers are not required to have a Foster Care Agreement it is likely the 24% that stated they did not have one or did not know what one was would be mostly kinship carers.

Carers were then asked a range of questions as to the value of Foster Care Agreements;

- 74% of carers felt that the Foster Care Agreement accurately reflected the needs of their family (78% 2016) (9% felt this question was not relevant meaning only 19% felt that the FCA did not reflect the needs of their family)
- 71% felt that the FCA accurately represents learning and support needs (78% 2016) 21% felt that it did not. 64% felt that it had then gone on to be a useful tool to assist with the actual learning and development (71% 2016)
- 62% felt that the FCA has been a useful tool to establish appropriate placement options (72% 2016)

It is vital that carers are provided with relevant and up to date training that reflects the placement types they have identified will match their family.

# **Training**

Carers were asked a range of questions relating to their experiences of training. In previous years, this has been an area where carers have shown high satisfaction rates. 61% of carers have told us they always or mostly feel satisfied with the relevance of training (63% 2016) and 66% of carers were always or mostly satisfied with the amount of training offered, 66% (73% 2016).

Carers expressed less satisfaction with the appropriateness of the time of day/night training was offered with only 51% feeling only sometimes or never satisfied in this space. 50% of carers identified that they were only sometimes or never satisfied with the provision of support to access child care for the purposes of training (47% 2016), 32% identified they were mostly or always satisfied with 17% identifying this question was not applicable to them.

It is important that Foster and Kinship Care Agencies offer a range of training opportunities to carers that assist them to provide care for the increasingly complex behaviours of children presenting in care. Carers then require follow up home visits where training sessions are discussed and reflected on to ensure that carers have understood the key concepts of the training and understand application of the acquired knowledge in their day to day caring roles.

QFCC have made recommendations relating to carer training in their 2017 review as follows:

#### Recommendation 29

It is recommended that the Department of Communities, Child Safety and Disability Services revises all aspects of carer training to make sure:

• It is reflective of current research and evidence

- It provides carers with the skills to manage complex behaviour and trauma including modules on
  - Understanding the impacts of trauma and providing trauma-responsive care
  - Risk factors for child abuse in care
  - The principles of child safe organisations
  - Cultural competency in all pre-service training) tailored to specific culture and language groups where possible

FCQ supports this recommendation and the carer survey demonstrates further the desire from carers to receive up to date relevant training.

# Complaints/Appeals

Carers were asked a range of questions relating to their knowledge and experience of the various complaint and appeal processes available to them in the Child Protection System.

The following percentage of carers reported knowledge and then access of these complaint/appeal processes.

Complaint/Appeal Process	Knowledge	Accessed
Regional Complaints Office (Child Safety)	45%	17%
Central Complaints Office (Child Safety)	28%	8%
Queensland Family and Child Commission	28%	2%
QCAT	43%	9%
Queensland Ombudsman	40%	3%
Crime and Corruption Commission	22%	2%
Office of the Public Guardian	63%	21%

17% of carers reported never having heard of any of the complaint and appeal processes and 62% reported not having ever accessed any of them.

Of those carers who had accessed a complaint or appeal process, 61% reported they felt heard during the process (56% 2016), however only 44% reported feeling satisfied with the outcome achieved (42% 2016).

The Office of the Public Guardian appears to be known by the majority of carers and accessed as a way to raise issues relating to concerns carers may have in relation to decision making for children. FCQ have found the Office of the Public Guardian to be proactive in listening to carers worries about decision making for children, whilst remaining child focused and ensuring that advocacy undertaken on behalf of children when raised by carers is about meeting the needs of the children – not the carer.

# Foster Care Queensland

Carers were asked a range of questions relating to their experiences with FCQ;

- 67% of carers reported satisfaction with information provision about FCQ, 11% felt this question was not relevant to them (67.7 % 2016)
- 63% of carers reported they had knowledge and understanding of the services provided,
   11% felt this question was not relevant to them (64% 2016)

Of those carers who felt the questions were relevant to them, the following feedback was provided in relation to FCQ

- 71% reported feeling mostly or always satisfied with access to FCQ staff (78% 2016)
- 71 % reported feeling mostly or always satisfied with timeliness of response from FCQ (74% 2016)
- 62% reported feeling mostly or always satisfied with outcome achieved (67% 2016)

FCQ continues to have a rostered on call system which means that carers will be responded to on the same day in respect to any new cases. It is a concern for FCQ that rates of satisfaction has declined across areas of timeliness of responses and access to FCQ staff. As of January 2019, FCQ will have an additional Case Officer position that will specifically be responding to kin matters, this will once again take pressure off Case Officers who continue to have caseloads that can fluctuate to the 40's at any given time. Furthermore, funding that has been provided to assist carers to access legal advice will take further pressure off Case Officers who in matters relating to QCAT can spend entire days out of the office on one case leading up to a complex QCAT matter. This will bring FCQ's staffing to three case officers for general carers in Brisbane and one in Townsville and one case officer for kin matters for across Qld.

Carers were then asked a range of questions in relation to our FAST program; those carers that felt the question was relevant to them provided the following feedback to FCQ in relation to FAST;

- 68% reported feeling satisfied in relation to information provision about the FAST program (73% 2016)
- 65% reported feeling satisfied in relation to knowledge of their local FAST rep (68% 2016)
- 41% reported feeling supported to access their local FAST rep from Child Safety (55% 2016)
- 56% reported feeling supported to access their local FAST delegate from their fostering and kinship care agency (66% 2016)
- 69% reported feeling mostly or always satisfied with advice provided by FAST (76% 2016)
- 66% reported feeling mostly or always satisfied with support provided by FAST (76% 2016)
- 57 % reported feeling mostly or always satisfied with advocacy provided by FAST (71 % 2016)
- 55% reported feeling mostly or always satisfied with outcomes achieved with FAST (67% 2016)

It was disappointing to see a decline in satisfaction across all areas in respect to the FAST program, in looking at the 90 plus comments from carers to get some idea about why this might be the case, it is evident that there are many myths being attached to the FAST program that may be precluding carers from accessing the service or a lack of understanding of the actual role, i.e. comments referring to FAST Reps being 'employed by Child Safety' so not to use them, comments relating to carers being specifically told by CSO's to 'disassociate with the FAST Rep' and comments from many carers expecting advice that is different to what is contained in policy and procedure as they already have access to that. FAST Reps will always only provide advice that is accurate and reflects what is the current policy, procedure and legislation. It is never the role of a FAST Rep to take 'sides' in matters relating to support and advocacy, rather to ensure that carers have all the accurate

information and are afforded a fair and just process. It is evident that more education needs to occur in this space to assist the sector to have a true understanding of the FAST program and the benefits it can create in carer communities.

In 2016, FAST Reps launched a Facebook page that aims to provide accurate advice relating to policy, procedure and legislation to carers across Qld. This page now has over 1300 members and has resulted in many great outcomes for carers and used as a platform to share important information such as the Australian Child Care Subsidy at Risk scheme. With FAST Reps having personal experience of accessing this, it provided a great source of information to carers who were struggling with the process of having it approved through their Day Care.

Given the introduction of social media as a way of carers accessing FAST, the 2018 Carer Survey also asked carers how they mostly access FAST. 44% advised via phone, 18% via email and 37% via social media. These results definitely demonstrate that the social media means of communication is an effective and well used method of communication for carers across Qld.

Carers can sometimes access FCQ and FAST with a desired outcome they want achieved, this could be to have children returned, to have a SOC matter overturned, or to have CSNA reinstated. FCQ and FAST will only provide advocacy that fits with legislation, policy and procedure, therefore we will advocate a process, and this process may not always result in the desired outcomes for carers which can be difficult at times for the carer.

#### Partners in Care

Following the release of FCQ's 2016 Carer Survey, Child Safety made a commitment of further exploring the areas of concerns highlighted in the report. Partners in Care was established across Qld with the intended purpose of providing carers with a platform to discuss their worries about the system in more depth, identifying areas of strengths within Child Safety and help identify possible solutions. 17 forums took place across Qld with 424 carers in total attending, Regional Action Plans have since been developed which takes into account all the feedback from carers and some initiatives are already in place i.e. Carer Connect App and the newly developed Carer Website.

It must be noted that the Regional Action Plans are in their infancy and must be provided with the time in order to achieve outcomes and results. This carer survey should not place Child Safety on a completely new track, rather it reaffirms what carers have said throughout Partners in Care and therefore reinforces the need for all regions to commit to the implementation of their plans.

Carers were asked a range of questions relating to the Partners in Care initiatives, with the following results

- 105 carers who completed the Carer Survey identified they had attended a Partners in Care workshop
- 138 carers identified they had seen/received communication about Partners in Care since 2017 (396 reported they had not and 226 skipped this question)
- 67 carers reported noticing a positive difference since Partners in Care, 290 reported they have not and 403 skipped this question
- 320 carers said they would participate in future forums similar to the Partners in Care Workshops, 95 said they would not and 345 skipped this question

It is promising to see the amount of carers who have identified they would like to participate in Partners in Care type workshops in the future. This demonstrates a commitment to be part of the solution.

# **Looking Forward**

Carers were then asked a range of questions relating to their future as carers. 86% of carers recorded that they intend on fostering for three or more years, 10% said only for another year and 4% for another 2 years.

When asked whether there was anything that would influence this decision, 47% of carers stated that there would be, and carers were then able to provide comment. 295 carers provided comments on this particular question, and all comments are included in individual region reports, but the overall theme that came across as to what may be some things that would change this decision included:

- More support for carers
- Less pressure on carers in respect to appointments understanding carer families commitments including work etc
- Assist carers financially when able to view allowances as entitlements the same as wages
  are entitlements for workers in Child Safety
- Less swapping of CSO's and more staff on after hours
- Child Safety to listen to carers and let them advocate for children
- More communication from Managers and Team Leaders
- Access to practical support in instances where child has been suspended for example

Carers were then asked if they had suggestions for Child Safety and additionally if they had two things that they could change about the system, what would these things be. Once again the responses to these questions can be found attached to the individual region reports.

Finally carers were asked whether they would advise a friend to be a carer, 49% stated yes (59% 2016) and 51% stated no. All sectors understand word of mouth to be the most powerful source of marketing – FCQ's Exit Reports consistently highlight that carers are not leaving the system because of the complexities of children, rather because of the complexities of parenting within a statutory system. In the majority of cases, carers will be drawn to fostering for child focused reasons, this will continue to be the primary motivation for carers who are retained within the system, however if the system continues to challenge them in ways they are not able to cope with and in ways that start to impact on their own family, carers will choose to leave the system.

The system will never be perfect; this is a system where a statutory body parents children alongside birthparents and carers, all of whom are likely to have different views, conflict is common, emotion will be high and all involved will think that their view is the right view. Ultimately however, the most affected people in this system, are the children and young people and it is for this reason that whilst we acknowledge we won't have a perfect system, we strive towards a system that brings about the best possible outcomes for children and young people. This system requires dedication and commitment from a wide range of people – one of whom are volunteer carers. The simple reality is that in Qld we rely entirely on a volunteer system to provide family based placements to over 9000 children, without this system we would revert back to a system that evidence clearly shows is highly detrimental to children and young people. If you ask carers what they want most, you will hear a common response; they just want to be able to get on with caring for children and young people because that is what they signed up to do, the system can make this a much easier role by supporting carers to do just that, by respecting their role and valuing their opinion.