FOSTER & KINSHIP CARERS SURVEY 2018 REPORT

South West Region

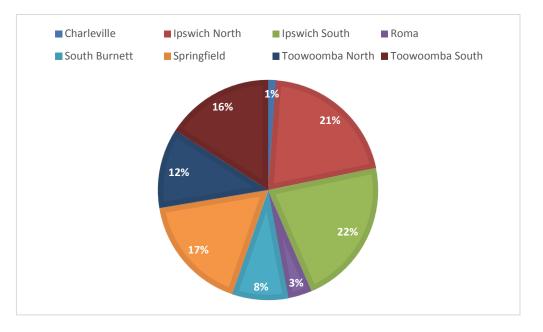


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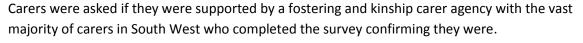
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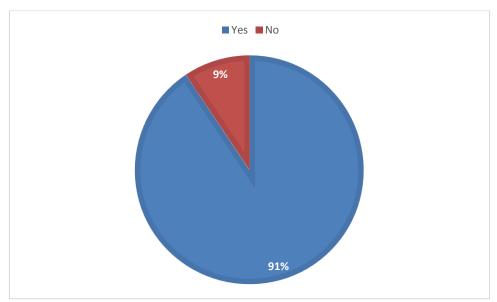
About the Carer

In South West 170 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.

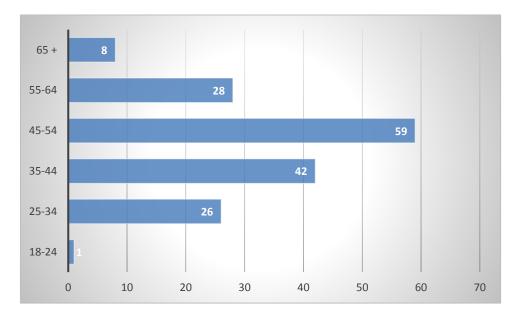


Of the 170 responses in South West Region, 121 identified as Foster Carers (71%), 40 identified as Kinship carers (24%) and 3 identified as provisionally approved carers (5%).



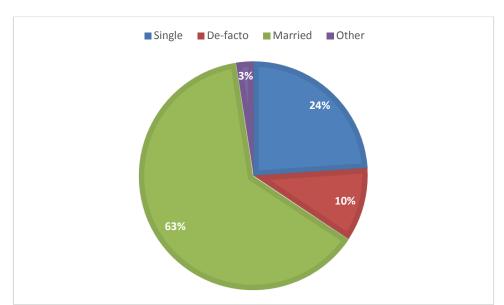


Carers were asked to identify the age group they fitted into.

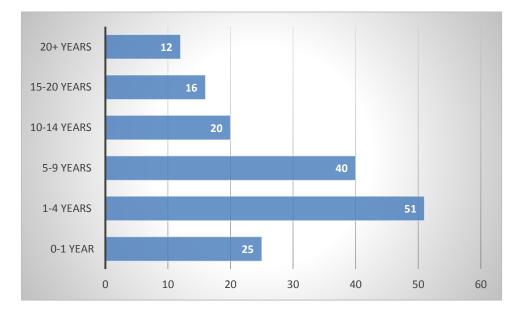


Aboriginal and Torres Strait Islander

Seventeen carers in South West who completed the survey identified as Aboriginal. No carers identified as Torres Strait Islander and no carers identified as Aboriginal and Torres Strait Islander.

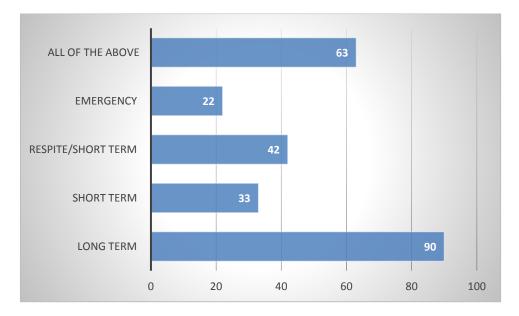


Relationship Status



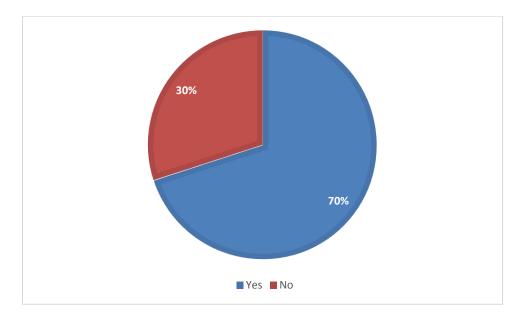
Carers were asked how many years they had been providing care for.

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

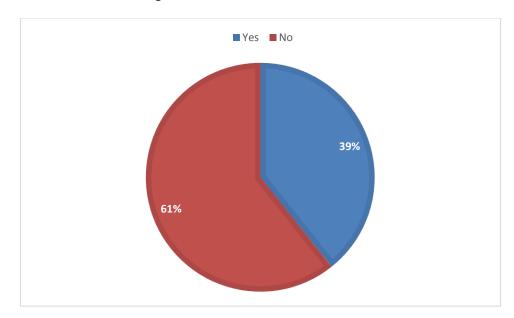
Carers were asked a range of questions relating to care of Aboriginal and Torres Strait Islander children as follows:



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

Given that only 17 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 34% answered yes to this question, leaving 66% 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.

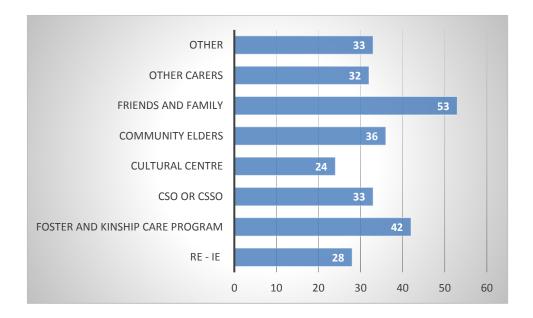


Carers were then asked if they were provided with cultural awareness training to assist them to care for a child who identified as Aboriginal and/or Torres Strait Islander.

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 77% confirming understanding and 23% 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.

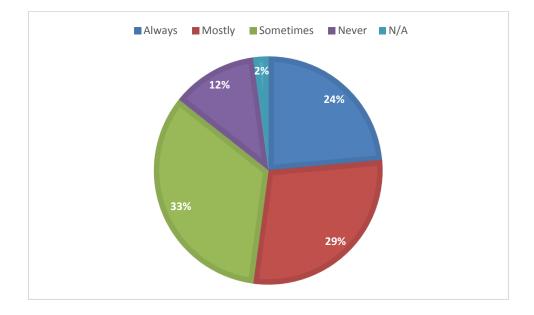


CALD Community

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.

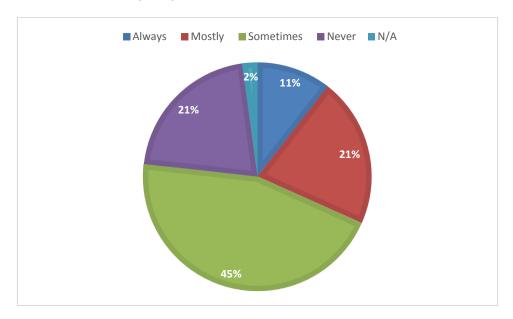
Just 4% (5) of carers who completed the survey in the South West Region identified from a CALD community and 10% of carers in South West who completed the survey reported they either were or had provided care to children who were from the CALD community. Carers who had provided care to children from a CALD community were asked whether they were provided with appropriate training to assist them to provide culturally appropriate care. Unfortunately only 20% advised that they had been provided with training.

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



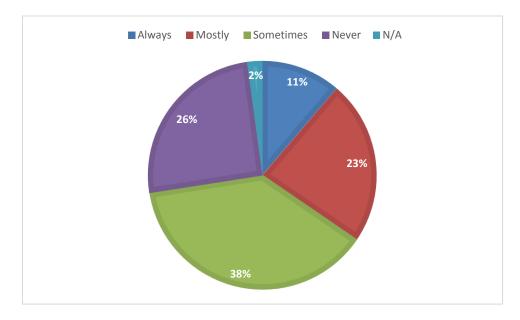
Carers were asked whether they felt respected by their CSSC.

A total of 53% of carers reported feeling respected either always or mostly which is positive; that does leave 46% of carers however who reported only feeling respected sometimes or never (2% reported this as being N/A).



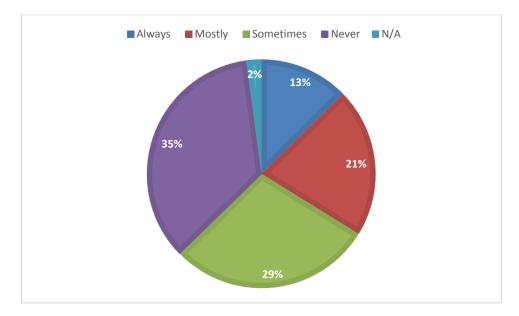
Carers were asked whether they felt part of a team.

66% of carers reported feeling like part of the team only sometimes or never, with 33% of carers feeling like they were either always or mostly treated as part of the team.



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

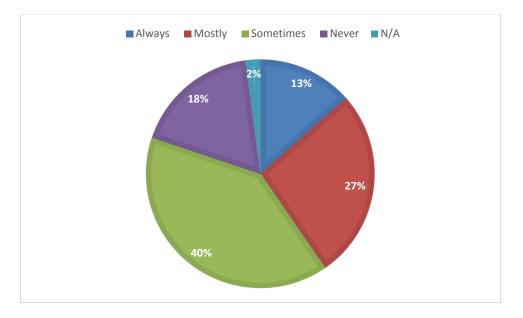
Only 44% of carers reported feeling that they feel their views are either always or mostly considered. This leaves the majority of carers who were surveyed in South West stating that they feel that their views are only heard sometimes or never.



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

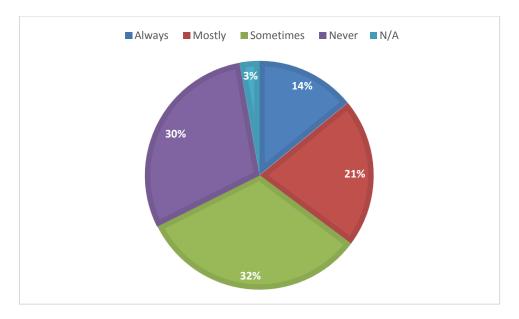
It is concerning that 35% of carers reported that they felt as though there is never any consideration given to the whole of family with another 29% stating that they feel as though consideration for the whole of family is only provided sometimes. These were similar figures to the 2016 survey which demonstrates little evidence in carers' views around their family being considered in decision making changing during the past two years. Having 64% 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.



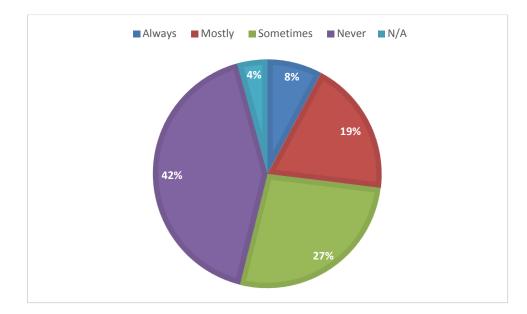
Carers were asked whether Child Safety is responsive to calls and emails.

40% of carers reported that their CSSC was responsive to emails and phone calls, 58% reported only sometimes or never and 2% marked N/A.



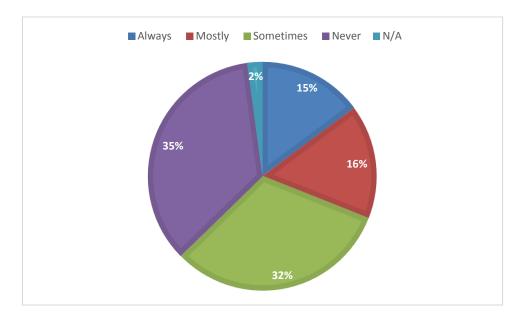
Carers were asked if the CSSC creates a supportive environment.

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



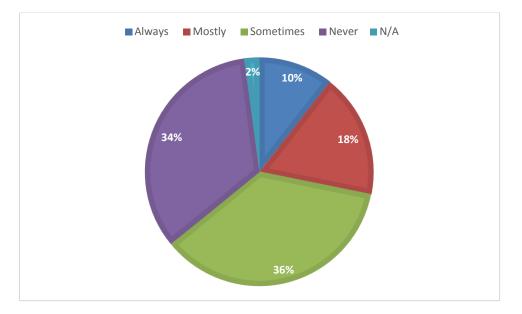
69% of carers reported that they feel that the CSSC only sometimes or never assists in this area. As stated in 2016 Carer Survey, financial stress can very much impact on placement stability and is often overlooked as a stress factor in foster and kinship families despite financial stress being one of 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.



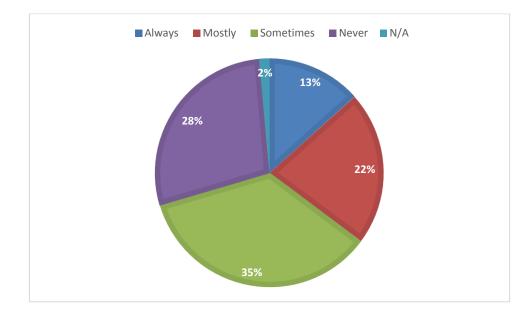
Advising the care team when planned leave or unavailability is occurring is a basic communication requirement in order to build a respectful and supportive care team. Carers are expected to let the care team know when they are going away or are going to be unavailable, therefore it would be an expectation that this same courtesy was provided to carers, however only 29% 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. In the 2016 report for South West 38% of carers reported being told always

or mostly when their CSO was going on leave or was unavailable. These most recent statistics indicate further decline in this area.



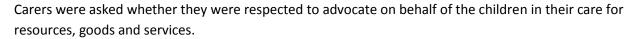
Carers were asked whether they are given ongoing information about the child in their care.

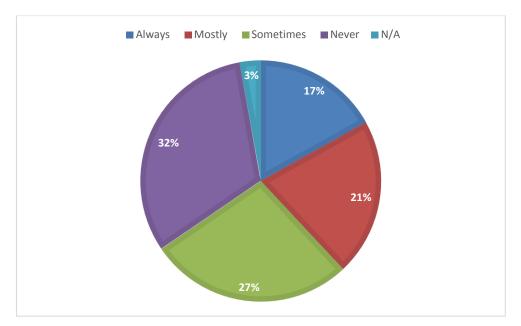
70% of carers reported that they only sometimes or never get updated information about children in their care. This percentage is extremely high given the legislative requirements of the Child Protection Act 1999 that require carers to be provided with information that allows them to provide safe and appropriate care to the child and other children in their care. This was a significant issue raised in the South West 2016 survey with 67% identifying they either only sometimes or never received updated information. This survey reflects more than 3 times the carer population in the South West Region than the 2016 survey and therefor it is imperative that this data is considered carefully.



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

Unfortunately nearly one third of carers (63%) who responded felt that support and assistance for children in their care was only provided sometimes or never.

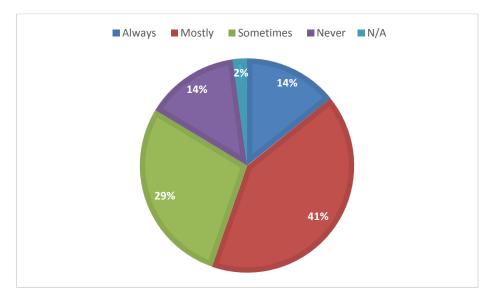




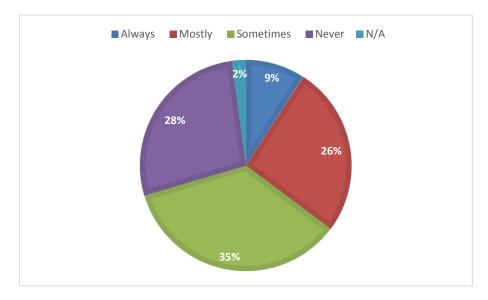
59% of carers reported they only feel that they are respect to advocate on behalf of children in their care sometimes or never. Carers are assessed against their ability to be considered a suitable person to provide care through many criteria, one of these being their ability to appropriately advocate 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.

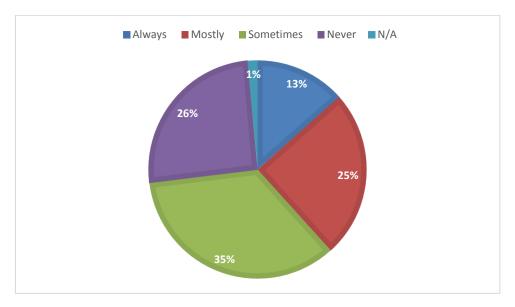


It is positive to see that more than half of carers (55%) reported feeling either always or mostly satisfied and that overall only 14% of carers reported never feeling satisfied in this area.



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

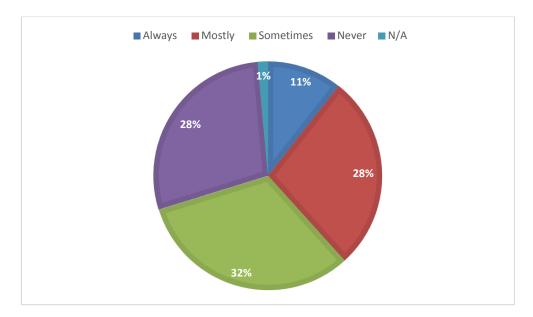
This area is explored in more detail further into this report. It is concerning however that given Placement Agreements are a legislative requirement it is concerning that 63% surveyed reported only feeling satisfied sometimes or never in relation to the completion of Placement Agreements. These figures demonstrate a shift since the 2016 survey as the majority of carers in that survey reported mostly or always being satisfied in this area.



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

61% 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.

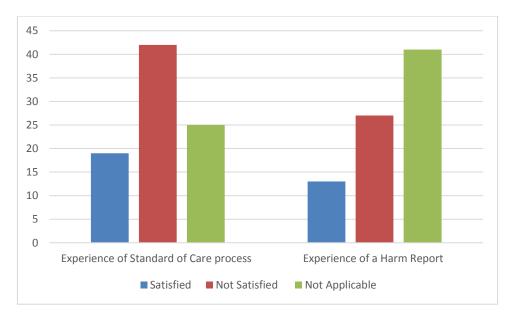
Carers were asked if they feel satisfied with their ability to engage in case plan meetings for children in their care.



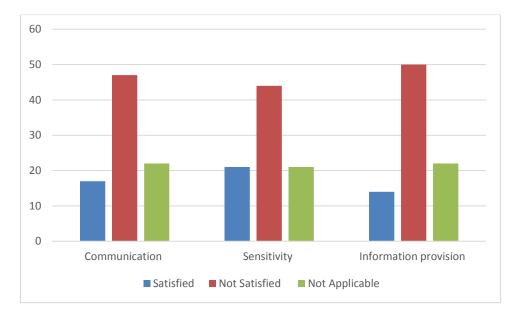
60% of carers report feeling satisfied only sometimes or never. Given statements within the Statement of Commitment that recognise a critical role in participating in decisions effecting children in their care, these figures should reflect a much higher percentage.

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.

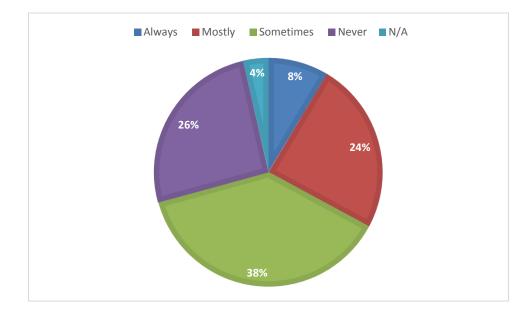


Carers were then asked if they were satisfied with the timeliness of the outcomes 60% reported feeling unsatisfied with the timeliness of the process and 15% reported feeling satisfied with the remaining percentage stating it was not applicable.

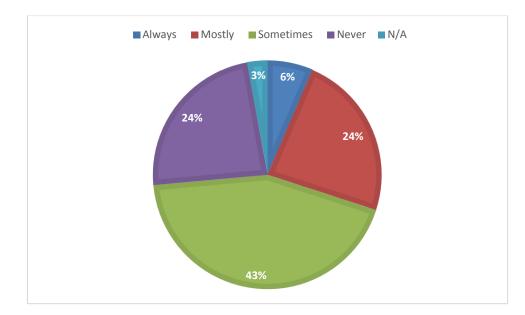
Carers were then asked if they were satisfied with the review process that took place if they were not happy with the outcome of the Standard of Care and/or Harm Report, of those who thought this question was applicable to them 87% reported not feeling satisfied with the review process (a total of 38 carers answered this question).

Confidentiality

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

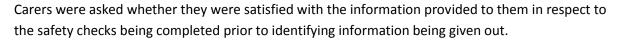


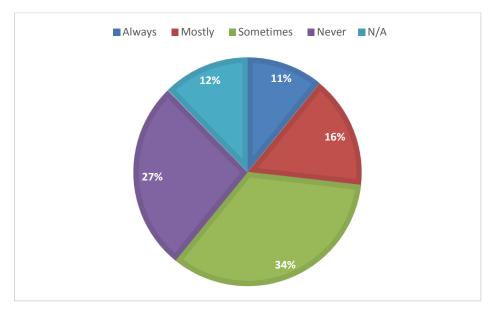
64% of carers reported they are only satisfied sometimes or never.



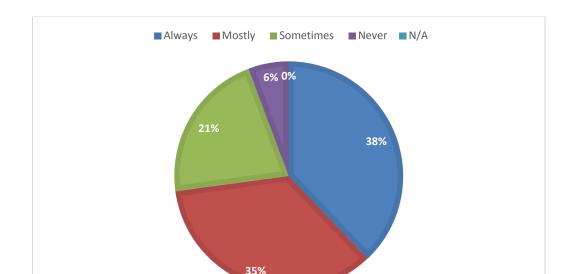
Carers were then asked if they were satisfied that information was provided to them about the child as it became available to Child Safety.

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 68% of carers reported that they feel ongoing information about a child is only shared with them sometimes or never. It must be noted that this is an improvement from the 2016 survey with 73% reporting only satisfied sometimes or never 2 years ago. Given this sample is larger than 2016, it is positive to see an improvement in this area.





61% of carers surveyed reported only feeling satisfied sometimes or never regarding communication in this area. Only 27% felt satisfied always or mostly in this area with 12% advising the question was not applicable (likely to be kinship families).



Carers were asked whether they were satisfied with their understanding of confidentiality provisions and how this relates to them as carers.

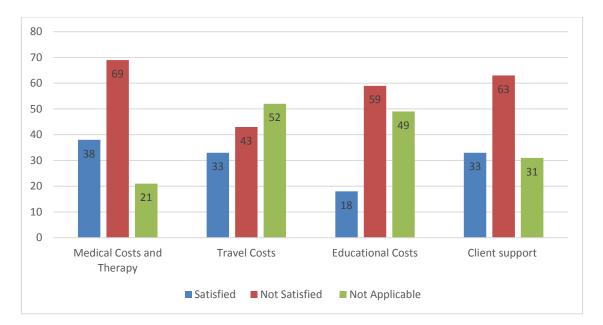
73% of carers reported a good understanding of confidentiality provisions.

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% satisfaction 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 with only 53% of carers reporting satisfaction and 44% reporting not being satisfied (3% ticked not applicable).

Of those carers who felt that the question relating to requests for HSNA and CSNA was applicable, 70% (67 carers in total) reported not feeling satisfied with their requests being met in this area. FCQ acknowledges the work being undertaken in the South West Region to bring about consistency in the application of CSNA.

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 majority 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. Only 87 carers answered this question (this may be an indication of lack of understanding) of those who answered 60% reported feeling not satisfied. 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.

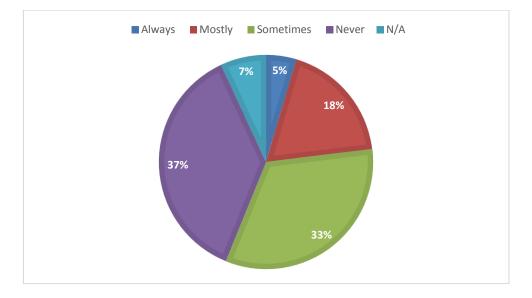
Carers were asked about their knowledge to apply for ex-gratia (special payments) and whether they were encouraged to apply for these when applicable. Only 9% of carers reported having knowledge and being encouraged to apply for special payments. 73% reported not feeling satisfied in this area with the remaining feeling the question was not applicable to them.

Carers were asked about their satisfaction in respect to the provision of Dual Respite – 84 carers felt this question was relevant to them and of these 84 carers, 45 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 - 67% of carers reported feeling dissatisfied in this area.

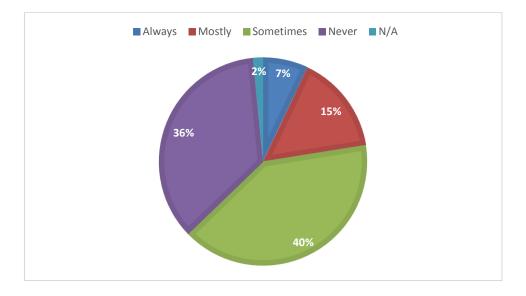
How satisfied are you with local practices of CSSC

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

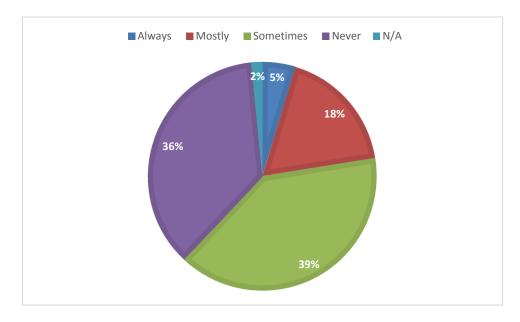


70% of carers reported feeling either sometimes or never satisfied regarding information relating to CSO hand over.

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

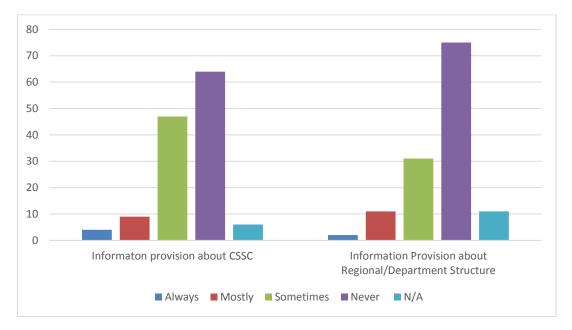


76% of carers reported feeling only sometimes or never satisfied at the level of knowledge CSOs have in relation to the children placed in their care.



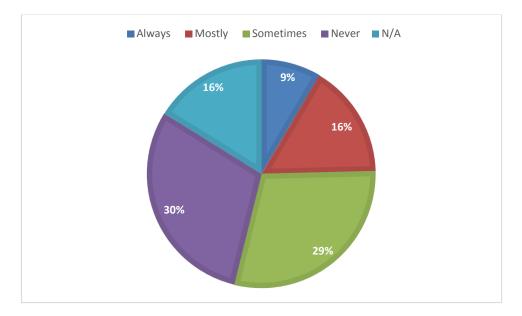
Carers were asked if they were satisfied with the timeliness and provision of Case Plans.

Only 23 %of carers reported that they were always satisfied or mostly satisfied in this area, leaving 76% of carers in South West feeling that Case Plans were only done in a timely manner and/or provided to carers some of the time or never (2% N/A).



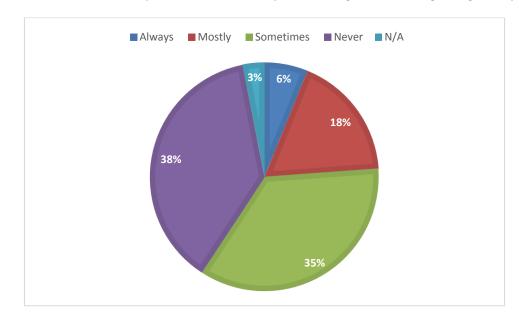
Carers were asked if they were satisfied about provision of information provided by the CSSC and Region.

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.



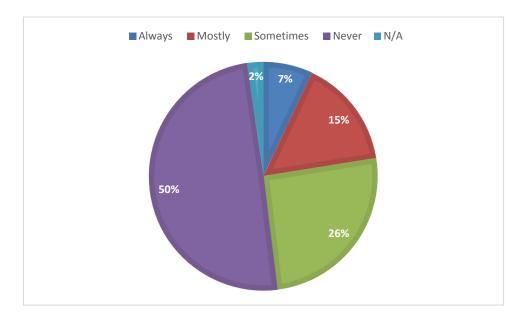
Carers were asked if they were satisfied with their ability to access respite.

59% 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.

73% 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.

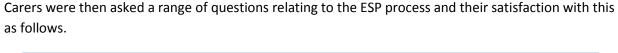


Carers were asked whether they felt they were supported to meet their own family commitments.

50% of carers felt that their family needs were never taken into consideration, with only 23% of carers reporting that they felt their families 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.



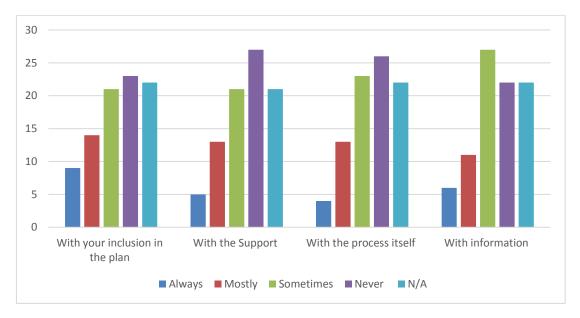


It would seem from the data above that the most part carers are reporting that they are either always or mostly satisfied with the processes surrounding ESP plans. Satisfaction rates did seem to go down a bit in respect to the actual review and implementation of plans.

Child Health Passports

Carers were asked if the child/ren in their care had a current Child Health Passport, Only 44% of carers reported having a Child Health Passport.

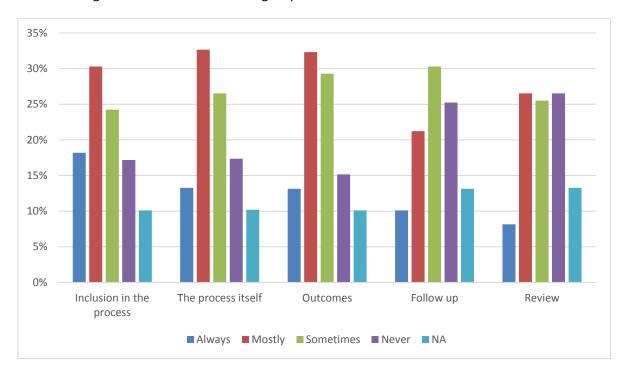
Carers were then asked a range of questions relating to the processes of Child Health Passports and how satisfied they were, carers reported as follows:



Carers reported high levels of dissatisfaction in respect to a number of processes relating to Child Health Passports, but most notably with support and the process itself. It is hoped that the Strengthening Health Framework will provide a much higher degree of service delivery to children in care that is meaningful.

Placement Agreements

Carers were asked if they had a current Placement Agreement generated from a placement meeting, 60% of carers reported they do (this is a reduction of 8% from last survey).



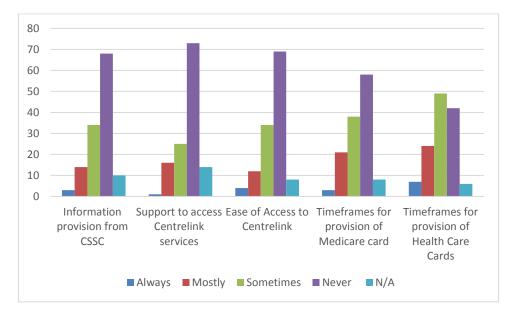
Carers were asked a range of questions relating to their satisfaction around the processes of Placement Agreements with the following responses.

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 South West 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 15% reported they did – this is a decrease from last survey where approx. 33% identified they received minutes from placement meeting minutes.

Centrelink

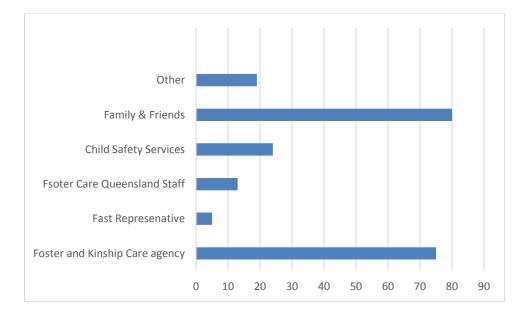
Carers were asked a range of questions relating to Centrelink and how they were supported to access services through Centrelink from the CSSC, responses were as follows.



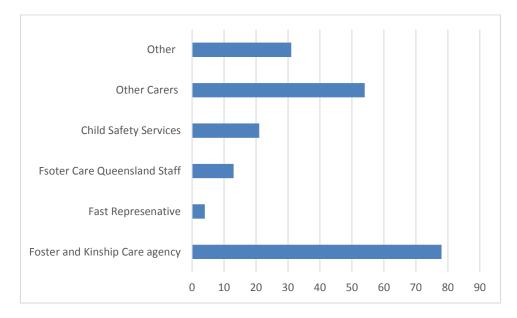
It is evident through this data that carers are feeling a high level of dissatisfaction in this area with the majority of carers feeling that they never receive information or support from their CSSC in relation to how and what they can access from Centrelink.

Carers were then asked question relating to ease of access to Medicare Cards for the children in their care and Health Care Cards. 75% of carers reported only sometimes or never feeling satisfied with the timeframes associated with accessing Medicare Cards. 71% 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.

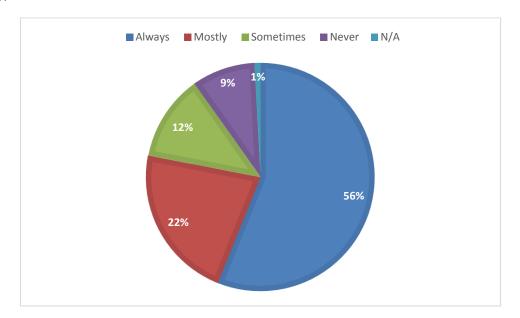


Carers were asked where they access the majority of their information from as carers.

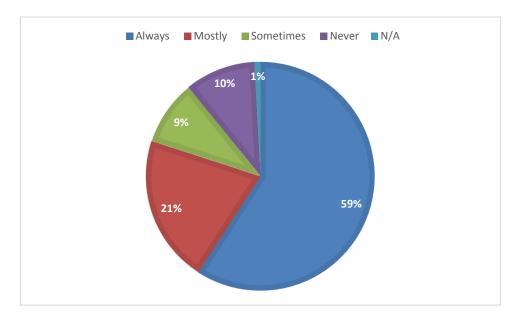
Foster and Kinship Care Services

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, 13 carers in South West 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).



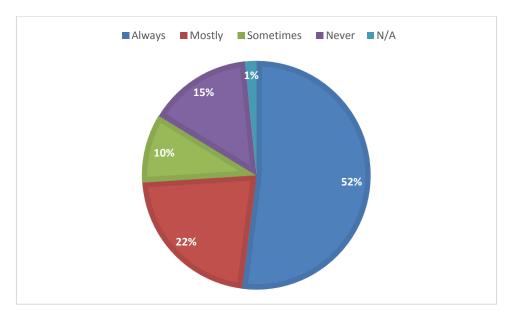
It is very positive to see that 78% of carers reported always or mostly always feeling satisfied with the regular support visits occurring – this figure is down by 5% from the last carer survey held in 2016.



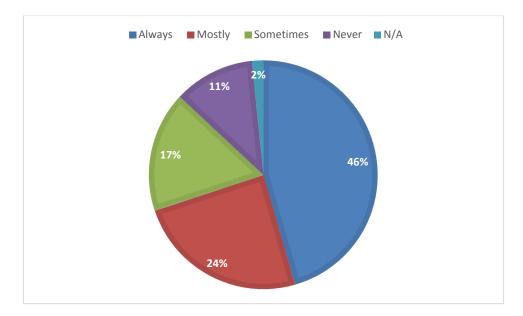
Carers were asked whether they were satisfied with response to contact with their agency.

80% of Carers reported feeling always or mostly satisfied with responses relating to contact with their Fostering and Kinship Care Agency.

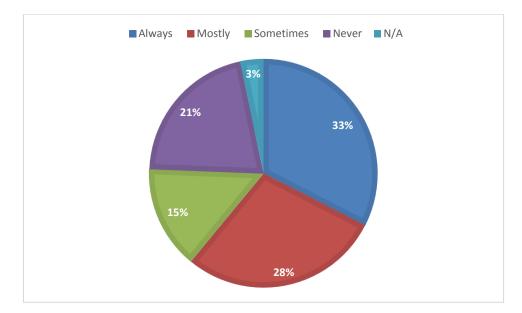
Carers were asked whether they were satisfied with assistance provided by their agency to complete paperwork.



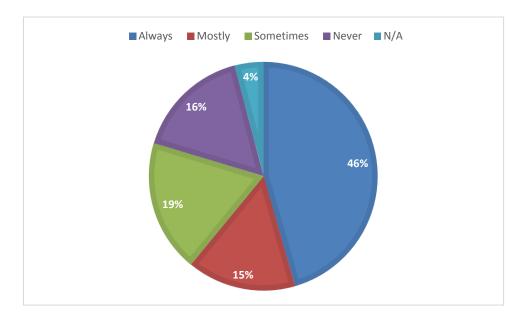
Carers were asked whether they were satisfied with their workers knowledge of current policy and procedure.



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

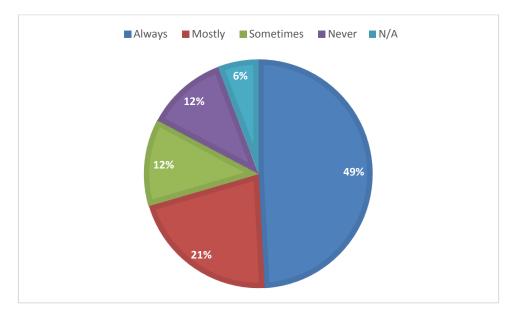


Whilst the majority of carers have reported either always or mostly feeling satisifed in this area, 36% of carers have identified they are only sometimes or never satisfied with their access to support networks through their agencies. This is an area worth exploring further between agencies and carers they are supporting in the South West Region.



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

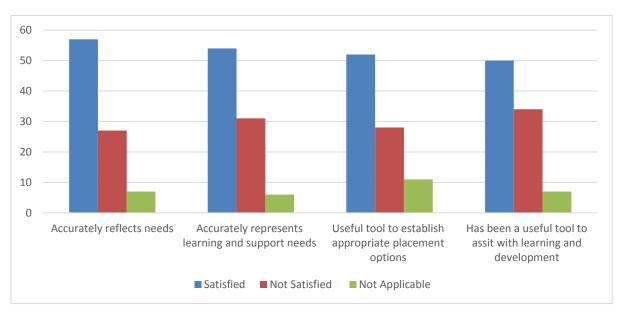
Whilst again we have the majority of carers feeling always or mostly satisfied in this area, there is still 35% of carers who identify they only sometimes or never feel satisfied. It is important that carers have access to relevant and up to date training that assists them to provide quality care to 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, 68% reported they have one, 18% reported they did not and 14% 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

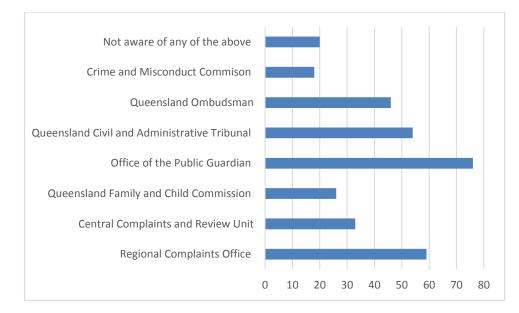
Carers were asked a range of questions relating to their training experiences as follows.



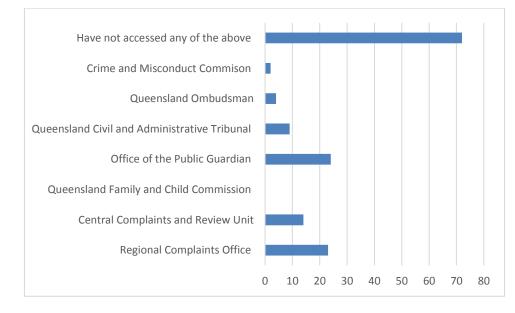
Carers were also asked whether they were satisfied with provisions of or support to access child care during training. Only 38% of carers reported feeling always or mostly satisfied in this area.

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.

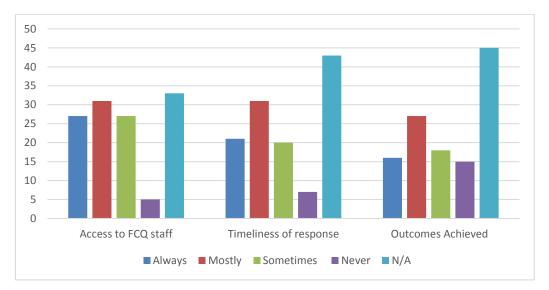


Carers were asked if they felt heard and were satisfied with the outcome regarding their contact with the above services. 55% of carers reported they felt heard, however only 43% of carers felt satisfied with the outcome achieved.

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, 61% of carers reported satisfaction. In respect to knowledge and understanding of services provided only 56% of carers reported feeling satisfied. With approximately 12% of carers feeling neither of these questions were applicable that leaves nearly one third of carers in South West 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.

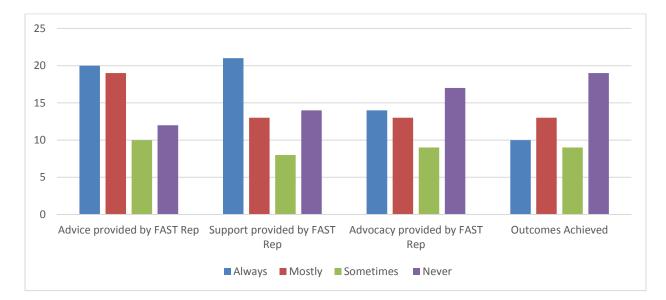


FAST Program

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 South West 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 %ted 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. My boys are part of our family. They are not going anywhere.
- 2. Department. It's not working well atm.
- 3. Foster care is time consuming and expensive. Carers often need to lose work shifts or stop working altogether in order to meet the needs of the children placed with them. As a result they lose income, superannuation, reduced capacity to borrow money to buy or renovate a house or upgrade their car, yet larger homes and cars are needed to care for children. This adds to a cycle of poverty where carers (particularly women) are emotionally black mailed to choose between financial stability and the children they love. Over time foster care becomes financially unviable.
- 4. An understanding and acceptance that when a placement breaks down, often the decision has to be made to support the other people (children) in the placement. It is not an indication of the quality or character of the child in care nor the carers....just that the 'fit' may not have been right. Sometimes the dynamics of a family change for the worse when a new placement is added...through no fault of anyone.
- 5. Lack of support affecting ability to attend own social and family events.
- 6. Change of agency.
- 7. Financial.
- 8. Recognition. Periods of extended respite. Wage.
- 9. We will continue to care as long as our current placement continues. We cannot promise anything past this current placement.
- 10. To get support from our agency.
- 11. Not being treated well by DOCS and not being supported very well by {agency de-identified}.
- 12. My children.
- 13. I am a Kinship carer for a 10 year old whom I have known since birth (been in care for 4 years). If I knew then what I know now I probably would not have gone down this path. My entire world now evolves around her and my life as I knew it ceases to exist. Everything evolves around her needs, my requirement to meet guidelines etc.
- 14. Not trusting the Department staff.
- 15. I haven't received any support from either Child Safety office for 10 months now, I am not connected to a fostering agency luckily I work in a fostering office so usually organise my own information.
- 16. Fortnightly reimbursement. Unfortunately I will quit fostering if this doesn't improve. {location deidentified} Manager is awful, never listens to concerns, always says no especially when related to supports needed. Very unfair, unjust manager, very inappropriate and rude.
- 17. We have committed to long term care for some of the children in our care, and this won't change. We will stop taking in new placements if the communication does not improve.

- 18. The lack of support and provision of knowledge/access to information from our agency is making the process difficult. If we receive support and information needed or requested we would continue for much longer.
- 19. I have just traumatically ended a long term placement who I still support weekly but there is now no support for me as it is deemed contact no provision for re-imbursement offered for damage by the young person in care nor provision for supplying meals and supplies whilst in my care. I am still reassessing my future as a carer and find the thought of the system and its flaws daunting so have decided to do respite. Which will allow me to support carers and children without the need to constantly advocate for daily needs.
- 20. If the level of bureaucracy increases and levels of support decrease I would probably reconsider new placements.
- 21. Possibility of moving, if the children would be able to move with us. What would family contact arrangements look like if this were to be the case?
- 22. Respite dual payments. Medical expenses for our high needs kids.
- 23. Wrap funding around child. Pay carers.
- 24. Changing agencies. Have an agency who values its carers' record and commitment to the safety of children in care. Training to be offered or if I find training that will help children in care, I would like to be honoured to attend this training. To ensure that I have a great relationship with Departmental workers and my agency management.
- 25. I have not received any information on any of this survey....(identifying information deleted)
- 26. Child Safety are very hard to deal with and could potentially change my decision.
- 27. It already has and the industry uses the love for our children against us treating us like {profanity used} and we just take it and take it because we don't want to give up on these kids.
- 28. Each placement is individual and I look at them appropriately.
- 29. Yes answers/ support when they are needed.
- 30. I am not able to leave work to do fostering full time due to my financial situation, if fostering begins to impact my work I will have no choice but to stop the fostering.
- 31. A little more support would be great. Access to regular respite, like during times of illness.
- 32. Lack of information provided means unexpected circumstances frequently occur that could have been planned for had I or the agency been given the information from Child Safety. By not providing this information the impact on someone who works full time is extreme. As a single person it's basically unmanageable and adds additional stresses that are not needed.
- 33. If the pressure gets too much.
- 34. Lack of support within our friends/family unit resulting in inability to foster more children as no one to babysit for a few hrs when needed.
- 35. Support from school as part of the team around our kids understanding that our kids have experienced trauma and will and do act out especially in times of transition. Like reunification or extra contact etc. And to realise that inclusion and not suspension or exclusion are not an appropriate avenue to engender future better compliance to school life.
- 36. Teamwork collaboration.
- 37. Lack of overall support and genuine care from agencies involved.
- 38. Would never foster care again, due to lack of support and information given. When my family was crumbling due to the pressure of fostering and having no information on the child, and we were refused access to services and refused help. I was berated as a parent and mother. Told to push my own children away "they will be right" and to put all of my time and energy into the foster child.
- 39. Ongoing support from Dept.

- 40. I have one great CSO {name withheld} that I can call on for advice on anything and I can lean on her whenever I need to. Unfortunately I have another CSO {name withheld} that I have to deal with who does not have the same work ethic and who is lacklustre and lazy to say the least! If I didn't have the support of {name withheld} from Child Safety I probably wouldn't be a carer. I'm also greatly supported by the Community Visitor and my support agency {agency de-identified}.
- 41. If these children leave we will resign.
- 42. Correct behaviour information of the children coming into my care need to be divulged, not hidden *from me.*
- 43. The level of involvement of Child Safety. They are supposed to 'share' the responsibility we do not feel they fulfil their responsibility.
- 44. Lack of support and poor treatment from Child Safety office.
- 45. To be able to fill our home again with children and the Department be easier to get along with open and give us more information. After the FCQ conference I believe that during a few sessions we were told that the first 3 years were imperative that the child stay and learn in the same family. Also if they are going to use kinship care do it immediately instead of moving these babies around.
- 46. More financial support, more recognition and easier Centrelink access especially linking a child, this would influence me enough to stay for a longer period.
- 47. I enjoy looking after children. Lack of support from DOCS has a huge impact... but I am determined to continue even with the lack of support.
- 48. If Child Safety become more open and honest.
- 49. Support for carers especially with difficult children.
- 50. We intend on caring for our current children in placement. However, due to a very unprofessional and difficult transition for the baby we have in care from birth to be reunified into his parents care, we have decided to no longer take any other placements. We feel very unvalued by the CSO and feel that the boy has been let down by these decisions.
- 51. Placement.
- 52. I have been a foster carer in 3 different states and love what I do and want to keep caring for children. I just absolutely hate having to deal with the Queensland Department around financial matters they make you feel ashamed like you're begging. I'm not that type of person and over the years I have never been made to feel like that in other states. I don't like been made to feel like that it's humiliating and degrading and as a human being and I will only be able to accept feeling that way for so long then it will be time for me to stop being a foster carer something I never thought I would say. I cover most extra costs at the moment because they are not always a regular cost but I also can't financially do that for long either.
- 53. Correct application of Policy and Procedures by Departmental workers.
- 54. General support from the Department. Better financial assistance.
- 55. Get rid of {name withheld}.
- 56. Sick of the lies and abuse and {profanity used}. They constantly threaten to remove my child if we don't do as we told.
- 57. I feel our agency does not consider needs of the whole family. They have their own agenda. No one available to really express how one feels.
- 58. Total lack of support for children and their needs respite for complex needs child. Removal of HSNA as complex needs etc. never offered lack of services to support placement.
- 59. The consideration of child's best interest first not biological parents first. Carers need to be considered in all aspects of the child in care. There be consideration of multiple children in care even in other states and if babies come along in these families need to be considered long term immediately. Foster care needs to be a nationwide not state wide.

60. Listen to carers. We don't get respect. When the children in our care leaves we will be leaving. {Location de-identified} is disgusting. We need change urgently. We are not the only carers who are leaving/left because of the Department's treatment of carers.

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

- 1. For everybody carers Dept. (more staff) to be in partnership to have best outcome for children.
- 2. Child Safety to listen to carers & let them advocate for kids.
- 3. Provide foster carers with low/no interest loans to cover the cost of improvements to their homes or vehicles and allow it to depreciate while they actively provide care. Provide carers who have children not in school or with needs that prevent full time employment with a tax free allowance to compensate for diminished capacity to earn.
- 4. Focus more on the child and not bending over backwards for parents who don't and won't do the right thing to the detriment of the child and the Carer/family.
- 5. NGO held accountable for so called supports. Do not use NGOs. Funding individualized for child. Childs best interests upheld. All follow the law.
- 6. Better communication with Child Safety. Better financial support.
- 7. More mandatory training. Recognition that care is a full time occupation.
- 8. Communication and to listen to the carers. We live with the children and these people only see them for an hour maybe once a month.
- 9. Yes, to give the Establishment funding at the commencement of Foster/Kinship Care, and not at the Two Year Court Hearing as that is unfair, as we spent a great deal of money on advice by DOCS and {agency de-identified} Foster Care Agency, and didn't even see a Two Year Court Hearing and to stop so many interim orders being allowed, make the Two Year Court Order happen faster, and to have the same new laws implemented in Qld as they will be in NSW for Foster Carers to be able to adopt following the Two Year Court Order, as that will be less pressure on DOCS , and on the Family Courts and provide stability for children in Foster Care System and cease boomerang children.
- 10. No team leaders.
- 11. Education of and acceptance by CSOs on the skills and knowledge of Carers.
- 12. The Department needs to respect carers more.
- 13. Better communication from Child Safety centres and better financial support especially in regards to receiving high needs payments and also in an emergency placement as they often arrive with nothing.
- 14. Easier access to play therapy for toddlers.
- 15. Dept. support for carers needs to improve significantly. Carers are often threatened by CSOs if they cannot provide transport or facilitate family contacts on weekends. They need to remember that we have families and commitments outside of fostering. The Dept. don't work weekends and shouldn't expect carers to.
- 16. Reimbursement needs to be improved. Dual Respite should be available to everyone not just who the manager thinks should get it. {CSSC de-identified} manager honestly needs to be fired as she is useless and creates more problems than she solves.
- 17. Cares do have names... not just "carer" We are supposed to be part of the "care team" Stop treating carers as though they are{profanity used}!!
- 18. More open communication.
- 19. Authentic partnerships with carers. Not ones that tick a box for quality assurance paperwork.

- 20. More support and transparency within the care team.
- 21. Many but the system is too big to make major changes due to its limitations including their budget and restrictions of what they will support. E.g. supporting an escalating self-harming child in the carer's home they are now spending thousands for a group home with one tenant and round the clock workers. Seems silly to me.
- 22. When dealing with family and kin; the Department needs to invite all members of a family group.
- 23. Many.
- 24. Short term orders it is generally all about what best supports the family, mainly around the parents. This at times discounts the child's experience. There are times where we felt that the Department was making decisions in favour of the parents rather than the children.
- 25. Communication.
- 26. We need Legal advocacy.
- 27. Pay carers not NGOs.
- 28. Instead of carer recruiting drives, simply support and look after the carers that are experienced. Six months' worth of experience is better than none. The money saved could go towards extra support for those already caring for children.
- 29. Plenty.
- 30. Educate new carers with the reality of caring.
- 31. Faster decisions.
- 32. Less paperwork!
- 33. More money, more resources, more support workers.
- 34. Listen to Carers.
- 35. More communication from child services would be beneficial.
- 36. Involving the carers' children more. There's all these activities for children in care to do through support groups but the carers children, in my case the child in cares cousins can't attend.
- 37. I understand there is a high turnover of staff at our local Child Safety Department but it would be good if the changeover from one to the next was clearly done. During a home visit or at a meeting at the local office. That way concerns and needs of child can be clearly discussed.
- 38. Treat us like humans, we are people not items to be pushed around, I work hard, get no breaks, no respite etc. However what keeps me going is the children, all these children that need one person to love them, to care for them, protect them and advocate for them. What keeps me going is the difference I make to children's lives, that's what I care about, that is my reward, when I help a family be reunified or I provide long term care to a child that can't go home and release functioning young adults into the world.
- *39.* Collaboration not creating an us, and them mentality.
- 40. Provide a higher level of support and funding for mental health issues and damaged children.
- 41. Information and support. Information on how to access support. Support for carers, foster child and the whole family. Medical and wellness i.e. counselling support. Real action, putting things into place. Goals and targets that are achievable. Support with schooling. Working all together as a team with everyone involved from the start of placement.
- 42. Quicker reimbursements.
- 43. We are told that everything is confidential, so we have access to no information. Ridiculous considering we are dealing with traumatised children.
- 44. More reasonable access to reimbursement of medical costs, day-care costs, in home support.
- 45. Better relationship with the Department. Consistency between CSSCs. More carer support, respect and open communication.
- 46. Professional caring not TFCO.

- 47. Consistent practices by Child Safety.
- 48. Give CSOs realistic caseloads. Ours works 3 days a week and is carrying 30 kids. Sort out whatever is going on in Dept. which sees CSOs fleeing. Empower CSOs with some financial delegation. Say up to \$1,000 per item, maximum 5 items. Therefore 5k per child. Make sure there is budget for it. Without the approval process - just a clear policy and procedure. Invest in staff wellbeing and increase retention rates.
- 49. Complete proper overhaul of the system. It needs a huge culture change. Real respect for Foster Parents. Acknowledge their role as integral to everything - not just saying it as they do, because words are cheap. Meaning it and showing it in their actions. Start paying Foster Parents Superannuation. When kids are on a Long Term Guardianship order, not to be reunified, still having supervised contacts, STOP pandering to damaging and detrimental bio parents who are still drug and alcohol addicts, 26 years later!! Acknowledge what the children want, listen to them, and respect that they deserve to have it acknowledged that they feel belonging and value in the foster family they are doing life in. Empower children in care to know their rights, to know there is a better way to live, to believe there can be a healthier future for them. Build them up to make healthy choices for themselves.
- 50. More respect from workers.
- 51. Get CSO to listen to us better, instead of family as we know these children better than the CSO.
- 52. Make Department better.
- 53. More communication from Services.
- 54. Being open and honest.
- 55. To be heard.
- 56. Department need to take more notice of what Kinship carers say and not expect as much as they do from kinship carers.
- 57. Work on better relationships with CSOs and have them be more compassionate about the carers and the work they do for these children in care. Right now we feel valued from 1 CSO who we have worked well with for almost 2 years but the other CSO who is working on the reunification team has not spent time with us and had not listened to our views or feelings.
- 58. (Organisation de-identified) get back to support of carers instead of satisfying Department.
- 59. Remove the payments from the Department and make the Agency's accountable for payments to the carers like in other states. Have better system in place like a category system if a child ticks x boxes their General x boxes automatic HSNA, x boxes CSNA and then what level. It takes that pressure off the carers having to prove to the managers why they should have to get those payments. It will help the relationships between the carers the CSOs and the Managers and will also help stabilise placements because carers can get on caring for the child and not always in a constant battle with them over payments.
- 60. Accurate reporting on PIC Forums held. Two out of Five tables that presented info on CSNA/HSNA was not even reported in our Forum. That's 40% not reported in. Given that this topic was the main topic at every forum due to the roll out of NDIS, why was it only given TWO in the Report for the State??
- 61. Remove the dead wood like agencies and {organisation de-identified} and give more to the people who actually do the job carers.
- 62. More information about the child, family medical information, more communication.
- 63. Not for us, we're very lucky to have a great relationship with our CSO and her team leaders.
- 64. LTGO for young people with long term carers.
- 65. Get rid of {names withheld} and get support for carers needed. Stop abuse of carers and put kids' needs first. Stop encouraging kids to leave carers and to listen to carers when dealing with

teenager crap, don't automatically take teenagers word. Carers need a place to go when they have concerns and manager denies any inappropriate actions of staff etc.

- 66. To feel supported by agency and case worker.
- 67. Support. Increase in allowance with the cost of living etc. To have a CSO for more than 12 months. Remove agencies increase Departments CSOs.
- 68. Yes. Stop disrespecting carers. Listen to carers. Make carers part of a team. Don't yell at carers when they don't agree with decisions made by the Department. When carers have a concern with Child Safety someone needs to listen.
- 69. Foster care needs to be nationwide not state wide.
- 70. Listen to the carers. Pay the carers. Stop the abuse of carers. Treat carers with respect. Remove Department workers who are abusive on carers. Stress from Department is very high.

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 child's needs need to take priority to that of the carer and biological families.
- 2. More funding for workers to do their job.
- 3. Give agency the CSO powers. One less person in the mix. The Department need to work better with the carer. They know the children best.
- 4. Expectation on carer to transport to contact that are consistently not happening. That children not be subjected to constant rejection. Also that long term children be allowed to do as biological kids in family.
- 5. Employ respectful CSOs & make them accountable for their actions let carers have more say as they know the children best.
- 6. The requirement for odometer readings for mileage claims. The paperwork makes reimbursement tedious and difficult. Addresses should be enough. That carers are not entitled to financial support as they are "just volunteers" because they are the backbone of the system and do the hard work of rehabilitation for children.
- 7. Recruitment and selection of carers. Additional financial support from avenues other than Child Safety.
- 8. Time limit on parents who don't meet Department guidelines for reunification so that children can have a normal life.
- 9. CSNA HSNA payments, claims for damages, mileage, medical costs out of pocket expenses.
- 10. Uphold, value children first. Change the culture of all paid employees.
- 11. New to care placements should come with a voucher to support immediate needs such as clothes, food, formula, bottles etc. Have access to low interest loans for carers to be able to get a more suitable vehicle for transportation.
- 12. On the job training and development.
- 13. Access to information regarding the child placed in care. Decisions made regarding unborn child coming into care prior to birth.
- 14. Stop putting bio parents wants ahead of best interest of the child. Do away with NGO foster care agencies. They provide very little and feel more like they are there to check up on carers than support them. Would rather see that money pumped into Child Safety with an increase in CSO & CSSO numbers.
- 15. Listen to carers; respect carers.
- 16. Yes, to give the establishment funding at the commencement of Foster/Kinship Care, and not at the Two Year Court Hearing as that is unfair, as we spent a great deal of money on advice by DOCS

and{agency de-identified}, and didn't even see a Two Year Court Hearing and to stop so many interim orders being allowed, make the Two Year Court Order happen faster, and to have the same new laws implemented in Qld as they will be in NSW for Foster Carers to be able to adopt following the Two Year Court Order, as that will be less pressure on DOCS, and on the Family Courts and provide stability for children in Foster Care System and cease boomerang children.

- 17. Each case to be judged singularly. No blanket rules. My child should have no parental contact but the law says she has to even to her detriment.
- 18. Less time spent worrying over the parents more time & money spent helping heal the children.
- 19. Allow Carers more decision making around everyday matters. Greater transparency around Dept. decisions.
- 20. Increased consultation and communication for carers. Greater access to respite and support.
- 21. A lot more communication from Child Safety.
- 22. More consideration and support of the carers needs and requests. Better financial support with increased payments and easier access to Centrelink.
- 23. Access to services to help children in care therapy. Fortnightly Allowance needs to be more in order to provide appropriate care for children. An easier set up with Centrelink to add a foster child to payments.
- 24. Dept. to transport and facilitate all contacts. Much better support in general.
- 25. Giving every foster and kinship carer dual respite payments.
- 26. Let carers make decisions around children in their care that have been with them since birth, we know these children the best. More timely response to children needing therapeutic supports, paediatricians, and carer shouldn't have to pay for a paediatrician's first appointment ever!! This is usually more than the normal fostering allowance.
- 27. That more emphasis be placed on the needs of the child than the wants of the parent. That more time be given in times of transition when possible.
- 28. Timely reimbursement without a fight. Authentic relationships with management.
- 29. Better access to support and information. Easier access to permission to help the children in our care (seeing doctors/professionals/getting immunisations etc.).
- 30. CSO actually knowing the children's history and advocacy records. Support agencies sharing information better about options.
- 31. Consistency of practice across offices. Genuinely listening to the concerns of family members and properly investigating complaints and concerns.
- *32. More awareness campaigns. Access to free parenting courses/training.*
- 33. Become child and carer focused in spite of budgetary and bureaucratic pressures. Reduce amount of band aids used to cover over issues.
- 34. Greater long term planning of the happiness of children. Less chances for parents who are not complying with case plans/goals for reunification.
- 35. Information re: what the plan is and the process for the child communication.
- *36. To give carers more power to be able to advocate for the children in our care.*
- 37. NGOs out of loop after two years of successful placement. Wrap funding around child.
- 38. Parents should not have guardianship of their children if they have been removed. If they cannot make good choices when they have their children, then they certainly won't when they are removed. Child Safety facilitates and transport children to contact. It's their job anyway.
- 39. Autism would be highlighted as a risk assessment. Suitability of a carer not be scrutinised and blocked to care for other children, if the carer is seeking to save the life or care package or a child in care's experience, if they are at extreme behaviours, not feeling wanted, valued and feeling scared and {sensitive information removed}. Working together with the carer, highlighting what

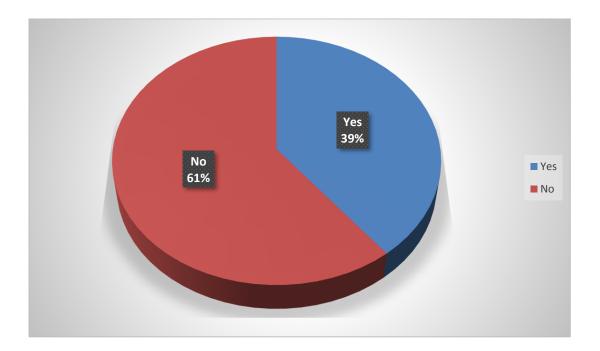
information that have and are willing to share, instead of working against the carer who is reporting the truth.

- 40. There needs to be differences made between families looking after a family child to a foster care situation. In regards to the child, to keep a child safe from harm (identifying information removed)
- 41. Ask the carers and the Department staff don't just take their word for things.
- 42. Those children on long term guardianship orders and settled within a family for more than 3 years should be given automatic LTGO. The views of the child regarding birth family contact should be regarded, even if the birth parents disagree.
- 43. More drug tests before the mother has contact. Make the parents sign all birth documents.
- 44. Change the way both {agency de-identified} and Child Safety run things. There needs to be consequences for kids' bad behaviour and there is currently none. These kids can LITERALLY do anything they want and get away with it with no action or consequences taken.
- 45. Short term orders, the length of order and them being repeated. Face to face and phone contact should be child focused.
- 46. Treating carers with more dignity and respect.
- 47. That reunification was a lot more difficult I understand that if the children are fed and clothed and not physically harmed then it's ok for them to go home but when a parent is still emotionally and mentally abusing a child surely that's grounds for not being reunited all this is doing is continuing the cycle. That there were more staff so the ones that are there now don't get worn to the bone because they do amazing work.
- 48. After hours support & the rate at which answers come.
- 49. That long term carers, guardians are regarded as ' family'..... That carers are truly regarded as partners and not just given lip service.
- 50. Better/more timely start up payments. I have had children turn up with nothing but the clothes on their backs and been told that providing clothing is expected to come out of the fortnightly fostering allowance. Which is fine but when that doesn't come for 2 weeks it puts a strain on my financially. Clearer information around what I am eligible to be reimbursed for and more support to do this. I have never received reimbursement for anything.
- 51. Employ more Child Safety staff, offer them better remuneration and benefits. It would benefit the children if those caring for them had more time to concentrate their efforts on.
- 52. The communication issue (mainly just lacking in Departments providing information/ documents required) (7 weeks to still have not received a child's vaccination record isn't exactly acceptable and as a result has meant ineligibility for any Centrelink payment which puts a financial strain on the placement as well). More input into processes and procedures.
- 53. Allow carers to give foster children a more normal family life.
- 54. More communication from CSO, less frequent CSO changes.
- 55. Give the children a say when they have been in a caring home for most of their lives the opportunity to ask for guardianship. To give them the sense of belonging to a family.
- 56. Smoother processes and procedures more common sense prevailing.
- 57. Less workload of each CSO so they can give more time to each family/foster child. Support for child, carers and the whole family, by communication and counselling.
- 58. More supervision from CSO with family contact so destructive conversations are prevented that cause tension and breakdown of relationships in our home with children in care. The rights of the biological parents outweigh our rights for a peaceful home.
- 59. More Transparency and Open communication.
- 60. Change the laws that give appalling drug addict, abusive parents all the Rights. Their Rights should be removed as soon as the children are!

- 61. Long term permanency planning. Considerate family contact and advocacy for child when inappropriate.
- 62. All children in care receive unlimited access to mental health care plans and psychology services who specifically work with children who have experienced trauma. All kids in care are treated equal, especially when it comes to access to funding and services. I've seen an ATSI child receive access to learning support services, while a non-ATSI child missed out (both children aged 5, living with same carer, both with same developmental needs).
- 63. Honesty from Agency to new carer. It would help people make informed decisions, preventing placement failures.
- 64. Self-determination. Choice and control.
- 65. Higher level of consideration and commitment of carers. Acceptance of the responsibilities (including financial) of Child Safety to children in out of home care.
- 66. I don't know what system CS use but I had more historical knowledge on our child than CS. I had a document that said he needed glasses 4 years ago which was never followed up until now and lo and behold he needs glasses. Now I wonder why he has struggled at school. CSO couldn't check back far enough. There is no real handover between CSOs and the system is not working.
- 67. Have foster parents roles recognised as significant or more, as every other professional in this industry, who are receiving a wage. Value the child's FUTURE and empower them.
- 68. I would make sure that instead of only employing people with degrees (mostly Uni grads with no life experience) I would be looking at employment drive that focuses on maturity and experience rather than qualifications.
- 69. Listen to carers. If they say they're going to give you ex-gratia then they should do it.
- 70. Make the system child focused. Support carers and children better.
- 71. Open communication and clear information given to carers and take into consideration our views as at can manage them we are with them 24/7 .minimum 5 children for carers that can manage them would take a load off the system.
- 72. Reimbursement I spend more money on the children in my care than I get reimbursed for, leaving me greatly out of pocket. Dual Respite for ALL carers so I can actually have a break without worrying about finances.
- 73. Communication, support more. I would only advise to be a carer if your whole heart and soul are in it and not to rely on DOCS.
- 74. Stop hiring Child Safety Officers straight from Uni no idea what it takes to care for these children. The head of Child Safety asked all officers in a meeting would they care for these children out of all of them no one said they would. What does this tell you about Child Safety Officers of {location deidentified}? Child Safety need to be honest in all their dealings.
- 75. Listen to the carers as they know the child best.
- 76. More contact from Department with carers. Kinship carers to be treated same as other carers and not expect to do more because it is family.
- 77. Put the child first always... not the parents!
- 78. Have a CSO who has experience with children & families. Carers to have a major role in planning.
- 79. Would ensure Department staff receive as much training on confidentiality as carers do and have Department offices know that in order to about trauma triggers carers need to understand and be told the particulars of child's abuse.
- 80. Kids are heard and treated with respect, dignity and they are priority in all scenarios, not what suits parents or service centre. Carers are treated as important people in these kids' lives and all work towards a better future for the children.
- 81. Integrated communications!

- 82. Listening and implementing to the child's wishes more than the parents especially over contact. Dragging a screaming child to contact is damaging, it should be about the child's mental wellbeing not a parents feelings. The payment system.
- 83. Better resources, that are user-friendly, to assist CSOs in performing their job and reducing the 'subjectivity' and 'falsehoods' that have been perpetuated through some regions causing a lack of standardisation. Follow Policies and provide support in a timely manner.
- 84. Make all carers professional and sack all the leeches I don't expect this survey to show the true answers when published.
- 85. Children taken into care sooner, I understand that contact is important, but needs to be more flexible, as a carer and the child's life is dictated by contact times.
- 86. More information available when you get a new placement. Better financial assistance/start up payment when a child first comes into care without having to wait for them to come off interim orders.
- 87. That there were more carers, so kids get more individualized support! Also that it was easier to get kids into therapeutic supports. Services like Evolve are amazing but need more funding for more staff to support more kids. It took months of reattempts for one of my girls to be accepted and her needs are really high.
- 88. More stability for children in care (reduce their trauma not add to it).
- 89. Allow LTGO to long term carers.
- 90. We need to get out now because nobody is stopping abuse on carers and kids. If no improvement of listening to carers in regards to the bullying there are many of us leaving. Stop dismissing carers concerns regarding the toxic behaviour of staff. Get RID OF {names withheld}.
- 91. Sack the staff and get workers to respect carers.
- 92. Remove agencies. Increase support to carers.
- 93. Remove all the workers at {location de-identified} and get some people in there who respect carers and will listen to carers. Stop the abuse on carers.
- 94. Multiple children in care with younger sibling and babies should all be put on long term orders; one is on a long term order. Biological parents should be given one chance not multiple chances, children in care deserve a happy upbringing and most of all safe.
- 95. When carers have an issue with the Dept., don't send them back to the office causing grief. Give carers RESPECT. Stop the Power tripping staff. Listen to carers. Stop the SYSTEM ABUSE ON CHILDREN.

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.