LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY



FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON HEALTH AND COMMUNITY WELLBEING Mr Johnathan Davis MLA (Chair), Mr James Milligan MLA (Deputy Chair), Mr Michael Pettersson MLA

Inquiry into ACT Budget 2021–22 ANSWER TO QUESTION ON NOTICE

QoN No - 47

Elizabeth Kikkert: To ask the Minister for Families and Community Services

Ref: Child and Youth Protection Services, Budget Statement G, p. 4, output class CSD 1.1 Inclusion and Participation, CSD 1.3 Strategic Policy, CSD 1.4 Quality, Complaints and Regulation, CSD 2.3 Child and Youth Protection Services

In relation to: Foster and Kinship Carers

- 1. The snapshot reports for A Step Up for Our Kids tracks the number of approved carers who exit the system.
 - a. Does any mechanism distinguish between more and less experienced carers who exit?
 - b. If so, can the minister please provide these data from 2015?
- 2. In the hearing, it was stated that trauma competence needs to be extended to carers, both personal and vicarious. What is currently happening to help make this happen?
- 3. In the hearing, it was stated that training for carers needs to be improved and made ongoing. What is currently happening to help make this happen?
- 4. In the hearing, it was stated that carers need better access to specialist support.
 - a. What kind of specialist support was intended?
 - b. What is currently happening to help make this happen?
- 5. In the hearing, it was stated that carers need better mechanisms for engaging with (and learning from) other carers. What is currently happening to help make this happen?
- 6. In the hearing, it was stated that kinship carers often have a background of trauma within their own families. What is currently happening to address this issue?
- 7. In the hearing, it was stated that funding mechanisms for carers need to be improved.
 - a. What was intended by this statement? What specifically needs improving?
 - b. What is currently being done to address this issue?
- 8. Kinship carers have asked that children who come into their care be trauma-assessed by a psychologist upon intake.
 - a. Currently, how long on average does it take for this assessment to be completed?
 - b. What supports are provided to carers in the meantime?
 - c. How many staff psychologists does CYPS employ and/or contract to perform these trauma assessments?

RACHEL STEPHEN-SMITH MLA: The answer to the Member's question is as follows:-

1. Data collected for the *A Step Up for Our Kids* Snapshot Report does not include disaggregation on more or less experienced carers who exit the system.

- 2. Carers undertake a vital role in providing care and support to children and young people in out of home care. A Step Up for Our Kids Out of Home Care Strategy 2015-2020 introduced therapeutic informed care to improve outcomes for children and young people. The next stage of reform will continue to build skills and trauma competence of families, carers and staff that support children and young people, including increased access to contemporary training and programs.
- 3. The training and support provided to carers includes the following:
 - Training on trauma-informed care to vulnerable children and young people.
 - Therapeutic assessment to ensure carers are provided with appropriate information and support as soon as possible following the placement of a child.
 - Assistance through dedicated carer support workers, who are independent of a child or young person's caseworker, provided by ACT Together.
 - Family and individual counselling to kinship carers, provided by ACT Together.

Child and Youth Protection Services (CYPS) has also introduced strategies to improve the training and support needs of kinship carers, these include:

- Scheduled monthly group sessions for kinship carers on various topics such as Circle of Security an attachment based parenting program, tuning in to kids and tuning into teens and Bringing up Great Kids.
- Referral to external programs such as the Impact of Trauma on the Neurobiology of the Brain.
- Connect program for kinship carers, a trauma informed, attachment based eight-week group program run in collaboration with the Australian National University (ANU) twice a year.
- Carer Connect Newsletter which provides updated communication for carers.
- Carer consults for kinship carers provided by the Therapeutic Assessment and Planning Team on request.
- Therapeutic Assessment report and tool kit completed by the Therapeutic Assessment and Planning team for each child and young person in care and which is provided to each carer.
- 4. A carer may require specialised support to assist them in caring for a child or young person with specific needs. This may include a child or young person with a disability, requiring different training and support to assist the carer.
 - Examples of specialist support may include support for the administration of medication or meeting the individualised needs of the child or young person's NDIS plan.
 - b. The individual needs of a child or young person are identified during care team meetings and assessments, with appropriate referrals made to the relevant service provider to ensure the carer is able to meet the needs of the child or young person.
- 5. The regular monthly carer morning tea provides an opportunity for carers to share their care experiences and promotes connection between carers. The Carer Connect newsletter also promotes the sharing of information, as many carers provide their stories and photos (deidentified) that forms part of the newsletter to all carers.
- 6. The kinship carer assessment process seeks to identify whether carers have trauma in their own background that might impact on the way they parent a child placed in their care. If this issue is identified the assessor discusses what supports may be required. In addition, a child or young person's care team and the Therapeutic Assessment and Planning team can review

the carer's circumstances to support the placement, which may include a referral to relevant services such as counselling or the Circle of Security course, where it is assessed as appropriate for the carer, and to support their ability to provide care.

7.

- a. The next stage of A Step Up for Our Kids Out of Home Care Strategy 2015-2020 has been informed by significant review and consultation on the benefits and challenges experienced in out of home care since the Strategy commenced. The ACT Government heard from carers that they would like to be part of decision-making and information sharing processes and have access to independent support services to assist with their participation in decision-making and to better understand the impact of decisions.
- b. A Step Up for Our Kids Out of Home Care Strategy 2015-2020 recognises the important role of carers. The next stage of reform in out of home care is responding to feedback from carers and is building on current supports. Support and case management is provided to carers and includes training on trauma-informed care; therapeutic assessment that provides information and support following placement of a child; a dedicated carer support worker independent of the child or young person's case worker; and family and individual counselling to kinship carers. The development of the next stage in out of home care is an opportunity to enhance support for carers.
- 8. Carers are provided with a therapeutic tool kit with resources to assist with emotional coregulation for children and young people, in addition to some linking information between the child's trauma experiences and the behaviour that they may present with. An initial therapeutic assessment will then be completed, which is an in-depth comprehensive assessment of the child's trauma experiences and impacts on their development. The report provides trauma psychoeducation and individualised recommendations to support the child in the placement.
 - a. A Therapeutic Assessment report is completed within six weeks once allocated.
 - b. The Therapeutic Assessment and Planning team offers carer initial consults within 10 days of the child or young person entering their care, as well as ad hoc consults either on the telephone or in person.
 - c. The Therapeutic Assessment and Planning team comprises staff with psychology, education, speech pathology and social work/sciences backgrounds. While three staff on the team have psychology backgrounds, having completed psychology degrees, they are not working as psychologists, as further education and training would be required for endorsement.

Approved for circulation to the Standing Committee on Health and Community Wellbeing

Signature:

By the Minister for Families and Community Services, Rachel Stephen-Smith MLA

16/11/21