Module six

Carer Support and Advocacy

Facilitator notes

**4 Hours**

**Assessment**

**Method of Delivery**

**Learning Outcomes**

The assessment necessary for each participant will be based on:

* Participation in discussions and training activities
* Completion of worksheets at the end of the session; and
* Completion of a self- assessment pro forma.

At the end of this module, participants will be able to:

* Identify key documents and tools available to them to support advocacy
* Understand complaints process available to them
* Identify Supports available to them both internal and external to child safety

Lecture

Small / large groups

Brainstorm

Activities

**Resources**

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| * Name tags | * Power Point Slides | * Multiple copies of the Charter of Rights |
| * Copy of the [*Child Protection Act 1999*](https://www.legislation.qld.gov.au/view/pdf/inforce/current/act-1999-010) | * Multiple copies of the Statement of Standards | * Multiple copies of the participant evaluation form |
| * Copy of the [Statement of Commitment](https://www.qld.gov.au/__data/assets/pdf_file/0014/152321/statement-of-commitment.pdf) | * [the Queensland Human Rights Act: an easy read guide](https://www.qhrc.qld.gov.au/__data/assets/pdf_file/0005/25448/QHRC_factsheet_HRA_easyreadguide.pdf) | * Multiple copies of the [23 Human Rights](https://www.qhrc.qld.gov.au/__data/assets/pdf_file/0009/19908/QHRC_factsheet_QueenslandHumanRightsAct.pdf) |
| * Multiple copies of Scenarios for Statement of Commitment | * Multiple copies of Scenarios for Human Rights |  |

**Resources can be obtained from CSSC staff or via a search of the Child Safety Internet or within the Child Safety Practice Manual**

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|  | **Slide 1**  **Module 6**  **Starting out training slide**  Ensure everyone has a name tag | **Slide 1**   |  | | --- | |  | |
| 2 mins | **Slide 2 Acknowledgement of Country**  I would like to respectfully acknowledge the Traditional Owners of the land on which we are meeting today and acknowledge that Aboriginal and Torres Strait Islander peoples are the custodians of this country and recognise their connections to land, sea, water and sky.  We pay our respects to ***Insert Local tribal/language group,*** their continued culture and to their Elders past, present as well as those emerging leaders of tomorrow.  Pause  Thank you | **Slide 2**   |  | | --- | |  | |
| 2 mins | **Slide 3 Content disclaimer**  Read slide as is | **Slide 3**   |  | | --- | |  | |
| 2 mins | **Slide 4 Acknowledgement of QFKC** | **Slide 4**   |  | | --- | |  | |
| 5 mins | Housekeeping, introductions, and training assessment expectations **Housekeeping details –** provide the location of exits and toilets, information on breaks and catering, arrangements for smokers and phone messages. Include fire, evacuation and emergency exit and meeting points as well as any other WH&S procedures required.  **Introducing Self**  **Icebreaker – ask participants to introduce themselves and use one adjective to describe their carer experience so far** |  |
|  | **Group Rules**  *These should be sourced from the group - ask what people would need from the group in order to feel comfortable. Ensure that the following are covered:*   1. *Confidentiality – any information that is shared in the group will be confidential to the group*   *– link to the need to respect confidences in a care arrangement situation.*   1. *Mutual respect and tolerance for a diversity of opinions, cultural backgrounds and experiences.* 2. *Punctuality and respectful processes in discussion*. |  |

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| 2 min | **Show slide 5 – Learning outcomes** Overall aim of *Module 6*  Highlight that whilst some of the information presented in today’s training may have been touched on during the ‘Getting ready to start’ training, now everyone has a lived experience of providing care the information will have more meaning and carers will be better equipped to understand the practical application of the information presented today to assist them in their journey of providing care.  Highlight that the training will take a deeper dive into   * how carers can use the Statement of Commitment to support the wellbeing of their entire household * how the Human Rights Act applies to both themselves and the children and young people they provide care to, * How legislation supports carer household needs through tools such as Placement agreements and recent legislation passed in parliament around Carer training and support * Helping carers to understand the complaints process available to them to support early resolution * Ensuring carers are aware of the internal and external provision of supports available to them as carers | **Slide 5**   |  | | --- | |  | |
| 2 min | **Show slide 6 & 7**   * + Hand out copies of the Statement of Commitment to carers   + Highlight this document should be a familiar document that is utilised by carers and the care team.   + today we will explore just how to apply it in a practical sense using everyday examples which will demonstrate to carers that it is a document that holds value and meaning   + Highlight the Statement of Commitment has authority under the Child Protection Act and is underpinned by a legislative framework that we will discuss today. This means that there is accountability attached to the document and it cannot be dismissed by any of the key partners named inclusive of Child Safety, Foster and Kinship Care staff and carers. | **Slide 6**   |  | | --- | |  |   **Slide 7**   |  | | --- | |  | |
| min | **Show slide 8**  Origins of the Statement of Commitment  Highlight the most recent version was the result of extensive consultation with Peak bodies, foster and kinship care agencies and carers and represents a comprehensive and considered commitment to carers in Qld.  Previous versions of the Statement of Commitment have been long and cumbersome, and the 2020 version sought to make the document a more refined, clear and concise document that is user friendly. | **Slide 8**   |  | | --- | |  | |
| 2min | **Show Slide 9** Legislative Framework underpinning the Statement of Commitment  * Refer carers back to their original ‘Getting Ready to Start’ training where they learnt about all areas outlined on this slide and highlight that any document produced by Child Safety will always be guided by the legislation underpinning the Child Protection Act * Provide practical example of where the legislation framework is applied in the body of the Statement of Commitment   i.e., on page 3 under Child Safety’s Roles, it states  Ensuring the care provided to children in care is consistent with the requirements of the Child Protection Act 1999 including   * Statement of Standards (S122) * Charter of Rights for a child in care (Schedule 1) * Aboriginal and Torres strait islander Child Placement Principles (Section 5c)   And on page 2 under carers role, it states   * Provide care consistent with the Statement of Standards and Charter of rights for a child in care outlined in the child protection act 1999 * Ensure Aboriginal and Torres Strait islander children and young people are connected to family, community, and culture | **Slide 9**   |  | | --- | |  | |

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| 5 minutes | **Show Slide 10** Principle Framework underpinning the Statement of Commitment  * Additional Principles have also been applied to underpin the intent of the Statement of Commitment * These Statements, whilst broad provide context to the intent of the Statement of Commitment, that carers are recognised as partners, that they play a critical role in the lives of children and young people and their views and opinions relating to the children they provide care for should be heard and respected equally to other stakeholders. * Highlight that many of the topics we discuss today will interlink and the principle that states ‘foster and kinship carers will receive and should expect support that will help them provide a safe and caring environment in which the needs of children and young people are met’ has recently been strengthening by the passing of new legislation that for the first time recognises in legislation the rights for carers to receive training and support to meet there needs. Advice carers that this area of legislation and what it means for carers will be further explored in the training. * Highlight The Our Way Strategy and that it is a 20 year generational strategy that represents a fundamental shift in how child protection, family support and other services can work differently together.   *Advise participants that they can scan QR code for more information.*  *Tip – facilitator to be familiar with* [*Our Way Strategy*](https://www.cyjma.qld.gov.au/resources/campaign/supporting-families/our-way.pdf)  [Our Way: A generational strategy for Aboriginal and Torres Strait Islander children and families (cyjma.qld.gov.au)](https://www.cyjma.qld.gov.au/resources/campaign/supporting-families/our-way.pdf) | **Slide 10**   |  | | --- | |  | |

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| 5 mins | **Slide 11**Platform for Discussion After reading out slides, draw on a practical example of what is meant by this statement for example  *In meeting the Core Aboriginal and Torres Strait Islander additional Principles, the Statement of Commitment highlights everyone’s responsibilities to meet these as follows:*   * *The Department must actively support and facilitate the participation of Aboriginal and Torres Strait Islander families and communities in their processes, decisions and actions about the safety and wellbeing of their children in accordance with the five elements.* * *A Foster and Kinship care agency’s role is to advocate for Aboriginal and Torres Strait Islander children to be connected to kin and community.* * *The foster and kinship carer’s role is to ensure Aboriginal and Torres Strait Islander children and young people are connected to family, community and culture and an example is given in the Statement of Commitment about how to do this is*   *“When supporting an Aboriginal or Torres Strait Islander young person in your care ask their family about any important cultural information and ask how they can support their children’s cultural needs, or request this information from their CSO”*  *So, in the event any one member of the care team identifies that an Aboriginal child in care is not having their cultural needs meet, the Statement of Commitment can empower the care team member to call a meeting and review everyone’s roles and responsibilities as per the Statement of Commitment to ensure the child’s cultural needs are being met.*  Highlight that the above demonstrates just one practical example of how the whole care teams roles and responsibilities can be understood and applied by referencing the Statement of Commitment. It helps to take the emotion out and instead focus on responsibilities and solutions. | **Slide 11**   |  | | --- | |  | |
| 15mins  7.5 min discussion  7.5 min present to group | **Show Slide 12**  **Small group activity** Everyday application of the Statement of Commitment – Carer roles, rights and responsibilities *Refer to Activity Guide*  **Handout -** *Refer to Case Studies 1, 2, 3, 4 and 5 – Statement of Commitment Scenarios in handouts.*  Activity 1 – Practical application of Statement of Commitment – Roles and responsibilities - Carers | **Slide 12**   |  | | --- | |  | |
| 1 min | **Show Slide 13**  Everyday application of the Statement of Commitment – Stakeholder roles  Read slide as is – highlight again the importance of the Statement of Commitment’s real demonstration of how it takes a care team approach to apply the legislative framework to provide the level of care our children and young people in care should expect. | **Slide 13**   |  | | --- | |  | |
| 8 min | **Show slide 14 and 15**  Child Safety’s roles  Child safety’s roles as outlined in the Statement of Commitment reflect their overall role as a statutory body responsible for the protection of children and families in Queensland.    Highlight importance of these roles needing to play an active part in Child Safety’s everyday decisions, interactions with birth families, carers and other stakeholders. Again, whilst broad these roles can be actively applied to everyday interactions between Child Safety and carers for example if a carer does not have a placement agreement or a copy of the case plan, the carer and/or foster and kinship care service can use the Statement of Commitment as a platform to discuss the roles of Child Safety, one being ‘*ensuring placement needs and supports for children are clearly documented, updated and understood through case plans and care agreements’*  Once again highlight that when examining each of these roles, they are guided by the legislative framework underpinning the Child Protection Act for example ‘Consulting with children and young people and support them to participate in decisions effecting their lives’ is driven by the Principles of the Child Protection Act 5E – Participation of children and young people | **Slide 14**   |  | | --- | |  |   **Slide 15**   |  | | --- | |  | |

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| Slide 16 -  2 min  Slide 17 –  4min | **Show Slide 16**  Foster and Kinship Care agency role  **If facilitator is from a foster and kinship care service, then read these slides out in first person**  **i.e., it is our role to work with child safety to identify kinship carers..., it is our role to involve foster and kinship carers in the planning and delivery of training…….**  The Statement of Commitment allows for better understanding of the Foster and Kinship Care agencies role and clearly outlines roles and responsibilities. Whilst once again broad, carers can speak to their foster and kinship care agency about what these mean in the context of their individual carer families. For example, when speaking to providing ongoing supports for foster and kinship carers through a range of services and resources, a carer family would need to sit down with their foster and kinship care service to identify what these services and resources would look like for them. | **Slide 16**   |  | | --- | |  |   **Slide 17**   |  | | --- | |  | |
| Slide 18  15min  Slide 19  1 min | **Show Slide 18** Every day application of the Statement of Commitment – Carer Stakeholder Roles and Responsibilities *Refer to Activity Guide*  **Handout -** *Refer to Case Studies* ***1, 5*** *– Statement of Commitment Scenarios in handouts.*  Activity - Practical application of Statement of Commitment – Roles and Responsibilities of others  **Show slide 19**  Summary   * Read out slide – presenter can reflect on any aspect of the activities or content to highlight the importance of the Statement of Commitment in carer’s self-care and advocacy. * Refer Carers to QFKC website for a webinar on the Statement of Commitment which goes into content covered today in more depth qfkc.com.au | **Slide 18**   |  | | --- | |  |   **Slide 19**   |  | | --- | |  | |
| Slide 20  30 sec  Slide 21  1 min  Slide 22  2 min | **Show slide 20, 21 and 22**  *Human Rights Act 2019*   * Presenter to now state they are introducing carers to the next really important document that supports carers in their care and advocacy of children and young people and themselves – the Human Rights Act * Read through slide 18 and 19 as they are   Then talk to the importance of carers having a working understanding of the Human Rights Act due to both their obligations to children and young people under the Act which will be explored and their own rights which will also be explored.  **NOTE: - facilitator should have working knowledge of the Human rights act and be able to draw on relevance to act in day to day practice.** | **Slide 20**   |  | | --- | |  |   **Slide 21**   |  | | --- | |  |   **Slide 22**   |  | | --- | |  | |

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| Unknown time | **Show Slide 23**  What rights are protected in the Qld Human Rights Act 2019  **Handout –** Encourage carers to use QR code to bring up and provide handout to those that require them  Let carers read through the rights and if time permits, ask group to identify which rights would be most applicable in the Child Protection area  (S16, 17, 25, 26, 27, 28, 36, 37) All apply, however some specific ones that are likely to be more relevant are as listed below   * Protection of families and children * Cultural rights generally * Cultural rights –Aboriginal peoples and Torres Strait Islander peoples * Privacy and Reputation * Right to Education * Right to Health Services | **Slide 23**   |  | | --- | |  | |
| Slide 24  3 min | **Show slide 24**  Public Entities  Read out slide as is  Provide example of how people functioning outside of these definitions are not bound by the Human Rights act, for example, if you are a kin carer providing informal care to your grandchild and they are not subject to a Child Protection order, you are not a public entity. If you are an approved kin carer through Child Safety and are caring for your grandchildren who is subject to a child protection order, you are a public entity, the grandparent would be a functional public entity and the CSO would be the Core public entity. | **Slide 24**   |  | | --- | |  | |
| Slide 25  1 min | **Show slide 25**  Carer responsibilities  Reassure carers that their obligations as functional public entities under the Human Rights Act, carries no expectations that were not already expected under the Statement of Standards or Charter or Rights, so if carers are providing care in line with these legislative requirements, then they are meeting the Human Rights for Children and young people. | **Slide 25**   |  | | --- | |  | |
| Slide 26  15 min | **Show slide 26**  **Handout -** *Refer to Human Rights, Statement of Standards and Charter of Rights handouts and to Human Rights Scenarios. Refer to Activity Guide*  Resources – Activity scenario handout   * Human Rights List * Charter of Rights * Statement of Standards   Activity 3 – Practical application of Statement of Commitment - Stakeholders  Scenario one – **Section 2** – Protection of families and children - Families have a right to be protected, the unit of the family should be protected**. Section 28,** Cultural Rights, Aboriginal peoples and Torres Strait Islander peoples, read section 28 (1) (2) (a) (b) (c) (d) and (3), all being relevant to the right for decisions for contact to be child centred and family focused, not budget focused.  Scenario two –**Section 25** – Privacy and reputation, read out 25 (a) – the law prevents people being recorded without their knowledge. If the carer has told the young person and the young person has not consented to be videoed, this could be seen as a breach of their privacy  Scenario three **Section 26** Protection of families and children – read out 26 (3) **Section 37 Right to Health Services** read out 37 (1)  Now provide handouts that show the links between the Human Rights, Charter of Rights and Statement of Standards and go to the Human Rights sections identified above and read out which Statement of Standards and which Charter of Rights they also relate to. | **Slide 26**   |  | | --- | |  | |

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| Slide 27  1 min | **Show slide 27**  Care team approach  Read slide out – reiterate the scenarios discussed above and that to meet any of the Human Rights, Charter of Rights and Statement of Standards, it requires a care team approach for example supporting connection to family requires   * Child Safety to appropriately fund and communicate with all care team members regarding how it will look * The carer to promote contact, be positive about family, facilitate where they can by transporting or having the child ready and available for contact * The parents and/or family by attending contact and engaging with their children | **Slide 27**   |  | | --- | |  | |
| Slide 28  4 min | **Show slide 28**  Carer rights under *Human Rights Act 2019*  Read slide out and reference handout on Human Rights and Statement of Commitment that carers already have by now  Provide an example of what one or two of these would look like in practice for a carer  i.e., Carers have the right to continue to practice whatever religion they have without discrimination – they must not be told that they can’t display items that reflect their religion i.e., a cross on their wall or that they can’t practice religious ceremony i.e., praying before a meal. However, they must not make a child or young person participate if they do not wish to and/or when the child’s guardian has not consented for them to as this would not be upholding the Human Rights of the child or young person.  Provide additional example relating to ‘Privacy and Reputation’, remind carers that when they went through their approval process, there was a disclosure statement on their assessment regarding content of the assessment and what it could be used for. However, highlight that in order to support the protection of carers information, Child Safety have developed a fact sheet for carers around ‘duty of disclosure’ which outlines a carer’s right to seek certain information contained in assessments to be withheld in proceedings on grounds of protecting a carers privacy.  Provide link to carers who are interested in reading further information in respect to this.  Link to Duty of disclosure – a fact sheet for carers – [Duty of disclosure - a fact sheet for carers (cyjma.qld.gov.au)](https://www.cyjma.qld.gov.au/resources/dcsyw/foster-kinship-care/duty-disclosure-fact-sheet-for-carers.pdf) | **Slide 28**   |  | | --- | |  | |
| Slide 29  2 min | **Show slide 29**  When Human Rights are not being met  Read slide out how it is – reinforce the importance that Human Rights Commissioner will not accept a complaint if the matter has not been through the proper complaint process available to them through the Government body first. Advice carers that we will explore in this module Child Safety’s Complaint Management process and so carers will have a clear understanding of all steps to make prior to making the decision to proceed to Human Rights Commissioner if needed.  Also highlight that the only body that is able to decide on whether a Human Right is being met or not is the Human Rights Commission. Whilst Child Safety must for example consider Human rights in the context of assessing a Harm report, they are not able to determine if a child’s Human rights have been breached, they would need to refer the matter to the Human Rights Commissioner if they felt this was a necessary action. | **Slide 29**   |  | | --- | |  | |
| Slide 30  3 min | **Show slide 30**  Flow chart of the QHRA complaints process  Read through the slide as is  Conciliation for the purpose of this process is defined as an informal and flexible approach to resolving complaints. Highlight that Conciliation will take a dialogue approach to resolution and is not about financial compensation. Recognise that whilst the Human rights Commission will encourage resolution through this conciliation process, they are not able to make directions | **Slide 30**   |  | | --- | |  | |

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| Slide 31  2 min | **Show slide 31 –** Public Entity reporting  Highlight here it is important to recognise that all complaints through the Human Rights Commission must be reported on publicly by Public Entities. It is therefore in the interests of public entities to resolve matters relating to complaints associated with Human Rights - provide statistics for 2020-2021 public reporting –sourced through the Queensland Human Rights Commission Website  Source <https://www.qhrc.qld.gov.au/resources/reports>   |  |  |  | | --- | --- | --- | | **Department of Children, Youth Justice and Multicultural Affairs** | **124 allegations** | **99 of the 124 allegations have been closed and 25 are still active.**  **Of the closed allegations:**   * **38 did not involve a limitation of rights** * **41 involved limitations that were considered to be justifiable and reasonable** * **9 were substantiated and appropriate action has been taken**   **The remaining were withdrawn (3), referred (3), unable to determine (3) and out of scope (2).** | | **Slide 31**   |  | | --- | |  | |

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| Slide 32  1 min | **Show slide 32**  Summary – *Human Rights Act 1999*  Read out slide as is  Reinforce we have now provided two really important documents to carers that can support their advocacy and support of children and themselves when navigating the Child Protection system, the Statement of Commitment and the Human Rights Act | **Slide 32**   |  | | --- | |  | |
| Slide  33 & 34  1 min | **Show Slide 33 and 34**  Placement agreements  Introduce Placement agreements. Highlight that so far during training we have spoken about two very important documents that provide frameworks for practice for Child Safety and outline roles, rights and responsibilities of care team member Highlight the use of Placement agreements helps to ensure that the intended outcomes of both documents are adhered to i.e. that everyone is clear about roles and responsibilities as set out in the Placement agreement and supports and plans are put in place which support a child’s Human Rights, Standards of Care and Charter of Rights being met.  Read out slide 31 – Highlight placement agreements are a requirement under the Child Protection Act  Highlight the words ‘must’ used in the legislation, sometimes we see words used such as may, or should, however when legislation refers to ‘must’, it has to happen  Make reference to the difference between Legislation, Policy and procedure as below to help carers understand that even though Policy and procedure may not always happen as intended, legislation is the law  Legislation – This is Law, it is considered one of the main functions of government – that is to create and enact law.  ‘The Must’  Policy – A statement of intent.  ‘The What’  Procedure – An established or official way of doing something.  ‘The How’ | **Slide 33**   |  | | --- | |  |   **Slide 34**   |  | | --- | |  | |
| Slide 35  3 min | **Show Slide 35**  Purpose of Placement agreements  Read out slide and reference that this information has been sourced from Child Safety’s practice manual – point out that carers are able to access Child Safety’s practice manual which may support their understanding of procedures in all areas relating to Child Protection.  Reflect back with carers on the Statement of Commitment and highlight that one of Child Safety’s roles identified in the document is  ‘Ensuring placement needs and supports for children are clearly documented, updated and understood through case plans and care agreements’ Reflect with carers how if they do not have a placement agreement or one that is not updated, that they could use the Statement of Commitment and the Child Protection Act as a reference with their care team to highlight the importance of one being completed | **Slide 35**   |  | | --- | |  | |
| Slide 36  2 min  Slide 35 –  1 min | **Show slide 36 and 37**  If PA’s are not completed  Highlight that when Placement agreements are not completed, they can result in many negative consequences for carer families– read out the list from the slide.  Ask audience whether there are any negative consequences not already identified | **Slide 36**   |  | | --- | |  |   **Slide 37**   |  | | --- | |  | |

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| Slide  38 & 39  1 min | **Show slide 38 and 39**  Support and training for approved carers  Highlight the significance of this reform - for the first time in history, support and training needs of carers has been recognised in legislation. Refer carers back to 30 and 31 when we talked about what legislation meant - reference this again  *Legislation – This is Law, it is considered one of the main functions of government – that is to create and enact law.*  *‘The Must’* | **Slide 38**   |  | | --- | |  |   **Slide 39**   |  | | --- | |  | |

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| Slide 40  1 min  Slide 41  2 min  Slide 42  1 min | **Show slides 40, 41 and 42**  Section 148E  Read out content of slides – reference that these slides are a direct copy from the *Child Protection Act* *1999*  Provide explanation around Section 148 E (3) i.e., whilst carer’s support will include access to respite, this must be considered in the context of the overall Principles of the Child Protection Act, in particular the main principle for administering the Child Protection Act is that the safety, wellbeing and best interests of a child, both through childhood and for the rest of the child’s life are paramount  Therefore, if a respite placement cannot be sourced, then it would not be practicable for the carer to access respite.  Highlight again the connection between all the documents discussed today i.e. this piece of legislation is already supported by identified roles in the Statement of Commitment and therefore reinforces the importance of them:  i.e. Child Safety commits to ‘*providing emotional, financial, therapeutic, practical and educational support for both the child or young person placed in their care and the carers themselves* and *to work together with families and foster and kinship carer services to identify and support kinship carers*  Foster and Kinship care agency’s role *to work with Child Safety to provide access to training, both initial and ongoing*  Reinforce the need for carers to be aware of the enactment of this section of the Child Protection act in Tranche 2 –  Facilitator can see further information about the Child Protection Bill and Tranches through visiting the following site  <https://www.cyjma.qld.gov.au/protecting-children/child-family-reform/child-protection-legislation-reform>  Slide 42 – provides a QR code to ‘Information for carers’ webpage. | **Slide 40**   |  | | --- | |  |   **Slide 41**   |  | | --- | |  |   **Slide 42**   |  | | --- | |  | |
| Slide 43 30sec  Slide 44  1 min  Slide 45  1 min | **Show slides 43, 44 and 45**  Complaints management  Read slides as is, second slide helps carers visualise where Complaints sit under what is a big Department (will also help carers see where other program areas sit)  Office of the Chief Practitioner specialist areas – highlight the wealth of knowledge the Complaints Unit has access to.  Provide context that the Complaints Unit previously sat under the corporate section of Child Safety however following a review into the Unit from the Ombudsman that was finalised in 2020, significant changes have taken place resulting in a Complaints Unit that now sits under a Practice branch and therefore can influence change in practice where systems issues are identified. Advice carers they can access a copy of this report and review findings and recommendations that were made and implemented by heading to  <https://www.ombudsman.qld.gov.au/improve-public-administration/investigative-reports-and-casebooks/investigative-reports/management-of-child-safety-complaints-second-report>  **Note: facilitator should be familiar with Child Safety’s complaint policy and procedure** | **Slide 43**   |  | | --- | |  |   **Slide 44**   |  | | --- | |  |   **Slide 45**   |  | | --- | |  | |

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| Slide 46  2 min | **Show slides 46**  Complaint’s process (overview)  Explain that the slide illustrates the different stages of raising a matter with Child Safety – read out slide as is  IMPORTANT – highlight the language we use when raising concerns with Child Safety matters, that if you are raising a First attempt at Resolution, you need to identify this in the language you use. For example, if you are not being responded to by your CSO in respect to a financial reimbursement, when emailing the STL, state you are raising this as a First Attempt as Resolution in an attempt to bring about early resolution to the matter. | **Slide 46**   |  | | --- | |  | |
| Slide 47  3min | **Show slide 47**  Complaint’s management – key points  Read out key points, highlight that many of these key points have come about as a result of changes to the Complaints Unit stemming from the recommendations made out of the Ombudsman’s review. Highlight carers should experience a streamlined process when accessing the complaints unit and they can access the complaints policy and procedure which provides more detailed information as to how to make a complaint and what to expect. Encourage carers to read through by going to Child Safety’s compliments and Complaint’s website which has a copy of the policy and procedure available to the public to read  <https://www.cyjma.qld.gov.au/contact-us/compliments-complaints> | **Slide 47**   |  | | --- | |  | |
| Slide 48  30 sec | **Show slide 48**  First attempt at resolution  Read out slide  Highlight again importance of using language when initiating this response and that when resolved at this level, it promotes a process which is locally based, and solution focused. Highlight that we use this response early on when experiencing concerns, that it is important to not wait until matters become complex before we attempt to resolve – reiterate carers MUST USE THIS LANUGAGE so Child Safety understand that you are following a complaints management process and that in the event it is not resolved, you will escalate to a complaints process. | **Slide 48**   |  | | --- | |  | |
| Slide 49  2 min | **Show slide 49**  Complaint  Highlight that in most instances a FAAR would have needed to be attempted before a complaint is made, however provide an example of where this may not be the case i.e. If the complaint relates to a decision already made by the CSSC Manager and communicated to the carer whereby they are clear they will not be changing their decision.  Highlight those complaints can be made through the Central Complaints unit that relate to not only Child Safety workers, but also contracted services, so if a carer had a complaint about their foster and kinship care agency, they should first attempt to address through the appropriate complaint process the agency offers, however in the event a carer remains unsatisfied with the response, there is the option to lodge a complaint through the Central Complaints unit  Complaints can be managed through one of three ways:   * Direct Response * Investigation * Practice Review   The most appropriate option to apply will depend on the complaint – all three responses will result in a written outcome to the complainant. | **Slide 49**   |  | | --- | |  | |
| Slide 50  1 min | **Show slide 50**  Internal review  Highlight two processes, one relates to process, and one relates to merit  Internal Process review is where the complaint process appears not to have followed the correct procedure as per the Complaints Management Policy and Procedure – if correct processes were not followed, is the outcome reflective of a fair and just process?  Internal Merit Review is where the original complaint is re-investigated with a solution focused framework, carer would need to identify when requesting an Internal Merit review why they do not agree with the outcome and provide a written points that support their view that the outcome is not the right one. | **Slide 50**   |  | | --- | |  | |
| Slide 51  30 sec | **Show slide 51**  Complaint management | Scenarios  Explain we will now be exploring each process through scenarios and here are our three carers | **Slide 51**   |  | | --- | |  | |
| Slide 52  1 min | **Show slide 52**  First attempt at resolution (FAAR)  Read slide as is | **Slide 52**   |  | | --- | |  | |
| Slide 53  1 min  Slide 54  2min | **Show Slide 53 and 54**  First attempt at resolution (FAAR)  Trainer is highlighting through the use of the table the number of places that Phil can go to, the writing in black is Phil’s options to raise with, the ones in white are not avenues he can raise his matter with  You then show the next slide and say that in this instance Phil chooses to call the Ombudsman in respect to his concerns – you highlight how the process unfolds, that the Ombudsman asks Phil if he has raised his concerns first with Child Safety and he tells them yes because in Phil’s mind, by raising with the CSO he has tried to address with the dept. The Ombudsman checks with the Complaints unit and realises no formal process has occurred, Central complaints refers to STL for a FAAR response and the matter is finalised, however takes nine days | **Slide 53**   |  | | --- | |  |   **Slide 54**   |  | | --- | |  | |
| Slide 55  1 min | **Show slide 55**  First attempt at resolution | Scenarios  Explain in this scenario, Phil goes straight to the Central Complaints unit who initiated a FAAR response and Phil receives an outcome in two days.  Highlight the importance of carers understanding the Complaints management process and using the language used in this process to raise concerns and bring about resolution. Highlight this should reduce timeframes for resolution and reduce conflict as FAAR’s support a collaborative approach to resolving issues and is solution focused.  These pathways demonstrate the most effective method of achieving resolution is to address the concerns at the local level as an initial action. | **Slide 55**   |  | | --- | |  | |

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| Slide 56  30 sec | **Show slide 56**  First attempt at resolution | Scenarios  Read out Pauline’s concern | **Slide 56**   |  | | --- | |  | |
| Slide 57  1 min  Slide 58  1 min  Slide 59  1 min | **Show slide 57, 58 and 59**  First attempt at resolution | Scenarios  Show carers the options available to Pauline – highlighting again the ones in white are not available avenues for her to address her concerns  Pauline decides to contact the complaints unit – read out slides as is to illustrate how the process unfolds for Pauline | **Slide 57**   |  | | --- | |  |   **Slide 58**   |  | | --- | |  |   **Slide 59**   |  | | --- | |  | |
| Slide 60  30 sec  Slide 61  30 sec  Slide 62  30 sec | **Show slide 60, 61 & 62**  First attempt at resolution | Scenarios  Read out Brooke’s scenario  Highlight where Brooke can go to address her concerns and that she decides to contact the complaints unit and the matter is referred for a FAAR | **Slide 60**   |  | | --- | |  |   **Slide 61**   |  | | --- | |  |   **Slide 62**   |  | | --- | |  | |

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| Slide 63  30 sec  Slide 64  30 sec | **Show slide 63 and 64**  Complaint | Scenarios  Read out slide as is – highlight the complaints management procedure understands that FAAR’s may not end in resolution and in this instance highlight that a consequence of the matter not being addressed through a FAAR has led to additional concerns for the carer and now the department in relation to the carer | **Slide 63**   |  | | --- | |  |   **Slide 64**   |  | | --- | |  | |
| Slide 65  1 min  Slide 66  30 sec  Slide 67  30sec | **Show slide 65, 66 & 67**  Complaint | Scenarios  Highlight Brooke is now back to considering her options as to how she will raise her concerns  Brooke makes a complaint which form two allegations and will be investigated – read out allegations  Brooke receives outcome with two findings – outline that outcomes from complaints will either be  Further Action required or No Further Action recommended – highlight that the complaints unit have come away from language of substantiated and unsubstantiated so that focus remains on whether actions are required or not to address an issue, rather than on any wrongdoing.  In Brooke’s case, one matter has been identified as requiring further action which in practice means that contact with the uncle will be supervised at the CSSC, the outcome Brooke was seeking.  The other matter relates to the SOC process, where no further action was recommended, therefore the process being undertaken by the CSSC continues as was. | **Slide 65**   |  | | --- | |  |   **Slide 66**   |  | | --- | |  |   **Slide 67**   |  | | --- | |  | |
| Slide 68  30 sec  Slide 69  1 min | **Show Slide 68 and 69**  Internal Review | Scenario  Brooke can request an Internal Merit review where her original allegations are reinvestigated – read outcome that was reached  Ensure trainer highlights actions undertaken to support the outcome i.e., counselling recommended for the child and that the CSO has responsibility to complete home visit to action this. Highlight that this demonstrates that the Complaint process is not just about investigations, but also best practice, solution focused recommendations that support findings. | **Slide 68**   |  | | --- | |  |   **Slide 69**   |  | | --- | |  | |

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| Slide 70  X mins | **Show Slide 70**  Agency slide| complaints process  *Add in your agencies own slide for your complaints management process and go through with group* | **Slide 70**   |  | | --- | |  | |
| Slide 71  1 min | **Show Slide 71**  Supporting young people to raise complaints  Read out slide. Highlight importance of carers supporting young people in their care to feel empowered to access the complaints unit to raise their own concerns when they are not happy with a decision, or a decision has not been made in respect to them.  Whilst carers can certainly raise complaints on behalf of young people, carers have a role in empowering young people with information and pathways so that they can raise their own concerns and be heard. This is a necessary step in their transition to adulthood as they navigate complex government systems and feel able to challenge decisions, actions, or inactions they feel are not ok.  Refer carers to QFKC website for additional webinar on Complaints Management | **Slide 71**   |  | | --- | |  | |
| Slide 72  1 min | **Show slide 72**  Grief and loss  Introduce topic of Grief and Loss, acknowledge that this is a topic that we could spend many days on, but today we will just be touching on it because it is important to acknowledge that all carer households will experience grief and loss through their journey as carers and carers should be supported to work through this very natural process.  **Agencies should highlight that should carers require additional support in this area they can speak with their Foster & Kinship Care practitioner for support and advice.** | **Slide 72**   |  | | --- | |  | |
| Slide 73  3 min | **Show slide 73**  Grief and loss  Read out slide –highlight again that it would be expected for carers to go through grief and loss and give examples  For Foster carers this may be about saying goodbye to a child that you have naturally formed an attachment too, for kinship carers Grief and Loss can be associated with many life changes that come about because of the kinship care role, for example loss of relationships with other family, friends, loss of lifestyle.  Highlight the importance of considering grief and loss in the context of the entire carer family, not just the foster or kinship carers but biological children and other children in the care arrangement  Highlight that for carers the experience of disenfranchised grief is most common as it is when **your grieving doesn't fit in with your larger society's attitude about your role in that grief i.e., carers should be used to saying goodbye to children, that this their job.**  Comparing what a Carer family will experience as opposed to a general family will highlight the disenfranchised grief that is associated with the role of Foster Carer. For example, if a neighbour or work college experiences a loss of a child the community will rally around that person and offer condolences and sympathy. When a Carer losses a placement for any reason there is a generalist idea that the grief is “less than” or “should have been expected because this is your role. These generalist and stigmatising ideas can restrict a Carer from truly acknowledging the pain that they are experiencing or accessing the support that they need.  Highlight another common type of grief experienced by carers is Anticipatory Grief – the experience of grief before a loss occurs, but knowing it is going to. For carers this is common when supporting children through reunifications, again this is normal and natural, but must be managed appropriately so as not to negatively impact on the reunification process.  Highlight that acknowledging that you are grieving and understanding what is involved in this may support you to work through it | **Slide 73**   |  | | --- | |  | |
| Slide 74  5 min | **Show slide 74**  Ideas on how to support carer families to work through grief and loss  Brainstorm 3 – What are some strategies that you have done to help work through a child leaving your care | **Slide 74**   |  | | --- | |  | |
| Slide 75  1 min  Slide 76  3 min | **Show Slides 75 and 76**  How to assist Grief and Loss Ideas  Highlight all relationships and families are different and so everyone will experience grief and loss differently, no one truly understands the grief and loss of someone else because of this – however the experience of carer households managing grief and loss could have similarities in terms of the strategies drawn on  Highlight the following strategies that could assist with a carers grief and loss–   * Create a collage of artwork carers and children have done together * Collage a quilt of old clothing or other sentimental treasures for the child to keep * Colour calico bears together * Have strategies that build a positive working relationship with biological families – i.e., communication books, writing letters with child for family, * Work to develop an understanding of how the child is feeling about moving on and when/where appropriate share your own feelings (appropriately) * Collect books and movies that relate to grief, loss, emotions and letting go i.e., Frozen, Inside Out * Create your own story books about the child’s time with you (supports ID and the child knowing their story), families can help with this if appropriate, or photo books * Give children space to ask questions * Role play with toys   Facilitator to record any feedback that is not listed  **If the facilitator has a deidentified practice example, please provide that to the group:** | **Slide 75**   |  | | --- | |  |   **Slide 76**   |  | | --- | |  | |
| Slide 77  1 min | **Show slides 77**  Support for carers  It is important for trainers to emphasise the importance of grief and loss not negatively impacting on children and young people. Unintended consequences of grief and loss being shared and experienced by children and young people in a placement could result in issues developing such as the child experiencing divided loyalty – child saying to everyone what they think they want to hear. For example, the child may say to mum and dad that they don’t like the carer and want to come home, but they may be saying to the carer they don’t feel safe at home and want to stay with them. It is critical that children and young people experience an environment where they feel supported to love everyone in their life and where they feel that the adults surrounding them are making safe and appropriate decisions for their future.  Highlight that the Statement of Commitment specifically refers to the right for carers to access counselling for matters that affect them in their fostering role. This should not just be viewed as the case for the caregivers, but the entire carer family who would all experience grief and loss, biological children and other children in the care arrangement must always be considered when identifying how to support a carer family to work through their grief and loss. Highlight carers considering access to counselling through their anticipatory grief stages rather than waiting until the child leaves as this will assist them to build strategies to cope with the grief and loss for both themselves and the family and help the child experience a reunification that is child focused and positive.  Share below quote from a foster carer  *There are so many things I miss about her. But I am so grateful I get to miss them and I didn't miss out on knowing her. She is a treasure that I keep in my heart and someone I will always love’.*  [*http://anothersmalladventure.blogspot.com.au/2012/10/how-to-say-goodbye-when-you-foster.html*](http://anothersmalladventure.blogspot.com.au/2012/10/how-to-say-goodbye-when-you-foster.html) | **Slide 77**   |  | | --- | |  | |
| Slide 78  30 sec | **Slide 78**  Vicarious trauma  Read introduction slide | **Slide 78**   |  | | --- | |  | |
| Slide 79  2 min | **Slide 79**  Vicarious trauma – what is it?  Introduce topic of Vicarious trauma and read out definition – quoting where this particular definition originates from.  Highlight, that as with Grief and Loss, the experience of Vicarious trauma is not uncommon, particularly for people volunteering and working in fields such as Child Protection.  Your role caring for children will mean that you will likely experience exposure to some of these very difficult to hear stories and it is important that carers feel supported to process this type of information | **Slide 79**   |  | | --- | |  | |
| Slide 80  2 min | **Slide 80**  Signs to watch out for  Highlight that now we have defined Vicarious trauma and understand that it can be a common response to being exposed to another’s trauma, we need to explore what signs to watch out for in order to access the right support at the right time if directly affected.  Read slide as is  Highlight that sometimes it may not be you that notices these signs but someone from your agency or care team and they have a responsibility to raise this with you so that once again you can be supported to overcome challenges you may be facing.  As stated in the slide, emphasis with carers that the list they are about to see will show traits that everyone experiences at different times of their lives to varying degrees, however if you notice any of these symptoms as ongoing and prolonged you have a responsibility to seek support.  Highlight that if support is not accessed at the right time, these feelings and experiences are likely to have a negative impact on individual carers, the carers biological family and the children you are providing care to. State ‘you have the responsibility to seek support and the right to receive support’ reflect back on the Statement of Commitment and remind carers of their rights and responsibilities in this document. | **Slide 80**   |  | | --- | |  | |

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| Slide 81  2 min  Slide 82  2 min | **Slide 81 and 82**  Signs to watch out for  Read out as is  Provide examples of how some of these could impact on carer, family and children  i.e., if a carer is experiencing compassion fatigue, they are less likely to be able to separate a child’s behaviour from the child, they are less likely to attribute the behaviour to trauma and are more likely to take it personally. This has the risk of destabilising a care arrangement.  If a carer is feeling profoundly distrustful of other people and in the world in general, they are less likely to share open, transparent, and honest conversations with the child’s care team – this can result in carer families becoming isolated and needs of children not being met, again with the potential of destabilising a care arrangement. | **Slide 81**   |  | | --- | |  |   **Slide 82**   |  | | --- | |  | |
| Slide 83  30 sec | **Slide 83**  Strategies to manage vicarious trauma  Read slide  Facilitator to provide any additional ideas | **Slide 83**   |  | | --- | |  | |
| Slide 84  2 min | **Slide 84**  Strategies to manage vicarious trauma continued…  Read Slide | **Slide 84**   |  | | --- | |  | |
| Slide 85  30 sec | **Slide 85**  Where to access support  Transition group to section now on where else they can access support for themselves or for the child they provide care for | **Slide 85**   |  | | --- | |  | |
| Slide 86  1 min | **Show 86**  Foster and kinship care line  Read out slide – Ask carers to put their hand up if they were aware of the existence of the line, ask carers to keep their hand up if they have used it – comment on what you see  Highlight the importance of this service, that the Child Safety workers answering these calls are highly experienced practitioners who carers should feel confident to contact for any of the services listed.  Remind carers that their day to day support should be accessed through their Foster and Kinship Care agency, however this is an additional afterhours resource they can access | **Slide 86**   |  | | --- | |  | |

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| Slide 87  1 min | **Show 87**  How the OPG helps children and young people we visit  Read through slide as is, highlight that the OPG Community Visitor program or Child Advocate program are not services that are there for support and advocacy of carers – they are there to provide advocacy to children and young people. If the matter that a carer requires support and advocacy relates to the expressed views and wishes of a child or a Standard of care not being met for a child by Child Safety, a carer can contact the OPG on behalf of a child or young person   * At OPG, we know individual advocacy can empower a child or young person, not just by having someone speaking up for them, but also by providing them with information about their rights and options. * OPG’s focus is on ensuring children and young people are involved in decisions made about their lives. * The decision may not always go the way they want, but knowing their views and wishes were heard and considered, and understanding why a decision was made, is empowering in itself. Our advocacy also includes ensuring the reasons for a decision are explained to the child or young person in a way that is appropriate to their age and level of understanding. * OPG’s child advocacy functions are performed by community visitors and child advocate-legal officers. * Promoting and protecting the rights and interests of children and young people is at the core of a Community Visitor’s and Child Advocate’s advocacy. | **Slide 87**   |  | | --- | |  | |

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| Slide 88  5 min | **Slide 88**  How can a Community Visitor help children and young people?  Read out slides as is – highlight this slide helps carers to understand the functions of the OPG and what to expect when they come to your home. Reference the links for carers to look up for further information in those areas.   * OPG community visitors (CVs) are there to help a child or young person in a foster home, the home of a kinship carer, a residential care facility, a youth detention or adult correctional centre, disability service or mental health facility. Community Visitors are independent, which means they are not from any government department or community organisation. They make sure that the concerns, views and wishes of children and young people are listened to and seriously considered. * What can a CV do to help a child or young person?   + We will listen to your views and wishes, and help you speak to your child safety officer about what they are, or we can speak to your child safety officer on your behalf.   + We can help you with contact with your family, siblings, or child safety officer.   + We can assist you to have a say in what is involved in your case plans, particularly in relation to your education, healthcare, and counselling plans.   + We can refer you to an OPG child advocate for legal issues and concerns you have. * How can a child or young person contact a CV?   + Phone the Office of the Public Guardian on **1300 653 187** (free call within QLD - calls from mobile phones may attract charges)**.**   + [Use OPG quick message to request a call from your CV online](https://www.publicguardian.qld.gov.au/about-us/contact-us) (linked above)   + They can ask carer to help them phone or e-mail the OPG.   + They can ask a carer to contact a OPG community visitor for them by phone or e-mail. | **Slide 88**   |  | | --- | |  | |
| Slide 89  5 min | **Show slide 89**  How can a Child Advocate help children and young people?  Read slide | **Slide 89**   |  | | --- | |  | |
| Slide 90  6 min | **Slide 90 - QFKC video**  Before showing video, highlight QFKC is the Peak organisation for foster and kinship carers and partnered with Child Safety to develop the training they are participating in today.  Highlight key service delivery areas as being  Individual Case work  Legal Service  QFKC support Team (volunteer carers who are trained and supported to provide advice and support to you)  Development and delivery of practice based training  Recruitment of Foster carers and exits of foster and kinship carers  Broad policy and practice development  QFKC annual State Conference  Highlight that whilst day to day support will always sit with foster and kinship care services, that QFKC has 6 case officers across the State who can support carers in complex matters that are not able to be resolved within the care team  Show video and encourage carers to visit QFKC’s website for further information [www.qfkc.com.au](http://www.qfkc.com.au) on services on offer to support them in their caring role. | **Slide 90**   |  | | --- | |  | |
| Slide 91 | **Slide 91** Thank you ***Thank participants for their input and work during the training.***  ***Ask participants to complete the training evaluation form.*** | **Slide 91**   |  | | --- | |  | |