*Practice Guide for*

# Youth Support Services

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**Youth Support Services Best Practice Guide**

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**Disclaimer**:

It is intended that the information contained in this guide will be regularly updated. While every effort has been made to ensure the accuracy of the information contained in this edition of the guide, please advise DCCSDS of any inaccuracies, omissions or amendments for inclusion in future editions and updates.

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Contents

[**Section 1 The Youth Support Model** 1](#_Toc433029859)

[1.1 Overview 1](#_Toc433029860)

[1.2 Service delivery types 1](#_Toc433029863)

[1.3 Context of the Youth Support approach 4](#_Toc433029869)

[1.4 Practice approach 6](#_Toc433029870)

[1.5 Key practice imperatives 7](#_Toc433029871)

[1.6 Youth Support Client Information System (YSCIS) 9](#_Toc433029872)

[**Section 2** **Engaging with young people** 10](#_Toc433029873)

[2.1 Making the service accessible 10](#_Toc433029874)

[2.2 Facilitating access through outreach and flexible entry 12](#_Toc433029875)

[2.3 Encouraging young people to engage with the service 14](#_Toc433029877)

[2.4 Completing intake processes 15](#_Toc433029878)

[2.5 Using proactive strategies to maintain engagement 18](#_Toc433029883)

[**Section 3**  **Assessing strengths and needs** 20](#_Toc433029884)

[3.1 Assessment in the context of youth support work 20](#_Toc433029885)

[3.2 Doing a brief ‘needs and wants’ appraisal 21](#_Toc433029886)

[3.3 Screening for risk and vulnerabilities 22](#_Toc433029888)

[3.4 Detailed Youth Wellbeing Assessment to inform planning 23](#_Toc433029890)

[3.5 Reviewing progress and re-assessing needs 26](#_Toc433029892)

[**Section 4 Support planning and review** 27](#_Toc433029893)

[4.1 Overview of the support planning process 27](#_Toc433029894)

[4.2 Linking assessment to support planning 29](#_Toc433029895)

[4.3 Inclusive goal setting 29](#_Toc433029896)

[4.4 Supporting young people towards change 31](#_Toc433029898)

[4.5 Collaborative and integrated case management 31](#_Toc433029899)

[4.6 Reviewing progress 32](#_Toc433029900)

[4.7 Moving on – case closure 33](#_Toc433029901)

[**Section 5**  **Maintaining connections** 35](#_Toc433029904)

[5.1 Maintaining family connections 35](#_Toc433029905)

[5.2 Staying engaged with schooling / earning 39](#_Toc433029909)

[5.3 Maintaining community connections 41](#_Toc433029913)

[**Section 6 Working with young people** 44](#_Toc433029916)

[6.1 Providing active support 44](#_Toc433029917)

[6.2 Using motivational strategies 46](#_Toc433029922)

[6.3 Using brokerage 48](#_Toc433029925)

[6.4 Working with particular groups 49](#_Toc433029926)

[**Section 7 Working with other agencies** 57](#_Toc433029933)

[7.1 Being part of an integrated service system 57](#_Toc433029934)

[7.2 Coordinating service delivery 58](#_Toc433029935)

[7.3 Collaborating with other agencies 59](#_Toc433029936)

[7.4 Implementing integrated responses 60](#_Toc433029937)

[7.5 Working with statutory services 62](#_Toc433029938)

[**Section 8 Confidentiality and recording** 64](#_Toc433029940)

[8.1 Organisational and legal context 64](#_Toc433029941)

[8.2 Collecting and storing information 65](#_Toc433029944)

[8.3 Information sharing and confidentiality 67](#_Toc433029946)

[8.4 Recording case-notes 69](#_Toc433029951)

[**Section 9 Duty of care issues** 71](#_Toc433029953)

[9.1 Organisational and legal context 71](#_Toc433029954)

[9.2 Fulfilling a duty of care to young people 73](#_Toc433029957)

[9.3 Responding to child protection issues 77](#_Toc433029961)

[9.4 Reporting critical incidents 80](#_Toc433029963)

[**Section 10 Staff care and supervision** 82](#_Toc433029964)

[10.1 Being professional 82](#_Toc433029965)

[10.2 Staying safe 84](#_Toc433029969)

[**Reference List** 86](#_Toc433029972)

[Appendix A Initial Contact Assessment CAT form 88](#_Toc433029973)

[Appendix B Youth Wellbeing Assessment CAT 89](#_Toc433029974)

[Appendix C Sample support plan form 90](#_Toc433029975)

[Appendix D Sample child protection report form 91](#_Toc433029976)

[Appendix E Sample critical incident report form 93](#_Toc433029977)

### Introduction

This practice guide provides youth support workers and their organisations funded under Youth Support by the Department of Communities Child Safety and Disability Services with a range of practice guidelines, information and resources for effectively engaging and working with vulnerable young people.

The guide acknowledges the diversity of organisations working with young people and that services evolve over time and are different from one location to the next. The guide recognises the service variation and flexibility required to achieve optimal outcomes for young people across the state, including in urban, regional, rural and remote localities.

The guide outlines some specific practice requirements and orientations to practice which apply to services provided under the renewed Youth Support approach. However it is not intended that this guide takes the place of organisational policies and procedures already in place for organisations. It is meant to help guide youth support workers in their approach to practice with young people and their families under the Youth Support model, and complement existing procedures.

### Using the Guide

*C:\Users\Anne Elliott\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\E0RV9F54\MC900217102[1].wmf*The guide is divided into nine sections. Hyperlinks are used for easy navigation. Cross-referencing occurs regularly through the document and is indicated by hypertext.

The guide contains sample forms indicated by and links to resources and further information.

A feedback sheet has been included to provide a means for workers to suggest amendments and provide additional information for future updates.

# Section 1 The Youth Support Model

## 1.1 Overview

Youth Support (YS) is focused on providing support services to vulnerable young people and strengthening their relationships with their families and support networks.

Funded organisations are encouraged to form collaborative partnerships to contribute to an integrated service system to support vulnerable young people across a continuum of low to high/complex needs.

### Target group

The target group of the renewed Youth Support approach is young people aged 12 to 18 years of age who are at risk of:

* disconnecting from their family/community or support networks
* disengaging from school, training and/or employment
* harm, including self-harm
* homelessness.

Youth Support provides an essential early intervention response to young people who present with risk factors that may impact their well-being and result in harm, homelessness and/or negative health outcomes.

### Youth Support outcomes

The Youth Support model aims to deliver four key outcomes, being that young people:

* experience positive relationships with their family and community
* are engaged in education, training and/or employment
* lead healthy and violence free lives
* have safe and stable places to live.

## 1.2 Service delivery types

The Youth Support approach includes three service types: YS Access services, YS Support services and YS Integrated response services.

### YS Access service

Key components of a YS Access service include:

* conducting initial brief needs assessment to identify needs and the assistance a young person may require to help avoid escalation of the presenting issues
* conducting initial risk assessment as part of the initial needs assessment
* identifying the most appropriate assistance available in accordance with a young person’s level of need and circumstances
* providing young people and their families with information on available services and resources
* facilitating referrals and advocacy, where needed, to assist young people to access relevant mainstream and specialist services, e.g. drug and alcohol, education, mental health, homelessness services
* facilitating practical support until appropriate referral is completed.

Making active supported referrals requires YS Access services to be well connected to a wide range of services in their area. Youth support workers aim to ensure that young people are referred to the most appropriate service/s for their identified needs, taking into account their individual circumstances and the service resources available. A YS Access service may provide brief support until the referral service engages with the young person or their need is addressed.

Information

Brief assessment

Brief support

Referral

Tier 1: Access

family

other relevant services

other Youth Support services

*connection with / referral to*

### YS Support service

YS Support services provide individualised, practical support to vulnerable young people with medium to high needs, with planned support towards achieving goals within the young person’s priority areas for change. In accordance with the focus of the YS approach, support planning relates in particular to addressing disconnection from family, community and schooling, and achieving stable housing and wellbeing.

Key components of a YS Support service include:

* undertaking comprehensive needs and strengths assessment with young people including initial and ongoing risk assessment, and safety planning as required
* developing support plans with young people which aim to strengthen the support structures around them, including family supports, and develop their own capacities
* providing practical assistance, advocacy and interpersonal support and safety planning as needed
* facilitating supported referrals to access specialist services including drug or alcohol, mental health, housing services, legal services, domestic and family violence support, and general health services
* collaborating and participating in inter-agency case review meetings if required.

YS Support services are expected to contribute to and participate in collaborative service delivery within the local service system to help ensure that:

* young people are able to access services to meet a range of specific needs
* services work with young people in collaborative ways that reduce the stress of multiple service demands and avoid gaps.

Youth Wellbeing

Assessment

CAT

Tier 2: Support

family

school / learning

earning

community

**Support service**

Support plan

Referrals

Support

services

*re-connection with*

Coordinated case

conferences

### YS Integrated response

The role of YS Integrated response services is to deliver effective, coordinated and integrated responses to young people with high level multiple and complex needs. This involves integrating case management responses for young people across a number of service providers.

Key components of delivering a YS Integrated response service include:

* undertaking comprehensive needs and strengths assessment with young people including initial and ongoing risk assessment, and safety planning as required
* developing support plans with young people which aim to strengthen the support structures around them, including family supports, and develop their own capacities
* developing integrated responses matched to the needs of young people with complex or multiple needs, in collaboration with other involved services
* coordinating and participating in integrated responses to young people
* working with other agencies to improve local service delivery
* facilitating and participating in inter-agency case review meetings as required.

YS Integrated response services maintain a continuous connectionwith a young person to support their journey through the service system and bring involved services together to ensure a seamless and coordinated inter-agency response.

This requires that YS Integrated response services contribute to, or manage, a mechanism to support integrated responses by other local service providers to young people, including education, health, family support, housing, specialist youth services and others.  Even where the local service system may have a limited range of service types, as may be the case in some rural and remote areas, the YS Integrated response service will work closely with the core services that do exist in the area (e.g. the health service, school, Centrelink).

Youth Wellbeing

Assessment

CAT

**Tier 3: Integrated response**

family / culture

school / earning

earning

community

**Integrated**

**response**

Integrated case

management

team

Coordinated

action

Support

services

*re-connection with*

Referrals

Integrated assessment

– other agencies

Integrated support plan

### Service access sites

Each of the three tiers of Youth Support service delivery might use one or all of the following service delivery sites as entry points for young people and family members to make contact and for on-going contact:

* a centre-based site – a site young people and families can physically access
* a virtual site – an on-line or electronic communication space that young people and families can access, e.g. a web-site with use of web based forums and use of Skype
* a mobile site – outreach into spaces where young people come together, e.g. skate-parks or shopping malls or schools, taking services to young people where feasible. This can include regular outreach via a mobile service into rural and remote areas.

## 1.3 Context of the Youth Support approach

While all young people face risks as they negotiate adolescence, the majority of young people will successfully manage these risks without intervention. A small proportion of young people will require targeted support and services, to navigate and overcome more complex issues in their lives.

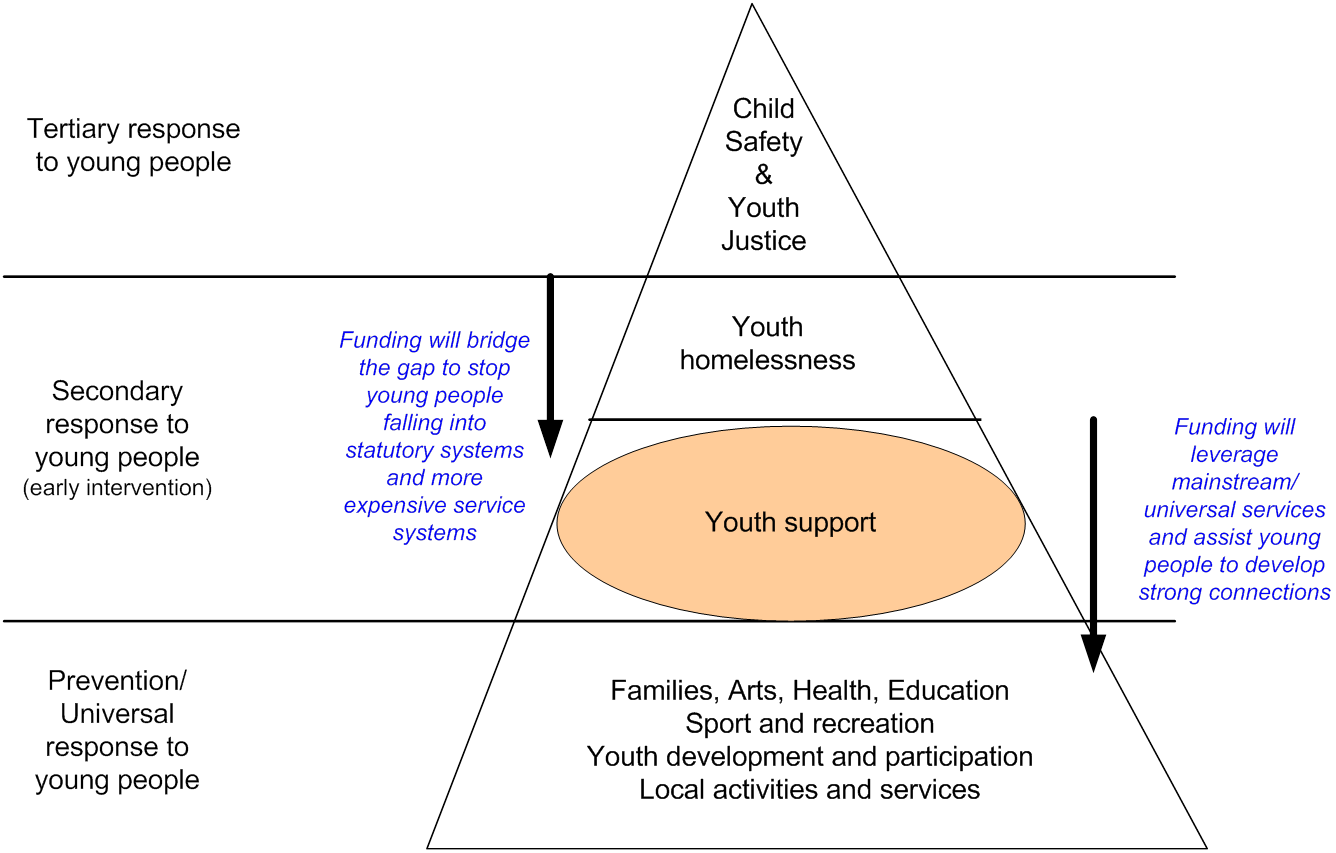
Youth Support services are at the early intervention end of the continuum of service provision. Early intervention involves working with young people, often in the context of their families, to increase resilience, resolve issues and avert crises that may propel them on a negative trajectory, requiring more intensive tertiary responses if they enter the statutory system.

Early intervention includes planned support at this critical stage with the aim of stabilising the young person’s situation. Providing support to young people and their families in the early stages of an emerging issue is crucial to prevent escalation to ongoing chronic concerns and more intrusive intervention as issues become entrenched.

Youth Support services work with young people with low to medium support needs through to high level complex needs. Support is provided to young people in the context of their family wherever possible. The service response is tailored to the individual young person’s needs for the required duration. While the service is not time-limited, it is purposeful and works towards achieving goals to enable case closure. Service provision is focused on the outcomes of reconnecting young people with natural and community supports through connecting with family, achieving and maintaining safe housing, engaging in education/ training, and maintaining reasonable physical and emotional health. Together these form the basis for well-being for young people.

Youth Support services are part of an integrated YS service system. This includes holistic service responses delivered by the one organisation providing YS Access, YS Support and YS Integrated responses, or an integrated local system of Youth Support services. Services funded under Youth Support within the same locality need to liaise to ensure that roles and protocols are clear across the service types (access, support and integrated response) and provide for easy intra-agency and/or inter-agency referrals.

The Youth Support service system does not stand alone but is connected to the broad range of other service types that, together, provide scaffolding for the young person and their family across the various key domains of their lives.



*Figure 1: Youth Support niche and focus*

## 1.4 Practice approach

This guide recognises that agencies have practice frameworks in place that inform their work with young people. It is intended that this guide will complement agencies’ current frameworks and policies.

This section articulates specific understandings and principles which underpin work within the Youth Support approach. These understandings are in line with the objectives of the YS model and needs of the target group, as articulated above, and give context to the ‘good practice’ outlined in this guide.

*Young people are seen not in isolation but as members of families and of the communities within which they live*.

This is underpinned by evidence of the value to young people of safe connection with family and community structures. This is associated with positive identity and positive self-worth. A sense of ‘belonging’ is a basic human need. ‘Disconnected’ young people are more vulnerable to mental and physical health issues and to having a range of negative issues by early adulthood. Connections sustain and support young people as they enter adulthood, and these are ideally connections that will endure through life (i.e. connections with people in young people’s everyday lives, rather than with workers or services).

*All young people have a connection with family even if it is not positive – some need support to negotiate optimal connection for their well-being.*

For most young people, regardless of current circumstances, the most enduring attachments in their lives will be with family members (this includes extended family and other kinship connections). Most young people who are disconnected from family will eventually safely reconnect, but the longer this takes the more cost may accrue to their own mental health and wellbeing.

It is important to recognise that not all families are safe places for young people to live but that with intervention this can often improve. It is also the case that many families are not ‘unsafe’ but rather are doing the best they can in difficult circumstances and may need support to provide what the young person needs. Supporting the family to support the young person is a sustainable and effective way to assist young people. Most young people will have some family members with whom they can connect and gain a sense of belonging even if this is not their parents or immediate family.

Where family and other connections are a source of harm, a young person’s right to safety is paramount. Rather than assume an ‘all or nothing approach’ youth support workers should support young people to identify optimal connections at this point in time with people who will continue to be a part of their lives.

*Young people require the security of reliable guidance and boundaries, as well as the freedom to determine their own destiny*.

This approach supports a young person’s push for independence and for self-determination. The young person has rights to privacy and to be the architect of their own planning for their lives. They also have the right to a service which recognises their vulnerabilities due to their stage of development and possibly due to the impacts of past experiences, and which acts in their interests in guiding them while not dictating to them.

The Youth Support approach focuses on developing the young person’s personal resources to make and sustain positive connections in their own life. This recognises that planned support can stabilise a young person’s situation and allow space for healing to occur and for the young person to work towards their identified goals.

The theories and bodies of knowledge underpinning the Youth Support approach include:

* Attachment theory

Provides a key to understanding the development of relationship patterns between young people and their parents or primary carer, and how this influences and impacts on the young person’s internal working models for trust, self-worth and sense of security.

* Child (adolescent) development

Provides an understanding of child and adolescent development as essential to assessing and interpreting a young person’s individual physical, emotional, social, and cognitive stage of development and related needs, regardless of their biological age. Child development theory also underpins discussion with parents and caregivers to develop their understanding of appropriate responses to a young person’s behaviour.

* Trauma-informed practice

Provides an understanding of how significant trauma impacts a young person’s cognitive and psychological development and how this manifests in their behaviour. This theory is particularly important in understanding an individual young person’s healing needs and the interventions they may require to achieve emotional stability.

* Resilience-based practice

Provides an understanding that building social competency and a young person’s sense of self-efficacy (ability to manage things for themselves and have some control, as developmentally appropriate) helps to provide them with the personal resources to cope better with adversity and feel positive about themselves.

* Systems theory

Provides an understanding of relationships and interconnection between different systems in a young person’s life and considers implications for a young person of their family context, their social system and their interface with the wider community. Systems theory recognises that changes in any one part of the family system will impact all the others, which is relevant to working with the young person within their family.

## 1.5 Key practice imperatives

The following imperatives support effective work with young people under the YS approach:

*Young person-centred*

Young people have the right to participate in decisions that involve and affect them. Workers are flexible and provide a service that is responsive to individual young people’s specific situations. The needs and well-being of each young person are the primary focus.

*Family focused*

Young people under 18 years require the support and guidance of families, and families in turn have a right to be supported in this role. Where parents cannot provide safe care for young people, young people benefit from being supported to connect with other family members or persons who can provide this.

*Relationship-based*

Developing a trusting relationship is fundamental to working effectively with young people. Treating young people with respect, and ensuring consistent and reliable communication and interaction, assists with developing rapport and sets the foundation for a positive working relationship with a young person.

*Holistic*

Young people have the right to receive holistic services which are not fragmented and disconnected. Workers understand that multiple factors impact a young person’s functioning, and employ a holistic approach. Workers focus on identifying key influencing factors and developing strategies to address these where required. The needs of vulnerable young people are best served by coordinated and integrated service responses.

*Focused on connections*

Young people exist within the context of their families, support networks and communities rather than as isolated individuals. Positive connections with peers and community structures (schools, social groups, churches) increase young people’s well-being. Youth support workers seek to enhance connections for young people across a range of settings.

*Cultural safety*

Youth support workers are sensitive to the diverse cultural beliefs and practices of young people and families including awareness of cultural and linguistic diversity, and of Aboriginal and Torres Strait Islander cultures.

In particular, the way in which youth support workers work with Aboriginal and Torres Strait Islander young people is informed by an understanding of the lasting impacts of the systemic discrimination experienced by Aboriginal people and Torres Strait Islander people including the disruption of traditional kinship arrangements, separation from country and removal of children.

*Equity*

Youth support services are delivered without discrimination or favour to all young people regardless of gender, sexuality, relationship status, ability or behaviour. Youth support workers respect the diversity of young people including their values, beliefs and experiences, and understand the impact of societal discrimination against marginalised young people.

*Open access*

Young people and families have the right to be directed to an appropriate service for their presenting need (if one exists), irrespective of their initial access point. Supported referrals ensure against young people “falling between the gaps”.

*Collaboration*

Collaborative practice recognises the principle that service provision in the community sector is best achieved through an integrated network of services including non-government, government, and other community supports and services.

Collaboration is enhanced through the valuing of a multi-disciplinary service response that respects professional differences and values the practice knowledge of others.

## 1.6 Youth Support Client Information System (YSCIS)

Youth Support services maintain good records in order to:

* ensure respectful recording of service provision to young people and inform ongoing good practice (see 8.4 [Recording case notes](#_8.4__Recording))
* maintain data records informed by use of the common assessment tool (CAT)
* meet accountability requirements under the Young People Investment Specification.

Service information and records are entered in the Youth Support Client Information System (YSCIS). To access YSCIS workers require an active Internet connection – go to: https://srs-qld-youth.infoxchangeapps.net.au.

YSCIS user manual provides information on how to access and use YSCIS and is available on the Documents Tab on the Administration Page in YSCIS.

For details about reporting requirements and related data collection, refer to your organisation’s Service Agreement for the provision of services funded under Youth Support.

# Section 2 Engaging with young people

* *Making the service accessible*
* *Facilitating access through outreach and flexible entry*
* *Encouraging young people to engage with the service*
* *Completing intake processes*
* *Using proactive strategies to maintain engagement*

## 2.1 Making the service accessible

Youth Support services must ensure that the services offered to young people are readily accessible. Many young people who are affected by issues that make them more vulnerable are not attuned to help-seeking and are not aware that an agency could potentially offer support (Crane et al 2013). Further, young people cannot engage with services that they don’t know about, and will not engage with services that they do not see as:

* relevant to their needs or circumstances
* safe and trustworthy.

The service delivery sites which provide entry points for young people and family members to make contact with Youth Support services include physical centres, on-line sites and mobile facilities (see 1.2 [Service access types](#_Service_access_sites)). Whatever types of sites are used, being ‘accessible’ includes:

* being visible, whether a physical or an on-line presence, such that a young person in need of the service is more likely to become aware of it
* having a presence that readily portrays ‘youth-friendliness’ and relevance to the issues young people may be grappling with
* being culturally attuned to Aboriginal and Torres Strait Islander young people
* being aware of the particular needs of CALD cultural groupings as relevant to the locality
* being inclusive of minority groups, such as LGBTI young people, and young people who are pregnant or parenting
* treating all young people as individuals and not making assumptions, for example, not assuming a young person is literate.

Ways to increase accessibility:

* promote the service in a way which makes the target group clear (i.e. young people aged under 18 who may be having issues with staying at school or training; who feel they don’t have family supports and/or have difficulties living at home or having somewhere safe to live; or who have other issues significantly impacting on their lives). In short, the promotion of the Youth Support service will make clear that the service exists to help young people with issues they need some support with
* ensure that other relevant services who may make referrals are aware of the service and what it offers, have information available (e.g. brochures) to give to young people and families, and are aware of how to make a referral (see 7.2 [Coordinating service delivery](#_7.2__Coordinating))
* ensure that the public face of the service (whether it is on-line or a street-front) conveys its relevance to young people of all types and cultures. In short, ‘dress’ the service as youth-focused and youth-friendly and inclusive
* at the same time, convey an openness to being approached by family members in relation to young people, for example by displaying information for parents and carers
* promote the service within the spaces and forums in which the target young people might note it. This may include:
* within the spaces of other services (schools, other support services, police, hospitals)
* through relevant search criteria, media such as Facebook and links on-line
* a physical presence at relevant events, such as cultural celebrations or sporting events.

Accessible services must be inclusive of young people with intellectual or physical disability and adjust intake and/or service provision to cater for this. This may include:

* being wheelchair accessible and making reasonable physical adjustments to structures and services to accommodate the needs of young people with physical disabilities
* using assistive communication devices if required (such as a story-board or writing tablet)
* adjusting communication styles and the pace of interviews
* having a support person present if necessary to help a young person communicate.

Take into account that English may be a second or third language for some young people, including some Aboriginal and Torres Strait Islander young people in remote regions. Where feasible, use accredited interpreter services when necessary to communicate with CALD young people and family members who are not proficient in English (by telephone if not available locally).

* *Practice tip: Increasing accessibility for Aboriginal and Torres Strait Islander young people*

*Working to engage Aboriginal and Torres Strait Islander young people will be different in urban areas compared to rural or remote areas. However some issues should be noted irrespective of the location or context. YS services which are not Aboriginal or Torres Strait Islander community controlled, and youth support workers who are not Indigenous, should be aware of these issues:*

* *The history of deculturalisation and dispossession, and in particular of the Stolen Generations, has ongoing impacts which are felt by Aboriginal and Torres Strait Islander families today. This legacy means that young people may be wary of non-Indigenous workers and slow to trust. Take your time, be genuine and acknowledge that there are things you may not understand*
* *Aboriginal and Torres Strait Islander young people may find it difficult to talk to a non-Indigenous worker, particularly of the opposite gender. Use ‘yarning’ rather than paper-based resources, allow for a relaxed non-direct discussion in an open setting (the park may be a better place to meet than an office), and work through the group where appropriate*
* *Be aware of a broad family structure and roles that encompass traditional kinship relationships. You may need to ascertain the right adult family members to talk with – it may not be the young person’s birth mother or father*
* *Wherever possible, involve Aboriginal or Torres Strait Islander co-workers (from your agency or another service) in working to connect with Indigenous young people*
* *Ensure that the physical space or the on-line space conveys the message that Aboriginal and Torres Strait Islander young people and families are welcome. For example, use recognisable cultural motifs within the space and on agency brochures.*

## 2.2 Facilitating access through outreach and flexible entry

To be readily accessible, an agency may have multiple points of access. Being accessible to vulnerable young people will require reaching out to these young people within the spaces they occupy, rather than waiting for them to make initial contact. Most importantly, actively reach out to young people who may be disengaged or disengaging from family or usual community structures. Depending on the service type, this may include:

* actively seeking referrals of vulnerable young people (for example, by schools, or through police Supportlink)
* seeking to have contact with young people in places where disengaged young people or those not at school may gather (for example, public spaces such as malls).

Being flexible means responding to the changing dynamics of local youth culture and adapting to local need. For example, if a new site becomes a place for young people who are missing school to hang out together, make contact with them there.

One of the ways of increasing accessibility is to work in collaboration with other services within the local service system, so that:

* eligible young people can be readily referred to your service by others
* services can be offered to young people while they are present at another service with which they may have regular contact
* one or more agency can join together in outreaching to young people.

Where a young person has been referred with consent by another service or by a family member, outreach to the young person at home or where they are living may be necessary, by phone or in person.

If providing telephone or on-line services, ensure that young people who make contact will receive a timely response. When a young person reaches out for help or to tentatively connect, delay in responding often means loss of the opportunity to engage the young person when they were motivated.

*Case example: A 14 year old agrees to support after police are called to his home by his mother when a protracted family conflict ends in the young person trashing some furniture. The young person agrees by phone to come into the Youth Support service, but doesn’t come. The youth support worker speaks again with the young person by phone and this time suggests that the worker comes to see the young person at home. He agrees to be picked up from home and the worker is able to talk with him over a drink at a local fast food outlet.*

Avoid young people having to complete lengthy and/or complicated forms to achieve access to the service, and avoid restrictions such as access only by appointment or having a long waiting list. Barriers such as this make it more difficult for the target group to get beyond these first hurdles. If a waiting list is unavoidable, consider what ‘holding’ activities will be used to keep the young person engaged while waiting for the specific service.

If using a centre-based site, make it possible for young people and family members to simply ‘drop-in’ to the centre and receive a welcome. If a full-time service is not feasible, make clear the times when someone is available. Ensure that rosters allow for work beyond 9 to 5. For example, if a number of the young people who may use the service also attend school, have services and workers available during the after-school hours and beyond 5pm if possible. If outreach to disengaged young people is required, workers need the flexibility to work evenings and early mornings.

### Facilitating access through electronic media

Considerations in using social media to invite contact and to engage with young people include:

* use the opportunity of young people participating in relevant on-line forums and other social media to promote the Youth Support service to the target group
* ensure that the service’s on-line presence is inclusive of a range of young people including young people in rural and regional areas, Aboriginal and Torres Strait Islander young people, same-sex attracted young people, culturally and linguistically diverse young people
* have a means of monitoring the content posted by young people on the service’s Facebook page and other user forums and ensure that the code of conduct is maintained. This may include, for example, not posting material that is explicit about drug-use, self-harming or suicide
* remind young people about precautions to safeguard their privacy. In particular, remind young people to avoid posting sensitive identifying information about themselves unless they would be relaxed about the information being publicly known to anyone (including their parents and other family members)
* have in place policies about confidentiality and its limits and make sure the young person notes these
* remind staff to strictly maintain boundaries between professional and private on-line presence and not ‘friend’ young people on their private sites
* when using email, SMS or on-line chat to communicate directly with young people, remind them that the same rules of confidentiality and of duty of care apply as for face to face communication.
* *Further information*: *engaging through electronic media*

*Using technologies safely and effectively to promote young people’s wellbeing: A Better Practice Guide for Services* (Campbell & Robard 2013) contains useful information about ensuring a website is more likely to be accessed by, and is attractive and useful to, young people who are help-seeking.

<http://www.youngandwellcrc.org.au/knowledge-hub/publications/>

## 2.3 Encouraging young people to engage with the service

Young people may be using the service in low key ways (e.g. coming in intermittently to a youth centre for a meal or to interact with others there; being willing to have a worker drop in to see them) without actually engaging in discussion around their needs. ‘Engagement’ at this stage is the process of building trust and establishing a working relationship with the young person. It is about more than simply making contact – it invites the young person to hook up with the service and to use the resources the service has to offer (including talking with a worker and, in due course, agreeing to work with a youth support worker on the things identified as issues for the young person). Engaging is therefore about building trust, and giving the young person reason to stay connected to the service until they feel safe enough to trust that the service may assist them. This is true whether it applies to ‘over the phone’ or ‘over the counter’ contact of just a few minutes, or to providing intermittent support over a few weeks.

For services which make initial contact through outreach, the soft-entry approach means that these aspects of initial engagement may occur over several casual contacts. Focus on the matters of importance to the young person, rather than (only) on issues identified by others as ‘problems’. Use enticement strategies with young people who have identified needs but who are hesitant to fully access the service. These low key approaches may include offering appropriate things the young person desires (e.g. a meal, means to make a phone call, somewhere friendly to hang out, a lift or money for a fare, a group activity) as a means of encouraging them to connect with the service and consider the offer of support. Where possible and relevant, meeting some immediate practical needs helps to convey that the agency cares, and can build credentials:

*“….services that were perceived to provide assistance that was tailored to their individual needs, were flexible, and had rules that were less restrictive …. were more likely to be used by homeless youth. Similarly, ‘low-threshold interventions’ … improved engagement with homeless people, referring to interventions that do not require consistent, regular attendance, adherence to strict rules or extensive disclosure by the young people”* (Baer, Peterson, & Wells, 2004, in Barker et al n.d.).

While ‘soft touch’ strategies may be used to engage with young people who are considered vulnerable but who are not requesting help, when appropriate and timely the more direct offer of a support service should be made clear.

Make it clear that contact with the service is voluntary and that the young person’s privacy will be respected (while making limitations clear at the outset - see section 8 [Confidentiality and recording](#_Section_8_)). Convey respect and be prepared to listen without judgment and without taking control of the conversation. Be open about the service and what the young person can expect – provide information in brochures etc. which are inviting and not too wordy, with inclusive language.

Sometimes a service may be accessed by consented referral of the young person by others. After accepting a referral, make contact as soon as possible with the young person and their family (if relevant). The first contact after referral will have these main aims:

* to begin engaging with the young person through building rapport
* to listen to what they have to say, and what they want
* to outline what the Youth Support service can offer.

While the young person is the core point of engagement, work that focuses upon strengthening the support structures around a young person requires that workers also engage with parents or carers or other supportive family members with consent (see section 5 [Maintaining connections](#_Section_5_)).

## 2.4 Completing intake processes

Intake is the process which starts when a service is requested or the offer of a service is accepted. The intake process is one of information exchange which results in the person being screened in or out of the service and accepting or rejecting the offer of a service (whether the service is on-gong or completed the same day).

Intake may be through formal entry requirements, or may be quite informal. Even allowing for soft entry, an agency needs to record who is accessing the service and the types of services being provided. Beyond an initial period of facilitating access where the focus is on the young person being encouraged to engage, ask the young person to:

* provide their basic details so the service knows who it is having contact with for accountability purposes
* acknowledge and consent to the services being provided (even if this is limited to being referred to another service)
* answer or discuss some intake questions that are designed to screen for eligibility, ascertain presenting wants and needs, and screen for risk.

The extent to which recording information at intake is an inclusive process will depend upon the type and circumstances of initial engagement. However the young person must be told about the information being recorded and consent to this (see section 8 [Confidentiality and recording](#_Section_8_)). If possible, make the process inclusive with the young person participating in completing an intake sheet and specifically providing information for screening purposes.

### Gathering essential information

Complete intake documentation so that the young person is recorded as a consumer/user of the service. Intake is an opportunity for engaging with young people as essential information is gathered. The way this is done will influence the young person’s and (if applicable) family’s attitude to the service. Intake may be a discrete entry process or may be completed incrementally over a few initial contacts.

Information is gathered in the context of relationship-building – the process is a conversation which engenders trust and a sense of being listened to. Vulnerable young people have reasons not to trust and any officious or overly prying approach will be off-putting. At the same time, establishing who a young person is, and who their family is, are essential. Be open about why you are asking for certain information and what you will (and won’t) do with it. This is an opportunity to establish some of the initial boundaries of the service (e.g. that the young person cannot receive services anonymously) and put the groundwork in place for trust (see Section 8 [Confidentiality and recording](#_Section_8_)).

Information gathered at intake may be seamlessly incorporated with initial assessment, i.e. listening to the young person’s story and helping determine what they need. However information which is purely for intake purposes should be limited to that necessary to set up a client profile. Essential information to gather if possible includes:

* the young person’s name (including aliases) and date of birth
* where they are living
* a contact number for them
* details of at least one family contact (e.g. a parent or other carer)
* if the young person has a child in their care, details about the child.

A record of this information should be entered in YSCIS and maintained by the service.

### Screening for eligibility for a Youth Support service

Screening for eligibility goes hand in hand with gathering intake information. Through sensitive discussion with the young person or through the referring agency, check briefly:

* their age
* their current circumstances and what they want or need
* their current relationship with core family members or carers
* their current living situation
* their school or earning situation
* any other core support needs.

The focus of screening discussion is on the questions: ‘does this young person have support needs’ and, if so, ‘is there a way that we can support this young person’, not ‘does this young person match our service model’. The process is a conversation which aims to engender trust and a sense of being listened to, not a series of questions. The reasons why information is requested are explained, i.e. that the service has a duty to check what help the young person may need and that it will assist with working with them to help meet any needs. Issues which are sensitive, and beyond the ‘need-to-know’ scope for intake, are not raised; at the same time, workers are aware of their general duty-of-care to be alert to any significant needs the young person may have and which may remain hidden unless the young person is given the opportunity to mention them.

The tool used for screening for eligibility is the same as that used for brief needs and wants appraisal – the *Initial Contact CAT* tool (see section 3 [Assessing strengths and needs](#_Section_3_)). If the rating for every one of the domains is 3 or above, the young person would not generally be considered ‘vulnerable’ and would not be eligible for a Youth Support service providing ongoing support.

If a young person is able to be supported through a Youth Support service but requires help at a level that your service is not equipped to provide, or if your agency provides a stand-alone YS Access service, refer the young person to a relevant service as part of the Youth Support network within your area (see 6.1 [Making referrals](#_Making_referrals)).

If a young person is not eligible for a Youth Support service, but has other needs or wants, refer them to an alternate relevant service if one exists.

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* *Practice tip: Talking to a young person about their family*

*Young people who are living with a parent or carer will often find it easier to discuss their family situation than young people who are disengaging from family. The ease with which any young person will discuss family matters may also depend on the reasons, sometimes quite complex, for any tensions. Young people who do not feel safe at home should have these concerns taken seriously and responded to sensitively. In such cases, concentrate on whether there are family members that they trust to connect with. In situations where a young person does not wish to talk about their family even though there are apparently no safety issues, it helps to let the young person know that:*

* *it is a matter of normal routine for the service to ask about and discuss family*
* *whatever the young person’s family situation, they can still receive support (i.e., they don’t have to have ‘family issues’ to be eligible for support with other matters)*
* *families have their good and bad points, and the service is interested in the young person’s views about both aspects of their family*
* *it is understood that family matters are complex and that the young person knows better than anyone else what their situation is – no view about how they should relate to their own family is going to be imposed on them*
* *while it is normal routine for the service to work with the young person in the context of their family, contact with their family won’t occur without their permission (unless required for duty of care reasons)*
* *having an understanding of their family situation helps the service to understand and support the young person*
* *families, at least some members, can be sources of support for a young person – the service is interested in helping the young person identify any such persons.*

### Providing information

The young person is given information about the service and what they can expect (see Section 8 [Confidentiality and recording](#_Section_8_)). If intake is completed in the context of a referral for one-on-one services, the young person will be given the name of their support worker and/or information about what to expect next. For more informal processes, the young person may be provided with information about options and invited to re-contact. Try to set up a ‘hook’ for further contact (e.g. an invitation to an activity) and obtain the young person’s contact details and permission to contact them.

In providing information about the Youth Support service, it is important to be open about the focus of the service in trying to work with the young person to achieve (as relevant to them) somewhere safe to live, good connections with their family, school participation and/or work, and them being safe and well. While soft-entry approaches may be used, it should not come as a surprise to the young person that they are asked to think about these things at some stage.

### Completing intake records

It is important to ensure that the agency records all the young people with whom the service has more than casual contact. This information should be recorded in YSCIS once the worker has informed the young person that their information will be recorded and about their rights to privacy and confidentiality. This enables the agency to accurately reflect workload for reporting purposes, and also fulfils a duty of care in recording that the agency has had contact with a particular young person (see Section 8 [Confidentiality and recording](#_Section_8_)).

For YS Access services, maintain a record in YSCIS of:

* demographic information about each young person
* the initial CAT rating and outcomes data
* action taken at intake (e.g. referral, brief intervention, brokerage).

## 2.5 Using proactive strategies to maintain engagement

YS Support services and YS Integrated response services may need to take active steps to maintain the engagement of the vulnerable young people who most need your services, by providing consistent and assertive follow-up. While acknowledging that a young person’s contact with the Youth Support service is voluntary, youth support workers should continue trying to involve young people who ‘drop out’ where it is assessed unmet need still exists.

Engagement may be difficult in some circumstances but it is the worker’s responsibility, not the young person’s, to persist with trying to build a trusting relationship. For some young people, maintaining their engagement in a working relationship will occur only through a protracted period of persistent low-key outreach. In these cases, it is important that the worker remains focused on the purpose of their contact with the client. Kidd (2003, in Barker et al) notes that for homeless young people to engage with services, not only were rapport and trust important, but also the young person needed to be convinced that it was worth their while, i.e. that it would lead to positive experiences. This is also true of young people with other types of needs.

*“Good youth work responses should be able to flexibly engage and respond to the young person’s specific situation in a way that the young person finds useful. Many agencies employ a range of engagement strategies including outreach, activity-based approaches and drop-in, rather than purely appointment based work. Responses can include a mix of experiential and verbal, structured and unstructured, individual and group strategies. When young people’s circumstances change, practitioners require flexibility, drawing on a ‘toolbox’ of possible responses, for example, switching from counselling to the provision of material support*.” *(Crane et al 2013).*

*Case example: An Aboriginal young person who was starting to miss a lot of school was seen as likely to benefit from the YS Support Service and was referred by the guidance officer but did not respond to attempts to contact him. The non-Indigenous youth support worker enlisted the help of the Aboriginal and Torres Strait Islander health worker who was in regular contact with the young person. The youth support worker was able to be introduced to the young person as someone he could trust – the Indigenous health worker vouched for her. After that, the young person began to accept contact from the youth support worker. The school, health service and YS Support service continued to work together.*

Assertive or proactive follow-up means respectfully but persistently making contact with the young person and encouraging them to accept help. It means not taking at face value a young person’s decline of the offer of a service, and repeating the offer in a multitude of non-intrusive ways (for example, seeking out the young person to talk with if they are frequenting public places; leaving the offer of help open and reminding the young person of it when contact occurs; including them in group activities even if they are not yet trusting enough to agree to a support service). Reaching out may be to the young person’s home or place of residence, if they have had contact in that context before and/or were referred while still living at home.

Sometimes, assertive outreach or follow-up may be assisted by other people, such as the service being ‘vouched for’ by another young person or a service the young person already trusts.

# Section 3 Assessing strengths and needs

* *Assessment in the context of youth support work*
* *Doing a brief ‘wants and needs’ appraisal*
* *Screening for risk and vulnerabilities*
* *Doing a detailed Youth Wellbeing Assessment (CAT) to inform planning*
* *Reviewing progress and re-assessing needs*

## 3.1 Assessment in the context of youth support work

Assessment occurs from the moment of first contact with a young person and continues throughout contact with them. On an informal level, assessment is continuous as youth support workers observe and listen, and take a thoughtful approach to how they interact with a young person. More ‘formal’ or focussed assessment also occurs at key points.

Assessment refers to the process of gathering and thinking through (analysing and weighing up) all the information required to inform the support work with a young person, including:

* what are the issues this young person is facing?
* what are they doing well with, what not so well?
* what do they want and need?
* how might they best be supported?

Of course there are a myriad of related questions but a focused assessment process ensures that these core questions are addressed: what does this young person need, and how might they be supported to have those needs met. For Youth Support services, the young person’s needs around connections, housing, and schooling are primary areas of concern.

Support work without assessment is likely to be unfocussed, may occur at a surface level and may be reactive and fail to consider some of the core issues impacting the young person in their current situation. Assessment does not need to be a lengthy process or a formal one – but it does require that workers pay attention to what they know about a young person and their family, what they do not (yet) know, how this knowledge fits with what they know from professional expertise and practice wisdom, and what therefore should be a focus of their work with the young person. The process involves the young person at every step of the way, but requires that the youth support worker has an informed sense of direction about what they are doing with the young person and why – assessment underpins this.

Assessment is an inclusive process that openly involves the young person as the one who knows the most about their own life and whose thoughts and perceptions are the most relevant to their own circumstances. It is also informed by the young person’s family members and others, and takes into account the professional knowledge and expertise of the service personnel and others they may confer with. Assessment processes lead to well-informed determination of how best to support “*this* young person, in *this* family, in *this* community, at *this* point in time” (Encompass Family and Community 2013). Assessment is a fluid process and focuses will change as the young person’s desires and circumstances change.

Different types of assessment have different purposes.

|  |  |  |  |
| --- | --- | --- | --- |
| *Type of assessment* | *Access Service* | *Support Service* | *Integrated Response Service* |
| Screening for eligibility: *Core set of questions guided by the Intake criteria and the Initial Contact CAT. Results in determination of eligibility for Youth Support service* | √ | √ | √ |
| Brief ‘needs and wants’ appraisal: *For eligible young people, brief assessment using the Initial Contact CAT to determine areas of assistance required and appropriate referrals* | √ |  |  |
| Detailed well-being assessment: *Full assessment of issues and needs across the domains of the Youth Wellbeing CAT to inform support planning* |  | √ | √ |
| Screening for risk and vulnerability: *Application of evidence-based screening tool for risk (e.g. mental health issues, AOD issues) when indicated at any stage of contact* | √ | √ | √ |

An agency that is delivering two or all three of the tiers of Youth Support will determine which level of the CAT tool is used for first assessment, based upon the intake or referral information about a young person and the agency structure. For example:

* an agency might be structured so that its Access Service completes all initial assessments (using the Initial Contact CAT) and refers young people who need a longer term support service to an appropriate service. This may include an internal referral to its Support Service team (who complete a fuller assessment using the Youth Wellbeing CAT)
* an agency with a flat structure which delivers all three tiers of youth support might decide, based upon presenting information, whether to complete a brief ‘needs and wants’ appraisal (using the Initial Contact CAT) or to immediately complete a more detailed assessment (using the Youth Wellbeing CAT).

## 3.2 Doing a brief ‘needs and wants’ appraisal

This is intake level assessment, particularly where limited information is currently available about a young person’s needs. YS Access services undertake an initial appraisal of a young person’s immediate needs as part of intake, so that they can respond appropriately. The initial processes of information gathering are part of engaging with the young person. This may occur in-office or in outreach contact with the young person. At no time should ‘formal’ information gathering take precedence over relationship-building with vulnerable young people – rather, the process of finding out about the young person’s needs and issues should be part of engaging.

A brief needs and wants appraisal includes discussion to find out about the young person’s immediate needs and the help they may require, as discussed under section 2 (see 2.4 [Completing the intake process](#_2.4__Completing)).

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*Practice tool: Initial Contact CAT tool (see Appendix A).*

### Responding to immediate needs

Urgent needs receive an immediate response, where possible within the resources available or through referral. While active work with the young person will normally be guided by support planning, initial assessment may identify needs which should be attended to now, informed by the young person’s priorities and the youth support worker’s assessment of the young person’s current well-being. This includes responses to child protection safety concerns (see 9.3 [Responding to child protection issues](#_9.3__Responding)).

*Case example: A 13 year old contacts the Access Service by phone on the advice of a friend, and says that she has nowhere to go as she has been kicked out of home. The youth support worker talks with the young person about whether anyone in her family could have her stay, and, several phone calls later, has negotiated between the young person, her aunt and her mother that the young person will stay with the aunt for the night. The aunt agrees that a youth support worker can visit her home to talk with the young person tomorrow.*

For some individual young people where outreach is the initial form of contact, supporting them in practical and emotional ways during transition from a crisis to ongoing support may need to occur before a stage of planned support work can begin. Attending to immediate practical needs, where possible, assists with engaging with the young person and building trust. Use of brokerage monies may be part of this response, within guidelines (see 6.3 [Using brokerage](#_6.3__Using)).

## 3.3 Screening for risk and vulnerabilities

As part of any agency’s duty of care, intake workers and others are alert to any indicators that a young person is at risk of significant harm, including harm in the context of their family situation, their living situation, or self-harm. The safety and well-being of any child in the young person’s care should also be considered. Where there are indicators that a young person is very distressed or is indicating that they have suicidal ideation, basic ‘mental health first aid’ should be exercised, including screening for suicide risk.

Screening for risks and vulnerabilities becomes more detailed as fuller assessment is undertaken with a young person and helps to inform the young person’s support needs. There is no specific Youth Support tool for risk screening; however a number of universal tools are available and should be applied whenever indicated by the young person’s presentation.

* *Practice resources: Screening for risk (acute psychological distress, mental health issues)*

The headspace Psychological Assessment for Young People tool can be accessed at:

<http://www.headspace.org.au/media/39050/headspace_psychosocial_assessment_2013_v2.0.pdf>

Revised by the headspace Centre of Excellence: Parker et al (2010).

Kessler Psychological Distress Scale (K10) (Kessler, R.C. (1996). Kessler’s 10 Psychological Distress Scale. Harvard Medical School: Boston, MA). For information about this scale, see Dovetail’s *Youth alcohol and drug practice guide 3: Practice Strategies and Interventions, p. 126.* [*http://dovetail.org.au/i-want-to/open-the-good-practice-toolkit.aspx*](http://dovetail.org.au/i-want-to/open-the-good-practice-toolkit.aspx)

Turning Point Alcohol and Drug Centre, Victoria

Find example screening tools at: QuickLinks Information for health professionals / new screening and assessment tools <http://www.turningpoint.org.au>. See Optional Module 4: Psych check.

### Safety planning

Safety planning relates to both immediate action to begin to protect a young person from imminent harm (for example, from domestic and family violence, or child protection concerns), as well as planning to assist them to stay safe (for example, when expressing suicide ideation) for a negotiated period (see section 9 [Duty of care issues](#_Section_9_)).

*Case example: A 16 year old young woman is living with her 18 year old boyfriend. He is controlling and jealous and has slapped her at times when he thinks she has ‘played around’. She is not ready to leave the relationship but is accepting counselling. She has agreed to a safety plan which involves her recognising when he is working up to a jealous rage and leaving the house well before it reaches an unsafe stage. She has a ‘go card’ available to make sure she can catch the train to her sister’s place.*

Safety planning in relation to child protection or domestic and family violence concerns must never place the onus upon the young person to keep themselves safe. However in circumstances where the risk is manageable with supports, and where the young person is old enough to reasonably take some control of their own situation, a practical safety plan can be put in place to ensure that they have access to safety options and feel confident about implementing them. A safety plan needs to be doable and realistic in the circumstances in which the young person might find themselves.

When a young person is expressing that they have thoughts of suicide, a safety plan which they agree to abide by (for example, for an agreed period of time) may be of help if the person with whom they are negotiating it has the trust of the young person. However do not rely on a safety plan as the sole means of keeping a young person safe, and do not rely on a young person ‘giving their word’ in these circumstances.

## 3.4 Detailed Youth Wellbeing Assessment to inform planning

YS Support services and/or YS Integrated response services undertake detailed assessment to inform support planning. An initial Youth Wellbeing Assessment (YWA) of needs, strengths and risks is completed with the young person to inform case planning and give direction and purpose to support work with the young person. This assessment is guided by the YWA Common Assessment Tool (CAT) and is recorded in YSCIS. The assessment process need not be formal, and may take place over several contacts or sessions with the young person. As always, the need to build and maintain a working relationship with the young person takes precedence over asking questions in ways which are likely to be seen as intrusive at this stage of engaging with the young person. Skilled work may be required to ensure that essential assessment information is gathered in a non-intrusive way, such as during ‘informal’ discussion (with the ‘draft’ completed CAT discussed in summary with the young person).

In completing the YWA CAT, the youth support worker ensures that holistic assessment occurs, i.e. that all the domains, and how they inter-relate, are considered. There are a number of ways in which information might be collected for completing the YWA CAT:

* information obtained as part of referral from another agency
* with the consent of the young person, information may be obtained from another service provider. Consider this approach where it will save the young person repeating their story multiple times
* with the consent and participation of the young person, information may be obtained as part of a family discussion
* observations by youth support workers recorded in case notes (as part of intake and subsequent contacts).

In the context of a YS Integrated response service, it is likely that the young person has had contact with several agencies. It is not appropriate that the young person be required to repeat their story to each. An integrated assessment is appropriate where information is shared between agencies with consent and/or under relevant legislation (see section 8 [Confidentiality and recording](#_Section_8_)). The one current CAT record may be held as a single integrated assessment record, irrespective of which agency within the integrated response team largely completed the assessment and discussed it with the young person (see 7.2 [Coordinating service delivery](#_7.2__Coordinating)).

Assessment is a continual process while working with the young person. Assessment is more than information-gathering – it is the process of carefully considering the information to reach well-informed conclusions about risks, strengths, and needs of the young person. Assessment helps answer pertinent questions such as:

* what are the priority needs for this young person? What do they want?
* how might these needs best be met? What do they think would work?
* what has the young person already achieved? What are some of their strengths?
* is this young person ready to consider change in their life?

In situations where a young person is not yet able to be involved in thinking about goals or change, it remains important for the youth support worker to have a sense of purpose in working with the young person, and this will be informed by ongoing assessment.

### Domains of the Youth Well-being Assessment

The Youth Wellbeing Assessment tool (the CAT) is outlined in detail in the separate companion document to this guide: *Guide to Completing the Youth Wellbeing Assessment Common Assessment Tool*, which can be found on the Department of Communities, Child Safety and Disabilities website,

at (<http://www.communities.qld.gov.au/communityservices/youth/youth-support-services>)

The 11 domains of the YWA CAT are:

* Housing
* Education and earning
* Family relationships
* Social connections
* Physical health
* Mental health
* Drug and alcohol use
* Cultural identity (if relevant)
* Safety and the law (if relevant)
* Parenting (if relevant)
* Disability (if relevant).

The young person’s strengths and needs are assessed in relation to each of the 7 universal domains and for each of the 4 ‘if relevant’ domains if they apply to the young person. For each domain, a rating is applied to reflect the extent to which the young person’s wellbeing is impacted by the current issues associated with that area of their life. Ideally, the rating is the outcome of discussion and agreement between the youth support worker and the young person.

The rating is applied using a 5 point scale:

1 = Can be a lot better

2 = Can be better

3 = OK (but can be better)

4 = Doing well

5 = Doing great.

The domains with current priorities for action are nominated (up to but not more than three priorities). Again, this is ideally done in discussion with the young person, and may represent agreement about a combination of areas which the young person rates as a priority and areas which the youth support worker rates as a priority.

The final two areas of the YWA CAT relate to the young person’s current functioning, their perception of themselves and their views about their capacity to achieve change where this is within their influence. These ‘change’ domains are:

* My desire / motivation to make changes
* My belief in my capacity to make changes.

These relate to the young person’s current motivation to try to change (desire/focus/ readiness) and current capacity to work towards change (skills/knowledge/confidence). They are completed with general reference to the domains that the young person has nominated as priorities, i.e. as impacting the most on their current wellbeing. These are ‘overall’ ratings – if a young person is highly motivated in one area prioritised for change and not motivated much in another area where change is desirable, the overall rating might be 3 (OK but can do better).

The discussion around the two ‘change’ domains should be conducted sensitively, with an emphasis on hope and empowerment, while at the same time recognising that some things can only change for a young person if they receive enough support. It must be explained to the young person that these ratings do not reflect the worth of the young person or make any judgement – they are purely to allow self-reflection on their part through ‘looking forward’ and similarly to enable reflection through ‘looking back’ when they do achieve change.

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*Practice tool: Youth Wellbeing Assessment CAT tool (see Appendix B).*

Resource: The ***Youth Wellbeing Assessment Guide*** provides more detailed information about completing the brief Initial Contact CAT and the more detailed Youth Wellbeing Assessment CAT. This includes information about:

* the 11 domains
* the questions, or areas of discussion, which might be used to explore each of the domains with the young person
* the indicators which guide the youth support worker and the young person in deciding about which rating applies at this time in relation to each domain.

## 3.5 Reviewing progress and re-assessing needs

Assessment is not a one-off activity – it occurs throughout contact with a young person and is integral to being attuned to the young person’s needs and what they want to happen. While on-going, assessment will occur as a specific activity at certain key times, when the process of information gathering and reflecting on what this means, or ‘making sense’ of the information, needs to occur to help inform planning. These will typically be:

* at intake / initial assessment
* when case planning is occurring
* at regular intervals set for review of progress
* at key points of change or decision (including case closure).

Initial completion of the YWA CAT records baseline data against which progress can be noted. In collecting baseline data, the process used is hope-engendering rather than deficit-based. While a charting tool may indicate a low level of current functioning, the manner in which its use is discussed and explained is motivational (eg the opportunity to build on current strengths, perhaps identifying the young person’s wishes for the future).

Reviewing progress and re-assessing need occurs for the same reasons that initial assessment occurs – to ensure that work with the young person is focussed and is aligned to their changing needs.

* *Practice tip: It is good practice to record a case-note or brief report which considers the information recorded in the CAT and provides a more detailed analysis, for example why the particular rating was given for each domain. This case note or report is basically a summary of the key information and thinking which influenced the ratings given. Having this on record is useful when ‘looking back’ to assess progress, in supervision, and when making referrals.*

# Section 4 Support planning and review

* *Overview of the support planning process*
* *Linking assessment to support planning*
* *Inclusive goal setting*
* *Supporting young people towards change*
* *Providing integrated case management*
* *Reviewing progress*
* *Moving on – case closure*

## 4.1 Overview of the support planning process

Youth Support services which provide a YS Support service and/or a YS Integrated response service use support planning processes in working purposefully with young people.

Support planning is the process of actively planning the focus of support work with the young person. It is based on the assessment of the young person’s needs and their priorities and views. It is also informed by the youth support worker’s assessment of the issues impacting on the young person and how these might be addressed, as relevant to the specific service. Thoughtful case planning helps ensure a sense of direction in working with the young person and their family, with a clear sense of *how* what is being done may be useful in meeting their identified needs.

Wherever possible, case planning is done *with* the individual young person and their family (if relevant) – the plan will be their plan. At the same time, the youth support worker will always:

* have a clear sense of what they are seeking to achieve in working with or being in contact with the young person, even if engaging is limited or difficult
* help ensure that the support planning is relevant to the assessed needs or issues
* do this using a strengths approach which is empowering and as non-directive as possible
* recognise when it is appropriate to provide some direction and guidance for the young person.

At its simplest, support planning is an organised way of working with a young person towards helping them think about what they want, making plans to get there, and providing support and encouragement for those plans to be put into practice. Along the way, plans may be adjusted as progress is reviewed. The youth support worker may help the young person to consider relevant and realistic goals and may help with motivation, facilitation and advocacy. While ultimately the process is under the direction of the young person, the youth support worker must have a firm sense of direction in their work with the young person, to act as an anchor and a guide if the young person’s life is uncertain. Support planning provides a framework for this work to be organised.

The classic case planning framework is familiar to Youth Support services. It includes a cycle of:

* information gathering
* assessing
* planning, including identifying and prioritising goals
* taking action / implementing plans
* reviewing progress.

Of course in youth work with individual young people things are not as simple as this and stages overlap as development occurs in different domains of the young person’s life. Nevertheless, as noted, the support planning stages represent good practice in working towards the young person’s goals. The stages also represent important accountability checks.

The cycle ends when review indicates that planned support is no longer required by the young person as goals are largely met, or the service terminates for other reasons such as the young person being referred to another service for primary support. End stages include:

* decision to end support service
* exit planning
* case closure / celebration of achievement if applicable
* evaluation.

*Figure 2: The support planning cycle*

Agencies providing YS Support services and YS Integrated response services use a cycle of support planning such as this. Specifically how it is expressed is dependent upon the policies and procedures of the agency. Time frames are also dependent on the procedures of the agency and the service types being provided.

The support planning cycle might be implemented and completed to closure within a very short period, for example a few days. More often, it represents a cycle of ongoing assessing, planning and review over a longer term.

For services funded under Youth Support, minimum good practice requirements are that:

* initial assessment (using the YWA CAT) occurs within 2 weeks of accepting the referral of a young person for support or a young person agreeing to a support service
* developing a support plan occurs within 2 weeks of completing initial assessment
* review of progress occurs at regular intervals of not less than monthly
* formal re-assessment (using the YWA CAT) occurs at least three-monthly.

## 4.2 Linking assessment to support planning

Assessment processes are discussed in [section 3](#_Section_3_). The processes of information gathering and assessing are the first stages of this support plan cycle. The domains identified as priority areas by the young person, or by family members with the agreement of the young person, are the core areas for focused planning or goals setting. Planning might occur somewhat simultaneously with assessment, but initial planning should never occur without YWA CAT assessment – to do so runs the risk of planning being ad hoc and reactive rather than thoughtfully focused.

Keeping in mind that assessment is an ongoing process, timely adjustment of support plans might occur without formal CAT assessment being repeated each time. For YS Integrated response services, assessment to inform support planning may be provided by other services which have the young person’s consent to share the information. Avoid the young person having to repeat their story.

## 4.3 Inclusive goal setting

Drawing up a support plan is ideally done with the young person and in a way which reflects the young person’s views about what they want. This does not have to be a ‘formal’ process and can simply emerge from focused discussion with the young person. While some young people are able to participate in getting some goals recorded in a way that makes sense to them, for others the youth support worker may extrapolate these ideas from discussion with the young person and check back with them.

What a young person is able to envisage in the way of change will depend on:

* where they are in the change process (see below)
* their sense of their own capacity to effect change – many disengaging young people have a pervading sense of powerlessness
* their sense of self and what they are ‘worthy’ of
* their knowledge about ‘what’s possible’
* their past experience of barriers which have got in the way.

Some young people will set broad and distant-future goals; others will not see past tomorrow and immediate survival. In each case, try to assist them towards envisaging realistic medium term goals and the ‘first steps’ required to get there. This might include identifying barriers and how the young person (with support) might take ‘first steps’ to address these.

Just as persistent outreach is sometimes required to engage with young people, a persistent approach may be required to assist a young person to think in terms of having goals and planning steps to realise them. The worker will continue to work with and support the young person in relation to their priority needs, while at the same time translating actions, i.e. helping the young person understand the link between doing certain things and achieving certain outcomes.

Part of planning with a young person is identifying persons in their life who can support them in achieving the things they want. Initially, this may be agency workers, but ultimately it is important to identify support persons in their family or community upon whom the young person can rely on an ongoing basis.

### The support plan

Discussing and agreeing on the plan is part of the process of engaging with and working with the individual young person and their family if relevant. The plan is written in language the young person has used to express their own goals and wishes, does not include jargon which is unclear to the young person, and will be written *with* them rather than *for* them.

Recording the plan helps to:

* ensure a shared sense of direction and aims for support work
* remind all participants about what actions were agreed and who is responsible for them
* record progress through acknowledging achievements and change.

The tools used to talk with a young person about plans and possibilities will vary depending on the agency type and young person’s situation. Paper-based tools such as shown in Appendix C might be used to communicate with the young person about their goals, or a worker and young person might use YSCIS to directly record the plan. Whatever tool is used, the support plan should ideally:

* use simple language and allow for recording the young person’s own words
* include goals that are achievable in the short term
* include some planning, i.e. what the young person is going to do and what others will do to assist and support
* include a time-frame for review.

Agreed support plans are recorded in YSCIS as a ‘case plan’.

See the box on next page – “parallel planning”.

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*Practice tool: Sample support plan tool (see Appendix C).*

* *Further information*: *support planning processes*

Department of Family and Community Services NSW has produced a comprehensive resource about case management which is broadly applicable to working with young people:

*Specialist Homelessness Services Case Management Resource Kit Version 1*, (FACS 2012). Available on-line at:

[http://www.housing.nsw.gov.au/nr/rdonlyres/d0ba36b7-39d1-4c2b-8cf4-360a53e778a7/0/shscmrk.pdf](http://www.housing.nsw.gov.au/NR/rdonlyres/D0BA36B7-39D1-4C2B-8CF4-360A53E778A7/0/SHSCMRK.pdf)

QCOSS’s *Planned Support Guide – an approach to case management* (QCOSS 2010) contains straight-forward information about support planning and practice tips. Available through Community Door at: <http://communitydoor.org.au/planned-support-guide>

## 4.4 Supporting young people towards change

The ways in which support plans are actioned will depend upon the type of agency and the workers’ roles, along with the issues facing the young person in their needs and wishes being met. Appropriate intervention strategies will therefore vary, but the young person must be aware of what is happening and be a participant rather than ‘done to’ as a passive recipient of other’s plans.

Any of the intervention strategies discussed in section 6 may apply. Putting plans into action may include the youth support worker acting to:

* mobilise resources
* provide practical and emotional support
* advocate for the young person’s needs to be met in a timely way
* make referrals to relevant services.
* *Practice tip: “Parallel planning”*

It is sometimes not possible to directly involve a young person in support planning processes that involve goals and priorities, even though they are willing to work with the youth support worker. It remains important for the youth support worker to have clear directions in working with the young person and family (if relevant) and to discuss these with the young person to check their views. “Parallel planning” also occurs where a young person’s plan is limited to a narrow range of things important to them, when the worker is aware that other matters must also be attended to. In these cases, the youth support worker will often have a plan of their own (“a parallel plan”) while engaging with and supporting the young person, which may be broader (more holistic) and at the same time more specific in relation to some domains, than the young person’s current plan.

For example, the young person may be focused upon difficulties they are experiencing at home, while the worker is aware that the young person is also disengaging at school and has few social supports. These may also be concerns raised by the young person’s family. Clearly these things are related and the worker will incorporate in their work plan the need to talk further with the young person about these things and how they might be addressed, while in the meantime respecting the young person’s choice to focus on other matters.

## 4.5 Collaborative and integrated case management

Where a number of agencies or departments are involved in working with the young person, the youth support worker ensures that services are coordinated. Where another service holds case management responsibility, communicate regularly with them about the young person’s needs. See Section *7* [Working with other services](#_Section_7_)for more detailed discussion.

For young people with complex and multi-layered needs that require multiple services to be involved, the support plan will be an integrated support plan (see Section 7 [Working with other services](#_Section_7_)). The YS Integrated response service may undertake the lead role in working with the young person and other relevant services to draw up the plan. Alternatively, depending on the young person’s situation and which agency has the most intense role, the YS Integrated response service may be a participant in developing the integrated support plan, with responsibility for working with the young person to implement certain aspects of the plan.

If an integrated support plan exists, the functions of support planning as described in this section will be undertaken collaboratively by the agencies involved, and one integrated support plan, agreed by all involved, may be drawn up. While assessment and planning activities are taken collaboratively, the YS Integrated support service still records the outcomes of assessment using the YWA CAT, and records the support plan in the YSCIS.

## 4.6 Reviewing progress

Work with the young person, and their family when applicable, includes progress reviews as you work together towards the young person’s identified goals and to address matters which were highlighted as needs during assessment. Review is essential to avoid ‘drift’ and work becoming unfocussed.

The frequency of focused reviews depends upon agency policies and procedures, and the ongoing assessment of needs of the individual young person. The minimum requirement of the Youth Support approach is that re-assessment using the YWA CAT and review of support plans occur at least three monthly (and at exit).

Review should also occur whenever a change or new information suggests it is warranted, for example when:

* significant changes occur which make the existing support plan out-of-date
* the type of service being provided changes
* new agencies or persons become part of an integrated support plan
* the young person requests a review or expresses dissatisfaction with the current plan.

Review need not be an onerous task. Like initial assessment, it should be informed by the YWA CAT, and can be undertaken in a ‘formal’ session with the young person or simply incorporated in focused conversation. The purpose of regular focused reviews is to:

* consider progress – it is useful if this is done in a visual way using YSCIS ‘chart’ function or some type of scale that makes sense to the young person (see *Practice tip* below)
* recognise achievements or to reflect about lack of progress
* determine if priorities have changed
* ensure planning remains up-to-date and relevant to the young person’s needs and wishes
* take up-dated assessment information into account
* plan for exit from the service, with appropriate closure.

The outcomes of review of a support plan are recorded on a new (i.e., updated) support plan, replacing or adding to the previous one.

Final review will inform planning around case closure. This might occur because:

* the goals are being largely achieved
* a change occurs, such as the young person being referred to another service who will assume case management
* the young person leaves the area
* the young person is no longer eligible for the service.
* *Practice tip: Use of scaling tools*

The YWA CAT provides a visual scale (1 to 5) which can be used to plot progress over time. The YSCIS ‘chart’ function is available in the outcomes tab to translate assessment ratings into a spider-web graph of progress.

For work with young people towards specific goals there are also various scaling tools which can help to visually illustrate progress in a way which is motivating for the young person. These can be as simple is drawings of ‘ladders to success’ or ‘steps along the path’ – anything that shows incremental stages.

St Luke’s Innovative Resources have produced The Scaling Kit, which includes web-based interactive scales. It is available for purchase from: <http://www.innovativeresources.org/>

## 4.7 Moving on – case closure

A strong focus of Youth Support services, given that they provide early intervention with young people to prevent further entry into the tertiary system, is that support work is time-limited and ends when a young person is linked with natural supports that can continue to sustain them.

It can happen that a support service inadvertently becomes an ‘enabler’, when a young person relies upon a youth support worker and the acceptance they find with a support service (particularly one which offers drop-in facilities and other practical supports such as meals) rather than linking with family and community supports (particularly if these require addressing some issues the young person would rather avoid). At the same time, young people may need to rely upon the support service for a period when they are disengaged and in danger of becoming more so. It is important to get the balance right – just enough support for just long enough.

The concept of a time-limited service should be introduced from the first support planning, with the message that the worker is confident that the young person will eventually be able to have the knowledge, confidence and healed relationships to successfully re-engage with community supports. Again, getting the balance right is important – the message is that the young person is welcome for as long as they need the service but that their no longer needing the service will be an achievement to be proud of.

### Planned closure

Exit planning is part of review processes as the service is nearing an end. It includes the youth support worker and young person together thinking about:

* how the young person is preparing for the fact that the service will end. This may be particularly important if the young person has built a strong working relationship with the caseworker or casework team
* how the young person will continue to be supported, if necessary, by other agencies or informal support networks
* the arrangements for transition to ongoing support from other agencies
* ‘winding down’ the service to the young person, if appropriate.

Exit from a support service can be a time of anxiety for a young person who is not yet sure of their own capacity to manage. It is also the case that young people who have issues with trust and attachment may find moving on from the support service difficult. Good practice around exit and closure includes:

* avoid sudden closures (precipitated by the agency)
* plan towards closure with gradual lessening of contact
* celebrate the young person’s and family’s achievements
* leave the door open for the young person to seek further help if required.

Where planned case closure is the result of the young person no longer accessing the service:

* trouble-shoot their reasons for disengaging with the service
* if the young person is no longer wanting to access the service, try to have a final review of progress
* make sure the young person knows they can re-access the service.

If consent exists to liaise with other services in relation to the young person, let them know that the young person is now longer accessing your service and that they should keep an eye out for them, if relevant.

Irrespective of how case closure occurs, it needs to be documented in YSCIS as such rather than left open indefinitely, and the final review recorded.

### Unplanned closure

A support service may end prematurely when a young person chooses to no longer be involved, or is no longer able to (e.g. they move suddenly or are placed in detention). In some such cases, the support service may be suspended rather than terminated.

If a young person disengages from the service:

* take steps to check on their well-being
* use persistent outreach strategies to try to re-engage the young person, if it is considered they remain quite vulnerable
* check whether there are any issues which can be addressed to better ‘hear’ the young person and meet their needs.

If a young person who has been homeless disappears, considerable effort should be made to check on their wellbeing prior to closing the case.

If no contact with a young person occurs over a period of three months, closure of the case should occur. A new intake will be undertaken, and a new case start-up recorded if applicable, if contact is subsequently re-established.

# Section 5 Maintaining connections

* Maintaining family connections
* Staying engaged with schooling / earning
* Maintaining community connections

## 5.1 Maintaining family connections

Youth Support services have an important job in helping young people maintain, or re-build, family connections. This must be a focus of work with all young people, from the point of first contact.

All young people have a family. All young people need a family. Being disconnected from family is damaging for children and young people. Even in circumstances where a young person cannot safely live at home, or conflict is intense, maintaining an optimal level of connectedness (i.e. whatever is possible and appropriate in the particular situation) is important. Family dislocation tends to worsen when the support a young person receives is provided without reference to their ‘family connection’ needs. In these circumstances, the work done with a young person, if done in isolation from their position as a family member, can improve one aspect of a young person’s life while inadvertently worsening another.

Being connected to family meets basic human needs around identity, sense of self, belonging and cultural connection, which cannot be met by an agency or a worker no matter how committed they are to the young person. All young people need a place within their family, and research has shown that they will re-connect with family eventually if those bonds are broken during adolescence. However this comes at an enormous cost if the young person remains disconnected during their adolescence and early adulthood, and must try to renegotiate these connections when older. Mental health and well-being during their adolescent years are negatively impacted and damaged connections and undeveloped skills in negotiating their place within the family means that it can take years for young people to find their way back to family. Youth Support services have a significant role to play in assisting young people to stay connected, or re-connect early after family disruption, as an early intervention strategy in supporting young people to have these needs met. Youth Support services must avoid working with young people in a way which reinforces this disruption.

Young people won’t necessarily recognise the importance of family. They may deny that they care about family and resist suggestions that maintaining connection may be a positive thing, even if they have good reason for not being at home. In these cases, careful assessment of the issues (including emotional safety) is warranted, along with respectfully raising the issue again from time to time.

Some family environments are unsafe for young people due to domestic and family violence, adult substance use, sexual abuse and emotionally damaging relationships. There may be individuals within their family with whom the young person should not have contact. In such cases, the young person’s need for emotional and physical safety is the core concern. However families where it is unsafe to have contact with any member are rare. Most parents and carers are doing their best, despite some needing help to cope with difficult life circumstances. Families who were providing ‘good enough’ parenting when their child was younger, may find in adolescence that they are now less able to meet a young person’s needs.

The concept of ‘family’ encompasses more than a young person’s parents or carers, especially for Aboriginal and Torres Strait Islander young people. Most young people have a number of relatives to whom they feel close, such as grandparents, uncles and aunts and cousins. Siblings are one of their most important relationships. Others will not be biologically related but will have cultural kinship roles or be ‘like-family’. However the idea that other young people can take the place of family is not appropriate. Groups of young people may provide extremely important social connections and emotional support, but they cannot fill the role of family – their relationships are unlikely to be enduring for the young person’s entire life and are unlikely to provide the permanent sense of belonging that comes with positive family connection.

Even where young people are disconnected from their immediate family, there will usually be someone they will feel able to have contact with. Re-establishing connections may not happen quickly, but should remain a focus, with the idea of ‘being in touch with family’ normalised for young people receiving Youth Support services.

* *Practice resource*: *understanding family connections*

An excellent resource which provides a balanced discussion on working with families in the context of relationship difficulties with young people, is the *Strong Bonds – building family connections* website (Jesuit Social Services). It has sections for workers and for families.

<http://www.strongbonds.jss.org.au/workers/default.html>

### Being family-focused

Effective work with young people in the context of family, for YS Support services and YS Integrated response services, starts with having an assumption that youth support workers will (usually) have contact with the family of a young person with whom they are working. YS Access services will always attempt to put young people in touch with support services if family issues are identified. Normalising this approach makes it easier for a young person to accept that it is a standard part of working with them. At the same time you will be making it clear that the young person’s safety needs are paramount, that what they want is taken seriously, and that they have rights (within duty of care limits) around consenting to Youth Support services having contact with their family in relation to them.

Integrate a focus on family within every stage of engaging with young people. The way in which this occurs will be sensitive to the young person and their current circumstances and will take account of the issues discussed above under ‘soft entry’ engagement. However ‘family information’ is essential information that is required to enable effective work with the young person. The youth support worker should therefore be skilled in talking to young people about their family in ways that will not be experienced as too intrusive. To do this:

* at initial contact, ask about their family situation, for example whether they are living with family, and if not, what is the situation that has resulted in them not living at home; if they are living at home, do they have any worries or concerns about family
* at intake, obtain information about who their immediate family is, and who the young person is currently living with. As part of screening for risk and initial assessment of need, ask about family relationships
* during detailed assessment to inform support planning, discuss more detailed information about the young person’s family relationships and whether there is a risk of family disconnection or this has already occurred
* in working with the young person to develop a support plan, promote the goal of working to improve family relationships, where this is an issue (taking into account any child protection and other safety concerns).

### Strategies for family connection work

Strategies used in working with young people and their families to improve or re-establish appropriate family connections will depend on the level and type of support work.

|  |  |
| --- | --- |
| Type of support service | Potential strategies to support (re-)connection |
| Access service | Identify if family connection support is required; refer to a YS Support service; undertake immediate work to support connection where possible (e.g. with consent, contact a family member to help respond to the young person’s immediate needs); provide brokerage funds for young person to travel home if required |
| Support service | Assist the young person and family to resolve conflict; support young person to negotiate with family around young person’s needs; help family to understand a young person’s needs and behaviour; suggest referrals to other services to assist family functioning; help young person to identify safe family members to support them or to link with; talk with family to negotiate a young person’s return home |
| Integrated response service | Work with other involved services to support young person and family to address entrenched family conflict and/or address risk to the young person; work with family support services to help a family meet a young person’s complex needs; help young person to identify safe members of the family to connect with; support estranged young person to negotiate return home; support young person obtain accommodation to leave home while maintaining safe connection. |

*Note: not all the above strategies apply in each case – they are examples.*

Different agency types and different workers (depending on the ambit of the service and role and profession of the worker) will deploy different strategies in working with young people in the context of their families. Clearly the age and development stage of the young person and the presenting issue will also make a difference in selecting appropriate strategies. These may include, in relation to the young person’s family situation:

* conflict resolution
* crisis intervention
* practical support
* brief solution-focused intervention.

It may also include appropriate referrals of family members to other agencies for parenting support, family mediation, family counselling or specialist support (e.g. AOD, mental health).

Working in teams to provide a collaborative response is often useful when working with families and young people, where feasible. This allows an appropriate service to support adult family members and the YS service to support the young person, working together to aid communication and conflict resolution.

* *Practice tip – avoid dichotomies*

When working with young people in the context of their families, things are never simply black or white. Always look for the shades of grey, the truth that lies somewhere in the middle. Avoid seeing these issues as dichotomies:

* *the young person’s version of events vs. the parent’s story*. The same situation is often viewed through very different eyes and interpreted differently. Both may be relating their own truths and perspectives
* *young person’s right to confidentiality vs. parent’s guardianship rights.* Both parties deserve respect in negotiating the issue of providing as much information as possible without breaking confidentiality
* *connected vs. not connected*. There are usually degrees of connectedness, rather than an ‘all or nothing’ situation. Attempt to establish whatever is the optimal level of connection for this young person and this family
* *re-connected vs. living independently*. Young people, including young people living transient lifestyles, may come and go from family on the path to independence. Flexibility is required, rather than locking young people into premature independent living.

### Engaging with families

Effectively engaging with parents, carers or other family members is similar to effectively engaging with young people – openness and honesty underpin the gradual building of trusting relationships. Remember that, while the worker may have assessed the young person’s needs, the parents will usually have had a role in caring for the young person for the past fifteen (say) years, and will have legitimate views about the young person and what they need. The views of the young person *and* the parents are important. Even where a family has been chaotic, has been unable to keep a young person safe, and is not able to provide safe stable care at this time, family members will usually want the young person to be OK.

“Davis and colleagues (2002) …. stress that this (the worker building a relationship with parents) takes ‘time, negotiation, qualities and skills to enable it to develop’. This approach does not deny the worker’s expertise but acknowledges that both parties (parents and worker) bring expertise and knowledge to the relationship” (Schmied & Walsh 2007, p.21).

Where a family is actively rejecting of a young person, if at all possible try to work with them to determine what the issues are. It may be that utilising another service focused on family support would work best for them, if they are willing to accept referral. Sometimes when the issues facing a family are overwhelming, the young person becomes collateral damage without this being intentional.

Where it is not possible or safe to connect with a parent or carer, help build connection for the young person with other family members that will be in their lives long-term and provide a sense of belonging and family identity. These relationships include grandparents, aunts and uncles, siblings and cousins, and anyone whom the young person views as family due to the person’s role within the young person’s actual family.

Good practice in engaging with families as part of youth support work includes:

* making clear that all parties have a right to confidentiality (while encouraging them to share appropriate information)
* making clear that all parties have a right to feel safe and that the worker will act to terminate discussion which becomes emotionally damaging for the young person (or others)
* understanding that all families have difficulties at times – you are supporting the family to be ‘good enough’ in meeting the young person’s needs, not perfect.
* *Practice tip: taking an attachment approach*

Where young people have experienced past trauma and/or disrupted attachment they will have difficulty forming the secure attachments to carers that provide them with the secure basis from which to launch into independence. One of the best ways to support young people’s capacity for independence is (paradoxically) to strengthen their attachment to adult carers who will be there for them as they move into young adulthood. Work put into building relationships between young people and available/willing family members is often is more useful, in the long term, than work with the young person alone. Look for strategies that will strengthen parent or carer or key adult figure relationships with the young person. For example, resourcing them through brokerage funds to do things together, resourcing some short-term family counselling or problem-solving therapy if necessary, being an intermediary for a time to bring them together, finding practical ways that they can help and support each other.

## 5.2 Staying engaged with schooling / earning

There is a correlation between early school leaving and ongoing socio-economic disadvantage, including poor literacy and numeracy skills and high unemployment (Robinson & Meredith 2013). There are also strong links between early school leaving and homelessness with secondary schools having an important role in early intervention with young people (Chamberlain and Mackenzie, 2008). Generally, a young person’s first experience of homelessness or other personal or social issues will be experienced while they are still at school. If appropriate support is provided at this crucial stage there is an opportunity to stabilise the young person’s situation, prevent early school leaving and improve their life options. This means that it is important that youth support workers help maintain connections between young people and school.

### Assessing school connection

The factors impacting young people’s engagement with school are multi-faceted and can range from practical issues (such as lack of transport) to family conflict issues. Other factors include bullying at school, young people caring for other family members, being pregnant or parenting, having financial issues or experiencing violence in the home. Connections to school vary from attending regularly to being homeless and disengaged for months. Appropriate intervention strategies depend upon the particular barriers and upon a young person’s current level of engagement.

Supporting a young person’s engagement with school starts with exploring any impacting issues and identifying potential strategies to address these:

* at initial contact ask: do they have any worries or concerns about school?
* at intake obtain further information: what school do they attend; do they enjoy school; are they attending regularly?
* to inform support planning where relevant, undertake a detailed assessment of the young person’s school engagement by asking questions that elicit in-depth information: what are the teachers like; do they have friends at school; how do they get to school; do they miss much school and if so, why?
* where issues are complex, explore exactly how these impact on school engagement, e.g. if the young person is not living at home, what would it take to keep going to school?

If a YS Access service identifies school engagement as an issue, try to ensure that the young person is referred to an appropriate service to provide support to resolve this issue. This may be a school-based service, such as the Guidance Officer. If the issues are multi-faceted and referral to a YS Support service or YS Integrated response service is appropriate, that service will further assess the issues through the YWA CAT.

Where a young person has multiple and complex issues, priority will be placed on stablising the young person’s situation and school engagement may not be a priority at initial contact. Nevertheless, it should be an early focus:

“One of the core pillars in building resilience is education. While educational and vocational training or employment are easily ‘dropped off the page’ for ‘high-risk’ adolescents, Gilligan (2001) suggests that the cycle of ‘once we arrange a stable placement, then we can consider education’ is a disservice to young people. Maintaining an engagement with an educational setting can help a young person on multiple levels: with attachment, belonging, the opportunity of adult mentors, trying out interests and talents, social connections, self-efficacy and skills (Bostock 2004; Klein, Kufeldt & Rideout 2006), not to mention the life-long benefits for those young people who may otherwise not achieve literacy” (DChS Qld 2008).

### Strategies for addressing school disengagement

School engagement issues and family issues may be related, for example where a young person has an insecure attachment to a parent or carer they may refuse to attend school due to anxiety about leaving the family home. Where the barriers to successful school engagement are connected to issues involved with the family, the youth support worker may refer the young person and family for family support or counselling.

Strategies to maintain a young person’s engagement, or reconnect a young person with school, will depend on the barriers the young person is experiencing.

|  |  |
| --- | --- |
| Type of support service | Potential strategies to support (re-)connection |
| Access service | If a young person’s disengagement from school is recent or for reasons that may be readily addressed, the youth support worker might contact the school (with consent) and negotiate support for the young person’s return to school; if bullying is an issue, assist the young person to make the school aware; address practical issues such as facilitating access to transport, uniforms and text books, including use of brokerage if appropriate; if indicated, refer to a specialist service (e.g. counselling) or a YS Support service. |
| Support service | In contact with the family (with consent), consider the reasons why the young person has been absent from school, and what needs to be put in place to address these; ensure the school is aware of the young person’s needs (with consent) and identify place-based school supports; work with the school to develop a coordinated support plan for the young person; refer the family to support services for family-based issues impacting in the young person’s school attendance; if peer pressure is an influence, consider working with the group. |
| Integrated response service | Work with other services, including the school, to address entrenched issues and provide integrated support for young people with multiple and complex needs. Where a young person has been regularly suspended or excluded or has a high rate of absenteeism it may be useful to explore other options such as a flexi-school, if available; for older young people, support alternate learning goals, e.g. enrolment in TAFE; support young people to address issues underpinning challenging behaviour and to develop alternate ways of expressing their feelings. |

*Note: not all the above strategies apply in each case – they are examples.*

### Working with schools

Schools are an important part of the local network of community services and intervention responses will be more effective when schools are linked into support planning for young people. This does not mean that the school needs to be informed about all the issues impacting the young person. However simply making the school aware (with consent) that the young person is having a difficult time can increase understanding and assist with the school becoming less reactive to the behaviour that a young person may be expressing.

Schools are busy complex systems impacted by often competing pressures and responsibilities including duty of care to all students. Successful collaboration is based upon an understanding of school systems, open communication, mutual respect and a willingness to adopt strategies that match the requirements and culture of schools. When working to build a collaborative relationship with a school:

* provide clear information about the Youth Support service, the eligibility criteria and how to refer young people to the service
* highlight the capacity of the Youth Support service to work with target young people outside the school and outside school hours. This can become part of a holistic complementary response to a young person
* link with guidance officers and behavioral support staff.

## 5.3 Maintaining community connections

Strong community connections play an important role in minimising the impact of social risk factors on vulnerable young people. Just as important as access to ‘structured’ community resources are the intangible community connections that allow young people and their families to feel a sense of belonging within the community, and to derive enjoyment and self-esteem from participating in and being a member of the community.

Community connection may not be a priority when a young person has other immediate needs. However, a young person’s sense of community connectedness or, conversely, of isolation, should be considered as part of any in-depth assessment of strengths and needs.

Assessing a young person’s connection to community, and the potential to facilitate improved connection, includes identifying their interests and aspirations.  Ask about what community activities are they involved in, what they do for fun, whether their friends go to the same school as them (are they connected with a wide group of peers), do they play a sport, do they participate in cultural activities, do they have regular transport to attend the activity, and whether they ever miss attending the activity. If the young person is not currently involved in any community activities, ask: what activities do they enjoy, are there any groups they know of that they’d like to join. These questions can be part of engaging with a young person and building a rapport with them.

Community connection also includes activities such as going to the beach, having a barbecue with family in the local park, going to the skate park or the local pool. Communicate with the family (with consent) to identify cost-effective activities with available transport to encourage and support the young person’s access to community facilities.

Where appropriate, community connections can occur for some young people through electronic media: “*Freed from geographic and temporal constraints, young people using the internet are forming new communities, allowing them to choose their social relationships and community memberships. The internet allows young people to connect with others who may be distant geographically and build a sense of community that doesn’t depend on transport, money or geographic location*” (Campbell & Robards 2013).

### Strategies for supporting community connections

Some young people will require additional support to successfully engage with a community activity or feel part of a community cohort.  Explore any barriers or issues and potential strategies to address these, with an emphasis on building the young person’s confidence and capacity to engage themselves.

|  |  |
| --- | --- |
| Type of support service | Potential strategies to support (re-)connection |
| Access service | Provide information on locally available resources within a young person’s cost and transport limitations, particularly those that will promote a young person’s sense of belonging (e.g. cultural groups, special needs support groups; young parents’ groups; LGBTI support groups). |
| Support service | Help link a young person into a community activity, e.g. a sporting group, by providing brief support to address barriers (including use of brokerage if warranted). Barriers may include personal issues, e.g. lack of confidence, or practical issues such as lack of an entry fee. Work with a young person to help them develop a plan to reach their goal of participating in a particular group, detailing the steps to be taken. Support cultural participation, especially for Aboriginal and Torres Strait Islander young people. |
| Integrated response service | Work with other services to support the young person’s connection to community by addressing entrenched issues in the young person’s life; where a young person has multiple and complex issues, provide support to develop the young person’s social, communication and organisational skills to successfully engage with others in community activities; refer the young person to specialist community-based groups that facilitate ongoing connections, e.g. disability lifestyle activities. |

*Note: not all the above strategies apply in each case – they are examples.*

### Cultural connections and support groups

Young people come from a wide range of backgrounds, experiences, beliefs, interests, cultures and languages, and should be actively encouraged and supported to maintain their cultural, social and friendship connections associated with these groupings. These may include Aboriginal or Torres Strait Islander young people, refugees, and young people who are culturally and linguistically diverse (CALD) or identify as lesbian, gay, bisexual, transgender or intersex (LGBTI). Community activities and groups specific to their identity can be particularly beneficial to young people from diverse backgrounds, engendering a sense of belonging for those who may otherwise feel isolated. In regional areas youth support workers may need to support such young people to access and connect with appropriate activities and groups online.

# Section 6 Working with young people

* Providing active support
* Using motivational strategies
* Working with Aboriginal and Torres Strait Islander young people
* Working with CALD young people
* Working with young people with particular needs

## 6.1 Providing active support

The key to effective casework is relationship (DChS, 2008). Gronda (2009) found empirical evidence that when case management works well, it is because of the relationship between the young person and the caseworker or casework team.

In building and maintaining relationships with young people, research has shown that persistence and reliability are important, as are respectful communication and practical support (Gronda 2009; Watson 2005). A core aspect of relationship is trust, and vulnerable young people may have difficulty in establishing trusting relationships. Flexible responses are essential – ‘formal’ processes should never take precedence over spending the time to engage with vulnerable young people.

Effective support work aims to empower individuals and their families by working in partnership *with* them (Schmied & Walsh 2007), and supporting them to discover and build upon their strengths. Through relationship, the youth support worker helps to engender hope and to motivate the young person towards the change which is desired by them. A core focus of Youth Support services is connecting young people with family and community, and therefore the youth support worker will always consider how the support being offered furthers the aim of strengthening connections for the young person.

The complexity of a young person’s issues including the degree of disengagement (for example, whether they are living with family or not) make a difference when choosing intervention strategies which may be effective. A key consideration is the young person’s age and stage of development. Work with a 12 year old will be different in focus and approach from work with a 17 year old.

Be aware that for some young people, especially if they have experienced trauma and have attachment issues, capacity to trust will be low. The first focus is therefore helping them to build relationships. Changes in the external behaviours of these young people (e.g, attending school, retaining housing) may come more slowly, following the provision of unconditional support that does not ‘give up’ on them.

### Solution focused brief intervention

Brief intervention involves providing support, often one-off, that responds to a young person’s immediate needs, for example ensuring a young person has a safe place to stay tonight and linking them into emergency accommodation if required. Any of the tiers of Youth Support services might provide brief intervention at any stage in working with a young person and their family, but it is particularly relevant as a strategy used by YS Access services.

Brief interventions may occur when a young person is in crisis, as an immediate safety response. It may also be used where contact with a young person is not on-going, for example when a young person is erratic in their behaviour and/or not yet fully engaging. In these cases, brief intervention is ‘opportunistic’ in providing the young person with information and food-for-thought, with the aim of raising awareness, reducing risks (e.g. from substance use) and increasing the young person’s future help-seeking capacity.

Brief intervention may, where relevant, include elements of motivational interviewing (see below) to encourage young people to think about the idea that change is possible. When opportunities to speak with a vulnerable young person are infrequent and unpredictable, brief intervention which encourages relationship should be a core focus. This can include providing information about help available, for example, sources of emergency relief, finding crisis accommodation, school re-entry options or legal advice.

### Making referrals

Referrals are an intervention strategy used throughout work with a young person, and are particularly part of a YS Access service. Making appropriate referrals requires skilled assessment of needs and good knowledge of, and working relationships with, the service sector. Supporting young people with referrals to appropriate services includes:

* having the young person’s prior knowledge and consent (see section 8[Confidentiality and recording](#_Section_8_)). A referral is unlikely to be effective if the young person is not agreeable to it
* ensuring the referral is effective, by facilitating the young person’s or family member’s contact with the new service or practitioner. ‘Warm’ referral can include personal introductions, supporting the young person to make telephone connection, transport to the service, undertaking joint work as part of facilitating transfer of trust, follow-up to ensure the connection occurred
* providing short-term support until the referral service engages with the young person, for example, during a waiting period
* particularly where a number of agencies are providing services to the young person, ensuring coordination of referrals to new services (see 7.2 [Coordinating service delivery](#_7.2__Coordinating)).

When the local service sector is limited, for example in rural or remote regions, services which would be desirable for the young person or family members may not be available locally. In these circumstances, options to explore include:

* using brokerage funds for transport to access services if feasible
* supporting the young person to use on-line or telephone services if possible
* obtaining advice from specialist services (by phone or on-line) and implementing the advice with the guidance of the specialist service
* using pooled local resources to maximize the available expertise and experience (for example, through coordinated case conferencing).

### Advocacy

Advocacy as a form of active support is based on the principles of social justice and client rights. Appropriate advocacy is consistent with empowering the young person to act on their own behalf, and modelling how this may be done. It occurs in a way which involves the young person in solution-seeking rather than the youth support worker acting as a problem-solver. However where a young person is significantly disempowered, such that they are not in a position to advocate on their own behalf, the youth support worker has a duty to advocate for them where appropriate, with their knowledge and consent.

### Other intervention strategies

There are range of strategies for active support work with young people which will vary depending on the focus of the agency and the local service system and the resources available. These may include:

* group work
* mentoring
* counselling, including individual and group counselling
* negotiation between young person and family
* activity-based strategies
* skills development activities.

Strategies which involve group processes do not stand alone but may be incorporated in the support plan of individual young people.

Note that intervention strategies which involve negotiation with family are not appropriate in relation to a young person and a parent or carer in circumstances where the young person has been the subject of child abuse.

Any of these strategies may be used in a time-limited way as part of brief intervention by YS Access services. When implemented by YS Support services or YS Integrated response service, they will be incorporated as part of support planning (see [section 4](#_Section_4_)).

## 6.2 Using motivational strategies

Each of the strategies below are practical means by which young people might be supported to develop the motivation and capacity to make changes in their lives. This does not suggest that young people are personally responsible for improving their circumstances, but recognises the importance of a resilience approach – supporting young people to have belief in themselves and their capacity to bring about change (with appropriate support) and move beyond adverse circumstances.

Motivational strategies may be part of brief interventions or ongoing support. They include motivational interviewing and related decisional-balancing. Appropriate use of motivational strategies requires an understanding of the process of change including readiness to change and capacity to effect and sustain change.

### Using a stages of change framework

The classic ‘stages of change’ framework (Prochaska & DiClemente 1982) is useful as a way of considering a young person’s readiness and capacity to change, and in matching the strategy to the current stage when supporting the young person. This can relate to AOD use, and also to any other issues where the young person is ‘resistant’ to change (long-standing disengagement from school; recognising and dealing with unregulated emotions expressed as anger).

A young person who is at the pre-contemplative stage, i.e. they are not considering change, may see *no hope* for change or may see *no need* for change. Assessment of their current view and what underpins it is important, as the strategies used to respond will differ.

**Relapse**

**Moving forward**

*Figure 3: The Stages of Change*

### Motivational interviewing

Motivational interviewing is a way of talking with a young person which aims to help them evaluate the issue under discussion, especially as it affects them. It can be quite subtle and used in the course of ‘casual’ conversation, or more formal in a structured discussion which openly focuses on the issue. Motivational interviewing avoids pressure, control, disagreement, taking the lead and argument in discussion with young people, leaving them to formulate their own thinking on a topic. At the same time, it highlights discrepancies, promotes consideration of decisional balancing and leaves the way open for a young person to change their mind or move in their thinking.

The classic tactics of motivational interviewing (or discussion) fit well with respectful engagement which recognises self-determination of the young person. They include:

* express empathy
* *convey understanding of the young person’s viewpoint*
* *accept ambivalence as normal*.
* develop discrepancy
* *help young person observe the discrepancy between what they want and what they are doing, without ‘telling’ (“So you do want to xxx, but xxx gets in the way?”)*
* *discrepancy between present behaviour and important goals motivates change*
* avoid argument
* *arguments are counterproductive*
* *resistance is a signal to change strategies*
* roll with resistance
* *meeting resistance head-on cements defensiveness; let it ‘roll past’*
* *perceptions can be shifted if space is allowed*
* *new perspectives are invited but not imposed (“I wonder what would happen if…?”)*
* promote ‘change-talk’
* *reinforce the young person’s speculation about the possibility of change (rather than suggest it to them)*
* *support client-initiated discussion of reasons for change*
* support self-efficacy (belief in own capabilities)
* *the belief in the possibility of change is an important motivator*
* *the young person is responsible for choosing and carrying out personal change*
* *the young person should be subtly supported to present arguments for change*.

Source: Adapted from Department of Health and Ageing, *Training Frontline Workers – Young People, Alcohol and Other Drugs. Module 9.*

[*http://www.health.gov.au/internet/main/publishing.nsf/Content/phd-pub-illicit-tfwi-cnt.htm*](http://www.health.gov.au/internet/main/publishing.nsf/Content/phd-pub-illicit-tfwi-cnt.htm)

* *Practice resources*: *Motivational interviewing*

For an example of applied motivational interviewing see Dovetail’s *Practice Strategies and Interventions youth alcohol and drug good practice guide*, p. 54. Available on-line at:

<http://dovetail.org.au/i-want-to/open-the-good-practice-toolkit.aspx>

Induction Module 5, Motivational Interviewing, of INSIGHT: Alcohol and Other Drug

Training and Education Unit (Queensland Health), available on-line at: <http://www.dovetail.org.au/insight/modules/Module%205%20Motivational%20Interviewing.pdf>

The Commonwealth Department of Health also has a training resource on motivational interviewing, which is applicable to more than alcohol and other drugs work, available at:<http://www.health.gov.au/internet/publications/publishing.nsf/Content/drugtreat-pubs-front9-wk-toc~drugtreat-pubs-front9-wk-secb~drugtreat-pubs-front9-wk-secb-4~drugtreat-pubs-front9-wk-secb-4-1>

## 6.3 Using brokerage

Agencies may have allocated brokerage funds to enable workers to provide assistance for young people where this addresses identified support needs consistent with the focus of the Youth Support service. The management of brokerage funds is the responsibly of agencies, who will have appropriate policies and procedures in place to guide the expenditure of these funds.

Use of brokerage funds is a flexible early intervention strategy that responds to young people’s needs in a way that supports sustainable change and promotes their well-being. It is not designed to simply meet a young person’s needs for everyday financial support.

Decision-making about allocation of brokerage funds is based on assessment of needs, either the Initial Contact assessment or the more detailed Youth Wellbeing CAT assessment conducted by the youth support worker, or assessment by another agency in consultation with the YS service. Alternative sources of funds are to be explored in the first instance. There is a focus on providing the most sustainable and effective response to a young person’s ongoing needs or presenting risk, in line with the support plan goals. For example, brokerage funds may be applied as part of early intervention to assist a young person to avoid homelessness.

Eligibility requirements for the use of brokerage funds should be detailed in the organisational procedures of the specific Youth Support service. In addition to any specific eligibility requirements, brokerage funds should only be approved when:

* the practical purpose for which the money is to be used is clear, and
* the purpose is preventative or related to one of the goals of a support plan, and
* the way in which the expenditure will directly benefit the young person is clear, and
* there are no other readily available sources of funds for the same purpose, and
* the amount is reasonable in the circumstances.

Some examples of useful expenditure of brokerage may include:

* meeting immediate needs to reduce the need for longer term support (e.g. the fare to travel home where a young person will benefit from returning to their community)
* purchasing items or services for a young person as part of planned support where no alternative sources of funds are available (e.g. the cost of a counselling session or payment of youth camp entry fee).

## 6.4 Working with particular groups

### Aboriginal and Torres Strait Islander young people

Youth Support services will all work with Aboriginal and Torres Strait Islander young people and in some localities across the state the majority of young people accessing the Youth Support service may be Indigenous. It is therefore essential that all services be provided in a way that is culturally safe for Aboriginal and Torres Strait Islander service users. This incorporates the concepts of youth support workers being culturally aware, and able to work in culturally competent ways with Aboriginal and Torres Strait Islander young people.

The impacts of colonisation, including the destruction of culture and traditional society and the removal of children as part of the Stolen Generations, are ongoing for Aboriginal and Torres Strait Islander people today. Understanding the impacts of trans-generational trauma, and the link with contemporary over-representation of Aboriginal and Torres Strait Islander children and young people in the child protection and youth justice systems, is an important aspect of cultural awareness. Aboriginal and Torres Strait Islander young people are significantly more disadvantaged than their non-Indigenous peers across all social indicators.

Cultural awareness in providing Youth Support services requires awareness of the diversity of Aboriginal and Torres Strait Islander communities across the state, with significant differences between urban and remote communities. Understanding the cultural protocols of the particular Aboriginal community or Torres Strait Islander community with which the Youth Support service is working, and the roles of Elders and traditional owners within that community, are important to effective work with the community. Non-Indigenous youth support workers also need to be aware that kinship relationships and family structures are different to non-Indigenous families, and seek guidance about who are significant persons within a young person’s family.

Non-Indigenous youth support workers will benefit from co-working with Aboriginal or Torres Strait Islander workers when working with Indigenous young people. If the Youth Support service does not currently have Aboriginal or Torres Strait Islander workers employed, seek out Indigenous workers in other relevant services to provide cultural advice and, if appropriate, help with building trust and positive working relationships with Aboriginal and Torres Strait Islander young people and families.

When undertaking assessment of the needs and wishes of Aboriginal and Torres Strait Islander young people, be aware of the potential that a young person may not relate openly to a non-Indigenous worker. Where possible, use culturally validated tools as an adjunct to the CAT forms, take care with interpretations, and involve an Indigenous youth support worker if possible.

Not all Aboriginal or Torres Strait Islander young people are connected to their culture or express an interest in culture. Despite this, research shows that establishing cultural connection is strongly correlated with positive outcomes for Aboriginal and Torres Strait Islander young people (Bamblett 2012). Similarly, while Aboriginal and Torres Strait Islander young people may present as disconnected from family, particularly in urban areas, it is difficult to achieve positive sustained outcomes with Aboriginal and Torres Strait Islander young people without working in the context of family and community.

Some practice points for working with Aboriginal and Torres Strait Islander young people include:

* note that Indigenous young people may have good reason not to trust, given family histories of loss and trauma associated with the intervention of welfare and policing services – be prepared to persevere in gaining trust
* Aboriginal and Torres Strait Islander young people may feel shame in talking with non-Indigenous workers they do not know well – use strategies that ease tension, keep things informal and don’t require direct face-to-face questions and answers
* use narrative and pictorial approaches to obtain information rather than questioning and writing – be aware of potential literacy issues
* wherever possible, connect with the family as well as the young person. Where the young person’s home is problematic for the young person, for example due to family violence or alcohol and drug issues, with consent seek out other family members who may provide an anchor for the young person
* take opportunities to engage the young person in activities which build pride in culture and in their identity as an Aboriginal or Torres Strait Islander young person
* group work will usually work better with Aboriginal and Torres Strait Islander young people than one-on-one work – support planning can still occur separately.

Given the impacts of lateral violence associated with the historical legacy of colonisation, many Aboriginal and Torres Strait Islander young people in need of Youth Support services will have experienced trauma in their family lives. Trauma-informed practice will be beneficial in working with them. As well, these young people benefit from positive role modelling by older Indigenous persons and opportunities to experience themselves as competent. One of the best role models is to employ Aboriginal and Torres Strait Islander youth support workers across each of the tiers of Youth Support services.

Good cultural connection can be a measure of well-being for Aboriginal and Torres Strait Islander young people (Bamblett 2012). Aboriginal and Torres Strait Islander young people who have been in care may have experienced loss of culture. This makes it even more important to work with these young people in a way that supports development of their cultural identity, but also means this work will be harder. If you are non-Indigenous, work with an Aboriginal or Torres Strait Islander youth worker if possible, to refer young people to relevant cultural-development opportunities.

* *Practice resources*: *working with Aboriginal and Torres Strait Islander young people*

Website: [www.snaicc.org.au](http://www.snaicc.org.au) (Secretariat of National Aboriginal and Islander Child Care)

QATSICPP publication: a framework for demonstrating cultural respect in the delivery of services to Aboriginal and Torres Strait Islander children, young people and families

[*http://cpp.comverj.com/wp-content/uploads/2010/09/DYK-B-2-framework-cultural-respect.pdf*](http://cpp.comverj.com/wp-content/uploads/2010/09/DYK-B-2-framework-cultural-respect.pdf)

*Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice*

A highly recommended resource for further reading about issues in the assessment of Aboriginal and Torres Strait Islander young people and families.

Authors: Dudgeon et al 2014. Available on-line at:

<http://aboriginal.telethonkids.org.au/media/699863/Working-Together-Book.pdf>

Bamblett, M., Frederico, M., Harrison, J., Jackson, A., & Lewis, P. (2012). *‘Not one size fits all’ Understanding the social and emotional wellbeing of Aboriginal children.* Bundoora: La Trobe University. Available on-line at:

<http://www.childhoodinstitute.org.au/Assets/226/1/NotOneSizeFitsAllreportfinalNov2012.pdf>

### Culturally and linguistically diverse (CALD) young people

The 2011 census indicated that 20% of Queensland’s population was born overseas and nearly 10% spoke a language other than English at home (ABS 2011). Migrant and refugee young people and families may experience specific challenges and needs that are associated with their experience of migration or refugee flight, and cultural adjustment and resettlement in Australia. Migrating to and resettling in a new country can be a highly disruptive process requiring a lengthy transition. It may also involve losing structures that provided significant support for a young person and their family.

When conducting assessments, consider how the family is navigating settlement in Australia as a unit. The young person may require support due to conflict with parents or carers who retain strong cultural beliefs, as the young person develops relationships with peers and their sense of self in their adolescent years. Youth support workers require an understanding of:

* how family relationships are constructed, including the impact of gender
* intergenerational differences in new cultural contexts
* the impacts of different parenting practices, including approaches to discipline
* that there may be variations in how individual members of the family interpret and practice their culture.

Recognise that there is diversity within CALD groups and that people identifying with specific cultural backgrounds do not necessarily share the same values. Talk with the young person, and their family (with consent), to seek understanding about cultural influences for a particular family, and seek general information and advice from multicultural services about appropriate support strategies.

When conducting assessments with young people from refugee backgrounds, ask about their or their parents’ country of origin, ethnic demography and their experience of migration to and settlement in Australia. Be alert to the possibility that they may have been exposed to trauma-inducing events and circumstances, including experiences of war, famine, state persecution, refugee flight, and refugee camp life. Refugee trauma can have ongoing impacts on the physical and psychological health and wellbeing of young people. Needs assessments and support planning should explore whether such young people may be experiencing post-traumatic stress that would benefit from referral to specialist counselling or refugee health services.

In all work with CALD young people, consider the limits of your own understanding about particular cultural groups and be willing to seek information and advice. Also consider the influence of your own cultural beliefs and practices and how these may affect the way you understand the cultural practices of others.

Use interpreters when necessary to fully communicate with a young person and/or their family. It is generally not appropriate to use young people to interpret for family members about significant issues – try to use professional interpreters in such cases.

* *Practice resources*: *working with CALD young people*
* The Translating and Interpreting Service (TIS National) provides access to phone and on-site interpreting services in over 160 languages and dialects: <http://www.tisnational.gov.au>
* The Ethnic Communities Council of Queensland has a range of resources for working with and supporting CALD young people: <http://www.eccq.com.au/category/resources/youth>
* Queensland Program of Assistance to Survivors of Torture and Trauma (QPASTT) provides a range of services to people from refugee backgrounds who have survived torture or war-related trauma to help them recover from their experiences. The program works with young people and families and is located in regional areas through Queensland including Logan, Toowoomba, Rockhampton, Townsville and Cairns as well as Brisbane. For more information go to: <http://www.qpastt.org.au>

### LGBTI young people

It is important that Youth Support services are actively accessible to lesbian, gay, bisexual, transgender and intersex (LGBTI) young people, especially as they are relatively invisible to many service providers.

It is estimated between eight and eleven percent of Australian young people experience same-sex attraction. In a 2008 study of Australian secondary school students, 9% reported not being exclusively attracted to opposite sex people (Smith et al, 2009). The realisation of sexuality and gender identity occurs at a relatively young age, with most young people knowing their sexual orientation by the end of their teenage years, and many by age 13 (Hiller, Jones et al, 2010). LGBTI people experience stigma and discrimination which results in significantly higher risk factors including homelessness, disconnection from family, mental health issues including self-harm, use of alcohol and other drugs and a higher incidence of suicide or suicidal thoughts (ABS, 2007). Early intervention can help avoid long lasting negative effects on young people’s health and wellbeing and relationships.

A fundamental understanding for youth support workers is that sexual orientation is not a choice and is simply part of who people are as human beings. LGBTI young people are from all walks of life and live in all parts of Queensland across both rural and urban areas, including Aboriginal and Torres Strait Islander communities and CALD communities.

General strategies for engaging with LGBTI young people include:

* access spaces have visible LGBTI material, for example rainbow motifs
* promotional materials for the service (e.g. brochures) include LGBTI young people in the client group
* intake and other forms address same sex partnerships and diverse households
* the space is safe for LGBTI clients – homophobic or heterosexist comments by staff or other service users are not tolerated.

To provide inclusive YS services and effectively engage with LGBTI young people, youth support workers need to have an understanding of the issues impacting on them. Workers also need to be aware of their own feelings about sexuality and be open to discussing sexuality and gender identity with young people. Use inclusive language that doesn’t define sexuality and relationships in hetero-centric ways.

Practice tips when working with LGBTI young people include:

* be reassuring and supportive if a young person is struggling to come to terms with their sexuality and/or gender identity
  + let the young person know that they are cared about and respected
  + remind them that coming to terms with the issues they are facing takes time
  + counter any myths and stereotypes which the young person themselves might have heard or come to believe
* encourage the young person to identify any other people in their lives who accept and support them for who they are
* provide information that can link the young person with others going through similar experiences (e.g. a social group, including an on-line group)
* consider other needs or pressures that may be impacting the young person besides  their sexuality or gender identity (e.g. study, accommodation, family dynamics or health issues)
* focus on the young person’s personal strengths and build self-worth*.*

* *Further information*:

Open Doors Youth Service provides counselling and support services for LGBTI young people aged 12 to 24 years and their families in South East Queensland. They also have a range of information and resources on their website: <http://www.opendoors.net.au>

### Young people with AOD and/or mental health issues

Not all drug use is problematical, and many young people will try alcohol and other drugs without developing regular or problematic use.  However where AOD use is problematic, the issues are usually multi-faceted and complex – interventions that try to deal with single-risk factors or single-risk behaviours are ineffective. Problematic AOD use is best understood in the broader context of the lives of the young people, and youth support workers need to consider this when conducting needs assessments and developing support plans with these young people. Common factors that can be associated with a young person’s AOD use include: traumatic life events including domestic and family violence, other family conflict, disengagement from family, difficulties with peers, emerging mental health issues, homelessness, disengagement from school, family violence, and sexual abuse.

Factors that may increase a young person’s vulnerability to problematic drug use where they are negative, and conversely can act as protective factors if they have a positive influence in the young person’s life, include:

* family relationships
* peer relationships
* school connection
* community connection
* individual characteristics such as self-esteem, resilience and sense of belonging.

YS Support services and YS Integrated Response services will ascertain whether AOD use is considered a problem by the young person (or others), and the ways in which the above factors intersect with any AOD identified issues, when undertaking the Youth Wellbeing CAT assessment. Mental health issues similarly intersect with these factors, and co-morbidity (the presence of both AOD and mental health issues) is common. Young people may ‘self-medicate’ to deal with mental health issues such as depression and anxiety, and conversely AOD use can worsen or in some cases precipitate poor mental health.

Harm minimisation is universally accepted as the goal of initial intervention and focuses on strategies to reduce harm associated with AOD use. Facilitating change is pivotal in working with young people around both AOD use and mental health issues (see 6.2 [Using motivational strategies](#_6.2__Using)), along with referral for specialist support and mental health treatment where necessary.

In all cases, YS services that do not provide specialist AOD and/or mental health services for young people should work with other relevant specialist services in meeting the needs of young people with these issues. Ensure that support plans are integrated and take account of the multiple complexities in the lives of young people with AOD and mental health issues, particularly where these are becoming entrenched. Be prepared to commit to working with young people for the time it takes to bring about change. The lives of young people with AOD and mental health issues can be chaotic at times, and youth support workers may need to work hard to maintain engagement of the young person and to keep their support plan ‘on track’.

* *Practice resources and information*:

Information for young people experiencing mental health issues and for workers supporting these young people is available at Headspace: <http://www.headspace.org.au/>

Information about working with young people who use substances, including an excellent series of Good Practice guides and information about AOD services, is available from Dovetail: <http://www.dovetail.org.au>

*Our Healing Ways, Putting Wisdom into Practice* (VDDI 2011) is a very practical resource for working with Aboriginal and Torres Strait Islander clients with dual diagnosis. Developed by the Victorian Dual Diagnosis Initiative Education and Training Unit, and available on-line at:

<http://www.dualdiagnosis.org.au/home/index.php?option=com_content&task=view&id=95&Itemid=1>

### Young people who are parenting

Young people who are parenting are at higher risk of disengaging from family and peers, disengaging from school, becoming homeless or unable to obtain secure housing, experiencing social isolation and stigma, and experiencing poverty. Young parents may also experience low self-esteem, self-doubt and exhaustion. Youth support workers will recognise that young mothers and young fathers may have particular needs to address in their support planning.

It is vitally important to develop support structures around young parents who are experiencing difficulties, in particular working with the young person to strengthen the natural support networks within their connections with their family and peers. This may mean supporting the young parent to reconnect with their family where this can be achieved safely (see 5.1 [Maintaining family connections](#_5.1__)). Young people may be torn between their responsibilities as parents and their normal age-related desire to interact socially with their peers. Youth support workers should support young people to negotiate these conflicts and find strategies to maintain supportive connections with peers.

If available, young parents will benefit from being linked into a young parents group, where they have opportunities to discuss the challenges and issues they may be facing with peers in similar situations. This will also assist with building confidence and skills in parenting as they become aware that other young parents share their experiences. Other necessary linkages to be promoted through supported referral include with:

* child health services for support with immunisation, feeding and the general health of their baby
* child-care services
* Centrelink for financial entitlements.

Young parents often struggle with managing school and parenting responsibilities. While schools cannot, by law, deny access to education on the basis of pregnancy or parental status, many young people will self-select out of school believing they have no right to stay or feeling under pressure or uncomfortable. Ensure young people are aware of their rights and facilitate them having the support they require to remain engaged with school. This may include negotiating part-time attendance and child-care.

Young women are especially vulnerable in personal relationships when parenting due to increased dependencies associated with lack of finances, support structures or alternative accommodation.  Youth support workers should be alert to the risk of domestic and family violence in this context. Young parents may be reluctant to disclose a partner’s violence due to concerns about losing their child or losing access to financial support or accommodation. Provide support that is sensitive to these needs, including supported referral to domestic and family violence services where necessary.

*Well-being of the child*

When working with young parents, youth support workers have a duty of care to be attuned to the needs of the baby. Babies and small children of young parents under 18 are at heightened risk of neglect of their developmental and practical needs. Though the young parent may be doing their best, a range of factors such as not having good parenting role models themselves or not having stable accommodation (e.g. couch surfing) can impact on their care of the baby and the baby’s sense of security and attachment.  While support should to be provided to the young person to successfully parent, the needs of the child, as the most vulnerable, are the priority. If necessary, consult with Child Safety about any concerns for the child, and follow your organisation’s child protection policy (See Section 9.3 [Responding to child protection concerns](#_9.3__Responding_3)). Where a young parent’s child is removed for child safety reasons, work with the young person to help them maintain a connection with their child. This support can make the difference between reunification and long-term disconnection – maintaining the connection between the child and the young parent is in the interests of both. Refer the young person to an appropriate family support service if available.

### Young people with disability

Young people living with a disability, including physical, intellectual and learning disabilities, experience social stigma and unequal social relationships that create barriers to participation within their community. The focus of YS services on community engagement, learning or employment and maintaining stable housing can be particularly challenging for these young people.

The higher risk experienced by many young people living with a disability means that youth support workers may need to facilitate intensive integrated support structures around the young person. The involvement of relevant specialist support services will be necessary, if available, in addition to support the YS service may give.

Work with young people with disabilities in the same way you would work with any young person, while taking into account their specific capacities, strengths and needs.  If the young person has a support person with them, speak directly to the young person regardless of the role of the support person in answering questions. When conducting needs assessments, adjust the ways in which the young person is included, using facilitated methods of communicating if necessary. In developing support plans, consider the increased vulnerability and/or capacity issues of the young person and adjust the level of support they may require to implement the plan.

When a young person with a disability is living with their family, youth support workers should (with consent) consider any needs of the young person’s family relating to their capacity to support the young person. Such families may experience increased stress and workers should ensure family members are linked into relevant services and supports.

# Section 7 Working with other agencies

* + *Being part of an integrated service system*
  + *Coordinating service delivery*
  + *Collaborating with other services to meet young people’s needs*
  + *Implementing models for integrated practice*
  + *Working with statutory services (Child Safety and Youth Justice)*

## 7**.1 Being part of an integrated service system**

Youth Support services are part of an integrated service system which ensures that service delivery to vulnerable young people is coordinated and that young people receive a seamless, holistic service response. Even where the one organisation provides each of *access*, *support* and *integrated responses* as well as some specialist services, it will be part of a wider service system. This requires communication with other local service providers to young people, including education, health, family support, housing, specialist youth services (e.g. mental health or AOD services) and others. Even where the local service system may have a limited range of service types, as may be the case in some rural and remote areas, the Youth Support service will work closely with core services which do exist in the area (e.g. the health service and the schools).

It is also essential to have an awareness and good connections with other types of community groups that might help meet a young person’s needs, for example sporting groups, volunteer activities, social networks such as cultural groups. These too are part of the integrated system to which the young person may be linked.

Services funded under the Youth Support approach within the same locality liaise to ensure that roles and protocols are clear across the service types (Access, Support and Integrated Response) and provide for easy intra-agency or inter-agency referrals. At an organisational level, good practice includes:

* considering the service mix that each agency offers, to rationalise resources and avoid unnecessary duplication
* considering the eligibility requirements and boundaries of services offered, and acting together to avoid gaps within the local system if possible
* having in place MOUs and protocols which facilitate referral pathways, information sharing and joint processes for working with the same young people.

The processes to ensure integration of the local service system for youth support services are an organisational responsibility. However youth support workers must be aware of the local service system and how it works, what protocols exist between their agency and others, and how these are implemented in practice.

Maintaining good working relationships between agencies is the foundation of a well-functioning local system, and it is the responsibility of each worker to contribute to this goodwill. As for working with clients, good working relationships with other agencies requires taking the time to communicate, being open and honest, being willing to build on strengths and not focus in deficits, being reliable and consistent, and building trust over time.

* *Practice resource: Defining ‘coordinated’ / ‘collaborative’ / ‘integrated’*

It is not important to feel you have to use the ‘correct’ term to describe the ways your agency is working with others. Usage of these terms and the meanings ascribed to them varies. What is more important is to avoid working in isolation from other services involved with the young person and their family with whom you are providing a support service. In general, on the continuum of degrees to which agencies work together:

*Coordination* means being aware of which other agencies are also involved with the young person and communicating with them (with consent) to ensure that your separate activities and plans are consistent and fit together well in meeting the young person’s needs. Action may be taken to streamline the agencies’ activities in relation to the young person.

*Collaboration* is a step beyond coordination to also incorporate actively working together to address a young person’s needs. It may include joint planning discussion (or ‘case conference’) with the young person and family to agree how the agencies will work together in this case and how ongoing sharing of assessment and review information will occur. Some sharing of resources may occur, such as common assessment, as may co-working on tasks which may serve more than one purpose.

*Integration* of service responses means a coming together of all the key services involved with supporting a young person with high level and complex needs, to form a team with a consistent agreed focus in working with the young person and family. Though agencies will have separate core functions, one integrated support plan will be agreed and the team will collaborate in implementing it. Joint responsibility may mean less rigidity of agency boundaries, where feasible. One agency will usually take a lead role in ensuring information is shared and that the team comes together for planning and review when necessary. ‘Care teams’ and ‘care coordination panels’ are two of the common structures for integrated service provision. The care coordination panel might help ensure that all necessary services are represented on a young person’s care team.

## 7.2 Coordinating service delivery

YS Access services provide coordinated service delivery.

All Youth Support services are expected to coordinate service provision with that being provided to the young person by other agencies, where relevant to the issues identified by holistic assessment. ‘Coordination’ is the first level, and most common level, of working together. It includes:

* communicating to ensure information is shared, with consent, where relevant to avoid duplication and maximise benefits
* advocating on the young person’s behalf if necessary
* making ‘warm’ referrals, including as a result of open access (‘no wrong door’) where a young person or family member is assisted to access another agency better suited to meeting their needs.

*Case example: A YS Access service is approached by a mother of a 14 year old young person who is being bullied and has started to self-harm as a result. The mother is referred to the local headspace (youth mental health) service which initiates contact with the young person and offers counselling. The headspace worker provides specialist advice to the mother about things she can do. The YS Access service also linked the mother to Housing, as unstable housing was stressing her and impacting her capacity to respond to the young person*.

In particular, YS Access services coordinate with other services, including YS Support services and YS Integrated response services, when it is apparent that a young person requires a service beyond the provision of information or brief problem solving. YS Access services will remain involved until able to confirm that a young person has been successfully linked to an appropriate service. This may include supporting them to access on-line support if centre-based services are not locally available and/or having another appropriate service begin outreach contact with the young person even if they are not yet engaging.

## 7.3 Collaborating with other agencies

YS Support services provide collaborative service delivery.

A clear objective of the Youth Support approach is that, beyond simply coordinating services to an individual young person, funded services will set up collaborative practice models to:

* improve the quality and scope of service delivery to vulnerable young people with medium to high needs achieve efficiencies and value-adding in local service delivery to young people and their families.

*Case example: A YS Support service is working with a young person who has recently left home due to family conflict. Emergency accommodation is being sought. The YS Support service becomes aware that another practitioner is working with the young person to retain their school engagement. With consent, the YS Support service coordinates services to the young person, so that each agency works separately but shares information to ensure consistency. All collaborate in working to reconnect the young person with their family*.

When working with a young person (and their family if relevant) to develop a support plan together, ask what other services are involved with the young person. Continue to liaise with the services to which you may refer the young person following detailed assessment. Check (with the young person’s permission and involvement) that other agencies working directly with the young person are:

* aware of significant matters, relating to your work with the young person, which might make the other agency’s work with them more effective
* communicating with the YS Support service to ensure well-integrated (though separate) inter-agency planning for the young person, avoiding cross-purposes or duplicating
* where relevant, obtaining information (with consent) from other services about the young person’s progress, particularly at times of review.

Collaborative partnerships are supported when organisations develop formalised mechanisms, structures, processes and skills that address differences and support the achievement of shared goals and desired outcomes. “Case conferences” or “case reviews” are mechanisms that can aide collaboration around work with a particular young person and their family. Coming together, either physically or on-line, enables focused discussion between workers involved with the same young person to consider their separate roles in working with the young person, share relevant information and coordinate planning of services to the young person and family. These may be internal within a larger service (e.g. between an AOD worker and a housing support worker) and/or may involve workers from two or three other agencies.

* *Practice tip: Involving young people in inter-agency case conferences*

This occurs with the direct involvement of the young person if possible and appropriate. When organising team meetings at which the young person will be present, attention is paid to time and place to encourage their participation. When a young person is not able, or not willing, to be present, the youth worker will ensure the young person’s views are heard (see *Section 4 Support planning and review*).

Invite the young person to take part in case conferences between agencies, unless there are duty of care reasons why this is inappropriate. In all cases, consult with them about the meeting, including its purpose and who they think should be present. Confidentiality requirements are observed (see 8*.3 Information Sharing and Confidentiality*), so the young person’s consent will be in place before an inter-agency case conference takes place.

Ensure that the young person’s voice is heard at any inter-agency meeting at which they choose not to be present. Inform them about what was discussed and the outcomes or matters decided (unless duty of care issues take precedence).

## 7.4 Implementing integrated responses

YS Integrated Response services provide integrated responses to young people with high and complex needs.

When young people have high level complex needs, it is likely that they will require a range of other services, for example in relation to youth justice, alcohol and drug use, mental health, income support, and housing. Such services may not currently be involved if a young person’s life has become disengaged from mainstream supports, transient and ‘chaotic’ – however detailed assessment will indicate needs across multiple areas.

Integrated case management is required for young people with complex and multi-layered needs that require multiple services to be involved. YS Integrated response services have a role in either:

* facilitating the coming together of needed services to provide ‘wrap-around’ responses to the young person and their family
* participating as a key service provider within an integrated service response coordinated by one of the other services, for example by Youth Justice.

YS Integrated response services play a leading role, where required, in working with other agencies to set up local mechanisms, such as inter-agency panels, to ensure that service responses to young people with high level and complex needs are thorough and seamless. This involves trying to ensure that all required services are working together with the same goals and overall purpose in planning how to meet the young person’s needs. An outcome of a “complex care coordination panel” might be the formation of a “care team” for each young person, in which each of the agencies currently having a role in working with the young person participates. The YS Integrated response service may have a coordinating role in ensuring good lines of communication between members of the care team.

In playing a lead role in ensuring integrated service responses, YS Integrated response services will, as necessary:

*Case example: The care team for a young person includes the YS Integrated response service, his Youth Justice officer, a health outreach team, a flexi-school rep, and a youth emergency housing worker. The young person is transient and his whereabouts in the city often unknown. He is aware of the care team and has consented to them sharing information about him. Members agree that housing and health are priorities. As the Health Outreach Team might be the first to locate him at night, it is agreed that they try to take him to the 24 hour health clinic for a medication check, and then contact the housing service. Members of the care team communicate by email and text to make things happen quickly and keep all members informed.*

* identify services required to work with the young person and family and try to ensure that all are part of the complex care panel or similar local mechanism
* facilitate good working relationships between panel participants, with sharing of roles and responsibilities to ensure against gaps in providing the responses the young person needs
* establish communication protocols so that care teams for a young person function in a responsive and timely way between panel meetings
* coordinate assessment outcomes (using the YWA CAT if possible) so that the young person is not required to participate in multiple assessment activities
* coordinate a shared support plan with agreed shared goals and integrated strategies, so that the young person is not required to participate in multiple planning processes
* at a governance level, work with other services to continuously strive to improve the local service system.

Integrated teams share information, make decisions about how best to use available services to work with the client, and decide/clarify the roles of various agencies in working together to provide “linked-up” services (see section 4 [Support planning and review](#_Section_4_)). There may be a sharing of responsibility and partnerships in working together that add considerable value to the individual capacity of agencies.

Integrated responses utilise a structure which goes beyond the coordination of services to individual young people on a case-by-case basis. The structural mechanism – the care coordination panel or similar – is underpinned by an agreed terms of reference which sets out:

* the purpose
* permanent and co-opted members
* roles of participants
* information-sharing protocols
* communication protocols
* decision-making protocols
* arrangements for meeting (which may include participation by electronic media)
* facilitation and coordination of the group.
* *Further information: integrated service delivery*

The Queensland Council of Social Service (QCOSS) has developed *A Guide to Integrated Service Delivery to Clients For Community Service Organisations* (QCOSS 2013) which can be accessed on-line through Community Door at: <http://communitydoor.org.au/sites/default/files/A_GUIDE_TO_INTEGRATED_SERVICE_DELIVERY_TO_CLIENTS.pdf>

## 7.5 Working with statutory services

Youth Support services will sometimes have contact with, or be providing support services to, young people and their families who are also clients of statutory services, in particular Child Safety or Youth Justice. In such cases, it is important to recognise the statutory roles and related legal authorities of these departments.

Communication with the child safety officers and youth justice officers is important. Youth Support services may also have a role in assisting young people to keep in touch with their assigned departmental officers, especially where the young person has an unstable lifestyle and/or few other community supports.

### Child Safety

If a young person is under a child protection order under the *Child Protection Act 1999*, which gives custody or guardianship to the chief executive, Department of Communities, Child Safety and Disability Services (Child Safety), officers of that department will exercise case management responsibility. They also have most of the rights of a parent or guardian in relation to decision-making about the young person. Young people in care will not usually be receiving Youth Support services as an early intervention measure. However at times Youth Support services will be accessed by young people who are in care but who are disengaging from carers and/or school. Young people with high and complex needs who are in care might become homeless and transient. It is important that the whole service system works together towards meeting the complex needs of these young people. YS Integrated response services might often be involved as part of a care team.

In all cases when in contact with a young person who is in the care of Child Safety, liaise with the relevant Child Safety Service Centre about the young person. It is not appropriate that a funded Youth Support service is working with a young person in care without their child safety officer being aware of the fact.

As Child Safety has case management responsibility for young people in care, they will coordinate the young person’s case plan. Ensure that any other planning around meeting the young person’s needs is consistent with Child Safety’s case plan. If necessary, proactively liaise with the relevant child safety officer about the young person’s needs.

See Section 9.3 [Responding to child protection issues](#_9.3__Responding_2), for information about reporting child protection concerns.

**Youth Justice**

If a young person is subject to a youth justice order under the *Youth Justice Act 1992*, which is administered by Youth Justice, Department of Justice and Attorney-General, officers of that department will exercise case management responsibility. In some cases, a young person is under both youth justice and child safety orders, requiring case management collaboration between the departments. Youth justice orders will usually include conditions with which the young people must comply, including, for example, reporting conditions in relation to probation orders or community service orders.

Youth Support services will have a role in working collaboratively with Youth Justice in relation to young people who are subject to youth justice orders. A young person may be subject to such an order for a relatively brief period during a longer period of engagement with a Youth Support service, or a support service might be engaged as a result of the needs identified by Youth Justice.

Youth Justice officers may refer young people and their families to Youth Support services for support and for work to improve the young person’s connections with family, schools and community. In particular, YS Integrated response services may have a role in facilitating an integrated support plan for a young person which includes Youth Justice requirements and for which Youth Justice retains primary case management responsibility while a youth justice order is in place. When this occurs, it is important that support for a young person with complex needs does not cease when the Youth Justice order ends.

# Section 8 Confidentiality and recording

* Organisational and legal context
* Collecting and storing information
* Information sharing and confidentiality
* Access to personal records
* Recording case-notes

## 8.1 Organisational and legal context

### Organisational context

All agencies have broader policies and procedures related to information management. Youth Support services will comply with the policies of their broader organisation where relevant. These practice guidelines do not take the place of agency policy documents, and should be read in conjunction with your organisation’s policies and procedures.

Relevant policies which should be in place and which are not covered in detail in this practice guide include:

* the agency’s full privacy policy and how information is made available to clients about the policy
* policy and procedures related to secure storage of electronic and paper records
* decision-making and complaints processes related to access to client file records.

### Legal context

As ‘contracted service providers’ under the *Information Privacy Act 2009*, all Youth Support services must comply with relevant requirements of the Act. The ways in which information is collected and managed must be consistent with the Information Privacy Principles.

In some circumstances, Youth Support services will be required to comply with the confidentiality provisions of the *Child Protection Act 1999*. Under Section 188 of the Act, information about young people or family members provided by Child Safety or another entity under the Act must be treated confidentially. Under Section 159M of the Act, Youth Support services may provide certain information about a young person or family member (related to a young person’s safety or wellbeing) to relevant ‘prescribed’ bodies without breaching confidentiality. These include Child Safety, schools, Housing, Health Department facilities, police and Disability Services.

The direct sharing of personal client information between one non-government service provider and another can only occur with the consent of the client.

For consent to be “informed consent” and valid:

* the young person must be legally competent, that is, be able to understand the nature and consequences of the proposed use of the information
* consent must be freely given, that is, without coercion or threat
* it must be informed, that is, sufficient information is provided to allow a reasoned decision.

See section 9 [Duty of care issues](#_Section_9_)  for information about legal competency.

* *Further information*:

More information about complying with the *Information Privacy Act 2009* is available at: <http://www.communities.qld.gov.au/gateway/site-information/privacy>.

## 8.2 Collecting and storing information

Information is collected about young people from the point of first contact with them (see section 2 [Engaging with young people](#_Section_2_Engaging)). “Collected” means that it will be recorded in YSCIS (and other parts of the agency’s information management systems if relevant). However youth support workers should not collect sensitive personal information without the informed consent of the person to whom it applies. Young people and family members have a right to know that information is recorded, and to be advised about their rights to privacy and confidentiality.

Under privacy legislation the following information needs to be given to a person from whom personal information is being collected:

* identifying personal information will only be collected with their consent
* their personal information will be kept confidential
* information is collected for the purpose of providing them with the relevant service
* personal information collected is limited to information relevant to providing them with a service
* when they consent to provide personal information in order to receive a particular service, the information may be shared with others within the service team
* their personal information will not be divulged to anyone outside the agency without their consent (unless allowed or required by law, or where a duty of care arises)
* for reasons of duty of care, personal information may not be kept confidential in certain circumstances, such as when their safety or the safety of another person is at significant risk
* their personal information is stored securely
* they have the right to access any of their personal information held by the agency, and can ask at any time how they can do this.

These requirements apply to all forms of recording including hand-written, electronic, oral recording, and photographic.

Different Youth Support services with different service types and intake procedures may have varying procedures about informing young people and family members (as relevant) about these privacy rights. Youth Support services are required to record consent on YSCIS (refer to YSCIS user manual). Often a request will be made to sign.the consent form at first contact if this contact may require information to be shared with another agency in order to support a young person. The consent form incorporates basic privacy information, which is briefly and simply explained as part of obtaining informed consent.

*C:\Users\Anne Elliott\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\E0RV9F54\MC900217102[1].wmf*

*Practice tool: Copy of the consent form on YSCIS.*

Agencies may utilise different consent forms, or tools, for specific circumstances. For example, a form used as part of outreach might be incorporated into a simple information brochure, and include the minimum information that the young person understands that the worker may share information with a (nominated) service on their behalf and that they are freely consenting to this. The fact that consent was given in this way is then recorded in YSCIS.

Informed consent to sharing information is preferably obtained in writing, but may be given in other ways. This may include:

* a signed paper-based consent form (note that in this case, the agency must check that all conditions of the YSCIS consent form must be met, including that the department will have access to de-identified data)
* the YSCIS consent form signed electronically
* consent provided through other electronic means (e.g. by email agreeing that information can be passed to a nominated third party)
* verbal consent when this is the only practicable means. In this case, clearly record the verbal consent in YSCIS, including when it was given, and the full details of the specific matters consented to.
* *Practice tips – informing a young person about their privacy rights*

In some circumstances, youth support workers doing outreach work may grapple with how to meet privacy information requirements while at the same time working in a way which is informal, non-intrusive, allows for soft entry, and moves at the young person’s pace without overwhelming them with information.

*Step one: be aware of the requirements, so that you can take natural opportunities to let the young person know about them.*

*Step two: consider simple and straightforward ways of asking young people whether they consent to information about them being recorded*.

For example: Prefacing questions which ask for personal information with:

* *“Can I just make a note about that – so that we can make sure we have a record of your name and some things about you, to help sort a few things for you? Is that OK?”*
* “*Is it alright if I jot a few things down as we talk, so that I can remember them?”*
* *“I just need to let you know before we talk much more that I will write down some of these things when I get back to the office, so that I can remember them for next time we talk. Are you OK with that?”*

*Step three: As discussion develops, possibly at subsequent contacts when a relationship is starting to form, take the opportunity to let the young person know about, or remind them about, their rights to privacy*.

For example: Give them a privacy brochure and consent form and briefly run through what it says, taking the opportunity to explain they have privacy rights and what these are:

* “*You know how I asked last week if it was OK for me to jot down your name? I want to tell you a bit about your rights to privacy. OK? Basically, it boils down to the fact that we will keep written information about you so that we can keep sorting out ways to help you or do things with you, but we have to treat information from you as confidential, and make sure no-one else can see it unless you agree (except other people like me at the service). You can ask to see that information if you want to. Are you willing to sign a consent form so that we can contact (other named agencies) about you? The only time we would give anyone information about you without your consent is if we thought you were in danger of being badly harmed or hurting yourself or someone else*”.

In summary, make efforts to ensure that the young person or family member is aware that personal information may be collected (including that information from a telephone call may be recorded in writing, or a copy of an email stored), prior to their divulging the information. When this is not possible, brief advice to this effect should be followed by fuller information as soon as practicable. During subsequent contacts, remind young people of their privacy rights when appropriate, e.g. prior to requesting any new sensitive information.

Irrespective of the way in which consent is provided, the fact that consent has been given is always recorded in YSCIS. Use YSCIS consent form to make a written record of the fact that the young person or family member was informed about their rights to privacy, including the limitations of confidentiality. Include the date, time and manner (e.g. email or verbal) in which the information was provided.

Where practicable, give the young person or family member the agency document (e.g. brochure or leaflet) about their privacy rights and/or (if communication is through a virtual site) draw their attention to the privacy statement on the website.

When collecting personal information, make every effort to ensure that the information is:

* accurate, up-to-date and complete (i.e. the information is not open to misinterpretation due to omission of key facts)
* recorded in a way that adheres to professional standards
* recorded with the assumption that it may be read by, or accessed by, the person/s to whom it applies.

### Secure storage

Youth support workers must ensure that:

* all records containing personal and sensitive information, both paper-based and electronic, are held securely at all times, to prevent access by any unauthorised persons
* their YSCIS log-on details are not shared with anyone or recorded somewhere that they could be inadvertently discovered
* personal paper-based records (e.g. a document signed by the young person, reports from other services) are held securely in a locked cabinet
* access to stored personal information is restricted to persons within the organisation who have a need to know
* identifying personal information is used only for the intended purposes for which it was collected.

## 8.3 Information sharing and confidentiality

### Disclosing information to third parties

Disclosure or sharing of a young person’s or family member’s personal information with another agency or person should occur only where:

* the individual to whom the information applies has provided informed consent to the disclosure, or
* there is a serious and imminent threat to an individual's safety or a serious threat to the safety of another person, such that duty of care obligations override confidentiality, or
* release of the information is required by law (e.g. through being subpoenaed).

### Disclosing information without prior consent for duty of care reasons

When information must be disclosed to a third party for duty of care reasons (e.g. to emergency services, a medical service, or Child Safety:

* disclose all information required to enable an informed response, but do not include personal information irrelevant to the matter at hand
* whenever possible without jeopardising the young person’s safety, inform them prior to the disclosure and include them as appropriate in the process
* where prior advice of disclosure is not possible or appropriate, as soon as practicable after the disclosure advise the young person about it (except when safety issues apply).

### Sharing personal information with other family members

If youth support workers have contact with more than one member of a particular family it is essential that personal information, particularly sensitive information, is not shared with other members of the same family unless consented.

In all circumstances, take care to ensure that sensitive information about any family member is not provided to another without their consent. This includes contexts such as:

* any case-related discussion with a young person’s family members or support persons
* information in emails which are likely to be accessible to others within a family
* young people accessing file information which may include information about other members of their family.

In relation to parents or guardians seeking personal information provided by young people, strive to work inclusively, in a way which age-appropriately balances:

* respecting young people’s rights to privacy and confidentiality
* providing information to their adult family members only on a need-to-know basis, taking into account their role in the young person’s life
* informing the young person prior to sharing any sensitive information which they have provided, and preferably supporting them to share the information themselves with relevant family members, where there is good reason for such sharing
* the young person’s overall right to safety and security.

### Access by individuals to personal information held about them

Young people are entitled to:

* request access to information recorded about them
* request that information which they believe to be inaccurate is amended
* request a copy their personal file.

Refer to your agency’s procedures for approving the release of information to persons it is about. In general, there should be no impediment to a young person seeing information which has been recorded about them. However be aware of the following:

* for access to documents provided by another agency or professional (e.g. a therapist’s report) it is preferable for the young person to be directed to the primary source. Do not provide access to such documents without the knowledge and approval of the agency or professional which produced them
* the young person is not entitled to access personal information about another person (which is provided by the other person, for example information a family member gave about themselves) without the consent of the other person
* when a young person is provided with information from their record, ensure that they are appropriately supported to understand and interpret the information if some of it may be distressing and/or confusing.

If a young person advises that information held about them is inaccurate, and this is clearly the case, it is to be corrected without delay and a case note recorded to that effect. Where the young person considers that information is not accurate, but the youth support worker disagrees (e.g. the matter is one of opinion) the young person’s view of the matter should be recorded as well.

## 8.4 Recording case-notes

When recording personal information, make every effort to ensure that the information is:

* accurate, up-to-date and complete
* recorded in a way that adheres to professional standards
* recorded with the assumption that it may be read by, or accessed by, the person/s to whom it applies.

In general, case notes should include:

* issues discussed during the contact with the young person
* information provided and actions taken or agreed to during contact with the young person
* actions agreed and timeframes for any future follow-up
* any significant matters raised by the young person and actions/responses by the worker
* the date and name of the writer, if these are not electronically generated.

See the box on next page – “Recording standards for case notes”.

### Disposing of stored personal information

Your agency policy will apply. Otherwise, client information should be held for seven years after active use, to ensure it is not required for any legal or personal purposes. After this period, take reasonable steps to securely destroy or permanently de-identify personal client records.

* *Practice resource: Recording standards for case notes*

Always date a case note or other file entry, with the full date including the year. Make sure it is clear who made the entry.

Record the type of communication (e.g., was it a phone call in or out?). Record the contact details for phone calls – name of person spoken to and their contact number (if not already on file).

For records of contacts, events or observations, record the factual details of where, when and who. Include details of any other worker who was also present.

If recording what a child or young person said, as far as possible use the same words they used. This is particularly important when recording any disclosures of harm or complaints.

When making case notes, record *only* information where the purpose for recording it is clear. It should be relevant to the work being done with the young person or family.

Records should be succinct (short and to the point) but sufficient (with all necessary information). Wordy descriptive entries are to be avoided, but record sufficient information for another person to understand what happened or was planned.

Record information accurately and objectively. That is, record the facts, rather than your personal opinion or assumptions. For example, state: “He yelled at me and seemed to be drunk – he was incoherent and was unsteady on his feet” rather than “He came in drunk and started ranting and raving”.

If recording your professional opinion, make sure the reasons which support it are also recorded. For example, “Given *this and that* (your observations), it is my view *that* (your opinion)”.

Do not make statements which are outside your area of professional expertise. For example, state: “She says she is finding it harder to get herself going…”, rather than “She has depression”.

Always use acceptable language and record facts without personal comment or bias. Assume that the case notes may be read by the person they concern, or be subpoenaed to court.

Source: Encompass Family and Community, *Effective Recording* training workshop, 2010.

# Section 9 Duty of care issues

* Organisational and legal context
* Fulfilling duty of care to young people (including health concerns, self-harm, suicide ideation)
* Responding to child protection concerns
* Incident reporting

## 9.1 Organisational and legal context

### Organisational context

All agencies have risk management, duty of care and child protection policies and related procedures. Youth Support services will comply with the policies of their broader organisation where relevant. These practice guidelines do not take the place of agency policy documents, and should be read in conjunction with the organisation’s policies and procedures.

Relevant policies which should be in place and are not covered in detail in this practice guide include:

* WHS policy (covering, for example, staff personal safety when working after hours)
* child and youth risk management strategy as required under the *The Working with Children (Risk Management and Screening) Act 2000* and the *Working with Children (Risk Management and Screening) Regulation 2001* (covering, for example, the need for workers to hold Blue Cards, the need to minimise risk to children and young people while in contact with the agency)
* duty of care policy (covering, for example reporting child protection concerns)
* general risk management policy (covering, for example, safety/risk assessment of activities conducted with young people)
* incident reporting policy (covering, for example, occurrences which posed a risk to workers or clients on-the-job).

### Legal context

Youth Support services work with young people from 12 years of age. The matter of a young person’s right and competency to consent to various matters (to provide personal information, to keep information confidential from parents or guardians, to consent to medical care) will arise at times. So too will the issue of whether or not parents or guardians have a right to be informed of matters in relation to the child or young person, even if the young person does not consent to this.

The matter of the right of a young person to request a service without the knowledge of a parent or guardian is a complex one, and is decided on an individual basis taking into account:

* the fact that the service is voluntary – a young person can choose whether or not to accept it on certain terms
* the policies of the agency in relation to the type of service being provided
* the age and development of the young person. A young person of 12 years is generally more vulnerable and in need of parental care and guidance than a 17 year old
* the seriousness of the matter under consideration
* the role of the parent or guardian in relation to the matter (e.g. potential protector or alleged source of harm).

Young people under 18 may be able to give informed consent on their own behalf to receive a service, even if a parent is not aware of the fact, if they are deemed to have sufficient understanding and intellectual capacity to enable them to fully understand what is proposed. This is commonly known as Gillick competency (NSW Law Reform Commission 2008, p.79; Bird 2011, p.159). Youth support workers should consider each matter individually and consult with more senior staff where the matter is a complex one.

* *Practice resources: legal considerations*

Dovetail’s *Legal and ethical dimensions of practice: youth alcohol and drug good practice guide* (Crane 2012) contains information applicable generally to youth work. Section 4 (p.36) is a useful guide to legal considerations in practice with young people.

<http://dovetail.org.au/i-want-to/open-the-good-practice-toolkit.aspx>

A resource sheet prepared by the Youth Advocacy Centre on *Can young people under 18 make their own decisions?* can be accessed at:

<http://www.yac.net.au/wp-content/uploads/2012/10/Can-YP-make-their-own-decisions.pdf>

In general, the questions with regard to advising parents or guardians about issues in relation to their young person should be resolved not as “rights” issues but as questions about:

* what are the reasons for this young person wanting to maintain confidentiality?
* if it considered that it may be in the young person’s interests for their family to be involved, how can this be managed in a way which respects the young person’s wishes?
* what may be required to fulfill a duty of care to the young person, and if this includes informing family members, how can this be done in a way which is inclusive and supportive of the young person?
* can a way be found which safely involves both family and the young person, without breaching confidentiality?

Youth support workers should strive to both maintain working relationships with the young person and their parent/s *and* maintain confidentiality on matters discussed with the young person. Explaining to parents why confidentiality is important to retaining working relationships with young people, and providing the parent with general information and a respectful response, will often be enough to allay concerns.

The duty of care of the agency towards young people and towards others connected with the young person (other children in the family; adult family members) applies as an overriding responsibility in all cases where:

* it is suspected that a child or young person is being harmed or is at risk of significant harm (see 9.3 [Responding to child protection issues](#_Supporting_a_client))
* a person (e.g. the young person or a family member) is considered to be at risk of harming themselves in a serious way and/or at risk of suicide (see 9.2 [Fulfilling a duty of care to young people](#_9.2__)).

Youth Support services workers are not mandated (legally required) to report suspected harm through child abuse or neglect to the authorities, unless their role is that of a registered nurse. If the service incorporates a recognised school, note that school personnel are mandated to report sexual abuse and physical abuse. While most are not mandated, all staff and volunteers of funded Youth Support services are expected to act to protect children and young people from harm, including reporting concerns where necessary (see 9.3 [Responding to child protection issues](#_Supporting_a_client)). Under the *Child Protection Act 1999*, reporting the harm or suspected harm of a child or young person does not legally breach confidentiality.

## 9.2 Fulfilling a duty of care to young people

Fulfilling a duty of care to young people to be alert to and to respond to their physical and mental health needs includes:

* conducting risk assessment at intake and as appropriate throughout contact with a young person (see section 3 [Assessing strengths and needs](#_Section_3_))
* being alert to signs of distress or harm
* responding appropriately, including immediate response where harm is imminent
* making referrals to specialist services such as medical services and following up to check that the young person is engaging with the service
* supporting the family to support the young person if possible and appropriate.

*Figure 4: Risk assessment and response framework*

### Being alert to, and responding to, health needs

When conducting needs assessment with young people ask if they have had any recent physical health issues or ongoing conditions. This is particularly important for young people who have been disconnected from home or living without adult care. Young people with multiple issues and poor self-esteem often neglect their physical health, and mental and physical health issues may intersect. For example consistent lack of sleep can exacerbate a young person’s anxiety and vice versa.

Physical health needs to consider include illness, injuries, pregnancy, sexual health, dental care, poor nutrition, ongoing lack of sleep and any medications the young person may be taking. Where the young person identifies a current physical health concern, provide appropriate support such as an appointment with a doctor, dentist or sexual health clinic.

Ask general questions as part of screening (see section 3 [Assessing strengths and needs](#_Section_3_)) to try to pick up on mental health issues such as depression, anxiety, or eating disorders. Ask the young person if they have prescribed medication for their mental health, and if so, whether they are taking it as required.

Arrange medical care if required for physical and mental health needs, support the young person to access it, and follow-up if necessary. If appropriate, support the young person to talk with their parent or carer and to receive support from them. Consider the ethical issues regarding whether the parent or carer should be informed (see 9.1 [Legal context](#_Legal_context)).

If a young person indicates they are sexually active, check whether they are aware of, and can obtain, appropriate contraception options. Depending on their situation, ascertain whether a sexual health appointment to check for pregnancy or sexually transmitted illness such as chlamydia is warranted.

Young people who use alcohol and other drugs will have particular health needs depending on their usage. High levels of use will impact on a young person’s physical health and may also impact on their mental health. Young people who are injecting substances may require medical checks for blood-born illness such as Hepatitis C as well as infections at injecting sights on their bodies (see 6.4 [Young people with AOD or mental health issues](#_Young_people_with)).

### Being alert to, and responding to, self-harm

‘Self-harming behaviour’ refers to the direct, deliberate act of harming one’s body without the conscious intention to die. However self-harm may result in death and is a risk factor for suicide[[1]](#footnote-1). Self-harm is often a means that young people use to cope with and express the emotions surrounding difficult or traumatic experiences in their lives. Self-harming can include a range of behaviours which cause physical damage. These behaviours may include cutting, burning, scratching, ingesting, inserting, hitting, poisoning, and eating issues.

If a young person discloses that they have engaged in self harming behaviours:

* explore with the young person the steps to be taken to attend to any current physical injuries
* explore the underlying reasons which gave rise to this behaviour
* explore alternative strategies for coping in future instances
* encourage them to access additional medical support if required
* encourage them to accept a referral to an appropriate mental health service, relevant to their age and level of need.

When a young person discloses self-harm which has just occurred:

* attempt to ascertain the severity of the injury or physical damage, and whether there is a risk of serious health impacts if the injury is left unattended. If in doubt, err on the side of caution by phoning the ambulance service
* if severe, ensure medical intervention occurs. This will ideally occur through supporting the client to obtain medical care. However if necessary, for a severe injury or risk to health, call an ambulance. Remind the young person of your duty of care to act to protect their well-being.

If the young person is not in the presence of the youth support worker (e.g. they are on the phone), in addition to the above actions:

* attempt to determine their location and whether any support people are present
* determine the means available to them to receive any necessary medical attention (for example, whether a family member can drive them to a medical service, if necessary)
* if urgent medical attention is required, and the young person’s location is known, explain the service’s duty of care responsibilities and call an ambulance.

### Being alert to, and responding to, suicide ideation

Make an initial broad assessment of a young person’s presenting mental health state when conducting the Initial Contact CAT or Youth Wellbeing Assessment CAT with young people. If assessment identifies concern about the state of a young person’s mental health, conduct further screening if possible (see 3.3 [Screening for risks and vulnerabilities](#_3.3__Screening)). If suicide risk is identified, discuss this without delay with a senior staff person (as consistent with your agency policy and procedures).

In supporting a young person who has suicide ideation, has actively threatened suicide or made a suicide attempt:

* express a deep concern about the situation and clearly state your support; if appropriate, arrange follow-up in the near future
* help them develop a list of crisis supports and to explore other support options
* support them to make contact with appropriate mental health services if available
* explore any events and feelings which are triggering for the young person
* encourage them to identify and explore other less destructive ways of dealing with their emotions
* if you have a working relationship with them, negotiate a safety plan to help them take alternative action when they are feeling like acting on suicidal feelings.

Encourage and support the young person to identify a safe adult family member to confide in, and if possible involve the family member in assisting the young person to obtain appropriate support including mental health services.

See the box below for discussion of awareness of, and responses to, suicide risk. If responding to an imminent suicide attempt:

* call 000, and direct emergency services (ambulance and/or police) to the address, if known
* if the young person is calling on the phone, and their location is unknown, calmly encourage them to reveal their location
* alternatively, if a responsible adult is present, it may be appropriate to request them to take the person to the nearest hospital emergency department
* if calling the ambulance, don't hang up until the emergency services operator does
* if possible, maintain contact with the young person at risk until emergency help arrives. This may require the help of a colleague to call 000 or talk to the young person
* use your judgment about whether to advise the young person that emergency services have been called, and don’t advise them if doing so would clearly risk losing contact.

When a death of a young person by suicide has occurred, be attuned to the well-being of other young people who were part of the same group. This is particularly important for Aboriginal and Torres Strait Islander young people. Check in frequently with the group, and provide opportunities for them to de-brief and work through feelings of loss and confusion. Make clear the message that it is OK to ask for help (and how to do this) and encourage “looking out for your mates”.

* *Practice resource: Awareness and responses to suicide risk*
* Be aware of risk factors and alert to warning signs

Increased personal stress is a risk factor for suicide – it is therefore appropriate in discussion with young people to explore warning signs and heightened risk. Warning signs are factors which suggest a diminished personal capacity to cope. Ask questions (in appropriate language, as part of screening) about any increased sense of despair, increased drug and alcohol use, social withdrawal, risk-taking, moodiness, uncharacteristic aggression, self-harming, mental health issues, past suicide attempts, and school problems.

* Be alert to ‘tipping points’ and to imminent risk

‘Tipping points’ are factors, often related to a negative change in circumstances, which may acutely increase a pre-disposed individual’s propensity to consider suicide. Examples include unexpected loss in relationships, shame associated with public humiliation, loss of hope, experiencing bullying or loss of the respect of peers. If aware of events causing such emotions in a pre-disposed young person, ask how they are feeling about and responding to these events.

Note that if suicide ideation is present, appropriate questions may include asking directly whether the young person is considering suicide, and if so, what their plans are, that is, how and when they are thinking about doing it.

Imminent risk is present if a young person expresses a serious and current intention to end their life, or makes contact during an attempt which is underway. The risk is increased if a person describes a developed plan which is feasible (i.e. the person has access to the means, which are likely to be lethal). If indicated, ask direct questions to elicit what they are planning to do, obtaining as much practical information as possible (e.g. timing, location, etc.).

* Act immediately if a young person is expressing current suicide intent.

In all cases, attempt to engage the young person in discussion which conveys empathy and respect, and offers support for them to seek help themselves. If the worker has an existing good relationship with the young person, a short-term ‘safety contract’ may be appropriate if they will agree not to activate any suicide plan before certain action (e.g. an urgent counselling session) occurs. Be stringent in following through with any agreed plan.

## 9.3 Responding to child protection issues

Youth Support service workers will follow your agency policies and procedures in responding to suspected harm to a young person or another child (eg a sibling). This includes harm which has occurred within their family situation, elsewhere (for example, at school), and significant self-harm.

Many young people who have contact with Youth Support services will have experienced traumatic home circumstances, including direct victimisation, indirect emotional abuse as a result of domestic and family violence and/or parental substance use, neglect of their needs, and sexual abuse. For some young people these issues may be part of current circumstances related to their being disengaged from family and no longer living at home.

As part of holistic assessment of a young person’s situation, in particular their family relationships, youth support service workers should be alert to indicators that a young person is being abused or is at risk of abuse or significant neglect.

Apart from what a young person might disclose, i[ndicators](#_INDICATORS) of harm or risk of harm to a young person may come to notice through:

* others expressing concerns about the young person or other family members, making an allegation, or passing on information from a third party
* a young person making an indirect disclosure about something that has happened, or exhibiting a disturbed emotional state
* a parent or carer disclosing their fear of harming the young person, describing destructive family dynamics, or referring indirectly to issues which raise concern
* directly observing the young person’s behaviour or presentation, or noting physical indicators of harm, e.g. injuries.

Note that ‘listening’ includes being aware of the direct messages and subtle nuances in all forms of communication including emails and SMS communications. Use caution in responding to a young person who discloses abuse via electronic media if the young person is still living at home; the communication may be read by others.

Youth support workers should be aware that harm or risk of harm can arise from the actions or failure to act of:

* a parent or relative of the young person
* another carer (e.g. foster carer) of the young person
* the young person themselves (e.g. self-harm)
* another young person (e.g. an older sibling)
* another adult not related to the young person
* a staff person or volunteer
* another service provider.
* *Practice resource: Responding to disclosure of abuse*

Every young person is different, and must be responded to with consideration of their particular circumstances, including their age and current living situation. However the following are general guidelines for responding to disclosures by young people about serious abuse:

* listen carefully and calmly, allowing them to go at their own pace
* reassure the young person that they have done the right thing in telling you
* if a young person discloses sexual abuse or significant physical assault, validate their disclosure but avoid asking too many detailed questions – it is better that they give this information to someone in authority if the young person will agree to this
* do not agree to keep quiet about the information. Explain to the young person that the information will need to be shared with others who can help. Involve the young person in deciding how and when this will happen, so long as delay will not place the young person at ongoing risk
* tell the young person what you will do next (for example, talk with your supervisor) and keep them informed
* as soon as possible record what the young person said, where possible using their words rather than your own; involve them in making this record if appropriate. Store this record in the agency’s child protection records register, not in YSCIS client file
* if the young person is living at home and has disclosed current ongoing abuse, never leave them in the situation of returning home without support after disclosing.

Disclosures of sexual abuse or serious physical abuse must be handled in a way which does not jeopardise a young person’s safety or any possible criminal proceedings. Prior knowledge by a parent that the authorities are to be advised can thwart actions to protect the young person. In these cases, avoid:

* telling the parent or carer that you must inform the authorities
* telling young person that you must inform the authorities, unless they are physically present with you (for example, avoid telling them this if they are speaking to you by phone)
* trying to gather further information yourself
* asking leading questions
* delaying acting on the disclosure.

### Reporting child protection concerns

The core issue in responding to identified harm to a young person is that the young person is not left in a situation where they will be abused without action taken to protect them.

Most agencies have in place policies which require that Child Safety and/or the Police are advised when a child or young person is at on-going risk of harm. It is preferable that this process includes making a written report to the authority, even if initial contact is by phone or in person. Use your agency’s child protection report form (a sample is provided in Appendix D). Note that a child protection report is NOT a referral, and is not recorded in YSCIS.

The child protection report should be a separate form to the agency’s incident report form – the purposes are different.

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*Practice tool: Sample child protection report form (see Appendix D).*

It is important that a young person does not feel that matters are taken out of their control once a child protection concern has been identified. Encourage a young person to be directly involved in talking themselves to Child Safety and/or the Police if appropriate, and support them in this. Provide follow-up support until an outcome is known. Refer the young person for more intensive support if warranted, for example counselling. Help to strengthen their relationship with safe supportive persons within their family if possible.

*Case examples: Young person A, 16, exposed to frequent DFV within the family home, and significant trauma, is assisted to get other accommodation and mother also assisted to access women’s refuge. Young person is provided counselling for trauma. Risk is very low for recurrence. Young person conveys that she feels safe and in control. Matter is not reported as a child protection matter.*

*Young person B, 13, discloses frequent physical abuse and a past incident of sexual abuse at home. The young person was supported to move to live with a relative due to conflict at home and it was after that that he spoke of the past abuse. He is fearful of his father knowing and argues that it will not occur again now that he is with his aunt. He has two younger siblings at home. The agency explains that it is obliged to report, and encourages the young person to talk to a child safety officer with the youth support worker present. He is supported throughout the subsequent investigation.*

Some young people may not want matters reported to child protection authorities. In responding to this, consider the young person’s age and vulnerability, their current safety in relation to the person who has harmed them, the currency or past nature of the abuse, and the actions taken to remove or lower risk of recurrence. Also consider the potential risk to other children or young people if no action is taken, and the issues of duty of care and accountability of the agency. Where a decision is taken that the agency has an obligation to report the matter despite the young person’s reluctance, continue to talk to them about the reasons (in particular that a child or young person should not be responsible for their own safety) and if possible support them to be involved.

### Identifying and responding to children missing from out-of-home care

Youth Support Services are to have policies to respond when a young person under the age of 18 years is suspected as being listed and/or whose whereabouts are unknown.

Child Safety is responsible for ensuring that young people subject to statutory child protection intervention are reported as missing if their whereabouts is unknown. A YSS staff member may be asked to make a report to the police if they were the last person to see a young person who has gone missing.

YSS providers are advised to ask young people whether they may be currently listed as missing when the young person first accesses the service. A young person may choose not to reveal their status as a missing person, or may be unaware that they are listed as missing. In the instance where a young person believes they may be listed as a missing person, the service is advised to support the young person to notify the Queensland Police Service or their family of their whereabouts or their wellbeing so that they are removed from the missing person’s list. Alternatively, the young person may consent to another appropriate adult conveying this information to the Queensland Police Service or their family on their behalf.

YSS providers are encouraged to provide as much information as possible to the Queensland Police Service about any young person who may need to be listed as missing. However, it is inappropriate for the YSS service provider to obtain additional intrusive information if they believe a young person may one day need to be listed as missing. For example, it is intrusive and inappropriate to photograph young people or make records of tattoos or distinguishing marks.

## 9.4 Reporting critical incidents

Youth Support service workers will follow your agency’s policies and procedures in responding to and reporting critical incidents. “Critical incident” or “incident” usually refers to any event which:

* causes significant emotional stress or a significant physical injury to staff or to clients in the course of receiving a service
* had the potential to cause significant distress or injury, even if no harm results (eg, a youth support worker has a car accident while on duty)
* results in serious damage to agency property
* would cause damage to the reputation of the Youth Support service
* has a serious detrimental effect on the capacity of the agency to provide a service.

In any critical incident, the safety and wellbeing of youth support workers and their clients (young people and family members) is the paramount consideration. If a critical incident requires an urgent response, i.e. a person is in imminent danger or has been seriously hurt, call 000 to request the relevant emergency services (ambulance, police, fire brigade) immediately.

Take action to protect others where this is possible to do safely, but in no circumstances place yourself at risk of serious harm. A youth support worker faced with a serious threat should remove themselves from the place if possible to do so safely.

Report any critical incidents in accordance with agency policy, using the agency’s incident report form. The critical incident form is not recorded on YSCIS. A senior staff person will be responsible for maintaining an incident register and reviewing the outcome of any reported incidents to take further action if required (for example, ensuring action to avoid a recurrence of an avoidable incident).

Information on the incident report form should include:

* the date and time of the incident (including duration if relevant)
* the exact location
* the names of all persons present, if known
* details about the nature of the incident and what happened (who, what, when, any precipitating factors)
* details of actions taken at the time (who did what)
* details of any emergency personnel or others who attended (eg, police, doctor).

Complete thorough case notes for any young person for whom a duty of care response has occurred, as soon as possible following any incident. Ensure that all relevant information is up-to-date on the young person’s YSCIS record.

If the young person is a client of Child Safety (i.e., they are in care under an order) or of Youth Justice, advise their responsible officer about the incident.

If a young person or group of young people has been involved in or affected by a stressful event or situation, arrange critical incident debriefing as appropriate and provide follow-up to check on their well-being.

If youth support workers have been involved in a particularly stressful critical incident and/or an incident which has caused vicarious trauma, consider receiving additional support and debriefing (see section 10 [Staff care and supervision](#_Section_10_)).

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*Practice tool: Sample incident report form (see Appendix E).*

# Section 10 Staff care and supervision

* Being professional
* Staying safe

All agencies have staff supervision, professional development, and Work Health and Safety policies and related procedures. Youth Support services will comply with the policies of their broader organisation where relevant. These practice guidelines do not take the place of agency policy documents, and should be read in conjunction with the organisation’s policies and procedures.

Relevant policies which should be in place and are not covered in detail in this practice guide include:

* staff professional development policy
* staff employee assistance policy
* WHS policy (covering, for example, staff personal safety when working after hours)
* incident reporting policy (covering, for example, occurrences which posed a risk to workers or clients on-the-job).

## 10.1 Being professional

### Professional development

As Youth Support services are part of a service system, it is useful to take opportunities to network and train together to allow for cross-fertilisation of practice ideas and to develop understanding of each others’ perspectives as well as cementing working relationships. This sharing of practice knowledge and skills is particularly useful when working as part of a YS Integrated response team involving other services.

New workers need to ensure that they are inducted into their new agencies and have knowledge of the organisation’s policies and procedures as well as the specific service level requirements they will be working within. It may be useful to arrange a mentor if you are new to the community sector or local area.  Non-Indigenous workers should make sure they are informed about the particular protocols and key persons such as Elders to whom they should be introduced.

Part of professional development for youth support workers is being aware of the skills and knowledge you need to develop to work effectively with young people. Take both formal and informal opportunities to develop skills, including through training, supervision and peer sharing of expertise to develop your knowledge and network with other workers.

### Staff supervision

Youth support workers have a range of levels of training, qualifications and past experience.  Whether you are working as a qualified clinician or as a youth support worker without formal qualifications, making sure of the opportunity for professional supervision is important.

Professional supervision aims to develop and support the worker’s capacity to provide good quality casework to clients.  The content, duration and frequency of supervision sessions are guided by agencies’ policy and procedures and the youth support worker’s current professional development needs.

Regular supervision helps ensure accountable decision-making and safe outcomes for young people. It monitors whether workers are meeting legislative, policy, procedural and practice standards and ensures that they are supported in their roles. Supervision provides a forum for caseworkers to reflect on the content, process and progress of their work. Dangers of not taking regular opportunity to discuss your practice can include:

* losing objectivity
* blurring boundaries
* burn out.

Good practice in supervision includes a professional development plan identifying specific skills and knowledge the worker needs to develop and strategies to achieve what’s required. Some professions require professional development ‘points’ to be accrued each year. Workers who do not require this should nevertheless approach their own professional development in a planned way with a range of strategies. These strategies could include further study to obtain qualifications in a specific area of work or informal activities such as arranging for a worker in the agency with particular expertise to educate other staff.  Informal professional development strategies such as reading current research on issues affecting young people being supported will also enhance practice responses provided to young people and their families.

Most agencies do not provide external supervision for youth support workers, but regular internal supervision should be available for all. Youth support workers may need to take the initiative in requesting supervision if the busyness of the team leader or manager means that sessions are missed.

### Reflective practice

*Figure 5: Reflective practice framework*

Reflective practice is a process of continuous learning through the worker’s own analysis of their actions and the values and thinking that inform them. This is an important tool in developing practice and self-awareness as workers reflect on how their own experiences, values, emotions and thoughts influence their responses to young people.

Young people can trigger reactions in workers, especially young people whose behaviour is challenging and viewed as aggressive or disrespectful. Reflective practice is important in workers’ understanding their own ‘triggers’ and gaining increased objectivity so the worker is less reactive to a young person’s behaviour. Reflective practice allows opportunity for workers to reflect on their interactions with young people, what worked and what didn’t, and make changes to their approach if necessary. This establishes a feedback loop of consciously planning an approach based on what you consider should work in the circumstances, testing it, and reflecting on the outcome.

Reflective practice built into the everyday habits of a youth support worker means taking the time, in a busy day, to reflect for a few moments after contact with a young person or family member to think through the purpose of that contact, what was achieved, what was learned and how practice might be improved for next time. An attitude of continuously seeking to improve practice is the result.

Reflective practice is also a useful tool in supervision as the worker and supervisor work collaboratively to discuss issues, assess responses and explore ways forward.

## 10.2 Staying safe

### Safe work practices

Youth support workers need to work across a variety of settings to increase young people’s access to support services. This often means that youth support workers will have contact with young people on their own outside of the office in public places such as shopping centres, cafes or skate-parks. Workers may also be responsible for providing transport to young people so may travel with a young person or group of young people on their own.

Agencies have workplace health and safety policies and procedures in place to guide how workers conduct themselves when they are working or transporting young people on their own. Generally, youth support workers need to be aware of what’s happening around them in the vicinity where they working and take appropriate safety precautions when working in high-risk situations such as working at night or in remote locations.

Due diligence when working in an outreach capacity especially on your own includes informing your agency of your movements and whereabouts, informing someone of your expected return time and negotiating what to do if you don’t return at the expected time, and taking a mobile phone so you are contactable.

Agencies will also have policy and procedures in place if youth support workers are required to conduct home visits. Assessments for home visits of any risks to workers in contact with the young person or family members will happen at initial assessment and is also ongoing. Youth support workers can meet young people at a neutral location such as a café in the first instance to ascertain any safety concerns relating to conducting home visits. Workers need to complete any required risk assessment forms and comply with organisational procedures prior to conducting a home visit or transporting a young person. Refer to your agency WHS policies around actions to be taken to ensure worker safety.

### Self care

Youth support work can be stressful. The potential for workers experiencing vicarious trauma is real when working with young people who have, or are, experiencing trauma. Workers supporting vulnerable young people with complex needs are more likely to be exposed to issues such as self-harm and suicide than most other client groups. Issues of domestic and family violence and the dangers of homelessness, including sexual assault, are issues to which youth support workers may need to calmly respond.

Sometimes listening to a young person’s experience and feelings after witnessing or being involved in a traumatic event will expose workers to images and emotions that challenge their understanding of the world. Sharing in the feelings of these stories can be emotionally draining. A worker’s own past experiences of trauma and how they coped with those situations, as well as current life stresses and circumstances, will affect how they cope with the impact on their normal functioning. It is normal to initially react strongly to the young person’s story, however these feelings should subside.

Proactive self-care is important in ensuring that workers are able provide appropriate, supportive, and calm responses when working with young people. Proactive self-care means that workers are aware of their emotional, mental, physical and spiritual needs to ensure their own good health and well-being. This involves workers having a balanced life with adequate nutrition, sleep, exercise, enjoyment and relaxation. While stress is a normal part of life, workers need to be aware of their own early warning signs that they are becoming too stressed to avoid becoming reactive in their work with young people.

Self-care also means that workers are aware of the impact of their own well-being, confidence, security and support needs on their work with young people and have strategies and coping techniques in place to provide a balance in their work and personal lives.

## Reference List

Australian Bureau of Statistics (ABS) (2011). *Census of Population and Housing*, Australian Government

Australian Bureau of Statistics (ABS) (2007). *National Survey of Mental Health and Wellbeing*, Australian Government

Barker, J., Humphries, P., McArthur, N., (n.d.) *Literature Review: Effective Interventions for working with young people who are homeless or at risk of homelessness*, Department of Families, Housing, Community Services and Indigenous Affairs, Canberra

Campbell, A. and Robards, F. (2013). *Using technologies safely and effectively to promote young people’s wellbeing: A Better Practice Guide for Services*, NSW Centre for the Advancement of Adolescent Health, Westmead and the Young and Well CRC, Abbotsford.

Crane, P., Francis., C., and Buckley, J. (2013) *Youth alcohol and drug practice guide 3: Practice Strategies and Interventions*, Dovetail, Brisbane

Department of Family and Community Services NSW (2012). *Specialist Homelessness Services Case Management Resource Kit Version 1*, NSW Government, Sydney

Dudgeon, P., Milroy, H. and Walker R. (Editors) (2014). *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice*, Telethon Institute for Child Health Research/Kulunga Research Network and University of Western Australia

Encompass Family and Community (2013). Training workshop: *Towards Identity and belonging – reconnecting with family*, (accessed directly from EFAC, Brisbane, www.efac.com.au)

Gronda, H. (2009). *What makes case management work for people experiencing homelessness? Evidence for practice*, Australian Housing and Urban Research Institute

Hillier, L., Jones, T., Monagle, M., Overton, N., Gahan, L., Blackman, J., and Mitchell, A. (2010), *Writing Themselves In 3: The Third national report on the sexuality, health and well-being of same sex attracted young people*, Australian Research

MacKenzie, D. and Chamberlain, C. (2008). Youth Homelessness 2006, Youth Studies Australia,27(1), 17.

Noble-Carr, D., Barker, J., & McArthur, M. (2013). *Me, Myself and I: Identity and meaning in the lives of vulnerable young people*. Canberra: Institute of Child Protection Studies.

Parker, A. G., Hetrick, S. E., & Purcell, R. (2010). Assessment of mental health and substance use disorders in young people: Refining and evaluating a youth-friendly assessment interview. *Australian Family Physician*, 39, 585-588, as revised by the headspace Centre for Excellence

Queensland Council of Social Service (QCOSS) (2013). *A Guide to Integrated Service Delivery to Clients For Community Service Organisations,* QCOSS, Brisbane.

Queensland Department of Child Safety (2008). *Practice paper: A framework for practice with ‘high-risk’ young people (12-17 years)*, Queensland Government

Robinson, E., and Meredith, V. (2013). *Family factors in early school leaving*, Australian Institute of Family Studies, Australian Government, Melbourne

Schmied, V. and Walsh, P. (2007). *Effective casework practice with adolescents: perceptions of DoCS staff*, Department of Community Services, New South Wales

Smith, A., Agius, P., Mitchell, A, Barrett, C & Pitts, M (2009). *Secondary students and sexual health 2008: Results of the 4th national survey of Australian Secondary students*. Australian Research Centre in Sex, Health and Society. Latrobe University. Melbourne. Victoria.

Watson, J. (2005). *Active engagement:* *Strategies to increase service participation by vulnerable families*, Department of Community Services, NSW Government

Acronyms

AOD Alcohol and Other Drugs

CALD Culturally and Linguistically Diverse

CAT Common Assessment Tool

CS Child Safety

DCCSDS Department of Communities, Child Safety and Disability Services

LGBTI Lesbian, Gay, Bisexual, Transgender, and Intersex

MOU Memorandum of Understanding

WHS Work Health and Safety

YJ Youth Justice

YWA Youth Wellbeing Assessment

YWA CAT Youth Wellbeing Assessment Common Assessment Tool

YS Youth Support

Appendix A Initial Contact Assessment CAT form

**INITIAL CONTACT CAT ASSESSMENT FORM**

Young person number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_

Assessed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REVIEW: Brief contact assessment Review

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **How I'm Doing** | | | | |
| **Housing** | **1** | **2** | **3** | **4** | **5** |
| *What is your current housing situation?* | | | | | |
| **Schooling or work & income** | **1** | **2** | **3** | **4** | **5** |
| *What is your current participation in school or work / income?* | | | | | |
| **Family relationships** | **1** | **2** | **3** | **4** | **5** |
| *What is the current situation with your family relationships?* | | | | | |
| **Physical health** | **1** | **2** | **3** | **4** | **5** |
| *What is your current health situation?* | | | | | |
| **Drug and alcohol use** | **1** | **2** | **3** | **4** | **5** |
| *What is the impact of your substance use on your current well-being?* | | | | | |
| **Mental health** | **1** | **2** | **3** | **4** | **5** |
| *What is your current mental health situation?* | | | | | |

Appendix B Youth Wellbeing Assessment CAT

**YOUTH WELLBEING ASSESSMENT CAT FORM**

Young person number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_

Assessed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REVIEW: Initial detailed assessment Three-monthly review Case Closure

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **How I'm Doing** | | | | | | | | | | | |
| **My housing** | **1** | **2** | | **3** | | | **4** | | | | **5** | |
| *What is your current housing situation?* | | | | | | | | | | | | |
| **My schooling or work & income** | **1** | **2** | | **3** | | | **4** | | | | **5** | |
| *What is your current participation in school or work / income?* | | | | | | | | | | | | |
| **My family relationships** | **1** | **2** | | **3** | | | **4** | | | | **5** | |
| *What is the current situation with your family relationships?* | | | | | | | | | | | | |
| **My social connections** | **1** | **2** | | **3** | | | **4** | | | | **5** | |
| *What is the current level of your social connections with peers?* | | | | | | | | | | | | |
| **My physical health** | **1** | **2** | | **3** | | | **4** | | | | **5** | |
| *What is your current health situation?* | | | | | | | | | | | | |
| **My drug and alcohol use** | **1** | **2** | | | | **3** | | **4** | | | **5** | |
| *What is the impact of your substance use on your current well-being?* | | | | | | | | | | | | |
| **My mental health** | **1** | **2** | | | | **3** | | **4** | | **5** | | |
| *What is your current mental health situation?* | | | | | | | | | | | | |
| **My culture** | **1** | **2** | | | | **3** | | **4** | | **5** | | |
| *What is your current level of cultural connection?* | | | | | | | | | | | | |
| **My parenting and children (if relevant)** N/A | **1** | **2** | | | | **3** | | **4** | | **5** | | |
| *What is your current parenting situation?* | | | | | | | | | | | | |
| **My disability (if relevant)** N/A | **1** | **2** | | | | **3** | | **4** | | **5** | | |
| *What is your current disability situation?* | | | | | | | | | | | | |
| **My involvement with the law (if relevant)** N/A | **1** | | **2** | | **3** | | | | **4** | | | **5** |
| *What is your current involvement**with the criminal justice system?* | | | | | | | | | | | | |
| **My desire / motivation to make changes** | **1** | | **2** | | **3** | | | | **4** | | | **5** |
| *Are you motivated to achieve change* acrossrelevant domains? | | | | | | | | | | | | |
| **My belief in my capacity to make changes** | **1** | | **2** | | **3** | | | | **4** | | | **5** |
| *Are you able to apply self-confidence* *skills* across all domains? | | | | | | | | | | | | |

Appendix C Sample support plan form

Note: This is an example of a support plan written for the young person to use. It should be developed with the young person, and is an active tool for working with them. It does not take the place of the support plan which will be recorded in YSCIS.

**Support Plan for:**

Young person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| GOAL 1: I want to | | |
| Steps to take | Who will help? | Check-in: how did I go? |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| GOAL 2: I want to | | |
| Steps to take | Who will help? | Check-in: how did I go? |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| GOAL 3: I want to | | |
| Steps to take | Who will help? | Check-in: how did I go? |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |

Appendix D Sample child protection report form

**CHILD PROTECTION REPORT FORM**

If any information is not known at this stage, write ‘unknown’

**Child’s / young person’s details** (child about whom concerns are held; complete a separate form for each child / young person)

|  |  |
| --- | --- |
| Surname |  |
| Given name |  |
| Age (D.O.B. if known) |  |
| Gender |  |
| Aboriginal € Torres Strait Islander € Ethnic b’ground: Interpreter required? € | |

**Details of concerns** (provide as much detail as possible)

|  |  |
| --- | --- |
| Indicators of harm or risk of harm (why is it considered there is a risk?) |  |
| Circumstances of any incident (time, place, presenting behaviour, who involved) |  |
| Details of any disclosure, including date, time, by whom, words used |  |
| Names / details of persons responsible for the harm (if known) |  |
| Current whereabouts of the child/young person |  |
| Level of likely harm if protective intervention does not occur? |  |

**Details of current risk / actions taken**

|  |  |
| --- | --- |
| Is the child/young person at immediate risk? | Yes € No € (If yes, provide details) |
| Are there indications of risk to other people such as siblings, family members, staff? | Yes € No € (If yes, provide details) |
| Is the alleged abuser aware of this report? | Yes € No € (If yes, provide details) |
| Have any protective measures already been taken? By whom? | Yes € No € (If yes, provide details) |

**Parents’ / carers’ details** (person/s with whom the child or young person usually lives)

|  |  |
| --- | --- |
| Surname/s |  |
| Given name/s |  |
| Address |  |
| Email |  |
| Telephone |  |
| Aboriginal € Torres Strait Islander € Ethnic b’ground: Interpreter required? € | |

**Support persons** (details of supportive family members or other relevant person/s involved with child/family)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Name | Agency / relationship | Contact number/email |
| Supportive family member |  |  |  |
| Medical practitioner |  |  |  |
| Other health worker |  |  |  |
| Other |  |  |  |

**Details of person completing the form**

|  |  |
| --- | --- |
| Name and position |  |
| Contact details |  |
| Date and time |  |
| Signature |  |

**Reporting record – external**

|  |  |  |  |
| --- | --- | --- | --- |
| Date and time | Reported by (name) | Reported to (include name and Department / agency) | Contact number/fax no. |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Noted:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coordinator / Manager

Date:

Appendix E Sample critical incident report form

**Critical Incident Report**

|  |  |
| --- | --- |
| Date of incident |  |
| Time of incident |  |
| Location (address and place where incident occurred) |  |
| Person completing the form | Name:  Position:  Contact number:  Signature: |
| Persons directly involved in the incident  (include name and whether staff, volunteers, clients, other persons) |  |
| Persons not directly involved who witnessed the incident  (include name and whether staff, volunteers, clients, other persons) |  |
| Description of the incident  (what happened, in detail) |  |
| Details of any emergency services which attended  (police, fire, ambulance) |  |
| Actions taken immediately following incident |  |
| Incident report received by  (senior management position) | Name:  Position:  Date and time received:  Signature: |
| Actions taken following review of incident report | Name:  Position:  Date:  Signature: |
| Incident register noted | Date: |

1. Queensland Department of Communities, 2008, *Principles for developing organisational policies and protocols for responding to clients at risk of suicide and self-harm,* Queensland Government, Brisbane, p. 4. [↑](#footnote-ref-1)