Chapter 2. Investigation and assessment

Purpose

The investigation and assessment may be Child Safety’s first face to face contact with a child who has been abused or neglected and who may need our intervention to ensure their safety and wellbeing.

As part of the investigation and assessment Child Safety will:

- determine if the child is safe
- investigate allegations of significant harm and risk of significant harm
- undertake a holistic assessment of the child and family within their usual home environment
- determine if the child is in need of protection
- decide whether there are supports that Child Safety or other agencies can provide to the child and family.

Key steps

1. Plan the investigation and assessment
2. Engage the family and gather information
3. Assess the notified concerns and the child’s need for protection
4. Finalise the investigation and assessment

What ifs - responding to specific investigation and assessment matters

Standards

1. All investigation and assessments commenced within the response timeframe of the notification.
2. Staff safety is prioritised in planning and conducting the investigation and assessment.
3. The five elements of the Child Placement Principle are applied when an investigation and assessment is conducted in relation to an Aboriginal or Torres Strait Islander child.
4. All subject children are sighted and, where age and developmentally appropriate, interviewed during the investigation and assessment, except where ‘contact with other professional’ is used.
5. Reasonable attempts are made to interview all alleged persons responsible during the investigation and assessment to provide an opportunity to them to respond to allegations or concerns, where this does not interfere with criminal proceedings.
6. A holistic assessment of the child’s need for protection is conducted, when significant harm or risk of significant harm is substantiated.
7. All outcomes recorded clearly identify any unacceptable risk of future significant harm.
and a rationale for the assessment of the parents’ ability and willingness to protect the child.
8. At least one parent is informed of the allegations and outcome of the investigation and assessment.
9. Any suspected criminal offence in relation to alleged significant harm to a child is immediately reported to the QPS.

Practice skills (Key areas for reflection)

- Have I given appropriate consideration to the child protection history of the child and family?
- Have I considered and integrated all of the information gathered when making decisions?
- What theories and research am I drawing on as part of my assessment?
- Have I actively engaged with the child and family in a way that allows their meaningful participation in the process?
- Have I sought the family’s consent to share their information whenever safe, possible and practical?
- Have I appropriately applied the five elements of the Child Placement Principle in my work with an Aboriginal or Torres Strait Islander child and their family?
- Have I appropriately applied the framework for practice?
- How have my personal values and practice style impacted on my assessment and decision-making?
- Was my use of power in conducting the investigation and assessment appropriate?
- Is my assessment holistic, has it considered cumulative harm and is it focused on the child’s safety, belonging and wellbeing?
- Have I considered how the child’s or family’s strengths can be utilised to promote the protection of the child?
- Have I considered what supports can be provided to this child and family and made referrals as appropriate?
- Have I upheld the principles of procedural fairness and provided opportunity for a fair hearing to all alleged person/s responsible before a decision is made?

Authority

- Child Protection Act 1999
- Corporate & Executive Services Policy: Recordkeeping
- Evidence Act 1977
- Policy No. 636: Assessment and Service Connect (ASC) (PDF, 328 KB)
- Policy No. 415: Care agreements
- Policy No. 641: Decisions about Aboriginal and Torres Strait Islander children and young people
• Policy No. 403: Information sharing for service delivery coordination
• Policy No. 386: Investigation and assessment
• Policy No. 607: Supporting children in the care of long-term guardians
Key steps - Investigation and assessment

1. Plan the investigation and assessment
   1.1 Plan the investigation and assessment

2. Engage the family and gather information
   2.1 Commence the investigation and assessment
   2.2 Inform the parents about the allegation of significant harm
   2.3 Interview and sight the child
   2.4 Interview the parents and other adults
   2.5 Other considerations
   2.6 Complete the safety assessment
   2.7 Gather information from other sources

3. Assess the notified concerns and the child’s need for protection
   3.1 Complete the family risk evaluation
   3.2 Determine whether the child is in need of protection

4. Finalise the investigation and assessment
   4.1 Determine whether there will be ongoing intervention
   4.2 Determine whether there will be a referral to another agency
   4.3 Record the investigation, assessment and outcome
   4.4 Inform the parents about the outcome of the investigation and assessment
   4.5 Commencement of case management

What ifs - responding to specific investigation and assessment matters

1. What if an open investigation and assessment needs to be transferred?
2. What if a parent will not consent to actions required - use of a TAO?
3. What if a parent will not consent to actions required - use of a CAO?
4. What if a joint investigation with the Queensland Police Service is required?
5. What if a child needs to be interviewed without parental consent - section 17?
6. What if Child Safety is contacted about additional concerns for a child or an unborn child?
7. What if the investigation and assessment is for an unborn child?
8. What if a child is at immediate risk of significant harm - use of section 16 or 18?
9. What if a child needs a medical examination?
10. What if a child needs to be placed under an assessment care agreement?
11. What if a matter needs to be referred to a SCAN team?
12. What if a child and family cannot be located?
13. What if parents refuse to allow contact with a child?
14. What if assistance is required from another jurisdiction?
15. What if another jurisdiction requests assistance with an investigation and assessment?
16. What if a young person is subject to youth justice intervention?
17. What if a family is subject to the Witness Protection Program?
18. What if animal welfare issues are identified?
19. What if information is received via an Integrated Justice Information Strategy automated email alert?
20. What if the investigation and assessment is to be completed using a differential pathway?
21. What if an Investigation and Assessment outcome is reviewed?
1. Plan the investigation and assessment

Under the Child Protection Act 1999, section 14, Child Safety has an obligation to investigate allegations that a child has been significantly harmed or is at risk of significant harm and where substantiated assess a child’s need for protection or take other actions considered appropriate.

Assessment and Service Connect

Assessment and Service Connect (ASC) is funded service provider that partners with Child Safety to respond to children and families subject to investigation and assessments. ASC services are available state-wide, with the exception of certain remote locations within the Northern Queensland Region. The role of the ASC service is to assess the family’s support needs, determine the most suitable services and streamline access to support services by connecting families early in the investigation and assessment process. This partnership is referred to as an ASC co-response.

ASC roles and responsibilities

The role of the ASC funded service provider in the ASC co-response is to:

- support Child Safety in engaging with the child and their family
- enable, support and inform a holistic response to the child and their family
- undertake a targeted assessment of a family’s support needs
- assist the child and their family to access the support and services they need.

The CSO, as an authorised officer, will retain responsibility for all other aspects of the investigation and assessment.

When to consider an ASC co-response

An ASC co-response may be considered for any investigation and assessment, including for an unborn child, with the exception of the following circumstances:

- an immediate harm indicator or danger is present in the family home and the child is unsafe, as indicated by the SDM Safety Assessment tool
- an authorised officer is using, or is likely to use, powers under the Child Protection Act 1999, such as enter and search (section 16), contact with children at school or care service (section 17), taking a child into custody (section 18) or moving a child to a safe place (section 21)
- when a joint investigation and assessment is required by Child Safety and QPS
- the child is subject to ongoing intervention.

An ASC co-response can be considered for notifications with a 24-hour response timeframe, depending on concerns raised within the notification and the ASC co-responder’s capacity to accept the referral and act within Child Safety’s response timeframe. Child Safety may commence the investigation and assessment and engage an ASC co-responder at a later time to meet the necessary response timeframes.

1.1 Plan the investigation and assessment

Prior to commencing the investigation and assessment, identify all the relevant activities required for the investigation and assessment.
To plan for the investigation and assessment:

- refer to all of the practice considerations required as part of the planning process, as outlined in the practice resource Planning the investigation and assessment
- consider the safety of departmental staff and ensure any identified issues are addressed – for further information refer to Chapter 10.11 Staff safety and wellbeing
- consult with the senior team leader or senior practitioner for complex matters, if required
- consider any cultural factors relevant to the investigation and assessment, and seek further cultural advice where required
- clarify the roles and responsibilities of each person involved in the process, including where tasks are to be undertaken by another CSSC
- ensure all the key people are involved and, when other agencies are involved, undertake joint planning at the earliest possible time
- contact the intensive family support service to coordinate roles and responsibilities, for a child who has been assessed as unsafe by the intensive family support service. For further information refer to Chapter 10.14, 4. What if an intensive family support service has identified the presence of an immediate harm indicator?
- contact Adoption Services prior to commencing the investigation and assessment for an unaccompanied humanitarian minor - for further information, refer to Chapter 1, 7. What if the child is an unaccompanied humanitarian minor?
- contact the QPS where a joint investigation is required due to the possible commission of a criminal offence against a child
- seek verbal approval for the plan from the senior team leader, and where necessary document the plan in a case note in ICMS, prior to commencement of an investigation and assessment.
- talk with the OCFOS lawyer especially where an emergent order may be needed
- consider whether an ASC co-response would be suitable.

When the child is subject to a child protection order granting long-term guardianship to a person who is not the chief executive, and the concerns relate to the long-term guardian’s care of the child, consult the relevant senior team leader during the planning process. Consult with your OCFOS lawyer about the implications of the order for any steps you are thinking of taking. For further information, refer to Chapter 3. 1. What if a suitable person has long-term guardianship?

**Make a referral to an ASC funded service provider**

A referral to an ASC funded service provider may be made at any point during an investigation and assessment and will be approved by the senior team leader. Once a decision is made to refer a matter for an ASC co-response the CSO will:

- make the referral to the ASC funded service provider
- provide the notified concerns and a summary of departmental history to the ASC funded service provider
- ensure the notifier details are not disclosed
- confirm receipt of the referral with the ASC funded service provider.

The referral process for an ASC co-response will vary between CSSCs and referrals should be in accordance with local procedures.
Once the ASC funded service provider has received the referral, they will:

- advise Child Safety in a timely way whether they accept the referral, taking into account the response priority timeframe
- advise Child Safety of the reasons should they not accept the referral - this information will need to be recorded in the investigation and assessment event on ICMS. For further information refer to 4.3 Record the investigation and assessment outcome.

Planning with ASC co-responders

Joint planning with ASC funded service providers should commence at the earliest possible time following the acceptance of the referral. As part of the planning, Child Safety and the ASC funded service providers will work together to determine:

- how consent for the ASC co-response will be sought, for example, whether it will be sought via a phone call or on the first visit with the family
- whether it will be a pre-arranged visit
- the time and location for the ASC co-response
- the roles and responsibilities of each person involved, including responsibility for note-taking
- how the ASC co-response will be meet Child Safety commencement and completion timeframes
- the plan for staff safety and wellbeing - refer to Chapter 10.11 Staff safety and wellbeing.

Obtaining consent for an ASC response

Consent by the family is required for an ASC co-response. Where consent is not provided, the ASC service provider cannot be involved in the investigation and assessment. Where the ASC funded service provider attends the initial visit with a family and the family does not consent, contact with the ASC funded service provider must cease and only Child Safety can continue the investigation and assessment.

Child Safety and the ASC funded service providers will need to determine how to address this situation during their planning for the ASC co-response. This may include having a CSO available at the CSSC to attend if required. Alternatively, Child Safety can meet with the family first and seek consent on behalf of the ASC service funded provider or seek consent over the phone.

Where Child Safety meets with the family first and obtains consent for an ASC co-response, the ASC funded service provider can visit without a CSO. However, the ASC funded service provider should always inform Child Safety of their intent to visit a family for the first time.

Use of delegated powers during an ASC co-response

ASC funded service providers are not authorised officers and therefore cannot use powers granted to the chief executive or authorised officers under the Child Protection Act 1999.

Where the use of powers is required during an ASC co-response, the CSO may request the attendance of another CSO or police officer prior to taking action. The ASC funded service
provider must not be involved in the use of powers, even when they are unable to leave the situation due to being in a remote location or travelling in a Child Safety vehicle.

**Aboriginal and Torres Strait Islander children**

To gather information about an Aboriginal or Torres Strait Islander child and family's culture to assist in planning for contact or interviews with the child, consult one or more of the following:

- the cultural practice advisor
- the regional Aboriginal or Torres Strait Islander practice leader
- local Aboriginal or Torres Strait Islander community representative (sharing non-identifying information)
- discuss strategies to engage with the child and family, and, where applicable, options and strategies for identifying a culturally appropriate placement.

In addition, when planning contact with an Aboriginal or Torres Strait Islander child, consider the five elements of the child placement principle, in regards to decisions to be made during the investigation and assessment process.

The *Child Protection Act 1999* requires that, when making a decision about an Aboriginal or Torres Strait Islander child, Child Safety considers the long-term effect of the decision on the child's identity and connection with their family and community. The decision must also be made:

- in a way that allows the full participation of the child and the child's family group
- in a place that is appropriate to Aboriginal tradition or Island custom
- in a way that upholds the following five elements of the child placement principle:
  - prevention - Aboriginal and Torres Strait Islander children have a right to be brought up within their own family and community
  - partnership - Aboriginal and Torres Strait Islander persons have the right to participate in significant decisions about Aboriginal and Torres Strait Islander children
  - placement - Aboriginal and Torres Strait Islander children subject to a child protection care agreement or child protection order, granting custody or guardianship of the chief executive, have a right to be placed with a member of their family group
  - participation - Aboriginal and Torres Strait Islander children and their parents and family members have a right to participate, and be enabled to participate, in administrative and judicial decision making processes
  - connection - Aboriginal and Torres Strait Islander children have a right to be supported to develop and maintain a connection with the child's family, community, culture, traditions and language, particularly where a child is in the care of a person who is not an Aboriginal or Torres Strait Islander person.

For further information refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children and the practice paper Working with Aboriginal and Torres Strait Islander people.

For information that may assist with the planning and conduct of an investigation and assessment in relation to an Aboriginal or Torres Strait islander child, refer to the practice paper Working with Aboriginal and Torres Strait Islander people.
**Requirement for two officers to conduct investigation and assessment interviews**

When interviewing a child, parent and other family members as part of an investigation and assessment, the authorised officer **will always be accompanied** by either:

- another authorised officer
- a police officer
- a cultural practice advisor unless they may be required to work with the family in the future in their usual role
- a student undertaking field education, if approved by the senior team leader after taking into account their skill level and any practice implications that may result from their involvement
- an ASC co-responder.

Take into account any potential conflict of interest that may arise where a staff member undertaking another role in the CSSC (for example, a family group meeting convenor) is included as a second officer.

The requirement for an authorised officer to be accompanied by a second worker ensures there is another person to observe, assist with information gathering and witness the contact or interview.

Only another CSO or a police officer will accompany the authorised officer when the investigation and assessment:

- is complex
- is likely to be conflictual
- may involve the commission of a criminal offence against a child.

Delegated powers under the *Child Protection Act 1999*, sections 16-18, **must** only be used by an authorised officer.

Where there are serious safety issues present for staff, contact the QPS for their support and assistance.

**2. Engage the family and gather information**

**2.1 Commence the investigation and assessment**

An investigation and assessment is to commence within the response priority timeframe of the notification. The starting point for the response priority timeframe begins when the decision is made that the concerns meet the threshold for a notification. However, if a pre-notification check is initiated, the decision about whether to record a notification must be made within 48 hours.

Refer to Chapter 1, 2.3 Complete the response priority for more information.

The response timeframe assigned to the notification will be either:

- 24 hours, 5 days or 10 days for a ‘standard’ notification
- five days - where an unborn child is likely to be born within five days
- 10 days - where an unborn child is likely to be born more than five days after the receipt of the initial concerns.
Take action to commence the investigation and assessment within 24 hours

An investigation and assessment with a 24 hour response priority timeframe is 'commenced' when the subject child or pregnant woman has been sighted and interviewed. Refer to 2.3 Interview and sight the child. 2.7.

In exceptional circumstances only, one of the following options may occur to commence a notification with a 24 hour response priority timeframe. For example, where 'sorry business' delays access to an indigenous community, or where the CSAHSC is unable to commence the investigation and assessment due to geographical reasons.

- Request a police officer or health professional to have contact with a subject child or a pregnant woman - where an authorised officer is not able to access and sight a child within the response priority timeframe, the subject child (or children) or pregnant woman may be sighted by a police officer or health professional, who can provide information to Child Safety in relation to the safety of the child.

- Gather significant information - where an authorised officer is not able to access and sight a child within the response priority timeframe, significant information can be gathered that relates to the child's immediate safety, prior to the child being interviewed or sighted, by:
  - interviewing a parent
  - receiving information from a government or non-government agency.

- Take action in rural and remote areas - in rural and remote regions, where an authorised officer, police officer or health professional is not able to sight a child or pregnant woman within the response priority timeframe due to geographical distance or lack of access due to seasonal conditions, one or both of the following actions is to occur as a matter of urgency:
  - seek information in relation to the safety of the child from other services or professionals who have regular, or have had, recent contact with the child
  - take immediate action to allow for the commencement of the investigation and assessment - this may include organising transport or arranging for the child to be sighted.

The date the action is taken is to be recorded as the commencement date.

Take action to commence an investigation and assessment within five or 10 days

An investigation and assessment with a five or 10 day response priority timeframe is 'commenced' when one of the following has occurred:

- the subject child or pregnant woman has been sighted and interviewed. Refer to 2.3 Interview and sight the child and 4. What if the investigation and assessment is for an unborn child?

- new information that informs the assessment about the child's safety or the unborn child's safety after birth is sought and received from an external agency, including government and non-government agencies, service providers, including National Disability Insurance Agency (NDIA) and National Disability Insurance Scheme (NDIS) providers or health professionals, such as a general practitioner. Information gathering may include an email exchange, phone discussion, receipt of a 'Section 159N information request', the
convening of a SCAN team meeting (if SCAN team referral criteria is met) or a locally convened panel process with relevant partners. The date the information is received is to be recorded as the commencement date. Note: Advise the government or non-government agency how the information will be used and disclosed. If the person who is contacted for information was the notifier, advise them that the new information they provide forms part of the investigation and assessment and is not covered under the confidentiality of notifier provisions under the Child Protection Act 1999, section 186. Refer to 6. What if Child Safety is contacted about additional concerns for a child or an unborn child?

Note: When actions other than sighting and interviewing a subject child or pregnant woman are undertaken to commence an investigation and assessment:

- the information received cannot be used to downgrade the notification to a CCR
- completion of the investigation and assessment requires all subject children to be sighted, and where appropriate, interviewed by a CSO - unless the differential pathway ‘contact with other professional’ is used or an exception applies. Refer to Contact with other professional and Exceptions to contact or interviews with a child.

The following actions do not constitute commencement:

- completing and sending a ‘Section 159N information request’
- making a referral to SCAN
- allocation of the investigation and assessment by the senior team leader
- an unsuccessful attempt to visit or contact the child or family or pregnant woman
- any information received prior to the decision to record a notification
- information received and recorded as additional notified concerns.

When there are serious concerns for staff safety, and the QPS is unavailable to accompany staff within the response timeframe, sighting and interviewing the subject children is not to occur until the QPS is available to accompany staff.

Record the reasons why an investigation and assessment is not commenced within the required response priority timeframe in the investigation and assessment event in ICMS.

2.2 Inform the parents about the allegation of significant harm

An authorised officer or police officer investigating an allegation of significant harm or risk of significant harm to a child must give details of the alleged harm or risk of harm to at least one of the child’s parents (Child Protection Act 1999, section 15). In doing so, consider whether the information will be provided to both parents, especially when parents are residing separately.

Under the Child Protection Act 1999, section 186, a notifier’s identity must not be disclosed, either deliberately or inadvertently through discussions during the investigation and assessment.

A parent is the child’s mother, father or someone else (other than the chief executive) having or exercising parental responsibility for the child. This includes a person who, under Aboriginal tradition or Torres Strait Island custom, is regarded as the parent of the child. This definition also includes a long-term guardian or permanent guardian (Child Protection Act 1999, section 11).
However, discretionary compliance with this requirement is permitted (Child Protection Act 1999, section 15(3)), if an authorised officer reasonably believes:

- someone may be charged with a criminal offence for the harm to the child, and compliance may jeopardise an investigation into the offence
- compliance may expose the child to significant harm.

When the concerns relate to a long-term guardian’s or permanent guardian’s care of a child, give details of the alleged harm or risk of harm to at least one of the guardians. In addition, make reasonable efforts to contact at least one of the child’s parents unless this is not considered to be in the child’s best interest, taking into account:

- the nature and extent of the child’s connection with their parents
- the evidence supporting the allegation
- any other matter, for example, if a parent’s knowledge of this allegation of harm will have a detrimental effect on the child and the stability of the living arrangements (Child Protection Act 1999, section 15(3)).

Where details of the alleged harm or risk of harm are not provided to a parent:

- the decision must be approved by a senior team leader
- record the decision, rationale and approval process in a case note in ICMS.

For further information, refer to the practice resource Informing parents about the significant harm and the outcome - section 15.

**Criminal matters**

Where there is a criminal matter or an ongoing police investigation, and the provision of information may jeopardise the due process of the criminal matter, discuss the matter with the QPS prior to any information being provided to the parents.

**Privacy considerations - general**

The Child Protection Act 1999 overrides the privacy principles adopted by the State Government about how personal information, including that of clients, is collected, stored, used and disclosed. Decisions about the provision of information must always be made in favour of the wellbeing and best interests of a child. For more information, refer to Information privacy principles and other obligations.

Where parents are estranged, or no longer reside together, provide only information specific to the alleged harm to the child. Do not release information about one parent’s general circumstances to the other parent, for example, information such as employment and financial issues, extended family issues and a parent’s health or medical treatment. If there are concerns about what information can be provided to a parent, seek advice initially from the senior team leader or senior practitioner and, when necessary, the senior team leader will seek further advice from Legal Services.

**Privacy considerations - domestic and family violence**

When working with both individuals who have perpetrated violence and their family members who have been impacted by this violence, consider how Child Safety interventions may impact on the safety of the victim and their children.
During the investigation and assessment, consider recording a ‘Significant DFV Threat Alert’ when one or more of the following domestic and family violence risk factors with the family are identified:

- a victim believes their life is in danger
- a perpetrator has caused serious injuries that requires assessment and treatment at a hospital emergency department and/or hospitalisation
- strangulation/stabbing/choking has been perpetrated
- escalation of physical violence
- perpetrator history of incarceration for breach of a domestic violence order, physical assaults, grievous bodily harm and/or torture, or deprivation of liberty
- perpetrator history of breaches of domestic violence orders - failure to comply with a domestic violence order
- previous or current threats by the perpetrator to kill the victim, a child other family members or pets
- perpetrator access to or possession of a firearm
- perpetrator history of stalking or obsessive behaviour
- perpetrator behaviour patterns of coercion and control, for example, leading to extreme isolation of the victim, or accompanying the victim at all times when they are in public.

When recording the alerts:

- create an alert in the ICMS profiles of the perpetrator, victim and child.
- record the name and person profile number of the victim and children in the rationale field of the perpetrator’s alert
- record the name and person profile number of the perpetrator in the rationale field of the victim’s and child’s alerts
- in each alert also record either:
  - where to locate the assessment of the perpetrator’s pattern of behaviour, for example, the event number
  - in the absence of an assessment, a brief summary of the coercive and controlling behaviours and the specific worries for the safety of the victim and child.

Record an alert on a person’s ICMS profile each time the person has perpetrated domestic and family violence and has been assessed as posing a significant threat to more than one victim over time. This will enable the perpetrator’s behaviour to be tracked over time and across multiple families.

When the investigation and assessment involves a person who has an existing alert due to perpetrating domestic and family violence in a previous relationship, conduct a new assessment of risk within the new household to determine if a new alert is required.

When there is an existing ‘significant DFV threat’ alert recorded in a person’s profile in ICMS consider:

- what information is known about the person’s pattern of coercive and controlling behaviour
how this information can inform safety planning with the victim and the assessment of the child’s need for protection
what information, if provided to the person during an investigation and assessment or could compromise the safety of the victim and their child.

Examples of information that could compromise safety include:

- the location and address details of the victim and their extended family members
- information that identifies a school the child attends
- photographs of children on family visits that may identify the location or area a victim or child is residing in.

Privacy considerations - criminal matters
When Child Safety obtains information that any adult in the household has an alleged offence, charge or conviction that presents an unacceptable risk to a child’s safety, and one, or both, parents has no knowledge of the information, the CSO has a duty to inform the relevant parent or parents that Child Safety has concerns. Prior to this, the CSO may endeavour to speak to the adult alone, outline that information has been obtained, and discuss the worries for the child’s safety. The person will be encouraged to provide relevant information to parents in the household.

When a person refuses to disclose their criminal history to a parent, the CSO may provide the parent with information regarding a person’s criminal history, including offences, charges or conviction, if releasing this information is considered to be in the child’s best interests. This includes disclosure of charges or convictions under the Child Protection (Offender Reporting and Offender Prohibition Order) Act 2004. Once the parent is made aware of this information, assess the parent’s ability and willingness to protect the child from the risk posed by the person, based on their response to the information.

If there are concerns about what information can be provided to a parent, seek advice initially from the senior team leader or senior practitioner and, when necessary, the senior team leader should seek legal advice from staff at Legal Services.

2.3 Interview and sight the child
Investigation and assessments are undertaken with the cooperation and agreement of parents wherever possible. The use of good communication and engagement skills are vital to this process.

As soon as practicable, sight and interview the subject children and complete the safety assessment. Refer to 2.6 Complete the safety assessment.

As part of the investigation and assessment:

- each subject child must be sighted, interviewed (as age and developmentally appropriate) and assessed by an authorised officer
- any other child in the home who is identified during the investigation and assessment as having been significantly harmed, or as likely to be at unacceptable risk of significant harm must be sighted, interviewed and assessed. In this circumstance, the child will become a subject child within the investigation and assessment.
Interviewing other children is important, as they may also have been significantly harmed or be at risk of significant harm and may have information about the notified concerns. Consider interviewing:

- any other child in the home who may have information about the notified concerns
- any other child who is no longer in the home, but who was in the home at the time of the notified concerns, if it is assessed that they may be able to provide relevant information.

When the subject child is also a parent of a child, and child protection concerns are identified for their child during the investigation and assessment, their child cannot be added as a subject child to the existing investigation and assessment. In this circumstance, record a separate notification and complete an investigation and assessment in relation to the child's specific protection and care needs. Refer to Chapter 1.1.1 Gather information from the notifier for further information about recording two separate intake events in these circumstances.

**Contact a child without parental consent - section 17**

In exceptional circumstances, the use of powers under the *Child Protection Act 1999*, section 17, may be used to contact and interview a child without the parents’ consent or without them having prior knowledge of the interview. These powers should be used in circumstances when:

- the parents’ prior knowledge of the interview will compromise the safety of the child or interfere with a possible criminal investigation by the QPS
- it is in the child's best interest that the officer has contact with the child, before the parents are told about the investigation and assessment.

For further information refer to 5. What if a child needs to be interviewed without parental consent - section 17?

**Arrange the contact with a child**

Prior to contacting and interviewing a child, either:

- seek the permission of the child's parents
- use powers under the *Child Protection Act 1999*, section 17, or
- obtain the authority of an assessment order in order to facilitate the interview - this is only to occur if the parents refuse contact with a child, or will not agree to work with Child Safety.

Contact or interviews with a child may occur either by an unannounced visit to the home or an arranged appointment. Contact may happen in the family home, it can also occur in other locations such as a hospital, the child’s school, a child care or day care centre, a police station, a CSSC or another location suitable to the child and family and appropriate to the circumstances of the investigation and assessment. When making these decisions, consider:

- the seriousness of the allegations and whether there is any history to inform the decision about the best place to interview the child
- whether there are any serious safety issues for departmental officers, that will require the involvement and assistance of the QPS
- what culturally appropriate support is required for the child and family
- whether the location is appropriate for an Aboriginal or Torres Strait Islander child, having regard to Aboriginal tradition or Island custom.
If a criminal offence may have been committed, and a joint investigation with the QPS is to occur, make decisions about sighting and interviewing children in consultation with the QPS, including whether or not the interviews will be recorded in line with the ICARE procedures, refer to 4. What if a joint investigation with the Queensland Police Service is required? In addition, if there are any safety issues for staff, refer to the practice resource Planning the investigation and assessment and Chapter 10.11 Staff safety and wellbeing.

Sight the child
Contact with a child is key to determining the immediate safety of the child, and should be done in a way that allows the child to feel safe and able to communicate any fears or concerns they have. When sighting a child:

- make careful observations of the child’s physical and cognitive developmental stage, behaviour, reactions, presentation and interaction with others, including the parent
- have personal contact with the child, speak to them or interview them if age and developmentally appropriate (see below).

For further information on child developmental stages, refer to the resource Physical and Cognitive Developmental Milestones.

Interview the child
Prior to interviewing a child, consider the following factors:

- the decision to interview a child must take into account the child’s age, developmental level and ability to communicate
- interviewing a child in the presence of other people can reduce the likelihood of a child disclosing significant harm or risk of significant harm, especially if the person holds a position of authority in relation to the child
- a Child Safety officer is responsible for ensuring that the child feels safe and supported during the interview process
- if a child requests that they have a support person present during an interview, the child is to be assisted to identify an appropriate support person - it is not appropriate for the alleged person responsible for harm to be the support person for the child or a parent.

For further information on support persons, refer to the practice resource The role of a support person.

If it becomes evident during the contact that a child subject to a long-term guardianship order to a person other than the chief executive no longer resides in the direct care of the guardian, specific actions are required by the CSO for the child. For further information, refer to Chapter 3. 1. What if a suitable person has long-term guardianship?

Where the allegations of harm include sexual abuse of a child, refer to the practice paper Child sexual abuse.

For specific information on preparing and conducting an interview with a child, refer to the practice resource Interviewing a child.

Note: CSOs will not use video and/or audio equipment or mobile devices to record interviews with children. Any written interview notes made during the interview will be held on the child’s
paper file, as they are subject to disclosure during Childrens Court proceedings. Copies of the
interview notes may be provided to the QPS to assist with a joint investigation.

Exceptions to contact or interviews with a child
In exceptional circumstances, professional judgment may indicate that the interview of a child
would be inappropriate or not possible. Examples may include where a subject child has a
serious or terminal illness, or when a child refuses to be sighted or interviewed after all
reasonable attempts to interview them have been exhausted. The decision not to interview a child
should be made in consultation with the senior team leader, and the rationale must be clearly
documented.

Please note, where the differential pathway response ‘contact with other professional’ is used to
complete an investigation and assessment, the sighting and interviewing of one subject child may
be undertaken by another professional, and this must be noted on the Assessment and outcome
form. For further information, refer to 20. What if the investigation and assessment is to be
completed using a differential pathway?

When a child has physical injuries
When physical injuries to a child are suspected or alleged:

- sight the injury or injuries if possible and appropriate - do not sight the injury or injuries
  when alone with a child or parent - there must always be a second professional person
  present
- be mindful of the child’s age, gender and comfort level in relation to deciding when and
  where injuries are sighted
- ask the parent, carer or the child to adjust or remove whatever clothing is necessary to see
  the alleged injury or injuries - do not undress or adjust the child’s clothing yourself
- document details of the injury, including the location, size and colour, as relevant - the
  injury may be photographed (Child Protection Act 1999, section 181)
- assess whether a medical examination of the child is required - for further information refer
  to 9. What if a child needs a medical examination?

If parents do not consent to the sighting of the alleged injury and it is imperative to the
investigation and assessment that the injury be seen:

- advise the parents that the injury will need to be seen
- attempt to negotiate with the parents the most suitable way to do this
- consult with a senior team leader and OCFOS lawyer about further action as soon as
  possible, including consideration of the need for an assessment order to allow a medical
  examination to occur - for further information refer to 2. What if a parent will not consent to
  actions required - use of a TAO? or 3. What if a parent will not consent to actions required -
  use of a CAO?

2.4 Interview the parents, other adults and alleged persons responsible

The purpose of interviews with parents, other adults and alleged persons responsible is to:

- gather relevant information in relation to the concerns and the child’s circumstances
• verify and clarify information received from other sources
• provide alleged persons responsible with a reasonable opportunity to respond to allegations, where this does not interfere with criminal proceedings
• determine who is responsible for the harm
• assess the ability and willingness of the parents to protect the child from significant harm.

Procedural fairness
Procedural fairness relates to the processes used to make a decision, and includes fairness, impartiality, objectivity and transparency. Upholding the principles of procedural fairness means that all parents, other adults and alleged persons responsible who might be adversely affected by a decision are provided opportunity for a 'fair hearing' prior to any decisions being made where this does not interfere with criminal proceedings. This involves all parents and alleged persons responsible being made aware of the allegations of harm or risk of significant harm, where possible and are given reasonable opportunity and time to respond to the allegations, worries identified and any decisions or assessments made. The decision-maker should listen to the children’s parents and other adult’s views and involve them in planning and decision making.

Note: There are exceptions to the requirement to inform a parent and alleged persons responsible about the allegations of significant harm or risk of significant harm. Please refer to 2.2 Inform the parents about the allegation of significant harm and consider if discretionary compliance is permitted (Child Protection Act 1999, section 15(3)).

Who to interview
The following persons are to be interviewed:
• all persons alleged responsible for harm to a child should be afforded the opportunity to respond to allegations of harm, where it does not interfere with criminal proceedings
• the resident parent or parents (or carer) of the child and any adult who cares for a child, even if the concerns do not specifically relate to them
• any other adult who lives in the house when the concerns relate to them or they may be able to provide relevant information - this includes step-parents or partners of a parent living with the child who may not be the child’s primary parent
• non-resident parents, other adults or parental figures not living in the primary care household, who have reliable knowledge of the family and the concerns and are likely to provide relevant information.

Make all reasonable attempts to contact each adult household member to arrange for an interview to address and obtain a response to the concerns, particularly when the adult household member is a parent of the subject child.

Prior to interviewing an Aboriginal or Torres Strait Islander adult, consider information known about the person’s culture and how best to engage them. Where advice is required to assist in facilitating engagement of an Aboriginal or Torres Strait Islander adult, consult with Child Safety staff who are able to provide cultural advice or, using non-identifying information about the family - the local Aboriginal or Torres Strait Islander community representative.

Examples of advice about the family’s culture or community may include:
• how best to engage the family
• relevant cultural protocols
• whether information would be considered women’s or men’s business
• any relevant sorry business, current issues impacting the community such as recent suicides
• relevant child rearing practices
• the cultural context for issues relating to adolescence, sexual or gender identity.

The senior team leader must approve any decision made to finalise an investigation and assessment without all relevant adults being interviewed. Record the decision and rationale in ICMS, where this occurs.

Prior to the interview
Where a parent or other adult requests that they have a support person present during an interview, assist them to identify an appropriate support person. It is not appropriate for the alleged person responsible for harm to be the support person.

For an interview regarding concerns about an Aboriginal or Torres Strait Islander child, the person chosen by the parents to be a support person may later also be nominated by the parent to be their independent person for significant decisions. However, during the interview the person is fulfilling the role of support person and not of an independent person. For further information regarding the role of an independent person, refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children.

For further information on support persons, refer to the practice resource The role of a support person.

Wherever possible, plan to conduct interviews with adults individually, in order to elicit as much accurate information as possible. This is particularly important where there are indicators of domestic violence or a culture of silence or fear in the home. This can affect the parent or other adult’s ability to speak openly when the other partner or another person is present.

Undertaking the interview
When interviewing parents, carers or other adults, without the involvement of the QPS:
• make introductions and provide your names, state who you work for and show your identity card, as required by the Child Protection Act 1999, section 153
• explain your role and the purpose of the visit
• provide the child’s parents with the brochure When Child Safety officers visit your home which outlines the rights of parents
• conduct the interview and gather relevant information.

In particular, gather:
• the names and dates of birth of the subject children and all other children in the household
• the names and dates of birth and roles of people who are part of the child’s household and any relevant extended family members
• contextual information about the family and home environment
• cultural information about the family and their community
• the information required to complete the family risk evaluation
the presence and impact of the risk factors, such as domestic violence, drug and alcohol misuse, psychiatric illness and childhood abuse
the information required to complete a safety assessment, and if required, a safety plan
the types of support available to the family
any other stressors impacting on the family
the parents’:
  • response to the specific concerns raised, including their acknowledgment of, and response to the harm and any additional concerns identified or assessed during the investigation and assessment
  • perceptions and feelings about the child
  • parenting abilities, including their knowledge and skills
  • understanding of the child’s physical and cognitive development, refer to the resource Physical and Cognitive Developmental Milestones
other alleged person responsible:
  • response to the specific concerns raised, including their acknowledgment of, and response to the harm and any additional concerns identified or assessed during the investigation and assessment.

For information on ICARE interviews, refer to 4. What if a joint investigation with the Queensland Police Service is required?

Child Safety officers will not disclose the notifier’s identity or confirm or deny the notifier’s identity when a person speculates on the notifier’s identity. Refer to the practice resource Notifiers and mandatory notifiers.

Do not accept at face value information provided by parents, other adults or alleged persons responsible during interviews, where it is believed to be untrue, misleading or contradictory to other information received. It is the responsibility of departmental officers to respectfully challenge the person in relation to the information they provide, and where required, seek independent verification from a reliable source, for example, request the name of the doctor if a parent says the child has had recent medical attention. Where contradictory information is subsequently received, re-contact the person to discuss the differing information and seek a further response.

Consider the use of the collaborative assessment and planning (CAP) framework from the first point of contact or interview with a family and at any other stage during the investigation and assessment. Refer to the Collaborative assessment and planning framework booklet and the CAP Framework tool for further information.

In cases of domestic and family violence, careful consideration should be given before challenging a perpetrator in the presence of the victim, to ensure the safety of the victim. If, during an interview, it becomes apparent that there are risks to a parent’s immediate physical safety, provide the parent at risk with information about services available, or assist in making a referral to an appropriate crisis service, for example, DVConnect or a women’s shelter. DVConnect can be contacted in relation to women, children and young people 24 hours a day, through the DVConnect Womensline on telephone 1800 811 811. The DVConnect Mensline can be contacted daily from 9am till midnight on telephone 1800 600 636.
Once the immediate safety of the parent and child is achieved, consider if the information gathered indicates a ‘Significant DFV threat’ alert in ICMS is required, refer to 2.2 Inform the parents about the allegation of significant harm.

When there is an existing ‘significant DFV threat’ alert recorded in a person’s profile in ICMS consider:
- what information is known about the person’s pattern of coercive and controlling behaviour
- how this information can inform safety planning with the victim and the assessment of the child’s need for protection.

Legal representatives
Parents, other adults and alleged persons responsible are entitled to have a legal representative present during the interview, and if requested, make all reasonable attempts to accommodate such requests.

2.5 Other considerations

Consider the use of a differential pathway

In certain circumstances, it will be appropriate to use a differential pathway to enable the timely completion of an investigation and assessment, whilst ensuring sufficient information is gathered and assessed to determine whether a child is in need of protection. There are two differential pathways options:
- core assessment
- contact with other professional.

For further information about using a differential pathway to complete an investigation and assessment, refer to 20. What if the investigation and assessment is to be completed using a differential pathway?

Adoptive families

If, during an investigation and assessment, you become aware that a child is adopted, and the child or family may benefit from specialised counselling, consideration should be given to making a referral to either Adoption Services or Post Adoption Support Queensland (PASQ). For further information about Adoption Services refer to Chapter 10.4 Providing adoption services. For further information about PASQ, refer to the Benevolent Society.

Alerts

When information gathered as part of the investigation and assessment indicates the need to record an alert in ICMS for a child or family member, refer to Chapter 1, 9. What if an alert needs to be recorded in ICMS?

Animal welfare issues

When animal welfare issues are identified during an investigation and assessment, they must be discussed with the family as part of a holistic assessment. For further information, refer to 18. What if animal welfare issues are identified?
**Obvious or blatant breaches of pool fencing requirements**

If, during an investigation and assessment, obvious or blatant breaches of pool fencing requirements are noticed, for example, broken fencing and gates or unfenced access points, discuss the associated safety risks and water safety strategies with the parents.

Following the discussion with the parents, contact the relevant local council to report the safety concerns. Staff can only provide the property address and the nature of the issue relating to the pool fence to the relevant local council. Staff cannot provide identifying family details.

**Fabricated or induced illness**

If, during an investigation and assessment, concerns about fabricated or induced illness are identified, information must immediately be provided to the QPS. This applies whether or not it is suspected the child is in need of protection (Child Protection Act 1999, section 14(2) and (3)). Such concerns about significant harm to a child may involve the commission of a criminal offence relating to the child. In addition, a joint investigation with the QPS may be required.

For further information refer to Chapter 10.2 Statutory obligation to notify the Queensland Police Service of possible criminal offences, the practice resource Schedule of criminal offences and 4. What if a joint investigation with the Queensland Police Service is required?

### 2.6 Complete the safety assessment

Ensuring the safety of children is the primary focus of intervention by Child Safety, and is an integral part of all interactions with a child and their family.

The purpose of the safety assessment is to guide decision-making about:

- whether there is the threat of immediate harm to a child in the household
- what interventions are required to maintain their safety and protection
- a ‘safety decision’ for each child in the household
- whether an immediate safety plan can be developed to ensure the safety of any child who remains in the home, when immediate harm indicators have been identified.

A safety assessment is not completed for a harm report or for the investigation and assessment of an unborn child, unless the child is born prior to the approval of the investigation and assessment, in which case, the safety assessment will be completed following the birth.

A safety assessment is completed at the first face to face contact with the child and family, which will happen as soon as practicable. Subsequent safety assessments will occur throughout intervention with a child and family, as required and outlined below.

**Completing the safety assessment**

The initial safety assessment begins at the first face-to-face contact with the child and family. Ensure the information gathered during interviews and contact with the family is sufficient to complete the safety assessment, prior to leaving the child in the home. The child’s need for immediate safety must be secured prior to continuing with the investigation and assessment.

To complete the safety assessment:

- assess only one household as part of a safety assessment - that is, the household where the significant harm or risk of significant harm is alleged to have occurred – if the parents
do not reside together and there are allegations in both households, two notifications will be required and two safety assessments will be completed

- gather and analyse information from observations of, and interviews with, the child, their family and other relevant people to determine whether any of the immediate harm indicators are present in the family, refer to SDM: Safety assessment
- provide parents with information about the concerns, so they understand the issues and can fully participate in the process
- ensure the safety of all subject children prior to leaving the home and continuing the investigation and assessment
- if no immediate harm indicators are identified, no further action is required - continue with the investigation and assessment
- if any immediate harm indicators are identified, discuss these with the family and determine actions and interventions that are required to ensure the child’s safety, in collaboration with the family. The actions and intervention will be either:
  - non-custody interventions developed and agreed to in an immediate safety plan to keep the child safe in the household - always refer to the most vulnerable child in the home
  - placement interventions (with an approved carer) where an immediate safety plan cannot be developed to build safety for the child at that point in time
- encourage the family to identify people or services they know and trust, who may agree to participate as safety and support network members in a safety plan
- seeking information from the family about their Aboriginal tradition or Island custom, to inform the safety assessment for an Aboriginal or Torres Strait Islander child
- use professional judgement to assess whether the agreed safety interventions are adequate to mitigate the safety concerns present in the household
- finalise the safety plan in collaboration with the child and family and their network
- clearly record the immediate safety plan for each child who is to remain in the home, where immediate harm indicators have been identified, and provide a copy to persons undertaking actions in the plan
- record the safety assessment in ICMS and submit the completed safety assessment, with any required immediate safety plan, to the senior team leader for approval within 72 hours of the safety assessment being completed.

Outcomes for every safety assessment completed on the family will appear in the assessment and outcome form in ICMS.

For an ASC co-response, Child Safety retains responsibility for completing the safety assessment.

For an unaccompanied humanitarian minor (UHM), contact the UHM program officer, Adoption Services, about the outcome of the safety assessment. For further information, refer to Chapter 1, 7. What if the child is an unaccompanied humanitarian minor?

For more information on non-custody and placement interventions, refer to the practice resource Safety assessment.
Complete a subsequent safety assessment

A subsequent safety assessment is required in any of the following circumstances:

- where new information becomes available or a change in circumstances indicates a threat to a child’s safety, but the threat does not reach the threshold of a notification – for example, where there is a change in household membership (such as a parent leaving, or an adult or another child moving in or the birth of another child) or where information indicates that a child has been released from hospital
- any time when the parties to an immediate safety plan are not complying with the current safety plan
- prior to returning a child back home following an ‘unsafe’ safety decision in a previous safety assessment
- prior to returning a child subject to a care agreement back home
- when a parent removes a child from a placement
- when a child in placement chooses to return home without Child Safety approval
- prior to closing an ongoing intervention case.

Develop a safety plan

An immediate safety plan is collaboratively developed with the family, the child (where developmentally appropriate) and the network whenever any ‘immediate harm indicator’ has been identified and at least one child will remain in the home. The immediate safety plan must address the immediate harm in the present to short term future. It is important to remember that where a child is ‘safe with an immediate safety plan’, the conditions specified in the plan are is the only thing mitigating the harm that would otherwise result in a placement out of the home.

Child Safety is responsible for collaboratively developing, implementing and monitoring the immediate safety plan, regardless of the role played by other parties or agencies.

Before developing an immediate safety plan for an Aboriginal or Torres Strait Islander child:

- advise the parents of their right to have an independent person help facilitate their participation in developing the safety plan
- arrange for the independent person, when requested by the child and family, including contacting the senior team leader who is delegated to determine suitability of an independent person, unless it is:
  - not practical or possible because the independent person is not available or because the safety plan must be developed urgently
  - likely to have a significant adverse effect on the safety or emotional wellbeing of the child or another person
  - not in the child’s best interest
  - as far as practical, ensure the meaningful participation of the child’s family group in the development of the immediate safety plan

For further information about suitability of an independent person, refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children.

To develop an immediate safety plan:
• describe what Child Safety is worried about, addressing each identified immediate harm indicator, their impacts, and the individual safety needs of all children - especially those with increased vulnerability due to age or disability

• outline what the parents and other people must do immediately to ensure the child’s safety in the home and undertake a robust assessment of their ability to complete all action steps required

• contact other parties, identified by the family to participate in the safety plan, to confirm their willingness, ability and suitability to participate as a safety and support network member, ensuring they are aware of the harm indicators identified

• seek agreement from all parties to the necessary intervention

• include details of how the plan will be monitored, including how frequently and who is responsible

• include details of the family and network members agreement to the plan

• record the details of the immediate safety plan, in culturally appropriate and family-centred language

• schedule a date for the review of the immediate safety plan

• ensure the immediate safety plan is signed by all the people involved in its implementation

• leave a copy of the completed and signed safety plan with the parents, and provide copies of the plan to the child, where appropriate and any other person involved in its implementation

• explain to the family that the plan will remain in place until either:
  • a case plan is developed that ensures the child’s safety and addresses issues in the safety plan
  • the immediate danger is resolved

• attach or record the immediate safety plan in the safety assessment form in ICMS.

For full definitions for all sections of the safety assessment, and further information on the completion of the safety assessment, refer to SDM: Safety assessment and the practice resource Safety assessment.

It is recommended that an immediate safety plan should not be in place for longer than seven days without a new safety assessment being undertaken.

If non-custody interventions cannot ensure the child’s safety, consult with the senior team leader to determine an appropriate placement intervention.

For more information on arranging for an independent person, refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children.

**Private arrangements**

When immediate harm indicators are present and the child needs to reside outside the home for a period of time due to the level of risk identified, the parents may agree to take protective action and arrange for the child to stay with a family member or friend. This is referred to as a private arrangement, meaning the parent, not Child Safety, places the child with the person, and the person does not need to be approved as a carer.
A private arrangement is a **non-custody arrangement** and will only be for a brief period of time, generally two to three days, to allow parents time to take immediate actions required to address the safety issues identified. For further information, refer to the practice resource **Safety assessment**.

Prior to including a private arrangement as part of an immediate safety plan, make direct contact with the person nominated by the parent to:

- determine their ability to provide care for the child for the agreed period of time
- determine their willingness and capacity to co-operate and keep the child safe from the identified harm
- ensure they are willing to advise the CSSC or CSAHSC immediately if the child is returned home so the CSO can re-assess the child’s safety needs and make decisions based on the child’s best interests
- provide them with the contact details for the CSSC and the CSAHSC
- advise them that a child protection history check will be conducted.

Where the person has agreed to care for the child and the child protection history check does not raise concerns, finalise the immediate safety plan and safety assessment.

Where the person nominated by the parent has a child protection history:

- discuss the outcome with the senior team leader and use professional judgment to determine the appropriateness of the arrangement
- discuss the child protection history outcome with the person affected to clarify any issues, if necessary
- clearly document the decisions and the arrangements made between the relevant parties
- do not disclose the outcome of the child protection history check to the parents of the subject child or to any other third party, due to privacy issues in relation to the nominated person
- review the details of the safety plan to ensure the child’s safety - this may include the decision that a placement intervention is required.

**Placement interventions**

A placement intervention must be used under the following circumstances:

- an immediate safety plan could not be developed with the family and at least one network member to ensure the child’s safety in the home
- it is in the best interests of the child to be provided with a formal, legal care arrangement
- it is assessed that the parent (and/or the proposed person to care for the child) may not adhere to a private arrangement and the child will return to the parent and the environment where the high risk factors exist, and the parent is more likely to adhere to a formal arrangement
- when the parent cannot identify a person to care for the child and the child requires a placement with an approved foster carer.

A placement intervention can occur by way of:

- a care agreement - where the parents agree to work with Child Safety in a voluntary capacity
- an assessment order (TAO or a CAO with custody to the chief executive) - where further assessment is required, and a parent does not agree to the placement of the child in care
- a TCO - where a child has already been assessed as being in need of protection, and a parent does not agree to the placement of the child in care
- an interim order, or a child protection order with custody or guardianship to the chief executive, because no other interventions are available to adequately ensure the child's immediate safety.

Where a placement intervention is being considered for an Aboriginal or Torres Strait Islander child that would grant custody or guardianship to the chief executive:
- advise the parents of their right to have an independent person help facilitate their participation in decision-making regarding the decision, including where and with whom the child will live
- arrange for the independent person, including determining their suitability, unless it is:
  - not practical because the person is not available or because the decision must be made urgently
  - likely to have a significant adverse effect on the safety or emotional wellbeing of the child or another person
  - not in the child’s best interest
- give proper consideration to the views of the child and family in a decision about where and with whom the child will live.

For information about determining suitability to be an independent person, refer to Chapter 10.1 Decision-making about Aboriginal and Torres Strait Islander children.

Where a decision is made to place an Aboriginal or Torres Strait Islander child, ensure compliance with the placement element of the child placement principle, refer to Chapter 5 Children in care.

A placement intervention as part of the safety assessment will end when:
- a subsequent safety assessment establishes that the child is 'safe with an immediate safety plan' and can be returned home with safety plan in place
- a subsequent safety assessment establishes that there are no longer any 'immediate harm indicators' present and the child can return home safely
- the investigation and assessment is finalised and a decision is made as part of a case plan that the child will remain in care.

Concerns regarding a baby after birth

When it is assessed that a newborn baby's immediate safety needs warrant the child's removal from the parent following the birth, discussion will occur with employees of Queensland Health or the private hospital.

Employees of Queensland Health or the private hospital can only be requested to assist if:
- the child's immediate safety needs have warranted the child's removal from the parent under the Child Protection Act 1999, section 18, or
- the parents have entered into a care agreement, or
• custody of the child has been granted to the chief executive under a TAO, CAO, TCO or a child protection order.

Where authority under the Child Protection Act 1999, has been obtained:
• consult with the hospital staff to determine if the child can be placed in the nursery until they are able to be discharged
• locate an appropriate placement for the child as soon as practicable, to minimise delays in the discharge of the child from the nursery.

For an Aboriginal or Torres Strait Islander child, talk with the family to identify family or kin who may be potential carers for the child or provide information about other placement options that comply with the child placement principle.

Where a child’s immediate safety needs warrant their removal at birth, family contact arrangements from birth are crucial, as early attachment with a primary caregiver is extremely important to the overall emotional health and wellbeing of children, and to healthy adolescence and adulthood. For further information refer to Chapter 5, 2.5 Facilitate and monitor family contact and Chapter 5, 3.14 Make family contact decisions.

2.7 Gather information from other sources

In the process of contacting or interviewing children and relevant family members, other potential sources of relevant information are likely to be identified. These sources may not have been known at the time of the investigation and assessment planning, for example:
• school personnel
• other family members or significant people that may be able to provide relevant information, including people identified by a child and family as being able to provide cultural advice
• the family doctor, a child health nurse, or Child and Youth Mental Health Service
• the National Disability Insurance Agency (NDIA) regarding a child’s National Disability Insurance Scheme (NDIS) access status, plan or supports
• other professionals and staff of agencies or support services, to whom the child or family are known.

These sources should be contacted as part of the investigation and assessment.

Note: Contact with other sources during the investigation and assessment is not considered to be a pre-notification check and does not enable a notification to be downgraded.

When contacting other agencies, request that all relevant information is gathered, particularly when an agency may have more than one file on a child or family, for example, Queensland Health. The Child Protection Act 1999, section 159MB provides authority for agencies to share a relevant child’s personal information with Child Safety during an investigation and assessment.

Child Safety may request stated information about a child, an unborn child or another person from the public guardian, a prescribed entity, a licensee (an entity licensed to provide placement services to children in the custody or guardianship of the chief executive) or the person in charge of a student hostel, using the Section 159N information request, and the request must be complied with (Child Protection Act 1999, section 159N).
For guidance about requesting information refer to Chapter 10.3 Information sharing for service delivery coordination.

Information may also be received about a criminal matter involving a child subject to an open investigation and assessment via an ‘Integrated justice information strategy (IJIS) notification (Criminal court matter alert)’ or about a criminal or domestic violence matter via an ‘IJIS electronic transfer of court result’ email. For further information, refer to Chapter 1.17 What if information is received via an Integrated Justice Information Strategy automated email alert? and the practice resource Receiving Integrated Justice Information Strategy email alert information.

Relevant information may also be attached to a section 55 request from a Queensland court under the Domestic and Family Violence Protection Act 2012, section 55. For further information, refer to Chapter 1.17 What if a request for information is received from a Queensland court under the Domestic and Family Violence Protection Act 2012 and the practice resources Section 55 requests - Domestic and Family Violence Protection Act 2012 and Guidelines for departmental staff when providing information to the court regarding a domestic violence order application.

Criminal and domestic violence history checks
Information gathered from the parents or adult household members about any criminal or domestic violence history must be considered and assessed. Under the Child Protection Act 1999, section 95(3), a request to QPS for criminal and domestic violence history reports can be undertaken at any time a decision is being made in relation to a child when:

- a parent or household member refuses to disclose their criminal or domestic violence history, and reliable information cannot be gathered from other sources
- it is assessed that a parent or household member has not fully disclosed any history
- it is alleged that a parent or household member has a history of offences against children, but the full history is not available.

A request to QPS may also be made for any criminal and domestic violence history about another adult against whom an allegation of significant harm or risk of significant harm has been made.

In most instances these requests will not be urgent.

To complete a non-urgent QPS criminal and domestic violence history check:

- seek the CSSC manager’s approval for the request
- complete the QPS - Non-urgent criminal and domestic violence history check request spreadsheet, completing all mandatory fields
- forward the spreadsheet via email to the CSU group email address (CSU.Section95@communities.qld.gov.au) - the subject line in the email should include ‘Section 95 request for history’.

QPS will mail a hard copy of the results of their searches to the CSU. The CSU will email these documents to the requesting manager and also send them by mail to the CSSC.

The CSU is unable to forward the request to QPS if the mandatory fields are incomplete. If these details are not known, the local Child Protection and Investigation Unit (CPIU), QPS may assist in providing relevant information to enable the spreadsheet to be completed.
An urgent criminal and domestic violence history check may be required in some circumstances, such as:

- to assist the completion of the initial safety assessment (*Child Protection Act 1999*, section 95(3))
- to facilitate provisional approval of a carer applicant for an emergency placement, refer to Chapter 8, 1. What if the applicant requires provisional approval?
- when a written record of history is required as evidence in an application for a CAO or TCO (*Child Protection Act 1999*, section 95(2)).

The Police Information Centre will process an urgent criminal or domestic violence history check when the rationale for the urgency is one of the following:

- a child is to be removed from a carer or parent on the same day as the request
- a child is to be placed with a carer or parent on the same day as the request
- an application for a TCO will be made on the same day, and the CSO requires this information to support their application, or
- there are serious concerns of a criminal nature about a parent or household member that is likely to require a 24 hours response by Child Safety.

For further information on urgent requests, refer to *Chapter 1, 1.6 Conduct urgent criminal and domestic violence history checks, if required.*

**Urgent after hours requests**

In rare circumstances, for example, when an investigation and assessment is continuing after hours and urgent criminal and domestic violence history is required to inform the assessment or the placement of a child, checks can be conducted (between 3:30pm and 8am, Monday to Friday) by the CSAHSC.

To complete an urgent after hours QPS criminal and domestic violence history check:

- seek the CSSC manager or a senior team leader’s approval for the request
- complete the QPS - Urgent Request (After Hours) form, completing all mandatory fields
- email the form to the CSAHSC at CSAHSCIntake@Communities.qld.gov.au and phone to confirm receipt.

CSAHSC will forward the request to QPS and complete other tasks where negotiation has occurred by contact between the CSSC and CSAHSC.

**Information from Medicare Australia**

Medicare Australia can share information with child protection agencies when the agency has reasonable grounds for believing that disclosure is necessary to prevent or lessen a threat to life, health or welfare of a child.

Information that Medicare Australia can share includes:

- records of any treating doctors and their location and history of visits to medical practitioners
- Pharmaceutical Benefits Scheme records, for example, to assess parental prescription drug abuse
- Medicare numbers
• a history of Medicare access, for example, to assess medical neglect cases.

To request information from Medicare, complete the Medicare Request Form and email the form to DMS (DMS_Medicare@communities.qld.gov.au) with a subject heading of ‘Response Priority. Medicare Request for Family Name’.

**Substance misuse or abuse by a parent**

In circumstances where parental substance misuse or abuse is identified as a risk factor and clarification or further assessment information is required, contact an Alcohol, Tobacco and Other Drugs Services professional, prior to finalising the investigation and assessment, to:

• gain general, non-identifying advice or knowledge in relation to drug or alcohol issues
• gain specific information in relation to the potential impact of the drug misuse on the parents’ ability to parent.

For further information about responding to issues of substance misuse or abuse by a parent, refer to Chapter 10.7 Undertake the substance testing of parents.

**3. Assess the notified concerns and the child’s need for protection**

**3.1 Complete the family risk evaluation**

The purpose of the family risk evaluation is to provide an objective evaluation about the probability of further incidents of abuse or neglect by a parent in the family, which may result in harm to a child in the next 12 to 24 months, and help guide decision-making about the need for ongoing intervention with the family to reduce the likelihood of future harm.

The family risk evaluation is completed after all the investigation and assessment information has been gathered and prior to the determination of the investigation and assessment outcome. It includes two sets of questions, or indices - one for neglect and one for abuse. Each possible answer has an assigned score. The scores from each of the indices are totalled and the highest score becomes the ‘scored risk level’ for the family. The ‘scored risk level’ classifies the family into one of the following three risk levels: low, moderate or high.

The risk level recorded on the initial family risk evaluation will later be used, if ongoing intervention occurs with the child and their family, as part of assessing the family risk re-evaluation assessment to evaluate the family’s progress.

The family risk evaluation is **not completed** for a harm report or for the investigation and assessment of an unborn child, unless the child is born prior to the approval of the investigation and assessment, in which case, the family risk evaluation will be completed.

To complete the family risk evaluation:

• complete one family risk evaluation only per household, or one for each family, where more than one family lives in one household
• use the information gathered during the investigation and assessment and the definitions in SDM: Family risk evaluation to work through the list of questions and answer all questions for both the neglect and abuse indices - where the answer is unknown, take all possible
steps to gather the information required, and if no information is available, score the item as ‘0’

- refer to the SDM primary parent definition when answering each question
- use professional judgement to determine whether either a policy override is applicable, which changes the ‘scored risk level’ to ‘high’, or whether there are additional risk factors that require a discretionary override to increase the scored risk level by one
- seek senior team leader approval for the use of a discretionary override, if required
- record the family risk evaluation in ICMS and submit it to the senior team leader for approval.

Note: Where parents are separated and two notifications have been recorded due to alleged significant harm or risk of significant harm occurring in both households, complete a family risk evaluation for each household.

For further information in relation to the primary parent and the use of a policy override, refer to the practice resource Family risk evaluation.

Use the risk level to:

- assist decision-making about ongoing intervention (see Case open/close recommendation below)
- determine the amount and frequency of contact a CSO will have with a child and family during ongoing intervention, refer to Chapter 4, 4.2 Implement departmental contact requirements.

For an ASC co-response, Child Safety retains responsibility for completing the Family Risk Evaluation.

**Case open/close recommendation**

The family risk evaluation risk level does not determine whether a case is opened for ongoing intervention, but it assists the worker’s professional assessment and decision-making about whether a child is in need of protection and, for families with a final ‘scored risk level’ of ‘high’, it recommends that a case be opened for ongoing intervention.

For further information refer to 4.1 Decide whether there will be ongoing intervention and 4.2 Determine whether there will be a referral to another agency.

### 3.2 Determine whether the child is in need of protection

The purpose of an investigation and assessment is to determine whether a child is in need of protection (*Child Protection Act 1999*, section 10). A child in need of protection is a child who:

- has suffered significant harm, is suffering significant harm or is at unacceptable risk of suffering significant harm and
- does not have a parent able and willing to protect the child from the harm.
Assessing a child’s need for protection

The determination about the child’s need of protection is informed by risk assessment. This risk assessment is based on professional judgement and a weighing up of:

- the risk and protective factors as outlined in the Practice guide: The assessment of harm and risk of harm
- the outcome of the family risk evaluation, particularly where the outcome differs from the assessment of the authorised officer, refer to 3.1 Complete the family risk evaluation.

For further information about assessing a child’s need for protection, refer to the practice resource Recording your professional assessment about whether the child is in need of protection.

For an Aboriginal or Torres Strait Islander child, where an outcome of ‘child in need of protection’ is being considered or is likely, arrange for a private convenor or family group meeting convenor to convene a family-led decision making process, to assist with determining whether the child is in need of protection, where:

- it is practicable and in the best interests of the child
- the family agrees to the process taking place.

Note: where a family-led decision making process is convened by the Family Participation Program service, the process is referred to as Aboriginal and Torres Strait Islander Family-Led Decision-Making.

The purpose of the family-led decision making process is to give the child’s family group a culturally safe process to consider the concerns and develop a family plan to respond to the child’s needs, including:

- any family resources and capabilities to support the child and parents and mitigate risk, with the intent of preventing the need for ongoing intervention for the child
- family strategies to minimise the degree and length of any necessary ongoing intervention
- alternatives to placement in out-of-home care or culturally appropriate placement options in line with the child placement principle.

For more information about the family-led decision making process, refer to Chapter 10.1, section 3 Refer the family for family-led decision-making.

Prior to a family-led decision making meeting, advise the family and where relevant the child, of their right to have an independent person help facilitate their participation in this process and, where requested arrange for the independent person, including determining suitability, unless it is:

- not practicable because an entity is not available
- likely to have a significant adverse effect on the safety or emotional wellbeing of the child or another person
- not in the child’s best interest.

For information about determining suitability to be an independent person, refer to Chapter 10.1 Decision-making about Aboriginal and Torres Strait Islander children.

In determining with the child’s parents, the degree of involvement the child will have in the family-led decision-making process, consider:

- their age and ability to understand
• whether it is in their best interest taking into account their emotional and psychological wellbeing
• how much information the child is already aware of and needs to know, given it has not been determined whether they are in need of protection and therefore the child may not be subject to ongoing intervention in the future.

While arranging the family-led decision-making process may take additional time, ensure all necessary action is taken to ensure the child’s safety, including, where necessary, application for a temporary assessment order or assessment care agreement.

For an unaccompanied humanitarian minor (UHM) contact the UHM program officer, Adoption Services, prior to finalising the decision about the investigation and assessment outcome. For further information, refer Chapter 1, 7. What if the child is an unaccompanied humanitarian minor?

The outcome of the investigation is not focused on whether an alleged incident or abusive action has occurred, but whether the child has been significantly harmed and whether there is unacceptable risk of significant harm in the future. To complete an investigation and assessment, consider all of the information gathered and draw on relevant professional knowledge to analyse the information and determine the appropriate outcome for each child. This decision requires:

• a holistic risk assessment for the child and family, including the consideration of cumulative harm
• an assessment of the protective factors present for the child and family.

The main focus of the investigation and assessment is determining whether the child is at unacceptable risk of significant harm in the future without at least one parent able and willing to protect them from the harm.

The outcomes do not require the criminal standard of proof (‘beyond a reasonable doubt’), but are determined on the ‘balance of probability’, that is, more likely than not. The rationale for the outcome must be clearly recorded.

Based on the assessment of information gathered during the investigation and assessment, accurately answer the following questions in ICMS for each subject child. The answer to the first three questions, determines whether the child is in need of protection.

• Was the investigation and assessment completed for this child?
• Has the child been significantly harmed?
• Is the child at unacceptable risk of significant harm, with no parent able and willing to protect them from harm?
• Is the child already subject to ongoing intervention?

**Determine an answer to the question ‘Was the investigation and assessment completed for the child?’**

This question can only be answered ‘yes’ when the key steps for completion of the investigation and assessment have been undertaken, and there is sufficient information to accurately answer the next two questions outlined below.
Determine an answer to the question ‘Has the child been significantly harmed?’

This question can only be answered ‘yes’ when actual harm has occurred and the harm is having a significant detrimental effect on the child’s physical, psychological or emotional well-being. This includes an assessment of the impact of cumulative harm.

Determine an answer to the question ‘Is the child at unacceptable risk of significant harm, with no parent able and willing to protect them from harm?’

This question focuses on whether there are current factors that place the child at unacceptable risk of significant harm, based on the assessed level and severity of risk, the outcome of the family risk evaluation and an assessment of the parent’s ability and willingness to protect the child.

In order to answer this question, assess:
- whether at least one parent is both able and willing to protect the child
- the parent’s capacity, not just intention, to act protectively
- the parent’s ability and motivation to protect the child - in circumstances where a child resides across two households, the ability and willingness of both parents to protect the child needs to be assessed.

In order to answer ‘no’ to this question at least one parent must be both able and willing to protect the child. A parent may be willing to protect a child, but not have the means or capacity to do so. This includes situations where the parent’s inability is due to factors outside their control. Alternatively, a parent may have the means and capacity to protect a child, but may choose not to do so.

If there is at least one parent able and willing to protect the child, the child cannot be considered at unacceptable risk of significant harm and therefore, is not a child in need of protection. In some circumstances, this will require an assessment of both parents, irrespective of the custody arrangements in place.

For a child already subject to ongoing intervention, including a child in out-of-home care, the answer to this question relates to the assessment of the new child protection concerns only. This question focuses on:
- the level and severity of harm that may have occurred
- the ability and willingness of the parents to protect the child from risk of that harm occurring in the future, as separate from the overall assessment of the parents that led to the ongoing intervention occurring.

Determine an answer to the question ‘Is the child already subject to ongoing intervention?’

This question refers to whether the child is currently subject to an open ongoing intervention case, as it has previously been assessed that:
- the child is in need of protection
- the unborn child will be in need of protection following their birth
- the child is not in need of protection, but the level of risk in the family is ‘high’.
When ‘yes’ is answered for this question, the investigation and assessment outcome will be either ‘substantiated - ongoing intervention continues’ or ‘unsubstantiated - ongoing intervention continues’.

Outcomes

Once the questions above have been answered for each subject child, one of the following outcomes will be recorded:

- substantiated - child in need of protection
- substantiated - child not in need of protection
- unsubstantiated - child not in need of protection
- substantiated - ongoing intervention continues
- unsubstantiated - ongoing intervention continues
- no investigation and assessment outcome.

For further information about the outcomes, refer to 4.3 Record the investigation, assessment and outcome.

Determine the outcome

The outcome for each subject child must be supported with clear information about the professional assessment of the significant harm or risk of significant harm to the child and the reasons for the outcome recorded.

A substantiated - child in need of protection outcome is recorded when it is assessed that there is an unacceptable risk of significant harm to a child, as defined by the Child Protection Act 1999, section 9, and it meets one of the following:

- significant harm has been experienced by the child and there is unacceptable risk of significant harm, as the child does not have a parent able and willing to protect them, whether or not the harm was part of the concerns received
- no actual harm has occurred but there is unacceptable risk of significant harm, as the child does not have a parent able and willing to protect them
- there is unacceptable risk of significant harm to the unborn child after birth and the parents will not be able and willing to protect the child from the harm.

In most cases, the outcome of the family risk evaluation for these matters will be high.

A substantiated - child not in need of protection outcome is recorded when it is assessed that significant harm, as defined in the Child Protection Act 1999, section 9, has been experienced by the child but there is no unacceptable risk of significant harm as the child has a parent able and willing to protect them.

There must be clear information recorded to support the ability and willingness of the parents to protect the child, not just statements to this effect.

An unsubstantiated - child not in need of protection outcome is recorded when it is assessed that either:

- no actual significant harm has occurred and there is no unacceptable risk of significant harm, as the child has a parent able and willing to protect them
- an unborn child will not be at unacceptable risk of significant harm after birth.
In most cases, the outcome of the family risk evaluation for these matters will be moderate or low. Where the outcome is high, ongoing intervention is recommended by the family risk evaluation, and the family will be offered ongoing intervention via a support service case, to address the risk factors identified. Clear information needs to be recorded about the risk factors identified and the family's response to the services offered.

When this outcome is recorded for an unborn child, no further action is required, however, where there are identified needs, and the pregnant woman has expressed a willingness to receive support and provided consent, make a referral to one of the following:

- an intensive family support service, refer to Chapter 10.14 Referral to Family and Child Connect or intensive family support services
- an Aboriginal and Torres Strait Islander Family Support Service, when the pregnant woman is an Aboriginal person or Torres Strait Islander, refer to Chapter 10.16 Referral to an Aboriginal and Torres Strait Islander family support service
- another agency that can offer the pregnant woman help and support.

An unsubstantiated - ongoing intervention continues outcome is recorded when the subject child is already subject to ongoing intervention and:

- no actual significant harm has occurred and no unacceptable risk of significant harm has been identified during the current investigation and assessment, refer to 3.2 Determine whether the child is in need of protection
- an unborn child is not at unacceptable risk of significant harm after birth.

A substantiated - ongoing intervention continues outcome is recorded when the subject child is already subject to ongoing intervention and:

- the child has suffered significant harm but no unacceptable risk of significant harm has been identified during the current investigation and assessment, refer to 3.2 Determine whether the child is in need of protection
- the child has suffered significant harm and is at unacceptable risk of significant harm, without a parent able and willing to protect the child
- the child has not suffered significant harm, but is at unacceptable risk of significant harm, without a parent able and willing to protect the child
- an unborn child will be at unacceptable risk of significant harm after birth.

Record a no investigation and assessment outcome on rare occasions only, when:

- the investigation and assessment has not commenced because the child and family could not be located and actions taken to locate them have been unsuccessful
- the investigation and assessment has commenced, but is not able to be completed, as there is insufficient information to decide on an outcome, and either:
  - the family has subsequently moved following contact by Child Safety, and is not able to be located
  - the parent has refused contact with the child and a TAO or CAO has been applied for, but the order has not been made by the magistrate or the court
- a subject child has died prior to the completion of an investigation and assessment and there is insufficient information to decide on an outcome
• a pregnant woman advises she is no longer or has never been pregnant, her appearance supports this information, and this is confirmed with her medical practitioner (or reasonable attempts have been made to do so)
• the pregnant woman has not been located and two months have passed since the estimated date of delivery.

This outcome is not to be used to:
• manage a lack of resources, or high workloads
• finalise an outstanding investigation and assessment that is only partially completed.

Prior to approving this outcome, other than for an unborn child notification, the senior team leader must consult with the senior practitioner, and record a clear rationale for its use.

When this outcome is used, complete the ‘Record of actions - mobile family’ form (if applicable) in the investigation and assessment event in ICMS and a ‘no investigation and assessment’ outcome will be recorded.

There may be times when this outcome is used for one of a number of subject children in a family, due to a child absconding or not being able to be located or contacted. In these cases, there must be an assessment that there is insufficient information already gathered about the child and family to record an outcome for the child, without the child being sighted or interviewed. In this case another outcome must still be recorded for all other subject children.

4. Finalise the investigation and assessment

An investigation and assessment must be completed and approved within 100 days of the date of the notification. Consideration must be given to procedural fairness and timely decision making.

Where the decision has been made that a child will have a ‘substantiated - child in need of protection’ outcome and a referral is made to the family group meeting convenor, the investigation and assessment must be completed and approved within seven days of the date of the referral.

Completion of an investigation and assessment requires that:
• all subject children have been sighted, and where appropriate, interviewed by a CSO - unless the differential pathway ‘contact with other professional’ is used
• the investigation and assessment is finalised, including determining the appropriate outcomes
• the investigation and assessment document is approved in ICMS by a senior team leader
• at least one of the parents is advised of the investigation and assessment outcome.

Where the differential pathway response ‘contact with other professional’ is used to complete an investigation and assessment, the sighting and interviewing of one subject child may be undertaken by another professional. For further information refer to 20. What if the investigation and assessment is to be completed using a differential pathway?
Timeframes for and ASC co-response

An ASC co-response does not alter investigation and assessment commencement or completion timeframes. Child Safety can finalise an investigation and assessment while the ASC co-responder continues to work with the family.

When the investigation and assessment is finalised, the CSO will inform the ASC funded service provider of the outcome and whether Child Safety will have further involvement with the family.

ASC funded service providers are expected to finalise their involvement with the family within 60 days of receiving the request to participate in an ASC co-response. This timeframe excludes undertaking any ‘active holding’ of a family while awaiting the commencement of another service. An ‘active holding’ period should not extend beyond 60 days of Child Safety finalising the investigation and assessment.

Record any information provided by the ASC funded service provider in the investigation and assessment event in ICMS. For more information refer to 4.3 Record the investigation and assessment outcome.

In circumstances where Child Safety has finalised the investigation and assessment and the ASC funded service provider raises new child protection concerns, the information will be provided to the relevant RIS, who will consult with the CSO and senior team leader involved in the ASC co-response, to inform the most appropriate response to these concerns.

Dispute resolution for an ASC co-response

As a general principle, the ASC funded service provider and Child Safety will seek to resolve disputes at the operational level. Final responsibility for decisions regarding a child’s need for protection remains with an authorised officer as delegated under the Child Protection Act 1999.

If there are concerns regarding the action taken as part of, or the outcome of, an ASC co-response, the senior team leader will liaise with a staff member at an equivalent level in the ASC funded service, as a first point of contact in the dispute resolution process. If the dispute cannot be resolved at this level, the CSSC manager will liaise with the ASC service manager. The CCSC manager, in consultation with the senior team leader and senior practitioner, will make the final decision about matters relating to the role of an authorised officer under the Child Protection Act 1999.

Dispute resolution processes and governance structures are to be established at a local level between Child Safety and ASC funded service providers.

4.1 Determine whether there will be ongoing intervention

Following an investigation and assessment, the decision about whether there will be ongoing intervention will be guided by the following requirements:

- ongoing intervention is required for any child who has been assessed as being in need of protection
- ongoing intervention will be offered to the pregnant woman when it is assessed that an unborn child will be in need of protection after birth, refer to Chapter 7. Support service cases
• ongoing intervention is not required for any child who has been assessed as not being in need of protection, but will be offered to the family where there is a ‘high’ outcome on the family risk evaluation.

The decision about the type of ongoing intervention that will occur with the family, will take into consideration what is required to:
  • meet the child’s protective and care needs
  • reduce the likelihood of future harm to the child.

When determining the type of ongoing intervention that is to occur, refer to Chapter 3. Ongoing intervention.

Where an Aboriginal or Torres Strait Islander child has a ‘substantiated - child in need of protection’ outcome and a case plan to address the risk factors has not already been developed at a family led decision-making process, referral will be made for a family group meeting to be held as a family-led decision making process to develop the case plan. Depending on the family’s preference, referral may be made to either the family group meeting convenor or a private convenor from an Aboriginal or Torres Strait Islander service, such as the Family Participation Program. For further information about family-led decision making, refer to Chapter 10.1, 3. Refer the family for family-led decision-making.

4.2 Determine whether there will be a referral to another agency

When a child has been assessed as not being in need of protection, but ongoing risk factors have been identified and it is assessed that the family could benefit from support to strengthen the family, consider making a referral to an appropriate service.

Where a referral is considered appropriate, discuss the referral with the child and family and where consent is provided, either provide information and advice on the service to the family, or complete and forward the relevant referral form.

Appropriate services may include:
  • a family support service
  • a referral to an intensive family support service, refer to Chapter 10.14 Referral to Family and Child Connect or intensive family support services
  • an Aboriginal and Torres Strait Islander Family Wellbeing Service, for an Aboriginal or Torres Strait Islander child, refer to Chapter 10.16 Referral to an Aboriginal and Torres Strait Islander family support service

For an ASC co-response, the ASC funded service provider will work with the CSO and the family to determine the most suitable services for a child and their family and facilitate connections and links to ongoing support for the child and family.

A referral can still be made to an Intensive Family Support (IFS) or Aboriginal and Torres Strait Islander Family Wellbeing Service without the consent of the family, however, further attempts should be made to seek and gain consent. These attempts are to be documented prior to finalising the investigation and assessment.

If a referral to a support service is made, seek confirmation the referral has been accepted and that the service will attempt to provide a service to the family to reduce the ongoing risk factors. Record this information in ICMS to inform any possible future involvement with Child Safety.
4.3 Record the investigation, assessment and outcome

Recording the investigation and assessment is a key step in the assessment of a child’s need for protection. The information recorded is critical for any ongoing or future contact with the child and family.

Recording key information

When recording the investigation and assessment, and completing the investigation and assessment event in ICMS:

- ensure all key information is recorded in the investigation and assessment event in ICMS, including:
  - the date, time and details of all contact with subject children, parents and other persons, including unsuccessful attempts
  - details of who conducted the interviews, including the names and positions of the primary and secondary officers and any police officers or other people present during the interviews
  - identifying any powers used under the authority of the Child Protection Act 1999, sections 16-18
  - whether an ASC co-response was undertaken
  - a summary of the significant information gathered from interviews and other sources, including information gathered from a government or non-government agency to commence the investigation and assessment
  - responses to the notifier’s concerns and any relevant disclosures, admissions or denials by the subject child, other children, the parents, family members or other adults
  - any information relevant to the assessment of the child’s safety and protective needs, including the immediate safety plan if one or more was developed
  - any relevant observations about the child (presentation, demeanour, developmental level), the parents (interaction with child, non-verbal cues) and the home environment
  - any action taken that assists with the assessment such as medical examinations or photographs
  - any action taken to refer a matter to QPS under the authority of the Child Protection Act 1999, section 14(2) and (3)
  - any information provided to the family about Victim Assist Queensland services
  - the rationale for decisions made throughout and at the end of the investigation and assessment process, including whether there will be ongoing intervention with the family to meet the child’s protection needs or reduce the likelihood of future harm to the child

- ensure that the Indigenous status, ethnicity and language of all subject children and other relevant persons are accurately recorded in ICMS
• ensure that the Independent entity’ form is completed for each of the following significant decisions during the investigation and assessment:
  • safety planning decisions about how to keep a child safe
  • placement decisions where a child protection care agreement or child protection order grants custody to the chief executive, where applicable
  • the ‘child in need of protection’ decision
  • any other decision for which an independent person helped the child and family to participate

• ensure that the ‘Aboriginal and Torres Strait Islander Child placement form’ is completed outlining placement options that comply with the placement element of the child placement principle

• ensure that an ASC response form is completed when an ASC co-response has been undertaken, selecting only the special services the ASC co-responder provided, if known at time of the investigation and assessment being finalised (not all referrals will be known at this time if the ASC funded service provider continues engaging with the family)

• ensure that each subject child recorded in the notification is also recorded as a subject child in the investigation and assessment, with an outcome and rationale recorded, based on a professional judgement and assessment of the risk and protective factors assessed

• ensure that an assessment and outcome is recorded for any additional subject child identified as being harmed or at risk of harm during the investigation and assessment

• ensure that all relevant ICMS forms are completed in the investigation and assessment event - for further information, refer to the practice resource Recording the investigation and assessment.

Record the outcome in ICMS

Once a determination has been made about the child’s need for protection, the investigation and assessment outcome can be finalised. The ‘Record abuse and harm’ section includes the abusive action, the person responsible for the abusive action and the resulting significant harm to the child. The ‘Record unacceptable risk of harm’ section includes the unacceptable risk of significant harm and the parent responsible for any future risk to the child. When the outcome is ‘unsubstantiated’, do not select any abusive action, resulting harm or unacceptable risk types.

When completing the tables, select only one most serious harm or risk of harm type for each child.

Record the abuse and harm

An incident of abuse resulting in harm to a child is recorded as the ‘abusive action’. The abusive action includes acts of commission or omission, as well as failure to protect a child from abuse caused by another person. The ‘resulting harm’ refers to the impact experienced by the child.

When it is assessed that a child has been significantly harmed, regardless of whether they are in need of protection, record the abuse and harm. To do this:

• select each ‘abusive action’ type experienced by the child - from List 1 in Table 1 below.
• select each ‘resulting harm’ type experienced by the child - from List 2 in Table 1 below.
• record the person responsible for each abusive action and the resulting harm type - more than one person can be responsible for the same harm type for a child.
Note: the resulting harm substantiated may be different to the alleged harm recorded in the notification.

A child who has self-harmed must not be recorded as a person responsible for that harm.

**Table 1. Record abuse and resulting harm**

<table>
<thead>
<tr>
<th>List 1 – Abusive action</th>
<th>List 2 - Resulting harm</th>
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<tbody>
<tr>
<td>• emotional</td>
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<tr>
<td>• physical</td>
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<td>• neglect</td>
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<tr>
<td>• failure to protect</td>
<td>• P ☐ E ☐</td>
</tr>
</tbody>
</table>

**Record unacceptable risk**

When it is assessed that the child is at unacceptable risk of significant harm, with no parent able and willing to protect them from harm:

- select each 'unacceptable risk of harm' type identified for the child - from Table 2 below
- select the parent responsible for each 'unacceptable risk of harm' type recorded - more than one parent can be responsible for the same 'unacceptable risk of harm' type for a child.

Note: The unacceptable risk of significant harm substantiated may be different to the alleged risk recorded in the notification.
Table 2. Record unacceptable risk of significant harm

<table>
<thead>
<tr>
<th>Unacceptable risk of harm</th>
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<tbody>
<tr>
<td>Unacceptable risk of <strong>physical harm</strong> caused by:</td>
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<tr>
<td>• physical abuse</td>
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<td>• sexual abuse</td>
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<td>• emotional abuse</td>
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<td>Unacceptable risk of <strong>emotional harm</strong> caused by:</td>
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<td>• failure to protect from sexual abuse</td>
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<tr>
<td>• failure to protect from emotional</td>
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<tr>
<td>• failure to protect from neglect</td>
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</tbody>
</table>

**Record the ‘person responsible’ and the ‘parent responsible’**

When completing the ‘Record abuse and resulting harm’ section in the assessment and outcome form in ICMS, record the details of the assessed harm and the actual incident of abuse that occurred, including the **person responsible**.

The **person responsible** is the person who is assessed as being responsible for the abusive act, which includes acts of commission or omission, as well as failure to protect. Although a parent is commonly recorded as the ‘person responsible’ for the abusive action, where applicable, the following persons may also be recorded:

• another adult who lives in the home or has regular access to the child in the home
• another child aged 10 years or over who lives in the home, who is assessed by the CSO as having the developmental ability or capacity to understand the consequences of their actions - this is not common, but may occur in some circumstances.

This information helps clarify what has happened to the child, and by whom, which is able to inform future risk assessments.

When the abusive action was carried out by someone other than the options outlined above, select one of the ‘person responsible’ options in ICMS:

• ‘not applicable - child under 10 years’ when the abusive act was committed by a child under 10 years of age
‘not applicable - other person’, when the abusive act was committed by:
- a child aged 10 years or over who does not have the developmental ability or capacity to understand the consequences of their actions
- any person who does not live in the child’s home or does not have regular access to the child in the home
- ‘not able to be identified’ when it is unclear who was responsible for the abusive action.

All persons responsible are to have been afforded the principles of procedural fairness through the opportunity to respond to the allegations and assessment, if it does not interfere with criminal proceedings.

When completing the ‘Record unacceptable risk of harm’ section in the assessment and outcome form in ICMS, record the details of any assessed unacceptable risk of significant harm where there is no parent able and willing to protect the child from significant harm, including the parent responsible for the future risk of significant harm.

It is only the parent, as defined in the Child Protection Act 1999, section 11, who can be selected as being responsible for the future risk of significant harm, even when the risk relates to abuse caused by someone else.

Where the parent of a subject child is under 18 years of age, and child protection concerns are identified for them during the investigation and assessment, or when a subject child has a child and child protection concerns are identified for them during the investigation and assessment, the child and parent cannot both be subject children on the existing investigation and assessment. In this circumstance, there must be two separate notifications and investigation and assessments recorded in relation to their specific protection and care needs. Refer to Chapter 1, 1.1 Gather information from the notifier, for further information about recording two separate intake invents in these circumstances.

In addition, a subject child cannot be recorded as a person responsible for abusive action towards another subject child in the same investigation and assessment event. Where there are child protection concerns for a child (aged 10 years or over) who is recorded as a person responsible for abusive action towards another subject child, a separate notification will need to be recorded for that child as a subject child in order for an assessment to be made regarding whether the child has suffered significant harm or is an unacceptable risk of suffering significant harm and if substantiated, to assess the child’s need for protection.

Record the type of ongoing intervention planned
The ongoing intervention section in the assessment and outcome form in ICMS documents the type of ongoing intervention planned at the time the assessment is completed.

For each child in need of protection, record one of the following types of ongoing intervention:
- ‘intervention with parental agreement’
- ‘intervention with parental agreement and directive CPO’, when the child is subject to both types of intervention
- ‘child protection order’.

Record ‘support service’ as the planned ongoing intervention when:
- a pregnant woman consents to ongoing intervention prior to the baby’s birth
• a child is not in need of protection, the family risk evaluation final outcome is high and ongoing intervention is planned.

For all other subject children, record ‘no ongoing intervention planned’.

**Approve the investigation and assessment**

An investigation and assessment must be approved **within 100 days**. A senior team leader completes all approvals, with the following exceptions:

• when an investigation and assessment relates to a vexatious or malicious notifier with a ‘no investigation and assessment outcome’, the CSSC manager must approve the investigation and assessment and provide a clear rationale for its use

• when the approving senior team leader undertakes any key steps related to the investigation and assessment, another senior team leader or CSSC manager must approve the investigation and assessment.

Where the investigation and assessment is in relation to a Youth Protocol: An agreement concerning referral, assessment, case management and support for homeless and unsupported young people (Youth Protocol) notification from a Centrelink employee, advise Centrelink of the outcome - for further information refer to Chapter 1, 3. What if Centrelink is the notifier?

**4.4 Inform the parents about the outcome of the investigation and assessment**

The *Child Protection Act 1999*, section 15(2), requires that, as soon as practicable after completing the investigation and assessment, an authorised officer must:

• tell at least one of the child’s parents about the outcome of the investigation and assessment

• if asked by the parent, provide the outcome of the investigation and assessment in writing.

In doing so, consider whether the information should be provided to both parents, especially when parents are residing separately.

**Long-term guardianship to a suitable person**

When the child has a long-term guardian, an authorised officer must tell at least one of the long-term guardians about the outcome of the investigation and assessment. In addition, an authorised officer will make reasonable efforts to contact at least one of the child’s parents unless this is not considered to be in the child’s best interest, taking into account:

• the nature and extent of the child’s connection with their parents

• the evidence supporting the allegation

• any other matter, for example if a parent’s knowledge of this investigation and assessment will have a detrimental effect on the child and the stability of the living arrangements (*Child Protection Act 1999*, section 15(3)).

Record details of the attempts made to advise the child’s parents of the allegations and the outcome of the investigation and assessment, in the ‘Information provision to parents’ form in ICMS (*Child Protection Act 1999*, section 15(5)).
Provide information to the parents

When providing this information, either verbally or in writing:

- provide sufficient information about the key child protection concerns outlined in the notification, to ensure they understand the reasons for departmental intervention, without identifying the notifier
- provide the outcome of the investigation and assessment, the rationale for the decisions made, including an explanation of the terminology and a rationale for any significant harm or risk of significant harm to the child and any safety, belonging and wellbeing needs identified
- outline the reasons and rationale for any decision to open an ongoing intervention case, to assist the parents to participate in further decision-making, and strengthen their ability to meet the child’s needs in the future.

See Resources list for examples of investigation and assessment outcome letters to parents.

Discretionary compliance with section 15

Only provide information to the extent that is reasonable and appropriate in the circumstances, where:

- someone may be charged with a criminal offence for the harm to the child, and compliance may jeopardise an investigation into the offence
- that compliance may expose the child to harm.

When considering the use of discretionary compliance:

- determine what is reasonable and appropriate in each particular circumstance, taking into account the practice considerations outlined in the practice resource Informing the parents about the harm and the outcome - section 15
- consult with the QPS if there is an ongoing criminal investigation, prior to any information being provided to the parents
- use professional judgement, the outcome of the family risk evaluation and any relevant information in relation to domestic violence issues to determine if the provision of information may expose the child to significant harm
- seek senior team leader approval for any decision not to provide the information
- record the decision, rationale and approval process in the ‘Information provision to parents’ form in ICMS.

For information about privacy considerations, refer to 2.2 Inform the parents about the allegation of harm.

Family Responsibilities Commission

The Cape York Welfare Reform trial commenced in 2008 in communities in the Far North and North Queensland regions, including Aurukun, Coen, Hope Vale, Mossman Gorge and Doomadgee.

The Family Responsibilities Commission (FRC) is a statutory body that aims to reduce welfare dependency, provide pathways to participation in the economy, and enhance educational opportunities for members of their communities. Further information including contact details is available via the FRC.
All child safety staff have a responsibility under the *Family Responsibilities Commission Act 2008* to give notice to the FRC when they become aware of alleged harm or alleged risk of harm to a child, and the child’s family resides in a welfare reform community.

When an investigation and assessment is finalised and information indicates the family lived in one of the Welfare Reform Communities for at least three months since 2008, within five days:

- confirm whether a referral for the family has been completed with the FRC
- if a referral has not been received by the FRC, complete a Notice About Child Safety and Welfare Matters and email it to the FRC
- record in ICMS when or if the form has been sent to the FRC.

### 4.5 Commencement of case management

Case management responsibility will be requested of the appropriate ongoing intervention team following the completion an investigation and assessment with:

- a ‘Substantiated - child in need of protection’ outcome, including for an unborn child
- a ‘Substantiated - child not in need of protection’ or Unsubstantiated - child not in need of protection’ outcome, with a family risk evaluation final scored risk level of ‘high’.

Case management responsibility will be accepted by:

- the CSSC in the geographical area where the child and family normally reside, or
- another CSSC, as determined by the senior team leader of the investigation and assessment team.

Case management may be requested of another CSSC in circumstances such as:

- where a child has siblings in care and case management responsibility for the siblings is held by a CSSC that could reasonably ensure adequate service provision to the child
- a child is placed in care in a different geographical location to the parents, and it is assessed that reunification is probable within a short timeframe period, so case management remains (or is held) with the CSSC where the parents reside (the reunification household).

### Principles

The following principles apply to commencement of case management.

- The safety, belonging and wellbeing of children is the focus of Child Safety intervention and the best interests of children is at the centre of all decision-making
- The care needs and safety of children in need of protection is a state-wide responsibility and decisions regarding the movement of cases from investigation and assessment to ongoing intervention will be based on the need for effective service delivery.
- Children, parents and families will receive the right service at the right time, and acceptance of case management within specific timeframes will ensure the provision of continuous and planned service delivery to children and their families.
- The primary focus of an investigation and assessment team is to assess and take action to ensure the immediate and ongoing safety of a child throughout the investigation and assessment, and for a child in need of protection, until case management is accepted by an ongoing intervention team.
- Case work and case management tasks associated with ongoing intervention for a child in need of protection sit best with ongoing intervention teams.
Differences of opinion regarding ongoing intervention will not delay acceptance of case management, and subsequently, ongoing intervention service delivery to a child and family.

**Timeframes for acceptance of case management**

To initiate the acceptance of case management the senior team leader of the investigation and assessment team will send an email request to the senior practitioner or senior team leader of the receiving CSSC and include the event ID of the finalised investigation and assessment.

Note: There is no requirement for any additional written documentation to support the case management acceptance process.

A case management acceptance request is to be accepted by the receiving ongoing intervention team (in writing) within five business days, to ensure continuous service delivery to the child.

Where geographically possible, the CSO who conducted the investigation and assessment will facilitate a warm handover for the child and family with the new allocated CSO. If this cannot occur **within five business days** of the request, the case transfer process will not be delayed.

The senior team leader of the investigation and assessment team will send a case management acceptance request for an intervention with parental agreement case as soon as:

- the investigation and assessment event is closed in ICMS
- the responsibilities of the transferring investigation and assessment team have been completed.

The senior team leader of the investigation and assessment team will send a case management acceptance request for a child protection order case as soon as:

- the investigation and assessment event is closed in ICMS
- the Director of Child Protection Litigation (DCPL) has accepted the referral and indicated that an application for a child protection order will be made, and
- the responsibilities of the transferring investigation and assessment team have been completed.

**Responsibilities of the investigation and assessment team**

The investigation and assessment team is responsible for:

- finalising the investigation and assessment
- advising one or both parents of the investigation and assessment outcome, refer to 4.4 Inform the parents about the outcome of the investigation and assessment
- approving all documents within the investigation and assessment event in ICMS
- completing the initiating affidavit where an assessment has been made that a child protection order is the most appropriate intervention for the child
- providing the initial affidavit to the OCFOS lawyer for the DCPL
- completing the case management acceptance request, when advice is received that the referral has been accepted by DCPL
- serving the respondents and completing an affidavit of service (for the initiating affidavit only)
• completing the child strengths and needs assessment tool and parental strengths and needs assessment tool for each child in need of protection
• completing a referral for a family group meeting for matters referred to the DCPL, unless a case plan was developed for an Aboriginal or Torres Strait Islander child at a family-led decision making process during the investigation and assessment.

Responsibilities of the receiving ongoing intervention team:
The senior team leader of the ongoing intervention team is responsible for:

• accepting case management in writing, within five business days of the request being made
• updating the case management screen within ICMS
• allocating case management responsibility to a CSO
• ensuring that contact with the child and family, and the carer where relevant, occurs within five business days of accepting case management
• ensuring a case plan is developed for the child

The CSSC responsible for ongoing intervention will undertake all tasks associated with case management for the child moving forward, including:

• all financial matters relating to the child’s ongoing intervention
• making a determination about kinship carer approval (where kin has been provisionally approved to care for the child during the investigation and assessment).

Escalation process
It is the responsibility of CSSC managers to resolve any issues during the handover processes and address any impediments to timely service provision to children and families, using the principles outlined above.
What ifs - responding to specific investigation and assessment matters

1. What if an open investigation and assessment needs to be transferred?

An investigation and assessment will be transferred to the relevant CSSC when:

- child protection concerns have been received and recorded by the RIS, CSAHSC or a CSSC in a different geographical area other than where the child and their family reside
- a child and their family or carer relocate during the investigation and assessment, regardless of the reason.

Where a child lives across two households, transfer the investigation and assessment to the CSSC in the geographical area of the household where the significant harm or risk of significant harm is alleged to have occurred. When concerns exist across both households, record separate notifications and transfer the investigation and assessment events to the relevant CSSCs.

The transfer process will occur in a manner that prioritises the safety of the child and provides continuous and planned service delivery to the child and family.

When a notification has been received and recorded, the open investigation and assessment will be transferred to the pending allocation tray of the relevant CSSC within the following timeframes:

- **immediately** - for a notification with a 24 hour response timeframe. In addition, telephone the CSSC senior team leader to inform them of the response required
- **within three days** - for an investigation and assessment with a five day response
- **within five days** - for an investigation and assessment with a ten day response. For further information about intake procedures, refer to Chapter 1 Intake.

On receipt of the investigation and assessment event, the receiving CSSC will:

- allocate the investigation and assessment
- commence the investigation and assessment within the required timeframe
- complete the investigation and assessment within the specified timeframe.

If a family leaves an area during an investigation and assessment, on an unplanned basis, the transferring CSSC retains case responsibility until the transfer process is completed. The transferring CSSC will:

- attempt to locate the family
- determine whether the investigation and assessment can be completed with the assistance of another CSSC, or, where the majority of the investigation and assessment tasks are still to be completed, transfer the investigation and assessment
- determine the relevant CSSC, where a transfer is appropriate
- immediately contact the senior team leader of the receiving CSSC to advise of the pending transfer and the tasks required to complete the investigation and assessment
- ensure that all information gathered as part of the investigation and assessment by the transferring CSSC is electronically recorded in ICMS as soon as possible
reassign the investigation and assessment event in ICMS to the receiving CSSC, including outstanding 'event tasks' so that any partially completed forms are also transferred
promptly transfers any paper files to the receiving CSSC.

The receiving CSSC must:
- accept responsibility for completing the investigation and assessment at the first point of contact by the originating CSSC
- allocate the investigation and assessment immediately
- ensure that the investigation and assessment is commenced within the response priority timeframe
- ensure the subject children are sighted within one week, if the investigation and assessment has already commenced
- complete a new safety assessment at first contact with the family
- complete the investigation and assessment in accordance with relevant procedures.

It is the responsibility of CSSC managers to resolve any disagreement that may occur during the transfer process of investigation and assessment cases.

If the investigation and assessment is for a child or family who has moved to another jurisdiction, refer to Chapter 1, 1. What if the child protection concerns are about a child in another jurisdiction? and 14. What if assistance is required from another jurisdiction?

2. What if a parent will not consent to actions required - use of a TAO?

Under the Child Protection Act 1999, sections 23-36, a TAO can be sought at any stage during an investigation and assessment, where a parent will not consent to actions considered essential for the completion of the investigation and assessment; there have been reasonable attempts made to obtain parental consent and the situation is urgent enough to warrant the actions by the CSSC for the next three days (as opposed to a CAO). The magistrate may decide the application for a TAO without notifying the child’s parents of the application or hearing them on the application.

The definition of parent in relation to the use of a TAO, includes long-term guardians. Therefore, when considering a TAO for a child subject to a long-term guardianship order to a suitable person, the long-term guardian has the same rights and obligations as a parent.

For more information about the provisions available under a TAO, refer to the practice resource Assessment orders.

OCFOS lawyers and senior advisors are authorised officers under the Child Protection Act, 1999, and may be the applicant for a TAO.

When CSSC staff have formed a view that an application for a TAO is necessary, they should immediately consult their OCFOS lawyer and seek their advice and agreement to proceed. This consultation should determine who will take responsibility for what tasks, including who will be the applicant for the matter.
Should there be disagreement between the OCFOS lawyer and the CSSC that cannot be resolved in a timely way, the matter should be escalated to the OCFOS senior legal officer if time permits.

Caution should be exercised in these circumstances as it will not be possible to proceed with a further application, such as an extension of a temporary assessment order or an application for a court assessment order, in the absence of agreement by OCFOS. Where OCFOS and the CSSC continue to hold divergent views, undertake an escalation process with support of the CSSC Manager and/or the Regional Director and Official Solicitor to attempt to resolve the issues and reduce the possible significant upheaval impact for the child and family.

**Preparation and appearance**

Where there is agreement to proceed with an application for a temporary assessment order or temporary custody order, the OCFOS lawyer must settle the application and any supporting material and will liaise with the court or on call magistrate to have the matter heard. The OCFOS lawyer may also assist with drafting the application, if required.

In most circumstances, the OCFOS lawyer will appear in court, or support the service centre staff to appear in person or by telephone during business hours.

The OCFOS lawyer will always seek confirmation in writing from the relevant CSO about whether the family have engaged a lawyer. If there is a lawyer involved, the OCFOS lawyer should attempt to contact them by telephone during business hours, clarify whether they represent the family and advise of the decision to make the application for a temporary assessment or custody order. If telephone contact is unsuccessful, or the application is being made after hours, an email should be forwarded to the lawyer. The OCFOS lawyer must advise the magistrate of the lawyer’s involvement.

To apply for a TAO:

- complete a ‘Form 1 - Application for a temporary assessment order’ draft in ICMS. Alternatively, a Form 1 - word template document can be completed and a dummy Form 1 can be created in ICMS
- ensure the application articulates the nature of the child protection concerns (warranting immediate action), attempts made to get the consent of at least one of the parents (but preferably both) to the actions required and the rationale for seeking the specified provisions, for example, a medical examination or custody and what is to occur over the timeframe of the order
- file the application via e-mail and make a time to appear before the magistrate, or if after hours, contact the magistrate to discuss the application for the TAO - where possible, create a draft Temporary Assessment Order (Form 3) and provide this draft Temporary Assessment Order (Form 3) for their consideration during the discussion. It is essential to double check all of the details in any draft order including the dates.

The application must advise the magistrate what actions were taken in relation to the child during any period of custody of the child under the *Child Protection Act 1999*, section 18. The magistrate must be satisfied that reasonable steps have been taken to obtain the consent of at least one of the child’s parents to do the actions being sought under the order, or that it is not practicable to take steps to obtain the consent (*Child Protection Act 1999*, section 27(2)).
Note: The application cannot be made on the same grounds as a TAO application already considered or presented to another magistrate, where the TAO was refused. Also an application should not be made if there is an existing child protection order proceeding in a court. The appropriate action is to urgently list the matter in court before the magistrate dealing with the application and who knows the case.

When a TAO is granted by a magistrate:

- finalise the ‘Form 1 - Application for a temporary assessment order’ in ICMS
- record the order details in the ‘Form 1 - Temporary assessment order outcome form’ (TOF) in ICMS
- obtain a copy of the TAO (Form 3) from the magistrate and provide a copy of the order to at least one of the child’s parents
- tell the child about the order
- explain to the child and the parents the reasons for, and the effect of, taking the TAO
- inform the parents about the right of appeal and because of the duration of the order, that if they wish to appeal, they must take immediate action to lodge the appeal
- ensure that a child who has been placed in the custody of the chief executive, understands the reasons why they have been removed from the home and placed in out- of-home care.

When the child has a long-term guardian, make reasonable attempts to tell at least one of the parents about the reasons for and the effect of taking the TAO and the right of appeal, and serve them a copy of the order. If unable to advise the parents, document full details of these attempts (*Child Protection Act, 1999*, section 32).

**Duration of the TAO**

A TAO cannot remain in effect for longer than three business days, from midnight on the date it was decided, for example, a TAO decided on Tuesday will end on Friday. Public holidays are also not included in the three business days. It is essential that these considerations are reflected on the draft order provided to the magistrate when applying for the order. The provisions of a TAO cannot be exercised once the order has ended.

If the magistrate is satisfied that Child Safety intends to apply for a CAO or DCPL intend to apply for a child protection order, the TAO can be extended, once only, to the end of the next business day. This allows the application for another order to be lodged with the court during business hours. The application for another order must be lodged before the court closes on the day the TAO expires. Complete the application for the TAO extension in the same event in ICMS as the initial application.

Alternatively, a TAO which is granted for a period of either one or two days can be extended when a CAO or a child protection order is not being sought. In these circumstances the TAO can only be extended for a maximum or either two or one day, respectively (*Child Protection Act 1999*, section 34 (5)).

Where an application for a CAO or CPO has been filed prior to the expiration of a TAO, under section 99 of the *Child Protection Act 1999*, a custody provision under this order will continue in force until the subsequent application is decided or the Childrens Court orders an earlier end.
Assessing safety prior to returning a child to the care of the parents

When a child has been placed in out-of-home care subject to a TAO granting custody to the Chief Executive, conduct an assessment of the child’s safety prior to returning the child to the care of the parents. To assess the child’s safety, consider all of the available information and complete the safety assessment in ICMS.

If the child is considered to be ‘unsafe’, determine the appropriate intervention that will ensure the child’s safety in consultation with the OCFOS lawyer and where applicable, OCFOS will lodge an application for a CAO or refer the matter to DCPL for a child protection order to be applied for, before the expiration of the TAO.

3. What if a parent will not consent to actions required - use of a CAO?

Under the Child Protection Act 1999, sections 37-51, a CAO can be sought at any stage during an investigation and assessment, where a parent will not consent to actions considered essential for the completion of the investigation and assessment, or it is not practicable to obtain the parent’s consent, and it has been determined that more than three business days will be necessary to complete the investigation and assessment.

This includes circumstances where initial contact has occurred, but consent for subsequent actions is refused by the parents.

The definition of parent in relation to the use of a CAO includes long-term guardians. Therefore, the long-term guardian has the same rights and obligations as a parent. Long-term guardians are listed as ‘other respondent’ in the application.

Given the greater opportunity to plan and consult in preparation for an application for a CAO, no application should be filed without consultation and ultimately agreement from the OCFOS lawyer and in most circumstances, the OCFOS lawyer should be the applicant for the order.

When considering a CAO application, the Childrens Court must consider the views of Child Safety when making decisions about contact between a child and their family for the time the child is in the custody of the chief executive. This includes:

- whether any contact with the child should be supervised
- the duration and frequency of the contact.

For more information about the provisions available under a CAO, refer to the practice resource Assessment orders.

To apply for a CAO:

- complete the ‘Form 5 - Application for a court assessment order’ in ICMS. Alternatively, a Form 5 - word template document can be completed and a dummy Form 5 can be created in ICMS
- clearly articulate the nature of the concerns, attempts made to get the consent of at least one of the parents to the actions required and the rationale for seeking specific provisions, for example, a medical examination or custody
- complete the ‘Independent entity’ form on ICMS
• lodge the application, including the above form, with the Childrens Court and seek a hearing date from the registry. Create a draft court assessment order (Form 7) and provide this draft Court Assessment Order (Form 7) to the registry
• serve the documentation on the child’s parents.

When the child has a long-term guardian, make reasonable attempts to also serve each of the parents and if they are represented, their lawyers. If it is not possible to serve the parents, document full details of these attempts (*Child Protection Act 1999*, section 41).

When a CAO is made:
• complete in ICMS, either:
  • the ‘Form 5 - Court outcome form (COF) - final order’
  • the ‘Form 9 - Court outcome form (COF) - Adjournment order’, if an adjournment is granted
• obtain a copy of the Court Assessment Order (Form 7) from the Court
• provide a copy of the order to the child and the child’s parents
• explain to the child and the parents the reasons for, and the effect of, taking the CAO
• provide written notice to the child and the parents, explaining the terms and effect of the order, that the parties may appeal (within 28 days), and how to appeal
• ensure that a child who has been placed in the custody of the Chief Executive, understands the reasons why they have been removed from the home and placed in care.

When the child has a long-term guardian, also provide a copy of the order to the parents and advise them of the terms and effect of the order, and the appeal rights. If it is not possible to advise the parents, document full details of these attempts (*Child Protection Act, 1999*, section 48).

It is essential that any CAO is linked to a TAO, for further information on recording a CAO application and outcomes in ICMS, refer to the resource ICMS – Child Protection - Linking of court orders.

**Duration of the CAO**

A CAO cannot remain in effect for any longer than 28 days, from midnight on the date the application for the CAO was first brought before the Childrens Court. The provisions of a CAO cannot be exercised once the order has ended.

If an investigation and assessment cannot be completed in the 28 day period, a CAO can be extended, once only, to allow the investigation and assessment to be completed. The court can only extend a CAO if satisfied that it is in the child’s best interests. The application for an extension of a CAO must be lodged and determined before the expiry of the original CAO, and can be for no more than 28 days. Complete the application for the CAO extension in the same event in ICMS as the initial application.

Before a decision is made to apply for an extension of a CAO, consultation with the OCFOS lawyer should occur and ultimately agreement from them for this course of action. Again, in most circumstances, the OCFOS lawyer should be the applicant for the order.
Additionally, before application is made to extend the CAO, depending on the child's age and level of understanding, consult the child to obtain their views about arrangements for their care for the duration of the extension.

When a child is subject to a CAO and an application for a child protection order granting custody or guardianship will be made by DCPL, the application must be lodged before the CAO expires. In this circumstance, custody under the CAO will continue in force until the CPO application is decided or the Childrens Court orders an earlier end to the order.

Assessing safety prior to returning a child to the care of the parents

When a child has been placed in out-of-home care subject to a CAO granting custody to the chief executive, conduct an assessment of the child's safety prior to returning the child to the care of the parents. To assess the child's safety, consider all of the available information and complete the safety assessment.

If the child is considered to be ‘unsafe’, consult with the OCFOS lawyer to determine the appropriate ongoing intervention that is likely to ensure the child's safety which may include the possible referral of the matter to DCPL. This consultation needs to occur approximately two weeks prior to the expiry of the CAO or CAO extension to allow sufficient time for the OCFOS lawyer to refer the matter to DCPL and for DCPL to make a decision as to whether to proceed with filing an application for a CPO and undertake any necessary action required.

4. What if a joint investigation with the Queensland Police Service is required?

Child Safety has a legislative responsibility to immediately notify the QPS where it is reasonably believed that harm to a child may involve the commission of a criminal offence relating to the child (Child Protection Act 1999, section 14(2)). This applies whether or not Child Safety suspects the child is in need of protection (Child Protection Act 1999, section 14(2) and (3)).

Where this occurs, in consultation with the QPS, determine whether there will be a joint investigation. A joint investigation allows each agency to meet their respective statutory responsibilities while addressing the protection needs of the child. It links the role of Child Safety to investigate and assess significant harm and risk of significant harm with the criminal investigation role of the police.

For further information about the roles and responsibilities of each agency when conducting a joint investigation, refer to the practice resource Planning for and undertaking a joint investigation.

Refer the matter to the QPS

To refer a matter to the QPS, complete a Police referral and provide this, along with a copy of the child concern report or notification, where relevant.

Any requests from the QPS to release information about a notifier, to enable them to perform functions under the Child Protection Act 1999, section 186(2)(a) must be approved by the CSSC manager, RIS manager or CSAHSC manager.
Prior to approving the release of notifier details, the CSSC manager, RIS manager or CSAHSC manager must be certain that:

- the request is in accordance with the relevant section in the *Child Protection Act 1999* and its intent and
- there is no other viable way for the person (QPS) to perform their functions under the *Child Protection Act 1999*, a child welfare law or interstate law without the release of notifier information and
- alternative means of obtaining information that will enable the person to perform functions under the legislation have been considered - for example, a CSO recontacting the notifier to seek more detailed or additional information which can be provided to the person making the request.

When the release of notifier details is approved, only provide information to the extent necessary to enable the person to carry out their functions under the *Child Protection Act 1999*, a child welfare law or interstate law.

Send the information to the QPS, in descending order, to the officer in charge of the nearest:

- Child Safety and Sexual Crimes Group (in the Brisbane metropolitan area)
- Child Protection and Investigation Unit (CPIU)
- Criminal Investigation Branch (CIB)
- police station.

Following the written referral, contact the QPS by phone to determine whether a joint investigation is required, and where applicable, to commence joint planning.

**Note:** Where Child Safety becomes aware of alleged harm to a child that may involve the commission of a criminal offence relating to the child, immediately provide the referral to the QPS and confirm receipt via telephone. This will allow the best opportunity for ICARE interviews to be conducted within school hours if required. Refer to *What if a child needs to be interviewed without parental consent - section 17*.

Ensure the regular exchange of information with QPS for the duration of the joint investigation, and where applicable, on an ongoing basis, for example, regarding criminal court proceedings and outcomes.

**Undertake joint planning**

When a joint investigation is required, **prior to** the commencement of the criminal investigation and investigation and assessment, contact the investigating police officers and plan the joint investigation.

Once planning is complete and prior to the commencement of the joint investigation:

- seek verbal approval from the senior team leader for the agreed plan for the investigation and assessment
- consult QPS prior to any major deviation from the agreed plan.

When the matter requires urgent attention and the QPS are unable to attend within the required response timeframe, notify the QPS of the decision to proceed and the reason for doing so. In this circumstance, prior to an investigation and assessment commencing, the senior team leader:
• gives approval for the investigation and assessment to proceed
• ensures the QPS has been notified of the decision to proceed in their absence
• ensures that any action by Child Safety does not interfere with a QPS investigation into a criminal offence, if possible.

Ensure that the QPS is kept informed and updated during the investigation and assessment process.

**Interview the child and record evidence**

Where an interview with a child is conducted in accordance with the *Evidence Act 1977*, section 93A, the interview should, be undertaken by an officer (whether an authorised departmental officer or QPS) who is accredited in *Interviewing Children and Recording Evidence (ICARE)*, where practicable. ICARE interviews will also be conducted jointly with the QPS whenever possible. In such circumstances, the police officer and authorised officer will discuss all relevant material and the most appropriate and effective approach to conducting the interview, prior to the interviews being conducted.

In the absence of the QPS, follow existing investigation and assessment procedures for record keeping, but do **not** use video or audio equipment to record a child's interview - this includes ICARE trained authorised officers. File any written records made during the interview on the child’s paper file. Copies of these interview notes may be provided to the QPS.

Where an interview of a child is being conducted by departmental officers only and the child begins disclosing incidents of harm relating to a criminal offence, and ceasing the interview would hinder the provision of information and safety of the child, continue the interview and contact the QPS immediately after the interview.

In this situation:
• ensure that the child is supported and will feel safe to speak at a later time
• gather sufficient information to be able to ensure the child’s immediate safety and take any required action, including legal action, to ensure the child’s safety (for example, use of the *Child Protection Act 1999*, section 18, or a TAO).

In this circumstance, provide all interview notes to the QPS. Departmental officers may also be required to provide a statement to the QPS regarding the disclosures made by the child during the interview. Subsequent interviews with the child are most likely to be led by the QPS, who will facilitate the recording of the interview. Departmental officers will document their participation in the interview in a case note in the relevant ICMS event.

**Interview the alleged offender**

Following a child’s disclosure of harm, it is QPS policy and procedure that interviews involving possible offenders are to be conducted by police officers. In this circumstance, if there is to be a joint investigation, the QPS will decide who will conduct the interviews and when they will occur.

In some instances, where the alleged offender is a parent of the child, and where appropriate, an authorised officer may be permitted to observe the interview from a viewing room and take relevant notes. If the police conduct an interview without an authorised officer being present, or where an authorised officer has only observed an interview, an authorised officer will also interview both parents **prior to** finalising an investigation and assessment.
On occasion a police officer may decide that it is more appropriate or convenient for an interview to occur in a person’s home or another location. Where such an interview is conducted by police with a parent or guardian, for example, conducted at the residential address of a parent, the interview may be conducted in the presence of the authorised officer.

In circumstances where the QPS are not able to attend interviews, Child Safety is still obliged to investigate and assess the safety and wellbeing needs of the child, without addressing the criminal matters with the parents.

**Obtain information from the QPS**

If an authorised officer requires a copy of the taped interview or information obtained during an interview, the CSSC manager will request the information from the QPS in writing, by completing a [Section 159N information request](https://www.qld.gov.au). Where QPS approval has been granted, it may be possible for the video evidence to be viewed at the police station.

An audiotape provided to a departmental officer remains the property of the QPS and must **not** be released to a third party (but may be subject to disclosure during Childrens Court proceedings).

Any person that does not work for Child Safety, that requests access to the audiotape, will be referred to the QPS.

**Refer the matter to a SCAN team**

Officers of Child Safety and QPS may make a referral to a SCAN team when the case meets the mandatory referral criteria. Complete the [ICM and SCAN team form 1 - Request for multi-agency meeting](https://www.qld.gov.au) to action the referral.

A referral to a SCAN team **does not** constitute meeting the legal requirement for Child Safety to immediately notify the QPS of information under the *Child Protection Act 1999*, section 14(2) and (3).

For further information about SCAN team referrals, refer to the [Information Coordination Meetings (ICM) and the Suspected Child Abuse and Neglect (SCAN) Team System Manual](https://www.qld.gov.au).

**Resolve differences of opinion**

At times there will be differences of opinion between officers of the department and the QPS, due to the different roles and legislative responsibilities and priorities. These differences are to be resolved as soon as possible after they arise and with the safety of children as the key priority.

Note: For further information about **immediately** notifying the QPS of possible criminal offences refer to [Chapter 10.2 Statutory obligation to notify the Queensland Police Service of possible criminal offences](https://www.qld.gov.au) and the practice resource [Schedule of criminal offences](https://www.qld.gov.au).

5. **What if a child needs to be interviewed without parental consent - section 17?**

The *Child Protection Act 1999*, section 17, enables an authorised officer or police officer to have contact with a child at a school, or place where child care is provided, to investigate allegations,
before the parents are told. Powers under this section should only be used if the officer reasonably believes that:

- it is in the child’s best interest that the officer has contact with the child, before the parents are told about the investigation and assessment
- prior knowledge of the proposed contact with the child by the child’s parents is likely to adversely affect the investigation and assessment.

When considering the use of section 17, the definition of parent includes long-term guardians. Therefore, the long-term guardian has the same rights and obligations as a parent.

**Interview the child prior to parents**

Interview the child prior to interviewing the parents when:

- concerns relate to the commission of a criminal offence and a joint interview with the QPS requires the preservation of evidence from the child
- the child may be placed at greater risk by interviewing the parents first
- the concerns involve sexual contact between the child and a parent, and there is reason to believe that:
  - a parent will influence the child to withhold information or retract information that has already been given
  - the child would not receive support from a parent and is likely to be harmed or adversely influenced during the investigation and assessment process
  - the child has made a disclosure and more detailed information is required prior to interviewing the parents
  - the parents are unavailable and it would be inappropriate to delay the commencement of the investigation and assessment
  - a child self-refers.

**Use of section 17 to have contact with a child**

When it is considered necessary to have contact with a child, prior to the parents being told of the contact with the child and the reasons for the contact, the use of powers under the Child Protection Act 1999, section 17 is required.

Prior to exercising the use of powers:

- consult a senior team leader
- consider whether the QPS should be involved in the interview, depending on the nature of the concerns, and make a referral to the QPS, if applicable
- notify the principal or person in charge of the school or place where the interview will be held, of the intention to exercise the power - contact with the child can only occur lawfully and with the permission of the person in charge of the facility.

If access is denied, the power **cannot** be exercised and other options for contact with the child must be considered.

When contacting the principal, or other person in charge, discuss:

- the need to interview the child prior to the parents being made aware of the concerns, the general nature of the concerns, sufficient information to ensure an effective interview and the rationale for the decision
• their obligation to maintain confidentiality under the Child Protection Act 1999, section 188, including ensuring adherence to confidentiality by other personnel and not informing parents of child protection concerns or that an interview has, or will, take place without their consent
• the names and positions of interviewing officers.

In addition, negotiate the following matters with the principal, or person in charge:

• an interview time that minimises interruption to the child’s usual school routine and avoids or reduces feelings of embarrassment or distress that the child may experience by being interviewed at school
• the conditions of the interview, including an appropriate venue and how the interview will be conducted
• whether there will be a staff member present during the interview.

When discussing whether a staff member will be present, advise the principal or person in charge of the alleged nature of the concerns prior to the interview, and advise that the person may be called to give evidence as a result of their participation in the interview.

Note: If the interview is an ICARE interview with the QPS, the support person should not be the person the child initially made disclosures of harm to, as this person may be considered by the QPS as a witness for any subsequent criminal proceedings.

At the commencement of the interview, show identity cards to the principal or other person in charge and ensure that the child will be safe and supported during the interview process, by having a support person of their choice, from that location, present.

Implement actions following the use of section 17 powers

Immediately following the interview, advise the principal or person in charge of the actions that will be taken by Child Safety, of any immediate support needs the child has and that the department will advise the parents of the contact with the child and the outcome.

As soon as practicable after the interview, tell at least one of the child’s parents that the Child Protection Act 1999, section 17, was used to have contact with the child and the reasons for the contact. Make whatever effort is necessary to ensure that the parents are informed about the contact with the child prior to the child seeing their parents. It is the responsibility of Child Safety to inform parents of the contact with the child - do not place this responsibility on any other person.

In addition, advise the parents of your name, position and department, show them your identity card and commence interviews regarding the concerns. Undertake a safety assessment with the family to determine the safety of the child in the household.

When investigating concerns that relate to a child in the care of a long-term guardian, and the child is interviewed using powers under the Child Protection Act 1999, section 17, advise at least one of the long-term guardians. There is no requirement to advise the parents.

Record details of the contact with the child at the first reasonable opportunity in the ‘Record of use of powers’ in ICMS, regardless of whether an authorised officer or QPS officer has exercised the power.
6. What if Child Safety is contacted about additional concerns for a child or an unborn child?

Additional notified concerns are recorded when all of the following apply:

- there is already a notification that has not yet been approved or an open investigation and assessment event in ICMS for the child, unborn child or family
- new child protection concerns are received from a notifier and require screening to determine Child Safety’s response
- the new concerns do not meet the exceptions to recording additional notified concerns that are outlined in Chapter 1, 2.6 Decide the response.

**Do not record** an ‘additional notified concerns’ form in an intake event **where a child concern report is recorded.** Any new concerns should be recorded as a new intake event.

Whilst there is no limit to the number of additional concerns that may be recorded as part of one notification and investigation and assessment process, the ongoing receipt of additional notified concerns may indicate cumulative harm or an escalating threat to safety, and this should be considered when planning the commencement of the investigation and assessment.

When additional notified concerns are received:

- conduct a child protection history check
- conduct a pre-notification check, if required
- complete an ‘additional notified concerns’ form in the investigation and assessment event in ICMS, which includes a screening criteria and if required, response priority
- submit the completed form to the senior team leader for consideration and approval
- consider whether a subsequent safety assessment is required, due to any changes in circumstances for the family, and review any existing immediate safety plans to ensure the safety needs of the child are still being met
- if the additional concerns meet the threshold for a notification, they must be responded to within the shortest response timeframe, which may be:
  - the response timeframe already recorded for the open investigation and assessment
  - the response timeframe relating to the new concerns.

The allocated CSO is responsible for investigating and assessing all information received about the family during the course of the investigation and assessment, until the investigation and assessment is **finalised and approved in ICMS.** This includes:

- all concerns that have been recorded, both the original concerns and any additional notified concerns that have a notification response
- any new child protection concerns that arise as part of the investigation and assessment process - which are to be assessed as part of the investigation and assessment and do not need to be recorded as additional notified concerns.

Where the investigation and assessment has commenced prior to a decision that additional concerns meet the threshold for a notification, the subject child must be sighted and interviewed to meet the new response timeframe and assess the additional concerns. At least one of the subject child’s parents should be advised of the new concerns so a current assessment of their
capacity and willingness to protect the child can be completed. If the alleged person responsible for the new harm is not a parent and it is likely that they will be recorded as a ‘person responsible’ for harm to the child, provide the opportunity for this person to respond to the allegations made against them.

Where the additional concerns do not meet the threshold for a notification, there is no need to re-interview or re-sight the child, however consider the information in the context of assessing and finalising the open investigation and assessment.

Where additional notified concerns are received and recorded and the information is to be transferred to another CSSC, the senior team leader is responsible for electronically approving the ‘additional notified concerns’ form in ICMS, prior to the transfer occurring.

**Responding to concerns that have already been received**

When a notifier contacts Child Safety with duplicate child protection concerns that have already been recorded as a notification, they may be recorded as additional notified concerns with a child concern report response. For further information, refer to Chapter 11. What if duplicate child protection concerns are received that have previously been recorded?

**7. What if the investigation and assessment is for an unborn child?**

The purpose of an investigation and assessment prior to the birth of a child is to assess the likelihood that an unborn child will need protection after birth and determine what help and support can be offered to the pregnant woman, and where relevant, her partner or the father of the unborn child. Refer to the [Unborn Child Checklist](#) for an overview of the specific steps required.

An investigation and assessment before the birth of a child is commenced when:

- the pregnant women has been sighted and interviewed, or
- new information that informs the assessment about the unborn child’s safety after birth is sought and received from a government or non-government agency (only to be used for a 5 or 10 day response priority timeframe).

Other than gathering information from a government or non-government agency, any further actions to investigate and assess concerns regarding an unborn child, require the consent of the pregnant woman and must not interfere with her rights and liberties.

Before having contact with the pregnant woman, the senior team leader will decide whether to:

- delay contact with the pregnant women until after the child is born. Refer to [Delay contact with the pregnant woman](#)
- proceed with the investigation and assessment. Refer to [Investigate and assess the concerns](#).

If the senior team leader decides not to delay the investigation and assessment, seek the consent of the pregnant woman for the investigation and assessment to proceed. If she does consent, sight and interview the pregnant woman. If she does not consent, the investigation and assessment cannot be completed until after the child is born.
Do not continue with the investigation and assessment if the woman:

- informs the authorised officers that she is no longer pregnant, due to a miscarriage or termination
- the woman states that she was never pregnant and it appears from her physical presentation that she is not pregnant.

Seek confirmation that the woman is not pregnant from the woman's medical practitioner, if their details are known. This action does not require the woman's consent.

**Delay contact with the pregnant woman**

The decision to delay contact with the pregnant woman until after the birth of a child will only occur when there is a high probability that, if alerted to the concerns, the pregnant woman would relocate to avoid intervention by Child Safety at the time of the birth, thus placing the newborn baby at increased risk of significant harm.

Information to inform the assessment about the likelihood of the woman relocating and the level of risk of harm to the newborn if this occurred, may be included in the notification or may be gathered from a government or non-government agency as part of the action to commence the investigation and assessment.

When contact with the pregnant woman has been delayed:

- the senior team leader will record the rationale and date of the decision to delay contact with the pregnant woman in the investigation and assessment event in ICMS
- record an 'unborn child alert' on the person records of the pregnant woman and the unborn child in ICMS
- keep the investigation and assessment event open in ICMS until the child is born and the investigation and assessment is completed
- complete and forward an HRA Form 1: Unborn child high risk alert: Request for immediate notification when pregnant woman presents for delivery to the hospital/s where the pregnant woman is likely to give birth, refer to Queensland Health – List of maternity hospitals and nominated positions, and/or a letter to the private or interstate hospital/s where the pregnant woman is likely to give birth, refer to practice resource Unborn children
- in exceptional circumstances only, where the pregnant woman is highly mobile and it is not possible to identify the hospitals where she is likely to give birth, send the ‘HRA Form 1’ to the group email address for public hospital child protection staff Statewide_HRA@health.qld.gov.au AND to the Mater Mothers’ Hospital email address for High Risk alerts CPLO@mater.org.au To activate the email, the subject title must be ‘Statewide HRA’. This email address is monitored during business hours only. In rare situations where it is necessary to urgently alert all public hospitals to the ‘HRA Form 1’ outside business hours, complete and forward:
  - the form via facsimile to all hospitals - refer to Queensland Health - List of maternity hospitals and nominated positions
  - an email to CPLO@mater.qld.gov.au to alert them to the facsimile, and
  - a letter to the private or interstate hospital/s where the pregnant woman is likely to give birth - refer to the practice resource Unborn children
• telephone the hospital/s to ensure that the form or letter has been received
• attach the 'HRA Form 1’ to the investigation and assessment event in ICMS
• provide the CSAHSC with a Child Safety After Hours Service Centre: After hours referral form and all relevant information, including the 'HRA Form 1’ or the letter
• consider whether a SCAN team referral is warranted
• contact the pregnant woman's medical practitioner (if known) to:
  • discuss the concerns identified
  • request that information be shared with relevant health professionals, such as the midwife or social work services
  • ask that Child Safety be advised when the child is born.

In circumstances where, following the decision to delay an investigation and assessment, a subsequent decision is made to proceed on the basis of new information received about the family, the senior team leader is responsible for recording the rationale and date of the decision to proceed with the investigation and assessment before the child's birth in the 'Assessment and Outcome' form in ICMS.

If Child Safety is contacted about additional concerns for an unborn child, refer to 6. What if Child Safety is contacted about additional concerns for a child or an unborn child?

**Investigate and assess the concerns**

Where the pregnant woman gives consent for the investigation and assessment to proceed, continue to investigate and assess the likelihood that the child will be in need of protection after birth, including:

• the level and type of risk to the child after the birth
• the services that may assist the pregnant woman, and where relevant, her partner and/or the father of the unborn child, prior to the birth.

For an investigation in relation to an Aboriginal or Torres Strait Islander unborn child, advise the pregnant woman of her right to have an independent person help facilitate her participation in the investigation and assessment, including the decision about whether the unborn child will be in need of protection after he or she is born.

If the pregnant woman agrees, arrange for an independent person to assist her participate in the decision-making. In addition, determine whether the pregnant woman agrees to:

• the family’s participation in the investigation and assessment and
• the involvement of an independent person for the family to participate.

Record whether an independent person helped facilitate the participation of the pregnant woman and the unborn child’s family in the investigation and assessment in the 'Independent Entity' form in ICMS.

The safety assessment and family risk evaluation are not completed for the investigation and assessment of an unborn child unless the child is born prior to the approval of the investigation and assessment.

Use the following to assist the assessment:

• **Practice guide: The assessment of harm and risk of harm**
• consideration of the risk and protective factors relating to children, and in particular, those for high risk infants (refer to Practice paper: Child protection intervention with high-risk infants)
• relevant information about cultural factors for Aboriginal and Torres Strait Islander children, gathered during the investigation and assessment.

Investigate concerns about an unborn child and their siblings

When an unborn child and their siblings are all listed as subject children in a notification, investigate and assess the concerns specific to the unborn child, in addition to those relating to the siblings. If the pregnant woman does not consent to the investigation and assessment of the unborn child, clearly record that the woman did not consent in the investigation and assessment event in ICMS, and proceed with the investigation and assessment of the siblings.

While the investigation and assessment of the unborn child cannot proceed in this circumstance, information from the investigation and assessment of the siblings will inform future action and any planning by Child Safety in relation to the unborn child after birth.

If it becomes apparent during an investigation and assessment for a child, that the mother is pregnant, use professional judgement to make a decision about whether the unborn child will be recorded as a 'subject child' or an 'other child' in ICMS. Where the decision is to record the unborn child as a 'subject child':
• investigate and assess the child protection concerns in relation to the unborn child after birth (where consent is given) and the concerns relating to the siblings
• edit the approved notification to ensure the category is listed as 'unborn'.

Actions when unable to have contact with the pregnant woman

In circumstances where, prior to the child’s birth contact with the pregnant woman is not able to occur for client reasons:
• make all reasonable efforts to locate the pregnant woman, where applicable, while the investigation and assessment remains open
• record an 'unborn child alert' on the person records of the mother and the unborn child in ICMS
• complete and forward an HRA Form 1: Unborn child high risk alert: Request for immediate notification when pregnant woman presents for delivery to the hospitals where the pregnant woman is likely to give birth, refer to ‘Queensland Health - List of maternity hospitals and nominated positions’, and/or a letter to the private or interstate hospital/s where the pregnant woman is likely to give birth, refer to the practice resource Unborn children.
• in exceptional circumstances only, where the pregnant woman is highly mobile and it is not possible to identify the hospitals where she is likely to give birth, send the ‘HRA Form 1’ to the group email address for public hospital child protection staff Statewide HRA@health.qld.gov.au AND to the Mater Mothers’ Hospital email address for High Risk alerts CPLO@mater.org.au. To activate the email, the subject title must be ‘Statewide HRA’. This email address is monitored during business hours only. In rare situations where it is necessary to alert all public hospitals to the ‘HRA Form 1’, urgently outside business hours, complete and forward the form via facsimile to all hospitals as well as an email to CPLO@mater.org.au to alert them to the facsimile
• attach the 'HRA Form 1' to the investigation and assessment event in ICMS
• provide the CSAHSC with a 'Child Safety After Hours Service Centre: After hours referral form' and all relevant information, including the 'HRA Form 1'
• consider whether a SCAN team referral is warranted
• record details of all actions taken in a case note in the investigation and assessment event
• record a 'Member of a mobile family' alert on all relevant person records, where there is information to suggest the pregnant woman is highly mobile
• contact the pregnant woman's medical practitioner (if known) to:
  • discuss the concerns identified
  • request that information be shared with relevant health professionals, such as the midwife or social work services
  • ask that Child Safety be advised of the birth of the child.

Keep the investigation and assessment event in ICMS open until either:
• the child is born and the investigation and assessment is completed
• two months have elapsed since the estimated date of delivery of the child and the woman has still not been located - in this circumstance:
  • complete a 'Record of actions - mobile family' form in the investigation and assessment event in ICMS
  • record a 'no investigation and assessment' outcome.

**Record the investigation and assessment outcome**

For an unborn child, one of the following outcomes may be recorded:
• substantiated - child in need of protection
• unsubstantiated - child not in need of protection
• substantiated - ongoing intervention continues
• unsubstantiated - ongoing intervention continues
• no investigation and assessment outcome.

For further information refer to [3.2 Determine whether the child is in need of protection](#).

**Take action after the birth of a child**

**Immediately** following the birth of the child take one of the following actions, depending on the case circumstances:
• where a decision was made to delay the investigation and assessment until after the child’s birth or the pregnant woman did not consent to the investigation and assessment – proceed the investigation and assessment
• where there is an open support service case - determine how ongoing intervention will continue, either as intervention with parental agreement or an application for a child protection order. To inform decision making, a safety assessment will be completed to assess any immediate danger to the child.
• where an investigation and assessment completed prior to birth had a ‘substantiated - child in need of protection’ outcome and a support service case is not currently open, either:
  • consult with the OCFOS lawyer and commence the most appropriate type of ongoing
Take action when the newborn child is at immediate risk

In circumstances where a newborn child was assessed as being in need of protection prior to birth, and is at immediate risk of harm from the time of birth:

- decide whether to record a notification to assess any new concerns
- in consultation with the OCFOS lawyer determine the immediate action required to secure custody of the child by:
  - negotiating with the parents for the child to be placed under a care agreement
  - using powers under the Child Protection Act 1999, section 18
  - applying for a TAO or CAO, where further assessment is required
- if no further assessment is required, consultation with the OCFOS lawyer regarding the application for a TCO.

Where it is assessed that a newborn baby must be separated from the mother’s care following the birth, refer to 2.6 Complete the safety assessment.

When negotiating with parents of an Aboriginal or Torres Strait Islander newborn baby about the placement of the baby under a child protection care agreement, advise the parents of their right to have an independent person help facilitate their participation in the decision.

Arrange for the independent person to assist the parents in the decision-making, unless it is:

- not practicable because an entity is not available or because the placement must be organised urgently
- likely to have a significant adverse effect on the safety or emotional wellbeing of the child or another person
- not in the child’s best interest.

Talk with the family about identifying family or kin who may be potential applicants to care for the child in the future or other placement options that comply with the placement element of the Child Placement Principles and additional requirements for Aboriginal and Torres Strait Islander children, outlined in the Child Protection Act 1999, section 83. For further information refer to 10.1 Decision-making about Aboriginal or Torres Strait Islander children.

Complete an HRA form 3, if required

Complete and forward an HRA Form 3: Cessation of unborn child high risk alert to all relevant hospitals when, either:

- an ‘HRA Form 1’ has previously been sent to multiple hospitals and, following the baby’s birth, the remaining hospitals need to be notified of the cessation of the alert
- Child Safety has been informed that the pregnant woman has had a miscarriage or termination and the relevant hospital/s need to be notified of the cessation of the alert.

Note: In circumstances where a state-wide alert to Queensland Health’s maternity hospitals was required before the baby’s birth and the ‘HRA Form 1’ was sent to public hospital child protection staff via the email group Statewide_HRA@health.qld.gov.au, complete an ‘HRA Form 3’ and forward it to the email address when cessation of the alert is required.
8. **What if a child is at immediate risk of significant harm - use of section 16 or 18?**

When undertaking an investigation and assessment, an authorised officer or police officer has the power to have contact with a child at immediate risk of significant harm (*Child Protection Act 1999*, section 16) or to take a child who is at immediate risk of significant harm into custody (*Child Protection Act 1999*, section 18).

These powers may be exercised with help and the use of force deemed reasonable in the circumstances. Prior to taking any action under the *Child Protection Act 1999*, section 16 or 18:

- make considerable effort to engage parents and negotiate an appropriate solution
- always consider contacting the QPS for assistance
- consult and discuss the decision with a senior team leader
- consult and discuss the decision with an OCFOS lawyer.

If, due to the nature of immediate risk to the child, the power is exercised prior to consulting the senior team leader or OCFOS lawyer, advise them as soon as possible, following the use of the power. If an authorised officer is accompanied by the QPS, the QPS may use discretionary powers to enter and search, and remain on the premises.

For information about when the *Child Protection Act 1999*, section 16 and 18 can be exercised, refer to the practice resource [Use of powers for a child at immediate risk - section 16 and 18](#).

Note: Custody of a child under the *Child Protection Act 1999*, section 18, overrides any other child protection order granting custody or guardianship to someone other than the chief executive, made under the *Child Protection Act 1999*.

**Use section 16 to have contact with a child at immediate risk**

When exercising the use of powers under the *Child Protection Act 1999*, section 16, advise the parents of:

- the purpose of the visit, the child protection concerns and any intended actions
- your name, position and the name of Child Safety
- your authority under the *Child Protection Act 1999*, section 16, to enter, search and remain in the premises or residence.

If an authorised officer damages property while exercising this power, provide a written notice of particulars of the damage to the owner or leave this notice at the property and retain a copy of the notice (*Child Protection Act 1999*, section 154).

In addition, during the investigation and assessment:

- show your identity card (*Child Protection Act 1999*, section 153)
- give the parents a final opportunity to allow contact with the child with their consent
- sight, and where appropriate, interview the child
- complete a safety assessment for the household with the parents, as soon as possible after the use of the power has been exercised, and include the actions taken under the use of powers
- take other action as required, as part of the investigation and assessment
Record details of the contact at the first reasonable opportunity in the 'Record of interview/use of powers' form in ICMS, regardless of whether an authorised officer or QPS officer has exercised the power.

Note: If after contact is made, the parents refuse to allow further contact with the child to complete the investigation and assessment, the authorised officer should consult with their OCFOS lawyer who can then seek to apply for the appropriate assessment order, refer to 2. What if a parent will not consent to actions required - use of a TAO? or 3. What if a parent will not consent to actions required - use of a CAO?

**Use of section 18 to take a child at immediate risk into custody**

When exercising the use of powers under the *Child Protection Act 1999*, section 18, take reasonable steps to advise at least one parent of:

- your name, position and the name of Child Safety
- the purpose of the visit and the concerns regarding the child
- the authority under this power to enter, search and remain in the place until the child is located
- the child having been taken into the chief executive's custody
- the rationale for taking the child into the chief executive's custody, unless this would jeopardise the child's safety or a criminal investigation
- the legal obligation for a TAO or a TCO application. Refer to practice resource **Temporary custody order** for more information about applying for a TCO.

Note: Where a child has a long-term guardian, the definition of parent includes long-term guardians with regards to the obligations under the *Child Protection Act 1999*, section 20. Therefore, the long-term guardian has the same rights and obligations as a parent.

If an authorised officer damages property while exercising this power, provide a written notice of particulars of the damage to the owner or leave this notice at the property and retain a copy of the notice (*Child Protection Act 1999*, section 154).

In addition, during the investigation and assessment:

- show your identity card (*Child Protection Act 1999*, section 153)
- sight and if appropriate, interview the child
- complete the safety assessment, with the parents if possible
- remove the child - the authorised officer is not required to tell the parents with whom the child has been placed (*Child Protection Act 1999*, section 20)
- tell the child about being taken into custody, including what this type of custody means, the reasons for the custody and the period of the custody (*Child Protection Act 1999*, section 195)
- progress the investigation and assessment
- discuss the case with the OCFOS lawyer who can then apply or assist in applying to a magistrate for a TAO or TCO as soon as possible, but within eight hours of taking the child into custody.
Record details of the contact at the first reasonable opportunity in the ‘Record of interview/use of powers’ in ICMS, regardless of whether an authorised officer or QPS officer has exercised the power.

**Implement actions following the use of section 18 powers**

Following the use of section 18 powers, during an investigation and assessment:

- Discuss the circumstances of the use of section 18 with the OCFOS lawyer who can then make application for a TAO or TCO as soon as practicable, but within eight hours after the power is exercised - custody to the chief executive ends either when the TAO or TCO is decided or eight hours after the power has been exercised, whichever is the earlier timeframe.

- serve at least one of the parents with a copy of the TAO or TCO, explain the terms and effects of the order and explain their right of appeal (Child Protection Act 1999, sections 32 and 51AK)

- complete a subsequent safety assessment prior to any decision to return the child to the home.

Note: If it is determined that it is safe for a child to be returned to the custody of their parents, the TAO application must still be made, even when custody is no longer required prior to the order being made.

Where the child has a long-term guardian, serve at least one of the long-term guardians with a copy of the TAO or TCO, explain the terms and effects of the order and explain their right of appeal (Child Protection Act 1999, section 32). In addition, make reasonable attempts to tell at least one of the parents about the reasons for and the effect of taking the TAO or TCO and the right of appeal, and serve them a copy of the order. If unable to tell and serve the parents, document full details of these attempts (Child Protection Act, 1999, section 32 and section 51AK).

**Facilitate a medical examination, where applicable**

When a child is taken into custody under the Child Protection Act 1999, section 18, a medical examination or medical treatment may be arranged for the child, if it is urgent or reasonable in the circumstances. If the need is not urgent, the authorised officer must wait until a magistrate grants a TAO or TCO.

For further information about medical examinations, refer to 9. What if a child needs a medical examination?

9. What if a child needs a medical examination?

A ‘medical examination’ is a physical, psychiatric, psychological or dental examination, assessment or procedure, and includes forensic examination and an examination or assessment carried out by a health practitioner, as defined in the Child Protection Act 1999, schedule 3.

**When to consider a medical examination**

As part of the investigation and assessment or when a child is subject to a TCO, a medical examination of the child, or a specialist assessment by a health worker professional may be considered necessary to ensure the child’s immediate health and safety, or to inform the outcome of the investigation and assessment.
Wherever possible, speak with the child first about the incident, or the injuries they may have, to ensure that:

- the child is able to speak in a more relaxed environment prior to any medical procedures, without the influence of the possibly intrusive examination
- there is the opportunity to have the information from the interview corroborated, if the child subsequently speaks to the medical practitioner.

Consider whether a medical examination of the child is required in the following circumstances:

- the child is reluctant to show an injury
- the injury is in the genital area
- the child’s condition or injury may not be consistent with the explanation given by the parent
- the child’s developmental level or physical and intellectual skills are inconsistent with explanations given for the harm
- the expertise of a medical practitioner is required to provide additional information, such as:
  - an assessment of the impact of long-term neglect on the child
  - a developmental assessment of the child
  - a diagnosis of a suspected disability.

**When to undertake an urgent medical examination**

Make arrangements for an **immediate medical examination** of any child who:

- appears ill, is in poor physical condition or is dehydrated
- has an altered state of consciousness
- has obvious serious physical injuries
- is manifesting significant abnormalities of behaviour or ideation
- has allegedly been sexually abused
- is an infant who:
  - displays a lack of response to stimuli, alterations in breathing or temperature, poor feeding, irritability and lethargy
  - is alleged to have suffered significant trauma or ‘shaking’, especially a child under two years of age
  - has bruises.

In most circumstances a paediatrician with child protection experience is preferred for the undertaking of a medical examination.

**Parental consent for a medical examination**

In all cases, plan the medical examination and **seek parental permission** to have the child medically examined. In circumstances where the parents will not give their permission, the *Child Protection Act 1999*, section 97, enables a medical practitioner to carry out an examination or treatment without consent of the parents when:

- a child at immediate risk has been taken into custody (*Child Protection Act 1999*, section 18)
- a TAO, CAO or TCO authorises the examination or treatment.
In this situation the medical practitioner must:

- not override the rights of the child in relation to the examination or treatment
- only carry out treatment that is reasonable in the circumstances
- provide a report about the examination or treatment to Child Safety, or to the QPS.

**Inform the child**

Consider the best way to inform the child and seek their views about the need for a medical examination. This may involve assisting the parent to explain the need for a medical examination to the child.

A child **should not be forced** to have a medical examination. The decision to proceed will depend on the age and ‘Gillick’ competency of the child and the need for immediate treatment, and will be made by the examining doctor. For information about ‘Gillick’ competency, refer to the Glossary of terms.

**Determine the appropriate time for the examination**

For urgent matters, arrange for an immediate medical examination. In other circumstances arrange the medical examination **as soon as possible** after sighting or interviewing the child, to allow timely medical examination and treatment. A medical examination following an alleged sexual assault must occur **within 72 hours** for the collection of evidence.

Ensure that there is sufficient planning with medical professionals, and where there is a joint investigation, the QPS, to co-ordinate interviews and medical examinations. Where the police are not involved, ensure that departmental interviews and medical examinations occur in the most appropriate order.

**Attendance of the parents at the examination**

Ensure that a parent or someone nominated by a parent **always accompanies** the child to the medical examination. It is important that a parent or nominated person attends the examination to provide relevant child and family medical history. The nominated person **cannot** be:

- a Child Safety officer, even if nominated by the parent for this purpose
- the parent or other person suspected of causing a serious injury to a child.

A parent’s attendance at the child's medical examination cannot be prevented, unless Child Safety decides the parent’s attendance at the examination would jeopardise a criminal investigation or expose the child to harm and either:

- the child has been taken into custody under the *Child Protection Act 1999*, section 18
- the child is subject to a TAO, CAO or TCO and is in the custody of the chief executive.

If a medical examination or treatment occurs by the use of statutory powers under the *Child Protection Act 1999*, still make every effort to encourage and assist the parents to attend the medical examination, unless this would jeopardise a criminal investigation or expose the child to harm.

A Child Safety officer may transport and accompany the child and parent or nominated person to the appointment, however, they **cannot** transport the child unaccompanied by the parent or their nominated person, unless there is a TAO, CAO or TCO in place.
Record the outcome of the medical examination

Record the details and outcome of the child’s examination in ICMS and where a written report is also provided by the medical practitioner or specialist, file a copy on the child’s file and attach the report to either, the investigation and assessment event or the ongoing intervention event in ICMS.

Any outcomes from medical examinations that occur as part of an investigation and assessment are to be incorporated into the subsequent health assessment. This will ensure the health assessment is adequately informed and will also avoid duplicating medical examinations or treatment. For further information refer to Chapter 5, 2.3 Develop a child health passport.

10. What if a child needs to be placed under an assessment care agreement?

An assessment care agreement is an agreement, signed by the parents that allows a child to be placed with an approved carer during the investigation and assessment phase.

If the parents agree to an assessment care agreement, they retain all custody and guardianship rights and responsibilities during the period of the care agreement. However, by entering into an assessment care agreement, the parents agree to:

- have the child placed with an approved carer, licensed care service or another entity by Child Safety
- authorise Child Safety to act in all day-to-day matters including urgent medical attention
- have contact with the child at such times and in such a manner as is mutually acceptable to themselves, the carer and Child Safety.

An assessment care agreement:

- can only be for a maximum of 30 days
- cannot be extended past 30 days
- is only to be used where it is assessed that there are no safety concerns about the parents retaining custody and guardianship rights
- can be entered into with one parent only, if it is impractical to gain the consent of the other parent or reasonable attempts have been made to do so
- cannot be made with one parent only, if the other parent refuses to enter the agreement.

An assessment care agreement can be ended at any time by giving at least two days’ notice to the other parties. A parent who was not a signatory to the agreement is able to end the agreement by providing at least two days’ notice to the parties.

If an assessment care agreement is entered into with only one parent:

- make reasonable attempts to give a copy of the agreement to the other parent, and obtain the other parent’s consent, after the agreement has been entered into
- record all attempts to contact and obtain consent from the other parent.

A child subject to a long-term guardianship order to a suitable person cannot be placed under an assessment care agreement.

For further information, refer to Chapter 5, 3. Decision-making for the child.
When a child needs to be placed during an investigation and assessment:

- consult with the parents to obtain their consent, complete the [Care agreement - Form] and get them to sign the form, and attach it to ICMS
- obtain necessary information about the child, to provide to the child’s carer, and commence the placement in accordance with the procedure Chapter 5, 1. Place a child in out-of-home care
- consider safe, compatible placement options that comply with the child placement principle, if applicable, refer to practice resource [The child placement principle]
- ensure that appropriate decisions about the child’s safety are made by the end of the 30 day period outlined above, even when a decision is not able to be made about whether the child is in need of protection
- use the 30 days to undertake key investigation and assessment tasks, such as completing the safety assessment and family risk evaluation, interviewing relevant parties, information gathering and arranging medical assessments, if applicable.

It is generally not appropriate to supervise the child's contact with the parents during the assessment care agreement period, given the voluntary nature of the agreement. There may be occasions where it is assessed that the risk to the child during contact may be high, however, the parents have agreed to both the placement under the assessment care agreement and to supervised contact, and therefore an assessment order is not appropriate. In these cases, the contact will be supervised, and this contact may also provide an opportunity for observations of the interactions that will constitute part of the assessment of the parents’ ability to meet the child's protection and care needs.

When a child subject to an assessment care agreement is subsequently assessed as being in need of protection, a decision may be made to continue the out-of-home care placement as part of ongoing intervention. Where this is to occur with the parent’s agreement, the assessment care agreement will end and a child protection care agreement needs to be negotiated with the parents, refer to Chapter 6, 3. Place a child using a child protection care agreement.

11. **What if a matter needs to be referred to the SCAN team?**

When undertaking an investigation and assessment, it may be appropriate to make a referral to a SCAN team, where the coordination of multi-agency action or discussion is required to effectively assess and respond to the protection needs of the child or children. Referrals to the SCAN team can also be made by another core member agency representative when the case meets the mandatory referral criteria.

For further information, refer to the Information Coordination Meetings (ICM) and the Suspected Child Abuse and Neglect (SCAN) Team System Manual.

12. **What if a child and family cannot be located?**

All reasonable steps must be taken to locate a family subject to a notification within the response priority timeframe. Where a family cannot be located, consider the following actions:

- re-contact the notifier
- check SCAN team records
- contact service providers known to be providing a service to the child or family
- search telephone directories
contact the QPS for information and assistance
search the electoral roll, refer to Australian Electoral Commission Roll for more information
contact schools to request assistance
request assistance from Centrelink
request assistance from Medicare Australia
request assistance from the Child Support Agency.

Note: The Commonwealth and Child Safety have agreed procedures under the Information Sharing Protocol between the Commonwealth and Child Protection Agencies that allow Commonwealth agencies including Centrelink, Medicare Australia and the Child Support Agency to release a family’s last known whereabouts to an authorised officer. Commonwealth agencies are only able to release information in specific circumstances. Requests are only to be made via Data Management Services after all other attempts to locate a family have been exhausted.

Note: Whilst Medicare and the Child Support Agency may have contact details for the family, in most instances, Centrelink will have the most accurate up-to-date details and would be the first agency to contact.

Each agency has a separate disclosure requirement and request form.

Centrelink may disclose relevant information if it is necessary to prevent, or lessen, a threat to the life, health or welfare of a person. To request the whereabouts of a family from Centrelink, complete the Centrelink Request Form and email the form to DMS_Centrelink@communities.qld.gov.au with a subject heading of ‘Response Priority: Centrelink Request for (family name)’. 

Medicare Australia may disclose relevant information where it is necessary to prevent or lessen a serious or imminent threat to the life or health of an individual. To request information from Medicare Australia, complete the Medicare Request Form and email the form to DMS_Medicare@communities.qld.gov.au with a subject heading of ‘Response Priority. Medicare Request for (family name)’. 

The Child Support Agency needs to form a reasonable belief that the information is necessary to prevent or reduce the threat to the life, health or welfare of a person, or a reasonable belief that the threat may afford evidence that an offence has or may be committed against a person and the information is communicated to prevent, investigate or prosecute the offence.

To request information, complete the CSA Request Form and email the form to DMS_CSA@communities.qld.gov.au with a subject heading of ‘Response Priority. Child Support Agency Request for (family name).’

For assistance with making a request, contact DMS. For specific information on what each agency can disclose please refer to the Information Sharing Protocol between the Commonwealth and Child Protection Agencies.

Record the outcome of attempts to locate a family

When it has not been possible to commence an investigation and assessment and the senior team leader is satisfied that all reasonable attempts have been made to locate the family, taking
into account the seriousness of the concerns, the potential risk of harm and the age and vulnerability of the child:

- record a ‘member of a mobile family’ alert in ICMS for each relevant person as soon as the decision is made that the family are mobile, or will be difficult to locate
- document all actions taken to locate the child and family in the investigation and assessment, in the ‘Record of actions - mobile family’ form in ICMS, including:
  - attempts made to locate the family and conduct the investigation and assessment
  - the results of all actions taken
  - relevant information received from other parties about the family
  - decisions made, and the rationale for decisions
- finalise the investigation and assessment within two months and record a ‘no investigation and assessment outcome’ for each subject child.

If there is a subsequent notification and the family has been located:

- do not reopen the original investigation and assessment event
- assess the previous concerns along with the current concerns, as part of the investigation and assessment
- record the previous concerns and the appropriate outcomes in the current investigation and assessment event.

13. **What if parents refuse to allow contact with a child?**

If during an investigation and assessment, a parent refuses entry to the home, or contact with the child:

- make every attempt to gain the consent of the family to undertake the investigation and assessment
- explain the legal obligation of Child Safety to investigate and assess the concerns under the *Child Protection Act 1999*, section 14
- emphasise the responsibility of Child Safety to sight the child and speak to the child and the parents, to assess the concerns
- explain that the process provides an opportunity for the parents to respond to the concerns
- acknowledge the parents reluctance and suggest alternatives such as the use of a support person for the parents, or, prior to leaving the premises, arrange an appointment at a later time if no immediate danger is identified for the child, either from the notification information or from observations made during contact with the parents.

If the parents continue to refuse contact, in consultation with the senior team leader and OCFOS lawyer, determine the appropriate powers or assessment order to be used to allow the investigation and assessment to be conducted, either:

- the use of powers under the *Child Protection Act 1999*, section 16 or 18, to access the child or secure their immediate safety, where there are concerns for the immediate safety of a child, refer to 8. What if a child is at immediate risk of harm - use of section 16 or 18?
- the use of a TAO, refer to 2. What if a parent will not consent to actions required - use of a TAO?
14. What if assistance is required from another jurisdiction?

Investigation and assessment - address known

When there is a notification for a child who currently resides in Queensland, but the parent or carer who is the alleged person responsible resides in another jurisdiction and the address is known, Child Safety may request assistance from the state, territory or New Zealand (jurisdiction) to complete an investigation and assessment.

To request assistance for the completion of an investigation and assessment:

- complete a Request for interstate notification, including the current address in the other jurisdiction, and attach the current notification and any other relevant information that has been gathered
- specify the tasks required of the other jurisdiction in order for the investigation and assessment to be completed
- scan and email all relevant documentation to the Interstate Liaison Officer (ILO) at Court Services at ILO@communities.qld.gov.au.

The ILO will:

- forward this documentation to the ILO in the jurisdiction where the child lives, for that jurisdiction to make a decision about whether they will assist with interviewing the identified parties as requested
- follow up with the ILO in the other jurisdiction, to determine whether that jurisdiction is willing to conduct the interviews requested.

If the other jurisdiction agrees to assist, the ILO will obtain the report of the interviews with the nominated parties upon their completion.

If a family relocates to another jurisdiction prior or during the investigation and assessment, request an interstate notification, refer to the procedures in Chapter 1, 1. What if the child protection concerns are about a child in another jurisdiction? The other jurisdiction will respond to the concerns received in accordance with their legislative requirements and no further action is required in Queensland. The matter can then be closed in ICMS, noting that an interstate referral was made.

Investigation and assessment - address unknown

If the whereabouts of the family in another jurisdiction is unknown, request an interstate alert, refer to the procedures in Chapter 1, 1. What if the child protection concerns are about a child in another jurisdiction? If updated information is received about the family or the family’s whereabouts, notify the ILO immediately.
15. **What if another jurisdiction requests assistance with an investigation and assessment?**

When another state, territory or New Zealand (jurisdiction) requests assistance from Queensland to complete an investigation and assessment that is being conducted in that jurisdiction, the ILO will:

- ensure the relevant documentation, including the current interstate or New Zealand address, history checks and notification information have been received
- ensure that the other jurisdiction has specified the tasks required in order for the investigation and assessment to be completed
- forward all relevant documentation to the relevant CSSC for actioning.

The receiving CSSC will:

- allocate the matter
- seek clarification, as necessary, with the requesting office in the other jurisdiction
- complete the tasks as requested
- forward a written report to the ILO for forwarding to the requesting office in the other jurisdiction.

Use professional judgment to decide whether or not, during the investigation and assessment, to ask direct questions relating to assessing and deciding the provision of placement information to parents. In circumstances where the removal of a child is likely to occur, gather information to inform decisions about the provision of placement information to parents. For further information refer to Chapter 5, 1.8 Assess the provision of placement information to parents and Chapter 5, 1.10 Provide placement information to parents.

16. **What if a young person is subject to youth justice intervention?**

When an investigation and assessment is conducted in relation to a child who is also subject to youth justice intervention, contact the youth justice case worker to:

- gather information to inform the assessment
- verify information provided by the child or the parents during assessment interviews
- provide relevant information, for the purpose of coordinating service delivery
- advise of a child’s placement in out-of-home care, if applicable.

A Youth Justice officer may act as a support person for the child during the interview or investigation and assessment process, when requested by the child or their family. If a request is made, contact the relevant Youth Justice Service to discuss the request and whether it is appropriate for a youth justice officer to participate in the process.

Any involvement by Youth Justice in the implementation or monitoring of a safety plan for a child, is to be negotiated by Child Safety with the youth justice case worker or their line manager.

When a child subject to youth justice is in the custody of the chief executive:

- inform the Youth Justice case worker:
  - about who has custody and guardianship rights and responsibilities for the child,
  - explain the implications for decision-making about custody and guardianship matters,
refer to Chapter 5, 3. Decision-making for the child

- that an Aboriginal and Torres Strait Islander young person has a right to have an independent person help facilitate the young person’s participation in significant decisions made by Child Safety, refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children

- coordinate service delivery for the duration of the out-of-home care placement.

The involvement of Youth Justice in the SCAN team system would occur as an invited stakeholder, in accordance with Information Coordination Meetings (ICM) and the Suspected Child Abuse and Neglect (SCAN) Team System Manual.

When the investigation and assessment is completed and if Youth Justice remains involved with the child, contact the youth justice case worker and provide the following information:

- the outcome of the investigation and assessment
- the return of the child to the parents
- the nature of ongoing intervention to be provided, if applicable.

17. What if a family is subject to the Witness Protection Program?

At times, families who are subject to the Witness Protection Program through any one of the state or territory police services may reside in Queensland and be the subject of a notification. These families have a heightened need for confidentiality, due to the importance of protecting their identity, whereabouts and personal safety.

Witness protection in Queensland is administered by the Crime and Misconduct Commission, but is operationalised by the QPS Witness Protection Unit.

When it becomes known during an investigation and assessment that a family is subject to witness protection:

- liaise with the QPS by contacting the Communications Room, QPS on telephone (07) 3360 6325 and request to speak with either of the officers identified below, to ensure the best response to these complex and sensitive matters:
  - the Officer in Charge, QPS Witness Protection Unit
  - the Operations Coordinator, QPS Witness Protection Unit
- ensure Child Safety meets the legislative responsibility to investigate the child protection concerns that are received
- consider whether sensitivity needs to be applied to the person profile or to an event. For further information, refer to Chapter 10.5 Recording sensitivity.

18. What if animal welfare issues are identified?

The Memorandum of Understanding between The State of Queensland, through Department of Communities (Child Safety) and The Royal Society for the Prevention of Cruelty to Animals, Queensland 2012-2014 sets out principles and roles and responsibilities to support the provision of services to children who have been significantly harmed or are at risk of significant harm and protect the welfare of animals.

Schedule 2 - Guidelines for making a notification to the Royal Society for the Prevention of Cruelty to Animals outlines the specific circumstances in which departmental staff will provide
information about the RSPCA to a family or contact the RSPCA directly with the family’s consent. The confidentiality provisions of the Child Protection Act 1999 significantly limit the information that can be shared with the RSPCA.

**During an investigation and assessment or ongoing intervention**

If it becomes apparent that an animal has harmed a child or presents a risk to the safety or wellbeing of a child:

- advocate and promote the RSPCA to the parents or carer
- encourage the family to utilise the RSPCA as a support service to reduce the risks that the animal poses to the child, or consent to Child Safety contacting the RSPCA on behalf of the family.

Where a family does not take steps to address animal welfare concerns that pose a safety risk to the child, contact the RSPCA to inform them of the animal welfare concerns. If requested, the RSPCA will recontact Child Safety and advise whether they have taken action.

When referring families to intensive family support services, seek the parents’ consent to include information about the animal welfare issues in the referral.

Where animal welfare issues are identified that are not related to child protection concerns:

- provide information about the RSPCA to the family and encourage them to seek their support
- do not provide information to the RSPCA without the family’s consent.

**Schedule 3 - Guidelines for emergency care and accommodation of animals** outlines the RSPCA’s commitment to providing temporary emergency care and accommodation for the animals of families who are involved with Child Safety.

When issues are identified that prevent a family from providing care and accommodation to their animals:

- provide the family with information about the RSPCA
- encourage the family to utilise the RSPCA as a support service.

**19. What if information is received via an Integrated Justice Information Strategy automated email alert?**

Information will be received by Child Safety as part of the Integrated Justice Information Strategy (IJIS). Data Management Services (DMS) receives this information and sends an automated email alert to the relevant CSSC or RIS management team group email. Information in the email will comprise of either:

- an IJIS notification (Criminal court matter alert), notifying details of a subject child’s first scheduled appearance in a criminal court proceeding
- an IJIS Electronic transfer of court result (ETCR) alert, advising of the need to run an IJIS ETCR report in ICMS to access details of a criminal or domestic violence court result involving a subject child.

It is the responsibility of each RIS and CSSC management team to ensure group email accounts are current and monitored regularly.
Receipt of IJIS notifications (Criminal court matter alert)

Child Safety will receive notification about the first scheduled court appearance of a child who has been charged with a criminal offence via an IJIS notification (Criminal court matter alert) automated email. A court matter alert will only be received by Child Safety where a child is identified as a subject child in an open investigation and assessment or ongoing intervention case. The court matter alert email will be forwarded to either:

- the RIS, when:
  - a notification has been recorded on a subject child and is awaiting approval in ICMS by the RIS senior team leader
  - the notification has been approved, however, the investigation and assessment has not been allocated to the pending allocation tray of receiving CSSC
  - the CSSC who is responsible for undertaking an investigation and assessment, or who has case management responsibility for a child subject to ongoing intervention.

When an IJIS notification (Criminal court matter alert) is received by a RIS, the RIS senior team leader will:

- view the criminal court matter alert email
- allocate the notification to the relevant CSSC senior team leader for investigation and assessment
- forward the criminal court matter alert email to the CSSC undertaking the investigation and assessment.

When an IJIS notification (Criminal court matter alert) is received by a CSSC, the allocated CSO will:

- read and assess the information to determine the appropriate response, including screening the information if relevant
- record the information in the current ICMS event
- print the alert for the client file
- liaise with the relevant person as to attendance at court by Child Safety
- liaise with Youth Justice staff if required.

Receipt of IJIS Electronic transfer of court result information

The IJIS Electronic transfer of court results (ETCR) delivers court results from all Queensland criminal and civil jurisdictions to the CSSC holding case management responsibility for a subject child. The subject child is identified as the 'primary person of interest', and information may also be received on 'secondary persons of interest', who may or may not have an existing person record in ICMS.

An ETCR will only be received by Child Safety if a child is matched in the court result as being subject to an open investigation and assessment or ongoing intervention case. Information will not be received on a child subject to a support service case.

DMS receives the ETCR client information and sends an automated email alert to the relevant RIS or CSSC management team. Details about the court matter are accessed via the running of an ‘IJIS Electronic Court Results report’ in ICMS.
When an ETCR report is received:

- check the ETCR information against any previously recorded information and amend any errors in court dates, outcomes and persons named
- gather further information from the relevant source, for example the, QPS or OCFOS, where required
- check whether the information is known and has previously been recorded in the event in ICMS, for example, the information records an adjournment of proceedings - if the information is already recorded in ICMS no further recording is required and the ETCR report will remain accessible in the ICMS reports tab
- determine whether the information identifies new harm or risk of harm to the child and if so, undertake the relevant intake tasks
- create a person record in ICMS for any child or adult previously unknown to Child Safety, who may have a significant relationship with the subject child and attach the ETCR report to the ICMS event.

For further information, refer to either Chapter 1 Intake, Chapter 4, 4.1 Actively implement the case plan and the practice resource Receiving Integrated Justice Information Strategy email alert information.

20. **What if the investigation and assessment is to be completed using a differential pathway?**

Differential pathways provide an alternative option for completing an investigation and assessment that is tailored to a family's individual circumstances. The two differential pathway options that may be used in exceptional circumstances are:

- core assessment
- contact with other professional.

The decision about whether to use either of the differential pathways to complete the investigation and assessment is made during the assessment phase.

**Core assessment**

The use of the core assessment differential pathway allows for the finalisation of an investigation and assessment without the completion of certain actions that may ordinarily be undertaken. These actions may include contact with the school or health professional, or interviews of other relatives or household members where it is determined that they would not provide additional relevant information.

The core assessment can only be used in exceptional circumstances when all of the core components of the investigation and assessment have been conducted, including sighting and interviewing all subject children, the parents and the alleged persons responsible, and sufficient information gathering has occurred to fully assess whether or not a child is in need of protection.

This pathway allows for the timely completion of an investigation and assessment, without compromising the safety of the child.

This option **may not** be used:

- for a harm report
when the previous investigation and assessment was a core assessment.

When this option is used, record a clear rationale for why it is considered to be an appropriate response to the particular case, in the text of the ‘Assessment and outcome’ form in ICMS.

**Contact with other professional**

The contact with other professional option is used in exceptional circumstances, when a comprehensive assessment of harm and risk has been made, but sighting and interviewing one subject child remains an outstanding task. This differential pathway utilises other professionals to assist in speaking to a child and can be used to finalise and record an investigation and assessment outcome within the procedural timeframe, for matters that would otherwise result in one child having a ‘No investigation and assessment outcome’.

This differential response option is used to finalise an investigation and assessment when it is assessed that the risk factors do not necessitate the CSO sighting or interviewing that child and it is appropriate to engage another professional to sight or speak to one subject child.

This option may be used for example:

- when a child is admitted to hospital and it is appropriate for the hospital social worker to sight or speak to the child
- where QPS has already interviewed the child in the absence of a CSO
- when the child now resides in another area and the child has not been sighted and interviewed by the relevant CSSC
- when it is appropriate for another professional, such as a guidance officer or CYMHS worker already engaged with the child to speak to the child.

Prior to using this option:

- identify a professional who, given the child's individual circumstances, would be an appropriate person to approach and speak to the child
- seek the parent’s consent for the professional to speak to the child
- contact and assess the suitability of the professional to speak to the child and gather information regarding the concerns
- inform the professional that any information provided will assist an assessment of the child's need for protection
- provide the professional with the following information:
  - the concerns being assessed
  - the confidentiality requirements of the *Child Protection Act 1999*
  - general information about how to gather relevant information from a child
  - the contact must occur in a lawful way (for example, not on school property without the school principal’s consent).

It may still be necessary to formally interview the child depending on what information the other professional gathers from the child and whether it increases the assessed level of harm or risk to the child.

This option **may not** be used:

- for the same child more than once within a 12 month period, or for two consecutive investigation and assessments
• for allegations of sexual abuse or serious physical abuse
• for children under school age or when there is only one subject child recorded, except in exceptional circumstances when the senior practitioner has reviewed the matter and assessed that it is appropriate to use of this option
• for a harm report
• for a child subject to a child protection order granting long-term guardianship to a suitable person.

21. What if an Investigation and Assessment outcome is reviewed?

The outcome of an Investigation and assessment is a point in time decision based on the assessment of information known at the time by the investigating officer. Approval by a more senior officer, usually a senior team leader, gives the process a level of oversight.

Where a review is subsequently undertaken on a finalised investigation and assessment and the reviewer determines the outcome was incorrect, it is generally not appropriate to delete the original outcome and record that which the reviewer has determined is correct – even if the reviewer ensures the original outcome and the subsequent decision making is documented.

It is appropriate to leave the outcome as originally recorded and in addition ensure that documentation is added to the file (and clearly linked to the original investigation and assessment outcome) that outlines the following:
• impetus for the review
• subsequent review process, including whether it was a desk top review or included interviews with the original CSO and senior team leader
• name and position of the reviewer
• the revised investigation and assessment outcome that the reviewer has determined to be correct, including the rationale for the decision
• the name and position of the person who has approved or provided oversight to the review process and the revised investigation and assessment outcome.

In exceptional circumstances, the review process may recommend information recorded within the investigation and assessment event be amended as it is factually incorrect and that the person responsible or the investigation and assessment outcome be changed. The CSSC manager must provide their written approval for any changes made and ensure this is recorded within a case note in the event (see above for guidance on what to record). Examples when this may be considered include:

• a person profile is incorrectly linked to an investigation and assessment as a parent and/or person responsible and the investigation and assessment outcome would inaccurately influence future assessments of risk and/or parental willingness and ability
• a person assessed as responsible for harm to a child was not afforded the opportunity to respond to the alleged concerns and further review has determined that assessment to be incorrect.

How is the person seeking the review to be notified of the outcome of the review?

The person seeking the review should be advised from the outset that any review would not result in a change of outcome, only in additional information being included on the child’s file.
Once the review has been finalised individuals should be advised that the review report has been completed and attached to the relevant part of the file to be read in context with the original Investigation and assessment outcome.
Resources

Forms and templates

- Care agreement – Form
- Centrelink Request Form
- Child Safety After Hours Service Centre: After hours referral form
- Court Assessment Order (Form 7)
- CSA Request Form
- HRA Form 1: Unborn child high risk alert: Request for immediate notification when pregnant woman presents for delivery
- HRA Form 2: Unborn child high risk alert: Notification that pregnant woman has presented for delivery
- HRA Form 3: Cessation of unborn child high risk alert
- ICM and SCAN team form 1 - Request for multi-agency meeting
- Letter to parent – IA outcome (substantiated child in need of protection)
- Letter to parent – IA outcome (substantiated child not in need of protection)
- Letter to parent – IA outcome (unsubstantiated child not in need of protection)
- Medicare Request Form
- Police referral form
- QPS - Non-urgent criminal and domestic violence history check request (spreadsheet)
- QPS - Urgent Request (After Hours)
- Request for interstate notification
- Section 159N information request
- Temporary Assessment Order (Form 3)
- Unborn child checklist

Departmental resources

- Collaborative Assessment and Planning Framework booklet
- Collaborative assessment and planning framework tool
- ICMS Child Protection - Linking of court orders
- Information Coordination Meetings (ICM) and the Suspected Child Abuse and Neglect (SCAN) Team System Manual
- Interviewing Children and Recording Evidence (ICARE)
- Physical and Cognitive Developmental Milestones
- Practice guide: The assessment of harm and risk of harm
- Practice paper: Child protection intervention with high-risk infants
- Practice paper: Child sexual abuse
- Practice paper: Working with Aboriginal and Torres Strait Islander people
- Practice resource: Assessment orders
- Practice resource: Family risk evaluation
• Practice resource: Guidelines for departmental staff when providing information to the court regarding a domestic violence order application
• Practice resource: Informing parents about the harm and the outcome - section 15
• Practice resource: Interviewing a child
• Practice resource: Notifiers and mandatory reporting
• Practice resource: Planning for and undertaking a joint investigation
• Practice resource: Planning the investigation and assessment
• Practice resource: Receiving Integrated Justice Information Strategy email alert information
• Practice resource: Recording the investigation and assessment
• Practice resource: Recording your professional assessment about whether the child is in need of protection
• Practice resource: Safety assessment
• Practice resource: Schedule of criminal offences
• Practice resource: Section 55 requests – Domestic and Family Violence Act 2012
• Practice resource: Temporary custody order
• Practice resource: The child placement principle
• Practice resource: The role of a support person
• Practice resource: Unborn children
• Practice resource: Use of powers for a child at immediate risk - section 16 and 18
• Practice resource: Working with an independent person
• SDM: Family risk evaluation
• SDM: Safety assessment
• Unborn child high risk alert Contacts: Queensland Health
• When Child Safety officers visit your home
• Youth Protocol: An agreement concerning referral, assessment, case management and support for homeless and unsupported young people

External resources
• Animal Assisted Therapy
• Benevolent Society
• Information Sharing Protocol between the Commonwealth and Child Protection Agencies
• Memorandum of Understanding between The State of Queensland, through Department of Communities (Child Safety) and The Royal Society for the Prevention of Cruelty to Animals, Queensland 2012 - 2014
• Queensland Electoral Commission Australian Electoral Commission
• Queensland Health - List of maternity hospitals and nominated positions
• Schedule 2 - Guidelines for making a notification to the Royal Society for the Prevention of Cruelty to Animals
• Schedule 3 - Guidelines for emergency care and accommodation of animals