**Child Protection (Support Services)**

Investment Specification

**Version:** 3.6

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**Acknowledgement of the Traditional Owners**

The Department of Child Safety, Seniors and Disability Services (the department) acknowledges Aboriginal and Torres Strait Islander (First Nations Peoples) as the Traditional Owners and Custodians of this country. We respect self-determination of First Nations Peoples and recognise the cultural and spiritual connection they have with land, winds, sky and waters.

We pay our respect to Elders past, present and emerging and value their contribution in empowering communities to develop their own futures.

**A cultural lens** must always be applied when working with and alongside Aboriginal young people, families and carers. Strong and respectful understanding of Aboriginal and Torres Strait Islander histories, family structures and practices and connection to kin, community and country is essential.

**Use of terms and program names**

This investment specification uses ‘Aboriginal and Torres Strait Islander peoples’ and ‘First Nations peoples’ as collective terms to reflect the cultures and identities of Aboriginal peoples and Torres Strait Islander peoples.

However, it is recognised that Aboriginal peoples and Torres Strait Islander peoples have their own rich and unique languages, customs, beliefs, cultural practices, and traditions.

When service types are delivered by an Aboriginal and Torres Strait Islander Community Controlled Organisation (ACCO) the use of local language when naming the services is encouraged at the discretion of the ACCO. Local language names used to describe a service do not need to reflect the English service name used in this investment specification. Naming conventions used by ACCOs will be accepted in contract and used in reporting and public communication by the department about services.

# 1. Introduction

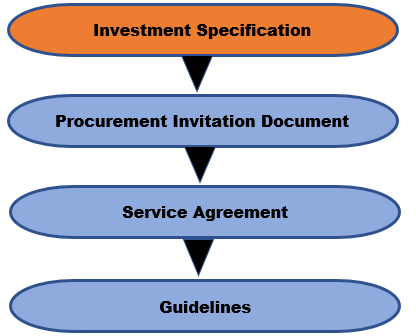
In line with the strategic intent of the department, Child Protection Support Services has been designated as a funding area to support children and young people in the care of, and post-care of, the department.

## Purpose of the investment specification

This investment specification describes the intent of funding, the Service Users (target clients) and identified issues, the service types, and associated service delivery requirements for services funded under the Child Protection Support Services funding area.

This investment specification is a guide for service delivery for the Child Protection Support Services funding area where all service types contribute to outcomes. The investment specification allows for flexibility, responsiveness and innovation in service delivery, enabling the right services to be delivered to the right people at the right time.

*Figure 1 – Funding document hierarchy*



The department’s funding documents underpin the business relationship between the department and the funding recipient. The investment specification should be read in conjunction with the procurement invitation document (new funding) and Service Agreement, and any relevant guidelines that form part of the Service Agreement.

# Funding intent

Service delivery funded through this investment specification is designed to achieve the outcomes specified in this investment specification and outcomes consistent with the [Queensland Care Services Outcomes Framework](http://www.cyjma.qld.gov.au/resources/dcsyw/about-us/partners/child-family/qld-careservices-outcomes-framework.pdf).

Service delivery must also align with the principles of the [*Child Protection Act 1999*](https://www.legislation.qld.gov.au/view/html/inforce/current/act-1999-010)(the Act),departmental policies, the [Child Safety Practice Manual](https://cspm.csyw.qld.gov.au/) and individual case plans for Service Users subject to statutory intervention. Core principles of the Act, embodied in policies and practice and relate to child protection are:

* the welfare and best interests of the child are paramount
* the preferred way of ensuring a child's welfare is through supporting the child's family
* intervention is not to exceed the level necessary to protect the child
* families are able to participate in planning and decision making for children
* Aboriginal and Torres Strait Islander agencies are to be consulted in decision making regarding Aboriginal and Torres Strait Islander children
* children, young people and families have a right to information
* services are to be culturally appropriate
* active effort in the application of the Aboriginal and Torres Strait Islander Child Placement Principle (the Act, Section 5C)
* coordination, consultation and collaboration with families, professionals, agencies and the community
* accountability of the department.

Child protection service delivery, funded by the department through Non-Government Organisations (NGOs), ensures a community based response that reduces the potential stigma attached to intervention in the lives of children, young people and families. Whilst the department retains case management responsibility for Service Users, NGOs and government partners deliver casework and support according to case plans.

The department has outsourced:

* care and support services, including physical, psychological and emotional care, as part of an integrated child protection response when assessment indicates that separation from family is unavoidable to ensure the child or young person’s safety or wellbeing
* therapeutic and specialist counselling and support services for children and young people subject to statutory intervention, and to their carers, insofar as contributing to placement stability
* family support to divert families with identified risk factors away from statutory or more intensive forms of intervention and to build their capacity to care for their own children
* intensive support for families with children subject to statutory intervention to enable them to safely live at home or enable re-unification of children who are living away from home.

## Context

##### 2.1.1 Department Strategic Plan

The vision of the department’s [Strategic Plan](https://www.cyjma.qld.gov.au/about-us/our-department/corporate-publications/strategic-plan) is for Queensland’s children, young people, and families to be safe, thriving, and empowered in their culture and communities. This investment specification will support the departments Strategic Plan to:

* improve outcomes for vulnerable children and young people in or at risk of entering the child protection system
* reduce the proportion of children in residential care
* increase the proportion of children in kinship care.

##### 2.1.2 Overarching cultural focus

The child protection system in Queensland is shaped by the government’s response to the [Queensland Child Protection Commission of Inquiry final report – Taking Responsibility: A Roadmap for Queensland Child Protection](https://www.cyjma.qld.gov.au/resources/campaign/supporting-families/qg-response-child-protection-inquiry.pdf) and other reforms and frameworks including the [Supporting Families Changing Futures](https://www.cyjma.qld.gov.au/campaign/supporting-families) reforms, the [Queensland Care Services Outcomes Framework](https://www.cyjma.qld.gov.au/resources/dcsyw/about-us/partners/child-family/qld-careservices-outcomes-framework.pdf), the [Our Way: A generational strategy for Aboriginal and Torres Strait Islander children and families 2017-2037](https://www.cyjma.qld.gov.au/resources/campaign/supporting-families/our-way.pdf) and the [Our Way Wellbeing Outcomes Framework](https://www.cyjma.qld.gov.au/resources/campaign/supporting-families/wellbeing-outcomes-framework.pdf).

The [Our Way](https://www.cyjma.qld.gov.au/resources/campaign/supporting-families/our-way.pdf) strategy represents a partnership between the Queensland Government, Family Matters Queensland and community organisations to fundamentally change the way child and family services respond to Aboriginal and Torres Strait Islander children, young people and their families. The strategy is built on a joint commitment to eliminate the disproportionate representation of Aboriginal and Torres Strait Islander children and young people in the child protection system and to close the gap in life outcomes for Aboriginal and Torres Strait Islander children, young people and families.

The strategy is supported by seven, three-year action plans to achieve the [Family Matters Building Blocks](https://www.familymatters.org.au/wp-content/uploads/2016/11/TheFamilyMattersRoadmap.pdf):

* All families enjoy access to quality, culturally safe universal and targeted services necessary for Aboriginal and Torres Strait Islander children and young people to thrive.
* Aboriginal and Torres Strait Islander peoples and organisations participate in and have control over decisions that affect their children.
* Law, policy and practice in child and family welfare are culturally safe and responsive.
* Governments and community services are accountable to Aboriginal and Torres Strait Islander peoples.

Decisions relating to the design, investment and delivery of services to Aboriginal and Torres Strait Islander children, young people and families are fundamental to achieve these outcomes. Amendments to the Actsupport cultural connections of Aboriginal and Torres Strait Islander children and young people with kin and community and acknowledge them as the primary sources of cultural knowledge. Stronger connections improve outcomes for Aboriginal and Torres Strait Islander children, young people and families.

The Actcontains specific provisions concerning Aboriginal and Torres Strait Islander children and young people including:

* an Aboriginal and Torres Strait Islander child, young person and their family must have the opportunity to participate in significant decisions including where and with whom the child or young person will live where they are subject to a child protection care agreement or order granting custody or guardianship to the chief executive
* an Aboriginal and Torres Strait Islander child, young person and their family have the right to have an independent person to help facilitate participation in significant decisions for the child unless:
  + it is not practicable because an independent person is unavailable or an urgent decision is required
  + there will likely be a significant adverse effect on the safety and/or emotional wellbeing of the child, young person or another person
  + it is not in their best interest.
* an Aboriginal or Torres Strait Islander child, young person and their family have access to decisions for the child or young person to be made by an Aboriginal and/or Torres Strait Islander person.
* active effort is to be undertaken to apply the Aboriginal and Torres Strait Islander Child Placement Principle (the Act, Section 5C).

The [*Child Protection Reform Amendment Act 2017*](https://www.legislation.qld.gov.au/view/pdf/asmade/act-2017-044)was amended in 2018 for the delegation of the chief executive’s powers and functions relating to an Aboriginal and Torres Strait Islander child who is either in need of protection or at risk of becoming in need of protection, to an Aboriginal and Torres Strait Islander chief executive officer of an Aboriginal Torres Strait Islander entity (a ‘prescribed delegate’) (Chapter 4 Part 2A).

For the purposes of this investment specification, the making, receiving and undertaking of delegations under Part 2A are referred to as ‘delegated authority’. Delegated authority has been co-designed and implemented in a staged approach due to the complexity and breadth of child protection decision making and the department’s infrastructure, systems and policies to support child protection staff to make decisions. Capability takes some time to develop within entities accepting delegations.

##### 2.1.3 Unify

The department’s contemporary case and client management system will enable the best outcomes for children, young people and families experiencing vulnerability.

Unify will:

* improve information sharing and collaboration across Queensland Government social services and justice sectors while engaging with young people, families, carers and services
* provide easy access to the right information enabling users to make informed decisions
* provide current information about a child or young person being referred to a funded service provider.

Services must be responsive to changes in processes and practices that make full use of Unify’s functionality.

# Investment logic

Child Protection Support Services Investment Logic

Service Users

Outcomes

Outputs

Service Types

Children and young people are reunified with family

A01.1.06

Information, advice, individual advocacy engagement and/or referral

Counselling and Intervention

Children and young people who are subject to statutory intervention

Children and young people are in stable placements e.g. with kin, other family based care

Evolve Therapeutic Services

A01.2.02

Case Management

Families and carers of children and young people in statutory care

Educational Support

Children and young people in care have improved wellbeing

A01.2.08

Counselling

Children and young people have improved connections with family, community cultural and country

Sexual Abuse Counselling

A01.2.99

Personal support activities not elsewhere classified – Assertive Outreach

Young people transitioning from statutory care

Transition to Adulthood

Children and young people have improved family and carer relationships

Assertive Outreach

Young people have shown improvements in being safe and/or protected from harm

Young people leaving statutory care are able to fully participate as adults in the community

Young people have improved ability to access appropriate services.

A07.1.04

Volunteer resource development and/or placement

# Service delivery overview

The primary Service Users for support services are generally children and young people aged under 18 years subject to intervention under the Act. Service types have specific age ranges of Service Users .

Young people over 18 years may continue to receive transition from care support where existing case planning goals are still to be achieved or life events require ongoing support (refer to 7.3 Transition to Adulthood).

The table below details the Service Users and service types within the Child Protection Support Services funding area. The department may update this investment specification in response to evidence and changing needs to invest in additional service delivery responses, or different combinations of responses. Refer to the current version of this investment specification refer to Section 11 for web links.

|  |  |
| --- | --- |
| **Service Users** | **Service types** |
| Children and young people under 18 years who are subject to statutory intervention and require counselling or other support as a result of abuse (physical, emotional or sexual) or neglect (U2310) | Support - Counselling and Intervention (T319) |
| Support - Evolve Therapeutic Services (T323) |
| Support - Educational Support (T330) |
| Support - Sexual Abuse Counselling (T335) |
| Young people transitioning from statutory care - 15-21 year olds (U2325) | Support – Transition to Adulthood (T329) |
| Families and carers of children and young people in care (U2310 and U2319) | Support - Counselling and Intervention Support (T319) |
| Support - Sexual Abuse Counselling (T335) |
| Young People transitioning from statutory care – 15 -25 year olds (U2326) | Support – Transition to Adulthood (T329) |
| Young people aged 12 to under 18 years who are subject to statutory intervention, who are disengaging from placement and/or not in approved placements (U2311) | Support – Assertive Outreach (T316) |

Support Services improve the capability, resilience, and safety to Service Users and provide responses to support them. Section 7 provide the service types under the Child Protection Support Services funding area.

# Service delivery requirements for all Child Protection Tertiary Support Services

## General information for all Child Protection Support Services

Services that are funded under Child Protection (Support Services) must comply with the relevant statements under the headings of ‘Requirements’ as specified in the Service Agreement. Services should also have regard to the relevant best practice statements and guidance provided under the headings of ‘Considerations’.

Requirements for all services are outlined in Section 5.1.1. Service delivery requirements for specific Service Users and Service Types are outlined in Sections 6 and 7 below.

Child protection tertiary support services support children and young people who are referred by the department for interventions focused on assessed needs. Support services and individual interventions provided by NGOs are coordinated by Child Safety Service Centres (CSSCs) based on case plan goals.

The overall objectives of child protection tertiary support services are to:

* increase the stability of care placements
* deliver specialist sexual abuse counselling services for children and young people and their non-offending family members and/or carers
* provide mental health therapeutic interventions for children and young people
* support families and/or carers where ongoing intervention by the department is required
* provide support to young people who are transitioning from care or who have left care and need help to live independently
* keep young people connected to kin, culture, community and country, as culture is recognised as a protective factor.

Services provide emotional support and practical assistance to children and young people and their carers and family members at times of emotional distress or where the conduct of a parent or carer causes disruption to the child or young person’s living situation.

Support to children and young people is primarily to reduce their emotional distress, improve relationships and wellbeing, learn new coping and problem solving skills.

Carers are assisted to learn new ways to support children and young people and receive counselling when support issues become difficult and the carer’s confidence in caring role becomes diminished or stressed.

Services may also support young people to develop the skills and knowledge to live independently.

Services funded under Child Protection Support Services must comply with the relevant statements under ‘Requirements’ as specified in the Service Agreement. Services should also have regard to the relevant best practice statements and guidance provided under ‘Considerations’.

Services should work in accordance with the Family Matters Building Blocks and the Aboriginal and Torres Strait Islander Child Placement Principle which is relevant across the child and family service system. Additional information is available at:

* [Our Way Wellbeing Outcomes Framework](https://www.cyjma.qld.gov.au/resources/campaign/supporting-families/wellbeing-outcomes-framework.pdf)
* [Family Matters: The Family Matters Roadmap](https://www.familymatters.org.au/wp-content/uploads/2016/11/TheFamilyMattersRoadmap.pdf)
* [Aboriginal and Torres Strait Islander Child Placement Principle](https://www.cyjma.qld.gov.au/protecting-children/ongoing-intervention/aboriginal-torres-strait-islander-peoples/aboriginal-torres-strait-islander-child-placement-principle)
* [SNAICC: Understanding and applying the Aboriginal and Torres Strait Islander Child Placement Principle](https://www.snaicc.org.au/wp-content/uploads/2017/07/Understanding_applying_ATSICCP.pdf)
* [SNAICC: The Aboriginal and Torres Strait Islander Child Placement Principle: A guide to support implementation](https://www.snaicc.org.au/the-aboriginal-and-torres-strait-islander-child-placement-principle-a-guide-to-support-implementation/).

Requirements for all services are outlined in Section 5.1.1. Service delivery requirements for specific Service Users and service types are outlined in Sections 6 and 7 below.

##### Requirements for all services

*5.1.1.1 Diversity, culturally respectful practices*

* Services that do not identify as Aboriginal and Torres Strait Islander are expected to recruit workers who identify as Aboriginal and Torres Strait Islander, wherever possible.
* Services must develop effective links with local Aboriginal and Torres Strait Islander organisations and community representatives and ensure culturally respectful practice is a core component of staff development and training.
* When working with Aboriginal and Torres Strait Islander children, young people and families, effective engagement must consider the cultural and historical factors that have led to entrenched disadvantage and vulnerability. Aboriginal and Torres Strait Islander peoples should be supported and empowered to participate in decision making processes.
* Services must be capable to respond in culturally sensitive ways with children, young people, families and carers from culturally and linguistically diverse (CALD) backgrounds by developing strategies including linking with local multicultural organisations and engaging interpreter services.
* Services must be capable to respond to the needs of children and young people with disability.
* Services must apply the Aboriginal and Torres Strait Islander Child Placement Principle (the Act, Section 5C).

*5.1.1.2 Blue Cards*

* The Blue Card system contributes to the creation of safe and supportive environments for children and young people when receiving services and participating in activities which are essential to their development and wellbeing.
* Services must comply with the screening and risk management requirements of the *Working with Children (screening and risk management) Act 2000.*
* People who work with children and young people in regulated employment (including counselling and support) must be suitable. This is assessed through the ‘working with children’ suitability notice (Blue Card). Information is available at [Blue Card Services | Your rights, crime and the law | Queensland Government](https://www.qld.gov.au/law/laws-regulated-industries-and-accountability/queensland-laws-and-regulations/regulated-industries-and-licensing/blue-card-services).

*5.1.1.3 Accessibility*

* Where an organisation is unable to provide a service to a child, young person or family due to ineligibility or lack of capacity, a process must be in place to refer them to an alternative service including providing assisted referral or adequate support to ensure engagement.
* Services must not exclude Service Users with challenging or complex behaviours. Rather, they must develop an alternative process for supporting these Service Users.
* Risk management plans and mitigation strategies must be developed and implemented to ensure accessibility and Service User and worker safety.
* Services must use strategies to engage hard-to-reach children, young people and families, in particular Aboriginal and Torres Strait Islander peoples and those from CALD backgrounds.
* The department supports fee-free access to interpreters for funded service providers. Services must provide access to appropriately qualified interpreters and translators to Service Users who request or have been assessed as requiring language assistance. Services must be delivered in accordance with the [Queensland Government Language Services Policy and Guidelines](https://www.cyjma.qld.gov.au/multicultural-affairs/policy-governance/language-services-policy).
* To access a telephone interpreter, first apply for a Telephone Interpreter Service (TIS) code using this email address [interpreting.services@cyjma.qld.gov.au](mailto:interpreting.services@cyjma.qld.gov.au).
* Once the service has a TIS code, quote this code each time TIS is booked to provide an interpreting service and TIS will bill the department.
* If services require Deaf Services Qld, services should proceed with engagement and invoicing. This confirms the service’s requirements were met.
* Following service provision from Deaf Services Qld. services will then need to seek re-imbursement from the department by sending an invoice to [interpreting.services@cyjma.qld.gov.au](mailto:interpreting.services@cyjma.qld.gov.au) and providing a copy of a paid invoice. Supporting documents will be checked and processed upon receipt of the invoice.
* Information about interpreter services is available at [Non-Government organisation access to interpreting services](https://www.cyjma.qld.gov.au/about-us/our-department/funding-grants-investment/non-government-organisation-access-interpreting-services).

*5.1.1.4 Workforce competency*

* Staff must be appropriately trained, be culturally and professionally diverse and must have the skills to meet the complex needs of Service Users, wherever possible, including competency in risk assessment and safety planning as part of providing counselling and therapeutic support.
* Services must also employ staff who are appropriately qualified / experienced in working with Aboriginal and Torres Strait Islander Peoples and communities.
* Services must recruit appropriately qualified staff who have specialist skills in providing integrated and responsive therapeutic services and must provide appropriate induction and ongoing training and supervision of staff.
* Evidence based practice must be delivered when working with children, young people and families with an experience of trauma, abuse and/or neglect.
* The department understands that, in some circumstances, it may be difficult to recruit and retain staff, for example in rural and remote areas. It may also be desirable for organisations to have staff with a mix of qualifications, cultural connections and knowledge of the local area.

*5.1.1.5 Referral engagement and participation*

* Multiple pathways to tertiary support services are used to maximise access to support children, young people and families.
* CSSC referrals must take priority and services must advise referring CSSCs if referrals are declined.
* Services and workers must:
  + persevere to engage children, young people and families
  + ensure needs’ assessments inform support provided
  + develop a partnership approach to children, young people, families and carers
  + respond promptly and flexibly to referrals and prioritise Service Users according to needs.

*5.1.1.6 Case planning, management and service delivery*

* The department has the legislated case management responsibility for children and young people once ongoing statutory intervention is required.
* Services must provide confidential support in a safe and open way that encourages the expression of the child or young person’s concerns and does not further harm or re-traumatise them.
* Services must deliver a consistent and comprehensive approach to the assessment of the child or young person’s needs which considers their developmental stage and identified goals.
* Services must work with CSSCs and work to a case plan developed by CSSCs. The case plan must include one of the following goals:
  + Child or young person to remain safely in the home
  + Reunification of the child or young person with family
  + Long-term care
  + Young person living independently
  + Other permanency options.
* Services must provide an integrated and responsive therapeutic suite of services including individual or family counselling and group work, where appropriate.
* Services must ensure adequate planning is in place for service delivery continuity in the event of, for example, unplanned or planned staff absences.

*5.1.1.7 Output delivery*

* Output delivery against the capacity for which the service is funded will be regularly assessed by the department. Services should alert the department if unable to achieve the level of outputs for which they are funded as soon as possible.
* Where a service is unable to deliver outputs to the level of funded capacity agreed to in the Service Agreement, the department will require a practical action plan demonstrating how the service will be able to achieve its funded capacity within a realistic timeframe. If a service consistently delivers outputs below its level of funded capacity, the department will seek to work with the service to understand the reason/s for the under-delivery and develop strategies to respond.
* The work of volunteers, students or other unpaid staff is not included in the reportable output hours for the department.
* The work of paid staff who are engaged by a service outside of the contract funding footprint is not included in the reportable output hours. This is because performance is assessed against the funding allocation and additional service outputs can skew the assessment.[[1]](#footnote-2)

*5.1.1.8 Outcomes delivery*

* Services must focus on delivering measurable change for Service Users as outcomes of the supports provided and aligned with the purpose of funding and reporting requirements.
* Outcomes for Service Users should be evidenced through a recognised client assessment tool or method.

*5.1.1.9 Networking*

* Services must participate in existing networks and/or establish and maintain networks and partnerships within the local community and with a broad range of support and universal services.

##### Considerations for all services

*5.1.2.1 Cultural capability*

* Safe care and connection of Aboriginal and Torres Strait Islander children and young people are vital to achieve the intent of the [Supporting Families Changing Futures](https://www.cyjma.qld.gov.au/campaign/supporting-families) reforms, the [Our Way: A generational strategy for Aboriginal and Torres Strait Islander children and families 2017-2037](https://www.cyjma.qld.gov.au/resources/campaign/supporting-families/our-way.pdf)
* Organisations should understand and work in accordance with the [Family Matters Building Blocks](https://www.familymatters.org.au/wp-content/uploads/2016/11/TheFamilyMattersRoadmap.pdf), the [Aboriginal and Torres Strait Islander Child Placement Principle](https://www.cyjma.qld.gov.au/protecting-children/ongoing-intervention/aboriginal-torres-strait-islander-peoples/aboriginal-torres-strait-islander-child-placement-principle) and [how to apply the Aboriginal and Torres Strait Islander Child Placement Principle](http://www.snaicc.org.au/understanding-applying-aboriginal-torres-strait-islander-child-placement-principle/) as they are relevant across the child and family service system.

*5.1.2.2 Case planning and management*

* The case plan identifies the support needs of Service Users. Case plans are subject to regular review. Services should contribute to case plans and review processes to include any identified current and future risks of harm.
* The case plan integrates outcomes from:
* the Child Strengths and Needs Assessment
* the Child Health Passport
* the Education Support Plan
* the Cultural Support Plan for Aboriginal and Torres Strait Islander children and young people and for children and young people from CALD backgrounds
* transition to adulthood planning which includes actions to help the young person transition to adulthood from when they are 15 years to up to 25 years of age, other than when the young person has a long-term guardian
* any specialist assessments, such as those conducted by Evolve Therapeutic Services or through the National Disability Insurance Scheme, and any behaviour support and/or treatment plans.
* Departmental staff will assess each child or young person’s needs and refer them to the most appropriate support service to assist in meeting case plan outcomes.

*5.1.2.3 Service delivery*

* Services may assist CSSCs in decision making by participating in case planning and reviews coordinated and facilitated by CSSCs in accordance with the [Child Safety Practice Manual](https://cspm.csyw.qld.gov.au/).
* Support will be provided where the Service User lives or in clinical settings. The Service User’s mobility and wellbeing must be considered by the service concerning where and when the support is provided.
* Service delivery may be delivered through one or more of the following modes to meet the individual, geographic and cultural needs of the Service User including:
* **Centre-based**: Services provided face to face on the service’s premises, a fixed location that children, young people and families can visit.
* **Mobile**: Outreach services provided in any location(s) other than the service’s premises. Note, outreach services include specific focus on engaging young people who are not in approved placements.
* **Virtual**: Services may be delivered over the telephone, email or internet.

# Service delivery requirements for specific Service Users

## Children and young people under 18 years who are subject to statutory intervention (U2310)

*Definition*

* Children and young people under 18 years who are subject to statutory intervention and require counselling or other support as a result of abuse (physical, emotional or sexual) or neglect.

##### Requirements

Refer to specific service types.

##### Considerations

Refer to specific service types.

## Families and carers of children and young people in care (U2319)

*Definition*

* Carers (foster and kinship) of children and young people, under 18 years, subject to statutory child protection intervention and who require support to maintain their caring role of a child or young person who has experienced harm or neglect.
* Family members of children and young people, in specific circumstances as determined by an assessment of need by the referring CSSC.
* Parents and other family members of children and young people, aged between five and 17 years subject to statutory child protection intervention, who are receiving support services.
* Carers and non-offending family members of children and young people, aged between five and 18 years and have been sexually abused, who have previously been subject to ongoing intervention with a child protection order within 12 months of the case being closed.

##### Requirements

Refer to specific service types. In all situations, referrals from the department’s CSSCs take priority.

##### Considerations

Refer to specific service types.

## Young people transitioning from statutory care 15-21 years (U2325)

*Definition*

* Service Users will be young people:
* subject to a child protection order granting their custody or guardianship to the Chief Executive aged 15-17 years, or
* aged 15-21 years for whom a child protection order granting their custody or guardianship to the Chief Executive has been discharged or has otherwise expired after turning 15 years of age.

##### Requirements

Refer to specific service types.

##### Considerations

Refer to specific service types.

## Young people transitioning from statutory care 15-25 years (U2326)

*Definition*

* + - * Service Users will be young people:

subject to a child protection order granting their custody or guardianship to the Chief Executive aged 15-17 years, or

who are aged 15-25 years for whom, after turning 12 years, have had their order discharged or their order has otherwise expired, before they turned 18 years.

##### Requirements

Refer to specific service types.

##### Considerations

Refer to specific service types.

## Young people aged 12 to under 18 years who are subject to statutory intervention, who are disengaging from placement and/or not in approved placements (U2311)

*Definition*

* + - * Service Users will be young people aged 12 to under 18 who are subject to statutory intervention, who are disengaging from placement and/or not in approved placements.

##### Requirements

Refer to specific service type.

##### Considerations

Refer to the specific service type.

# Service delivery requirements for specific service types

## Support — Counselling and Intervention Support (CIS) Services (T319)

*Definition*

CIS services are provided to children and young people under 18 years who are subject to statutory intervention and require support as a therapeutic response arising from a personal experience of physical, emotional or sexual abuse/harm and neglect.

##### Requirements – Counselling and Intervention

CIS services must deliver support designed to:

* + - * provide targeted therapeutic responses conducted in a private and safe setting by skilled and qualified practitioners. Practitioners listen attentively and patiently to the express feelings and circumstances of children and young people (and carers) and perceive difficulties from children and young people’s points of view to facilitate choice and positive changes in their lives
      * increase stability of care placements and support to families where ongoing intervention by the department is required or to support reunification, where it is safe to do so.

*7.1.1.1 Referral pathways*

* Only CSSCs may refer Service Users to CIS services.
* Other government and non-government agencies are not permitted to make referrals to CIS services.

*7.1.1.2 Case planning and management*

* The child or young person’s participation in counselling support must be voluntary. A child or young person will not be referred to a counsellor without having the available support and its overall purpose and therapeutic value properly explained.
* Counselling and intervention support must be conducted with the participation of the child or young person’s carer and other members of their support network.
* CIS services are not experienced or qualified to manage children and young people with significant mental health needs or psychiatric disability or intervene in crisis situations including risk of suicide. In these circumstances, children and young people must be referred to specialist mental health services (e.g. Child and Youth Mental Health Services) with input from the CSSC. CIS services do not provide after-hours crisis or emergency support to Service Users of the department.
* Young people aged 18 years may continue to receive counselling to assist with transition to adulthood, through a support service case for up to 12 months, when there are outstanding case plan goals or key life events that require this type of ongoing support.

##### Considerations – Counselling and Intervention

*7.1.2.1 Case planning and management*

* Services may assist CSSCs in decision making by participating in case planning and case plan reviews that are coordinated and facilitated by CSSCs
* Hours of contact and coordination support provided to Service Users depends on the nature of the referral made by the CSSC and the level of support required.
* The child or young person’s carer is an important consideration in establishing a therapeutic response. The carer will often provide encouragement to the child or young person to seek counselling support; they may accompany the child or young person to counselling sessions and, in some cases, may participate in counselling with the child or young person. The carer may learn techniques and new communication methods that enhance the child or young person’s emotional wellbeing and relationship with the carer. The carer will receive practical ideas and advice to better support the child or young person.

## Support — Evolve Therapeutic Services (T323)

*Definition*

Evolve Therapeutic Services (ETS) is a state-wide, cross-government initiative providing therapeutic mental health interventions to children and young people subject to statutory intervention, with severe and complex psychological and/or behavioural problems.

Service Users include children and young people with severe and complex psychological and/or behaviour problems who are:

* subject to an interim or finalised child protection order granting custody or guardianship to the chief executive of the department, or
* on an Intervention with Parental Agreement and subject to a child protection care agreement, or
* transitioning from care and have a support service case.

Service Users include key stakeholders in the child or young person’s safety and support network including carers, family members and other professionals such as child safety officers, guidance officers, teachers and residential care workers. ETS teams will maintain contact with the child or young person’s child safety officer to keep them safe.

Departmental regional discretion may be used on a case by case basis, and with agreement of the ETS Team Leader, to refer a child or young person subject to statutory intervention who is in care or living at home and presents with either severe and/or complex psychological and/or behaviour problems or who are assessed as being on a trajectory towards these concerns, where an alternative appropriate service is unable to be accessed.

##### Requirements — Evolve Therapeutic Services

The priority cohort for the ETS program is Service Users aged 5 – 17 years. Local governance arrangements will manage the referrals for children aged 0 – 4 years where it is determined the ETS model is the best response to the child’s identified needs.

ETS interventions occur at clinical and system levels and must be underpinned by a theoretical framework informed by theories of attachment, trauma, grief and loss, child development and ecological and family systems theory. Clinical interventions must include:

* comprehensive assessment of the bio/psycho/social/cultural aspects of the child or young person and their significant others
* intensive short and medium to long-term interventions to meet the needs of the child or young person and their significant others and collaboration in the development, implementation and review of therapeutic services to the Service User
* direct intervention with carers and family of origin, where appropriate
* attachment or trauma focused therapies, which may include dyadic work (where the focus is on the facilitation of therapeutic attachment relationships between the child or young person and their carer), individual therapy, family based intervention or the use of other treatment modalities
* facilitating access for children, young people and their families receiving ETS support to a range of mental health service options, as appropriate and available, such as specialist infant mental health programs and inpatient admissions.

System interventions must include:

* the development, implementation and evaluation of therapeutic mental health services to children and young people referred to ETS as defined by the ETS Model of Service and associated framework. This includes, but is not limited to, treatment intensity and an ecological system’s focus to strengthen the connection between service providers to promote a supportive system of care
* stakeholder collaboration to determine intervention goals including recognition of stakeholder plans
* carer support including foster carer training
* specialist consultation-liaison services to other service providers internal to Queensland Health and externally across the government, non-government and private sectors
* specialist professional development and training to staff internal to the ETS team as well as staff of key government departments, private practitioners and NGOs
* provision of regular reports and review of progress of each child or young person presented as part of local governance arrangements e.g. to the Evolve panel in the relevant area
* provision of relevant information, advice and guidance to ETS partners regarding supports and services to meet the needs of children and young people receiving support through ETS.

The ETS model includes:

* + - * performance measurement and reporting aligned to the Evolve Performance Management Framework demonstrating outcomes for children and young people. Data collected and information used to inform performance reports is collected in line with data definitions, counting rules and surveys identified or supplied by, or negotiated with and agreed to, by the department
      * the working arrangements regarding ETS governance, management and operations set out in the Memorandum of Understanding (MoU) between the department and Queensland Health and associated matters captured in the schedules
      * operations including those provided through contracted agencies which are consistent with policies and procedures, the Model of Service and the MoU
      * a central program management function to:
      * support coordination and operation per the funding and resourcing in the service plan
      * develop and enhance the ETS program
      * direct state-wide program support activities
      * broker and facilitate program specific training and professional development
      * report on internal and external accountabilities.
* participation in local and state-wide mechanisms that contribute to the ongoing development of the Model of Service e.g. training, professional development, program evaluation and clinical forums. Departmental priority groups for training are foster and kinship carers, residential care workers and CSSC staff
* participation in governance and performance management arrangements such as Local Steering Committees, Quarterly Service Meetings and other activities as determined at the local level by the departmental region and Hospital and Health Service.

Culturally sensitive services must be available to Aboriginal and Torres Strait Islander and CALD children and young people and appropriate resources must be allocated to meet their needs.

##### Considerations — Evolve Therapeutic Services

Most interventions are medium to long term and aimed to reduce the child or young person’s maladaptive emotional and behavioural responses. However, crisis and short-term interventions may be used to stabilise the child or young person and the system so longer term or more intensive work is possible.

## Support — Transition to Adulthood (including after care support): 15-25 years (T329)

*Definition*

Support to young people through the transition to adulthood period to develop the maturity, skills and connections to participate fully as adult members of society.

##### 7.3.1 Requirements — Transition to Adulthood

Service delivery must support young people to:

* have a sense of identity and belonging, including an understanding of their family, community and cultural background
* be connected to peers, family, community and culture
* be healthy: physically, emotionally, mentally and sexually
* have a safe and stable place to live and support to sustain those arrangements
* access be educated and have a job or are engaged in continuing education
* have practical life skills to look after themselves
* have a stable income and are able to make basic financial decisions.

Transition to adulthood support services will be consistent with the department’s transition from care planning processes for young people in care, which includes the service provider’s and young person’s participation in transition from care case planning meetings and reviews with key departmental staff and other stakeholders.

##### 7.3.2 Considerations — Transition to Adulthood

Intensity of support will vary according to the developmental needs, immediacy of case plan goals and individual issues presenting for each young person. As a young person transitions through to adulthood, their needs may change and service providers should consider a step up and step down approach to best meet the needs of the individual.

Amendments to the Act acknowledge that most young people need access to supports well beyond their eighteenth birthday.. As far as reasonably practicable, the department must ensure help is available to assist a young person in their transition to adulthood from age 15 up to when the young person turns25 years old.

Supports and services provided will be in response to the best interests of a young person and will promote positive outcomes and the achievement of personal goals. Effective outcomes for young people may be delivered through:

* culturally responsive and capable services – ensuring services and supports meet the cultural needs of young people, particularly to ensure their ongoing connection or reconnection to family, community, culture and country
* connections and timely access – providing young people with opportunities to connect to support through multiple access mechanisms
* collaborative approaches – working closely with child safety officers, natural mentors, other government agencies and funded NGOs to ensure planning considers all available programs and support within the community
* individualised support – assisting through resourcing and targeted responses to young people, based on an assessment of their needs. Individualised support includes more intensive support options for young people where their complex and multidimensional needs may be preventing them from having the capacity to learn these skills
* the continuum of support – focusing on transition from care planning and preparation for young people from the age of 15 years and making support available up to the age of 25 years of age
* stronger localised, place-based focus areas –promoting greater continuity of support for young people to develop a complete picture of needs through routine and standardised data collection.

## Support — Educational Support (T330)

*Definition*

A learning based mentoring program for children in care aiming to improve their learning outcomes.

##### 

##### Requirements — Educational Support

The service must:

* + - * + interview, screen and train volunteers who are then matched with a child who has been referred to the program by the department
        + support the volunteers who visit a child at home once a week to deliver literacy and numeracy modules through reading books, playing educational games and engaging in other fun, learning based activities.

##### Considerations — Educational Support

Nil

## Support — Sexual Abuse Counselling Services (T335)

*Definition*

Sexual abuse counselling services (SACS) assist children and young people aged five to under 18 years who are subject to child protection statutory intervention and have been sexually abused or are engaging in sexualised or early sexual offending behaviour.

##### Requirements — Sexual Abuse Counselling

SACS must address the range of issues arising from sexual abuse through an appropriate mix of therapeutic and family/carer-based support services, assessment and individual case plans that are responsive to the individual needs of children, young people and their families/carers. The services must provide:

* equitable access to children, young people, their non-offending family members and carers, based on priority of need
* support and counselling that are trauma informed and strengths based
* comprehensive treatment plans, which are regularly reviewed and updated, and include the therapeutic goals and the approximate timeframe for treatment and support
* links to other specialist sexual abuse services throughout Queensland and Australia and other specialist practitioners in the field of sexual abuse counselling
* links to other support and treatment services and coordination to meet children and young people’s needs, in consultation with their child safety officer
* advice to the referring CSSC child safety officer if concerns arise during the period of treatment
* regular written progress reports and a final report and/or recommendations at the conclusion of counselling support
* processes for the recruitment, supervision and support of tertiary-level qualified staff, and the provision of regular supervision and professional development opportunities and peer review.

Young people aged 18 years may continue to receive sexual abuse counselling to assist with transition to adulthood, through a support service case for up to 12 months, when there are outstanding case plan goals or key life events that require this type of ongoing support.

##### Considerations — Sexual Abuse Counselling

Consideration should be given to the following:

* Information, support, counselling and strategies for non-offending family members and carers to appropriately respond to the behaviours and challenges of the child or young person who has experienced sexual abuse.
* Where there is capacity, SACS may also work with:
* children who have been sexually abused but are not and have not been statutory child protection Service Users or previously reported to the department
  + carers and non-offending family members of children and young people who are aged between five and 18 years and have been sexually abused, who have previously been subject to ongoing intervention with a child protection order within 12 months of the case being closed.
* Information and support provided to workers in non-family based care services, including advice and training in understanding the child or young person’s therapeutic support needs, and opportunities to contribute to the care approach.
* Reference to the [Queensland Government Interagency Guidelines for Responding to People who have Experienced Sexual Assault](https://www.publications.qld.gov.au/dataset/1f7ea4ec-bec8-4428-ab60-0a6c119ac70d/resource/3b3958c9-504f-4698-a64d-e56ca7e5248e).

## Support — Assertive Outreach (T316)

*Definition*

Young people aged 12 to under 18 years who are subject to statutory intervention, who are disengaging from placement and/or not in approved placements.

Assertive outreach is Service User centred and provides proactive approaches to engage hard to reach young people in spaces where they feel comfortable. Assertive outreach aims to find flexible ways to work with young people rather than reducing or ending support.

The primary objective of assertive outreach is to increase the safety of young people by actively engaging and supporting them into safe, stable and sustainable living arrangements.

Assertive outreach services will provide an immediate response to young people who may be at risk of harm or who do not present to support services of their own volition or as required as part of their child safety case plan.

Assertive outreach services will provide consistent, culturally safe links which will include focus on:

* access to quality cultural support, guidance and immersion to kin, community and country, including community of origin that will help to maintain and strengthen their identity.
* opportunities for cultural outreach and connection by supporting young people’s cultural capacity, understanding and self-determination.

Assertive outreach is an important gateway to more individualised support. Over time, workers build relationships of trust with young people and encourage participation in culturally appropriate support activities.

The primary referral pathway into assertive outreach services will be from CSSCs. However, referrals from youth services, homeless outreach services or other services, engaging with young people not in approved placements, or self-referrals, will be considered where there is capacity.

##### 7.6.1 Requirements — Assertive Outreach

*7.6.1.1 Improving the lives for young people*

Assertive outreach services must build rapport and walk with young people to deliver culturally appropriate support designed to achieve the following outcomes:

* Safe, stable and sustainable home and living environment.
* Reduced risk-taking behaviours and improved personal safety.
* Explore and keep strong connections to family, culture and community, including community of origin that will help to maintain and strengthen their identity.
* Access to resources to support their health and wellbeing needs (e.g. physical, emotional, sexual).
* Opportunities for social participation and community and cultural connection including recreational activities, sport, language, dance and music.
* Access to education, training or employment opportunities.
* Access to stable income and to manage finances.
* Support to transition to, and sustain, independent living.

Where a young person self refers or is referred by a third party, the service must advise the Child Safety Officer to notify them of the referral.

*7.6.1.2 Connecting with young people*

To reach young people who may be at risk, assertive outreach services must:

* initiate contact with young people where they are located, whether in a public space or where they are currently living
* ensure safety planning and risk assessment activities are undertaken with young people who are sleeping rough, in partnership with the department and other relevant support services
* maintain engagement and relationships with young people, and continue to provide support to young people, if they move from one setting to another or to another location within their geographic catchment
* facilitate referrals for young people who move outside of their geographic catchment
* address the immediate and practical needs of young people.

Ongoing support with young people must include:

* collaboration with other government and non-government services to meet the individual needs of young people including but not limited to: Centrelink, housing and homelessness services, education, vocation and employment providers, health and mental health providers (including support provided through the National Disability Insurance Scheme), youth justice and community access services
* proactive support to young people to navigate the service system including, but not limited to, facilitating referrals to culturally appropriate services, transport assistance, attending appointments with young people and providing advocacy support
* support to young people to access and/or stabilise accommodation, including safety planning, harm minimisation, and continued support
* the provision of tools, resources and skills for young people to reconnect with carers and family where it is safe to do so
* facilitation of connections between young people and their Child Safety Officers
* regular communication with young people’s Child Safety Officers including being identified as part of the young people’s safety and support networks and participating in child safety case planning meetings to support case work and achieve case plan goals
* work in partnership with the department and young people’s care teams to achieve the goals identified in their child safety case plans and transition to adulthood plans, noting goals may change if young people’s circumstances change. If this occurs, services should work with the department and young people’s care teams to confirm support of the new goals for inclusion in case plans and transition to adulthood plans. Flexibility is required to re-engage and walk with young people to meet their needs.

The voices of young people are to be front and centre of assertive outreach service delivery.

*7.6.1.3 Staffing*

Services must ensure staff:

* have relevant qualifications, skills and experience
* are supported to engage with young people in a culturally safe way in an outreach setting through ongoing training. This includes specific training on:
* cultural capability
* youth mental health first aid
* drug and alcohol use
* trauma informed practice and the impact on functioning and wellbeing
* domestic, family and sexual violence
* risk assessment, safety planning and case management.
* possess a current First Aid Certificate
* apply a risk assessment and mitigation framework to manage assertive outreach activities including where two staff members may be required to ensure safety of young people and the staff
* are provided with a mobile phone and other required resources to support their safety such as a duress alarm and First Aid Kits.

##### 7.6.2 Considerations — Assertive Outreach

* Support to young people should consider, where appropriate and safe, making recommendations to child safety to assess whether the residences young people are living in could be supported to become an approved placement.

##### 7.6.3 Other resources — Assertive Outreach

* [Mental health](https://cspm.csyw.qld.gov.au/practice-kits/mental-health) practice kit
* [Managing high risk behaviour policy](https://www.csyw.qld.gov.au/resources/dcsyw/foster-kinship-care/managing-high-risk-behaviour-646.pdf)
* [Positive behaviour support policy](https://www.csyw.qld.gov.au/resources/dcsyw/foster-kinship-care/positive-behaviour-support-604.pdf)
* [Positive behaviour support and managing high risk behaviour](https://cspm.csyw.qld.gov.au/resources/resource/Positive-behaviour-support-and-managing-high-risk/56ee33da-bc91-4ecf-892f-255f83a36a72) (Practice Guide)

# Deliverables and performance measures

The following deliverables and performance measures are funded under the Child Protection Support Services funding area. The service agreement will identify the relevant outputs and measures for each service outlet, the quantum to be delivered and the range of measures to be collected and reported.

**COUNTING RULES, DESCRIPTORS AND REPORTING EXAMPLES:** For counting rules, detailed descriptors and examples please refer to the [Tertiary Support Services Counting Rules Fact Sheet](https://www.cyjma.qld.gov.au/about-us/our-department/funding-grants-investment/output-funding-reporting)

**OUTCOME MEASUREMENT:** All quantitative reporting on outcome measures can be supplemented with **optional** qualitative evidence. Qualitative reports can be uploaded to P2i using an IS70 report. As qualitative reporting is optional the IS70 code will not appear in agreements but will be visible in P2i.

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| **Service Users** | **Service Types** | **Outputs** |
| **U2310 –** Children and young people under 18  years who are subject to statutory intervention and require counselling or other support as a result of abuse (physical emotional or sexual) or neglect. **U2319 –** Families and carers of children and young people in care  **U2325 –** Young people transitioning from statutory  care – 15-21 year olds  **U2326 –** Young people transitioning from statutory  care – 15-25 year olds  **U2311** – Young people aged 12 to under 18 years who are subject to statutory intervention, who are disengaging from placement and/or not in approved placements. | **T319 –** Counselling and intervention  support  **T323 –** Support – Evolve Therapeutic  Services  **T329 –** Support – Transition to Adulthood  **T330 –** Support – Educational support  **T335 –** Support – Sexual Abuse Counselling  **T316 –** Support – Assertive Outreach | **A01.2.02 –** Case management  **A01.2.08 –** Counselling  **A01.2.99** **–** Personal support activities not elsewhere classified  **A07.1.02 –** Integrated Service System Development (for ETS)  **A07.1.03 –** Provision of training and training resources (for ETS)  **A07.1.04 –** Volunteer resource development and/or placement |

**The following information relates to information found in items 6.2 and 7.1 in a Service Agreement or 6.2 and 9.1 in a Short Form Service Agreement**

**U2310 - Children and young people under 18 years who are subject to statutory intervention and require counselling or other support as a result of abuse (physical, emotional or sexual) or neglect.**

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| **Relates to item 6.2 &**  **7.1 or 9.1 of the agreement** | | **Relates to item 6.2 of the agreement** | | | **Relates to item 7.1 or 9.1 of the agreement** | |
| **Service User Code** | **Service Type Code** | **Output** | **Quantity per annum** | **Number of Service Users** | **Output Measures** | |
| **U2310** | T319 | **A01.2.08**  Counselling | Number of hours | NA | **A01.2.08** | Number of hours provided during the reporting period |
| **U2310** | T323 | Number of Service Users who received a service during the reporting period |
| **U2310** | T335 |
| **U2310** | T330 | **A07.1.04**  Volunteer resource development and/or placement | Number of hours | NA | **A07.1.04** | Number of hours provided during the reporting period |
| Number of Service Users who received a  service during the reporting period |

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| **Relates to item 7.1 or 9.1 of the agreement** | | | |
| **Service**  **User Code** | **Service**  **Type Code** | **Throughput Measure** | |
| **U2310** | T319 | **IS132** | Number of Service Users with cases commenced during the reporting period |
| **U2310** | T323 |
| **U2310** | T335 |
| **U2310** | T319 | **IS133** | Number of existing Service Users at the beginning of the reporting period |
| **U2310** | T323 |
| **U2310** | T335 |
| **U2310** | T319 | **IS145** | Number of Service Users who have exited from the service during the reporting period |
| **U2310** | T323 |
| **U2310** | T335 |
| **U2310** | T319 | **IS201** | Number of referrals received during the reporting period |
| **U2310** | T323 |
| **U2310** | T335 |
| **U2310** | T319 | **GM07** | Number of Service Users who had case plans closed/finalised as result of majority of needs being met during the reporting period |
| **U2310** | T323 |
| **U2310** | T330 |
| **U2310** | T335 |

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| **Service**  **User Code** | **Service**  **Type Code** | **Demographic Measure** | |
| **U2310** | T319 | **IS35** | Number of Service Users identifying as Aboriginal and/or Torres Strait Islander |
| **U2310** | T323 |
| **U2310** | T330 |
| **U2310** | T335 |
| **U2310** | T319 | **IS39** | Number of Service Users identifying as being from Culturally and Linguistically diverse backgrounds |
| **U2310** | T323 |
| **U2310** | T330 |
| **U2310** | T335 |
| **U2310** | T319 | **IS207** | Number of Service Users over 15 years |
| **U2310** | T323 |
| **U2310** | T335 |
| **U2310** | T319 | **IS137** | Number of Service Users 18 - 21 years |
| **U2310** | T335 |

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| **Service**  **User Code** | **Service**  **Type Code** | **Outcome Measure** | |
| **U2310** | T319 | **OM2.1.01** | Number of Service Users that have shown improvements in being safe and/or protected from harm |
| **U2310** | T323 |
| **U2310** | T335 |
| **U2310** | T319 | **OM2.1.08** | Number of Service Users with improved life skills |
| **U2310** | T323 |
| **U2310** | T330 |

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| **Service User**  **Code** | **Service Type Code** | **Other Measure** | |
| **U2319** | T319 | **IS70** | Upload report attached |
| **U2310** | T323 |
| **U2310** | T330 |
| **U2310** | T319 | **IS204** | Number of cases per case worker (FTE positions) at the end of the reporting period |
| **U2310** | T323 |
| **U2310** | T335 |
| **U2310** | T319 | **GM16** | What significant achievements or factors have impacted on the quality of service delivery during the reporting period. |
| **U2310** | T323 |
| **U2310** | T330 |
| **U2310** | T335 |

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| **U2319 – Families and carers of children and young people in care** | | | | | | | | | |
| **Relates to item 6.2 &**  **7.1 or 9.1 of the agreement** | | | | **Relates to item 6.2 of the agreement** | | | **Relates to item 7.1 or 9.1 of the agreement** | | |
| **Service**  **User Code** | | **Service**  **Type Code** | | **Output** | **Quantity per**  **annum** | **Number of**  **Service Users** | **Output Measures** | | |
| **U2319** | | T319 | | **A01.2.08**  Counselling | Number of  hours | NA | **A01.2.08** | Number of hours provided during the reporting  period | |
| **U2319** | | T335 | | Number of Service Users who received a  service during the reporting period | |
| **Relates to item 7.1 or 9.1 of the agreement** | | | | | | | | |
| **Service**  **User Code** | **Service**  **Type Code** | | **Throughput Measure** | | | | | |
| **U2319** | T319 | | NA | | NA | | | |
| **U2319** | T335 | |
| **U2319** | T319 | | **GM07** | | Number of Service Users who had case plans closed/finalised as result of the majority of needs being met during the reporting period | | | |
| **U2319** | T335 | |

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| **Service**  **User Code** | **Service**  **Type Code** | **Demographic Measure** | |
| **U2319** | T319 | **IS35** | Number of Service Users identifying as Aboriginal and/or Torres Strait Islander |
| **U2319** | T335 |
| **U2319** | T319 | **IS39** | Number of Service Users identifying as being from Culturally and Linguistically diverse background |
| **U2319** | T335 |

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| **Service User**  **Code** | **Service Type Code** | **Outcome Measure** | |
| **U2319** | T319 | **OM2.1.01** | Number of Service Users that have shown improvements in being safe and/or protected from harm |
| **U2319** | T335 |
| **U2319** | T319 | **OM2.1.08** | Number of Service Users with improved life skills |

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| **Service**  **User Code** | **Service**  **Type Code** | **Other Measure** |  |
| **U2319** | T319 | **IS70** | Upload report attached |
| **U2319** | T323 |
| **U2319** | T330 |
| **U2319** | T319 | **IS204** | Number of cases per case worker (FTE positions) |
| **U2319** | T335 |
| **U2319** | T319 | **GM16** | What significant achievements or factors have impacted on the quality of service delivery during the reporting period |
| **U2319** | T335 |

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| **U2325 - Young people transitioning from statutory care – 15-21 year olds** |

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| **Relates to item 6.2 &**  **7.1 or 9.1 of the agreement** | | **Relates to item 6.2 of the agreement** | | | **Relates to item 7.1 or 9.1 of the agreement** | |
| **Service User Code** | **Service Type Code** | **Output** | **Quantity per annum** | **Number of Service Users** | **Output Measures** | |
| **U2325** | T329 | **A01.2.02**  Case management | Number of  hours | NA | **A01.2.02** | Number of hours provided during the reporting  period |
| Number of Service Users who received a  service during the reporting period |
| **U2325** | T329 | **A01.1.06**  Information, advice, individual advocacy, engagement and/or referral | Number of  hours | Number of  Service Users | **A01.1.06** | Number of hours provided during the reporting  period |
| Number of Service Users who received a service during the reporting period |

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| **Relates to item 7.1 or 9.1 of the agreement** | | | |
| **Service User**  **Code** | **Service Type Code** | **Throughput Measure** | |
| **U2325** | T329 | **IS132** | Number of Service Users with cases commenced during the reporting period |
| **U2325** | T329 | **IS133** | Number of existing Service Users at the beginning of the reporting period |
| **U2325** | T329 | **IS145** | Number of Service Users who have exited from the service during the reporting period |
| **U2325** | T329 | **IS201** | Number of referrals received during the reporting period |
| **U2325** | T329 | **GM07** | Number of Service Users who had case plans closed/finalised as a result of the majority of needs being met during the reporting period |

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| **Service**  **User Code** | **Service**  **Type Code** | **Demographic Measure** | |
| **U2325** | T329 | **IS35** | Number of Service Users identifying as Aboriginal and/or Torres Strait Islander |
| **U2325** | T329 | **IS39** | Number of Service Users identifying as being from Culturally and Linguistically diverse background |
| **U2325** | T329 | **IS207** | Number of Service Users over 15 years |
| **U2325** | T329 | **IS137** | Number of Service Users 18 - 21 years |

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| **Service**  **User Code** | **Service**  **Type Code** | **Outcome Measure** | |
| **U2325** | T329 | **OM2.1.08** | Number of Service Users with improved life skills |

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| **Service**  **User Code** | **Service**  **Type Code** | **Other Measure** | |
| **U2325** | T329 | **IS70** | Upload report attached |
| **U2325** | T329 | **GM16** | What significant achievements or factors have impacted on the quality of service delivery during the reporting period |

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| **U2326 - Young people transitioning from statutory care – 15-25 year olds** |

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| **Relates to item 6.2 and**  **7.1 or 9.1 of the agreement** | | **Relates to item 6.2 of the agreement** | | | **Relates to item 7.1 or 9.1 of the agreement** | |
| **Service User Code** | **Service Type Code** | **Output** | **Quantity per annum** | **Number of Service Users** | **Output Measures** | |
| **U2326** | T329 | **A01.2.02**  Case management | Number of  hours | NA | **A01.2.02** | Number of hours provided during the reporting  period |
| Number of Service Users who received a  service during the reporting period |
| **U2326** | T329 | **A01.1.06**  Information, advice, individual advocacy, engagement and/or referral | Number of  hours | Number of  Service Users | **A01.1.06** | Number of hours provided during the reporting  period |
| Number of Service Users who received a service during the reporting period |

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| **Relates to item 7.1 or 9.1 of the agreement** | | | |
| **Service User**  **Code** | **Service Type Code** | **Throughput Measure** | |
| **U2326** | T329 | **IS132** | Number of Service Users with cases commenced during the reporting period |
| **U2326** | T329 | **IS133** | Number of existing Service Users at the beginning of the reporting period |
| **U2326** | T329 | **IS145** | Number of Service Users who have exited from the service during the reporting period |
| **U2326** | T329 | **IS201** | Number of referrals received during the reporting period |
| **U2326** | T329 | **GM07** | Number of Service Users who had case plans closed/finalised as a result of the majority of needs being met during the reporting period |
| **U2326** | T329 | **IS259** | Number of existing Mentors receiving ongoing support |

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| **Service**  **User Code** | **Service**  **Type Code** | **Demographic Measure** | |
| **U2326** | T329 | **IS35** | Number of Service Users identifying as Aboriginal and/or Torres Strait Islander |
| **U2326** | T329 | **IS39** | Number of Service Users identifying as being from Culturally and Linguistically diverse background |
| **U2326** | T329 | **IS207** | Number of Service Users over 15 years |
| **U2326** | T329 | **IS137** | Number of Service Users 18 - 21 years |

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| **Service**  **User Code** | **Service**  **Type Code** | **Outcome Measure** | |
| **U2326** | T329 | **OM2.1.08** | Number of Service Users with improved life skills |

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| **Service**  **User Code** | **Service**  **Type Code** | **Other Measure** | |
| **U2326** | T329 | **IS70** | Upload report attached |
| **U2326** | T329 | **GM16** | What significant achievements or factors have impacted on the quality of service delivery during the reporting period. |

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| **U2311 – Young people aged 12 to under 18 years who are subject to statutory intervention, who are disengaging from placement and/or not in approved placements** |

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| **Relates to item 6.2 &**  **7.1 or 9.1 of the agreement** | | **Relates to item 6.2 of the agreement** | | | **Relates to item 7.1 or 9.1 of the agreement** | |
| **Service User Code** | **Service Type Code** | **Output** | **Quantity per annum** | **Number of Service Users** | **Output Measures** | |
| **U2311** | T316 | **A01.2.99**  Personal support activities not elsewhere classified | Number of hours | NA | **A01.2.99** | Number of hours provided during the reporting period |

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| **Service**  **User Code** | **Service**  **Type Code** | **Throughput Measure** | |
| **U2311** | T316 | **IS132** | Number of Service Users with cases commenced during the reporting period |
| **U2311** | T316 | **IS133** | Number of existing Service Users at the beginning of the reporting period |
| **U2311** | T316 | **IS145** | Number of Service Users who have exited from the service during the reporting period |
| **U2311** | T316 | **IS201** | Number of referrals received during the reporting period |
| **U2311** | T316 | **GM07** | Number of Service Users who had case plans closed/finalised as result of majority of needs being met during the reporting period |

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| **Service**  **User Code** | **Service**  **Type Code** | **Demographic Measure** | |
| **U2311** | T316 | **IS35** | Number of Service Users identifying as Aboriginal and/or Torres Strait Islander |
| **U2311** | T316 | **IS39** | Number of Service Users identifying as being from Culturally and Linguistically diverse background |
| **U2311** | T316 | **IS207** | Number of Service Users over 15 years |

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| **Service**  **User Code** | **Service**  **Type Code** | **Outcome Measure** | |
| **U2311** | T316 | **OM2.1.01** | Number of Service Users that have shown improvements in being safe and/or protected from harm |
| **U2311** | T316 | **OM2.1.05** | Number of Service Users with improved ability to access appropriate services |

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| **Service User**  **Code** | **Service Type Code** | **Other Measure** | |
| **U2311** | T316 | **IS70** | Upload report attached |
| **U2311** | T316 | **GM16** | What significant achievements or factors have impacted on the quality of service delivery during the reporting period. |

# Contact information

Contact your nearest CSSC for further information regarding this investment specification.

For information regarding current investment opportunities, please go to the department’s [Funding, grants and investment](https://www.csyw.qld.gov.au/about-us/funding-grants) website.

# Other funding and supporting documents

* [Child Safety Practice Manual](https://cspm.csyw.qld.gov.au/)
* [Human Services Quality Framework](https://www.cyjma.qld.gov.au/about-us/our-department/funding-grants-investment/human-services-quality-framework) (HSQF)
* [*Human Rights Act 2019*](https://www.forgov.qld.gov.au/humanrights)
* Investment specifications:
  + [Child Protection (Placement Services)](https://www.cyjma.qld.gov.au/about-us/our-department/funding-grants-investment/investment-specifications)
  + [Community](https://www.chde.qld.gov.au/services/community/funding-and-grants/investment-specifications)
  + [Disaster Relief and Recovery Program](https://www.housing.qld.gov.au/services/community/funding-and-grants/investment-specifications)
  + [Domestic and Family Violence](https://www.justice.qld.gov.au/about-us/services/women-violence-prevention/violence-prevention/service-providers/funding-and-investment/investment-specifications)
  + [Families](https://www.cyjma.qld.gov.au/about-us/our-department/funding-grants-investment/investment-specifications)
  + [Individuals](https://www.chde.qld.gov.au/services/community/funding-and-grants/investment-specifications)
  + [Older people](https://www.dsdsatsip.qld.gov.au/resources/dsdsatsip/about/funding/specifications/investment-spec-older-people.pdf)
  + [Service System Support and Development](https://www.chde.qld.gov.au/services/community/funding-and-grants/investment-specifications)
  + [Sexual violence and women’s support service](https://www.justice.qld.gov.au/about-us/services/women-violence-prevention/violence-prevention/service-providers/funding-and-investment/investment-specifications)
  + [Young people](https://www.cyjma.qld.gov.au/resources/dcsyw/about-us/funding-grants/specifications/investment-specification-yp.pdf)
* [Outputs and performances measures catalogue](https://www.cyjma.qld.gov.au/about-us/our-department/funding-grants-investment/output-funding-reporting)
* [Queensland Human Rights Commission](https://www.qhrc.qld.gov.au/your-responsibilities)
* [Tertiary Support Services Counting Rules Fact Sheet](https://www.cyjma.qld.gov.au/about-us/our-department/funding-grants-investment/output-funding-reporting)

# Report Template – IS70 Qualitative evidence to supplement outcome measure (OPTIONAL)

Please make sure any information provided regarding Service Users is de-identified. Keep word length to 250 words.

Reporting period from: insert start date to insert end date

Outcome measure: insert measure

Supplementary qualitative evidence to outcome measure:

[insert here]

1. Any work performed by additional paid staff can be recorded as comments in P2i quarterly reports. [↑](#footnote-ref-2)