Module four

Quality Care – Working Together

Session plan
<table>
<thead>
<tr>
<th>Time</th>
<th>Resources</th>
<th>Method of delivery</th>
<th>Learning outcomes</th>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 hrs</td>
<td>PowerPoint slides&lt;br&gt;Whiteboard/pens&lt;br&gt;DVD Player/DVD’s&lt;br&gt;‘This is us’ DVD can be requested from CREATE directly&lt;br&gt;Power point with quotes from young people in care from CREATE</td>
<td>Lecture; large group; brainstorm; activities</td>
<td>At the end of this module participants will be able to:</td>
<td>The assessment necessary for each participant will be based on:</td>
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<td></td>
<td>Multiple Copies of:&lt;br&gt;• Statement of Commitment&lt;br&gt;• Carer payments rates, for relevant year&lt;br&gt;• The Carer Business Discount Card flyer (<a href="http://www.fcq.com.au">www.fcq.com.au</a>)&lt;br&gt;• Fact sheet 3: Support for carers&lt;br&gt;• Copy of Foster Carer Agreement template&lt;br&gt;• Change in carer circumstances – Form 39 CCC&lt;br&gt;Multiple copies of A Guide to Making a Complaint Brochure&lt;br&gt;Multiple copies of Case Studies- 1, 2 and 3&lt;br&gt;Multiple copies of Conclusion of Placement Form</td>
<td></td>
<td>1. Demonstrate how all key players can work together – including when things go wrong&lt;br&gt;2. Demonstrate an understanding of carer support options&lt;br&gt;3. Demonstrate an understanding of Transition&lt;br&gt;4. Demonstrate an understanding of the complexities of ending a placement</td>
<td>Participation in discussions and training activities&lt;br&gt;Completion of worksheets at the end of the session</td>
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<tr>
<td>Multiple copies of Policy – Expenses – Fortnightly Caring Allowance and Inter State Foster Payments (365)</td>
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<tr>
<td>Copy of Child Safety Practice Manual chapter 5, 8 and 9 for trainer reference and resources, copies of templates</td>
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<tr>
<td>Any of the transition to independence resources referred to in slide 27:</td>
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<tr>
<td>- Information to assist young people during meetings to plan their transition to independent living</td>
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<td>- Go your own way information kit</td>
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<td>- Standing on your own two feet</td>
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<td>- Out of care and into further education, training and work</td>
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<td>- After Care Service for young people exiting care – Factsheet</td>
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<td>- TILA fact sheet.</td>
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<td>Resources can be obtained from CSSC staff or via a search of the Child Safety internet, infonet, within the Child Safety Practice Manual, in the training handouts, or for TTI on the CREATE website.</td>
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<tr>
<td>Time</td>
<td>Content</td>
<td>Resources/Additional comments or questions</td>
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<td><strong>Introduction and welcome activities</strong></td>
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<td><strong>Acknowledgement of Country</strong></td>
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<td></td>
<td>I would like to respectfully acknowledge the Traditional Owners of the land on which we are meeting and remind people that we are on Aboriginal land.</td>
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<td></td>
<td>I also would like to acknowledge and pay my respect to the Elders (both past and present) and extend that respect to other Aboriginal Australians who are present today.</td>
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<td>Thank you</td>
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<td><strong>Show Slide 1</strong></td>
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<td><em>Distribute name tags.</em></td>
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<td><strong>Explain that this training is one part of a process that will allow us to assess their suitability to become a foster carer. Brief explanation only as this information was covered in module one.</strong></td>
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</table>
Welcome and Introduce trainers and discuss that the experienced foster carer will facilitate some of the sessions.

<table>
<thead>
<tr>
<th>Brief review of information as this should have been covered in Module one.</th>
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<tbody>
<tr>
<td><strong>Housekeeping details</strong> – location of exits and toilets, breaks and catering, arrangements for smokers, phone messages and any other WH&amp;S requirements relevant for the group or training environment, e.g., Evacuation, fire and emergency procedures.</td>
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<thead>
<tr>
<th>Brief review of information as this should have been covered in Module one.</th>
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| **Group Rules**  
These should be sourced from the group - ask what people would need from the group in order to feel comfortable. Ensure that the following are covered:  
1. Confidentiality – any information that is shared in the group will be confidential to the group – link to the need to respect confidences in a placement situation.  
2. Mutual respect and tolerance for a diversity of opinions and experiences.  
3. Punctuality and respectful processes in discussion. |

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<thead>
<tr>
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| **Overall aim of Quality Care: Pre service training.**  
Explain that at the completion of training prospective carers will be assessed on the following learning objectives and their ability to:  
1. Demonstrate an awareness of why children and young people require out-of-home placements, how children come into care and the impact this process has on children and young people.  
2. Demonstrate an understanding of the past issues affecting a child or young person in
an out-of-home placement.

3. Develop the knowledge and skills to meet the physical, emotional and social needs of children and young people subject to statutory intervention and develop an understanding of the importance of participation by children and young people and their families in decision making.

4. Demonstrate an understanding of the partnerships that exist between children, their families, foster carers and workers, (both in the government and non-government sectors), and their roles and responsibilities of working together as a team.

Remind participants that pre-service training is provided in 4 parts and this is module four.

10 mins 1. Re-cap of Module 3: Early Days in a Placement

Brief recap of module 3

Show Slide 2

What we have covered so far in this training includes:

- Accepting a placement – what do I need to know and consider?
- Building relationships – how to welcome a child or young person
- Decision Making about how to meet the child or young person’s needs
- Promoting a sense of self and identity for a child or young person
- Advocacy for children and young people
Show Slide 3 and 4
This module four outlines some of the knowledge and skills you will need as a placement continues.

Show Slides 2 & 3 “Module four: Quality Care – Working Together”. Highlight the time allocated to each session.

1. Working in partnership – **15 mins**
2. What about when things go wrong - **30 mins**
3. Carer supports – support and financial assistance – **30 mins**
4. Guest panel - **45 mins**
5. Transition to independence - **15 mins**
6. Saying goodbye - **20 mins**
7. Conclusion and evaluation – **10 mins**
Show slide 5

1. Specifically, this module will explore:
2. Working in partnership
3. When things go wrong
4. Carer supports – support and financial assistance
5. Guest panel
6. Transition to independence
7. Saying goodbye
8. Evaluation

15 mins  Working in partnership

Show Slide 6

A Statement of Commitment has been developed by Child Safety and key non-government services to **commit to engage in effective and respectful partnerships** for the benefit of children and young people in care.

The commitment acknowledges and promotes the role of approved carers as part of a team providing quality out of home care. It also describes the role of carers, Child Safety and non-government services and establishes the responsibilities and rights of carers.

The **objective of the team approach is to work together effectively to promote and ensure the safety and wellbeing of children and young people who require out-of-home care.**
Show slide 7

**Exercise - Brainstorm**

Brainstorm some of the members of the team or people you might work with to enhance the child’s placement. * Allow time for some brainstorming *

The team members you might meet or hear about include:

- The Child and their family
- CSSC staff staff – such as the CSO, senior team leader, senior practitioner, manager, family group meeting convenor
- Recognised entity
- Foster and Kinship care service
- Queensland Foster and Kinship Care
- FAST delegate
- PeakCare
- Office of the Public Guardian – including Community Visitors and Child Advocates
- Education, school and cultural services
- Disability services
- Counselling and therapeutic services

Show Slide 8

As part of the team, Child Safety provides the policies and procedures for out-of-home care, initial and ongoing training, assistance to meet the legal standards of care (Statement of Standards, Charter of Rights, Principles of the Act) financial and other support based on the carers individual needs.

Some of the other supports we will discuss later. *Trainers can also refer back to module one support slide.*

*Trainers can highlight some areas of responsibilities from the Commitment that enhance quality team work.*
Some of the key commitments in the Statement of Commitment include:

**Carers have a right to feel safe** - protected as far as possible from potential dangerous behaviours of children and be provided information about the child.

**Carers have the right to feel supported** – carers to be provided an allowance, access to training and support and encouraged to discuss issues as soon as practicable.

**Carers will** – meet the Statement of Standards, participate in the development of a Foster Carer Agreement, undertake any training, advocate for themselves and the child, decline a placement that is not right for them and tell Child Safety when there is a change in circumstance or when something is not going right.

**Handout** - Handout a copy of the Statement of Commitment and explain that the power point roles and responsibilities are not an exhaustive list. An electronic copy of the statement is available at:


Child Safety also provides funding to foster and kinship care services and works closely with Queensland Foster and Kinship Care, PeakCare, Create, OPG and QATSICPP to promote the safety, wellbeing and best interest of children and young people in out-of-home care.

As carers working in the care team, you may have some contact with these services or their representatives – e.g., Foster and Kinship Care worker, FAST delegate, community visitors and recognised entities.

**Together the key role and responsibility of Child Safety, carers and other services is to work in close partnership to ensure that:**

- The child is safe and supported emotionally
- The child’s day to day and special needs (education, health) are met
- The child maintains contact with family, significant others, siblings and place
- The child’s cultural identity, practices and religious beliefs are supported
- Children are supported to participate in decision making about their life.
2. When concerns are raised about the quality of care provided by a carer

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<th>Slide 9</th>
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<tr>
<td>When concerns are raised about the quality of care provided by a carer</td>
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<tr>
<td>Discussion question</td>
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<tr>
<td>What do you think should happen if there are allegations that a child in care has been harmed by their carer?</td>
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Activity

*Question for the participants – what do you think should happen if there are allegations that a child in care is harmed by their carer?*

*This should lead into a discussion about the need to assess these concerns.*

The department has a responsibility to ensure that children in care are provided with care that meets their needs and is consistent with the legislated Statement of Standards.

If the department becomes aware of information that a child’s care may not be meeting the standards of care, the department will respond to find out if there is a problem and how everyone can work together to fix it. This includes how the carer can be supported to meet the child’s needs.

The process of responding to and assessing concerns about the standards of care is to be conducted in a manner that is consistent with the Statement of Commitment we have just discussed. This means that carers should feel valued and supported throughout the process.
When the department receives information about possible standards of care issues, a decision will be made about the most appropriate way to respond to the issues that fit with the seriousness of the concerns.

There are three different response options that are decided on the basis of whether the information indicates:

1. that the concerns don’t warrant a standard of care review
2. that the standards of care may not have been met for a child, or
3. that the child has experienced harm or it is suspected that they have experienced harm.

Child Safety is responsible for working collaboratively with the child’s care team to ensure that the child is safe from harm, and that appropriate actions are taken to resolve the identified concerns.

Not all concerns are the same, so the response will depend on the nature of the concerns, the possible impact on the child, and what needs to be done to address the concerns. If the department becomes aware of concerns, the response will be either:

1. **Continue to monitor the standards of care** - this will be the response where the information indicates that there are issues, but that a Standard of care review is not warranted. The care team will work together to address the identified needs.
2. **A Standard of care review** will be conducted where there is information to indicate that the child’s care has not met the standards of care, but there is no information that indicates the child has been harmed.
3. **A Harm report** will be recorded when there is information that suggests that the child in your care has been harmed. The department will investigate the matter by conducting an Investigation and Assessment.
Unfortunately, sometimes the department may receive concerns that are of a malicious or vexations nature. This means that a notifier may repeatedly contact the department with concerns that are without grounds or their ulterior motive for contacting the department is because of ill will toward the other person. If this situation arises, the department will address the matter so that the carer is not impacted or impacted as little as possible.

**Show Slide 12**

If the information received by the department indicates that there are issues, but that the concerns do not warrant a Standard of care review, a decision is made to continue to monitor the standards of care. For this response, the focus of the care team will continue to be on monitoring the child’s care and supporting the carer so that issues don’t escalate any further.

Although the concerns raised may still need to be addressed, it will be through the provision of regular, day-to-day case work support. This may include providing additional support, training or information to the carer to help them in their role of caring for the child.

**Show Slide 13**

If the information received indicates that the child’s care has not met the legislated standards of care, a Standard of care review is conducted. The purpose of the review is to determine whether the child’s care has been meeting the required standards; to identify the factors and contextual information contributing to the standards not being met and also how the care team can address any concerns.

As part of the review, a departmental officer or a foster and kinship care service worker will meet with the carer to discuss the concerns. Someone from the department will also talk with the child about the concerns and find out how they feel about the care environment.
The carer is entitled to have a support person or advocate assist them through the process.

The outcome of a Standard of care review will either be that ‘Standards met’ or ‘Standards not met’. Where the outcome ‘Standards not met’ the placement agreement for the child will be reviewed to include actions required to ensure that the standards of care will be met. Consideration will also be given to reviewing the carer’s Foster carer agreement to include any general learning, development and support needs or to document changes to the carer’s placement preferences and capacity.

**Show Slide 14**

Where a Harm report is recorded because the information suggests that the child has been harmed, the department will conduct an investigation and assessment to determine whether the child has been harmed, who is responsible for the harm and whether there is any future risk of harm.

In some circumstances Child Safety will provide information to the Police and they may investigate the allegations.

In some circumstances, the child may be removed during the investigation if the concerns are very serious and the child is at immediate risk of harm.

During the investigation and assessment, the carer and child are interviewed separately and as with the Standard of care review, the carer can have a support person or advocate to assist them through the process.
The possible outcomes for a Harm report include:

1. Substantiated harm – standards not met
2. Substantiated harm – standards met
3. Unsubstantiated – standards not met
4. Unsubstantiated harm – standards met, and
5. No outcome.

The outcome of *Substantiated harm – standards not met*, means that the child has experienced harm or is likely to experience future harm AND the actions or inactions of the carer contributed to the harm. For example, the child experienced physical harm, such as bruising, and emotional harm, by being hit by the carer.

Whereas, the outcome of *Substantiated harm – standards met*, means that the child has experienced harm or is likely to experience future harm BUT there is no indication that the carer has not met the standards of care. An example of this scenario could be where another adult or child who resides in the carer’s household has harmed the child however the carer’s actions or inactions did not contribute to the harm. In such cases, the carer would be protective of the child and have continued to meet the standards of care for the child.

Where the outcome is either (1) Substantiated harm or (3) Unsubstantiated but the standards have not been met – an action plan is developed with the carer to identify actions to address any concerns.
Show Slide 16

**Hand out flowchart** – *Process for responding to standards of care issues.*

For a detailed explanation of the Standards of care process, please refer to Chapter 9 of the Child Safety Practice Manual.

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Review processes are available to you for certain actions – either within Child Safety or through the Queensland Civil and Administration Tribunal (QCAT). Child Safety will advise you of your rights.

**Handout** Complaints brochure

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**30 mins 3. Carer supports- support and financial assistance**

It is important that you recognise the pressures and stresses that are intrinsic in this work, and plan ways to access support.

In this session we will look at support options including practical and emotional support as well as financial assistance. Support and self-care is covered in more depth in a module that you will complete in the first 12 months after this training.
### Where to get support

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<th>Exercise: Support mapping</th>
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<tr>
<td><em>Either on the whiteboard (for the whole group) or on butcher’s paper (as small groups), draw up a simple table:</em></td>
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<tr>
<th>Challenges</th>
<th>Sources of Support</th>
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Based on their learning so far and the knowledge they have about fostering and Child Safety, ask participants to list the challenges associated with the role.

**Show Slide 17**

Encourage people to reflect on their own family and lifestyle while doing this, and to think broadly about the range of stresses they will face. They can be personal (e.g., managing relationships between children in care and our children), systemic (e.g., participating effectively in case planning), practical (e.g., having enough seats in the car), financial or other.

Now, begin to link the different challenges with some options and strategies for support in managing the issue. Again, this can be direct and formal (e.g., referral for therapy for children and young people) or indirect (e.g., advice from friends and family, taking time out as a family). Try to validate suggestions from the group but also add and qualify from your knowledge about the out-of-home care system.
Some of the support services and organisations available to carers include:

- Queensland Foster and Kinship Care (FCQ)
- FAST delegates,
- Foster and Kinship Care organisation
- the Foster and Kinship Carer Support Line
- Child Safety After Hours Service Centre
- Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSICPP)
- PeakCare Queensland,
- Queensland Health
- CREATE Foundation
- the Office of the Public Guardian (which includes Community Visitors), and
- Child Safety staff.

There are also a wide range of internet sites and telephone supports that can be located with a simple search on the web, in libraries, councils or telephone books.

Provide some advice about each of the services e.g. – FCQ is the Peak body for foster carers and provide a range of activities to improve carer related systems and policies. FCQ also deliver the FAST program.

Include other local services as well.
**Handout – Fact Sheet 3: Support for carers and discuss.**

Discuss the elements of support include ongoing casework support, advocacy and referral, practical support, access to training, informal support networks and peer support.

An optional resource for distribution is the **Helplines and telephone counselling services for children, young people and parents** available through ‘Child Family Community Australia’ (CFCA). This resource includes the contact details for each State and Territory and is available online https://aifs.gov.au/cfca/publications/helplines-and-telephone-counselling-services-children-y or through www.aifs.gov.au

**Financial supports**

**Show Slide 20**

Discuss the power point and some of the key supports available to carers including both financial and other supports. Consider handouts of other local services – parent line, lifeline etc. Highlight again the key agencies that provide support and other supports available including Aboriginal and Torres Strait Islander Health services and community elders.

Some information on specific supports are below.

**Handout – Carer Allowances (for relevant year)** available via www.qld.gov.au

Foster carers receive a fortnightly caring allowance for each child or young person placed in their care by Child Safety. It is a contribution towards the direct costs of looking after the child or young person and it is intended to cover items such as food, clothing, gifts, pocket money, entertainment, most school expenses, and extra curricula activities.
The rate of the fortnightly caring allowance is dependent on the age of the child and includes payment for the day of arrival and the day of departure.

In addition to this allowance, carers receive a start-up payment for each new placement of more than 5 days duration.

The Fortnightly caring allowance is paid fortnightly in arrears with payments made via direct deposit.

These allowances are not subject to tax and should not be included as part of your income in tax returns or in any applications involving income and assets tests.

Discretionary payments in the form of child related costs are available in relation to certain personal assistance needs, e.g. significant medical expenses.

High support needs allowance – payable in some instances to carers who are providing intensive levels of support to children with high care needs. Similarly, the Complex support needs allowances is payable in some instances to carers who are providing intensive levels of support to children with complex care needs.

Ex-gratia payments for property damage/personal injury to carers

*Information relating to Ex gratia can be located in the Carer Handbook if required*

*Other relevant policy – medical and pharmaceutical needs.*

Refer to Practice Manual chapter 5 ‘Medicare Cards’

**Insurance policies**

Prior to accepting a placement, it is important to consider whether having a child in care in your home will affect your current home and contents and other insurance policies.
Make sure that you check with your insurance companies whether your policies cover:
- injury to children in your care and
- damage or theft caused by children in your care.

Also check with your insurance companies whether having children in your home will require any changes to your insurance policies and make these changes prior to accepting placements.

Respite:
Respite will be an important factor in sustaining positive placements. Children, carers and families need time to re-charge their batteries and children and young people can benefit from positive alternative experiences.

It is important that respite options be built in from the beginning of a placement, and that these options are meaningful to the child. For example, camps, time spent with extended family, or family and friends of the carer. These options will ideally be part of a child’s community experience. Carers and workers should consider positive respite options as part of the case plan.

In some circumstances the CSSC Manager will approve the payment of dual carer allowances – that is, concurrent payments of carer allowances to both the primary and respite carer for the same child, up to the annual limits. In addition emergency respite can be accessed.

The 48 Hour Rule:
The use of the 48 hour rule allows approved carers to make a decision to have someone they know look after children in their care for up to 48 hours. The Carer Handbook outlines that the carer must let their CSO know of the arrangement and provide the friend’s name, address & phone number. The 48 hour rule is seen as allowing carers to access someone they know as a one-off event or at infrequent intervals. The Handbook outlines that if a more regular time-out plan is required, Child Safety will need to be involved. There are no payments made to any other person in these circumstances.
Foster Carer Agreement

Show Slide 21
A Foster Carer Agreement is developed through discussions between the foster carer and Child Safety staff or their foster and kinship care service. It can be completed as part of the approval process, or as soon as possible following the issuing of the certificate of approval. It is reviewed at least one year from the date of the carers initial approval and every two years thereafter. It may also be reviewed as a result of a change in carer circumstances or following a ‘standards not met’ outcome following a standard of care.

**Handout a copy of a foster carer agreement and discuss the key sections**

The Agreement includes:

- **Placement considerations**
  - such as language, culture, school catchment
  - information about your immunisation views and the immunisation status of you and the children in your care
  - placement types you won’t consider
  - practical limitations – such as bedrooms, car capacity, carer’s work

- **Placement capacity**
  - the number of children you are able to care for

- **A develop and support plan**
  - What you need; how will this be met; who will assist; timeframe

- **Support plan and network**
  - elements of support that are identified
  - other specific supports needed.
Change in carer circumstances

Show Slide 22

It is a legal requirement to tell Child Safety if there are any changes to your circumstances while you are a carer. Including changes to:

- Household membership - a person intends on residing or leaving the household
- Traffic history, criminal history or domestic violence incidents
- Involvement with any child protection agency in the country
- Personal circumstances – health issues, employment demands
- Spousal arrangements – divorce, separation or death of a partner
- Change of address

The above also applies to any household members who live with you. If in any doubt please ask a CSSC staff member. A review of the Foster Carer Agreement may occur when there is a change in circumstance, depending on the change.

Handout: Change in carer circumstances – Form 39 CCC

45mins 4. Guest panel

Show Slide 23

This session explores some issues that may assist you as a placement continues.

- *Foster carers are part of the child’s care team that has its focus on meeting the needs of a child or young person. A guest speaker who has been a child in care will attend to give their perspective on their experiences.*
- *Current foster carers will be invited to form a panel to answer questions that you may have about their daily experiences.*
- Show some of the CREATE power points of quotes from children in care.
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<th>40 mins</th>
<th>Guest speaker: Young person who has been in care.</th>
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<td></td>
<td>Foster carers are part of a team that is constantly reassessing a child or young person’s changing needs. Children and young people and their families are part of that team, and care environments should respect the dignity and rights of children, young people and their families, and create an environment where their views and wishes are actively sought.</td>
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<td>To illustrate the experiences of a child or young person, every attempt should be made to arrange for a child who has been in care to attend training. CREATE may be able to assist and may attend with the young person but may not be able to send a young person due to limited resources or geographic locations of training. Introduce the young person where relevant. Alternatively, where this has been impossible to arrange, show the CREATE power points or excerpts from the ‘This is us‘ DVD to illustrate what it is like for a child or young person in an alternative care placement. ‘This is Us‘ is also available on YouTube at <a href="http://www.youtube.com/user/createqld?blend=22&amp;ob=5#p/a/u/2/NiYkINQEpzM">http://www.youtube.com/user/createqld?blend=22&amp;ob=5#p/a/u/2/NiYkINQEpzM</a></td>
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<td>It is important that participants should be asked to consider the needs of the child or young person and reflect this in appropriate questioning. Questions should cover: • Describe what it was like to arrive at a placement for the first time? • What can a foster carer do to assist you feel welcome and respected? • How did contact with your own family occur? • How do you think your own family felt about you living with foster carers?</td>
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<td>Guest foster carer panel.</td>
<td>Arrange for foster carers to attend, to answer questions about their experiences of fostering. Where possible, the natural child of a foster carer can participate.</td>
</tr>
</tbody>
</table>
Show Slides 24 and 25

All young people who are or have been subject to a child protection order granting custody or guardianship to the chief executive have the right to receive appropriate assistance and support with their transition from care to independence, in order to maximise their life opportunities and choices.

Planning for a young person’s transition from care to independence occurs as part of the case plan and formally starts in the calendar year that the young person turns 15 years and intensifies as the young person approaches 18yrs.

Young people leaving care and transitioning to independence are often confronted by issues such as reconnecting with their families and communities, coming to terms with the reasons why they came into care or finding themselves alone without the security of a family or community to fall back on. A well-planned, gradual and flexible process for transitioning young people from care is therefore critical, including the potential provision of post care support, if necessary.

Young people who are transitioning to independence have the same developmental needs as those who are not in care, but they also face a range of unique issues and circumstances that highlight their particular need for support during this time.

One key difference between young people who have left care and other young adults is that most young people from “intact” families live at home until their early twenties, and their movement towards independence usually involves a long transitional period during which they may leave and return home multiple times.

This safety net of secure and supportive family and a related support network is not always available to young people who have been in care on a long-term basis, particularly where they have experienced numerous placements during their time in out-of-home care.
Show Slide 26

**Child Safety** will work with the young person to meet their identified T2I goals, which may include:

- getting financial assistance for further studies, apprenticeship/traineeship etc.
- obtaining a driver’s licence
- developing life skills – e.g. cooking or budgeting
- moving into semi-supported accommodation
- assisting in applying for TILA (Transition to Independent Living) payments of up to $1500.00.

**Next Step After Care** services help young people who have been in OOHC with support to build their independent lives. Services are voluntary and target young people who have left care, up to the age of 21 years. These services are flexible enough to provide young people with quick access to practical support with things like finding somewhere to stay; managing money; understanding their financial entitlements as well as responding to their support needs arising from relationships, legal advice and jobs.

Young people that have been subject to a child protection order granting long-term guardianship to a suitable person can access some financial ‘transition from care’ supports from the department, but only where they have already left care and previously had been subject to a child protection order granting custody or guardianship to the chief executive, particularly where a transition to independence plan was developed and implemented while the child was still in care.

Show Slide 27

Transition from independence is ‘everyone’s business’ and the key ways in which carers can contribute to a young persons transition is to:

- Referrals – assist the young people to access services that can help them in the short term and long term.
- Assist with T2I planning – with assistance from the Child Safety Officer help the young person plan their independence.
- Individual Advocacy – advocate on behalf of the young person to ensure they receive the supports they need.
- Support – provide emotional and practical support the young person will need for their journey to independence and beyond

Discuss that while not an obligation it is in the best interest of the young person to continue to support and care for them even after they turn 18 years.

Show Slide 28

Resources have been developed by CREATE Foundation and Child Safety to help the young person, the carer and their CSO plan for their transition from care. These are accessible from the CREATE (Queensland) website.

Slide 28

20 mins 6. Saying Goodbye

This session looks at the roles and tasks around helping children and young people move on. It is also the end of this course and we will look at how you “move on” from here.

String sculpture – giving back
**Show Slide 29**

Saying goodbye often has a sense of loss about it – get participants to reflect on goodbyes that they may have experienced. What were some helpful factors in the process?

| List on the board the ways that people say goodbye | Whiteboard/Pens |
| What might be the impact of moving for a child or young person in care? Discuss impact of a number of moves, often with little notice, loss of belongings. |  |
| What helpful factors might be put in place to make the move a positive one? List these on the whiteboard. | Whiteboard/Pens |

**Optional or alternate Activity**

Refer to Handouts “Case Studies 1, 2 & 3 - Part 4”

Handouts “Case Studies 1, 2 & 3 - Part 4.”
Divide into small groups and consider the following questions:

1. How would the child or young person, their family and the foster carer and their family be feeling?
2. What can the foster carer do to help the move for the child or young person and their family?
3. How will this move impact on your family?
4. What can you do to assist your own family to cope with the move?

Discuss this in the larger group

Experienced foster carer presenter to facilitate this session. Discuss feelings you might have if the placement ends on a difficult note or you don’t agree with the decision. How can you ensure the child or young person still has a positive ending with your family?

At the end of a placement, it is important that your valuable information about a child or young person is made available to the person who next cares for them. This should be recorded in a Conclusion of placement form, which your CSO should give you.

Refer to Handout Conclusion of placement form

This form is completed by carers when the child has left the placement (of more than a few days duration). The form is then provided to the next carer of the child and provides information about the child that will assist both the carer and the child in the transition to their next placement. It covers a range of information that the carer has first-hand knowledge about:

- Significant friendships or significant others in the child’s life
- Their relationship with the carers family and their reaction to the placement ending
- The child’s swimming ability and the level of ‘active’ supervision required
- Hobbies, interests or social activities or sports
- Medical and dental information
- Scheduled appointments
- The personal records that were returned (and to whom)
- The key belongings that are going with the child (e.g. computer, bicycle etc.)

Handout Conclusion of placement form.
Conclusion

Display Slide 30 “Learning outcomes” and summarise the main points discussed in each outcome.

Please complete the Worksheet and Personal Reflections and return to the trainers within 1 week. Should there be any discussion arising from your responses, there will be an opportunity to meet with the trainers.

Where to from here for you?

Trainer can use a closing exercise for the participants e.g., reflection on aspects of training and learning, sharing positive acknowledgement of others in the group, farewell exercises or use the following.

Inform participants that there will now be some small group discussion about their reaction to the course. Ask them to consider:

- Did anything change from when you first started to now?
- Do you have any concerns as a result of the information you now know?

Facilitate a larger group discussion

Point out that some people will decide not to proceed any further. Others may have some doubts while others may be keen to get started.
### 7. Evaluation

A formal assessment report will be prepared and discussed with you. If your assessment and other checks are appropriate, you will be approved as a foster carer for a period of 12 months.

During that time you will be expected to complete 3 further modules of training and you will be assessed as you put knowledge into practice.

There will be a learning journal to assist you and your support person to reflect on learning as it takes place. At the end of that period, you may receive renewal of authority as a foster carer for a further period of 1 year.

Then, there will be a renewal process every 2 years, when your suitability to continue fostering is assessed.

*Participant Evaluation forms should be handed out and collected at the end of the session*

*Thank participants for their input and work during the course and for their concern for children and young people.*