Chapter 4. Case planning

Purpose

A case plan must be developed for each child in need of protection (Child Protection Act 1999, section 51A). Case planning is a participative process that involves a cycle of assessment, planning, implementation and review. Case plans provide the structure for ongoing intervention and guide what needs to occur to address the child’s needs for safety, belonging and wellbeing. Case planning must also include provisions that address the child’s developmental needs and assist them to gain the skills and sense of wellbeing that will allow them to realise their potential and positively participate in the wider community. Case plan reviews will occur in accordance with legislative requirements.

The case plan is a written document which provides a clear statement about why the child is in need of protection, provides key information about the child and records the roles and responsibilities of all participants in addressing the child’s protection and care needs during ongoing intervention. The case plan identifies the goals to achieve permanency for the child, the actions that need to be undertaken, timeframes and the people or services responsible for undertaking them. All activities, discussions and contact with the child and family will be guided by the case plan while it is in effect.

Key steps

1. Assess and prepare to develop a case plan
2. Plan for a family group meeting
3. Develop the case plan
4. Implement the case plan
5. Review and revise the case plan

What ifs - responding to specific case planning matters

Standards

1. All children and families are treated professionally and with respect.
2. All children and families are given the opportunity to fully participate in decision-making.
3. The right of Aboriginal and Torres Strait Islander people to self-determination will be respected.
4. Child Safety will arrange for an independent person to help the child and family participate in decision-making regarding significant decisions for an Aboriginal or Torres Strait Islander child, unless exceptions apply.
5. The five elements of the Child Placement Principle are applied to case planning for an Aboriginal or Torres Strait Islander child.
6. Relevant structured decision-making assessments are completed as part of the development and review of a case plan.

7. Wherever possible, a family-led decision-making process will be used when a family group meeting is to be held regarding an Aboriginal or Torres Strait Islander child.

8. The family group meeting is held within 30 days of the decision that a child is in need of protection, or within the timeframe set by the Court on an adjournment.

9. The case plan provisions adequately meet the child’s protection and care needs and are specific, measurable, attainable, results-oriented, relevant and time-limited.

10. A cultural support plan is developed for all children from a culturally and linguistically diverse background.

11. Children and parents are visited in accordance with Child Safety contact requirements.

12. Case plans are reviewed in accordance with legislative requirements.

13. Where a child is subject to a long-term guardianship order to a suitable person, the child and guardian are contacted every twelve months to determine whether to review the case plan.

14. The support needs of a child subject to a long-term guardianship order to a suitable person, and their long-term guardian, are responded to in a timely manner.

15. The right to a case plan review and access to a complaints framework for a child subject to a permanent care order will be responded to in accordance with legislative requirements.

Practice skills (Key areas for reflection)

- Did I engage well with the child and family?
- Did I enable the child to have a real opportunity to participate in the family group meeting and express their views?
- Have I made certain the family understands concurrent planning and the child’s need for permanency that incorporates legal, relational and physical permanency?
- Have I appropriately applied the five elements of the child placement principle in my work with an Aboriginal or Torres Strait Islander child and their family?
- Have I ensured that the case plan is written in a way that can be understood by the child and family?
- Did I give the child and parents an opportunity to actively participate in decision-making?
- Did I arrange for an independent person for an Aboriginal or Torres Strait Islander child, and record whether an independent person helped facilitate the child and family’s participation in the decision-making process?
- Have I engaged appropriate service providers to work with the family?
- Have I engaged in face-to-face contact with children and parents that is meaningful, purposeful and goal-directed?
- Have I explained to the child and family the need for permanency for the child and how this informs the case planning process?
- Have I actively engaged with the child, family and service providers to progress the case plan goals and actions?
Authority

- *Adoption Act 2009*
- *Child Protection Act 1999*
- Policy No. 263: Case planning
- Policy No. 612: Complex Support Needs Allowance
- Procedure No. 612: Complex Support Needs Allowance
- Policy No: 641: Decisions about Aboriginal and Torres Strait Islander children and young people
- Policy No. 608: Child related costs - Long-term guardian support
- Procedure No. 608: Child Related Costs – Long-term guardian support
- Policy No.365: Expenses – Fortnightly caring allowance and inter-state foster payment
- Policy No. 296: High support needs allowance
- Procedure No. 296: High support needs allowance
- Policy No. 594: Permanency planning
- Policy No. 607: Support for children in the care of long-term guardians and permanent guardians
- Policy No. 349: Transitioning from care into adulthood

Key steps - Case planning

1. Assess and prepare to develop a case plan
   1.1 Gather information about the child and family
   1.2 Assess the child’s strengths and needs
   1.3 Assess the parental strengths and needs
   1.4 Determine the intervention required to keep the child safe
   1.5 Explore service options

2. Plan for a family group meeting
   2.1 Initiate a family group meeting
   2.2 Provide information to the convenor
   2.3 Prepare for a family group meeting

3. Develop the case plan
   3.1 Convene a family group meeting
   3.2 Develop key items in the case plan
   3.3 Develop a case plan - application for long-term guardianship to a suitable person
   3.4 Develop a case plan - application for a permanent care order
3.5 Record, endorse and distribute the case plan

4. Implement the case plan

4.1 Actively implement the case plan
4.2 Provide for family contact
4.3 Visit the child, parent and carer during ongoing intervention
4.4 Regularly assess the progress of the case plan

5. Review and revise the case plan

5.1 Complete the review and revision process
5.2 Re-assess the level of family risk for ‘in home’ cases
5.3 Assess whether reunification can occur
5.4 Refer the case to a practice panel
5.5 Complete the review report
5.6 Re-assess the child’s strengths and needs
5.7 Re-assess the parental strengths and needs
5.8 Develop and endorse the revised case plan
5.9 Long-term guardianship to a suitable person - case plan review
5.10 Permanent care order - case plan review

What ifs - responding to specific case planning matters

1. What if an initial case plan is developed without a family group meeting?
2. What if parents are unwilling to engage in case planning?
3. What if people are excluded from attending and participating in a family group meeting?
4. What if the case plan cannot be endorsed?
5. What if an application for a child protection order is filed with the Childrens Court without a case plan?
6. What if a reunification assessment is required when parents live in another jurisdiction?
7. What if there is a change in the individuals residing in the family home?
8. What if there are criminal matters to consider during reunification?
1. Assess and prepare to develop a case plan

A case plan must be developed to address the protection and care needs of any child who has been assessed as being in need of protection. The case plan will provide a clear statement about why the child is in need of protection, the goals to achieve permanency for the child, and the roles and agreed responsibilities of all participants in addressing the child’s protection and care needs. The case plan provides the structure for the ongoing intervention that will occur with the child and their family.

The assessment stage of case planning allows Child Safety to work collaboratively with the child, family and key partners to gather additional information to:

- inform the case planning process (*Child Protection Act 1999*, section 51A-51YB)
- assess the child and parental strengths and needs
- ensure that the ongoing intervention is appropriate to meet the child’s safety needs
- prepare for the family group meeting, which is to be held within 30 days of the decision that a child is in need of protection, or within the timeframe set by the court on an adjournment.

In order to meet the required timeframe, as soon as a child is assessed as being in need of protection, make a referral to a family group meeting convenor using the **FGM referral** form and attach all relevant information, as outlined in 2.2 Provide information to the convenor. For an Aboriginal or Torres Strait Islander child, discuss with the child and family, the option of referring the matter to the family participation program for the family group meeting to be held as an Aboriginal Family-Led Decision-Making Process, refer to chapter 10 What if a matter is to be referred to the family participation program for family-led decision-making?

The *Child Protection Act 1999*, section 51G(b), requires an inclusive process with the child and parent when planning and making decisions about the child’s wellbeing and protection. Aboriginal and Torres Strait Islander people must be given the opportunity to meaningfully participate in decision-making regarding an Aboriginal or Torres Strait Islander child - refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children. For further information regarding case planning refer to The case planning process and Critical steps in case planning and the practice resource Case planning - an overview. In circumstances where it is not possible for a parent to actively participate in decision-making, involve them to the greatest extent possible and ensure they are provided with relevant information.

For information in relation to the assessment of risk, refer to the Practice guide: The assessment of harm and risk of harm.

**Undertake concurrent planning**

Concurrent planning commences when a child first comes into care. Where the primary permanency goal of the intervention is reunification with family, the child’s case plan must include an alternative permanency option, to ensure there is an alternative option if the primary permanency goal of reunification does not occur in a timely way.
Concurrent planning requires discussion with the parents as early as possible to identify and establish suitable and permanent placement options for the child within their extended family. Concurrent planning will be informed by the permanency principles (Child Protection Act 1999, section 5BA) and additional principles for Aboriginal and Torres Strait Islander children (section 5C). For further information about concurrent planning, refer to 3.2 Develop key items in the case plan. For further information about permanency planning, refer to the practice paper Permanency planning and to the practice resource Decision-making for expiring Child Protection orders.

1.1 Gather information about the child and family

The quality of an initial case plan will depend on the level of engagement with the child and their family and the use of professional judgement to analyse the information gathered.

The assessment stage consists of working with the child, family and key partners to gather and assess information about the family's functioning to inform the development of the case plan and provide a clear focus for intervention Child Safety. It is a broader assessment than one based solely on risk to the child, and requires more in-depth work with the family to gain knowledge of their situation, strengths and needs. The process of gathering information will:

- provide an opportunity to build rapport with the child, family and all parties involved with the child and family and engage them in the case planning process
- strengthen an understanding of the child and family context
- identify the significant people and support networks for the child and family
- be participative and involve positive engagement with the child and family
- be child-focused, evidence-based and strengths-led
- provide sufficient time and a culturally safe space for Aboriginal or Torres Strait Islander families to participate
- enable an Aboriginal and Torres Strait Islander child and family to provide cultural advice to inform decisions that affect them
- be comprehensive, holistic and include information from a wide range of sources
- be undertaken in a timely manner.

In addition to the information already known by Child Safety about the child and family, gather further relevant information from:

- the child, where age and developmentally appropriate - refer to Listening, hearing and acting literature review for information about engaging and involving children and young people
- the parents
- extended family and kin members, who may make a useful contribution to the case plan
- the carers or care service staff
- any other significant people, including current service providers and specialists, for example, medical practitioners, disability services, the QPS and Evolve staff
- relevant community and cultural members.
This information is used to:
- assess the child’s strengths and needs
- assess the parents’ strengths and needs
- inform the development of the case plan goals and actions, in order to adequately meet the child’s protection and care needs.

A thorough assessment will result in enhanced opportunities for the child and their family to participate in the case planning process. For further information, refer to Appendix B: Case plan guidance in the SDM Manual.

Where one or both parents have an intellectual disability, refer to the practice resource Supporting parents who have an intellectual disability.

For further information in relation to working with Aboriginal and Torres Strait Islander families, refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children and the practice paper Working with Aboriginal and Torres Strait Islander people and the practice resource Developing a cultural support plan for an Aboriginal or Torres Strait Islander child.

When the child or family member has a disability or is from or is from a cultural or linguistic group that would require an interpreter to facilitate communication, arrange for interpreter services to assist with interviews and communication with a child and family. If a family needs help communicating with Child Safety, refer to Interpreter services.

Where substance misuse is an identified risk factor in the family and it is considered that substance testing of parents will be a necessary and important part of the case plan for the child, refer to Chapter 10.7 Undertake the substance testing of parents.

**Conduct criminal and domestic violence history checks on parents**

A request for a criminal and domestic violence history check on the child’s parents, including a parent’s partner, and other adult household members can be made (Child Protection Act 1999, section 95(3)) and authorised by the CSSC manager or a senior team leader at any time a decision is being made about a child under the Child Protection Act 1999, for example, when assessing the child’s safety in the family home during contact, or when considering a child’s reunification with the family.

When a parent or adult household member’s criminal and domestic violence history is required:
- seek the CSSC manager or a senior team leader’s approval to request a history check to inform the case planning or review process
- complete the QPS - Non-urgent criminal and domestic violence history check request spreadsheet
- forward the spreadsheet via email to the CSU group email address - CSU.Section95@communities.qld.gov.au - the subject line in the email should include ‘Section 95 request for history’
- inform the child’s parents or the household member that the criminal history check is being conducted.
For further information on non-urgent requests refer to Chapter 2, 2.7 Gather information from other sources.

1.2 Assess the child’s strengths and needs

An assessment of the child’s strengths and needs will provide a snapshot of a child’s functioning at a specific point in time, and will assist in identifying those needs that must be addressed in order to improve the child’s emotional, physical and psychological wellbeing. The child’s identified strengths will be incorporated in the development the case plan.

An assessment of the child’s strengths and needs must be completed:

- following the decision that a child is in need of protection, and prior to the initial family group meeting to develop a case plan for the child
- to inform the revised case plan for a child, when ongoing intervention will continue.

The child strengths and needs assessment is designed to improve consistency by ensuring that the child’s functioning is considered within the same domains, using the same criteria. Strengths and needs will be re-assessed to inform each case plan review.

The case planning process must also include provisions that address the child’s developmental needs and assist them to gain the skills and sense of safety, belonging and wellbeing that will allow them to realise their potential and positively participate in the wider community.

For additional assistance in determining the child’s strengths and needs, refer to Physical and Cognitive Developmental Milestones.

Complete the child strengths and needs assessment

To complete the child strengths and needs assessment:

- complete one child strengths and needs assessment for each child in need of protection
- complete the first nine domains for every child, and domains 10 - 13 as required
- engage an interpreter where the child experiences communication barriers
- meet with the child, if age and developmentally appropriate, and the parents to:
  - explain the purpose of the assessment in child friendly language and explore the areas of the child’s life with them, to assist in completing the assessment – refer to Appendix B: Case plan guidance in the SDM Manual for assistance.
  - respond to any questions or expressed concerns the child may have
- assess whether each domain is an area of strength or need for the child, using:
  - the information gathered from the range of sources outlined in 1.1 Gather information about the child and family, including any specialist assessments
  - any child protection history for the child, including the consideration of cumulative harm to the child the SDM definitions - refer to SDM: Child strengths and needs assessment
  - professional judgement
• determine whether further information is required to assess if a particular domain is a strength or need for a child - refer to Appendix B: Case plan guidance in the SDM Manual where there is uncertainty in selecting the correct level
• record the child strengths and needs assessment in ICMS by selecting the level of strength or need within each domain that accurately reflects the information gathered and the definitions
• provide a rationale/evidence for selecting the strength or need
• submit the completed assessment to the senior team leader for approval in ICMS
• provide the approved assessment to the family group meeting convenor to inform the development of a case plan.

For further information refer to:
• the practice resource Structured decision making - an overview
• the Queensland Health, Child Safety Unit fact sheet 10.1 Attachment
• the Queensland Health, Child Safety Unit fact sheet 10.2 Infant and Toddler Mental Health Emotional Risk Indicators.

Long-term guardianship order to a suitable person
When a child is subject to a child protection order granting long-term guardianship to a suitable person (Child Protection Act 1999, section 61(f)(i) and 61(f)(ii)), the child strengths and needs assessment is not completed, unless the carer is receiving additional financial allowances (child related costs or high support needs allowance) or Child Safety are involved due to placement difficulties.

An exception is when a decision is made to vary the long-term guardianship order from a suitable person to the chief executive. In these circumstances undertake a case plan review as outlined in 5. Review and revise the case plan. Complete the child strengths and needs assessment, as outlined in 5.7 Re-assess the child’s strengths and needs. The family reunification and parental strengths and needs assessment is not completed.

Permanent care order
Once a child is subject to a permanent care order (Child Protection Act 1999, section 61(f)(i) and 61(f)(ii)), the child is not subject to the case planning cycle and the child strengths and needs assessment is not completed.

In circumstances when the child's placement with the permanent guardian has broken down and DCPL has subsequently made an application to revoke the permanent care order and apply for another child protection order, undertake a case plan review as outlined in 5. Review and revise the case plan, and complete the child strengths and needs assessment, as outlined in 5.7 Re-assess the child’s strengths and needs. The family reunification and parental strengths and needs assessments are not completed.
1.3 **Assess the parental strengths and needs**

An assessment of parental strengths and needs will provide a snapshot of parental functioning at a specific point in time, to assist the care planning process.

The completed parental strengths and needs assessment enables the parents, family group meeting participants and other relevant people, to develop strategies to address the needs of the parents, while building on the parents strengths as a resource to meet the child’s protection and care needs. This includes prioritising the three key parental needs to be addressed in the case plan.

An assessment of the parental strengths and needs must be completed:

- following the decision that a child is in need of protection and **prior to** the initial family group meeting to develop a case plan for the child
- to inform the revised case plan for a child, when ongoing intervention will continue.

The parental strengths and needs assessment is **not completed** when the child is subject to a guardianship order and the case plan goal is not reunification.

The parental strengths and needs assessment is designed to improve consistency in the assessment and re-assessment of strengths and needs, by ensuring that parental functioning is considered within the same domains, using the same criteria.

For an Aboriginal or Torres Strait Islander child, seek and consider cultural advice provided by the parent and other relevant persons when completing the parental strengths and needs assessment.

**Choose a primary parent**

The parental strengths and needs assessment allows for an assessment specific to each parent in the household. **Prior to** commencing the assessment, determine who the 'primary parent' is, by selecting the first of the following options that relates to the family situation:

- the parent living in the household where the allegations occurred, who assumes most of the child care responsibility
- the adult who is the legal guardian of the child, where child care responsibility is shared equally between two parents
- the person responsible or alleged to be responsible for the harm, when both parents are legal guardians
- the parent demonstrating the more severe behaviour, when both parents are alleged to be responsible for the harm.

**Choose a secondary parent**

Where applicable, the secondary parent is an adult living in the household who has routine responsibility for child care, but less responsibility than the primary parent. A partner may be a secondary parent even though they have minimal responsibility for care of the child.

**Complete the parental strengths and needs assessment**

To complete the parental strengths and needs assessment:
• complete one parental strengths and needs assessment **only** for the household - the same household for which the family risk assessment was completed

• meet with the parent to explain the purpose of the assessment, provide information about the domains and engage them in discussion about each area - the Parental strength and needs notes form may assist in this process

• assess the parents functioning within each of the nine domains, and how it may positively or negatively impact on the safety and risk to the child in the home using:
  • the information gathered from the range of sources outlined in 1.1 Gather information about the child and family
  • any child protection history for the child and family
  • the SDM definitions - refer to SDM: Parental strengths and needs assessment
  • professional judgement

• determine whether further information is required to assess if a particular domain is a strength or need for a parent

• in consultation with the family, identify **three priority parental needs** in total, between the two parents, that will be addressed in the case plan (see below)

• record the parental strengths and needs assessment in ICMS and:
  • select the level of strength or need within each domain for each parent, in section 1 - refer to Appendix B: Case plan guidance in the SDM Manual where there is uncertainty in selecting the correct level
  • select the three agreed priority parental needs in section 2

• provide a rationale/evidence for selecting the strength or need

• submit the completed assessment to the senior team leader for approval in ICMS

• provide the approved assessment to the family group meeting convenor to inform the development of a case plan.

Where the substance testing of parents is considered a necessary and important part of the case plan for the child, refer to Chapter 10.7 Undertake the substance testing of parents.

**Select the three priority parental needs**

Each case plan will focus on **three priority parental needs only** between the primary and secondary parent. These needs are to be prioritised in consultation with the family, and will be focussed on in the development of the case plan.

If more than three parental needs are identified between both parents or there are a number of needs with the same score, prioritise the needs by talking to the parents, using your professional judgement and considering:

• which needs score the highest

• which needs link to harm, safety and risks in the household

• which needs are most likely to prevent reunification (where the child is placed in care).

Sometimes a lower scoring need may be prioritised because the parents are highly motivated to address the issue, and it will have a positive impact for the child.
As part of completing the assessment:

- ensure the parents are aware of all the needs identified and the rationale for any prioritisation decision, particularly where the parent disagrees with the assessment by Child Safety
- advise the parent that while up to three priority needs will be addressed in each case plan, their other identified needs may need to be a focus in subsequent case plans.

For further information refer to the practice resource Structured decision making - an overview.

For an Aboriginal or Torres Strait Islander child, seek and consider cultural advice provided by the parent and other relevant persons when completing the parental strengths and needs assessment.

1.4 Determine the intervention required to keep the child safe

Following the completion of the relevant case planning assessment activities, and prior to the development of the case plan:

- ensure that the ongoing intervention is appropriate for the child’s circumstances
- determine the non-negotiables that must be included in the case plan to meet the child’s safety, belonging and wellbeing needs.

These ‘non-negotiables’ for case planning, are to be made in consultation with the senior team leader, taking into consideration:

- the extent of the child’s protection and care needs
- the child’s strengths, needs, resources and abilities
- the parents strengths, needs and capacity to meet the child’s needs.

Following this, meet with the family to ensure that they are aware of these non-negotiables and clearly understand the reasons for the decisions made. For example, at that point in time a non-negotiable may be that family contact can only occur if it is supervised, so inform the family of the ‘non-negotiables’ and clearly explain the reasons for the decision.

For an Aboriginal or Torres Strait Islander child, arrange for an independent person to help facilitate the child’s and family’s participation in the decision-making about the intervention being considered Complete the ‘Independent entity’ form in ICMS. Refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children views of the recognised entity in the ‘Recognised entity participation’ form in ICMS.

1.5 Explore service options

The coordinated provision of appropriate services to children and families by other government agencies or funded community sector services is often critical to achieving the case plan goals, including access to the NDIS for children with a disability. Prior to a family group meeting or case plan review, in consultation with the family, it is important to:

- consider what services the family identify that they may have worked with, or would be willing to work with
• identify possible service options and service providers who can provide services, support and assistance to meet the identified needs of the child and the parents
• consider a referral to the Aboriginal or Torres Strait Islander Family Support Service, when the family meet the referral criteria, refer to Chapter 10.16 Referral to an Aboriginal and Torres Strait Islander family support service
• consider a referral to a Therapeutic Residential Service, or to Evolve, refer to Chapter 5, 2.8 Refer the child to Evolve, if required
• consider the continuation of existing service provision, where appropriate and agreed to by the child and family
• consider the needs of a child with a diagnosed or suspected disability or developmental delay, and whether or not they are linked with NDIS or have an existing NDIS plan – refer to Chapter 5, 2.11 Respond to a child’s disability needs
• consider Child Protection Income Management where financial mismanagement or neglect are presenting issues for a family (Rockhampton and Logan trial sites only) – refer to Department of Social Services - Child protection income.

When there are no services available to meet the identified needs of the child or parents within the case plan period, consult with the senior team leader to develop alternative options for addressing the identified needs and discuss possible options with the family.

Liaising with service providers
When an agency has been identified as a potential service provider:
• discuss the service option with the child and family and assess their willingness to work with the service
• contact the agency and:
  • ensure the service provided fits with the identified needs of the child or family
  • ensure the child or family are eligible for the service
  • determine the availability of the service to meet case plan requirements
  • determine the referral procedure for the agency
  • discuss the expectations for interaction, feedback and review of progress, by both the agency and Child Safety
  • ascertain the cost of the service and any other resources that will be required to complete the work.

Decisions about suitable service options are to be made in consultation with the child and family and the senior team leader. The information is to be provided to the convenor of the family group meeting in a timely manner. This process must not pre-empt the family decision-making process at the family group meeting.

Any service providers involved in preparations to develop the case plan, that might provide services to the child and family, should be given the opportunity to attend the family group meeting, where appropriate and where the family agrees to their involvement.
Resource approval
Seek approval from the financial delegate for any anticipated expenditure involved in the implementation of the case plan prior to the family group meeting.

Negotiate an immediate referral to a service
In situations where the child and family have agreed to a particular intervention, there are limited places at the agency and an immediate referral is required to secure the services for the child or family, consider obtaining approval for any financial resources required to make an immediate referral.

2. Plan for a family group meeting

2.1 Initiate a family group meeting

A family group meeting is to be a collaborative and participative process for the child, family, Child Safety and service providers, to develop a case plan that is child-centred, family-focussed, strengths-based and based on shared responsibility. It brings together family, extended family, services and support people in a forum that allows families to participate in planning for the protection of their children.

Under the Child Protection Act 1999, section 51H, Child Safety must convene a family group meeting, or have a private convenor convene a family group meeting, to develop the initial case plan for a child. This is to occur in a collaborative and participative process with the child, the child’s family and other significant people.

Wherever possible, a family group meeting regarding an Aboriginal or Torres Strait Islander child will use a family-led decision-making process. A family-led decision-making process to develop an initial case plan for an Aboriginal or Torres Strait Islander child subject to ongoing intervention will meet the requirements of the Child Protection Act 1999, section 51. For further information refer to Chapter 10.1, 3. Refer the family for family-led decision making.


For an Aboriginal or Torres Strait Islander child:
Child Safety will arrange for an independent person to assist the child and family to participate in case planning decisions likely to have a significant impact on the child’s life, refer to Chapter 10.1 Decision-making about Aboriginal and Torres Strait Islander children

- as far as reasonably practicable, that decision-making processes involving an Aboriginal or Torres Strait Islander person are arranged to allow for the full participation of the person and their family group and occur in a place appropriate to Aboriginal tradition or Island custom.

The Child Protection Act 1999, section 51S, outlines the requirements for developing a case plan in circumstances where either:
• the case plan is not developed at the case planning meeting
• it has not been possible for Child Safety to convene a family group meeting or have a private convenor convene a family group meeting - refer to 1. What if an initial case plan is developed without a family group meeting?

The purpose of a family group meeting (Child Protection Act 1999, section 51G) is to:
• provide family-focussed responses for a child’s protection and care needs
• ensure an inclusive process for planning and making decisions relating to a child’s wellbeing and protection and care needs.

A family group meeting may be initiated by Child Safety (Child Protection Act 1999, section 51H(1)) or directed by the Childrens Court (Child Protection Act 1999, section 68(1)(d)(i)).

A family group meeting may also be convened, but is not required, to:
• review the existing case plan and prepare a revised case plan - refer to 5. Review and revise the case plan
• consider, make recommendations about, or deal with another matter relating to the child’s wellbeing and protection and care needs.

The family group meeting is to be held within 30 days of the decision that a child is in need of protection, or within the timeframe set by the court on an adjournment.

For further information about family group meetings refer to the Family group meeting convenor handbook (FGM Handbook). The FGM handbook provides convenors with a practical guide to:
• the values and principles of the family group meeting model
• the procedures for preparing and facilitating a family group meeting
• the resources available to assist with the preparation and facilitation of a family group meeting
• culturally appropriate practice skills and considerations to enhance the engagement of families who are Aboriginal and Torres Strait Islander or from a culturally and linguistically diverse background in the family group meeting process.

2.2 Provide information to the convenor

Complete a referral form to a convenor for a family group meeting

Every family group meeting will be convened by a person specifically delegated for this task under the Statutory delegations. This person is referred to as a family group meeting convenor (convenor), and includes:
• a person appointed as the family group meeting convenor
• a CSO, senior team leader or senior practitioner with the delegation to convene a family group meeting
• an external person contracted Child Safety to convene the family group meeting, including a family-led decision making facilitator from the family participation program.

The role of the convenor is to:
• prepare all relevant people to participate in the meeting
• facilitate the family group meeting
• ensure the case plan is recorded on the approved form
• distribute the endorsed case plan to the relevant people.

When the convenor is an external person, a Child Safety officer will record the case plan on the approved form and distribute it.

To initiate a family group meeting, complete a referral [FGM referral] form and provide it to the convenor. The referral must include the following:

• the name of the person making the referral
• the child's name, date of birth and address
• the child's cultural identity – and, where the child is Aboriginal or Torres Strait Islander, whether the child and family will have an independent person to help them participate in the family group meeting and if so, their details
• details of the child’s views and wishes regarding their care needs and the case plan being developed at the family group meeting (if they have been obtained)
• details of how the child is going to participate in the family group meeting
• the parents names and contact details
• the details of the person currently caring for the child
• information about the current situation, including:
  • a summary of the background, reasons for the Child Safety involvement and the child’s protection and care needs
  • the ‘non-negotiables’ for case planning, refer to 1.4 Determine the intervention required to keep the child safe
  • details of service providers currently working with the child or family
  • details of the parent or child’s direct legal representative or child’s separate representative
  • whether separate family group meetings are required
  • details of any other significant family members or other persons.

When a referral is being made to a family group meeting using a family-led decision-making process and convened by staff from the Family Participation Program, complete the referral on ARC.

Provide additional information to the convenor

As soon as possible following the completion of the referral, provide the convenor with copies of the following:

• all relevant information from the ‘approved’ investigation and assessment, including the safety assessment and family risk evaluation
• the child’s strengths and needs assessment
• the parental strengths and needs assessment (if the case plan goal is reunification, or if the child remains safely at home)
any other relevant information that has become available since the referral, including
details of any additional significant family members or other persons that have been
identified.

Meet with the convenor prior to the family group meeting
In preparation for the family group meeting, the CSO will meet with the convenor to discuss in
more detail:

- the reasons for Child Safety involvement, the ‘non-negotiables’ for case planning and
  the critical areas of need
- the views of the child and family about the case planning options
- the view of the CSO and senior team leader regarding the child and family strengths
  and how these may be incorporated in the case plan
- information about the child’s ability to participate in the family group meeting and how to
  overcome any barriers to enable their participation
- the likely venue, duration and format of the meeting
- any significant issues that may impact on the family’s participation, for example, a
  history of violence, language or disability needs
- any cultural considerations
- how to create a culturally safe place for a meeting in relation to an Aboriginal or Torres
  Strait Islander child
- what may be required to ensure a successful meeting for a child or family from a
  culturally or linguistically diverse background
- any people whose participation in the meeting would not be in a child’s best interests,
  or would be contrary to the purposes of the family group meeting
- if a young person is eligible for transition to adulthood planning, details of the planning
  that has been commenced and the likely actions and outcomes that could be included
  in the young person’s case plan to meet their current and future needs.

2.3 Prepare for a family group meeting

Thorough preparation of those attending the family group meeting is essential to allow the
participants to understand the concerns, the identified strengths and needs of the child and
parents and participate to the greatest extent possible to achieve an agreed case plan at the
meeting. It provides participants with time to discuss and consider options for planning, prior to
the meeting.

Decide who will attend a family group meeting

It is the responsibility of the convenor to decide who will attend the family group meeting. In
every case this determination is based on whether the participation or attendance of a person is
in the child’s best interests and whether the person is likely to make a useful contribution to the
development of the case plan.

The child, where developmentally appropriate, and all people who are significant to the child
must be given a reasonable opportunity to attend and participate in the family group meeting.
The case plan should reflect and combine the knowledge, strengths, resources and supports of
the child’s family and support network with the professional expertise and resources of Child Safety representatives and other service providers.

The following people must be given the opportunity to participate in the family group meeting:

- the child, where age and developmentally appropriate
- the child’s parents
- extended family members, who are likely to make a useful contribution to the case plan *(Child Protection Act 1999, section 51L)*
- any legal representative for the child
- anyone else who the convenor considers likely to make a useful contribution to the development of the case plan at the meeting, for example a service provider
- any support person nominated by the child or parent
- a Child Safety representative if the convenor is a private convenor.

For an Aboriginal or Torres Strait Islander child, consider whether, in addition to the child, family and significant community members, the following individuals or agencies should also be given the opportunity to participate in case planning, including the cultural support plan:

- a cultural practice advisor
- individuals or services nominated by the child and family
- the Aboriginal and Torres Strait Islander placement service, if relevant
- the Aboriginal and Torres Strait Islander Family Wellbeing Service, if relevant
- other relevant Aboriginal and Torres Strait Islander agencies that are delivering services to or are in contact with the child and family.

The convenor or nominated person may invite other participants to the family group meeting, for example:

- the foster or kinship carer or care service staff
- Evole staff
- other relevant support service staff.

The convenor or nominated person may use the relevant *FGM invitation letter* (depending on whether the convenor or nominated person has been able to consult with the participant prior to sending the letter).

**Prepare for the meeting**

To prepare for the family group meeting, the convenor will:

- arrange a venue, date and time for the meeting - for a meeting involving an Aboriginal or Torres Strait Islander child or adult, as far as reasonably practicable, hold the meeting in a place appropriate to Aboriginal tradition or Island custom
- consider all relevant information obtained during the review of ICMS, other case material and the meeting with the CSO and senior team leader, including the identified ‘non-negotiables’ for the case plan
• contact the child, family and independent person, where applicable, to obtain cultural advice about the most appropriate way to engage an Aboriginal or Torres Strait Islander child, and their family in the family group meeting. Ensure that the child is consulted about how they wish to participate in the family group meeting process, what issues, needs and goals they would like addressed at the meeting and whether they would like a support person to attend the family group meeting (if relevant).

• consult with the child’s parents about the goals and actions they wish to have included in the case plan and whether they would like a support person to attend the family group meeting.

• consult with all the family group meeting participants to prepare them for the meeting, and provide them with essential information, for example:
  • the purpose, function, principles and process for a family group meeting and case planning, including an explanation of concurrent planning and an outline of permanency principles.
  • the child’s protection and care needs and the reason for Child Safety involvement.
  • the meeting details.
  • the ‘non-negotiables’ for case planning.
  • their obligation to maintain confidentiality.
  • information about complaint and review processes.
  • decide whether a person or persons are to be excluded from the meeting, if required.
  • obtain and record the views of any person, who is unable to attend or is excluded from attending the meeting.
  • organise an interpreter if required.

For further information about speaking with the child, refer to the Family group meeting convenor handbook, the practice resource Participation of children and young people in decision making and the Children and young people’s participation strategy.

Consult with a parent who is unwilling to participate in the meeting.

If a parent is unwilling to meet with the convenor, or is unwilling to attend the family group meeting, the convenor must make active efforts to engage the parent through other avenues, such as the parent’s legal representative, a service provider or another family member.

The convenor will attempt to ascertain why the parent is unwilling to participate in the family group meeting and identify any strategies that could be put in place to secure their participation. A parent’s decision not to participate in a family group meeting will not prevent the meeting from being held and the case plan being developed.

3. Develop the case plan

This section applies to the development of all case plans, with the exception of the following two circumstances:
3.1 Convene a family group meeting

The format of the family group meeting will be based on the following considerations:

- the wishes and views of the child and family about how they would like the meeting to be conducted
- the need for the discussions and process to be collaborative and participatory
- cultural advice an Aboriginal or Torres Strait Islander child, their family and independent person, where applicable, and any members of the community to which the child belongs
- cultural advice from a relevant agency or members of the community to whom the child belongs, for a child from a culturally or linguistically diverse background
- safety concerns for the participants
- whether separate meetings are required
- the likely complexity of the issues.

Wherever possible, a family group meeting for an Aboriginal or Torres Strait Islander child will be held using a family-led decision making process. For further information, refer to Chapter 10.1 Decision-making about Aboriginal and Torres Strait Islander children.

Where a family group meeting is to be held for an Aboriginal or Torres Strait Islander child, also ensure that there is an acknowledgement of the traditional land owners at the opening of the family group meeting. For information about welcome to country protocols, refer to the Family group meeting convenor handbook.

Where a family group meeting is to be held for an Aboriginal or Torres Strait Islander child and an Aboriginal or Torres Strait Islander convenor is not available, wherever possible and appropriate, assign an Aboriginal or Torres Strait Islander staff member to assist the convenor to prepare for, and facilitate, the family group meeting.

Separate family group meetings

Consider holding separate family group meetings to develop the case plan where there is:
- an existing 'significant DFV threat' alert recorded in a person's profile in ICMS
- domestic and family violence within the child's family exists
- there is significant conflict between the parents.
In these circumstances ensure that the information recorded in the case plan does not jeopardise the safety of a child, parent or participant. Examples of information that could compromise safety include:

- the location and address details of the victim and / or their extended family members
- information that identifies the child’s school or the location of their other activities, for example, a sports club
- photographs of children on family visits that may identify the location or area where a victim or child resides.

When it is assessed information may need to be withheld from the person who has perpetrated domestic and family violence, work closely with the senior team leader and where relevant, the OCFOS lawyer, to ensure the obligations to a parent or alleged person responsible under the legislation are met and that parents are provided all rights of review for such decisions. Refer to the Child Protection Act 1999, schedule 2 – Reviewable decisions and aggrieved persons and Chapter 5, 1.8 Assess the provision of placement information to parents.

**Key stages of the family group meeting**

A family group meeting will be structured around addressing the child’s protection and care needs, will be facilitated by the convenor and comprises five key stages.

1. Beginning the meeting - welcome and introduction
2. Providing information to the participants
3. Reaching agreement
4. Compiling and confirming the case plan
5. Ending the family group meeting.

For further information about convening the family group meeting, refer to the Family group meeting convenor handbook.

**Evidence from family group meetings and case plans in criminal proceedings**

As part of the introduction, the convenor will advise participants that anything said or done at the family group meeting is inadmissible in a criminal proceeding before court (Child Protection Act 1999, section 51YA) unless either:

- all persons participating in the family group meeting consent
- there is a criminal proceeding for an offence committed during the family group meeting.

The convenor will also advise participants that, in accordance with the Child Protection Act 1999, section 14(2) and (3), information in relation to any incidents of harm discussed at the meeting which may have involved the commission of a criminal offence relating to a child, must be provided to the QPS, with or without the consent of the participants. This applies whether or not Child Safety suspects the child is in need of protection (Child Protection Act 1999, section 14 (2) and (3)).

A disclaimer that can be read at the beginning of the family group meeting that outlines obligations of Child Safety in relation to providing information to the QPS is located in the Family group meeting convenor handbook.
3.2 Develop key items in the case plan

At the family group meeting the convenor will guide the discussion with the participants to formulate an agreed case plan which is comprehensive and addresses the child’s protection and care needs as well their need for permanency within designated timeframes. The case plan goals and actions need to be specific, measurable, attainable, results-oriented and time-limited. For further information refer to Developing the goals and actions.

To assist participants at the family group meeting develop key items to be included in the case plan, provide for private family time, where the family come together in a private space to discuss and reach agreement about what they would like included in the case plan. For further information about the use of private family time or structured facilitation refer to the Family group meeting convenor handbook.

In completing the development of the case plan, the convenor may use the case plan format, as outlined below, to guide the discussion at the family group meeting. Each item should be worded to reflect the intent of the meeting, and must be able to be understood by all participants at the meeting.

Case planning must include non-negotiables that address the child’s safety, developmental needs and assist them to gain the skills and sense of wellbeing that will allow them to realise their potential and positively participate in the wider community. For an Aboriginal and Torres Strait Islander child, ensure the five core elements of the child placement principle (prevention, partnership, placement, participation and connection) are incorporated in the development of the case plan.

1. Genogram

For each child, a genogram will help identify family members and and people that can be part of the child’s safety and support network, as well as potential options for supporting or caring for the child if required. Attach the genogram to the case plan and if the genogram has not been attached, record the reason that this has not occurred.

2. Record of meeting

Record details of each person who participated in the development of the case plan, including:

- the names of each participant
- the role of each participant in relationship to the child
- how they participated.

Record information about whether an independent person helped facilitate the child’s and family’s participation in the development of the case plan, including the development and review of a cultural support plan for an Aboriginal or Torres Strait Islander child in the case plan Record this in the ‘Independent entity participation’ form in ICMS.

In addition record:

- the date of the most recent family group meeting or the date the case plan was developed if no family group meeting was held
- the purpose of the family group meeting, as one of the following:
• Develop a case plan
• Review a case plan
• Court ordered develop/revise a case plan (s68(d)(i))
• Court ordered for other wellbeing/protection and care needs (s68(d)(ii))

• the location where the family group meeting was held
• the name and role of the family group meeting convenor.

3. Summary of current assessment

Type of ongoing intervention

Record one of the following to identify the current ongoing intervention type for the child:

• intervention with parental agreement
• intervention with parental agreement and directive child protection order
• child protection order.

Primary goal to achieve permanency

Within the case planning process, each child will require a primary permanency goal to be developed during the initial family group meeting. The primary goal identifies the direction for the intervention to best maintain or achieve permanency for the child, and can be one of the following:

• Child to remain safely in the home: the child’s safety, belonging and wellbeing needs can be met by the family with time-limited ongoing intervention from Child Safety.

• Reunification: the child has been removed from the care of a parent, and the goal of the case plan is to reunify the child with the parents on a permanent basis. Reunification with the family is optimal for children when the family can provide, and sustain, safe and nurturing care for a child.

• Other permanency option: the child’s safety, belonging and wellbeing needs are best met by a long-term order, as it is not in the child’s best interests, not possible, or it is not safe for the child to return home on a permanent basis. Consider permanency options such as:
  • long-term guardianship to a suitable family member or another suitable person
  • permanent care order
  • Family court order
  • adoption order
  • other option, for example, a family has arranged a cultural adoption.

• Children permanently residing with kin or in foster care may be provided with enhanced legal, physical and relational permanency through the use of guardianship orders. Placing a child with extended family members or significant people in their lives, for example, friends, is the preferred option for achieving permanency for children who cannot safely live at home. Children requiring a permanent care placement may also be provided with legal permanence through adoption.

• Long-term out-of-home care: the child’s reunification with a parent is not possible or not in a child’s best interests, and an alternative long-term care arrangement is required.
Long-term out-of-home care applies to children who are subject to a child protection order granting long-term guardianship to the chief executive.

- Young person lives independently: if reunification with a parent is not possible, or not in the child’s best interests, an older child may transition to adulthood through independent living.

To assist with decision-making around permanency options and promote stability and continuity for children, refer to the practice paper *Permanency planning*.

**Alternative goal to achieve permanency**

Where the primary goal is reunification, an alternative permanency option must be recorded and pursued through concurrent planning processes, in the event that the timely return of the child to the care of their parents is not possible. One of the following options must be selected:

- other permanency option, as listed above
- long-term out-of-home care – long term guardianship to the chief executive
- young person lives independently.

For children subject to a short-term order granting custody to the chief executive, an alternative permanency option of long-term care may require an application for a child protection order granting guardianship of a child to the chief executive or another suitable person, or a permanent care order, prior to the end of the two year period.

**Concurrent planning**

Concurrent planning is a process that supports the identification of a primary permanency goal and an alternative permanency option with a child and family. The aim of concurrent planning is to expedite permanency for a child and it requires actions to be developed and progressed for both goals, to be worked on simultaneously from the time a child comes into care, until a permanency decision is made.

It is crucial that the family group meeting convenor explains the requirement for concurrent planning to the child and the child's family, and for all participants to have a clear and shared understanding of concurrent planning, the goals of the case plan and actions to work towards the goals. The shared focus is on the child’s safety, wellbeing and best interests of the child now and for the rest of the child’s life.

**4. What are we worried has happened?**

**Harm statements**

This section of the case plan focuses on the past and outlines what Child Safety is worried about. Include information about the harm that led to Child Safety being involved, as well as harm related to past care environments or which might stem from the child’s own choices and actions. This includes consideration of:

- times when a child has been significantly harmed as a result of an action or inaction of a parent
- the past and current behaviours of the parents that are abusive
- the context and circumstances when this behaviour happened
- the harm or impact on the child.
Record a separate harm statement for each harm type.

Complicating factors
This is an optional field to record any factors, issues, circumstances that currently exist and make it more difficult for the child to be safe. Consider the behaviour of parents or other circumstances or conditions that place the child at risk of future harm.

5. What's working well?
Strengths and resources
As part of developing the case plan, it is important to have an understanding of the positive things that are occurring and working well in the family. These are recorded as strengths and resources and include information about:

- what is happening that has helped the parents care for the child
- what is in place that helps the parents improve the safety, belonging and wellbeing of the child
- what other resources the parents have that help them care safely for the children
- the child’s own strengths and resources.

Protection and belonging
This section outlines what has occurred and is working well to create safety, belonging and wellbeing for the child. Record information about:

- the actions of the parents, the safety and support network or Child Safety that have created safety, belonging and wellbeing for the child over time.
- what the parents have been able to do at times to keep the child safe from the harm and for how long
- the strengths and protective actions that a child in long-term care has demonstrated in relation to their own safety, belonging and wellbeing.

6. Planning for safety, belonging and wellbeing
What needs to happen?
This section of the case plan focuses on the future and outlines what needs to happen to ensure the safety, belonging and wellbeing of the child. It includes worry statements, goal statements and the actions required to achieve the goals.

Worry statements
Worry statements outline what the child, the safety and support network and Child Safety are worried might happen in the future if nothing changes and what actions or inactions might cause this to happen and within what circumstances and addresses the possible impact on the child. Refer to the SDM assessments to inform the development of these statements.

Record a separate worry statement for each harm statement identified.

Primary goal statements
The primary goal statements outline what we are working to achieve for the child and what we want the future to look like. It outlines how we will see safety, belonging and wellbeing for the child. There may be more than one goal statement.

In developing goal statements consider:

- what the child needs to experience, or have, to address the worries for the future
- what needs to be demonstrated over time to ensure the child is safe, well and connected to family, community and culture
- what we want to see the parents, family, safety and support network and Child Safety doing
- how each goal relates to achieving or maintaining permanency for the child.

Ensure the goal statements:

- addresses the key needs of the child and the three identified priority needs for the parents
- state the changes in conditions and behaviours that need to occur in order to achieve the primary goal
- respond to the reasons for Child Safety involvement
- are forward looking, positive and behaviour-based
- address the child’s need for relational, physical and legal permanency
- are specific and results-oriented so that all participants are clear about what is expected.

Ensure there is a goal statement for each worry statement.

**Actions for primary goal**

This section outlines the key activities and actions that need to be taken to achieve the primary goal and address both the worry statement and priority needs identified in the strength and needs assessments.

Do not record contact arrangements as an action.

When developing the actions, consider the following:

- how the actions contribute to best achieving (or maintaining) permanency
- what action steps are required by the child's parents, Child Safety, the network, carers and others to achieve the case plan goal and ensure the child's safety, belonging and wellbeing
- what the child needs to experience, or have, to address the future worries
- what needs to be demonstrated over time to ensure the child is safe, well and connected to family, community and culture.
- any person attending the family group meeting can be responsible for an action
- a person who is not at the meeting can be given responsibility for an action if they have tentatively agreed to the action prior to the meeting and understand the worries
• a proposed action can be recorded for a person who is not at the meeting and has not tentatively agreed to it prior to the meeting, however, a timeframe for their agreement to the action must be recorded.

• actions are to be flexible enough to accommodate changes in people’s circumstances and where necessary, include strategies to address any potential problems.

For each action, record:

• the frequency of the specified action
• who will take the action
• the date by which the action is to be completed or reviewed.

Where the substance testing of parents is considered a necessary and important part of the case plan for the child, based on the extent and nature of the parents substance misuse history and the level and nature of harm, or unacceptable risk, to the child, refer to Chapter 10.7 Undertake the substance testing of parents.

Alternative goal statements, if relevant
The alternative goal statements outline what we are working to achieve for the child and what we want the future to look like if the timely return of the child to the care of a parent is not possible. They outline how we will see safety, belonging and wellbeing for the child in an alternative permanency option. There may be more than one alternative goal statement.

Actions for alternative goals, if relevant
This section outlines what actions have to be taken to achieve the alternative permanency option, where the primary goal is reunification and an alternative permanency option has been identified. Outline the actions required to achieve the alternative permanency option, including:

• the specific actions required
• the frequency of the specified actions
• who will take the action
• the date by which the action is to be completed or reviewed

7. Child wellbeing and belonging
This section outlines key information about the child, the child's living arrangements and information about their education, culture and health. For young people over 18 years, it also records their transition to adulthood plan.

The information includes information in relation to:

• the placement and living arrangements for the child, who the the child is living with, and if not with their parents, the name, relationship and address of the carers, unless it poses a safety risk to the child
• where the child will attend school or childcare
• where applicable, details of the education support plan or the arrangements to progress an education support plan for the child
• whether the child requires a child health passport, and how the child’s medical and therapeutic needs are to be met (when not included as actions in the above part of the plan).

**Child health passport**

A child health passport is required for a child who has been in care for more than 30 days and the child health passport process must be commenced (or recommenced) 30 days and no later than 60 days of the child enters care. For further information refer to Chapter 5, 2.4 Develop a child health passport.

**Family, culture and community connection**

Family contact arrangements must reflect the case plan goal, for example, where the goal is not reunification, the level of contact may be less than for cases where the goal is reunification. Arrangements must also be consistent with any order made by the Childrens Court under the *Child Protection Act 1999*, section 61(b), 67(1)(b) or 68(1)(c), limiting the child’s contact with the child’s family or directing how the contact should happen.

Use this section to outline arrangements for:

• contact between the child, siblings and the child’s parents
• contact between the child and other family members and significant persons
• how the child will maintain his or her connections to parents, siblings, extended family and community members and people of cultural or ethnic significance
• the agreed family contact schedule and all specific information about frequency, duration, where it will occur, who will attend and level of supervision in the ‘Family and Community’ section of the case plan - **do not** document contact arrangements and schedules in the case plan actions
• record any directions made by the Childrens Court on granting an interim order about contact.

For further information about appropriate family contact arrangements, refer to Chapter 5, 2.5 Facilitate and monitor family contact.

**Cultural support plan**

The cultural support plan is a key part of the case planning process for every child from another cultural community. The cultural support plan:

• helps nurture and support the child while strengthening their cultural identity and connections
• assists with the child’s understanding of their community networks and cultural heritage
• helps increase the child’s knowledge and understanding of their place in their family, kinship and community structure
• helps ensure that important cultural and family information is documented for a child who is too young to contribute to their own cultural support plan.

The cultural support plan aims to ensure the optimal retention of the child’s connection to their culture, parents, siblings, families and other people of significance in their communities or under
Aboriginal tradition or Island custom. It is particularly important for an Aboriginal or Torres Strait Islander child:

- given historical issues that have contributed to the over-representation of Aboriginal and Torres Strait Islander children in the child protection system
- when the child is not placed with a person who is compatible with the child’s community or language group.

The cultural support plan is created as part of the development of the initial case plan for a child at a family group meeting.

**Prepare for a cultural support plan**

Work in partnership with the child, (when age and developmentally appropriate), their family and other significant persons to gather information to inform the cultural support plan, including:

- strategies for maintaining the child’s and family’s relationships, culture and community
- determining regular contact arrangements with people who will support the child to develop their cultural identity
- who may be willing to undertake tasks or activities with the child
- identifying any costs that may be required to action tasks or activities
- determining what supports the carer may require to support the implementation of the plan
- negotiating family contact arrangements that will safely maintain the child's cultural identity and community connections.

For further information about the cultural support needs of a child from another cultural community, refer to the practice paper *Working with people from culturally and linguistically diverse backgrounds*.

**Aboriginal or Torres Strait Islander children**

When completing the cultural support plan for an Aboriginal or Torres Strait Islander child, record in ICMS the details of:

- relevant cultural information about the child, their family, community, language, clan, island or cultural group and personal history
- the name of clan/language group/ethnic group or cultural group/island the child belongs to – this is recorded in the 'Indigenous community/Language group' field within the Indigenous status section of the child’s Profile tab in ICMS
- the name of the mob/community and/or island group, clan group, language group and skin group the child’s siblings, mother and father belong to
- what activities the child will be involved in to support and preserve their sense of cultural identity and links:
  - what help the child will need to take part in these activities, who will support the child to attend these activities, and how often
  - how the child will be supported to develop and maintain a connection with their family, community, culture, traditions and language
• the support the child’s carer needs to develop and maintain the child’s connection with their family, community, culture, traditions and language, particularly when the carers do not identify as Aboriginal or Torres Strait Islander
• the support and help the carers need to feel comfortable and confident in attending and participating in Aboriginal and Torres Strait Islander or other cultural community events
• record the names, relationship or organisation and contact details of people who have agreed to have contact with the child to support and develop their cultural identity.

For further information, refer to Chapter 10.1 Decision-making about Aboriginal and Torres Strait Islander children and the practice resource Developing a cultural support plan for an Aboriginal or Torres Strait Islander child.

Children from other cultures
When completing the cultural support plan for a child from another culture, record:
• relevant cultural information about the child, his or her family, community, language, clan, ethnic, island or cultural group and personal history
• what activities the child will be involved in to support and preserve their sense of cultural identity and links:
  • what help the child will need to take part in these activities, who will support the child to attend these activities, and how often
  • how the child will be supported to develop and maintain a connection with their family, community, culture, traditions and language
• record the names, relationship or organisation and contact details of people who have agreed to have contact with the child to support and develop their cultural identity.

When a child is not in care
When a child is subject to intervention with parental agreement, or a directive order or supervision order, the senior team leader may decide that it is not necessary to complete a comprehensive cultural support plan for the child and that it is appropriate to only record minimal information in the cultural support plan, or to state that the family will continue to meet the cultural needs of the child. This may occur when:
• the family will generally be able to continue to meet the cultural needs of the child, as they did prior to Child Safety involvement
• the family find it intrusive for Child Safety to complete a cultural support plan whilst the child is still in their care.

When a child is subject to a child protection care agreement
When a child is subject to a child protection care agreement, the senior team leader may decide that it is not necessary to complete a comprehensive cultural support plan for the child, after considering:
• the length of time the child will remain in care
• whether the child is placed with a kinship carer or culturally appropriate carer
• how much contact the child is having with extended family
• whether there is a specific identified cultural need.
If, in either of the two circumstances outlined above, the family request assistance with issues associated with their cultural identity and connectedness, work with them to develop a comprehensive cultural support plan, as outlined below.

Transition to adulthood
For a child aged 15 years or over, record a transition to adulthood plan as part of the case planning process and include the following information:

- whether the young person requires a transition from care to adulthood plan
- whether planning for the young person’s transition to adulthood occurred as part of this case plan, and if not, the rationale for why this has not occurred
- whether the young person participated in the transition to adulthood planning, and if not the rationale for why they did not participate
- what the young person’s views are in relation to transition to adulthood planning.

8. Case plan review
As a minimum, the case plan must be reviewed every six months, however, it may be appropriate to review the case more frequently, taking into account:

- the child’s age, circumstances and developmental needs
- any change that has a significant impact on the direction of the case plan, or where there are significant changes to the child’s needs or safety
- the nature of the specific provisions, outcomes and actions of the case plan
- any specific challenges associated with achieving the case plan goals
- the duration of the order (so that the shorter the order, the more frequent the case plan review) if a child protection order is in place.

Establish and record the decision about the agreed review date.

Where a child has a long-term guardian, case plan reviews are not required. However, the case plan can be reviewed every 12 months. For further information refer to 5.10 Long-term guardianship to a suitable person - case plan review.

Where a child has a permanent guardian, the case plan is not reviewed. However, it may be reviewed when requested by the child or the guardian.

9. Resources required for plan
Record any decisions made that will require approval by the financial delegate, including specific details of the service to be provided and any anticipated costs. Where approval has not been sought prior to the family group meeting, advise the participants that CSSC manager approval is required following the family group meeting and prior to the case plan being endorsed.

For more information on developing the key items in the case plan, refer to the Family group meeting convenor handbook.

3.3 Develop key items in the case plan - application for long-term guardianship to a suitable person
When a decision is made to make a referral to DCPL to apply for a child protection order granting long-term guardianship to a suitable person, consider the following when completing the revised case plan:

- that Child Safety will have contact with the child every **12 months** (Child Protection Act 1999, section 51VA(2))
- that the proposed long-term guardian will allow this contact with the child to occur (Child Protection Act 1999, section 51VA(3))
- how the proposed long-term guardian will keep the child’s parents informed about where the child is living and give the child’s parents information about the child’s care (Child Protection Act 1999, section 80(1)(a) and (b)), **unless** an exception has been made by the Childrens Court
- how the plan addresses the elements of the Child Placement Principles, for an Aboriginal or Torres Strait Islander child (Child Protection Act 1999, section 5C)
- that the child or the long-term guardian may contact Child Safety at any time in the future, to request support - refer to Chapter 3, 1. What if a suitable person has long-term guardianship?
- that the proposed long-term guardian will **notify** Child Safety in writing should the child leave their direct care at any time in the future, including details of the child’s current whereabouts if known (Child Protection Act 1999, section 80(A)(2)).

The revised case plan submitted to the Childrens Court **upon** the application for the order must incorporate all matters as outlined below:

The first section of the case plan includes:

- the child’s details
  - the date of the case plan – this is the date of the most recent family group meeting or the date the case plan was developed if no family group meeting was held
- whether the child participated in the review of the case plan
- whether the long-term guardian participated in the review of the case plan.

**Case plan goal**

In this section record:

- the primary goal of the case plan to best achieve to best achieve (or maintain) permanency
- the rationale for goal.

**Support needs and actions**

In this section record any identified support needs and actions:

- describe the support needs of the child and how it will be met
- the actions required to address the needs
- who is responsible for the actions
- the date for the actions to be completed or reviewed.

For further information refer to Chapter 3, 1. What if a suitable person has long-term guardianship?
Child information
When a child is subject to a long-term guardianship order to a suitable person, the long-term guardian will assume full responsibility for meeting the child's identified educational, medical and therapeutic needs, unless included as an action in the case plan, as the child is no longer eligible for an education support plan or a child health passport.

Where there is a significant risk to the safety of the child or anyone else with whom the child is living, Child Safety will consult with OCFOS and request DCPL makes a submission, as part of the application to the Childrens Court, about necessary modifications to the provision of information about where and with whom the child is living (Child Protection Act 1999, section 80(2)).

Record the following information in the child information section:
- education - relevant information about the child's schooling or child care arrangements
- family and community - see below
- child health - information in relation any health needs relating to the child
- the cultural support plan, if appropriate - see below
- planning for adulthood - Detail how the long-term guardian is assisting the young person to prepare for life as an independent adult.

Family and community
Family contact arrangements must be consistent with the Child Protection Act 1999, section 80(1), unless the Childrens Court, modifies the long-term guardians obligations in response to a submission by Child Safety (Child Protection Act 1999, section 80(2)).

Outline the views of the child, the parents and the proposed long-term guardians regarding:
- the proposed contact arrangements between the child and the child's parents
- arrangements for contact between the child, other family members and significant persons
  any submissions to be made by Child Safety to the Childrens Court regarding the proposed long-term guardians ongoing requirement to provide family contact, where there is a significant risk to the safety of the child or anyone else with whom the child is living.

Cultural support plan
When developing a cultural support plan, record the following information:
- whether the child is Aboriginal and/or Torres Strait Islander
- whether the child belongs to any other cultural community
- the name of clan/language group/ethnic group or cultural group/island the child belongs to – this is recorded in the 'Indigenous community/Language group' field within the Indigenous status section of the child’s Profile tab in ICMS
- the name of mob/community and/or island group, clan group, language group and skin group the child’s siblings, mother and father belong to
• what activities the child will be involved in to support and preserve their sense of cultural identity and links:
  • what help the child will need to take part in these activities, who will support the child to attend these activities, and how often
  • how the child will be supported to develop and maintain a connection with their family, community, culture, traditions and language
• the support the child's long-term guardian needs to develop and maintain the child's connection with their family, community, culture, traditions and language, particularly when the carers do not identify as Aboriginal or Torres Strait Islander
• the support and help the carers need to feel comfortable and confident in attending and participating in Aboriginal and Torres Strait Islander or other cultural community events
• the names, relationship or organisation and contact details of people who have agreed to have contact with the child to support and develop their cultural identity.

Case plan review
Record the date for next contact with the child and review request – this must be within 12 months

Resources required for plan
Document the approved financial supports, including specific details of the service to be provided and any anticipated costs, to be paid following the making of the long-term guardianship order to a suitable person, as recorded in the Assessment report - Long-term guardianship to a suitable person. For further information, refer to Chapter 3, 2.6 Apply for a long-term guardianship order.

The outcomes will only address the key needs of the child, and any previously identified priority needs for the parents, as the decision has been made to seek a long-term guardianship order.

3.4 Develop key items in the case plan – permanent care order

When a decision is made to make a recommendation to DCPL to apply for a permanent care order, the revised case plan submitted to the Childrens Court upon the application for the order must incorporate all matters as outlined in the four areas below.

Child details
Record the following information about the child:
  • their name
  • their date of birth
  • their age
  • their sex
  • their indigenous status
  • their ethnicity.

Case plan details
Record the following information:
- the date of case plan – the day it was developed
- the current intervention for the child
- the case plan goal as ‘permanent care order’ only
- the names of the proposed permanent guardian or guardians.

**Outcomes and actions**

The case plan will record the legal obligations of the proposed guardian under the following sections of the *Child Protection Act 1999*, to:

- ensure the charter of rights for a child in care is complied with (section 79A (1)(a))
- help the child transition to adulthood (section 79A (1)(b))
- preserve the child’s identity and connection to their culture of origin, to the extent it is the best interests of the child (section 79A (1)(c))
- help maintain the relationship between the child and the child’s family and persons of significance and provide opportunities for ongoing family contact with them (section 79A (1)(d))
- tell the parents where the child is living (section 80 (1)(a))
- give them information about the child’s care (section 80 (1)(b))
- provide opportunity for contact between the child and the child’s parents and appropriate members of the child’s family as often as is appropriate in the circumstances (section 80 (1)(c))
- immediately inform Child Safety, in writing or via email, should the child be leaving their care in the near future (section 80A (2)(a))
- immediately inform Child Safety, in writing or via email, should the child leave their care prior to turning 18 years of age and advise, if known, where the child is (section 80A (2)(b)).

The outcomes will only address the key needs of the child, and not any previously identified priority needs for the parents, as the decision has been made to seek a permanent care order.

**Child information**

**Protection and care needs**

Outline how the child’s safety, belonging and wellbeing needs will be met by the proposed permanent guardian and how they have demonstrated this to date.

**Family and community**

Outline how the guardian will preserve the child’s relationships with members of their family and what arrangements will be in place to ensure the child maintains contact with their family and persons of significance to them. Family contact arrangements must be consistent with the *Child Protection Act 1999*, section 80(1), unless the Childrens Court, modifies the guardians obligations in response to a submission by Child Safety (*Child Protection Act 1999*, section 80(2)).
Outline the views of the child, the parents and the proposed permanent guardians regarding the proposed arrangements, as well as outlining any submissions to be made by Child Safety to the Childrens Court regarding the proposed permanent guardians ongoing requirement to provide family contact, where there is a significant risk to the safety of the child or anyone else with whom the child is living (Child Protection Act 1999, section 80(2)).

**Cultural connection**

Clearly detail how the proposed permanent guardian will preserve the child’s identity and connection to their community, culture and country. For information about responding to the child’s ongoing cultural support needs, refer to the practice resource Developing a cultural support plan for an Aboriginal or Torres Strait Islander child.

**Health and wellbeing**

Outline how the guardian will support the child and respond to any identified health issues if a permanent care order is made, as the child will no longer be eligible for a child health passport, and the permanent guardian will assume full responsibility for meeting the child’s identified medical and therapeutic needs.

**Education/training/employment**

Outline how the guardian will support the child and respond to any identified education, training or employment needs if a permanent care order is made, as the child will no longer be eligible for an education support plan, and the permanent guardian will assume full responsibility for meeting all of the child’s identified education, training and employment needs.

**Planning for adulthood**

For a child who is 15 years or older at the time of the making of the permanent care order, the case plan must include information about how the guardian will support the young person transition to adulthood.

**Resources and financial matters**

Permanent guardians will be entitled to the fortnightly caring allowance for the duration of the order. Outline how the guardian will support the child financially and determine whether there are any financial issues that will impact on the guardian’s ability to to accept full financial responsibility for the child, until the child becomes financially independent.

**High and complex support needs allowance**

Permanent guardians of a child may be eligible for the high or complex support needs allowance in exceptional circumstances for a time limited period (not exceeding six months) only where the review of the child’s case plan indicates that:

- the child has emerging special needs or
- the guardian requires assistance to establish a care environment for the child to meet the child’s ongoing needs.
If a permanent guardian requests a review of their child’s case plan, in order to request additional financial support, arrange a meeting to discuss the guardian’s request and to make an assessment of the child’s current support needs and the support options available for the child.

Where the financial assistance is approved, complete the High support needs allowance application form or the complex support needs for a child subject to a permanent care order. The process of assessing the provision of High or complex support needs allowance for a permanent guardian is the same as for any other carer or guardian, with the exception that the approval by CSSC manager cannot exceed six months.

**Child related costs**

Permanent guardians will only be eligible for child related costs reimbursement, in exceptional circumstances, where it is identified through the review of the child’s case plan and where the chief executive considers it necessary to ensure the wellbeing and best interests of a child on a permanent care order. The CSSC Manager will approve these requests in accordance with the same criteria used to determine the payment of CRC to long-term guardianship order to a suitable person.

### 3.5 Record, endorse and distribute the case plan

All case plans must be recorded in the approved form in ICMS. The person responsible for recording the case plan is:

- the convenor, or
- the CSO with case responsibility, if the convenor is a private convenor (including the Family Participation Program service for a family-led decision making process), or
- the CSO with case responsibility, if the case plan is developed without a family group meeting being held.

A case plan must be endorsed by a senior team leader or senior practitioner **within 10 business days** of the family group meeting being held (Child Protection Act 1999, section 51Q. To endorse a case plan the senior team leader must be satisfied:

- that it is consistent with the child’s best interests throughout childhood and the rest of the child’s life, and that it is practicable
- that it sufficiently provides for the child's safety or for any directions or orders made by the Childrens Court
- that it addresses the critical areas of need
- that it takes into account the long-term effect of case plan decisions on an Aboriginal or Torres Strait Islander child’s identify and connection with family and community
- that any significant resourcing impacts have been approved by the financial delegate
- that it incorporates key items specific to a decision to apply for a long-term guardianship order to a suitable person, if applicable - refer to 3.3 Develop key items in the case plan - application for long-term guardianship to a suitable person.

In circumstances where a case plan has not been endorsed within the required 10 business days, for reasons other than because the case plan is not suitable, it is not necessary to reconvene a family group meeting when a short period of time only has elapsed. In this
circumstance, the senior team leader is responsible for endorsing the existing case plan in ICMS as soon as possible and recording the rationale for the delay.

**Distribute the case plan**

Once endorsed, provide a copy of the case plan to:

- the child (where age and developmentally appropriate), or, explain the case plan to the child in a way that is appropriate to the child’s age and ability to understand
- the child’s parents
- anyone else affected by the plan, responsible for action in the plan or who the chief executive considers should receive a copy
- any legal representative for the child or for the child’s parents
- the child’s foster or kinship carer, or the licensed care service or long-term guardian who will be involved in implementing the case plan for the child
- an elder and other respected person of the child’s community who will play a role in supporting the implementation of the plan.

In most cases, everyone who attends the family group meeting should be given a copy of the case plan, except if an attendee will not be involved in the implementation of the case plan, for example this may include an independent person or support person.

**Provide a case plan for the Childrens Court**

The Childrens Court cannot grant a final child protection order unless it is satisfied that there is an endorsed case plan that responds to the child’s assessed needs. When deciding whether a case plan is appropriate, it is not relevant whether or not all the people who participated in the development of the case plan agree with the plan (*Child Protection Act 1999*, section 59). Once the case plan and supporting material have been filed in court, file any subsequent review reports and revised case plans with the court, until such time as the court makes a final determination about the application for an order (*Child Protection Act 1999*, section 51X). For more information refer to 5. What if an application for a child protection order is filed with the Childrens Court without a case plan?

When a decision is made to vary the long-term guardianship order from a suitable person to the chief executive, undertake a case plan review as outlined in 5. Review and revise the case plan. The revised case plan will be submitted to the Childrens Court with the application for a variation of the order. For further information, refer to Chapter 3, 1. What if a suitable person has long-term guardianship?

**4. Implement the case plan**

**4.1 Actively implement the case plan**

The key activity and focus during ongoing intervention is to implement the case plan to achieve the case plan goal and outcomes.

During ongoing intervention, the allocated CSO is responsible for facilitating actions to implement the case plan and support and monitor progress toward the case plan goals and
actions, with the support of the CSSO, senior team leader, other Child Safety staff and service providers. This requires the CSO to:

- build positive relationships and engage with children, families and service providers
- monitor whether the parents are undertaking their agreed responsibilities as recorded in the case plan, in order to meet the child’s needs
- undertake goal-directed visits with the child and parents in accordance with the minimum contact requirements - refer to 4.2 Implement contact requirements
- regularly visit the carer and support the placement, if relevant
- manage family contact for the child, including a clear plan for reviewing and increasing family contact over an appropriate timeframe, when the child is to be reunified with their family
- interact in a culturally appropriate way with Aboriginal and Torres Strait Islander children, families and communities, and ensure that:
  - the child and family is given an opportunity to have an independent person help facilitate their participation in the decision-making process for all significant decisions (*Child Protection Act 1999*, section 6) - refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children, and the practice resource *Working with the recognised entity*
  - casework regarding Aboriginal or Torres Strait Islander children accords with the Child Placement principles of prevention, partnership, participation, placement and connection (*Child Protection Act 1999*, s.5C) - refer to the practice resource *The child placement principle*
  - Aboriginal or Torres Strait Islander children are placed in accordance with the child placement principle (section 83) - refer to the practice resource *The child placement principle*
- interact in a culturally appropriate way with other cultural groups or communities
- facilitate and support the parent to progress the actions and outcomes assigned to them
- complete the actions assigned to Child Safety in the case plan
- ensure the case plan actions are coordinated
- liaise with other service providers as required
- undertake court-related tasks, if required
- place the child in care, if required, and support the child and carer for the duration of the placement
- use professional judgement and all information gathered during implementation to regularly assess progress towards the case plan goal, and the appropriateness of the goal and actions
- record information about all activities with the child, family and carer in ICMS.

**Engage a service provider**

A key aspect of achieving the case plan goal and outcomes is the provision of appropriate services to children and families, as outlined in the case plan. Ensure that where age and
developmentally appropriate, the child is involved and kept informed of referrals involving them. Contact with service providers will generally have occurred prior to the development of the case plan, in accordance with 1.5 Explore service options.

To initiate the case plan actions and engage a service provider:

- complete a referral to the agency and provide information to the child, parents and if relevant, the carer, about how and when to access the service
- confirm the cost of the service and organise the method of payment following approval from the financial delegate (this will have been sought prior to the case planning meeting)
- develop a communication plan between the service and Child Safety.

Where the parents are self-referring, provide them with support to complete the referral process.

If a service nominated in the case plan is unable to accept a referral, record the information in a case note in ICMS, identify other possible services and discuss them with the child and the parent.

**Coordinate service providers**

When there are multiple services working with the child and parent, the CSO with case responsibility will:

- coordinate and maintain regular communication with all services
- ensure regular communication between the services and the family or carer and child, when age appropriate
- monitor the services provided to ensure that they target and meet the needs of the child, parents or carer, to progress the case plan
- include the staff of these services in the regular review of the case plan.

For further information, refer to Chapter 10.3 Information sharing.

**Monitor and record the progress of the case plan**

As part of implementing the case plan, the CSO with case responsibility is responsible for monitoring the progress of the case plan through regular contact with the child, the parents, extended family members and service providers.

During these contacts, either face-to-face or indirect:

- gather and assess information about the safety and wellbeing of the child, the completion of the case plan activities and the progress made towards the case plan goal by all parties
- record all relevant information in case notes in ICMS as soon as possible - this includes: details of contact with a child, parent, family, carer, service provider or other significant persons a summary of key events and significant events that occur in the life of a child or family any risks to a child’s safety that are identified, and the strategies undertaken to ensure a child’s safety case discussions and decisions made, including the rationale for these decisions.
Record the information, which will be used during the review process to assess progress towards the case plan goal and outcome, in a factual and objective manner, and distinguish facts from opinion, assumptions and personal views.

**Respond to harm or risk of harm**

If, during the implementation of the case plan, new child protection concerns are received about a child in relation to their parents, take immediate action to ensure the safety and wellbeing of the child and follow the procedure as outlined in **Chapter 3, 2. What if new child protections concerns are received?** When the concerns relate to a child in care refer to **Chapter 9. Standards of care.**

When criminal court information about a child subject to ongoing intervention is received via an Integrated Justice Information Strategy (IJIS) notification (Criminal court matter alert) or about a criminal or civil court matter via an IJIS Electronic transfer of court result (ETCR) alert email, take the following actions, as appropriate:

- view the information contained in the automated email or the ETCR report in ICMS
- assess the information and record the appropriate response in ICMS
- record any further action taken, where relevant, including the provision of information about the services offered by Victim Assist Queensland
- complete a new safety assessment
- consider the need to review the current case plan, including the type of ongoing intervention required to keep the child safe
- review the appropriateness of the child’s placement.

For further information, refer to **Chapter 2, 19. What if information is received via an Integrated Justice Information Strategy automated email alert?** the practice resource Receiving Integrated Justice Information Strategy email alert information; also **Chapter 10.20 Victims of crime and the role of Victim Assist Queensland.**

**Alerts**

When information gathered during the implementation of the case plan indicates the need to record an alert in ICMS for a child or family member, refer to **Chapter 1, 9. What if an alert needs to be recorded in ICMS?**

### 4.2 Provide for family contact

Maintaining contact with children and parents is a key activity for Child Safety during ongoing intervention. Child Safety contact requirements outlined below apply to all children subject to:

- intervention with parental agreement
- intervention with:
  - a directive or supervision order
  - a short-term custody or guardianship order.

**Child Safety contact requirements**
The minimum number of contacts to be had each month with the child and their parents, by the CSO or other people who can contribute to case work with a child and family, is outlined below.

The minimum number of contacts required per month is initially determined by the outcome (risk level) identified in the family risk evaluation, completed as part of an investigation and assessment. It is subsequently determined by the outcome of either the family risk re-evaluation or the family reunification assessment.

Table 1 outlines the minimum contact requirements that apply for in-home cases for children subject to either:
- intervention with parental agreement (including when the child is subject to a child protection care agreement)
- a directive or supervision order.

**Table 1: Minimum contact requirements for in-home cases**

<table>
<thead>
<tr>
<th>Risk level</th>
<th>Parent and child contacts</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td><strong>One</strong> face-to-face per month with parent and child&lt;br&gt;One support contact</td>
<td>Must be in parent’s residence</td>
</tr>
<tr>
<td>Moderate</td>
<td><strong>Two</strong> face-to-face per month with parent and child&lt;br&gt;Two support contacts</td>
<td>One must be in parent’s residence</td>
</tr>
<tr>
<td>High</td>
<td><strong>Four</strong> face-to-face per month with parent and child&lt;br&gt;Four support contacts</td>
<td>Two must be in parent’s residence</td>
</tr>
</tbody>
</table>

Table 2 outlines the minimum contact requirements by Child Safety that apply to any family subject to ongoing intervention, where at least one child is in care, with the goal of reunification.
Table 2: Minimum contact requirements for family reunification cases

<table>
<thead>
<tr>
<th>Risk level</th>
<th>Parent and child contacts</th>
</tr>
</thead>
</table>
| Low        | • one face-to-face per month with the parent  
             • at least one face-to-face per month with each child  
             • one support contact. |
| Moderate   | • two face-to-face per month with the parent  
             • at least one face-to-face per month with each child  
             • two support contacts. |
| High       | • three face-to-face per month with the parent  
             • at least one face-to-face per month with each child  
             • four support contacts. |

Table 3 provides information and considerations to inform Child Safety’s contact requirements.

Table 3: Additional Considerations

| CSO Contacts | For in-home cases: For low and moderate risk cases, the CSO must make at least one of the required face-to-face contacts with each child and parent during the month. For high risk cases, the CSO must make at least two of the four face-to-face contacts during the course of a month with each child and parent.  
For reunification cases: During the course of a month, the CSO must have face-to-face contact at least once with each child in the child’s current living environment, and at least once with each parent in the parent’s current living environment. |
| CSSO Contacts | Contacts by CSSOs may supplement the required contacts, provided that the nature of the contact meets the definition for face-to-face contact. |
The CSO must always maintain at least one face-to-face contact per month with the parent(s). Contacts by a service provider may supplement the required contacts, in circumstances where that service provider is involved in the implementation of the case plan. Examples may include, but are not limited to, health services and counselling services.

Face-to-face Contact

Face-to-face contacts are intended to be meaningful, purposeful, and goal directed. Contacts with parents should focus on assessment of strengths, needs, and case plan progress. Contacts with children should be child focused, assessing each child’s strengths and needs, views, and wellbeing. Always consider changes in family circumstances that may impact upon the child’s safety. During face-to-face contact with a child, it is recommended that the CSO speak with the child alone, to provide them with an opportunity to express any concerns.

Support Contact

Personal or telephone contact with a person who has information about the child and/or the parents in circumstances where that person has a relevant contribution to the case plan. Examples may include, but are not limited to, educational personnel, health services, counselling services, and Youth Justice Services.

Overrides

A discretionary override to these face-to-face and collateral contact guidelines is permitted based on unique case circumstances that are documented by the CSO and approved by the senior team leader.

**Contact requirements following the review of a case plan**

Where the family risk re-evaluation completed as part of the review of a case plan identifies a higher or lower risk level, the required level of contact will change accordingly.

If a child is reunified following the review of a case plan, the contact requirements for in home cases will apply, based on the most recent risk level in the family reunification assessment tool. Additional contact is necessary where an immediate safety plan is in place to maintain the child’s safe return to the family.

**Determine whether to increase contact by Child Safety**

Where relevant, use professional judgement to determine if more contact with a child and family is necessary. Following approval by a senior team leader, increase the level of contact, and record the decision and rationale in a case note in ICMS.

**Other contact requirements**

The contact requirement for children in care, where the case plan goal is not reunification, is for contact with the child by Child Safety once a month.

For a child subject to a long term guardianship order to a suitable person, contact with the child and long-term guardian is required every 12 months. For further information, refer to Chapter 3, 1. What if a suitable person has long-term guardianship? There are no contact requirements with a child who is subject to a Permanent care order and resides with their permanent guardian.
4.3 Visit the child, parent and carer during ongoing intervention

Face-to-face contact is the key to building positive relationships with a child, their family and carer. It is important to plan and conduct contact visits with a clear purpose and an understanding of the planned outcome of each visit.

Face-to-face contact must:
- be meaningful, purposeful and goal-directed
- be culturally responsive and respectful
- be child-focused and take into account the child’s needs, views, wellbeing and safety
- inform the assessment of the child and parents strengths and needs and progress toward the case plan goal and
- ensure compliance with the statement of standards for children in care.

For additional guidance, refer to the practice paper Family contact for children and young people in out-of-home care.

Arrange the contact

When arranging contact with the child, parent or carer:
- negotiate an appropriate time and place for the visit
- assess any personal safety issues and take necessary action to ensure safety for all participants
- take into account relevant cultural considerations
- engage an interpreter where the child or parent experiences communication barriers.

For further information about contact with the child and parents, refer to 4.2 Implement contact requirements.

Face-to-face contact with a child

Face-to-face contact is to occur with all children irrespective of their age, to regularly assess their general development, safety, belonging and wellbeing. When age and developmentally appropriate:
- talk with the child alone as part of the contact - this will allow you to:
- actively listen to them and provide them with support
- build trust and understanding in the relationship
- seek their views and wishes about matters affecting them
- discuss any personal issues or concerns the child may raise
- discuss any risks to the child’s safety
- ensure they are receiving a level of care consistent with the statement of standards
- seek their feedback on family contact with the parents, if applicable
- discuss the progress of activities that are occurring as part of the case plan, including the cultural support plan, where relevant
• keep them informed about significant events such as court proceedings or changes to family contact.

For additional information about engaging with children, refer to the practice resource Participation of children and young people in decision-making and the Children and young people’s participation strategy.

**Face-to-face contact with a parent**

When meeting with a parent:

• determine whether the child’s safety, protection and care needs are being met by the parents, if the child is living at home, and review the safety and support plan if necessary

• discuss the parent’s achievements toward meeting the case plan goal and actions

• obtain feedback about the parents involvement with service providers and whether it is addressing the identified parental needs

• discuss any significant changes that have occurred in the parent’s circumstances, that may impact on the child and the case plan goal, and options that could be undertaken to respond to the changes

• discuss the progress of the family contact arrangements between the parents (and other significant people) and the child, to assess whether the arrangements are still appropriate and meeting the child’s needs

• inform the parents about significant events such as court proceedings or changes to family contact.

**Contact with a carer**

When meeting with the carer of a child in care

• provide support to the carer

• monitor the activities detailed in the placement agreement - refer Chapter 5, 1.9 Complete a placement agreement

• identify any issues in the care environment that may impact on the safety, belonging and wellbeing of the child

• monitor the carer’s responsibility as outlined in the case plan, and in the cultural support plan where relevant

• identify issues that may impact on the progress of the case plan, for example, conflict with the child’s parents, transport arrangements or finance.

At the end of each visit:

• organise the next visit prior to leaving the contact

• record relevant information in a case note in ICMS as soon as possible

• take actions to address any issues identified, particularly with regard to the child’s safety.

### 4.4 Regularly assess the progress of the case plan

Assessing the progress of the case plan will occur throughout the implementation stage. This occurs by analysing the information gathered through all aspects of case work with the child, family and carer, including:
• all contact with the child, parents and carer
• contact with, and feedback from, service providers
• contact with family members, safety and support network members and other significant people
• observations of family interactions and behaviours.

The process of regularly analysing the information, in consultation with the senior team leader, will assist the CSO with case responsibility to have an accurate awareness of the current situation for the child and family at the time of the case plan review.

For information about key questions to inform the assessment process, refer to the practice resource Assessing the progress of the case plan.

5. Review and revise the case plan

5.1 Complete the review and revision process

Every case plan developed for a child under the Child Protection Act 1999, part 3A, must be regularly reviewed. The purpose of the case plan review is to assess progress towards achieving the case plan goal and outcomes and inform the development of a new case plan where the decision has been made to continue ongoing intervention.

Frequency of reviews
A case plan must be reviewed regularly, taking into consideration the following factors:
• the child’s age and developmental needs
• the provisions of the case plan
• any change that has a significant impact on the direction of the case plan.

As a minimum, the case plan must be reviewed every six months, except where a child has a long-term or permanent guardian - refer to 5.9 Long-term guardianship to suitable person - case plan review or 5.10 Permanent care order – case plan review.

Long-term guardianship to a suitable person
Where a child is subject to a child protection order granting long-term guardianship to a suitable person, contact the child and the long-term guardian at least every 12 months to give the child an opportunity to comment on or ask questions about the case plan. The case plan may be reviewed if the child or the guardian requests a case plan review or if Child Safety otherwise considers it necessary to review the case plan.

For further information refer to 5.10 Long-term guardianship to a suitable person - case plan review and Chapter 3, 1. What if a suitable person has long-term guardianship?, Supporting children in the care of long-term guardians and Child related costs - Long-term guardian support policies.

Review participants
Active efforts are to be made to enable the following people to participate in the review of a case plan (*Child Protection Act 1999*, section 51W):

- the child, if age and developmentally appropriate
- the child's parents
- other members of the child's family group who are considered likely to make a significant contribution to the case plan
- other people with whom the child has a significant relationship, for example, the child's approved carer or guardian
- any legal representative for the child
- relevant service providers.

For an Aboriginal or Torres Strait Islander child, arrange for independent person to help facilitate the child’s and family’s participation in the review of a case plan. Refer to **10.1 Decision-making about Aboriginal and Torres Strait Islander children.**

**Decide the process for a case plan review**

When reviewing a case plan, the use of a family group meeting is **not required**, but may be an appropriate way of engaging people, particularly when:

- there is disagreement between family members and Child Safety about the case plan
- previous actions have not been completed
- changes to the case plan are being proposed which would significantly change the permanency goals or outcomes.

When a family group meeting is held to review a case plan and develop a revised case plan, provide the convenor with copies of the following information:

- all relevant information, including a copy of the draft review report, family reunification assessment (if the child is in care) or family risk re-evaluation assessment (for a child subject to in-home intervention)
- the child’s strengths and needs assessment
- parental strengths and needs assessment (if the case plan goal is reunification or if the child remains safely at home)
- any other relevant information that has become available since the referral, including details of any additional significant family members or other persons that have been identified.

When a family group meeting is not to be used for the case plan review, consider a combination of strategies to conduct the review to ensure it occurs in an inclusive and participative way, for example, meetings with the family, meetings with individuals or groups of individuals or, where necessary, telephone interviews.

Refer to section **2.3 Prepare for a family group meeting** for more information on the Family Group Meeting (FGM) process, where an FGM is convened to review the child’s case plan.

**Review of the case plan**

As part of the review of a case plan, Child Safety must undertake the following activities:
- decide, in collaboration with the child and family, where possible, how the review process will occur and arrange meetings and venues, as required
- contact the participants to gather relevant information to inform the review
- consider and assess all of the up-to-date information about the case
- complete either:
  - the family risk re-evaluation, when the child is living at home - refer to 5.2 Re-assess the level of family risk for ‘in home’ cases
  - the family reunification assessment, when the child is living in care and the case plan goal is reunification - refer to 5.3 Assess whether reunification can occur
- assess progress towards the case plan goals (both primary and alternative)
- complete a safety assessment where case closure is being considered, or where circumstances have changed in the family and safety needs to be re-assessed
- meet with the relevant people to:
  - share relevant information and the outcome of assessments by Child Safety
  - explore with the family any barriers if certain actions have not been undertaken, and other options that may be utilised
  - discuss other service options if the needs of the child or family have changed
  - assess the progress towards the action steps in the case plan, and identify whether other key actions are required
  - review the progress of the child health passport, where the child is subject to a child protection order granting custody or guardianship to the chief executive
  - review the implementation of the child’s cultural support plan, where relevant
  - discuss the matters outlined in the Child Protection Act 1999, section 51X, which must be included in the review report
  - decide whether ongoing intervention will occur continue or whether to close the case - refer to Chapter 3, 4. Close an ongoing intervention case
- complete the review report in ICMS - refer to 5.6 Complete the review report.

As part of the case planning and review process, ensure that any information received via an Integrated Justice Information Strategy (IJIS) notification (Criminal court matter alert) email, or an IJIS Electronic transfer of court result email, is considered. For further information, refer to Chapter 2, 19. What if information is received via an Integrated Justice Information Strategy automated email alert? and the practice resource Receiving Integrated Justice Information Strategy email alert information.

**Complete the development of a revised case plan**

Once the decision is made that ongoing intervention will continue, Child Safety must undertake the following activities to develop a new case plan:

- complete the child strengths and needs assessment - refer to 5.7 Re-assess the child’s strengths and needs
- complete the parental strengths and needs assessment, if required - refer to 5.8 Re-assess the parental strengths and needs
• meet with the child, family and other significant people, including an independent person, where relevant to develop a revised case plan, in accordance with 5.9 Develop and endorse the revised case plan.

Where relevant, refer to the Practice guide: The assessment of harm and risk of harm.

Practice panels
A practice panel can occur at critical decision making points and will be held prior to any child protection order expiring, regardless of whether another order, extension, revocation or variation is being recommended to DCPL.

In relation to a permanency decision, the case must be referred to a practice panel, where consideration is being given to recommending an application be made to the Childrens Court for a child protection order, in accordance with 5.4 Refer the case to a practice panel, and Chapter 3, 2. Decide the type of child protection order, if required.

5.2 Re-assess the level of family risk for ‘in home’ cases

When to complete a family risk re-evaluation
The family risk re-evaluation is to be completed as part of the review of a case plan for a child, where the child is living at home and subject to:
• intervention with parental agreement
• directive or supervision orders
• custody or guardianship order, and the child has returned home as part of the reunification process.

The family risk re-evaluation is also to be completed as part of the review of a support plan for a child subject to a support service case, refer to Chapter 7, 2.1 Support Service Case.

If a child is in care, complete the family reunification assessment refer to 5.3 Assess whether reunification can occur.

As part of the review process, it is necessary to assess the ongoing risk to the child, which includes the completion of the family risk re-evaluation. The purpose of the family risk re-evaluation is to guide the decision about:
• whether to continue ongoing intervention or close the case for a child who remains in the home
• the current level of risk
• the new level of contact required with the child and family.

The family risk re-evaluation re-assesses the risk level in a household by considering the progress with the case plan and any changes in the family’s environment and behaviour during its implementation.

Complete the family risk re-evaluation
To complete the family risk re-evaluation:
• complete one family risk re-evaluation for the relevant family or household
• choose the ‘primary parent’, in accordance with 1.3 Assess the parental strengths and needs
• using all known information, application of the SDM definitions and your professional judgement, select the best response for each of the ten items
• determine whether a policy or discretionary override is required, as outlined below
• record the family risk re-evaluation in ICMS and submit it to the senior team leader for approval
• compare the current risk level with the outcome of the preceding family risk evaluation or family risk re-evaluation and where the risk level has increased, review the appropriateness of the current intervention and consider the following:
  • whether a safety assessment is required due to a change in family circumstances
  • what factors are preventing the effective implementation of the case plan
  • whether the current type of ongoing intervention is still the most appropriate type of intervention
  • whether additional services are required to support the family
  • whether the current service provider is culturally appropriate
  • whether the family is committed to implementing the case plan.

For further information and definitions, refer to SDM: Family risk re-evaluation.

Policy and discretionary overrides

A policy or discretionary override will either increase or decrease the risk level scored in the family risk re-evaluation.

Select a policy override, which changes the risk level to ‘high’, regardless of the score, in any of the following situations:
• sexual abuse is substantiated and the person responsible for this abuse is likely to have access to the child
• there is a non-accidental injury to a child under age three years
• a parent has caused severe non-accidental injury to a child
• a parent has caused the death of a child due to abuse or neglect.

A policy override is only used if one of the above situations has occurred since the initial family risk evaluation or the previous family risk re-evaluation. If the event has occurred at anytime prior to that, do not use a policy override, consider a discretionary override if required.

Consider whether a discretionary override is applicable, to increase or decrease the risk level by one level, and:
• seek senior team leader approval for use of the discretionary override
• record the rationale for use of the discretionary override in ICMS
• record the ‘final risk level’
• record the ‘ongoing intervention decision’, either ‘case remains open’ or ‘case closed’
• submit the completed family risk re-evaluation to the senior team leader for approval.

5.3 **Assess whether reunification can occur**

**When to complete the family reunification assessment**

The family reunification assessment is completed:
• as part of every case plan review, when the case plan goal is reunification, and a child is in care and subject to a child protection order or interim order
• prior to any decision to reunify a child with their family.

The family reunification assessment is not used for children:
• on long-term child protection orders when a decision has been made for them to remain in a long-term stable care placement
• on assessment orders and placed in an care
• on a TCO and placed in care
• who are placed in care under a care agreement.

A family reunification assessment is necessary to determine whether ongoing case planning will focus on:
• returning the child home
• continuing concurrent planning for permanency with the family
• preparing for an alternative permanency option for the child.

The family reunification assessment specifies timeframes within which reunification must occur, before an alternative permanency option should be pursued. For children in care, preparation for an alternative permanency option will be intensified when:
• the risk level has remained ‘high’, and the child has been in a continuous period of care for 18 months from the date of the final order
• the contact has been rated as ‘fair’, ‘poor’ or ‘none’ and the child has been in care for 18 months from the date of the final order
• the household has been deemed ‘unsafe’ and the child has been in care for 18 months from the date of the final order.

The timeframes outlined above do not prevent a decision being made to pursue an alternative permanency option for the child at an earlier point of intervention by Child Safety. This decision will still be subject to ongoing case planning, implementation and review processes, in order to provide adequate evidence to the Children’s Court, in support of an application for a long-term child protection order.

The family reunification assessment assists in assessing the key areas for deciding reunification, which include assessing the family’s progress with the case plan, evaluating risk and re-assessing safety in the reunification household. The decision to return a child home must be based upon the sufficient achievement of case plan action steps, and the capacity to develop a
robust immediate safety plan with the family and safety and support network if an immediate harm indicator is identified.

The purpose of the family reunification assessment is to:

- re-assess risk in the household, assess parents’ progress and achievement towards case plan goals and actions, including the quantity and quality of parent-child contact
- assess safety, and the potential to develop an immediate safety plan with the family and safety and support network - for example, in circumstances where family contact is increasing or the child is returning home
- guide case planning to one of three permanency plan recommendations.

Prior to the decision to reunify a child with their parents, determine whether a parent, their partner or an adult member in the reunification household has a conviction for a serious criminal offence against a child – refer to 8. What if there are criminal matters to consider during reunification?

**Complete the family reunification assessment**

To complete the family reunification assessment:

- assess only one household per family reunification assessment, however, in circumstances where two families may be working towards the child living in their care, complete two separate family reunification assessments
- ensure all relevant information from a range of internal and external sources is available to inform the assessment
- meet and engage with the family and child, where age and developmentally appropriate, to inform the completion of the family reunification assessment
- explain the assessment process to the family to ensure that they understand what is required to achieve reunification and the expectations for parent-child contact, including the quantity, type and quality of the contact
- use information gathered in the current implementation period and refer to the definitions, to complete the assessment
- record the family reunification assessment in ICMS and submit it to the senior team leader for approval.

**The family reunification assessment sections**

A brief overview of each section is outlined below.

**Section A: family reunification re-evaluation**

This section scores and re-assesses the probability of future abuse and neglect incidents, based on the information gathered since the last review of the case plan. A reduced level of risk will be achieved when the family has made significant progress under the case plan. In this section, **always** use the risk level from the **initial** family risk evaluation that was completed during the investigation and assessment, or, if a subsequent investigation and assessment has been completed since the child entered care, use that risk level from that family risk evaluation.
Note: For a child who was the subject of a support service case prior to their birth, and who subsequently becomes subject to intervention with parental agreement or a child protection order and has no siblings, the default risk level will be ‘high’. Where the child has siblings, the default risk level will be that of the siblings.

**Section B: parent-child contact visit plan evaluation**

This section evaluates contact between the child and the parent, but not contact with other family members, and considers:

- the quality of the parent-child interaction
- the supervision status and location of the contact
- the type of contact
- the parents compliance with contact arrangements.

**Section C: reunification safety re-assessment**

Completion of this section guides both safety planning and case planning, and addresses the potential to develop an immediate safety plan in circumstances where family contact may be increasing or reunification is considered possible in the near future. Assessing the presence of acts of protection, family strengths, and resources will help determine whether safety interventions can be applied to control any immediate harm.

For siblings, there is ability to assess each child’s safety individually or as a group, and potential safety interventions may differ depending on the vulnerability of the child and individual circumstances.

In circumstances where an immediate safety plan is developed with the family and network, there is ability to attach it to the Family Reunification Assessment in ICMS.

Note: where an immediate safety plan is to be developed for an Aboriginal or Torres Strait Islander child, arrange for an independent person to help facilitate their participation in the safety plan, unless exceptions apply, refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children.

**Section D: permanency plan recommendation guidelines**

Complete this section for every child. It is based on the outcomes of the risk, contact and safety assessments in sections A-C and reunification is recommended when:

- risk has been reduced to an acceptable level
- the parents have complied with the arrangements for contact as outlined in the case plan, and the quality of the parent and child interaction has been positive
- the child is assessed to be ‘safe’ on return home or ‘safe with immediate safety plan’, and a robust immediate safety plan has been developed with the family and safety and support network to allow reunification to be considered.

Alternatively, reunification is not recommended when:

- the risk in the family remains high
- the parents have not complied with the arrangements for contact as outlined in the case plan
• the home is assessed as ‘unsafe’, with continued placement the only possible intervention to ensure the child’s safety.

Following completion of this section, one of three recommendations will be generated:
• reunification: is recommended, based on risk reduction, ‘good’ or ‘excellent’ progress with parent-child contact arrangements and a safe or ‘safe with immediate safety plan’ home environment
• continue concurrent planning: maintain the placement and continue reunification efforts with the assessed household while also working on the alternative permanency option
• prepare for alternative permanency option: this does not mean that the child will cease contact with their family, but will include intensified efforts to achieve relational, physical and legal permanency for the child.

When reunification is the recommendation, consider what type of intervention will best support the family and the reunification process.

**Section E: permanency plan recommendation summary**

This section records the permanency plan recommendation from section D. To complete section E:
• complete this section for each child
• complete additional summaries for each child if there are two or more children with different permanency plan recommendations in section D
• consider whether a discretionary override is required to change the final permanency plan recommendation for the child - if required, record the rationale for the decision and seek senior team leader approval
• record the final permanency plan recommendation
• where an override recommends reunification, review the outcome of the safety assessment, and where required, ensure a robust immediate safety plan is in place prior to returning the child home - refer to 5.1 Complete the review and revision process
• if the permanency decision is to prepare for an alternative permanency option, select one of the following permanency goals:
  • long-term guardianship to a relative
  • long-term guardianship to another suitable person
  • long-term guardianship to the chief executive
  • permanent care order
  • parenting order about with whom the child should live, through the Family Court of Australia
  • adoption (*Adoption Act 2009*)
  • other.

Referring the matter to a practice panel will guide the determination to pursue an alternative permanency option for a child. The maximum duration for a short-term child protection custody or guardianship order cannot extend beyond a total continual period of two years, unless reunification is in the child’s best interest and is reasonably achievable within a longer stated
period of time *(Child Protection Act 1999, section 62(2C) (a) and (b)). When it is determined that another type of child protection order is the most appropriate permanency option, consult with the OCFOS officer in regard to making a recommendation to DCPL. Where the child is Aboriginal or Torres Strait Islander, arrange for an independent person to help facilitate the child’s and family’s participation in the decision to refer the matter to DCPL, unless exceptions apply, refer 10.1 Decision-making about Aboriginal and Torres Strait Islander children.

Where the child is currently placed with a kinship carer, consult with the senior practitioner, senior team leader and OCFOS officer to determine whether an application to the Family Court of Australia (by the kinship carer) may be an appropriate option. The OCFOS officer will consult with DCPL in relation to this matter.

**Section F: current case status**

Complete this section for every child. It records one of the following decisions about ongoing intervention:

- case remains open with at least one child in care future family reunification assessments required
- all children are being reunified and case remains open for ongoing intervention – future safety assessment and family risk re-evaluations required prior to closing
- prepare for alternative permanency option – future child strengths and needs assessments required
- other - specify, for example, seeking an order from the Family Court of Australia.

For further information and reunification guidelines refer to SDM: Family reunification assessment.

**Determine the preferred permanency option**

When the family reunification assessment recommends that Child Safety prepare for an alternative permanency option and a long-term guardianship order to a family member, other suitable person or the chief executive, or a permanent care order is to be recommended, ensure that:

- efforts have been made to locate both parents
- intervention has occurred to assist the family towards resuming the care of the child in a timely way - an exception to this is where there is no parent available or the parent demonstrates an inability to meet the child's protection and care needs, for example, due to a significant intellectual disability
- the child's need for physical, relational and legal permanency will be best met in the long-term by the order
- the child's connection to culture, community and country will be supported and met by the order
- the revised case plan, submitted to the Childrens Court upon the application for an order granting long-term guardianship to a suitable person, incorporates key items specific to the proposed order - refer to 3.3 Develop key items in the case plan - application for long-
term guardianship to a suitable person and 3.4 Develop key items in the case plan – permanent care order

- the ongoing support needs of the child and the proposed long-term guardian are assessed and documented in the revised case plan to be submitted to the Childrens Court, upon making an application for the order
- a practice panel has endorsed the decision to cease reunification and seek a long-term placement, or where consensus is not reached by panel members, the CSSC manager has made this decision - refer to 5.5 Refer the case to a practice panel.

For further information refer to Chapter 3, 2.6 Apply for a long-term guardianship order.

5.4 Refer the case to a practice panel

The purpose of the practice panel is to provide a consistent, collaborative approach to decision-making, which allows consideration of different perspectives to support the application of objective, balanced assessment and professional rigour to all critical decision-making for a child.

A practice panel must be convened:

- prior to the finalising any permanency option for a child
- prior to any child protection order expiring, regardless of whether another order, extension, revocation or variation is being recommended to DCPL
- in cases where reunification is being considered or planned.

Practice panel composition

The composition of a practice panel is determined by the purpose of the panel or what type of decision is required. As a general guide practice panel members should include:

- a manager (where delegated authority is required for any decisions made)
- a senior practitioner
- the senior team leader responsible for the child
- the CSO responsible for the child
- a CSSO or other Child Safety officers working with the child
- a cultural practice advisor (for all Aboriginal and Torres Strait Islander children)
- an Aboriginal or Torres Strait Islander person, independent of the case, when making permanency decisions for an Aboriginal or Torres Strait Islander child
- where appropriate, workers from other government services or community agencies who are working with the child and family
- where appropriate, a professional with specialist knowledge or expertise, for example, disability, domestic and family violence, drug and alcohol, mental health.
- a critical friend – an independent Child Safety or other government service or community agency third party, who has had no previous involvement in decision making regarding the child. An Indigenous critical friend is strongly recommended for Aboriginal and Torres Strait Islander children.

For Aboriginal and Torres Strait Islander children there should be adequate cultural representation during practice panel discussions.
It is considered best practice to separate legal advice from practice decisions about the best interests of a child. The practice panel process is tasked with applying the best child protection practice expertise of the group to decision making. The application of a legal framework at this time could steer the conversation in a certain way or limit thinking, as well as compromise legal privilege.

Legal advice provided by legally qualified OCFOS officers is subject to legal privilege (confidential and protected from disclosure). This privilege is waived if any third party is present when the advice is given. A third party is anyone not employed by Child Safety.

OCFOS staff may attend a practice panels as an observers to inform themselves about a matter, but it is not a forum for their contribution. Following the discussion within the child protection framework and after any external parties have exited, OCFOS staff may provide legal advice about whether there is sufficient evidence to support the assessed course of action and what more could be done to secure evidence to support the case direction.

Convening a practice panel
Generally, a senior practitioner will facilitate a practice panel. In circumstances where the child is Aboriginal or Torres Strait Islander, consideration should be given to having the panel convened by a cultural practice advisor.

Documentation to inform practice panel discussions and record outcomes
The Practice panel record includes a ‘Collaborative Assessment and Planning (CAP) Framework’ section to organise case information to be presented to the practice panel. The record is begun by the CSO and the senior team leader who have case responsibility for the child, and will include the views of child and family where possible. This task occurs prior to the practice panel and the information is provided to panel members prior to the panel meeting.

Other useful documents that could be considered by practice panel members may include:
- a genogram
- other framework tools that have been completed with the child and/or family such as the CAP tool, Three Houses, Family Roadmap, Future House or Safety House
- external assessments in relation to medical needs, educational or psychological needs
- the child's strengths and needs and if applicable, the parental strengths and needs assessment
- where applicable the family risk evaluation, family risk re-evaluation and the family reunification assessment.

The Practice panel record is also used to record a summary of the key points of discussion at the practice panel, the decision or recommendation made by the panel and any action steps required.

Arrange for the panel to convene
When the panel membership is decided:
- schedule the practice panel meeting
- invite all relevant participants
• provide the relevant documentation (as outlined above) to panel members, prior to the panel convening.

Note: Allow adequate time for panel members to consider all information provided, prior to the panel convening.

**Conduct the practice panel**

Panel members will consider the information outlined in the documents provided.

Minutes of the practice panel and the decisions made must be recorded, usually by the CSO with case responsibility. In some circumstances, an administration officer may record the minutes.

Practice panel members will reach decisions and recommendations by agreement and must be satisfied that the decision or recommendation made by the panel will address the child’s specific safety and permanency needs. A further panel meeting may need to be convened in exceptional circumstances where critical safety factors are not able to be agreed upon.

For further information refer to the practice resource Practice Panel Guide.

**Refer to the CSSC manager where consensus cannot be reached**

If consensus about the final decision or recommendation cannot be reached by panel members, the matter will be referred to the CSSC manager. As the delegated officer, the CSSC manager will consider the information discussed during the meeting, the views of panel members as noted in the minutes and make a final decision.

**Complete a case plan review and revise the case plan**

Following the practice panel meeting, complete a review of the child’s case plan, which will include:

• holding discussions with the child, parents, carers and other parties involved in the review, about the decisions of the panel (or the CSSC manager)

• finalising the review report and the revised case plan.

For further information, refer to 5. Review and revise the case plan.

**Record keeping**

Attach all documentation associated with the practice panel to the relevant event in ICMS.

**5.5 Complete the review report**

The review report documents the formal review of a case plan and provides evidence that the review of the case plan has occurred through a participative process.

**Record a review report**

To complete the review report, consider the key areas of assessment, including the progress of the case plan and other matters that must be addressed in the revised case plan such as:

• the case plan goal and actions from the previous case plan that have been achieved or are yet to be achieved
• any changes to the goals in the revised case plan
• any services provided to the child under the previous case plan or the revised case plan
• the extent to which the care and contact arrangements under the previous case plan have met the child’s needs
• the extent to which arrangements for maintaining and supporting the child’s cultural identity have been met
• who participated in the review, how they participated and whether a family group meeting was held and who attended.

Record in the review report how the child’s need for long-term stable care will be met in the revised case plan. When the child is placed in care under a child protection order granting custody or short-term guardianship, the report must state:
• the risks and benefits of the child to the care of parents
• whether there is a risk that the child will not return to live with the parents within a stated timeframe (appropriate to the child’s age)
• the plans that have been made for permanency for the child.

The plan for permanency may involve:
• arranging for the child to live with a member of the child’s family, or another suitable person, under a child protection order granting long-term guardianship of the child
• arrangements for the child’s adoption under the Adoption Act 2009
• for a child fifteen years and over, arrangements for the child’s transition to adulthood through independent living.

Record the review report in ICMS and submit it to the senior team leader for approval.

For a review regarding an Aboriginal or Torres Strait Islander child, record whether an independent person helped the child and family participate in the review of the case plan in the ‘Independent entity’ form in ICMS.

When a child is subject to a long-term guardianship order to a suitable person, there is a different review report - ‘Long-term guardianship to a suitable person - Contact and review report’. For further information refer to 5.10 Long-term guardianship to a suitable person - case plan review.

5.6 Re-assess the child’s strengths and needs

Prior to revising the case plan for a child, when the case will remain open for ongoing intervention, re-assess the child’s strength and needs. The child strengths and needs assessment will assist in identifying the child’s strengths and the needs that must be addressed in the case plan to ensure their safety, belonging and wellbeing. The purpose of this assessment is to:
• provide current information about the child’s strengths and needs and identify changes in the child’s functioning
evaluate the effectiveness of the intervention and services provided to the child by Child Safety
identify whether there are specific areas of Child Safety intervention that need to be amended, or require further attention, in order to meet the child’s protection and care needs.

For further information about completing a child’s strengths and needs assessment refer to 1.2 Assess the child’s strengths and needs.

When a child is subject to a long-term guardianship order to a suitable person, there is no requirement to complete the CSNA as part of the case plan review process.

5.7 Re-assess the parental strengths and needs

Prior to revising the case plan for a child, when the case will remain open for ongoing intervention, re-assess the parental strength and needs, unless the child is subject to a custody or guardianship order and the case plan goal is not reunification. Re-assessing the parental strength and needs:

- provides current information about the parental strengths and needs
- evaluates the effectiveness of Child Safety intervention to date
- identifies the three priority parental needs to be addressed in order to meet the child’s protection and care needs.

For further information about completing a parental strength and needs assessment refer to 1.3 Assess the parental strengths and needs.

5.8 Develop and endorse the revised case plan

A revised case plan is completed following:
- the completion of the case plan review
- the decision to continue ongoing intervention with the child and family
- completion of the child and parental strength and needs assessments.

Develop a revised case plan

The revised case plan will record the goal, outcomes and actions to ensure a child’s protection and care needs and will be informed by current assessments including:
- the family risk re-evaluation or a family reunification assessment
- child and parental strength and needs assessments
- the review report
- the case plan goal for the next implementation period - this may be the same goal or a revised goal
- outcomes and actions for the next implementation period including:
  - outcomes that are still relevant but have not yet been achieved
  - new or additional outcomes and actions identified in the review of the existing case plan
• new outcomes and actions identified as a result of decisions about the case plan
direction, for example, the decision to apply for a new child protection order or to
extend an existing order
• actions to plan for an alternative permanency option for the child when reunification is
unlikely - depending on the age of the child, options may include the child’s adoption
under the Adoption Act 2009 or the child’s transition to independent living
• ongoing supports to be provided to the child and their long-term guardian, where
applicable - refer to Chapter 3, 1. What if a suitable person has long-term guardianship?
• any revised care and contact arrangements including compliance with the child
placement principle
• arrangements for maintaining and supporting the child’s cultural identity as outlined in the
cultural support plan
• services to be provided to the child and family
• participants in the case plan review, how they participated and whether a family group
meeting was held.

Endorse the case plan
Record the new case plan for a child on the approved case plan form in ICMS and submit it to
the senior team leader or senior practitioner for endorsement within 10 business days unless t
Record the new case plan for a child on the approved case plan form in ICMS and submit it to
the team leader or senior practitioner for endorsement within 10 business days unless the plan
is clearly impracticable or is not in the child’s best interests.
When the plan is not endorsed, amend the plan to the extent necessary to ensure that it is
workable and consistent with a child’s best interests.

Distribute the revised case plan to:
• the child, when age appropriate
• the child’s parents
• a suitable person granted the long-term guardianship of the child, where applicable
• other participants in the review of the case plan, such as, the child’s carer or licensed
care service.

For further information refer to 3.5 Record, endorse and distribute the case plan.

When the case is to be closed
When the decision is made to close a case following the review process, refer to Chapter 3.
Ongoing intervention.

5.9 Long-term guardianship to a suitable person - case plan review
When a child has a long-term guardian, Child Safety must contact the child and long-term
guardian every 12 months to give the child an opportunity to request a review of the case plan.
For further information about the contact requirements refer to Chapter 3, 1. What if a suitable
person has long-term guardianship?
Decide whether to review the case plan

A review of the case plan is required:

- when requested by the child or the long-term guardian at the 12 monthly contact, where Child Safety agrees to the review
- at any other time when requested by the child or the long-term guardian, where Child Safety agrees to the review
- when Child Safety considers it necessary to review the case plan, without it being requested.

The child’s case plan will be reviewed regardless of whether it has been requested by the long-term guardian or child, in any of the following circumstances:

- the long-term guardian is not fulfilling their obligations to tell the child’s parents where the child is living, give the parents information about the child’s care and is not providing opportunity for contact between the child, parents, family members and other significant people (*Child Protection Act 1999*, section 80)
- a review is required to assess the current care arrangement and appropriateness of the order to ensure it is meeting the child’s care and protection needs
- an investigation and assessment regarding the long-term guardian’s care of the child has been finalised and the outcome is ‘substantiated - ongoing intervention continues’ and the child is at an unacceptable risk of harm
- Child Safety is notified that the child is no longer residing in the direct care of the long-term guardian
- the long-term guardian or the child requires time-limited, intensive case work from Child Safety. For further information, refer to the practice resource *Program of supports - long-term guardians*
- the long-term guardian makes a request for the high supports needs allowance or the high supports needs allowance has continued beyond 12 months. For further information, refer to the practice resource *Program of supports - long-term guardians*
- the long-term guardian or child is in receipt of child related costs payments that have been ongoing for more than 12 months. For further information, refer to the practice resource *Program of supports - long-term guardians*.

A case plan review may also be considered when an investigation and assessment regarding the long-term guardians care of the child has an outcome of 'substantiated - ongoing intervention continues' and it has been assessed that the child is **not** at unacceptable risk of harm.

When a child is subject to a long-term guardianship order to a suitable person, the child strengths and needs and parental strengths and needs assessment are not completed.

**Exceptions**

A formal review of the case plan may not be required when the child or long-term guardian request additional support and this can be managed via case work. These circumstances include, but are not limited to requests for:

- one-off requests for child related costs
- referrals to other government and non-government agencies.
In these circumstances, financial and practical support can be assessed and approved by Child Safety without a formal case plan review. For further information, refer to the practice resource Program of supports - long-term guardians.

**Decision by Child Safety not to review the case plan**

In exceptional circumstances, Child Safety may decide not to review the case plan when it has been requested by a child or long-term guardian. For example, a case plan review may not be considered necessary when a review has recently been conducted and the child’s circumstances have not significantly changed since the revised case plan was finalised.

The decision not to review the child’s case plan constitutes a ‘reviewable decision’ (*Child Protection Act 1999*, schedule 2). When the decision is made not to review the child’s case plan:

- inform the child and long-term guardian of the reason for the decision and how to have the decision reviewed
- ensure the child’s understanding of the review process
- provide written notice of the decision, as soon as practicable after the decision is made by completing the *Letter re: Decision not to review the case plan* for the long-term guardian, and writing a letter specifically for the child, based on their age and ability to understand. Attach a copy of each written notice to the relevant event in ICMS.

The senior team leader or CSSC manager is responsible for ensuring compliance with the legislative requirement to provide written notice of the decision to not review the child’s case plan.

**Decide the process and complete the case plan review**

Determine the process for the case plan review on a case-by-case basis and in the best interests of the child. Undertake the review process as outlined in 5. Review and revise the case plan.

Ensure the child and the long-term guardian are provided with an opportunity to participate in a case plan review. However, it is not a requirement that the child and the long-term guardian participate in the review. Where considered appropriate to the circumstances, convene a family group meeting to review the case plan or to develop a new one.

**Complete the contact and review report**

Where a case plan review occurs as part of the contact with the child and long-term guardian, complete the relevant sections of the ‘Long-term guardianship to a suitable person - Contact and review report’ in ICMS and:

- complete the ‘Contact with child’ section
- indicate that the review has been requested and approved by Child Safety - this will automatically generate the review report within the form
- complete the report and submit it to the senior team leader for approval.

If there is no request to review the child’s case plan or Child Safety does not agree to a review, in the ‘Contact and review report’ in ICMS:
- complete the ‘Contact with child’ section
- indicate that a review was not requested or approved by Child Safety - the review report will not be generated
- submit the report to the senior team leader for approval.

When the child’s case plan is not reviewed every 12 months, the existing ongoing intervention event in ICMS will remain open.

**Develop the revised case plan**

Where a decision is made to revise the case plan, meet with the relevant people and complete the ‘Long-term guardianship to a suitable person - Case plan’. This includes:
- the case plan goal - this may be the same goal or a revised goal, for example, it may change from ‘long-term out-of-home care’ to ‘young person lives independently’
- the support needs and actions required to ensure the child’s protection and care needs including:
  - the outstanding support needs and actions that are still relevant and have not yet been achieved
  - new support needs and actions identified in the review of the existing case plan or as a result of decisions about the case plan direction
  - ongoing supports to be provided to the child and their long-term guardian
  - services to be provided to the child and the long-term guardian
  - any revised care and contact arrangements
  - arrangements for maintaining and supporting the child’s cultural identity as outlined in the cultural support plan
  - the participants in the case plan review, how they participated and whether a family group meeting was held.

For a child subject to a long-term guardianship order to a suitable person, an education support plan or a child health passport is not required.

**5.10 Permanent care order - case plan review**

The case plan for a child subject to a permanent care order can be reviewed in the following circumstances:
- when requested by a child or the permanent guardian
- as an outcome of a complaint made about the care of the child by the permanent guardian
- where the child is no longer in the direct care of the permanent guardian and decisions about the child’s need for protection are required.

When a child subject to a permanent care order **no longer resides** in the direct care of their guardian, Child Safety must:
• assess the child’s protection and care needs and wellbeing
• take any further action that is required, in accordance with the Child Protection Act 1999, section 80A(3).

Where a case plan review is to occur:
• make contact with the child and the permanent guardian to gather information about the current circumstances and assess the child’s current circumstances
• arrange for a meeting to review the child’s case plan
• undertake a review of the case plan with the child and permanent guardian to determine if other action is required, such as assisting to resolve current issues, revoking the current order, or revoking the current order and making another order
• record the outcomes of the meeting and take relevant actions.

What ifs - responding to specific case planning

1. What if an initial case plan is developed without a family group meeting?

If it was not possible to convene a family group meeting or if participants were unable to reach agreement, a case plan can be developed by Child Safety, in accordance with the Child Protection Act 1999, section 51(S). In these circumstances, obtain the views of the following people:
• the child, unless it would be inappropriate because of their age or ability to understand
• the child’s parents
• other members of the child’s family group who are considered likely to make a useful contribution
• other significant people for the child for example, a foster carer
• any legal representative for the child
• a relevant service provider
• anyone else considered likely to make a useful contribution to the plan.

When the case plan is being developed for an Aboriginal or Torres Strait Islander child:
• arrange for an independent person to help facilitate their participation in the decision-making process - refer to 10.1 Decision-making about Aboriginal and Torres Strait Islander children
• record whether an independent person helped the child and family participate in decision-making about the case plan in the ‘Independent entity’ form in ICMS.

Prepare a case plan that best meets the child’s protection and care needs taking into consideration:
• the views of the participants
• information obtained through the assessment process about risks to the child
• the child and parental strength and needs assessments.

Record the case plan, including the cultural support plan where relevant, in ICMS and submit it to the senior team leader for endorsement within 10 business days of completion.

Record why a family group meeting was not held

Where the case plan has been developed without a family group meeting and an application for a child protection order is made, the court must be provided with evidence in affidavit material about why the case plan was developed in this way. The court must be satisfied that it was not possible to convene a meeting within the terms of the Child Protection Act 1999, section 51S(2) and that all steps were taken by Child Safety to convene a meeting in compliance with the Child Protection Act 1999, chapter 2, part 3A. A lack of time and resources will not be sufficient criteria to meet this threshold.

2. What if parents are unwilling to engage in case planning?

In circumstances where parents resist involvement or try to disrupt case planning and review processes, ongoing attempts should be made to encourage their involvement. To help engage the parent:

• communicate openly and clearly in a respectful, empathic and genuine manner
• consider whether there are cultural considerations associated with how and where meetings are held
• communicate a commitment to achieving a positive outcome for the child and the parent
• acknowledge the involuntary nature of Child Safety’s involvement, where appropriate
• explain the purpose of the case plan and emphasise the importance of the parents involvement
• for case planning regarding an Aboriginal or Torres Strait Islander child, establish whether the family would prefer the Family Participation Program to convene a family-led decision-making process, where possible
• identify and address any fears the parents may have.

Where this is not successful, consider engaging the parent through:

• a support person, who will assist the parents in the process
• the assistance of the cultural practice advisor, a community elder or relevant support agency, for an Aboriginal or Torres Strait Islander child
• a community agency worker, who may be able to assist Child Safety by gathering information to inform the case planning or review process.

When parents refuse to be involved in the process, the parental strengths and needs assessment will still be completed by gathering information from the following sources:

• other people who know the parents
• people nominated by the parents, where possible
• Child Safety records about any previous contact with the parents.
Do not preclude a parent from the case planning process because they refuse to engage in the assessment of their strengths and needs.

3. What if people are excluded from attending and participating in a family group meeting?

Under the Child Protection Act 1999, section 51L(4) and 51W, a person who should be given the opportunity to attend the family group meeting, may be excluded by the convenor, when the person’s participation and attendance:

- would not be in a child’s best interests
- would be contrary to the purposes of the meeting.

Reasons to exclude a person may include:

- a risk of harm to the child or another person attending the family group meeting
- a history of domestic violence where a participant may be too intimidated to express their views if the perpetrator is present
- a participant has a mental illness or substance misuse issues, that will disrupt the family group meeting so that it will be unable to function
- the presence of a participant is likely to pose a psychological and emotional risk to the child’s wellbeing and ability to participate in the meeting.

An independent person will attend, with the child’s and family’s consent, to help facilitate their participation in the decision-making process, unless their participation is likely to have a significant adverse effect on the child or someone else’s safety or emotional or psychological wellbeing (Child Protection Act 1999, s. 51W)

The decision to exclude should be exercised rarely, and only after strategies to avoid excluding have been considered in consultation with the senior team leader and the CSO with case responsibility. The convenor cannot exclude the child, a CSO or a child’s legal representative.

4. What if the case plan cannot be endorsed?

If the case plan developed is considered impractical or not in the child’s best interests (Child Protection Act 1999, section 51R) the case plan will not be endorsed. In this circumstance, either:

- reconvene the family group meeting and involve people from the previous meeting
- hold another family group meeting, involving a different mix of people from those involved in the meeting that developed the original plan
- amend the original case plan in ICMS and submit it to the senior team leader for endorsement.

Amend the case plan

If a case plan cannot be endorsed, it can be amended under the following conditions:

- within 10 business days after the case planning meeting at which the original plan was developed
• only to the extent necessary to ensure the case plan is practicable and in the child’s best interests
• after consultation with the convenor if the family group meeting was convened by a private convenor.

If the decision is made to amend the case plan, provide each person who was at the family group meeting at which the original plan was developed, written notice of the amendment and the reasons for the amendment.

It is the role of Child Safety to make decisions about amendments to a case plan. When case plans are submitted to the Childrens Court, it is the role of the court to ensure the case plan is appropriate for meeting the child’s protection and care needs. When making this decision, it is not relevant whether all persons who participated in the development or revision of the case plan have agreed with the case plan (Child Protection Act 1999, section 59 (1)(b)(i) and (3)).

5. **What if an application for a child protection order is filed with the Childrens Court without a case plan?**

If an application for a child protection order must be made before a family group meeting has been held, file the application with the affidavit and other supporting evidence addressing the following:

• the attempts that have been made to develop or review the case plan
• the child’s assessed protection and care needs.

The court may then adjourn proceedings under the Child Protection Act 1999, section 67, and either:

• make an interim order granting temporary custody of the child to the chief executive or a suitable person who is a member of the child’s family
• make directions about a parents contact with the child
• order that a family group meeting be convened to develop the case plan and that the plan be filed in court (Child Protection Act 1999, section 68(1)(d)(i)).

Note: the court cannot make an interim order for a supervision order.

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

When a decision is made to apply for a child protection order granting long-term guardianship to a suitable person, the revised case plan must be submitted to the Childrens Court upon the application for the order, and must incorporate key items specific to the proposed order. For further information, refer to 3.3 Develop key items in the case plan - application for long-term guardianship to a suitable person.

6. **What if a reunification assessment is required when parents live in another jurisdiction?**

When requesting an assessment for the purpose of reunifying a child subject to a Queensland child protection order, with a parent who resides in another jurisdiction:
• ensure that the parent is aware of the intended assessment and is willing to participate in the assessment process
• undertake a non-urgent criminal and domestic violence history check of the parent and any other adult household member, if required - refer to Chapter 2, 2.7 Gather information from other sources
• undertake interstate child protection checks of the parent and any other adult household member, if required, in accordance with usual arrangements with Data Management Services
• contact the Interstate Liaison Officer (ILO) at Court Services and request a 'Reunification Assessment Request' template
• complete the 'Reunification Assessment Request' and provide appropriate supporting documentation, for example, medical and psychologist reports on the child and parent
• have the request signed by the CSO with case responsibility and the senior team leader
• fax or post all relevant documentation to the ILO at Court Services.

7. What if there is a change in the individuals residing in the family home?

When a child is deemed to be in need of protection and is the subject of ongoing intervention, the parents must be informed of requirements to notify Child Safety of any change in the adults or children who will be residing in the family home - refer to Chapter 3, 10. What if there is a change in the individuals residing in the family home?

8. What if there are criminal matters to consider during reunification?

Criminal matters and reunification

When a decision is made to consider the reunification of a child, the criminal history of the parent or parents must be considered. A thorough assessment should occur when reunifying a child to a household where a parent, their partner or an adult member in the reunification household has a conviction for a serious criminal offence against a child. This must occur prior to completing the initial family reunification assessment.

To undertake the criminal history check, refer to 1.1 Gather information about the child and family.

When Child Safety obtains information that any adult in the household has an alleged offence, charge or conviction that presents an unacceptable risk to a child’s safety, and one, or both, parents has no knowledge of the information, the CSO has a duty (Child Protection Act 1999, section 4 and 5) to inform the relevant parent or parents that Child Safety has concerns. Prior to this, the CSO will endeavour to speak to the adult alone and outline that information has been obtained and discuss the worries for the child’s safety. The person will be encouraged to provide relevant information to relevant household members. An exception is if the person is a reportable offender as the Child Protection (Offender Reporting and Offender Prohibition Order) Act 2004.
prohibits an authorised officer from telling the parent the exact details of the alleged offence, charge or the conviction.

When a person refuses to disclose their criminal history to a parent, the CSO may provide the parent with information regarding a person's criminal history, including offences, charges or conviction, if releasing this information is considered to be in the child's best interests, with the exception outlined above.

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

The assessment should be conducted in consultation with the senior practitioner and senior team leader and should cover the following areas to determine that reunification to the household will not pose a risk to the safety and wellbeing of the child:

- what knowledge, if any, the primary parent without a criminal history has of the other adult's conviction and their attitude to the concerns and that person having contact with the child
- the willingness, if any, of the adult with the criminal history to engage in an assessment process and disclose details of their conviction to the parent or parents
- the nature and circumstances of the offence, when it occurred, and any treatment or programs that the offender has undertaken and the success of such intervention
- whether a safety and support network can be established and a safety plan developed, to ensure the ongoing safety of the child should reunification to this household occur.

Following the assessment, the family reunification assessment should be completed and the information included in the case plan for the child.

If use of a discretionary override is warranted to change the permanency plan recommendation for the child from reunification to preparing for an alternative permanency option a senior team leader or senior practitioner needs to endorse the use of the override.

The CSSC manager must approve the decision to either:

- work towards reunification following the assessment
- reunify a child to a household where a parent, their partner or an adult household member has been convicted of any of the offences, as outlined in the Serious criminal offences resource.

Record the CSSC manager's approval in a case note titled ‘Case discussion: reunification decision’.
Resources

Forms and templates
- Assessment report - Long-term guardianship to a suitable person
- Casework audit tool
- Child strength and needs notes
- FGM invitation letter
- FGM referral
- Immediate safety plan
- Letter re: Decision not to review the case plan
- Parental strength and needs notes
- Practice panel record
- QPS - Non-urgent criminal and domestic violence history check request spreadsheet

Departmental resources
- Children and young people’s participation strategy
- Critical steps in case planning
- Developing the goal, outcomes and actions
- Family group meeting convenor handbook
- Finalise the strengths and needs assessment
- Listening, hearing and acting
- Physical and Cognitive Developmental Milestones
- Practice guide: The assessment of harm and risk of harm
- Practice paper: Family contact for children and young people in out-of-home care
- Practice paper: Permanency planning
- Practice paper: Working with Aboriginal and Torres Strait Islander people
- Practice paper: Working with people from culturally and linguistically diverse backgrounds
- Practice resource: Assessing the progress of the case plan
- Practice resource: Case planning - an overview
- Practice resource: Developing a cultural support plan for an Aboriginal or Torres Strait Islander child
- Practice resource: Participation of children and young people in decision-making
- Practice resource: Practice panel guide
- Practice resource: Practice panel guide update for OCFOS
- Practice resource: Program of supports – long-term guardians
- Practice resource: Receiving Integrated Justice Information Strategy email alert information
- Practice resource: Structured decision making - an overview
- Practice resource: Supporting parents who have an intellectual disability
- Practice resource: The child placement principle
- Practice resource: Working with the independent entity
- SDM: Child strengths and needs assessment
- SDM: Family reunification assessment
- SDM: Family risk re-evaluation
- SDM: Parental strengths and needs assessment
- Structured Decision Making Policy and Procedures Manual
- Serious criminal offences
- Statutory delegations
- Strengths and needs interviewing questions
- The case planning process

External resources
- Fact sheet: 10.1 Attachment
- Fact sheet: 10.2 Infant and Toddler Mental Health Emotional Risk Indicators
- Interpreter services