# 15 Child protection services

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This chapter reports on:

* *child protection services —* functions of government that receive and assess allegations of child abuse and neglect, and/or harm to children and young people, provide and refer clients to family support and other relevant services, and intervene to protect children
* *out-of-home care services —* care for children placed away from their primary caregivers for protective or other family welfare reasons
* *intensive family support services —* specialist services that aim to prevent the imminent separation of children from their primary caregivers as a result of child protection concerns and to reunify families where separation has already occurred. (Performance data for intensive family support services are not yet available, and reporting for intensive family support services is limited to expenditure data and information on the numbers of children commencing intensive family support services)
* *family support services —* activities associated with the provision of lower level (that is, non-intensive) services to families in need, including identification and assessment of family needs, provision of support and diversionary services, some counselling and active linking and referrals to support networks. These services are typically delivered via voluntary arrangements (as distinct from court orders) between the relevant agency and family. (Performance data for family support services are not yet available, and reporting for family support services is limited to expenditure data).

Improvements to the reporting of child protection services in this edition include:

* data now reported for six jurisdictions compared with five previously for the ‘children with current documented case plans’ indicator
* an increase in the comparability of activity group data with an extra jurisdiction now reporting on children commencing, rather than receiving, services
* an increase in the comparability of expenditure with two jurisdictions increasing inclusions
* reporting an unknown Indigenous status category for lengthier historical data series reporting of children in notifications, investigations and substantiations and children on care and protection orders.

## 15.1 Profile of child protection services

### Service overview

#### Child protection services

Child protection services are provided to protect children and young people aged   
0–17 years who are at risk of harm within their families, or whose families do not have the capacity to protect them. These services include:

* receiving and responding to reports of concern about children and young people, including investigation and assessment where appropriate
* providing support services (directly or through referral) to strengthen the capacity of families to care safely for children
* initiating intervention where necessary, including applying for a care and protection order through a court and, in some situations, placing children or young people in out-of-home care to secure their safety
* ensuring the ongoing safety of children and young people by working with families to resolve protective concerns
* working with families to reunite children, who were removed for safety reasons, with their parents as soon as possible (in some jurisdictions, restoration may occur in voluntary placements as well)
* securing permanent out-of-home care when it is determined that a child is unable to be returned to the care of his or her parents, and working with young people to identify alternative supported living arrangements where family reunification is not possible.

Research suggests that children and families who come into contact with the child protection system often share common social and demographic characteristics. Families with a history of domestic violence, alcohol and substance abuse, psychiatric disability, and families with low incomes or that are reliant on pensions and benefits are over‑represented in the families that come into contact with the child protection system (Department of Human Services 2002; The Allen Consulting Group 2008).

##### Child protection concerns and Aboriginal and Torres Strait Islander communities

Studies have highlighted the high incidence of child abuse and neglect within some Aboriginal and Torres Strait Islander communities, compared with non-Indigenous communities. Aboriginal and Torres Strait Islander families across Australia have been found to experience higher levels of violence, compared with non-Indigenous families (AIHW 2006). The final report of the NT Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse (2007) identified child sexual abuse as a significant issue for many of the remote NT Aboriginal communities consulted as part of the Inquiry. The final report of the WA Inquiry into Response by Government Agencies to Complaints of Family Violence and Child Abuse in Aboriginal Communities (Gordon Report 2002) also found high levels of violence and child abuse within Aboriginal communities in WA. Aboriginal and Torres Strait Islander children have higher rates of hospitalisations due to injury, higher rates of injury mortality and more frequent contact with child protection and youth justice systems than non-Indigenous children (AIHW 2014a).

The Report of the Board of Inquiry into the Child Protection System in the NT (2010) *Growing them strong, together* also observed the presence of multiple risk factors in Aboriginal communities, including lack of adequate housing, financial security and education. However, Aboriginal communities also possessed protective factors that can safeguard children and families from psychological distress, such as spirituality and connection to land, family and culture (Bamblett, Bath and Roseby 2010).

#### Out-of-home care services

Out-of-home care services provide care for children and young people aged   
0–17 years who are placed away from their parents or family home for reasons of safety or family crisis. These reasons include abuse, neglect or harm, illness of a parent and/or the inability of parents to provide adequate care. Placements may be voluntary or made in conjunction with care and protection orders.

Out-of-home care services comprise home-based care (for example, foster care, care with a child’s extended family or other home-based arrangements), facility‑based care (for example, community residential care) or independent living (which is often intensively supported) as a transition to full independence or supported placements. Across jurisdictions, there has been a shift away from the use of facility-based (or residential) care towards home-based care such as foster care and relative/kinship care.

#### Intensive family support services

Intensive family support services are an alternative to the removal of a child from his or her home for child protection reasons (box 15.1).

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| Box 15.1 Intensive family support services |
| Intensive family support services are specialist services that aim to:   * prevent the imminent separation of children from their primary caregivers as a result of child protection concerns * reunify families where separation has already occurred.   Intensive family support services differ from other types of child protection and family support services referred to in this chapter, in that they:   * are funded or established explicitly to prevent the separation of, or to reunify, families * provide a range of services as part of an integrated strategy focusing on improving family functioning and skills, rather than providing a single type of service * are intensive in nature, averaging at least four hours of service provision per week for a specified short term period (usually less than six months) * generally respond to referrals from a child protection service.   Intensive family support services may use some or all of the following strategies: assessment and case planning; parent education and skill development; individual and family counselling; drug and alcohol counselling and domestic and family violence support; anger management; respite and emergency care; practical and financial support; mediation, brokerage and referral services; and training in problem solving.  Child protection treatment and support services  A complementary suite of services, intended for future reporting, are known as child protection treatment and support services. These services target at-risk families where there are concerns about the safety and wellbeing of children. They may be less intensive in nature and focus on services that strengthen family relationships in response to concerns about the welfare of a child and may focus on either early intervention or reunification support. Child protection treatment and support services include educational services, clinical services including counselling, group work and other therapeutic interventions, and domestic violence services.  State and Territory governments, with the Australian Institute of Health and Welfare (AIHW), are considering options to implement a national data collection for child protection treatment and support services. |
| *Source*: AIHW (unpublished). |
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#### Family support services

Family support services are activities typically associated with the provision of lower level (that is, non-intensive) services to families in need, including identification and assessment of family needs, provision of support and diversionary services, some counselling, and active linking and referrals to support networks. These types of services are funded by government but can be delivered by a child protection agency or a non‑government organisation. This suite of services does not typically involve planned follow-up by the applicable child protection agency after initial service referral or delivery. These types of services are delivered via voluntary arrangements (as distinct from court orders) between the agency and family.

This Report includes expenditure information for family support services (table 15A.1). Corresponding family support service activity data (for example, numbers of clients or numbers of referrals) are not yet available nationally. The Steering Committee considers that it is important to develop a data collection to quantify the extent and effectiveness of family support service activity.

### Roles and responsibilities

State and Territory governments fund child protection, out-of-home care, family support (including intensive family support) and other relevant services (box 15.2 identifies State and Territory government departments responsible for these services during 2013-14). These services may be delivered by the government, non‑government organisations and, in some cases, by for-profit providers. Child protection services investigate and assess reports, provide or refer families to support services, and intervene where necessary (including making court applications when an order is required to protect a child, and placing children in out-of-home care).

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| Box 15.2 Government agencies responsible for child protection and out-of-home care services, 2013-14 | |
| NSW | Department of Family and Community Services |
| Vic | Department of Human Services |
| Qld | Department of Communities, Child Safety and Disability Services |
| WA | Department for Child Protection and Family Support |
| SA | Department for Education and Child Development |
| Tas | Department of Health and Human Services |
| ACT | Community Services Directorate |
| NT | Department of Children and Families |
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Other areas of government also have roles in child protection and provide services for children who have come into contact with relevant departments for protective reasons. These include:

* education and child care services, which in some jurisdictions have mandatory reporting responsibilities and conduct education on protective behaviours
* health services and mental health services, which support the assessment of child protection matters and deliver general medical and dental services as well as therapeutic, counselling and other services
* police, which investigate serious allegations of child abuse and neglect, particularly criminal matters, and may also work on child protection assessments with State and Territory departments responsible for child protection
* courts, which decide whether a child will be placed on an order.

A range of appointments, schemes and charters have been introduced by jurisdictions in recent years, to provide additional protection for clients of child protection systems. Examples of these are listed in box 15.3.

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| Box 15.3 Initiatives to provide additional protection for child protection clients | |
| Aus Gov | In April 2012, the Australian Government announced the introduction of a new national Children’s Commissioner to champion the rights of Australia’s young people. The inaugural National Children’s Commissioner was appointed in February 2013. The National Children’s Commissioner sits within the Australian Human Rights Commission, Australia’s national independent statutory body dealing with human rights. |
| NSW | The Commission for Children and Young People works to improve the safety and wellbeing of children in NSW. The Commission conducts research into children’s issues and makes recommendations to government on policies, practices and services that may affect children. In 2013, the Commission released a discussion paper calling for ideas on the establishment of a Children’s advocate in NSW. The Office of the Children’s Guardian is an independent government agency that administers the Working With Children Check (WWCC), a prerequisite for anyone undertaking paid or voluntary child-related work in NSW, and encourages organisations to develop their capacity to be safe for children. All applicant foster, relative and kinship carers and all adult household members (18 years and over) are required to obtain a WWCC clearance prior to the applicant’s authorisation as a carer for a child or young person in out-of-home care. The Office promotes the best interests and rights of children and young people in care, including accrediting and monitoring agencies that arrange, provide or supervise out-of-home care, as well as accrediting non-government adoption service providers. |
| Box 15.3 (continued) | |
| Vic | The Commission for Children and Young People has been established to promote continuous improvement and innovation in policies and practices relating to the safety and wellbeing of children and young people generally, and in particular those who are vulnerable, including those placed in out-of-home care. A Commissioner for Aboriginal Children and Young People has also been established to address issues specific to Aboriginal children and young people. |
| Qld | Through implementation of recommendations from the Queensland Child Protection Commission of Inquiry, a new oversight system will replace the functions of the Commission for Children and Young People and Child Guardian which ceased operations on 30 June 2014. This includes the new Queensland Family and Child Commission, which will provide systemic leadership and strategic oversight of the child protection system; the new Office of the Public Guardian, which will provide individual advocacy for children in the child protection system; a new independent Child Death Case Review Panel, which will improve service provision and accountability and better complaints management with child-related complaints to be handled by the relevant department with oversight provided by the independent Queensland Ombudsman. |
| WA | The Advocate for Children in Care provides advocacy and complaints management services for children and young people in care. In 2011-12, the Advocate also implemented a state-wide rollout of ‘Viewpoint’, an interactive online program for children in care aged 4 to 17 years to express their views, wishes and experiences to contribute to developing meaningful care plans. The Department's Complaints Management Unit is available to all customers. Formal monitoring of protection and care service standards by a Standards Monitoring Unit began on 1 July 2007. Seventeen districts are monitored on a two-year cycle and the monitoring regime has been extended across all placement service providers. |
| SA | The Office of the Guardian monitors and assesses out-of-home care arrangements, advocates for, and advises on, the circumstances and needs of children and systemic issues affecting the quality of out-of-home care. Through outreach services, the Guardian ensures all children and young people in out-of-home care receive the individual advocacy they require. Further, the Guardian works with relevant agencies to ensure children in care involved in investigations of sexual abuse have an advocate. |
| Tas | The Commissioner for Children’s functions include promoting the rights and wellbeing of children and young people, and examining the policies, practices, services and laws affecting the health, welfare, care, protection and development of children and young people. |
|  | (continued on next page) |
| Box 15.3 (continued) | |
| ACT | The Public Advocate of the ACT monitors the provision of services, and protects and advocates for the rights of children and young people. Systemic issues are referred by the Public Advocate to the Commissioner for Children and Young People. The Commissioner consults with and promotes the interests of children. The Official Visitor’s role is to visit and inspect places of care, of detention or therapeutic protection, and receive and inquire about complaints made concerning the care provided to children and young people at these locations. In addition, an ACT Charter of Rights for children and young people in out-of-home care was launched in November 2009. The Charter is consistent with the United Nations Convention on the Rights of the Child, the ACT Human Rights Act 2004, and the Children and Young People Act 2008, all of which emphasise the basic human rights to which children and young people are entitled. |
| NT | The Office of the Children’s Commissioner was established in 2008 to independently monitor the child protection system through the investigation of complaints and reporting against the Department of Children and Families’ administration of the Care and Protection of Children Act. In July 2011, the powers of the Children’s Commissioner were extended to allow the initiation of investigations without receiving a formal complaint. The scope of the Children’s Commission’s powers was expanded beyond children involved in the child protection system with ‘protected children’ changing to ‘vulnerable children’. An Aboriginal peak body, Stronger Aboriginal Families, Together has been established to represent Aboriginal children, young people and their families. |
| *Source*: State and Territory governments (unpublished). | |
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### Size and scope

#### The child protection system

Child protection legislation, policies and practices vary across jurisdictions, which has some implications for the comparability of child protection data (Holzer and Bromfield 2008). However, the broad processes in child protection systems are similar (figure 15.1).

State and Territory government departments with responsibility for child protection are advised of concerns about the wellbeing of children through reports to these agencies. Reports may be made by people mandated to report or by other members of the community. Individuals and organisations mandated to report vary across states and territories, and may include medical practitioners, police officers, school teachers and principals. These reports are assessed and classified as child protection notifications, child concern reports, or matters requiring some other kind of response. Nationally, between 2008-09 and 2012-13, police were the most common source of notifications, although proportions varied across jurisdictions (AIHW 2014b and earlier editions).

Figure 15.1 is a simplified representation of the statutory child protection system. It depicts the common pathways through the statutory system and referrals to support services, which can take place at any point along the statutory service system. Children might or might not move sequentially along these pathways and, in some instances, children might move through these pathways quite rapidly (for example, on the same day). There are a range of other services and programs which work to meet the needs of children and families that are not depicted in this diagram, including health, education and early childhood services.

##### Notification

Notifications are reports lodged by members of the community with the appropriate statutory child protection department to signify that they have reason to believe that a child is in need of protection. Depending on the circumstances, not all reports received by child protection departments will be recorded as notifications. Most jurisdictions assess incoming reports to determine whether they meet the threshold for recording a notification. Where, for example, a determination is made that the alleged behaviour does not meet the definition of a child in need of protection, a child concern report or equivalent might be recorded instead. If the alleged behaviour does not meet the threshold for recording a notification or a child concern report, the person reporting the matter might be provided with general advice and/or a referral.

Jurisdictions count notifications at different points in the response to a report, ranging from the point of initial contact with the source of the report to the end of a screening and decision making process. This means the number of notifications is not strictly comparable across jurisdictions. Notifications are subsequently investigated based on the policies and practices in each jurisdiction (figure 15.1).

Prior to 2009-10, the rates of children subject to notifications, investigations and substantiations were calculated for children aged 0–16 years, while the rates of children on care and protection orders and in out-of-home care were calculated for children aged   
0–17 years. From 2009-10 onwards, all child protection data are reported for the age range 0–17 years.

Nationally, 198 966 children aged 0–17 years were the subject of child protection notifications in 2013-14. This was equivalent to 37.8 notifications per 1000 children in the population aged 0–17 years. Nationally, 38 597 Aboriginal and Torres Strait Islander children aged 0–17 years were the subject of child protection notifications in 2013-14, equivalent to 132.9 notifications per 1000 Aboriginal and Torres Strait Islander children in the population aged 0–17 years (table 15A.8). The total number of notifications for each jurisdiction for 2013-14 (including cases where a child was the subject of more than one child protection notification) by Indigenous status of the child is reported in table 15A.5.

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| Figure 15.1 The child protection service**a, b, c, d, e** |
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| a Dashed lines indicate that clients may or may not receive these services, depending on need, service availability, and client willingness to participate in voluntary services. b Support services include family preservation and reunification services provided by government and other agencies. Children and families move in and out of these services and the child protection system, and might also be in the child protection system while receiving support services. c Shading indicates data availability. d AG = Activity Group. e AG1 = Receipt and assessment of initial information about a potential protection and support issue; AG2 = Provision of generic family support services; AG3 = Provision of intensive family support services; AG4 = Secondary information gathering and assessment; AG5 = Provision of short term protective intervention and coordination services for children not on an order; AG6 = Seeking an order;  AG7 = Provision of protective intervention, support and coordination services for children on an order;  AG8 = Provision of out of home care services. |
| *Source*: State and Territory governments (unpublished). |
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Notification and investigation data are collected early in the child protection process and often before an agency has full knowledge of a child’s circumstances. This lack of information and the inherent difficulties in identifying Indigenous status mean that data on the number of notifications and investigations by Indigenous status should be interpreted with care.

##### Investigation

An investigation is the process whereby the relevant department obtains more detailed information about a child who is the subject of a notification and makes an assessment about the harm or risk of harm to the child, and his or her protective needs. Not all notifications are investigated in all jurisdictions. For example, if a determination is made that a child and family are better served by family support services rather than a child protection response, children and families might be referred to diversionary and support services. Once it has been decided that an investigation is required, the investigation process is similar across jurisdictions.

The department responsible for child protection may obtain further information about the child and his or her family by checking information systems for any previous history, undertaking discussions with agencies and individuals, interviewing/sighting the child and/or interviewing the caregivers/parents. At a minimum, the child is sighted whenever practicable, and the child’s circumstances and needs are assessed. Where possible, an investigation determines whether a notification is substantiated or not substantiated.

Nationally, 92 184 children aged 0–17 years who were the subject of a notification in 2013-14 were subsequently the subject of a finalised investigation in 2013-14. This was equivalent to 17.5 finalised investigations per 1000 children in the population aged   
0–17 years (table 15A.8). Nationally, 23 210 Aboriginal and Torres Strait Islander children aged 0‑17 years who were the subject of a notification in 2013-14 were subsequently the subject of an investigation in 2013‑14, equivalent to 79.9 finalised investigations per 1000 Aboriginal and Torres Strait Islander children in the population aged 0–17 years. The total number of notifications investigated for each jurisdiction in 2013-14, by Indigenous status, is reported in table 15A.5.

##### Substantiation

The legal definition of harm or risk of harm, abuse or risk of abuse are similar across jurisdictions. Traditionally, child protection legislation and policy focused on the identification and investigation of narrowly defined incidents that were broadly grouped as types of abuse or neglect. Across all jurisdictions, the focus has now shifted away from the actions of parents and guardians, toward the desired outcomes for the child, the identification and investigation of actual and/or likely harm or risk to the child, and the child’s needs. While the legal criteria for substantiating such matters are now similar across jurisdictions, there remain some differences in practice, including different thresholds for recording a substantiation related to risk of harm.

If an investigation results in a substantiation, intervention by child protection services might be needed to protect the child. This intervention can take a number of forms, including one or more of: referral to other services; supervision and support; an application to court; and a placement in out-of-home care.

Nationally, 40 844 children aged 0–17 years were the subject of a substantiation in 2013‑14. This was equivalent to 7.8 substantiations per 1000 children in the population aged 0–17 years. The rate of children who were the subject of a substantiation increased from 6.2 per 1000 children in the population aged 0–17 years in 2009-10 (table 15A.8).

Nationally, 11 270 Aboriginal and Torres Strait Islander children, 28 149 non-Indigenous children and 1425 children of unknown Indigenous status were the subject of substantiations in 2013-14. The rate of children who were the subject of a substantiation per 1000 children in the target population aged 0–17 years was 38.8 for Aboriginal and Torres Strait Islander children and 5.7 for non‑Indigenous children (table 15A.8).

##### Care and protection orders

Although child protection substantiations are often resolved without the need for a court order (which is usually a last resort), recourse to a court may take place at any point in the child protection investigation process. The types of orders available vary across jurisdictions and may include finalised guardianship or custody orders, finalised supervisory orders, and interim and temporary orders.

Nationally, 45 746 children aged 0–17 years were on care and protection orders at   
30 June 2014. This was equivalent to 8.7 children on care and protection orders per 1000 children in the population aged 0–17 years. The number and rate of children aged   
0–17 years who were the subject of a care and protection order has increased since 2010. At 30 June 2010, 37 730 children were on care and protection orders, a rate of 7.5 per 1000 children in the population aged 0–17 years (table 15A.8).

Nationally, 15 504 Aboriginal and Torres Strait Islander, 30 034 non-Indigenous children and 208 children of unknown Indigenous status were on care and protection orders at 30 June 2014. The rate of children on care and protection orders per 1000 children in the target population aged 0–17 years was 53.2 for Aboriginal and Torres Strait Islander children and 6.0 for non‑Indigenous children (table 15A.8).

Further information regarding children on care and protection orders is included in the attachment tables. Table 15A.6 identifies the number of children admitted to and discharged from care and protection orders by Indigenous status for a ten year time series to 2013-14. Table 15A.7 identifies the number of children on care and protection orders by type of order and Indigenous status for a ten year time series to 2013-14.

##### Out-of-home care

Out-of-home care is one of a range of services provided to children and families where there is a need to provide safe care for a child. Children are placed in out‑of‑home care as a last resort when it is not in their best interests to remain with their family (for example, because there is no one suitable to provide care). Where children are placed in out-of-home care, placement with the extended family or community is sought where possible, particularly in the case of Aboriginal and Torres Strait Islander children (AIHW 2006). Continued emphasis is placed on improving case planning and case management processes to facilitate the safe return home of children in out-of-home care and to maximise case workers’ contact time with children and families.

Nationally, 43 009 children were in out-of-home care at 30 June 2014. This was equivalent to 8.1 children in out-of-home care per 1000 children in the population aged 0–17 years (table 15A.18). The number and rate of children aged 0–17 years in out‑of‑home care has increased since 2010. At 30 June 2010, 35 895 children were in out-of-home care, a rate of 7.1 per 1000 children in the population aged 0–17 years (table 15A.18).

Nationally, 14 991 Aboriginal and Torres Strait Islander children and 27 827 non‑Indigenous children were in out-of-home care at 30 June 2014. The rate of children in out-of-home care per 1000 children in the target population aged 0–17 years was 51.4 for Aboriginal and Torres Strait Islander children and 5.6 for non-Indigenous children (table 15A.18).

Further information on children in out-of-home care is included in the attachment tables.

* Table 15A.19 identifies the number of children in out-of-home care by Indigenous status and placement type at 30 June 2014.
* Table 15A.20 identifies the number of children in out-of-home care by Indigenous status and whether they were on a care and protection order at 30 June 2014.
* Table 15A.21 identifies the number of children in out-of-home care by Indigenous status and length of time in continuous out-of-home care at 30 June 2014.
* Table 15A.22 identifies the number of children who exited care during 2013-14, by Indigenous status and length of time spent in care.

### Funding

Total recurrent expenditure on child protection and out-of-home care services was approximately $3.3 billion nationally in 2013-14 — a real increase of $77.8 million (2.4 per cent) from 2012-13. Of this expenditure, out-of-home care services accounted for the majority (65.4 per cent, or $2.2 billion). Nationally, annual real expenditure on child protection and out-of-home care services has increased by $543.4 million since 2009-10, an average increase of 4.6 per cent per year for the past five years (table 15A.1). ‘Real’ expenditure refers to expenditure adjusted for general price movements over time, so that comparisons across years are not affected by inflation.

Recurrent expenditure on intensive family support services across all jurisdictions was $300.8 million in 2013-14. Intensive family support services expenditure has fluctuated over the past five years (table 15A.30). Table 15A.1 and tables 15A.30–33 provide additional information about families and children who were involved with intensive family support services, including the cost of providing these services per child commencing intensive family support services.

This Report includes expenditure on family support services for all jurisdictions except SA. These data were introduced in the 2013 Report. Family support services are less intensive in nature and do not typically involve planned follow up and case management by child protection agencies (as is often the case with intensive family support services). Nationally, in 2013-14, expenditure on family support services amounted to $377.1 million (table 15A.1).

In 2013-14, real recurrent expenditure on child protection, out-of-home care, intensive family support services and family support services per child aged 0–17 years in the population was $758 nationally. The family support services category was first included in the Report for the 2011-12 financial year. Excluding family support services, the real recurrent expenditure on child protection, out-of-home care and intensive family support services per child aged 0–17 years in the population was $686 nationally. In 2009-10, real recurrent expenditure on child protection, out‑of‑home care and intensive family support services per child aged 0–17 years was $611 (table 15A.1). This represents an average increase of 2.9 per cent per year for the past five years.

Figure 15.2 depicts total real recurrent expenditure per child aged 0–17 years in the population for the period 2009-10 to 2013-14, excluding expenditure on family support services (for consistency across the time series).

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| Figure 15.2 Real recurrent expenditure on child protection, out-of-home care and intensive family support services per child (total) (2013-14 dollars)**a, b, c** |
| |  | | --- | | Figure 15.2 Real recurrent expenditure on child protection, out-of-home care and intensive family support services per child (total) (2013-14 dollars)  More details can be found within the text surrounding this image. | |
| a Refer to table 15A.1 for detailed jurisdiction-specific footnotes and table 15A.4 for information on the comparability of expenditure data. b Excludes expenditure on family support services for consistency across the time series. c Time series financial data are adjusted to 2013-14 dollars using the General Government Final Consumption Expenditure (GGFCE) chain price deflator (2013-14 = 100) (table 2A.51). See chapter 2 (sections 2.5-6) for details. |
| *Source*: State and Territory governments (unpublished); table 15A.1. |
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Figure 15.3 depicts expenditure including family support services per child aged   
0–17 years in the population in 2013-14.

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| Figure 15.3 Recurrent expenditure on child protection, out-of-home care, family support services and intensive family support services per child, 2013-14**a** |
| |  | | --- | | Figure 15.3 Recurrent expenditure on child protection, out-of-home care, family support services and intensive family support services per child, 2013-14  More details can be found within the text surrounding this image. | |
| a Refer to table 15A.1 for detailed jurisdiction-specific footnotes on expenditure data and table 15A.4 for information on the comparability of expenditure data. |
| *Source*: State and Territory governments (unpublished); table 15A.1. |
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It is a Steering Committee objective to report comparable estimates of costs. Ideally, the full range of costs to government would be determined on a comparable basis across jurisdictions. Where full costs cannot be calculated, costs should be estimated on a consistent basis across jurisdictions. However, in the area of child protection, there are differences across jurisdictions in the calculation of expenditure.

Table 15A.4 identifies the level of consistency across jurisdictions for a number of expenditure items. The scope of child protection systems also varies across jurisdictions, and expenditure on some services are included for some jurisdictions, but not for others.

## 15.2 Framework of performance indicators for child protection services

The framework of performance indicators for child protection and out-of-home care services is based on shared government objectives (box 15.4).

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| Box 15.4 Objectives for child protection and out-of-home care services |
| The aims of child protection services are to:   * protect children and young people who are at risk of harm within their families or whose families do not have the capacity to provide care and protection * assist families to protect children and young people.   The aim of out-of-home care services is to provide quality care for children and young people aged 0–17 years who cannot live with their parents for reasons of safety or family crisis.  Child protection and out-of-home care services should be provided in an efficient and effective manner. |
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The performance indicator framework provides information on equity, efficiency and effectiveness, and distinguishes the outputs and outcomes of child protection services (figure 15.4). The performance indicator framework shows which data are comparable in the 2015 Report. For data that are not considered directly comparable, the text includes relevant caveats and supporting commentary. Chapter 1 discusses data comparability and data completeness from a Report-wide perspective (see section 1.6).

The Report’s statistical context chapter contains data that may assist in interpreting the performance indicators presented in this chapter. These data cover a range of demographic and geographic characteristics, including age profile, geographic distribution of the population, income levels, education levels, tenure of dwellings and cultural heritage (including Indigenous- and ethnic-status) (chapter 2). Chapter 2 also notes that the large populations of the eastern mainland states — NSW, Victoria and Queensland — have a significant effect on national averages, as approximately three quarters of Australia’s population live in these states.

Data quality information (DQI) is being progressively introduced for all indicators in the Report. The purpose of DQI is to provide structured and consistent information about quality aspects of data used to report on performance indicators, in addition to material in the chapter or sector overview and attachment tables. DQI in this Report cover the seven dimensions in the ABS’ data quality framework (institutional environment, relevance, timeliness, accuracy, coherence, accessibility and interpretability) in addition to dimensions that define and describe performance indicators in a consistent manner, and note key data gaps and issues identified by the Steering Committee. All DQI for the 2015 Report can be found at www.pc.gov.au/rogs/2015.

Prior to the 2014 Report, child protection data were sourced from the Australian Institute of Health and Welfare’s (AIHW) national child protection aggregate data collection (with data having been supplied to the AIHW by State and Territory governments). In 2013, the AIHW began implementing a child-based unit record collection for child protection services. As a result of the ongoing implementation of this new data system, data for all jurisdictions could not be sourced from the AIHW in time for this Report. Data for NSW and Queensland were sourced directly from State governments. Data for the remaining jurisdictions were sourced from the AIHW. The move from the aggregate collection to the unit record collection has not affected the comparability of child protection data over time.

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| Figure 15.4 Child protection services performance indicator framework |
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## 15.3 Key child protection services performance indicator results

Different delivery contexts, locations and clients can affect the equity/access, effectiveness and efficiency of child protection and out-of-home care services.

### Outputs

Outputs are the services delivered (while outcomes are the impact of these services on the status of an individual or group) (see chapter 1, section 1.5).

#### Equity and access

Equity and access indicators are indicators of governments’ objective to ensure that all clients have fair and equitable access to services on the basis of relative need and available resources (box 15.5).

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| Box 15.5 Equity and access to child protection services |
| ‘Equity and access to child protection and out-of-home care services’ is yet to be defined.  These indicators have been identified for development and reporting in future. |
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#### Effectiveness

##### Child protection services — continuity of case worker

‘Continuity of case worker’ is an indicator of governments’ objective to ensure child protection services are delivered in an effective manner (box 15.6).

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| Box 15.6 Continuity of case worker |
| ‘Continuity of case worker’ is yet to be defined.  The turnover of workers is a frequent criticism of the quality of child protection services. Effective intervention requires a productive working relationship between the worker and the child and family.  This indicator has been identified for development and reporting in future. |
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##### Child protection services — client satisfaction

‘Client satisfaction’ is an indicator of governments’ objective to provide high quality services that meet the needs of recipients (box 15.7).

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| Box 15.7 Client satisfaction |
| ‘Client satisfaction’ is yet to be defined. It is intended that this indicator will measure client satisfaction with the statutory child protection system.  This indicator has been identified for development and reporting in future. |
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Box 15.8 provides examples of steps taken nationally and across jurisdictions to monitor, assess and promote client satisfaction with child protection and out-of-home care services.

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| Box 15.8 Developments in client satisfaction | |
| Aust | A national survey of the views of children in out-of-home care is currently being implemented to enable reporting against a set of indicators under the *National Standards for Out-of-Home Care*. The first national report on this survey is due to Ministers in 2015 and is expected to include qualitative and quantitative information about children's experience of out-of-home care. |
| NSW | An independent Brighter Futures program evaluation was completed during 2006‑10 by the Social Policy Research Centre. The final Evaluation report published in September 2010 identified an overall reduction in risk of harm reports for participants in the program. The evaluation also found that families with drug and alcohol problems and where domestic violence existed demonstrated the smallest reduction in reports over time. A 2-year Aboriginal Family Study, completed by Community Services in 2011, examined what worked for Aboriginal families participating in Brighter Futures. This study identified a reduction in child protection reports and the number of days in care for Aboriginal families who participated in Brighter Futures. On the basis of national and international research and the evaluation findings, program reform was implemented in January 2012. Key program changes included the delivery of the program by 16 non-government agencies, streamlined referral pathways, and refocussing the program to target families with children (0-8 years of age) at high risk of entering the statutory child protection system. In addition, an Early Intervention Council was established with the broad aim of building the government and community collaboration needed to improve outcomes for children at risk of entering or re-entering the statutory child protection system. |
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| Box 15.8 (continued) | |
| Vic | Child Protection clients and families were surveyed in 2001 about their experience of child protection intervention. Findings identified areas for practice improvement and also a range of strengths in child protection practice, including that in the majority of cases, child protection intervention improved the safety and life circumstances of children and young people. A more comprehensive survey commenced in 2011 (the Child and Family Services Outcomes Survey, or CAFSOS). An independent survey of the parents and carers of children receiving child protection, out-of-home care and intensive family support services was completed in 2012. A national survey of young people who are clients of these services is scheduled for 2014. Both surveys will be repeated after a 2-year interval to measure change. Client feedback is also routinely sought by Community Services Organisations as part of meeting Victorian out-of-home care service registration standards. |
| Qld | A new independent statutory body — the Office of the Public Guardian — took over responsibility for protecting the rights of vulnerable children and young people in the child protection system from 1 July 2014. As part of these responsibilities the Public Guardian took over running the Community Visitor Program to support the most vulnerable children and people in out-of-home care, youth detention, corrective services and mental health facilities. The Public Guardian also has special responsibilities to provide individual advocacy for children and young people in the child protection system, ensuring their views and wishes are taken into consideration when decisions are made about them and their care arrangements. |
| WA | The Department for Child Protection and Family Support has a number of system feedback loops to measure and respond to client satisfaction, including the collection of feedback from children and families, avenues for decisions to be reviewed, mechanisms for formal complaints, standards monitoring and an ongoing evaluation and review cycle for specific policies and services. The Viewpoint system is an online, interactive program for children in the care of the CEO aged 4–17 years, which enables children to express their views, wishes and experiences and to contribute meaningfully to their care plan. The Department’s corporate executive staff receive regular reports about the views of children collected through Viewpoint. The Advocate for Children in Care provides advocacy and complaint management services for children and young people in the care of the CEO. Formal complaints about Department services can also be made through the Complaints Management Unit. Requests from children and families to review Department decisions can be made through the Case Review Panel and the State Administration Tribunal. The Department’s Standards Monitoring Unit reviews both Department and community sector organisation services against the *Better Care Better Service* standards. The Department’s Information Research and Evaluation unit, and engaged external agencies, undertake a cycle of review and evaluation projects for key policies and services. |
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| Box 15.8 (continued) | |
| SA | Client complaints, compliments and suggestions are reported to the Families SA client feedback system, ‘RiskMan’. This information is assessed for appropriate follow up, and is reported to the Health and Community Services Complaints Commissioner on a quarterly basis, and the Families SA Executive Director. In addition, Create SA is contracted as the peak body representing the voices of all children in care. Children have the opportunity to provide evaluation feedback on training and programs they are involved in through formal surveys, and are encouraged to provide feedback on their experiences with Create SA through various media. Young people also complete an annual ‘Report Card Survey’ to provide feedback on their experiences in care and with Create SA. In 2013, the Guardians Office completed a report on the experiences of children who move placements in out-of-home care. The Guardian’s Inquiry into the Impact and Experience of Moving While in Care sought children’s views about the impact of changing their care placement and what would make it a better experience. The Inquiry also sought the views of people who most influence placement moves. |
| Tas | An independent evaluation of the pilot Children’s Visitors scheme for children and young people in out-of-home care was completed following the completion of the pilot scheme in 2011. The evaluation of this pilot scheme confirmed that there were both strengths and weaknesses with the scheme and recommended that a new model be developed to provide ongoing, independent support to the most vulnerable children and young people in out of home care. As such, a new youth mentoring program has been developed which is due to commence, providing long term, independent mentoring relationships for young people currently in care, preparing to leave care, and beyond. The program will be delivered across the state by Whitelion and will use volunteer mentors to build supportive relationships with clients. Major aims of the program include improving the engagement of young people with the care planning process and the associated decisions that affect them and consistently supporting clients to achieve their goals throughout their transition to independent living and beyond. |
| ACT | The ACT has strengthened mechanisms to improve transparency and accountability in decision-making, and the provision of services to vulnerable and at risk children, young people and their families. These mechanisms include the establishment of a Decision Making Review Panel (the Panel) and a Complaints Unit in 2012. The Panel will review significant administrative decisions within the Office for Children, Youth and Family Support (OCYFS), Community Services Directorate. The Panel can review decisions made by staff of OCYFS, out-of-home care agencies or carers including: significant administrative decisions that have been reviewed by the line area and the senior delegate of OCYFS; decisions regarding matters of compensation or reimbursements; review of decisions directly referred to the Panel by the Director-General, the Deputy Director-General or the Executive Director, OCYFS; administrative decisions that have a significant or long term impact on the wellbeing of children and young people, carers or agencies; matters that might proceed to the ACT Civil and Administrative Tribunal for a review of an internal decision; and, matters where no decision has been reached and where it is established this delay has had a significant effect on the child or young person or their care environment. |
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| Box 15.8 (continued) | |
|  | The aim of the Complaints Unit is to improve processes to record and respond to complaints and feedback, report complaints data to executive, analyse data and identify areas requiring improvement, ensure accessible information on complaints and feedback is available to service users, and provision of feedback to staff regarding individual and systemic issues. |
| NT | In 2013-14 the Department of Children and Families (DCF) formed a Professional Practice Division to enhance client outcomes. The Division includes a Practice Integrity and Complaints Management Unit and has launched Standards of Professional Practice. DCF has made the Charter of Rights for Children in Out of Home Care a foundation document in its interactions with children. The Out of Home Care Division is improving engagement of children during placement planning and review so that client satisfaction informs ongoing out of home care services. The Children’s Commissioner’s powers have also been strengthened to allow the Children’s Commissioner to investigate concerns relating to vulnerable children without having to receive a formal complaint, and to resolve matters without the need for formal investigation. |
| *Source*: State and Territory governments (unpublished). | |
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##### Child protection services — response times

‘Response times’ is an indicator of governments’ objective to minimise the risk of harm to children by responding to notifications of possible child protection incidents and completing investigations in a timely manner (box 15.9). Notifications and investigations are defined on pages 15.11–12.

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| Box 15.9 Response times |
| ‘Response times’ is defined by two measures:   * response time to commence investigations, defined as the length of time (measured in days) between the date a child protection department records a notification and the date an investigation is subsequently commenced * response time to complete investigations, defined as the length of time (measured in days) between the date a child protection department records a notification and the date an investigation is completed (that is, the date an investigation outcome is determined by a department).   A short or decreasing length of time between recording a notification and commencing an investigation, and between recording a notification and completing an investigation, is desirable.  The length of time between recording a notification and commencing an investigation indicates a department’s promptness in responding to child protection concerns. The length of time between recording a notification and completing an investigation indicates a department’s effectiveness in conducting investigations in a timely manner.  This indicator should be interpreted with care, as jurisdictions record notifications at different stages in response to a report, and jurisdictions have different policies and legislation outlining the time recommended for commencing investigations, based on the seriousness of the child protection concern. Furthermore, while investigations should be conducted in a timely manner, it is important that expediency does not undermine a thorough and accurate assessment of the case. In addition, a number of factors outside the control of a department can affect the timeliness of investigations, including involvement by external parties (for example, police and schools) and an inability to locate a child and/or family.  Data reported for these measures are:   * comparable (subject to caveats) within some jurisdictions over time, but are not comparable across jurisdictions (see caveats in attachment tables for specific jurisdictions) * complete (subject to caveats) for the current reporting period. All required 2013-14 data are available for all jurisdictions.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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For most jurisdictions, and nationally, the majority of investigations were commenced within seven days of notification in 2013-14 (figure 15.5(a)). Response times to complete investigations varied across jurisdictions in 2013-14. Nationally, 45.8 per cent of investigations were completed in 28 days or less, 25.7 per cent were completed in 29 to 62 days, 12.8 per cent were completed in 63 to 90 days, and 15.7 per cent were completed in more than 90 days (figure 15.5(b)).

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| Figure 15.5 Proportion of investigations commenced and completed, by time taken, 2013-14**a, b** |
| |  | | --- | | **(a) Response time to commence investigations** | | Figure 15.5 Proportion of investigations commenced and completed, by time taken, 2013-14  (a) Response time to commence investigations  More details can be found within the text surrounding this image. | | **(b) Response time to complete investigations** | | Figure 15.5 Proportion of investigations commenced and completed, by time taken, 2013-14  (b) Response time to complete investigations  More details can be found within the text surrounding this image. | |
| a Caution should be used when interpreting results as jurisdictions count notifications at different points in response to a report, and have different policies and protocols governing the type of response to a notification. See source tables for detailed footnotes. b For the measure 'response times to commence investigations', in Tasmania’s current system, the 'date investigation commenced' defaults to the date referred for investigation. This date is often not updated to reflect the actual date commenced which means the number of days to commence investigations is often understated. |
| *Source*: Australian Institute of Health and Welfare (AIHW) data collection (unpublished); tables 15A.15 and 15A.16. |
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##### Child protection services — substantiation rate

‘Substantiation rate’ is an indicator of governments’ objective to target investigations to those notifications where a substantive child abuse/neglect incident has occurred or is at risk of occurring (box 15.10).

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| Box 15.10 Substantiation rate |
| ‘Substantiation rate’ is defined as the proportion of finalised investigations where harm or risk of harm was confirmed.  The substantiation rate provides an indication of the extent to which government avoided the human and financial costs of an investigation where no harm had occurred or was at risk of occurring. Neither a very high nor very low substantiation rate is desirable. A very low substantiation rate might indicate that notifications and investigations are not accurately targeted to appropriate cases, with the undesirable consequence of distress to families and undermining the likelihood that families will voluntarily seek support. It might also reflect a greater propensity to substantiate abuse incidents rather than situations of risk. A very high substantiation rate might indicate that the criteria for substantiation are unnecessarily bringing ‘lower risk’ families into the statutory system.  The rate of finalised investigations that were substantiated is influenced by a range of factors and might fluctuate because of policy, funding and practice changes, such as better targeting of investigative resources, the impact of mandatory reporting or factors such as increased community awareness and willingness to notify suspected instances of child abuse, neglect or harm.  Data reported for this indicator are:   * comparable (subject to caveats) within some jurisdictions over time, but are not comparable across jurisdictions (see caveats in attachment tables for specific jurisdictions) * complete (subject to caveats) for the current reporting period. All required 2013-14 data are available for all jurisdictions.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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The proportion of finalised child protection investigations that were substantiated varied across jurisdictions (figure 15.6).

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| Figure 15.6 Proportion of finalised child protection investigations that were substantiated**a, b** | |
| Figure 15.6 Proportion of finalised child protection investigations that were substantiated  NSW  More details can be found within the text surrounding this image. Figure 15.6 Proportion of finalised child protection investigations that were substantiated  Qld  More details can be found within the text surrounding this image. Figure 15.6 Proportion of finalised child protection investigations that were substantiated  SA  More details can be found within the text surrounding this image. Figure 15.6 Proportion of finalised child protection investigations that were substantiated  ACT  More details can be found within the text surrounding this image. | Figure 15.6 Proportion of finalised child protection investigations that were substantiated  Vic  More details can be found within the text surrounding this image. Figure 15.6 Proportion of finalised child protection investigations that were substantiated  WA  More details can be found within the text surrounding this image. Figure 15.6 Proportion of finalised child protection investigations that were substantiated  Tas  More details can be found within the text surrounding this image. Figure 15.6 Proportion of finalised child protection investigations that were substantiated  NT  More details can be found within the text surrounding this image. |
| a Data are not comparable across jurisdictions because definitions of substantiation vary significantly. Consequently, rates should not be compared across jurisdictions. b See source table for detailed footnotes. | |
| *Source*: AIHW data collection (unpublished); table 15A.9. | |
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##### Out-of-home care — safety in out-of-home care

‘Safety in out-of-home care’ is an indicator of governments’ objective to provide children who are under the care of the state with a safe home environment (box 15.11).

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| Box 15.11 Safety in out-of-home care |
| ‘Safety in out-of-home care’ is defined by two measures:   * the proportion of children in out-of-home care who were the subject of a substantiation of sexual abuse, physical abuse, emotional abuse or neglect * the proportion of children in out-of-home care who were the subject of a substantiation where the person responsible was living in the household providing out-of-home care.   The scope of these measures differs. For the first measure, the person responsible can be anyone who comes into contact with the child while the child is in out-of-home care and is for notifications received within the period. For the second measure, the person responsible is limited to someone in the household providing out-of-home care and is irrespective of the date of notification.  A zero, low or decreasing proportion of substantiations for both measures is desirable.  The proportion of children in out-of-home care who were the subject of a substantiation of sexual abuse, physical abuse, emotional abuse or neglect, assesses the overall safety of children in care. This may include events that occur outside of the child’s placement arrangements. The proportion of children in out-of-home care who were the subject of a substantiation where the person responsible was living in the household providing out-of-home care assesses the extent to which authorised carers provide safe care to children in care.  Care should be taken when interpreting this indicator as the threshold for substantiating harm or risk involving children in care is generally lower than that for substantiating harm or risk involving a child in the care of his or her own parents. This is because governments assume a duty of care for children removed from the care of their parents for protective reasons.  Data reported for these measures are:   * comparable (subject to caveats) within some jurisdictions over time but are not comparable across jurisdictions (see caveats in attachment tables for specific jurisdictions) * incomplete for the current reporting period. All required 2013-14 data were not available for NSW or Victoria, which did not provide data for the number of children in out-of-home care who were the subject of a substantiation of sexual abuse, physical abuse, emotional abuse or neglect; and the NT, which did not provide data for the number of children in out-of-home care who were the subject of a substantiation where the person responsible was living in the household providing out-of-home care. Victoria and the NT do not collect these data and NSW is currently working on improving data quality for future reporting.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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Data for the measure ‘proportion of children in out-of-home care who were the subject of a substantiation of sexual abuse, physical abuse, emotional abuse or neglect’ are experimental. These data will be improved over time, but available data suggest the proportion of children in out-of-home care who were the subject of a substantiation of sexual abuse, physical abuse, emotional abuse or neglect varied across jurisdictions (table 15.1).

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| Table 15.1 Proportion of children in out-of-home care who were the subject of a substantiation of sexual abuse, physical abuse, emotional abuse or neglect, 2013-14**a, b** |
| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | Unit | NSWc | Vicd | Qlde | WAf | SA | Tas | ACT | NT | | Children in care who were the subject of a notification, which was substantiated | no. | na | na | 137 | 59 | 21 | 5 | 29 | 19 | | Children aged 0-17 in at least one care placement during the year | no | 20 520 | 10 041 | 8 438 | 4 485 | 3 089 | 1 273 | 776 | 1 134 | | Proportion | % | na | na | 1.6 | 1.3 | 0.7 | 0.4 | 3.7 | 1.7 | |
| a Data are not comparable due to differences across jurisdictions in policies, practices and reporting methods. b As a proportion of all children in at least one care placement. c In NSW, data for children in care who were the subject of a notification, which was substantiated are not available. NSW has made changes to its source system which, subject to quality assurance, will enable submission of data for 2015‑16. d Data were not available for Victoria, as the Victorian Child Protection Service does not record the required data for children who are in out of home care. e Queensland’s data comprise children subject to a harm report substantiation, which refers only to children in the custody or guardianship of the chief executive and who are placed in out-of-home care. For substantiated harm outcomes, the harm or risk of harm may have involved the actions or inactions of a carer; staff member of a care service; another adult who resides in, or frequents the care environment; another child (in specific circumstances only); or in some instances harm may be substantiated and the person responsible was unable to be identified. f WA data may include events that occur outside of the child’s placement arrangements. **na** Not available. |
| *Source*: State and Territory governments (unpublished); table 15A.28. |
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The proportion of children in out-of-home care who were the subject of a substantiation where the person responsible was living in the household also varied across jurisdictions (table 15.2).

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| Table 15.2 Proportion of children in out-of-home care who were the subject of a substantiation and the person responsible was living in the household, 2013-14**a, b** |
| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | Unit | NSWc | Vicd | Qlde | WAf | SA | Tasg | ACT | NTh | | Children in care who were the subject of a substantiation and the person responsible was in the household | no. | 68 | 109 | 137 | 9 | 13 | 9 | 20 | na | | Children aged 0–17 in at least one care placement during the year | no. | 20 520 | 10 041 | 8 438 | 4 485 | 3 089 | 1 273 | 776 | 1 134 | | Proportion | % | 0.3 | 1.1 | 1.6 | 0.2 | 0.4 | 0.7 | 2.6 | na | |
| a Data are not comparable due to differences across jurisdictions in policies, practices and reporting methods. b As a proportion of all children in at least one care placement. c For NSW, the numerator provided for this measure (the number of children in care who were the subject of a substantiation and the person believed responsible was in the household providing out-of-home care) excludes children who are in government authorised and funded out-of-home care placements where the out-of-home care placement is facilitated by a non-government organisation (NGO). However, the denominator for this measure (all children aged 0–17 in at least one care placement during the year) encompasses all children in out-of-home care (including children in government authorised and funded out-of-home care placements where the out-of-home care placement is facilitated by an NGO). This affects the reported rate (a lower rate is derived than would be the case if the numerator and denominator aligned). d In Victoria, quality of care concerns can range from minor quality issues through to possible physical or sexual abuse. All reports are treated seriously at the outset of the process and the best interests of the child or young person are considered paramount. Substantiated abuse may involve physical, emotional or sexual abuse, neglect (including medical neglect). An allegation of abuse may not be substantiated if at any stage during the investigation process insufficient evidence is found to support the allegation. Substantiated quality of care concerns encompass completed investigations where quality of care concerns are substantiated and action is taken in response. e Queensland’s data comprise children subject to a harm report substantiation, which refer only to children in the custody or guardianship of the chief executive and who are placed in out-of-home care. Queensland’s consideration of ‘the person believed responsible’ relates to overall harm or risk of harm to the child in care. For substantiated harm outcomes, the harm or risk of harm may have involved the actions or inactions of a carer; staff member of a care service; another adult who resides in, or frequents the care environment; another child (in specific circumstances only); or in some instances harm may be substantiated and the person responsible was unable to be identified. It does not report on whether harm was the result of the actions or inactions of the child’s carer or staff member of a care service or whether harm or risk of harm was not as a result of their actions or inactions i.e., there was no indication that the carer, staff member or care service has not met the standards of care required under the Child Protection Act 1999. Therefore, Queensland's data are broader than the scope of the national counting rule and should not be compared with other jurisdictions’ data. f WA data do not include substantiations relating to relatives of foster carers or other children in the household. g Tasmania’s data are not able to be separately identified as to whether or not the person responsible was living in the household or visiting. h Data are not available for the NT as the NT data system does not record the person responsible. **na** Not available. |
| *Source*: State and Territory governments (unpublished); table 15A.27. |
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##### Out-of-home care — stability of placement

‘Stability of placement’ is an indicator of governments’ objective to provide high quality services that meet the needs of recipients on the basis of relative need and available resources (box 15.12).

Stability of placement is an important indicator of service quality for children placed away from their family for protective reasons, particularly for those who require long term placements. Data are collected on the number of different placements for children on a care and protection order who exited out-of-home care. Data are grouped according to the length of time in care (less than 12 months, and 12 months or more).

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| Box 15.12 Stability of placement |
| ‘Stability of placement’ is defined as the proportion of children who had one or two placements during a period of continuous out-of-home care.  A low number of child placements (one or two) per period of care is desirable, but must be balanced against other placement quality indicators, such as placements in compliance with the Aboriginal Child Placement Principle, local placements and placements with siblings.  Children can have multiple short term placements for appropriate reasons (for example, an initial placement followed by a longer term placement) or it may be desirable to change placements to achieve better compatibility between a child and family. It is not desirable for a child to stay in an unsatisfactory or unsupportive placement. Also, older children are more likely to have multiple placements as they move towards independence and voluntarily seek alternate placements.  Data are collected only for children who are on orders and who exit care during the reporting period. There are limitations to counting placement stability using a cohort of children on exit from care rather than longitudinally tracking a cohort of children on their entry into care: an exit cohort is biased to children who stayed a relatively short time in care and thus were more likely to have experienced fewer placements.  Data reported for this indicator are:   * comparable (subject to caveats) across jurisdictions and over time * complete for the current reporting period. All required 2013-14 data were not available for WA.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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Nationally, 84.0 per cent of children on a care and protection order who exited care after less than 12 months in 2013-14 experienced one or two placements. Proportions varied across jurisdictions (figure 15.7).

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| Figure 15.7 Proportion of children on an order exiting care after less than 12 months, who had one or two placements**a, b, c** |
| |  | | --- | | Figure 15.7 Proportion of children on an order exiting care after less than 12 months, who had one or two placements  More details can be found within the text surrounding this image. | |
| a Data refer to children exiting care during the relevant year. b See source table for detailed footnotes. c WA data for 2010-11 onwards are not available as these data cannot be extracted from WA’s aggregate child protection data system. c Results for Tasmania for 2011-12 and 2013-14 should not be compared with prior years as respite placements are now excluded from the count of placements. Exclusion of this placement type was not possible in previous years due to system limitations. |
| *Source*: AIHW data collection (unpublished); table 15A.26. |
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Across jurisdictions, children who had been in out-of-home care longer tended to have had more placements. The proportion of children exiting care in 2013-14 after 12 months or more who had experienced one or two placements was 46.9 per cent nationally but varied across jurisdictions (figure 15.8).

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| Figure 15.8 Proportion of children on an order exiting care after 12 months or more, who had one or two placements**a, b, c** |
| |  | | --- | | Figure 15.8 Proportion of children on an order exiting care after 12 months or more, who had one or two placements  More details can be found within the text surrounding this image. | |
| a Data refer to children exiting care during the relevant year. b See source table for detailed footnotes. c WA data for 2010-11 onwards are not available as these data cannot be extracted from WA’s aggregate child protection data system. c Results for Tasmania for 2011-12 and 2013-14 should not be compared with prior years as respite placements are now excluded from the count of placements. Exclusion of this placement type was not possible in previous years due to system limitations. |
| *Source*: AIHW data collection (unpublished); table 15A.26. |
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##### Out-of-home care — children aged under 12 years in home-based care

‘Children aged under 12 years in home-based care’ is an indicator of governments’ objective to provide services which meet the needs of recipients (box 15.13).

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| Box 15.13 Children aged under 12 years in home-based care |
| ‘Children aged under 12 years in home-based care’ is defined as the number of children aged under 12 years placed in home-based care divided by the total number of children aged under 12 years in out-of-home care.  A high or increasing rate for this indicator is desirable. This indicator should be interpreted in conjunction with other placement indicators.  Placing children in home-based care is generally considered to be in their best interests, particularly for younger children. Children will generally make better developmental progress (and have more ready access to normal childhood experiences) in family settings rather than in residential or institutional care environments.  Data reported for this indicator are:   * comparable (subject to caveats) across jurisdictions and over time * complete for the current reporting period. All required 2013-14 data are available for all jurisdictions.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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Nationally, the proportion of all children aged under 12 years in care who were placed in home-based care at 30 June 2014 was 97.6 per cent. In most jurisdictions, and nationally, the proportions of Aboriginal and Torres Strait Islander and non-Indigenous children aged under 12 years who were placed in home-based care were similar (figure 15.9).

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| Figure 15.9 Proportion of children aged under 12 years in out‑of‑home care who were in a home-based placement, by Indigenous status, 30 June 2014**a** |
| |  | | --- | | Figure 15.9 Proportion of children aged under 12 years in out of home care who were in a home-based placement, by Indigenous status, 30 June 2014  More details can be found within the text surrounding this image. | |
| a See source table for detailed footnotes. |
| *Source*: AIHW data collection (unpublished); table 15A.25. |
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##### Out-of-home care — placement with extended family

‘Placement with extended family’ is an indicator of governments’ objective to provide services that meet the needs of recipients (box 15.14).

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| Box 15.14 Placement with extended family |
| ‘Placement with extended family’ is defined as the proportion of all children in out-of-home care who are placed with relatives or kin who receive government financial assistance to care for that child.  A high or increasing rate for this indicator is desirable. Placing children with their relatives or kin is generally the preferred out-of-home care placement option. This option is generally associated with better long term outcomes due to increased continuity, familiarity and stability for the child. Relatives are more likely to have or to form long term emotional bonds with the child. Placement with familiar people can help to overcome the loss of attachment and belonging that can occur when children are placed in out-of-home care.  Placement with extended family should be considered with other factors in the placement decision, as placements with extended family may not always be the best option. Long standing family dynamics can undermine the pursuit of case goals such as reunification, and the possibility of intergenerational abuse needs to be considered. In addition, depending on the individual circumstances of the child, it may be more important to have a local placement that enables continuity at school, for example, rather than a distant placement with relatives.  Data reported for this indicator are:   * comparable (subject to caveats) across jurisdictions and over time * complete for the current reporting period. All required 2013-14 data are available for all jurisdictions.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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Figure 15.10 shows the proportion of children placed with relatives or kin by Indigenous status. The proportion of children placed with relatives or kin at 30 June 2014 was greater for Aboriginal and Torres Strait Islander children than for non‑Indigenous children in most jurisdictions, and nationally (figure 15.10).

The Aboriginal Child Placement Principle gives considerable emphasis to the placement of Aboriginal and Torres Strait Islander children with extended family. This principle is discussed in box 15.15.

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| Figure 15.10 Proportion of children in out-of-home care placed with relatives/kin, by Indigenous status, 30 June 2014**a, b, c** |
| |  | | --- | | Figure 15.10 Proportion of children in out-of-home care placed with relatives/kin, by Indigenous status, 30 June 2014  More details can be found within the text surrounding this image. | |
| a See source table for detailed footnotes. b ACT unknown is zero. c NT non-Indigenous and unknown are zero. Due to system limitations, data reported for the NT do not provide a realistic view of children placed with relatives/kin. Refer to data in figure 15.11. |
| *Source*: AIHW data collection (unpublished); table 15A.23. |
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##### Out-of-home care — placement in accordance with the Aboriginal Child Placement Principle

‘Placement in accordance with the Aboriginal Child Placement Principle’ is an indicator of governments’ objective to protect the safety and welfare of Aboriginal and Torres Strait Islander children while maintaining their cultural ties and identity (box 15.15).

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| Box 15.15 Placement in accordance with the Aboriginal Child Placement Principle |
| ‘Placement in accordance with the Aboriginal Child Placement Principle’ is defined as the number of Aboriginal and Torres Strait Islander children placed with the child’s extended family, Aboriginal and Torres Strait Islander community or other Aboriginal and Torres Strait Islander people, divided by the total number of Aboriginal and Torres Strait Islander children in  out-of-home care. Data are reported separately for children placed (i) with relative/kin, (ii) with a  non-relative Aboriginal and Torres Strait Islander carer or in Aboriginal and Torres Strait Islander residential care, and (iii) not placed with relative/kin, a non-relative Aboriginal and Torres Strait Islander carer or in Aboriginal and Torres Strait Islander residential care.  A high or increasing proportion of children placed in accordance with the principle is desirable. This indicator should be interpreted with care as it is a proxy for compliance with the principle. This indicator reports the placement outcomes of Aboriginal and Torres Strait Islander children rather than compliance with the principle. The indicator does not reflect whether the hierarchy was followed in the consideration of the best placement for the child, nor whether appropriate Aboriginal and Torres Strait Islander individuals or organisations were consulted.  Placing Aboriginal and Torres Strait Islander children in circumstances consistent with the Aboriginal Child Placement Principle is considered to be in their best interests. However, it is one factor among many considerations for the child’s safety and wellbeing that must be carefully considered in the placement decision. In the application of this principle, departments consult with and involve appropriate Aboriginal and Torres Strait Islander individuals and/or organisations. If the preferred options are not available, the child may be placed (after appropriate consultation) with a non-Indigenous family or in a residential setting. The principle does not preclude the possibility that in some instances, placement in a non-Indigenous setting, where arrangements are in place for the child’s cultural identity to be preserved, might be the most appropriate placement for the child.  Data reported for this indicator are:   * comparable (subject to caveats) across jurisdictions and over time * complete for the current reporting period. All required 2013-14 data are available for all jurisdictions.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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According to the Aboriginal Child Placement Principle (Chisholm 1998) the following hierarchy of placement options should be pursued in protecting the safety and welfare of Aboriginal and Torres Strait Islander children:

* placement with the child’s extended family (which includes Aboriginal and Torres Strait Islander and non‑Indigenous relatives/kin)
* placement within the child’s Aboriginal and Torres Strait Islander community
* placement with other Aboriginal and Torres Strait Islander people.

All jurisdictions have adopted this principle in both legislation and policy.

Nationally, at 30 June 2014, 52.9 per cent of Aboriginal and Torres Strait Islander children in out-of-home care were placed with relatives/kin (37.8 per cent with Aboriginal and Torres Strait Islander relatives/kin and 15.1 per cent with non‑Indigenous relatives/kin). A further 14.8 per cent of Aboriginal and Torres Strait Islander children in out-of-home care were placed with other Aboriginal and Torres Strait Islander carers or in Aboriginal and Torres Strait Islander residential care (figure 15.11). The proportion of Aboriginal and Torres Strait Islander children in out-of-home care at 30 June 2014 who were placed with Aboriginal and Torres Strait Islander or non-Indigenous relatives or kin or with another Aboriginal and Torres Strait Islander carer or in Aboriginal and Torres Strait Islander residential care varied across jurisdictions (figure 15.11).

As noted in box 15.15, the placement of Aboriginal and Torres Strait Islander children in out-of-home care is a proxy measure for compliance with the Aboriginal Child Placement Principle. The proxy measure reports the placement outcomes of Aboriginal and Torres Strait Islander children rather than compliance with the hierarchy of placement options to be considered when finding suitable out-of-home care environments for Aboriginal and Torres Strait Islander children. Work is underway to develop a more robust measure of compliance with the Aboriginal Child Placement Principle as part of the *National framework for protecting Australia’s children: Second three year action plan, 2012-15* (FaHCSIA 2012).

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| Figure 15.11 Placement of Aboriginal and Torres Strait Islander children in out-of-home care, 30 June 2014**a, b, c** |
| |  | | --- | | **Figure 15.11 Placement of Aboriginal and Torres Strait Islander children in out-of-home care, 30 June 2014  More details can be found within the text surrounding this image.** | |
| Relative/Kin = Placed with relative/kin. Other Aboriginal and Torres Strait Islander = Placed with other Aboriginal and Torres Strait Islander carer or Aboriginal and Torres Strait Islander residential care.  Other = Not placed with relative/kin, other Aboriginal and Torres Strait Islander carer or Aboriginal and Torres Strait Islander residential care. a See source table for detailed footnotes. b Excludes Aboriginal and Torres Strait Islander children living independently and those whose living arrangements were unknown. c Data for Tasmania and the ACT relate to a small number of Aboriginal and Torres Strait Islander children. |
| *Source*: AIHW data collection (unpublished); table 15A.24. |
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##### Out-of-home care — local placement

‘Local placement’ is an indicator of governments’ objective to provide services which meet the needs of the recipients (box 15.16).

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| Box 15.16 Local placement |
| ‘Local placement’ is defined as the proportion of children in out-of-home care attending the same school that they were attending before entering out-of-home care.  A high or increasing rate of local placement is desirable.  A placement close to where a child lived prior to entering out-of-home care is considered to enhance the stability, familiarity and security of the child. It enables some elements of the child’s life to remain unchanged (for example, they can continue attending the same school and retain their friendship network). It may also facilitate family contact if the child’s parents continue to live nearby.  Local placement should be considered with other factors in the placement decision. For example, placement with a sibling or relative might preclude a local placement. Also, a child might move from a primary school to a secondary school or to a different local school at the same level.  Data collection for this indicator is under development. Data will be provided for 3 and 12 months after entering care.  Data quality information for this indicator is under development. |
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##### Out-of-home care — placement with sibling

‘Placement with sibling’ is an indicator of governments’ objective to provide services which meet the needs of the recipients (box 15.17).

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| Box 15.17 Placement with sibling |
| ‘Placement with sibling’ is defined as the proportion of children who are on orders and in out of home care at 30 June who have siblings also on orders and in out-of-home care, who are placed with at least one of their siblings.  A high or increasing rate of placement with siblings is desirable. Placement of siblings together promotes stability and continuity. It is a long standing placement principle that siblings should be placed together, where possible, in the interests of their emotional wellbeing. Children are likely to be more secure and have a sense of belonging within their family when placed with siblings.  This is one factor among many that must be considered in the placement decision. In circumstances of sibling abuse, or when a particular child in a family has been singled out as the target for abuse or neglect, keeping siblings together may not be appropriate.  Data collection for this indicator is under development. Data were not available for the 2015 Report.  Data quality information for this indicator is under development. |
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##### Out-of-home care — children with documented case plans

‘Children with documented case plans’ is an indicator of governments’ objective to provide services that meet the needs of the recipients (box 15.18).

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| Box 15.18 Children with current documented case plans |
| ‘Children with current documented case plans’ is defined as the number of children who have a current documented and approved case plan as a proportion of all children who are required to have a current documented and approved case plan.  A case plan is an individualised, dynamic written plan (or support agreement) that includes information on a child in need of protection, including his or her needs, risks, health, education, living and family arrangements, goals for ongoing intervention and actions required to achieve identified goals. A case plan is usually developed between a family and an agency on the basis of an assessment process. Case planning is essential to structured and purposeful work to support children’s optimal development.  A current case plan is one that has been approved and/or reviewed within the previous 12 months. Individual jurisdictions’ timeframes for ongoing review may vary and reviews may be more frequent when young children or infants are involved, the child has just entered care, and certain orders are in place (for example, assessment orders). Reviews may also be required when circumstances have changed (for example, the death of a parent or carer, or placement changes) and significant new decisions are needed.  The scope of this indicator extends to children and young people (aged 0–17 years) whose care arrangements were ordered through the Children’s Court and for whom parental responsibility has been transferred to the Minister/Chief Executive and who are required by jurisdictional policy/legislation to have a current documented and approved case plan.  A high or increasing rate of children with current documented case plans is desirable.  The quality of case plans, and the extent to which identified needs and actions are put into place, should also be taken into account when considering this indicator. The existence of a case plan does not guarantee that appropriate case work to meet a child’s needs is occurring.  Data reported for this indicator are:   * comparable (subject to caveats) within jurisdictions over time, but are not comparable across jurisdictions (see caveats in attachment tables for specific jurisdictions) * incomplete for the current reporting period. All required 2014 data were not available for SA and the NT.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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The proportion of children with current documented case plans at 30 June 2014 varied across jurisdictions (figure 15.12).

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| Figure 15.12 Proportion of children with current documented case plans, 30 June 2014**a, b, c, d** |
| |  | | --- | | Figure 15.12 Proportion of children with current documented case plans, 30 June 2014  More details can be found within the text surrounding this image. | |
| a See source table for detailed footnotes. b Data were not available for SA and the NT. The Australian proportions comprise data for the six reporting jurisdictions only. c ACT unknown is zero. d The large populations of the eastern mainland states have a significant effect on national averages, particularly when data are not available for all jurisdictions. |
| *Source*: AIHW data collection (unpublished); table 15A.17. |
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##### Out-of-home care — client satisfaction

‘Client satisfaction’ is an indicator of governments’ objective to provide high quality services that meet the needs of recipients (box 15.19).

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| Box 15.19 Client satisfaction |
| ‘Client satisfaction’ is yet to be defined. It is intended that this indicator will measure client satisfaction with the out-of-home care system.  This indicator has been identified for development and reporting in future. |
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Some information on jurisdictions’ development of initiatives which may assist to measure client satisfaction in the future is included in box 15.8.

#### Efficiency

Understanding the efficiency of child protection systems broadly — and the different components of child protection systems, such as early intervention and out-of-home care services — enables State and Territory governments to identify key service cost drivers. Efficiency measures coupled with outcome measures ultimately enable State and Territory governments to compare the relative cost effectiveness of broad system approaches and the cost effectiveness of different components of child protection systems.

##### Challenges in reporting efficiency for child protection systems

Current efficiency data for child protection services have several limitations, including:

* *different systems and priorities across jurisdictions* — child protection systems in Australia have evolved independently under the auspices of State and Territory governments. This has resulted in variations in processes and emphases placed on different service delivery paradigms, such as different approaches to diversionary options
* *limitations of current information systems* — in most jurisdictions, it is difficult to identify resources directed specifically to child protection services, out‑of‑home care services and other support services for families. This is due in part to the historical structure of information systems and the embedding of government agencies responsible for child protection services within larger community services departments.

Table 15A.4 identifies the level of consistency in expenditure data across jurisdictions.

As a result of these limitations, cost allocations reflect the historical nature of information systems and do not necessarily provide an accurate reflection of the costs involved in provision of various child protection and out-of-home care services.

In April 2002, the Steering Committee initiated a project to improve efficiency data for a national framework of child protection and family support pathways (the ‘Pathways’ project) (box 15.20). Until this can be fully implemented, reporting on efficiency has been limited to proxy indicators (boxes 15.21 and 15.23).

Experimental data relating to the proportion of expenditure across each Pathways activity group are included in table 15.3. These data are preliminary and are subject to further refinement for future reports. Due to different internal management systems, there can be significant variation across jurisdictions in the activities or expenditures that are included in each activity group. However, for all jurisdictions, the proportion of expenditure allocated to Activity group 8 (provision of out‑of‑home care services) is the most significant and varies from 51.1 per cent to 70.6 per cent across jurisdictions (table 15.3).

These data reflect a combination of direct costs (those costs which can be clearly allocated by a jurisdiction to a particular activity group) and indirect costs (which form part of the overall expenditure base, but which cannot be clearly allocated to a specific activity group). Indirect allocations have been approximated by jurisdictions across the eight activity groups.

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| Box 15.20 The ‘Pathways’ project | |
| The Pathways project developed and tested a model that will ultimately allow jurisdictions to calculate more meaningful, comparable and robust efficiency measures (the ‘Pathways method’). The model is based on a top-down application of the activity based costing method. Eight national pathways have been developed as a high level representation of the services that a child protection client could receive in any jurisdiction. Each pathway consists of common activity groups which act as the ‘building blocks’ for each of the pathways. The aggregate cost of each activity group within the pathway will allow the unit cost (including direct and indirect expenditure) of an individual pathway to be determined.  These activity groups and pathways will provide additional utility for jurisdictions in managing the business of child protection services. Implementation of the model has the potential to improve the quality of national reporting of child protection services efficiency measures. Activity-based data can also result, over time, in measures of the cost savings associated with early intervention strategies.  The activity groups are: | |
| Activity group 1 | Receipt and assessment of initial information about a potential protection and support issue |
| Activity group 2 | Provision of generic family support services |
| Activity group 3 | Provision of intensive family support services |
| Activity group 4 | Secondary information gathering and assessment |
| Activity group 5 | Provision of short term protective intervention and coordination services for children not on an order |
| Activity group 6 | Seeking an order |
| Activity group 7 | Provision of protective intervention, support and coordination services for children on an order |
| Activity group 8 | Provision of out-of-home care services |
| Detailed definitions of activity groups are included in section 15.6 Definitions of key terms.  Before jurisdictional reporting against the activity groups can be undertaken with confidence, further refinement of activity group definitions and counting rules is required. Development work, including further data testing in these areas will continue. | |
| *Source*: Steering Committee for the Review of Government Service Provision (SCRGSP) (2003). | |
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| Table 15.3 Proportion of total expenditure by activity group — experimental estimates (per cent), 2013-14**a, b** |
| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | Unit | NSW | Vic | Qld | WA | SAc | Tasd | ACT | NTe | | AG1 | % | 4.4 | 3.2 | 2.8 | 4.7 | 5.9 | 5.7 | 6.3 | 5.4 | | AG2f | % | 7.8 | 14.4 | 7.1 | 9.6 | na | 6.5 | 5.2 | 27.0 | | AG3 | % | 10.3 | 10.1 | 5.0 | 2.1 | 5.6 | 9.6 | 1.8 | na | | AG4 | % | 5.0 | 4.4 | 6.6 | 5.7 | 4.0 | 3.8 | 4.3 | 3.7 | | AG5 | % | 5.9 | 4.1 | 4.3 | 9.3 | 0.3 | 2.2 | 0.3 | 0.2 | | AG6 | % | 6.4 | 5.6 | 4.5 | 4.3 | 2.2 | 6.3 | 2.4 | 2.1 | | AG7 | % | 5.3 | 6.8 | 18.3 | 11.0 | 11.4 | 7.9 | 12.2 | 10.5 | | AG8 | % | 54.8 | 51.3 | 51.3 | 53.4 | 70.6 | 58.1 | 67.6 | 51.1 | | **Total** | **%** | **100.0** | **100.0** | **100.0** | **100.0** | **100.0** | **100.0** | **100.0** | **100.0** | |
| AG = Activity Group (box 15.20). a Totals may not add to 100 due to rounding. b Experimental percentage allocations are derived from total expenditure allocations which vary from totals used to derive costs presented elsewhere in this chapter. c Family support services data (AG2) are not available for SA. d Tasmania’s expenditure data for AGs 1, 4, 5, 6 and 7 should be interpreted with caution as these estimates are based on a staff labour time survey completed in 2010-11 which may not reflect current staff labour time allocations. e Intensive family support services data (AG3) are included in AG2 for the NT as these data are no longer able to be separately identified from family support services. f Expenditure items included in calculating proportional expenditure for AG2 can vary across jurisdictions, for example the inclusion/exclusion of expenditure on services outsourced to non‑government organisations. **na** Not available. |
| *Source*: State and Territory governments (unpublished). |
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Table 15.4 presents experimental unit cost data for all activity groups for all jurisdictions where data are available. A more complete collection of unit cost data will be provided once all jurisdictions are able to report appropriate denominators (that is, activity counts).

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| Table 15.4 Activity group unit costs — experimental data, 2013-14**a, b** |
| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | Unit | NSWc | Vic | Qld | WAd | SA | Tase | ACT | NT | | AG1 Cost per report to child protection | $ | 244 | na | 179 | 214 | 305 | na | na | 549 | | AG1 Cost per notificationf | $ | 513 | 309 | 995 | 1 178 | 687 | 358 | 273 | 673 | | AG2 Cost per child commencing family support servicesg | $ | na | na | na | 12 897 | na | na | na | 143 321 | | AG3 Cost per child commencing intensive family support services | $ | 17 115 | 14 901 | 10 089 | 9 536 | 18 398 | 4 703 | 2 706 | na | | AG4 Cost per notification investigatedh | $ | 1 111 | 1 626 | 2 322 | 1 843 | 1 395 | 2 080 | 1 461 | 1 204 | | AG5 Cost per child commencing protective intervention and coordination services who is not on an orderi | $ | 4 473 | na | na | 7 875 | na | 5 391 | 578 | na | | AG6 Cost per order issued | $ | 17 849 | 2 522 | 6 244 | 8 866 | 1 778 | 5 472 | 2 442 | 1 264 | | AG7 Cost per child commencing protective intervention and coordination services who is on an order | $ | 24 262 | na | 16 328 | 8 793 | 9 018 | 4 433 | 7 530 | 17 087 | | AG8 Cost per placement nightj | $ | 123 | 152 | 143 | 174 | 170 | 122 | 146 | 279 | |
| AG = Activity Group (box 15.20). a Data are rounded to the nearest whole number. b Experimental unit costs are based on jurisdictions’ total expenditure for each activity group. Denominators used to calculate unit costs for AG2, AG3, AG5, and AG7 are based on clients commencing service provision throughout the financial year (as distinct from total client numbers). The use of commencement numbers might inflate reported unit costs. c NSW data for AG3 include a small number of children commencing intensive family support services and corresponding cost data are included in AG4. This will result in under-estimation of unit costs for AG3 and over-estimation of unit costs for AG4. Data for AG5 and AG7 are preliminary. NSW is currently reviewing/refining the methodology for calculating AG costs. d WA financial and activity data for AG2 do not include community sector services. e Tasmania’s expenditure data for AGs 1, 4, 5, 6 and 7 should be interpreted with caution as these estimates are based on a staff labour time survey completed in 2010-11 which may not reflect current staff labour time allocations. f Jurisdictions count notifications at different points in response to a report, ranging from the point of initial contact with the source of the report to the end of a screening and decision making process. This means the number of notifications and hence the unit costs for notifications are not comparable across jurisdictions for AG 1. g Unit costs for AG2 have proven difficult to calculate as many jurisdictions are presently unable to capture family support service activity data (that is, the denominator). h Jurisdictions differ in the way notifications and investigations are defined and the requirements for conducting an investigation. i Unit costs for AG5 should be interpreted with caution due to difficulty experienced by jurisdictions extracting the number of children in scope. j Cost per placement night should be interpreted with caution due to the effect of different proportions of children in residential out-of-home care across jurisdictions. **na** Not available. |
| *Source*: State and Territory governments (unpublished). |
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##### Total expenditure on all child protection activities per notification, investigation and substantiation

‘Total expenditure on all child protection activities, per notification’, ‘total expenditure on all child protection activities, per investigation’, and ‘total expenditure on all child protection activities, per substantiation’ are reported as proxy indicators of governments’ objective to maximise the benefit to the community through the efficient use of public resources (box 15.21).

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| Box 15.21 Total expenditure on all child protection activities per notification, investigation and substantiation |
| ‘Total expenditure on all child protection activities per notification, investigation and substantiation’ is defined by three measures:   * total expenditure on all child protection activities divided by the number of notifications * total expenditure on all child protection activities divided by the number of investigations * total expenditure on all child protection activities divided by the number of substantiations.   Low or decreasing expenditure per notification/investigation/substantiation can suggest more efficient services but may indicate lower quality or different service delivery models.  These indicators are proxy indicators and need to be interpreted with care. Because each of these proxy indicators is based on total expenditure on child protection activities, they do not represent, and cannot be interpreted as, unit costs for notifications, investigations or substantiations. These proxy indicators cannot be added together to determine overall cost of child protection services.  More comprehensive and accurate efficiency indicators would relate expenditure on particular child protection activities to a measure of output of those activities. Work is underway to develop a national activity-based costing method, the Pathways project, which will allow this type of reporting from existing information systems (box 15.20). Experimental data using the Pathways method are included in table 15.3. The following proxy data will be replaced by Pathways unit cost data when the Pathways method is refined and implemented nationally.  Data reported for this indicator are:   * comparable (subject to caveats) within some jurisdictions over time but are not comparable across jurisdictions (see caveats in attachment tables for specific jurisdictions) * complete for the current reporting period. All required 2013-14 data are available for all jurisdictions.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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Total expenditure on all child protection activities per notification, per investigation and per substantiation from 2009-10 to 2013-14 varied across jurisdictions (figure 15.13).

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| Figure 15.13 Child protection efficiency indicators (2013-14 dollars)**a, b** |
| |  | | --- | | **(a) Annual real recurrent expenditure on all child protection activities per notification**  **Figure 15.13 Child protection efficiency indicators (2013-14 dollars)  (a) Annual real recurrent expenditure on all child protection activities per notification  More details can be found within the text surrounding this image. (b) Annual real recurrent expenditure on all child protection activities per investigation**  **Figure 15.13 Child protection efficiency indicators (2013-14 dollars)  (b) Annual real recurrent expenditure on all child protection activities per investigation  More details can be found within the text surrounding this image. (c) Annual real recurrent expenditure on all child protection activities per substantiation**  Figure 15.13 Child protection efficiency indicators (2013-14 dollars)  (c) Annual real recurrent expenditure on all child protection activities per substantiation  More details can be found within the text surrounding this image. | |
| a See source table for detailed footnotes. b Time series financial data are adjusted to 2013-14 dollars using the GGFCE chain price deflator (2013-14 = 100) (table 2A.51). See chapter 2 (sections 2.5-6) for details. |
| *Source*: AIHW data collection (unpublished); State and Territory governments (unpublished); table 15A.2. |
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##### Out-of-home care expenditure per placement night

‘Out-of-home care expenditure per placement night’ is an indicator of governments’ objective to maximise the availability and quality of services through the efficient use of public resources (box 15.22).

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| Box 15.22 Out-of-home care expenditure per placement night |
| ‘Out-of-home care expenditure per placement night’ is defined as total real recurrent expenditure on out-of-home care services divided by the total number of placement nights in out-of-home care.  Low or decreasing expenditure per placement night can suggest more efficient services but may indicate lower service quality or different service delivery models. Further, in some cases, efficiencies may not be able to be realised due to remote geographic locations that limit opportunities to reduce overheads through economies of scale.  Data reported for this indicator are:   * comparable (subject to caveats) within jurisdictions over time but are not comparable across jurisdictions (see caveats in attachment tables for specific jurisdictions) * complete for the current reporting period. All required 2013-14 data were available for all jurisdictions.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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Out-of-home care expenditure per placement night varied across jurisdictions (figure 15.14).

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| Figure 15.14 Real out-of-home care expenditure per placement night (2013‑14 dollars)**a, b, c** |
| |  | | --- | | Figure 15.14 Real out-of-home care expenditure per placement night (2013 14 dollars)  More details can be found within the text surrounding this image. | |
| a See source table for detailed footnotes. b Caution should be used when interpreting results due to the variety of activities included in out-of-home care services. c Time series financial data are adjusted to 2013-14 dollars using the GGFCE chain price deflator (2013-14 = 100) (table 2A.51). See chapter 2 (sections 2.5-6) for details. |
| *Source*: AIHW data collection (unpublished); State and Territory governments (unpublished); table 15A.29. |
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##### Total expenditure on all children in residential and non-residential out-of-home care per child in residential and non-residential out-of-home care

‘Total expenditure on all out-of-home care services per child in out-of-home care, by residential and non-residential care’ are reported as proxy indicators of governments’ objective to maximise the benefit to the community through the efficient use of public resources (box 15.23).

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| Box 15.23 Total expenditure on children in residential and non‑residential out-of-home care per child in residential and non-residential out-of-home care |
| Total expenditure on children in residential and non-residential out-of-home care per child in residential and non-residential out-of-home care is defined by three measures:   * total expenditure on residential out-of-home care divided by the number of children in residential out-of-home care at 30 June * total expenditure on non-residential out-of-home care divided by the number of children in non-residential out-of-home care at 30 June * total expenditure on all out-of-home care divided by the number of children in all out-of-home care at 30 June.   Low or decreasing expenditure per child in care can suggest more efficient services but may indicate lower quality or different service delivery models.  These indicators are proxy indicators and need to be interpreted with care as they do not represent a measure of unit costs. Expenditure per child in care at 30 June overstates the cost per child because significantly more children are in care during a year than at a point in time. In addition, the indicator does not reflect the length of time that a child spends in care.  Data reported for these measures are:   * comparable (subject to caveats) within some jurisdictions over time but are not comparable across jurisdictions (see caveats in attachment tables for specific jurisdictions) * incomplete for the current reporting period. All required 2013-14 data were not available for NSW, Queensland, and the NT for the measures of total expenditure on residential  out-of-home care and non-residential out-of-home care.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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Total expenditure on residential care and non-residential care for the period 2009-10 to 2013-14, per child in residential care and non-residential care at 30 June, varied across jurisdictions (figures 15.15(a) and 15.15(b)). Total expenditure on all out-of-home care per child in care at 30 June for 2009-10 to 2013-14 also varied across jurisdictions (figure 15.15(c)).

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| Figure 15.15 Out-of-home care efficiency indicators, at 30 June (2013‑14 dollars)**a, b, c** |
| |  | | --- | | **(a) Annual real recurrent expenditure on residential out-of-home care per child in residential care** | | **Figure 15.15 Out-of-home care efficiency indicators, at 30 June (2013-14 dollars)  (a) Annual real recurrent expenditure on residential out-of-home care per child in residential care  More details can be found within the text surrounding this image.  (b) Annual real expenditure on non-residential out-of-home care per child in non-residential care** | | Figure 15.15 Out-of-home care efficiency indicators, at 30 June (2013-14 dollars)  (b) Annual real expenditure on non-residential out-of-home care per child in non-residential care  More details can be found within the text surrounding this image. | | **(c) Annual real expenditure on all out-of-home care per child in out-of-home care at 30 June** | | Figure 15.15 Out-of-home care efficiency indicators, at 30 June (2013-14 dollars)  (c) Annual real expenditure on all out-of-home care per child in out-of-home care at 30 June   More details can be found within the text surrounding this image. | |
| a See source table for detailed footnotes. b Time series financial data are adjusted to 2013-14 dollars using the GGFCE chain price deflator (2013-14 = 100) (table 2A.51). See chapter 2 (sections 2.5-6) for details. c NSW, Queensland, and the NT could not disaggregate expenditure on out-of-home care. |
| *Source*: AIHW data collection (unpublished); State and Territory governments (unpublished); table 15A.3. |
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### Outcomes

Outcomes are the impact of services on the status of an individual or group (while outputs are the services delivered) (see chapter 1, section 1.5).

#### Improved safety — substantiation rate after decision not to substantiate

‘Improved safety’ is an indicator of governments’ objective to reduce the risk of harm to children by appropriately assessing notifications of possible child protection incidents (box 15.24).

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| Box 15.24 Improved safety |
| ‘Improved safety’ is defined by two measures:   * substantiation rate after a decision not to substantiate, defined as the proportion of children who were the subject of an investigation in the previous financial year that led to a decision not to substantiate, and who were later the subject of a substantiation within 3 or 12 months of the initial decision not to substantiate. The year reported relates to the year of the initial decision not to substantiate * substantiation rate after a prior substantiation, defined as the proportion of children who were the subject of a substantiation in the previous financial year, who were subsequently the subject of a further substantiation within the following 3 or 12 months. The year reported relates to the year of the original substantiation.   A low or decreasing rate for these measures is desirable. However, reported results can be affected by the finalisation of investigations, factors beyond the control of child protection services, or a change in circumstances after the initial decision not to substantiate was made. A demonstrable risk of harm might not have existed in the first instance. In addition, this indicator does not distinguish between subsequent substantiations which are related to the initial notification (that is, the same source of risk of harm) and those which are unrelated to the initial notification (that is, a different source of risk of harm). This indicator partly reveals the extent to which an investigation has not succeeded in identifying the risk of harm to a child who is subsequently the subject of substantiated harm. It also provides a measure of the adequacy of interventions offered to children to protect them from further harm. This indicator should be considered with other outcome indicators.  Data reported for these measures are:   * comparable (subject to caveats) within jurisdictions over time but are not comparable across jurisdictions (see caveats in attachment tables for specific jurisdictions) * complete for the current reporting period. All required 2012-13 data are available for all jurisdictions.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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The proportion of substantiations that occurred within 3 and 12 months of a decision not to substantiate are provided in figure 15.16. The proportion of substantiations that occurred within 3 and 12 months of a prior substantiation are provided in figure 15.17.

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| Figure 15.16 Improved safety — substantiation rate within 3 and/or 12 months after a decision not to substantiate**a, b** |
| |  |  | | --- | --- | | Figure 15.16 Improved safety — substantiation rate within 3 and/or 12 months after a decision not to substantiate  NSW  More details can be found within the text surrounding this image. | Figure 15.16 Improved safety — substantiation rate within 3 and/or 12 months after a decision not to substantiate  Vic  More details can be found within the text surrounding this image. | | Figure 15.16 Improved safety — substantiation rate within 3 and/or 12 months after a decision not to substantiate  Qld  More details can be found within the text surrounding this image. | Figure 15.16 Improved safety — substantiation rate within 3 and/or 12 months after a decision not to substantiate  WA  More details can be found within the text surrounding this image. | | Figure 15.16 Improved safety — substantiation rate within 3 and/or 12 months after a decision not to substantiate  SA  More details can be found within the text surrounding this image. | Figure 15.16 Improved safety — substantiation rate within 3 and/or 12 months after a decision not to substantiate  Tas  More details can be found within the text surrounding this image. | | Figure 15.16 Improved safety — substantiation rate within 3 and/or 12 months after a decision not to substantiate  ACT  More details can be found within the text surrounding this image. | Figure 15.16 Improved safety — substantiation rate within 3 and/or 12 months after a decision not to substantiate  NT  More details can be found within the text surrounding this image. | |  | | |
| b See source tables for detailed footnotes. b Data are not comparable across jurisdictions because definitions of substantiation vary significantly. Consequently, rates cannot be compared across jurisdictions. |
| *Source*: AIHW data collection (unpublished); table 15A.10. |
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| Figure 15.17 Improved safety — resubstantiation rate within 3 or 12 months of a prior substantiation**a, b** |
| |  |  | | --- | --- | | Figure 15.17 Improved safety — resubstantiation rate within 3 or 12 months of a prior substantiation  NSW  More details can be found within the text surrounding this image. | Figure 15.17 Improved safety — resubstantiation rate within 3 or 12 months of a prior substantiation  Vic  More details can be found within the text surrounding this image. | | Figure 15.17 Improved safety — resubstantiation rate within 3 or 12 months of a prior substantiation  Qld  More details can be found within the text surrounding this image. | Figure 15.17 Improved safety — resubstantiation rate within 3 or 12 months of a prior substantiation  WA  More details can be found within the text surrounding this image. | | Figure 15.17 Improved safety — resubstantiation rate within 3 or 12 months of a prior substantiation  SA  More details can be found within the text surrounding this image. | Figure 15.17 Improved safety — resubstantiation rate within 3 or 12 months of a prior substantiation  Tas  More details can be found within the text surrounding this image. | | Figure 15.17 Improved safety — resubstantiation rate within 3 or 12 months of a prior substantiation  ACT  More details can be found within the text surrounding this image. | Figure 15.17 Improved safety — resubstantiation rate within 3 or 12 months of a prior substantiation  NT  More details can be found within the text surrounding this image. | |  | | |
| c See source table for detailed footnotes. b Data are not comparable across jurisdictions because definitions of substantiation vary significantly. Consequently, rates cannot be compared across jurisdictions. |
| *Source*: AIHW data collection (unpublished); table 15A.11. |
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#### Improved education

‘Improved education’ is an indicator of governments’ objective to maximise children’s life chances by ensuring children in care have their educational needs met (box 15.25).

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| Box 15.25 Improved education |
| ‘Improved education’ is defined as proportion of children on guardianship and custody orders to the Chief Executive/Minister achieving national benchmarks in reading and numeracy, compared with all children. Only children on orders in government schools are reported.  A high or increasing rate of children on guardianship and custody orders achieving national benchmarks in reading and numeracy is desirable.  Factors outside the control of child protection services have an influence on the educational outcomes of children on guardianship and custody orders, and care should be exercised when interpreting results. Specifically, children in the child protection system often have high needs have often experienced significant disadvantage (for example, family stress, trauma and violence, mental illness and disability).  It is also important to note that children exempted from NAPLAN testing are recorded as being below the national minimum benchmarks in reading and numeracy. Experimental data indicate that children on guardianship and custody orders are exempted from NAPLAN testing at significantly higher rates than the general student population, which will contribute to poorer reported NAPLAN results for children on orders than the general student population.  Data reported for this measure are:   * comparable (subject to caveats) across jurisdictions and over time * incomplete for the current reporting period. All required 2012 data were not available for NSW, Victoria, WA, Tasmania, the ACT and the NT.   Data quality information for this indicator is at www.pc.gov.au/rogs/2015. |
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Tables 15A.12–14 provide data on the proportion of children in years 3, 5 and 7 on guardianship or custody orders (attending government schools) achieving national reading and numeracy benchmarks in 2003, 2004, 2005 and 2006 relative to all children (attending government and non-government schools). The proportion of children on guardianship or custody orders achieving national reading and numeracy benchmarks in 2003, 2004, 2005 and 2006 varied significantly across jurisdictions. However, with few exceptions, the proportion of children on orders achieving national reading and numeracy benchmarks was less — at times significantly less — than for all students.

Data contained in tables 15A.12–14 were sourced from a pilot study conducted by the AIHW. Data were not available for all jurisdictions. State and Territory governments are currently working with the AIHW on a national project to link data from the CP NMDS to National Assessment Program — Literacy and Numeracy (NAPLAN) data, which will improve reporting for this indicator. NAPLAN testing is conducted each year for all students across Australia in years 3, 5, 7 and 9. All students in the same year level are assessed on the same test items in the assessment domains of reading, writing, language conventions (spelling, grammar and punctuation) and numeracy.

In 2012, an experimental collection was commenced by the Child Protection and Youth Justice Working Group (CPYJWG) to source aggregate counts of the number of year 5 children on guardianship and custody orders who achieved at or above the national minimum standards in the NAPLAN domains ‘reading’ and ‘numeracy’, as well as the NAPLAN participation rates of children in these categories.

Experimental data for 2010 and 2011 were available for Queensland and SA, for children under custody or guardianship orders to the Chief Executive for a minimum of two years at the time of the test in government and non‑government schools (Queensland) and children under the guardianship of the Minister in government schools (SA). These data were published in the 2013 and 2014 Reports. In this edition, equivalent experimental data for 2012 were also available for Queensland and SA. These data indicate that the proportion of year 5 children on orders achieving at or above the national minimum standards in the NAPLAN domains ‘reading’ and ‘numeracy’ are significantly lower than the results for all students in year 5. In 2012:

* 54.1 per cent of year 5 students on orders in Queensland and 60.3 per cent of year 5 students on orders in SA achieved at or above the national minimum standard in the NAPLAN domain ‘reading’, compared with 91.6 per cent of all year 5 students (and 89.1 and 90.7 for Queensland and SA respectively)
* 52.3 per cent of year 5 students on orders in Queensland and 55.9 per cent of year 5 students on orders in SA achieved at or above the national minimum standard in the NAPLAN domain ‘numeracy’, compared with 93.3 per cent of all year 5 students (and 91.7 for both Queensland and SA) (ACARA 2012; Queensland and SA governments unpublished).

It is important to take student participation rates into account when analysing NAPLAN data. Participation rates are calculated as all assessed and exempt students as a percentage of the total number of students in the year level, including students who were absent or withdrawn. In 2012:

* the participation rates for year 5 students on orders in the NAPLAN ‘reading’ domain was 94.0 per cent in Queensland and 88.5 per cent in SA, compared with 95.9 per cent of all year 5 students (and 94.9 and 94.8 for Queensland and SA respectively)
* the participation rates for year 5 students on orders in the NAPLAN ‘numeracy’ domain was 94.0 per cent in Queensland and 90.1 per cent in SA, compared with 95.5 per cent of all year 5 students (and 94.5 and 94.4 for Queensland and SA respectively) (ACARA 2012; Queensland and SA governments unpublished).

The experimental collection will assist the CPYJWG to identify the type of education data that would be meaningful to report in future, and methodological issues that need to be accounted for in educational outcomes reporting for children on orders. Detailed information on NAPLAN testing can be found in chapter 4 School educationof this Report.

Box 15.26 notes forthcoming research into the educational outcomes beyond school of people from out‑of‑home care backgrounds.

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| Box 15.26 Out-of-home care educational outcomes research |
| The National Centre for Student Equity in Higher Education (the National Centre) at Curtin University has commenced a study into university access and achievement of people from out‑of-home care backgrounds. The lead researchers on this project note that to date, there has been little Australian analysis of the progression of people from care into higher education, or of potential policies that might increase their aspirations, access and educational success. This is in contrast to the United Kingdom where children from care are a recognised equity group whose higher education outcomes are closely monitored and where institutional policies exist to support their participation.  The National Centre will be investigating these issues in collaboration with Mackillop Family Services and Berry Street. The project is scheduled to conclude in February 2015, at which time a project report will be made publicly available. |
| *Source*: National Centre for Student Equity in Higher Education (NCSEHE) (2014). |
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#### Improved health and wellbeing of the child

‘Improved health and wellbeing of the child’ is an indicator of governments’ objective to maximise children’s life chances by ensuring children in care have their health and wellbeing needs met (box 15.27).

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| Box 15.27 Improved health and wellbeing of the child |
| ‘Improved health and wellbeing of the child’ is yet to be defined.  Good health and wellbeing are considered vital ingredients for optimising children’s life chances. Therefore, ensuring the health and wellbeing of children in the child protection system is considered a high priority.  This indicator has been identified for development and reporting in future. |
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#### Safe return home

‘Safe return home’ is an indicator of governments’ objective to remove the risk of harm to the child while maintaining family cohesion (box 15.28).

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| Box 15.28 Safe return home |
| ‘Safe return home’ is yet to be defined.  For children who cannot be protected within their family and are removed from home, often the best outcome is when effective intervention to improve their parents’ skills or capacity to care for them enables them to return home.  This indicator has been identified for development and reporting in future. |
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#### Permanent care

‘Permanent care’ is an indicator of governments’ objective to provide appropriate care for children who cannot be safely reunified with their families (box 15.29).

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| Box 15.29 Permanent care |
| ‘Permanent care’ is yet to be defined.  Appropriate services are those that minimise the length of time before stable, permanent placement is achieved.  This indicator has been identified for development and reporting in future. |
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## 15.4 Future directions in child protection and out-of-home care services performance reporting

### Improving national child protection data

The Standing Council on Community and Disability Services Advisory Council (SCCDSAC), now disbanded, was overseeing a number of national projects to address gaps in child protection reporting and to improve the comparability of child protection data. Such projects included: implementing a linked data set to measure educational outcomes for children on orders; developing a linked data collection to report on the relationships between child protection and youth justice; and the development of new carer‑related indicators, including carer retention, foster carer numbers and safe reunification. It is expected that these projects, along with the successful implementation of a child based unit‑record data collection for all jurisdictions, will improve child protection reporting.

New arrangements to govern child welfare and family services data and information requirements include the establishment of a Children and Families Data Network (CAFDaN) reporting to the Children and Families Secretaries’ Group (CAFS).

State and Territory governments are also currently working with the AIHW on a national project to link data from the CP NMDS to NAPLAN data, which will improve reporting for the educational outcomes indicator. It is anticipated that a project report will be finalised in 2015 and data will be available for future reports.

### COAG developments

#### National framework for protecting Australia’s children 2009–2020

On 30 April 2009, COAG endorsed *Protecting Children is Everyone’s Business: National Framework for Protecting Australia’s Children 2009–2020* (the National Framework) (FaHCSIA 2008). The National Framework is intended to deliver a more integrated response to protecting Australia’s children, and emphasises the roles of government, the non-government sector, and the community in promoting the safety and wellbeing of children. The Second Action Plan 2012–15 under the National Framework was released in 2012. It prioritises early intervention, prevention and collaboration with mental health, domestic and family violence, drug and alcohol, education, health and other services (FaHCSIA 2012).

The Report’s child protection and out-of-home care performance indicator framework already includes and reports upon several National Framework performance indicators. In addition, the Steering Committee has previously identified developments for the Report’s child protection and out-of-home care performance indicator framework which are complementary to many of the measures in the National Framework. In further developing the Report’s child protection and out-of-home care performance indicator framework, the Steering Committee will align with applicable National Framework developments.

#### National standards for out-of-home care

Under the National Framework, Australian governments have committed to implementing National Standards for Out-of-Home Care (the National Standards). The National Standards relate to areas affecting the outcomes and experiences of children in   
out-of-home care, including: health; education; case planning; connection to family; transitioning from care; training and support for carers; belonging and identity; and stability and safety. The Steering Committee will keep a watching brief on the development of performance indicators for the National Standards and align with applicable National Standard developments.

## 15.5 Jurisdictions’ comments

This section provides comments from each jurisdiction on the services covered in this chapter.

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| **“** | New South Wales Government comments | **”** |
| Children, young people and their families, not systems, are at the centre of NSW’s child protection responses. NSW remains focused on:   * increasing the proportion of children and young people in safe and stable homes * helping families earlier and with better services so their children are not taken into care * providing more children at risk of significant harm with a face-to-face response * improving the outcomes of our most vulnerable children and young people in care * improving the safety of Aboriginal children and young people with child protection concerns.   In 2014, NSW commenced the *Safe Home for Life* reforms. These reforms will see an investment of $500 million over four years by the NSW Government to improve the effectiveness of the child protection system in NSW.  The *Child Protection Legislative Amendment Act 2014* was passed by Parliament on 26 March 2014 and is the first step towards a less legalistic, process driven child protection system.  We have expanded the *Practice First* model of child protection. *Practice First* increases the time caseworkers spend directly with families and focuses on building genuine and responsive relationships with children, families and other agencies to reduce the number of children being re-reported as being at risk of significant harm. The model is now operating in 24 Community Services Centres.  In 2013-14 NSW invested $243.8 million for targeted earlier intervention for vulnerable children, young people and families. Early intervention programs aim to support children and families as early as possible to address factors that place the safety of children at risk, and to prevent them entering out-of-home care (OOHC).  NSW continued to progress the transition of statutory OOHC to the non‑government organisation (NGO) sector, to better support children in the Minister’s parental responsibility, and their carers. In 2013-14 the care arrangements of 2061 children and young people in OOHC were transitioned to NGOs.  The NSW Government has implemented two social benefit bonds in partnership with the Benevolent Society and UnitingCare Burnside to support at risk children. The bonds are an innovative, Australian first, approach to raising private capital to support children and young people in OOHC to be safely restored to their families or to prevent them from entering care. The UnitingCare Burnside Social Benefit Bond has improved supports for parents of children in or at risk of entering OOHC and has delivered a 7.5 per cent return to investors in the first year. |

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| **“** | Victorian Government comments | **”** |
| There have been significant amendments to Victoria’s Children, Youth and Families Act 2005 in 2014. The most significant changes relate to provisions which govern case planning and court orders. The amendments are due for implementation on or before 1 March 2016 and introduce a new range of protection orders closely aligned with a permanency planning hierarchy and timelines.   * Where a child enters out-of-home care, reunification will be pursued for 12 months, except where it is clearly unachievable. * If a child has not been reunified with their parents after 12 months, but there is compelling evidence that reunification may occur a 12 month extension may be granted. * Beyond these timelines, if out-of-home care is still required the court may vest full parental rights in the Secretary, who will then be able to make the most appropriate long term or permanent care arrangements for the child. * The Aboriginal Child Placement Principle will continue to apply, and a preference for kinship placements for all children (where safe) is stated in the legislation. |

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| **“** | Queensland Government comments | **”** |
| The Queensland Child Protection Commission of Inquiry report *Taking Responsibility: A Roadmap for Queensland Child Protection* was released on 1 July 2013. On 16 December 2013, the Queensland Government committed to implementing the Inquiry’s reform roadmap by accepting all of the report’s recommendations, 115 in full and six in principle. The Queensland Government committed $406 million additional investment over five years to implement the reforms that will help vulnerable children, young people and families, including the prioritisation of the needs of Aboriginal and Torres Strait Islander families.  The primary focus of this funding will be on early intervention and support services with additional investments of:   * $51.9 million allocated to the Community Based Intake and Referral System (Recommendation 4.5) * $195.1 million to Intensive Family Support and Domestic and Family Violence Services (Recommendation 5.4) * $16.5 million to post-care services for young people (Recommendation 9.2)   The $4 million Fostering Families two-year trial is the first family support program to target neglect. Commencing in January 2013, it provides intensive, in-home and out-of-hours family support services to at risk Queensland families with a focus on developing practical skills in the family home to improve parenting skills and family functioning. Fostering Families is currently being trialled in three sites: Brisbane South, Toowoomba/Darling Downs and Maryborough/Hervey Bay, all of which are operating at capacity. Initial results from the trial are positive, with support through the program also decreasing re-reporting rates of child protection concerns to the department. The department is proposing to extend these services for a further three years.  The Helping Out Families initiative continued in 2013–14 to provide support services to vulnerable families at risk of entering or re-entering the statutory system who do not currently require tertiary intervention. An evaluation of this initiative, completed in June 2014, demonstrated benefits including: improved outcomes for families (if families engaged with an Intensive Family Support service for seven months or longer, more than two-thirds experienced reduced risk factors for child abuse or neglect) and reduced risk of entry or re-entry to the child protection system. The findings of the evaluation are being used to inform government investment in new models of intensive family support.  In 2013–14, Queensland continued to streamline quality standards for human services, after the introduction in February 2013 of an organisation level licensing process for non-government organisations (NGOs) licensed under the *Child Protection Act (Qld) 1999*. The new process enables NGOs to spend more time on service delivery and less time on paperwork. At 30 June 2014, 13 organisations were each granted an organisational level licence, previously they collectively held 41. |

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| **“** | Western Australian Government comments | **”** |
| In 2013-14, the practice of the Department for Child Protection and Family Support (the Department) is based on the *Signs of Safety Child Protection Practice Framework* and is oriented to child participation and work with families in an inclusive and evidence based approach that builds safety around the child with support networks to enable children to remain at home, where possible.  For those children who are in care, the *Foster Care Partnership Practice Framework* guides the Department to work with carers based on the ethos of mutual respect and joint decision-making. The Department’s *Residential Care (Sanctuary) Framework* provides a theoretical and practical base to guide care for children whose trauma severely impacts their behaviour and development.  The *Aboriginal Services Framework* provides direction to continually improve its work with Aboriginal children and families with an overall goal to reduce the number of Aboriginal children coming into care.  Demand for child protection services continues to grow, demonstrated by a 25 per cent increase in child protection notifications in the last two years. Effective case practice using Signs of Safety has contributed to slowing the rate of children in care to 6.7 growth between 30 June 2013 and 30 June 2014.  The Department maintains a focus on strong partnerships with the community sector, foster carers and across government agencies. Key highlights include:   * In December 2013, the electronic exchange of incident notifications from WA Police was successfully integrated into the Department's client system, enabling more timely responses to children exposed to family violence. * The Department, in partnership with the community sector, has commenced an Out-Of-Home Care Five Year Strategic Plan. This work is occurring alongside the national out-of-home care standards and learnings from the Royal Commission into Institutional Responses to Child Sexual Abuse. * The recruitment and retention of foster carers remains a priority. The foster carer recruitment campaign has seen over 120 new general foster carers approved. * In line with Delivering Community Services in Partnership Policy, out-of-home care placements in the community service sector have grown by an average of 16 per cent in the last three years. * Contact centres are being established to enhance the frequency and quality of contact arrangements and to assist in reunifying children with their families. * With the successful integration of the Family Support Network in Armadale, two more networks were established in Mirrabooka and in the Midwest (Geraldton). The networks aim to reduce demand on child protection services, improve integration and effectively meet the needs of at risk families. |

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| **“** | South Australian Government comments | **”** |
| SA continued to implement the redesign of child protection services within the jurisdiction, with Solution Based Casework as its practice model.  A new process for protective intervention work in the areas of family preservation and reunification was commissioned. The emphasis is on working with vulnerable families to increase their strengths and resilience to care for their children. This will enable more children to remain safe in their own homes.  A specialising approach to care and protection service delivery was finalised. Specialising hubs were created in some metropolitan locations with specialising teams across other metropolitan and country offices. Hubs and teams are based on the functions of Assessment and Support, Protective Intervention, and Guardianship.  All Families SA supervisors and senior practitioners have undertaken and passed the Solution Based Casework Qualifying Exam and a specific suite of tools for the application of Solution Based Casework in Guardianship has been provided for implementation. A final certification procedure has been developed to provide certification guidance for all eligible Families SA delivery and functional staff.  The roll-out of the Solution Based Casework model including training with funded community service provider partners has commenced.  The *Families SA Service Plan* was released in 2014 and outlines changes to the delivery of child protection services through the provision of practical assistance to families to minimise their future contact with the child protection system. The plan aligns with the Department for Education and Child Development *Strategic Plan 2014–2017* through the strategic priority *Improve and integrate child safety*.  The Parliament of SA passed the *Statutes Amendment (Assessment of Relevant History) Act 2013* in November 2013. The Act makes changes to the child safe environments provisions of the *Children’s Protection Act 1993*.  SA is reviewing and updating child safe environments and resources to support organisations in developing a child safe and child friendly environment, adopting a preventative approach to child abuse and neglect and ensuring relevant history assessments are conducted for all people working with children in prescribed positions.  New *Health Standards for Children and Young People under Guardianship of the Minister* were developed with child protection and health services. These standards incorporate national policy developments in both sectors, including the *National Out of Home Care Standards* and the *National Clinical Assessment Framework*. Agreed roles, responsibilities and standards are specified to guide workers in health and child protection to work together to improve health outcomes and opportunities in life for children and young people under Guardianship. |

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| **“** | Tasmanian Government comments | **”** |
| A number of initiatives during 2013-14 have been planned and/or implemented to improve practice and service provision in the child protection and out-of-home care areas in Tasmania.  Implementation of the Signs of Safety approach, supporting a consistent and comprehensive risk assessment, which is child centred and family focussed, commenced across Children and Youth Services in 2012–13, with training, practice development and system review occurring throughout 2013-14 to support the ongoing implementation.  The Out of Home Care Reform Project commenced in late-2013, and has focused on reviewing service provision across the out-of-home care continuum, with a view to realigning service delivery and out-of-home care options to meet better the needs of children. This project is also examining the interconnection of services required to support children and young people in the out-of-home care system in Tasmania.  Amendments to the *Children, Young Persons and Their Families Act 1997* reflect the Government’s response to the first stage recommendations of the Legislative Amendment Review Reference Committee (LARRC), established by the previous Government to advise it on the Principal Act. The Committee provided a detailed report on the need for amendments to some 21 areas of the Act. The LARRC report provided detailed advice on the preferred policy direction to support the amendments. These amendments are aimed at a less adversarial way of working with families, which aligns and supports the Signs of Safety approach. The commencement dates for the majority of the amendments are still being finalised.  The Advocacy for Children in Tasmania Committee (ACTC) was established as a result of one of the LARRC recommendations, which was to conduct a second stage process to clarify the expectations of the role, function and powers of the Commissioner for Children. The ACTC made 15 recommendations relating to advocacy services for Tasmanian children, including the function and role of the Commissioner. One of these recommendations was the development of standalone legislation, this has been endorsed by Cabinet and drafting instructions are currently being prepared.  Children and Youth Services entered into a three year funding agreement with the Australian Red Cross Society for the provision of an advocacy service specifically for parents and families involved with the Child Protection Service. The new alliance brings with it the opportunity to build on our commitment to working in partnership with families. The service will be available in the Southern region from 1 December 2014. |

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| **“** | Australian Capital Territory Government comments | **”** |
| A key priority for the ACT Government is to maintain and continually improve a responsive and high performing child protection and out-of-home care system. Reforms in the ACT incorporate strategies to implement recommendations from reviews undertaken by the ACT Public Advocate in 2011 and 2012 and a performance audit by the ACT Auditor-General in 2013. These include:   * Progression of the development of the *Out of Home Care Strategy  2015–2020*. Key reforms include a renewed focus on diverting children and young people from entering care, speedy reunification of children and parents wherever possible, and new and enhanced services to improve outcomes for children and young people in care. * Establishment of the Trauma Recovery Centre, Melaleuca Place, which supports children from birth to 12 years who have experienced trauma and are current clients of statutory services. * Improved services and supports for kinship carers, including engaging specialist services to provide therapeutic services for children, young people and carers in their care environment. * Enhanced early intervention services and supports for pregnant women as well as for young adults who have left care. * Development of a dual referral system, the Child, Youth and Family Gateway, as a point of contact for information, initial support and engagement with vulnerable children, young people and their families. * Commenced development of a service model to engage suitable Aboriginal and Torres Strait Islander community members to provide independent advice regarding the placement, cultural planning and transition from care planning for Aboriginal and Torres Strait Islander children and young people in out-of-home care. * Implementation of the Integrated Management System (IMS) in Care and Protection Services (CPS). The IMS aligns the strategic direction, policies and procedures, risk management and compliance activities of CPS. * Commencement of the Integrated Statutory Services project that examines how the Office for Children, Youth and Family Support (OCYFS) can combine activities performed in child protection and youth justice areas to offer better outcomes for children, young people and their families. * Commenced the trial of Viewpoint Interactive as a tool for eliciting the views and wishes of children and young people in out of home care. * Commenced the development of a Child Health Passport for children and young people in care. The Child Health Passport will move with the child or young person and will ensure that carers have access to key health information about the child or young person in their care. |

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| **“** | Northern Territory Government comments | **”** |
| The 2013-14 financial year has been marked by a system that continues to experience significant growth. The number of child protection notifications received by the Northern Territory Department of Children and Families (DCF) increased by 30 per cent, with the number of children in out-of-home care increasing by 25 per cent.  In response to continued growth in demand for services, DCF implemented a number of key reforms designed to enhance its corporate governance and improve the organisational accountability for performance. Key foundational documents focussing on practice performance and client outcomes were established. Changes were designed to improve operational accountability and performance, by connecting work units with shared outcomes and providing higher levels of executive management of key functional areas.  In November 2013, the DCF organisational structure was amended to introduce the Out of Home Care and Professional Practice Divisions. These changes were designed to improve operational accountability and performance, by connecting work units with shared outcomes and providing higher levels of executive management of key functional areas.  The formation of an Out of Home Care Division increased the focus on the Department’s recruitment and support of kinship and foster carers, placement decision making and operational management of residential care. Key changes included establishing a centralised placement process, awarding a panel contract to deliver residential care services for young people aged 12 to 18 years, and amending a new care plan template and procedure to streamline the care planning processes and emphasise engagement with children in order to achieve better child protection outcomes.  In January 2014, DCF launched its new Strategic Plan. The Plan focuses the Department on its core objectives as a child protection agency and establishes strategic priorities to 2016-17. A range of legislative amendments including the Charter of Rights for Children in Out of Home Care also took effect in January 2014. The Charter was introduced to provide clearer and stronger statements of the quality of service children in care must receive. The Charter binds DCF and care providers to improved quality of care.  DCF also launched its Child Protection Framework and Standards of Professional Practice in April 2014, which both emphasise the importance of consistent decision making and encourage practitioners to meet key practice benchmarks. The Standards of Professional Practice set out the essential requirements for delivering effective, professional and accountable care and protection to vulnerable children. |

## 15.6 Definitions of key terms

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| **Activity Group 1 (pathways)**  Receipt and assessment of initial information about a potential protection or support issue | | Activities that are typically associated with receipt and assessment of initial information including receipt and recording of information, review of department databases, initial assessment of information and decisions about the appropriate response. This activity can also include consultation, with possible provision of advice. Activities by non-government organisations (NGO) may be included if appropriate. |
| **Activity Group 2 (pathways)**  Provision of generic family support services | | Activities that are typically associated with provision of lower level family support services at various stages including identification of family needs, provision of support services and diversionary services, some counselling and active linking of the family to support networks. Services are funded by government but can be delivered by either the relevant agency or a NGO. This bundle of services does not involve planned follow-up by the relevant agency after initial service delivery. The services will be delivered under voluntary arrangements between the relevant agency and family. Clients may receive these services more than once. |
| **Activity Group 3 (pathways)**  Provision of intensive family support services | | Activities that are typically associated with provision of complex or intensive family support services including provision of therapeutic and in-home supports such as counselling and mediation, modelling of positive parenting strategies, referrals to intensive support services that may be provided by NGOs, advocacy on behalf of clients and intensive support for a family in a residential setting. This includes protection and treatment support services. These services may be provided if diversionary services are inappropriate to the case and may lead to statutory services being provided to the client. |
| **Activity Group 4 (pathways)**  Secondary information gathering and assessment | | Activities that are typically associated with secondary information gathering and assessment are currently counted as ‘investigations’ in the Report on Government Services. As part of this activity group a decision may be made to substantiate or not substantiate. Information gathering activities include:   * sighting the child * contacting people with relevant information about the child or family (for example, teachers, police, support services) * interviewing the child, sibling(s) and parents * observing family interactions * obtaining assessments of the child and/or family * conducting family group conferences * liaising with agencies providing services to the child and family * recording a substantiation or non-substantiation decision * case conferences with partners and contributors in the investigation and assessment process. |
| **Activity Group 5 (pathways)**  Provision of short-term protective intervention and coordination services for children not on an order | | Activities that are typically associated with provision of short-term protective intervention and coordination services including:   * working with the family to address protective issues * developing networks of support for the child * monitoring and reviewing the safety of the child * monitoring and reviewing family progress against case planning goals * case conferences with agencies providing services to the child and/or family, internal discussions and reviews * specialist child-focused therapeutic support. |
| **Activity Group 6 (pathways)**  Seeking an order | | Activities that are typically associated with seeking orders (court orders or voluntary/administrative orders) including:   * preparing applications for the order * preparing reports for the court * obtaining assessment reports to submit to the court * informing parties to the court proceedings, including parents, the child, and lawyers * informing and briefing legal counsel or internal court groups * going through internal pre-court review processes * attending court * conducting family group conferences. |
| **Activity Group 7 (pathways)**  Provision of protective intervention, support and coordination services for children on an order | | Activities that are typically associated with provision of longer-term protective intervention and coordination services including:   * monitoring the child or young person’s progress and development (for example, social development and education progress) and undertaking activities that facilitate progress and development * meeting any specific requirements of any court order * reviewing appropriateness of the order for the circumstances of the child or young person. This usually occurs at intervals established by the court or in legislation * reporting back to court * long term cases involving out-of-home care. |
| **Activity Group 8 (pathways)**  Provision of out‑of‑home care services | | Activities that are typically associated with provision of out-of-home care services including:   * finding suitable placement(s) for the child * assisting the child or young person to maintain contact with his/her family * in some cases, staff payments for recruiting and training carers * assessing suitability of potential kinship carers * assisting the child or young person to maintain contact with their family * working to return the child home * assisting the child or young person as they prepare to leave care as the end of the order approaches. |
| **Care and protection orders** | | Care and protection orders are legal orders or arrangements which give child protection departments some responsibility for a child’s welfare. The scope of departmental involvement mandated by a care and protection order is dependent on the type of order, and can include:   * responsibility for overseeing the actions of the person or authority caring for the child * reporting or giving consideration to the child’s welfare (for example, regarding the child’s education, health, religion, accommodation and financial matters).   Types of care and protection orders:   * Finalised guardianship or custody orders – involve the transfer of legal guardianship to the relevant state or territory department or non-government agency. These orders involve considerable intervention in a child’s life and that of his or her family, and are sought only as a last resort. Guardianship orders convey responsibility for the welfare of a child to a guardian (for example, regarding a child’s education, health, religion, accommodation and financial matters). Guardianship orders do not necessarily grant the right to the daily care and control of a child, or the right to make decisions about the daily care and control of a child, which are granted under custody orders. Custody orders generally refer to orders that place children in the custody of the state or territory, or department responsible for child protection or non-government agency. These orders usually involve the child protection department being responsible for the daily care and requirements of a child, while his or her parent retains legal guardianship. Custody alone does not bestow any responsibility regarding the long-term welfare of the child. * Finalised third party parental responsibility orders – transfer all duties, powers, responsibilities and authority parents are entitled to by law, to a nominated person(s) considered appropriate by the court. The nominated person may be an individual such as a relative or an officer of a state or territory department. Third party parental responsibility may be ordered when a parent is unable to care for a child, and as such parental responsibility is transferred to a relative. ‘Permanent care orders’ are an example of a third party parental responsibility order and involve the transfer of guardianship to a third party carer. It can also be applied to the achievement of a stable arrangement under a long-term guardianship order to 18 years without guardianship being transferred to a third party. These orders are only applicable in some jurisdictions. * Finalised supervisory orders – give the department responsible for child protection some responsibility for a child’s welfare. Under these orders, the department supervises and/or directs the level and type of care that is to be provided to the child. Children under supervisory orders are generally under the responsibility of their parents and the guardianship or custody of the child is unaffected. Finalised supervisory orders are therefore less interventionist than finalised guardianship orders but require the child’s parent or guardian to meet specified conditions, such as medical care of the child. * Interim and temporary orders – generally cover the provision of a limited period of supervision and/or placement of a child. Parental responsibility under these orders may reside with the parents or with the department responsible for child protection. Orders that are not finalised (such as an application to a court for a care and protection order) are also included in this category, unless another finalised order is in place. * Administrative arrangements – are agreements with relevant child protection departments, which have the same effect as a court order in transferring custody or guardianship. These arrangements can also allow a child to be placed in out-of-home care without going through the courts.   Children are counted only once, even if they are on more than one care and protection order. |
| **Child** | | A person aged 0–17 years (including, at times, unborn children). |
| **Child at risk** | | A child for whom no abuse or neglect can be substantiated but where there are reasonable grounds to suspect the possibility of prior or future abuse or neglect, and for whom continued departmental involvement is considered warranted. |
| **Child concern reports** | | Reports to departments responsible for child protection regarding concerns about a child, where there is no indication that a child may have been, or is at risk of being, harmed through abuse or neglect. This may include concerns about a child’s welfare related to the quality of his or her home environment or the standard of care that he or she is receiving. |
| **Children in out‑of‑home care during the year** | | The total number of children who were in at least one out-of-home care placement at any time during the year. A child who is in more than one placement is counted only once. |
| **Comparability** | | Data are considered comparable if, (subject to caveats) they can be used to inform an assessment of comparative performance. Typically, data are considered comparable when they are collected in the same way and in accordance with the same definitions. For comparable indicators or measures, significant differences in reported results allow an assessment of differences in performance, rather than being the result of anomalies in the data. |
| **Completeness** | | Data are considered complete if all required data are available for all jurisdictions that provide the service. |
| **Dealt with by other means** | | A notification that is responded to by means other than an investigation, such as the provision of advice or referral to services. This category can also include notifications where the decision to investigate has not been reached (that is, notifications ‘in process’). |
| **Exited out‑of‑home care** | | Where a child does not return to care within 60 days. |
| **Family based care** | | Home-based care (see ‘Out-of-home care’). |
| **Family group homes** | | Family group homes are care settings that provide care to children in a departmentally or community sector agency provided home. These homes have live-in, non-salaried carers who are reimbursed and/or subsidised for the provision of care. |
| **Foster care** | | Care of a child who is living apart from his or her natural or adoptive parents in a private household, by one or more adults who act as ‘foster parents’ and are paid a regular allowance by a government authority or non-government organisation for the child’s support. The authorised department or non-government organisation provides continuing supervision or support while the child remains in the care of foster parents. Foster parents are chosen from a list of people registered, licensed or approved as foster parents by an authorised department or non-government organisation. |
| **Foster parent** | | Any person (or such a person’s spouse) who is being paid a foster allowance by a government or non-government organisation for the care of a child (excluding children in family group homes). |
| **Guardian** | | Any person who has the legal and ongoing care and responsibility for the protection of a child. |
| **Aboriginal and Torres Strait Islander person** | | Person of Aboriginal or Torres Strait Islander descent who identifies as being an Aboriginal or Torres Strait Islander and is accepted as such by the community with which he or she lives. |
| **Investigation** | | An investigation of child abuse and neglect that involves identifying harm or risk of harm to the child, determining an outcome and assessing protective needs. It includes the interviewing or sighting of the subject child where practicable. |
| **Investigation finalised** | | Where an investigation is completed and an outcome of ‘substantiated’ or ‘not substantiated’ is recorded by 31 August. |
| **Investigation in process** | | Where an investigation is commenced but an outcome is not recorded by 31 August. |
| **Investigation closed – no outcome possible** | | Where an investigation is commenced but is not able to be finalised in order to reach the outcome of ‘substantiated’ or ‘not substantiated’. These files would be closed for administrative purposes. This may happen in instances where the family has relocated. |
| **Length of time in continuous out‑of‑home care** | | The length of time for which a child is in out-of-home care on a continuous basis. Any break of 60 days or more is considered to break the continuity of the placement. Where a child returns home for less than 60 days and then returns to the former placement or to a different placement, this does not affect the length of time in care. Holidays or authorised absences (less than 60 days) in a placement do not break the continuity of placement. |
| **Non-respite care** | | Out-of-home care for children for child protection reasons. |
| **Notification** | | Contact with an authorised department by persons or other bodies making allegations of child abuse or neglect, or harm to a child. Notifications can be counted at different points in the response to a report, ranging from the point of initial contact with the source of the report to the end of a screening and decision making process. |
| **Other relative** | | A grandparent, aunt, uncle or cousin, whether the relationship is half, full, step or through adoption, and can be traced through or to a person whose parents were not married to each other at the time of the child’s birth. This category includes members of Aboriginal communities who are accepted by that community as being related to the child. |
| **Out-of-home care** | Overnight care, including placement with relatives (other than parents) where the government makes a financial payment. Includes care of children in legal and voluntary placements (that is, children on and not on a legal order) but excludes placements solely funded by disability services, psychiatric services, youth justice facilities and overnight child care services.  There are five main out-of-home care placement types:   * Residential care – where placement is in a residential building with paid staff. * Family group homes – provide care to children in a departmentally or community sector agency provided home. These homes have live-in, non-salaried carers who are reimbursed and/or subsidised for the provision of care. * Home-based care – where placement is in the home of a carer who is reimbursed (or who has been offered but declined reimbursement) for expenses for the care of the child. This is broken down into three subcategories: (1) *relative/kinship care* – where the caregiver is a relative (other than parents), considered to be family or a close friend, or is a member of the child or young person’s community (in accordance with their culture) who is reimbursed (or who has been offered but declined reimbursement) by the State/Territory for the care of the child. For Aboriginal and Torres Strait Islander children, a kinship carer may be another Aboriginal and Torres Strait Islander person who is a member of their community, a compatible community or from the same language group; (2) *foster care* – where the care is authorised and carers are reimbursed (or were offered but declined reimbursement) by the state/territory and supported by an approved agency. There are varying degrees of reimbursement made to foster carers; (3) *other* – home-based care which does not fall into either of the above categories. * Independent living – including private board and lead tenant households. * Other – includes placements that do not fit into the above categories and unknown living arrangements. This includes boarding schools, hospitals, hotels/motels and defence force. | |
| **Relatives/kin** | People who are family or close friends, or are members of a child or young person’s community (in accordance with their culture) who are reimbursed (or who have been offered but declined reimbursement) by the State/Territory for the care of a child. For Aboriginal and Torres Strait Islander children, a kinship carer may be another Aboriginal and Torres Strait Islander person who is a member of their community, a compatible community or from the same language group. | |
| **Respite care** | Respite care is a form of out-of-home care that is used to provide short-term accommodation for children and young people where the intention is for the child to return to their prior place of residence. Respite placements include: *respite from birth family*, where a child is placed in out-of-home care on a temporary basis for reasons other than child protection (for example, the child’s parents are ill or unable to care for them on a temporary basis; or as a family support mechanism to prevent entry into full time care, as part of the reunification process, as a shared care arrangement); *respite from placement*, where a child spends regular, short and agreed periods of time with another carer other than their primary carer. | |
| **Stability of placement** | Number of placements for children who exited out-of-home care and did not return within 60 days. Placements exclude respite or temporary placements lasting less than 7 days. Placements are counted separately where there is:   * a change in the placement type — for example, from a home‑based to a facility-based placement * within placement type, a change in venue or a change from one home-based placement to a different home-based placement.   Each placement should only be counted once. A return to a previous placement is not included as a different placement. A return home is not counted as a placement, although if a child returns home for 60 days or more they are considered to have exited care. | |
| **Substantiation** | Notification for which an investigation concludes there is reasonable cause to believe that the child has been, is being or is likely to be abused, neglected or otherwise harmed. It does not necessarily require sufficient evidence for a successful prosecution and does not imply that treatment or case management is, or is to be, provided. | |

## 15.7 List of attachment tables

Attachment tables are identified in references throughout this chapter by a ‘15A’ prefix (for example, table 15A.1). Attachment tables are available on the Review website (www.pc.gov.au/gsp).

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| **Table** **15A.1** | State and Territory Government real recurrent expenditure on child protection and  out-of-home care services (2013-14 dollars) |
| **Table** **15A.2** | State and Territory Government real recurrent expenditure on child protection services, per notification, per investigation and per substantiation (2013-14 dollars) |
| **Table** **15A.3** | State and Territory Government real recurrent expenditure on out-of-home care services (2013-14 dollars) |
| **Table** **15A.4** | Comparability of government recurrent expenditure — items included, 2013-14 |
| **Table** **15A.5** | Child protection notifications, investigations and substantiations by Indigenous status |
| **Table** **15A.6** | Number of children admitted to and discharged from care and protection orders by Indigenous status |
| **Table** **15A.7** | Number of children on care and protection orders by type of order and Indigenous status, at 30 June |
| **Table** **15A.8** | Children in notifications, investigations and substantiations and on care and protection orders, per 1000 children in the target population, and by Indigenous status |
| **Table** **15A.9** | Proportion of investigations substantiated |
| **Table** **15A.10** | Children who were the subject of a decision not to substantiate during the year and who were also the subject of a subsequent substantiation within 3 and/or 12 months |
| **Table** **15A.11** | Children who were the subject of a substantiation during the year and who were also the subject of a subsequent substantiation within 3 and/or 12 months |
| **Table** **15A.12** | Proportion of children on guardianship/custody orders achieving the national reading and numeracy benchmarks, Year 3 level (per cent) |
| **Table 15A.13** | Proportion of children on guardianship/custody orders achieving the national reading and numeracy benchmarks, Year 5 level (per cent) |
| **Table** **15A.14** | Proportion of children on guardianship/custody orders achieving the national reading and numeracy benchmarks, Year 7 level (per cent) |
| **Table** **15A.15** | Response time to commence investigation |
| **Table** **15A.16** | Response time to complete investigation |
| **Table** **15A.17** | Children with documented case plans, by Indigenous status, at 30 June |
| **Table** **15A.18** | Children in out-of-home care: number and rate per 1000 children aged 0–17 years by Indigenous status |
| **Table** **15A.19** | Children in out-of-home care by Indigenous status and placement type, 30 June (number) |
| **Table** **15A.20** | Children in out-of-home care by Indigenous status and whether on a care and protection order, 30 June (number) |
| **Table** **15A.21** | Children in out-of-home care by Indigenous status and length of time in continuous  out-of-home care, 30 June (number) |
| **Table** **15A.22** | Children who exited out-of-home care during the year by Indigenous status and length of time spent in out-of-home care (number) (a), (b), (c), (d) |
| **Table** **15A.23** | Children in out-of-home care placed with relatives/kin by Indigenous status, 30 June |
| **Table** **15A.24** | Aboriginal and Torres Strait Islander children in out-of-home care by relationship of caregiver, 30 June |
| **Table** **15A.25** | Children aged under 12 years in out-of-home care and in a home-based placement, by Indigenous status, 30 June |
| **Table** **15A.26** | Children on a care and protection order and exiting out-of-home care during the year by number of placements, by the length of time in out-of-home care (number) |
| **Table** **15A.27** | Children in out-of-home care by whether they were the subject of a child protection substantiation and the person believed responsible was living in the household providing out-of-home care |
| **Table** **15A.28** | Children in out-of-home care who were the subject of a substantiation of sexual abuse, physical abuse, emotional abuse or neglect |
| **Table** **15A.29** | Out-of-home care expenditure per placement night |
| **Table** **15A.30** | Intensive family support services: total real recurrent expenditure, number of children aged 0-17 years commencing intensive family support services and real recurrent expenditure per child (2013-14 dollars) |
| **Table 15A.31** | Intensive family support services: number of children aged 0–17 years commencing intensive family support services by Indigenous status and gender |
| **Table 15A.32** | Intensive family support services: number of children aged 0–17 years commencing intensive family support services by age |
| **Table 15A.****33** | Intensive family support services: number of children aged 0–17 years in intensive family support services by living situation at commencement of the program |
| **Table 15A.34** | Target population data used for annual data, December ('000) |
| **Table 15A.35** | Target population data used for end of financial year data, March ('000) |

## 15.8 References

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