# 16 Child protection services

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| Attachment tables |
| Attachment tables are identified in references throughout this chapter by a ‘16A’ prefix (for example, table 16A.1) and are available from the website at www.pc.gov.au/rogs/2017. |
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This chapter reports on the performance of child protection services across Australia.

All abbreviations used in this Report are available in a complete list in volume A: Approach to performance reporting.

## 16.1 Profile of child protection services

### Service overview

Child protection systems provide services to protect children and young people aged 0‑17 years who are at risk of abuse and neglect within their families, or whose families do not have the capacity to protect them.

Figure 16.1 is a simplified representation of the statutory child protection system, depicting common pathways through the system and referrals to support services.

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| Figure 16.1 The child protection service system**a, b, c, d** |
| |  | | --- | | Figure 16.1 The child protection service system  More details can be found within the text surrounding this image. | |
| 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 (green = available; white = not available). d AG = Activity Group. See section 16.4 for detailed definitions. |
| *Source*: State and Territory governments (unpublished). |
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### Roles and responsibilities

State and Territory governments have responsibility for funding and/or providing child protection services in Australia. Each jurisdiction has its own legislation that determines the policies and practices of its child protection system, and while this legislation varies in detail, its intent is similar across jurisdictions.

Other government service systems can have a role in child protection, including:

* mandatory reporting responsibilities for some jurisdictions
* education and child care services, which in some jurisdictions includes 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 services, which investigate serious allegations of child abuse and neglect, particularly criminal matters, and may also work on child protection assessments
* courts, which decide whether a child will be placed on an order.

This chapter reports on services provided by State and Territory governments to promote family wellbeing and to protect children, specifically family support services; intensive family support services; child protection services and out‑of‑home care services (see section 16.4 for definitions).

### Size and scope

Nationally, the following number of children aged 0–17 years received child protection services during 2015‑16 (tables 16A.9 and 16A.17):

* 225 487 children were the subject of child protection *notifications*, the equivalent of 42.0notifications per 1000 children in the population.
* 107 348 children were the subject of a *finalised investigation*, the equivalent of 20.0 finalised investigations per 1000 children in the population.
* 45 714 children were the subject of a *substantiation*, the equivalent of 8.5 substantiations per 1000 children in the population.
* 51 972 children were on *care and protection orders*, the equivalent of 9.6 children on care and protection orders per 1000 children in the population.
* 46 448 children were in *out‑of‑home care*, the equivalent of 8.6 children in out‑of‑home care per 1000 children in the population.

Aboriginal and Torres Strait Islander children are overrepresented in the child protection system (tables 16A.9 and 16A.17). For further details see the performance indicator ‘disproportionality’ in section 16.3.

### Funding

Total recurrent expenditure on child protection, out‑of‑home care, family support services and intensive family support services was $4.8 billion nationally in 2015‑16 (a real increase of 7.7 per cent from 2014‑15) of which out‑of‑home care services accounted for the majority (57.4 per cent, or $2.7 billion) (table 16A.1).

In 2015‑16, real recurrent expenditure on all child protection services per child aged   
0–17 years in the population was $883 nationally (figure 16.2).

| Figure 16.2 Total real recurrent expenditure on all child protection services, per child (2015‑16 dollars)**a** |
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| | Figure 16.2 Total real recurrent expenditure on all child protection services, per child (2015-16 dollars)  More details can be found within the text surrounding this image. | | --- | |
| a See table 16A.1 for detailed footnotes and caveats. |
| *Source*: State and Territory governments (unpublished); table 16A.1. |
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At present, there are some differences across jurisdictions in the calculation of child protection expenditure (see tables 16A.3 and 16A.4 for details).

## 16.2 Framework of performance indicators

The framework of performance indicators for child protection services is based on shared government objectives (box 16.1).

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| Box 16.1 Objectives for child protection services |
| Child protection services aim to promote child and family wellbeing by:   * enabling families to care for, and protect, children and young people * protecting children and young people who are at risk of abuse and neglect within their families or whose families do not have the capacity to provide care and protection, and * supporting children and young people in the child protection system to reach their potential.   To achieve these aims, governments seek to provide child protection services that:   * are responsive, ensuring that notifications are responded to, and investigations are completed, in a timely and appropriate manner * are targeted to children and young people who are at greatest risk * support and strengthen families so that children can live in a safe and stable family environment * 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, with an emphasis on safety, stability and permanency in children's living arrangements * meet the needs of individual children and young people in the child protection system.   Governments aim for child protection services to meet these objectives in an equitable and efficient 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 16.3).

The performance indicator framework shows which data are complete and comparable in the 2017 Report. For data that are not considered directly comparable, text includes relevant caveats and supporting commentary. Chapter 1 discusses data comparability, data completeness and information on data quality from a Report‑wide perspective. In addition to section 16.1, the Report’s statistical context chapter (chapter 2) contains data that may assist in interpreting the performance indicators presented in this chapter.

Improvements to performance reporting for child protection services are ongoing and will include identifying indicators to fill gaps in reporting against key objectives and improving the comparability and completeness of data.

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| Figure 16.3 Child protection services performance indicator framework |
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## 16.3 Key performance indicator results

Different delivery contexts, locations and clients can affect the equity, effectiveness and efficiency of child protection services. Performance indicator results may differ from similar data included in some jurisdictions’ annual reports due to different counting rules applied for these jurisdictional reports.

### 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). Output information is also critical for equitable, efficient and effective management of government services.

### Equity

‘Disproportionality’ is an indicator of the governments’ objective to provide child protection services in an equitable manner (box 16.2).

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| Box 16.2 Disproportionality |
| ‘Disproportionality’ is defined as the extent to which a group’s representation in the child protection services system is proportionate to their representation in the child protection services target population (0–17 years). Disproportionality for Aboriginal and Torres Strait Islander children is calculated by dividing the proportion of children in the child protection system who are Aboriginal and Torres Strait Islander children by the proportion of children in the target population who are Aboriginal and Torres Strait Islander children.  The disproportionality ratio is calculated as follows:  If the group’s representation is proportionate to their representation in the target population, the disproportionality ratio will equal 1.0. For example, if five per cent of all children in the child protection system are Aboriginal and Torres Strait Islander children, and five per cent of all children in the target population (0–17 years) are Aboriginal and Torres Strait Islander children then the disproportionality ratio will be 1.0. |
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| Box 16.2 (continued) |
| This measure comprises six ratios for components of the child protection services system (see figure 16.1 for a simplified representation of the components):   * notifications * commencing intensive family support services * investigations and substantiations (each reported separately) * care and protection orders * out-of-home care.   Disproportionality provides an indication of the extent to which government’s child protection system policies and practices result in differences in the supports and services delivered on the basis of a group’s characteristics. A group’s representation should be proportional to their need for supports and services. Higher need may result in necessary disproportionality (ie, ratio greater than 1.0). If risk factors and need are the same across groups, then neither overrepresentation or underrepresentation is desirable (that is, the disproportionality ratio should be 1.0). Both overrepresentation and underrepresentation can have undesirable consequences.  Disproportionality can reflect the uneven distribution of structural and relative disadvantage throughout the population, in addition to risk factors including economic and social factors, and can indicate a greater need for appropriate supports and services. At the same time disproportionality can reflect biases in the system that should be avoided.  The six disproportionality ratios can be influenced by a range of factors and might fluctuate because of policy, funding and practice changes, such as increased investment in intensive family support and services to divert children from care, 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.  Identification of Indigenous status may lead to data quality issues for this indicator, in particular underidentification of Indigenous status which is likely to result in the disproportionality ratios understating Aboriginal and Torres Strait Islander children’s representation in the child protection system. Data should be considered in conjunction with the proportion of children for whom Indigenous status is recorded as not stated. The number of children for whom Indigenous status is recorded as not stated varies across states and territories (refer to tables 16A.9; 16A.18 and 16A.30).  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) * incomplete (subject to caveats) for the current reporting period. Intensive family support service data for Tasmania and the NT were unavailable. |
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The 2015‑16 disproportionality ratios for Aboriginal and Torres Strait Islander children vary within jurisdictions across each of the six service types (figure 16.4 and 16A.5).

| Figure 16.4 Disproportionality ratios for Aboriginal and Torres Strait Islander children in the child protection system, by service type, 2015‑16a, b |
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| a **Nfns:** Notifications; **IFSS:** Intensive Family Support Services; **Invns:** Investigations; **Subns:** Substantiations; **C&P:** Care and Protection Orders; **OOHC:** Out‑of‑home care. b See box 16.2 and tables 16A.5; 16A.9; 16A.18; 16A.30 and 16A.34 for detailed definitions, footnotes and caveats. |
| *Source*: AIHW data collection (unpublished); tables 16A.5; 16A.9; 16A.18; 16A.30 and 16A.34. |
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#### **Effectiveness**

#### Child protection services — response times

‘Response times’ is an indicator of governments’ objective to provide child protection services that are responsive, ensuring that notifications are responded to, and investigations are completed, in a timely and appropriate manner (box 16.3).

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| Box 16.3 Response times |
| ‘Response times’ is defined by two measures:   * response time to *commence* investigations, defined as the proportion of investigations commenced within specified time periods, where 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 proportion of investigations completed within specified time periods, where 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).   A higher and increasing proportion of investigations commenced and completed in shorter time periods is desirable.  The length of time between recording a notification and commencing an investigation indicates the promptness in responding to child protection concerns. The length of time between recording a notification and completing an investigation indicates the effectiveness in conducting investigations in a timely manner.  Data reported for these measures are:   * comparable (subject to caveats) within some jurisdictions over time, but are not comparable across jurisdictions * complete (subject to caveats) for the current reporting period. All required 2015‑16 data were available. |
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Response times to commence and complete investigations varied across jurisdictions in 2015‑16. Nationally in 2015‑16, 62.2 per cent of investigations were commenced within seven days of notification (figure 16.5(a)) and 40.7 per cent of investigations were completed in 28 days or less — around one in five investigations (19.4 per cent) took longer than 90 days to complete (figure 16.5(b)). These patterns are broadly consistent with available time series data (tables 16A.14–15).

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| Figure 16.5 Proportion of investigations commenced and completed, by time taken, 2015‑16**a** |
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| a See box 16.3 and tables 16A.14–15 for detailed definitions, footnotes and caveats. |
| *Source*: AIHW data collection (unpublished); tables 16A.14–15. |
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#### Child protection services — substantiation rate

‘Substantiation rate’ is an indicator of governments’ objective that child protection services are targeted to children and young people who are at greatest risk (box 16.4).

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| Box 16.4 Substantiation rate |
| ‘Substantiation rate’ is defined as the proportion of finalised investigations where abuse or neglect, or risk of abuse or neglect, was confirmed.  The substantiation rate provides an indication of the extent to which services were targeted to those at greatest risk, thereby avoiding the human and financial costs of an investigation where no abuse or neglect 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 substantiation rate 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.  Varying thresholds for recording a substantiation across jurisdictions should also be considered when interpreting data for this indicator (see section 16.4).  Data reported for this indicator are:   * comparable (subject to caveats) within some jurisdictions over time, but are not comparable across jurisdictions * complete (subject to caveats) for the current reporting period. All required 2015‑16 data were available. |
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The proportion of finalised child protection investigations that were substantiated varied across jurisdictions and over time (figure 16.6 and table 16A.10).

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| Figure 16.6 Proportion of finalised child protection investigations that were substantiated**a** | |
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| a See box 16.4 and table 16A.10 for detailed definitions, footnotes and caveats. | |
| *Source*: AIHW data collection (unpublished); table 16A.10. | |
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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 quality care for children and young people aged 0–17 years who cannot live with their parents for reasons of safety or family crisis, with an emphasis on safety, stability and permanency in children’s living arrangements (box 16.5).

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| Box 16.5 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 (data for this measure are experimental) * 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.   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 (ie, not limited to a person living in the household), 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 low or decreasing proportion of substantiations for both measures is desirable. Care should be taken when interpreting this indicator as the threshold for substantiating abuse or neglect or risk involving a child in care is generally lower than that for 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. * incomplete for the current reporting period. All required 2015‑16 data were not available for NSW and Victoria (which did not provide data for the first measure), and SA and the NT (which did not provide data for the second measure). |
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Experimental data for the proportion of children in out‑of‑home care who were the subject of a substantiation of abuse or neglect (from notifications in the current year) varied across jurisdictions (table 16A.27). Data on the proportions where the person responsible was living in the household are summarised in table 16.1 (16A.26).

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| Table 16.1 Children in out‑of‑home care who were the subject of a substantiation and the person responsible was living in the household, 2015‑16**a** |
| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | Unit | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | | Children in care who were the subject of a substantiation and the person responsible was in the household | no. | 95 | 163 | 163 | 5 | na | 7 | 12 | na | | Children aged 0–17 years in at least one care placement during the year | no. | 20 316 | 12 473 | 10 709 | 4 967 | 3 671 | 1 300 | 879 | 1 299 | | Proportion | % | 0.5 | 1.3 | 1.5 | 0.1 | na | 0.5 | 1.4 | na | |
| a See box 16.5 and table 16A.26 for detailed definitions, footnotes and caveats. **na** Not available. |
| *Source*: State and Territory governments (unpublished); table 16A.26. |
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#### Out‑of‑home care — stability of placement

‘Stability of placement’ is an indicator of governments’ objective 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, with an emphasis on safety, stability and permanency in children’s living arrangements (box 16.6).

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| Box 16.6 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 indicators.  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. Further, for the 2014‑15 period onwards, the counting rules for this indicator were modified to clarify that all placements lasting less than seven days should be excluded from the count of number of placements.  Data reported for this indicator are:   * comparable (subject to caveats) within some jurisdictions over time but are not comparable across jurisdictions * complete for the current reporting period. All required 2015‑16 data were available. |
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Nationally in 2015‑16, 87.5 per cent of children on a care and protection order who exited care within 12 months experienced one or two placements (figure 16.7(a)), whilst for children who had been in out‑of‑home care 12 months or more this proportion was lower at 46.3 per cent indicating they tended to have more placements (figure 16.7(b)) (table 16A.25).

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| Figure 16.7 Proportion of children on an order exiting care who had one or two placements**a, b**  **(a) Exiting care after less than 12 months** |
| |  | | --- | | Figure 16.7 Proportion of children on an order exiting care who had one or two placements  (a) Exiting care after less than 12 months  More details can be found within the text surrounding this image. | |
| **(b) Exiting care after 12 months or more**  Figure 16.7 Proportion of children on an order exiting care who had one or two placements  (b) Exiting care after 12 months or more  More details can be found within the text surrounding this image.  a See box 16.6 and table 16A.25 for detailed definitions, footnotes and caveats. b Data were not available for WA between 2010‑11 and 2013‑14. |
| *Source*: AIHW data collection (unpublished); table 16A.25. |
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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 that meet the needs of individual children and young people in the child protection system (box 16.7).

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| Box 16.7 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 of children aged under 12 years in out‑of‑home care that are placed in home‑based care is desirable.  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 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 data for 30 June 2016 were available. |
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Nationally at 30 June 2016, the proportion of all children aged under 12 years in care who were placed in home‑based care was 97.4 per cent. Proportions were similar for Aboriginal and Torres Strait Islander and non‑Indigenous children, and have been consistent across available time series data (table 16A.24).

#### Out‑of‑home care — placement maintains connections

‘Placement maintains connections’ is an indicator of governments’ objective to provide services that meet the needs of individual children and young people in the child protection system (box 16.8).

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| Box 16.8 Placement maintains connections |
| ‘Placement maintains connections’ is defined by four measures:   * *placement with relatives or kin* – 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 * *placement in accordance with the Aboriginal and Torres Strait Islander child placement principle (ATSICPP)* – the proportion of Aboriginal and Torres Strait Islander children in  out‑of‑home care placed with the child’s extended family, Aboriginal and Torres Strait Islander community or other Aboriginal and Torres Strait Islander people * *local placement* – the proportion of children in out‑of‑home care attending the same school that they were attending before entering out‑of‑home care * *placement with sibling* – 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.   High or increasing rates for all four measures are desirable, though a placement decision needs to consider all factors regarding the child’s safety and wellbeing and therefore may involve weighing up the measures separately. Placing children so that connections with family, kin and/or community can be maintained or enhanced is generally the preferred out‑of‑home care placement option due to the increased continuity, familiarity and stability for the child, and the association with improved long‑term outcomes. However, placements with family, kin and/or community may not always be the best option.  The measure ‘placement in accordance with the ATSICPP’ should be interpreted with care as it is a proxy, reporting the placement outcomes of Aboriginal and Torres Strait Islander children rather than compliance with the principle.  Identification of Indigenous status may lead to data quality issues for this indicator, in particular underidentification of Indigenous status which may understate rates by Indigenous status.  Data for the measures ‘local placement’ and ‘placement with sibling’ are under development and are not available for this report.  Data reported for the ‘placement with relatives or kin’ and ‘placement in accordance with the Aboriginal and Torres Strait Islander child placement principle’ measures are:   * comparable (subject to caveats) across jurisdictions and over time * complete for the current reporting period. All required data for 30 June 2016 were available. |
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Nationally at 30 June 2016, the proportion of children placed with relatives or kin was 48.7per cent, with the proportion slightly higher for Aboriginal and Torres Strait Islander children (49.9 per cent) than for non‑Indigenous children (48.1 per cent) (figure 16.8).

The proportion of children placed with relatives or kin has increased 4.4 percentage points since 30 June 2007, though has decreased 5.2 percentage points over the same period for Aboriginal and Torres Strait Islander children (table 16A.22).

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| Figure 16.8 Proportion of children in out‑of‑home care placed with relatives/kin, by Indigenous status, at 30 June 2016**a** |
| |  | | --- | | Figure 16.8 Proportion of children in out of home care placed with relatives/kin, by Indigenous status, at 30 June 2016  More details can be found within the text surrounding this image. | |
| a See box 16.8 and table 16A.22 for detailed definitions, footnotes and caveats. |
| *Source*: AIHW data collection (unpublished); table 16A.22. |
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The ATSICPP comprises five domains; prevention, partnership, placement, participation and connection (SNAICC 2013; DSS 2015). The placement domain of the ATSICPP specifies placement of an Aboriginal or Torres Strait Islander child in out‑of‑home care is prioritised in the following way:

* placement with Aboriginal or Torres Strait Islander relatives or extended family members, or other relatives or extended family members
* with Aboriginal and Torres Strait Islander family‑based carers.

If the preferred options are not available, the child may be placed with a non‑Indigenous carer or in a residential setting. If the child is not placed with their extended Aboriginal or Torres Strait Islander family, the placement must be within close geographic proximity to the child’s family. All jurisdictions have adopted the ATSICPP in both legislation and policy.

Nationally at 30 June 2016, 52.1 per cent of Aboriginal and Torres Strait Islander children in out‑of‑home care were placed with relatives/kin (this proportion differs to the first measure as it excludes those in independent living). A further 15.8 per cent were placed with other Aboriginal and Torres Strait Islander carers or in Aboriginal and Torres Strait Islander residential care. Proportions varied across jurisdictions (figure 16.9). Nationally, the proportion of Aboriginal and Torres Strait Islander children in out‑of‑home care who were placed with relatives/kin, other Aboriginal and Torres Strait Islander carers, or in Aboriginal and Torres Strait Islander residential care has decreased over the past 10 years (from 75.3 per cent at 30 June 2007 to 67.9 per cent at 30 June 2016) (table 16A.23).

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| Figure 16.9 Placement of Aboriginal and Torres Strait Islander children in out‑of‑home care, at 30 June 2016**a** |
| |  | | --- | | Figure 16.9 Placement of Aboriginal and Torres Strait Islander children in out of home care, at 30 June 2016  More details can be found within the text surrounding this image. | |
| a See box 16.8 and table 16A.23 for detailed definitions, footnotes and caveats. |
| *Source*: AIHW data collection (unpublished); table 16A.23. |
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#### Out‑of‑home care — children with current documented case plans

‘Children with current documented case plans’ is an indicator of governments’ objective to provide services that meet the needs of individual children and young people in the child protection system (box 16.9).

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| Box 16.9 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) developed between a family and an agency on the basis of an assessment process. A current documented case plan is one that has been approved and/or reviewed within the previous 12 months.  A high or increasing rate of children with current documented case plans is desirable.  The indicator does not assess the quality of case plans, nor the extent to which identified needs and actions are put into place. These factors should be taken into account when considering the results reported for this indicator.  Data reported for this indicator are:   * comparable (subject to caveats) within jurisdictions over time, but are not comparable across jurisdictions * incomplete for the current reporting period. All required 2015‑16 data were not available for SA and the NT. |
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Nationally, 86.3 per cent of children required to have a current documented case plan, had such a plan at 30 June 2016 (figure 16.10) — a decrease from 86.6 per cent in the previous year (table 16A.16).

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| Figure 16.10 Proportion of children with current documented case plans, at 30 June 2016**a, b** |
| |  | | --- | | Figure 16.10 Proportion of children with current documented case plans, at 30 June 2016  More details can be found within the text surrounding this image. | |
| a See box 16.9 and table 16A.16 for detailed definitions, footnotes and caveats. b Data were not available for SA and the NT. |
| *Source*: AIHW data collection (unpublished); table 16A.16. |
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#### Out‑of‑home care — client satisfaction

‘Client satisfaction’ is an indicator of governments’ objective 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, with an emphasis on safety, stability and permanency in children’s living arrangements (box 16.10).

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| Box 16.10 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 future reporting. |
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Information on initiatives across jurisdictions to measure client satisfaction is included in table 16A.35.

#### Out‑of‑home care — continuity of case worker

‘Continuity of case worker’ is an indicator of governments’ objective 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, with an emphasis on safety, stability and permanency in children’s living arrangements (box 16.11).

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| Box 16.11 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. A productive, stable working relationship between the case worker and the child assists to deliver quality out‑of‑home care services.  This indicator has been identified for development and future reporting. |
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### Efficiency

Data reported for the existing efficiency indicators do not necessarily provide an accurate reflection of the costs involved in providing various child protection services. To improve measures of child protection system efficiencies, the Steering Committee initiated a project (the ‘Pathways’ project), which uses a combination of direct costs (those costs which can be clearly allocated by a jurisdiction to a particular child protection activity) and indirect costs (which form part of the overall expenditure base, but which cannot be clearly allocated to a specific activity).

The Pathways 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 of an individual pathway to be derived.

The activity groups and detailed definitions are included in section 16.4. Development of national reporting against these activity groups is ongoing. Preliminary pathway data are presented in tables 16A.36‑37 and are subject to further refinement in future reports.

#### Child protection — Total expenditure on all child protection activities per notification, investigation and substantiation

‘Total expenditure on all child protection activities, per notification, investigation, and substantiation’ are reported as proxy indicators of governments’ objective to provide child protection services in an efficient manner (box 16.12).

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| Box 16.12 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 child protection activity can suggest more efficient services, but could also indicate lower quality and should be considered together with the results for other indicators in this chapter.  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 unit costs for notifications, investigations or substantiations, and cannot be added together to determine overall cost of child protection services.  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) * complete for the current reporting period. All required 2015‑16 data were available. |
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Total expenditure on all child protection activities per investigation (figure 16.11(a)) and substantiation (figure 16.11(b)) from 2010‑11 to 2015‑16 varied across jurisdictions. Total expenditure on all child protection activities per notification are presented in table 16A.2.

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| Figure 16.11 Child protection efficiency indicators (2015‑16 dollars)**a** |
| |  | | --- | | **(a) Annual real recurrent expenditure on all child protection activities per investigation**  **Figure 16.11 Child protection efficiency indicators (2015-16 dollars)  (a) Annual real recurrent expenditure on all child protection activities per investigation  More details can be found within the text surrounding this image.(b) Annual real recurrent expenditure on all child protection activities per substantiation**  Figure 16.11 Child protection efficiency indicators (2015-16 dollars)  (b) Annual real recurrent expenditure on all child protection activities per substantiation  More details can be found within the text surrounding this image. | |
| a See box 16.12 and table 16A.2 for detailed definitions, footnotes and caveats. |
| *Source*: AIHW data collection (unpublished); State and Territory governments (unpublished); table 16A.2. |
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#### Out‑of‑home care — Out‑of‑home care expenditure per placement night

‘Out‑of‑home care expenditure per placement night’ is an indicator of governments’ objective to provide child protection services in an efficient manner (box 16.13).

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| Box 16.13 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 could also indicate lower quality and should be considered together with the results for other indicators in this chapter.  Data reported for this indicator are:   * comparable (subject to caveats) within jurisdictions over time but are not comparable across jurisdictions * complete for the current reporting period. |
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Nationally in 2015‑16, out‑of‑home care expenditure per placement night was $166.28 (figure 16.12).

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| Figure 16.12 Real out‑of‑home care expenditure per placement night (2015‑16 dollars)**a** |
| |  | | --- | | Figure 16.12 Real out of home care expenditure per placement night (2015-16 dollars)  More details can be found within the text surrounding this image. | |
| a See box 16.13 and table 16A.28 for detailed definitions, footnotes and caveats. |
| *Source*: AIHW data collection (unpublished); State and Territory governments (unpublished); table 16A.28. |
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#### Out‑of‑home care — Total expenditure on 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 provide child protection services in an efficient manner (box 16.14).

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| Box 16.14 Total expenditure on 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 and should be considered together with the results for other indicators in this chapter.  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 * incomplete for the current reporting period. All required 2015‑16 data were not available for NSW, Queensland and the NT for the measures by residential and non‑residential out‑of‑home care. |
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Total expenditure on all out‑of‑home care per child in out‑of‑home care at 30 June 2016 varied across jurisdictions ranging between $45 000 and $110 000 (figure 16.13(c)) — considerably higher for residential care (ranging between $217 000 and $639 000) compared to non‑residential care (ranging between $28 000 and $40 000) (figures 16.13(a) and 16.13(b)).

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| Figure 16.13 Out‑of‑home care efficiency indicators, at 30 June (2015‑16 dollars)**a, b** |
| |  | | --- | | **(a) Annual real recurrent expenditure on residential out‑of‑home care per child in residential care** | | **Figure 16.13 Out of home care efficiency indicators, at 30 June (2015-16 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 16.13 Out-of-home care efficiency indicators, at 30 June (2015-16 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 16.13 Out of home care efficiency indicators, at 30 June (2015-16 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 box 16.14 and table 16A.3 for detailed definitions, footnotes and caveats. b 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 16A.3. |
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### Outcomes

Outcomes are the impact of services on the status of an individual or group (see chapter 1).

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

‘Improved safety’ is an indicator of governments’ objective to protect children and young people who are at risk of abuse and neglect within their families, or whose families do not have the capacity to provide care and protection (box 16.15).

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| Box 16.15 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 initial 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 abuse or neglect 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 abuse or neglect) and those which are unrelated to the initial notification (that is, a different source of risk of abuse or neglect). This indicator partly reveals the extent to which an investigation has not succeeded in identifying the risk of abuse or neglect to a child who is subsequently the subject of a substantiation. It also provides a measure of the adequacy of interventions offered to children to protect them from further abuse or neglect. This indicator should be considered with other outcome indicators.  Varying thresholds for recording a substantiation across jurisdictions, should also be considered when interpreting data for this indicator (see section 16.4).  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) * complete for the current reporting period. All required 2014‑15 data were available. |
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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 16.14. Rates for the most recent available year were under 26 per cent in all jurisdictions.The proportion of substantiations that occurred within 12 months of a prior substantiation are provided in figure 16.15. Rates for the most recent available year were under 28 per cent in all jurisdictions.

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| Figure 16.14 Improved safety — substantiation rate within 3 and/or 12 months after a decision not to substantiate**a** | |
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| a See box 16.15 and table 16A.11 for detailed definitions, footnotes and caveats. |
| *Source*: AIHW data collection (unpublished); table 16A.11. |
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| Figure 16.15 Improved safety — substantiation rate within 3 or 12 months of a prior substantiation**a** | |
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| a See box 16.15 and table 16A.12 for detailed definitions, footnotes and caveats. | |
| *Source*: AIHW data collection (unpublished); table 16A.12. | |
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#### Improved education

‘Improved education’ is an indicator of governments’ objective to support children and young people in the child protection system to reach their potential (box 16.16).

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| Box 16.16 Improved education |
| ‘Improved education’ is defined as the proportion of children on guardianship and custody orders achieving at or above national minimum standards in reading and numeracy in Year 5, compared with all children.  A high or increasing rate of children on guardianship and custody orders achieving at or above national minimum standards 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.  When interpreting NAPLAN data, it is important to take into account student participation rates (table 16A.13). Children exempted from NAPLAN testing are recorded as not having met the national minimum standards 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 might contribute to poorer reported NAPLAN results for children on orders, compared with the general student population.  Data reported for this measure are:   * comparable (subject to caveats) across jurisdictions * complete for the reporting period of 2013. Only Queensland and SA have data available for the 2014 reporting period. |
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In 2013, the proportions of children in care at or above the national minimum standards for Year 5 reading and numeracy varied across jurisdictions (table 16.2), and were below the proportions for all students (by at least 10 percentage points for the majority of jurisdictions) (table 16A.13).

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| Table 16.2 Proportion of children on guardianship/custody orders achieving the national reading and numeracy benchmarks, Year 5 level, 2013 (per cent) |
| |  | Reading | | Numeracy | | | --- | --- | --- | --- | --- | |  | *Children on orders* | *All students* | *Children on orders* | *All students* | | NSW | 86.0 | 96.8 | 74.9 | 93.9 | | Victoria | 79.2 | 96.5 | 71.5 | 94.4 | | Queensland | 78.0 | 96.2 | 64.5 | 93.6 | | WA | 80.1 | 96.0 | 64.8 | 92.7 | | SA | 78.9 | 95.7 | 62.9 | 92.0 | | Tasmania | 79.2 | 95.5 | 70.2 | 92.4 | | ACT | 88.2 | 97.0 | 88.9 | 95.0 | | NT | 66.7 | 73.7 | 41.7 | 69.7 | |
| a See box 16.16 and table 16A.13 for detailed definitions, footnotes and caveats. |
| *Source*: State and Territory Governments (unpublished); AIHW (unpublished) derived from AIHW linked child protection and NAPLAN data set; table 16A.1. |
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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 support children and young people in the child protection system to reach their potential (box 16.17).

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| Box 16.17 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 future reporting. |
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#### Safe return home

‘Safe return home’ is an indicator of governments’ objective to promote child and family wellbeing by enabling families to care for and protect children and young people   
(box 16.18).

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| Box 16.18 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 future reporting. |
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#### Permanent care

‘Permanent care’ is an indicator of governments’ objective to protect children and young people who are at risk of abuse and neglect within their families or whose families do not have the capacity to provide care and protection (box 16.19).

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| Box 16.19 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 future reporting. |
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## 16.4 Definitions of key terms

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| **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. |
| **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 (NGOs) 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 and/or supported accommodation. These services may be provided if other 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. 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. ‘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 – agreements with child protection departments that 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 court.   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 grounds to suspect the possibility of prior or future abuse or neglect, and for whom continued departmental involvement is 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. |
| **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. |
| **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. |
| **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 leaves a government‑funded placement for more than 60 days. This does not necessarily mean that a child has returned to the care of his or her family. |
| **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. |
| **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 types of services are funded by government but can be delivered by a child protection agency or a non‑government organisation.  These services are typically delivered via voluntary arrangements (as distinct from court orders) between the relevant agency and family. This suite of services does not typically involve planned follow‑up by the applicable child protection agency after initial service referral or delivery. |
| **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. |
| **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. These services:   * 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)   Families are generally referred to these services by the statutory child protection agency and will have been identified through the child protection process. 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. |
| **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 risk of abuse or neglect 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. |
| **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 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. A break in a placement does not necessarily mean a child has returned to the care of his or her family. |
| **Non‑respite care** | Out‑of‑home care for children for child protection reasons (see definition of respite care below). |
| **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.  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. |
| **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. |
| **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 used to provide short‑term accommodation for children 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** | A substantiation is the outcome of an investigated notification which has resulted in the conclusion that there is reasonable cause to believe a 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. However, 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.  The legal definitions of abuse and neglect are similar across jurisdictions. However, while the legal definitions for substantiating notifications are similar across jurisdictions, there remain some differences in practice, including different thresholds for recording a substantiation (that is, some jurisdictions substantiate harm or risk of harm to a child, and others substantiate actions by parents or incidents that cause harm). These differences impact on the comparability of these data. |

## 16.5 References

AIHW (Australian Institute of Health and Welfare) 2016, *Child Protection Australia 2014‑15,* Child Welfare series no. 63, Cat. no. CWS 57, AIHW. Canberra.

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SCRCSSP (Steering Committee for the Review of Commonwealth/State Service Provision) 2003, *Efficiency Measures for Child Protection and Support Pathways: Reforms in Government Service Provision*, Productivity Commission, Canberra.

SNAICC (Secretariat of National Aboriginal and Islander Child Care) 2013, *Aboriginal and Torres Strait Islander Child Placement Principle*, snaicc.org.au/ aboriginal‑and‑torres‑strait‑islander‑child‑placement‑principle/ (accessed 31 August 2016).