FOSTER CARE HANDBOOK
for Foster Families
Acknowledgement

The handbook has been developed in consultation with the Department of Communities (the Department).

The Foster Care Association of Western Australia (FCA) provides the information in this publication in good faith. The information is not legal advice and is provided on the basis that neither the Foster Care Association of WA nor the Department can be held liable for the misinterpretation of information provided. Every reasonable effort has been made to ensure the information is accurate at the time of publication.

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Cover illustration by Martika Alford.
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1. Introduction

Welcome to the newest edition of the *Foster Care Handbook for Foster Families*.

The handbook is designed to assist foster, family and significant other carers\(^1\) in Western Australia (WA) in the important role they play in looking after children in the care of the Chief Executive Officer (CEO) of the Department. The handbook is also a useful reference for the Department and community service organisations (CSOs).

The FCA has developed the handbook in consultation with the Department. It reflects the Department’s legislation, policies, practice and procedures.

Along with this handbook, all carers should receive key documents which provide more detailed information on a variety of matters.

This handbook and foster care information sheets are available on the Department’s website at [www.communities.wa.gov.au](http://www.communities.wa.gov.au) (Services – Child Protection and Family Support) or you can request copies from the FCA or the Department’s district offices.

If you need information on any matter not covered in the handbook, or have any questions, speak with your child’s Department child protection worker or another worker at your local Department district office.

Foster families with CSOs may also receive your organisation’s specific guidelines to complement the information provided in this handbook.

Carers provide an invaluable service in loving and caring for vulnerable children. As a carer, you are a member of a group of very special people. It is not always an easy role, and the FCA is here to help you.

\[\text{Signature}\]

Fay Alford  
Director  
Foster Care Association of WA (Inc.)  
March 2018

\(^1\) Referred to as ‘carers’ throughout this document
2. Foster Care Association

The FCA aims to promote the interests of all carers in WA. The FCA delivers services to carers and their families to enhance their ability to respond to the challenges of fostering.

2.1 Services provided
The FCA provides the following services:
• A 24-hour telephone support and advocacy service.
• Support to foster families at care planning and other meetings with the Department and, if requested, at a Care Plan Review Panel hearing.
• Representation of foster families at government, Department and CSO level regarding policy and issues about children in the CEO’s care.
• Provision of learning and development opportunities, including workshops and conferences.
• A library which contains videos, books and articles.
• Social activities for members.
• Emergency packs of basic requirements when a child is initially placed in a care arrangement.

2.2 Membership
The FCA relies on the support of its membership, the majority of whom are foster families.

Annual membership subscription rates are:
$ 10.00 for a single parent foster family.
$ 20.00 for a couple parent foster family.
$ 10.00 per person for those interested in foster care.
Free one-year membership is available to new approved Department carers.

Membership forms are available from the FCA website at www.fcawa.com.au
3. Western Australia’s child protection system

The child protection system in WA is governed by the *Children and Community Services Act 2004* (the Act). The Act gives child protection workers the authority to assess matters where it is believed a child is at risk of significant harm from abuse and/or neglect and, when necessary, to apply to the Children’s Court to remove children from the care of their parents.

Children in foster care are regarded as being in the care of the CEO. In WA, the CEO is the Director General of the Department. All children in the CEO’s care will have a Department child protection worker who will act on behalf of the CEO.

Foster care describes family-based care for children. Foster, family and significant other carers are people who have been approved by the Department or a CSO to provide day-to-day care for children in the CEO’s care.

It is important to know that a carer does not have parental responsibility for the child. If a child is in provisional protection and care, the CEO, subject to any interim order in respect of the child, has responsibility for the day-to-day care, wellbeing and development of the child. This includes responsibility for making decisions about any medical or dental examination, treatment or procedure. The CEO has full parental responsibility for a child under a protection order (time-limited) or protection order (until 18).

### 3.1 Provisional protection and care

A child can be removed from his/her parents and taken into provisional protection and care by the Department before the case, goes to the Children’s Court. For the child to be taken into provisional protection and care there must be sufficient grounds for believing the child is at immediate and substantial risk. The child may remain in provisional protection and care for some period before a protection order is granted. Many children in provisional protection and care are placed in foster care.

### 3.2 Protection orders

Where the court determines that a child is in need of protection, a protection order may be made. The different types of orders are outlined as follows:
**Protection order (time-limited)**
This order gives the Department parental responsibility for the child for the period specified in the order. A time-limited order must not exceed two years (the order can be extended for a further two years) and must end before the child reaches 18 years of age.

**Protection order (until 18)**
This order gives the Department parental responsibility for the child until he/she reaches 18 years of age. The Children’s Court does not make this type of order unless it is satisfied that permanent arrangements should be made for the wellbeing of the child.

**Protection order (supervision)**
This type of order is granted when a child stays with his/her parents and the parents continue to have responsibility for the child, with close supervision by the Department.

**Protection order (special guardianship)**
A protection order (special guardianship) (SGO) transfers parental responsibility to the child’s carer (special guardian) until the child reaches 18 years of age.

A SGO is intended to provide children in the CEO’s care with stable, permanent care arrangements whilst ensuring that the child is able to maintain links with his/her birth family and people important to the child.

The decision for the Department to apply for, or support a carer’s application for a SGO, will be made at a care plan meeting and will be informed by assessments of suitability. Discussion will take place with the proposed special guardian, birth family, and the child regarding the process, prior to a final decision being made by the Department to apply for, or support an application for a SGO.

The Court will only grant this type of order when it is satisfied that it is in the child’s best interests and the proposed special guardian is suitable, willing and able to provide permanent stable care. The Court may order that the Department makes a payment to the special guardian. This rate is in line with the foster carer’s subsidy.

Once a SGO is granted, there is no longer any case management provided by the Department or CSO. Special guardians will be encouraged to access community-based services that support families in their parenting role. If required, special guardians are able to approach the Department for support.
4. The Care Team Approach

Every child in the CEO’s care will have a ‘care team’, comprising of a group of people important to the child and his/her carer. The care team will maintain and support a child’s care arrangement and his/her continued connection to parents, siblings, his/her wider family, network, community, culture and country. The emphasis is to create stability and reduce the disruption to lifetime connections that a child has when he/she enters out-of-home care, and maintain and increase the naturally occurring networks he/she belonged to before coming into care.

The care team will be guided by the question, “what do I need to do to support the child’s development, learning, stability and growth, as well as healing?” This way of working places the child’s best interests and needs as the central focus.

This approach allows all workers to work with people important to the child so he/she grows up to have improved life outcomes.

The care team supports participation by family members and connections for Aboriginal children in the CEO’s care to their family, community, culture and country which aligns with the Aboriginal and Torres Strait Islander Child Placement Principle. The development of a strong and secure cultural identity is integral to an Aboriginal child’s wellbeing, and the care team must promote and support this.

Communication between birth parents and carers is essential to help birth parents feel they continue to be an important part of their child’s life and help the child develop a strong sense of identity and emotional safety. Effective relationships with birth parents are promoted when carers share information about the child including his/her progress.

It is acknowledged that, at times, child protection workers and carers may have different views on plans for a child. Partnership does not mean that there will always be agreement. The key is that the relationship is managed in an open and respectful way.
Assessment, planning and review
Carers should be supported to formally participate as a team member in assessment, planning and review of the child’s needs, and to participate in other child-centred decision making that occurs outside of the Department’s formal planning and review processes.

Provision of information
Carers should be provided with full information about the foster child and his/her family to enable them to meet the child’s needs and protect the child, their own children, other children in their care and themselves. Where full information is not available, the carer is to be told all that is known, and further information should be provided as it becomes available. Information about health needs is of particular importance.

Carer support
Carers should be supported to raise children in their care in a stable and secure environment where their social, emotional, psychological, cultural and developmental needs are met.

Contact visits
Contact visits between the child and his/her birth family will be managed in a manner that supports the care arrangement and the Care Team Approach.

Diversity and equity
Carers are provided with the support and resources they require to assist them to meet the needs of the child in their care with regard to gender, religion, language, culture, disability and sexuality. In particular, non-Aboriginal carers must be provided with the support, information and resources required to meet the cultural needs of an Aboriginal child in their care.

Department policies and services
The development of the Department’s policies and services for children in the CEO’s care and foster families, at a district and organisational level, will involve input from carers and/or the FCA.
4.1 Key resources for foster families

Communication Book
This book is used for communication between the carer and the child's birth parents, and is given to the birth parents at contact visits. It aims to help carers and birth parents to develop and maintain a positive relationship while their child is in care.

Foster care information sheets
A range of information sheets on a variety of matters such as health, safety, self-care and confidentiality are available on the Department website for the most up-to-date information.

The Parents’ and Carers’ Guide to Child Protection Education
This guide provides practical advice on how to teach children body safety and abuse prevention.

Following consultation with the Department’s Aboriginal Policy Unit and feedback from carers, the FCA, CSOs and CREATE Foundation WA, the Department developed ‘Brud the Owl’ to help explain the Care Team Approach, including the purpose of a care team.
## 5. Your role and responsibilities

The role of the carer is broad and, at times, may be challenging. Outlined below are some things to keep in mind about your role and responsibilities when caring for a child in the CEO’s care.

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<th>Parenting:</th>
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<tr>
<td>• Provide day-to-day care.</td>
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<td>• Help the child develop a sense of cultural identity.</td>
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<tr>
<td>• Provide a safe, stable and nurturing home for the child.</td>
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<tr>
<td>• Keep the child’s best interests (including cultural) in mind at all times.</td>
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<tr>
<td>• Keep the child’s experiences confidential.</td>
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<td>• Respect the child’s privacy.</td>
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<th>Working together:</th>
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<td>• Keep in regular contact with the Department child protection worker and work together to help the child.</td>
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<td>• Share information with the Department that will help all workers make the best possible decisions for the child’s safety and wellbeing.</td>
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<th>Yourself:</th>
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<tr>
<td>• Take care of yourself and your relationships.</td>
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<tr>
<td>• Seek support from the Department if you are having a difficult time, if things get tough, or you need assistance.</td>
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<tr>
<td>• Join in on learning opportunities offered to assist you to become a better carer, understand some of the challenges the child has experienced, and develop skills to help him/her heal.</td>
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<tr>
<td>• Contact the FCA if you need support and advice.</td>
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6. Permanency planning

Permanency planning is what the Department does to achieve long-term stability for children in the CEO’s care and to be connected to the people most important to them. This is because children need safe, continuous and stable care arrangements, lifelong relationships and a sense of belonging.

Permanency and stability are a priority from the moment the Department becomes involved in caring for a child, so there is a clear plan for his/her future. Permanency planning involves a parallel planning process. This means there will be a primary permanency plan for reunification of the child with one or both birth parents; while simultaneously preparing a secondary permanency plan for the child should he/she need to remain in permanent out-of-home care (OOHC).

Part of the Department’s role is to give family members and carers as much support as possible to help the birth parents make the changes needed to care for their child safely within the agreed timeframe or, where this is unlikely, to establish an alternative permanent OOHC option for the child.

Foster care may be considered as an option for permanent OOHC for a child. Other options include a special guardianship order and adoption from care.

Refer to the Permanency Planning Information Sheet on the Department’s website.

6.1 Developing connections between birth parents and carers

The trauma from the abuse and/or neglect as well as the effects of being separated from their birth family often affects children in the CEO’s care. To minimise the trauma of their care situation, it is best for children if birth parents and carers can create positive connections and place a child in care’s needs at the centre of their thinking. Harmonious relationships between carers and the birth family can ease the trauma associated with separation from their family and other significant relationships.
If good relationships between birth parents and carers are established, maintained and prioritised when care arrangements change, the trauma and feelings of grief and loss for all parties, particularly the child’s, can be lessened. Prioritising this relationship will be as important for when a child may reunify with his/her birth parent(s) or change the care arrangement, as it is when a child first enters the CEO’s care.

In some circumstances, a relationship between birth parents and carers will not be feasible or desirable, such as where the birth parent is deemed to pose a physical threat to the child or to the carer and/or has threatened violence. The Department child protection worker will assess on a case-by-case basis what type of relationship is appropriate.
7. Communication and information sharing

Clear, open and regular communication between carers and Department staff is important so that the child’s safety and care needs are supported. Carers and Department staff have a responsibility to share all relevant information with each other and at the same time make sure that the child’s privacy is protected.

Carers are encouraged to ask the Department child protection worker for as much detail as is known about the child such as his/her general health, eating and sleeping habits. This will support the child to settle more readily if some things are familiar and predictable. In urgent situations, the Department child protection worker might only have limited information to pass on; however, in time, further details should be provided. If available, the Department child protection worker will give the carer a Care Arrangement Referral (CAR) at the time the child is placed in the care arrangement, or soon after. This will outline the day-to-day safety issues and known needs of the child. Carers will also be given a copy of the child’s provisional care plan or care plan once it has been approved.

7.1 Confidentiality

Carers will be entrusted with confidential information to assist them in their caring role. The types of information received include the reason the child is in care and the needs of the child. While the child remains in foster care, carers will continue to receive additional confidential information about the child and his/her family.

Carers have responsibilities under the Act for handling information or material received about a child in care and his/her family.

All carers must adhere to confidentiality requirements as outlined in the Confidentiality Information Sheet available on the Department’s website.

Carers should talk to a Department child protection worker for clarification about what information can and cannot be shared.

7.2 Identification of children in the CEO’s care

The Department has a legal obligation not to publish information that identifies, or may lead to the identification of a child as being in the CEO’s care, except under the express permission of the Director General who can approve such publishing if it is in the child’s best interests.
Carers need to be aware of the legal requirement not to identify the child as being in the CEO’s care, particularly in the media. Carers should discuss this with the child’s Department child protection worker.

Children in the CEO’s care should, however, not be excluded from beneficial social experiences associated with photographing, video recording and other published media. This includes, for example, school photographs, newsletters, and sports club articles.

Social networking websites, such as Facebook and Twitter, and mobile phones have become popular tools for children to socialise and share information. Children in the CEO’s care are a vulnerable group whose personal information should be safeguarded to prevent exposure to bullying, stalking or disclosure of their location. Children in the CEO’s care should be made aware of the importance of keeping their personal details private. More information regarding cyber safety can be found on the Department website under publications.

**In the sharing of information, carers can expect to be provided with:**

- The CAR and a copy of the most recent care plan or provisional care plan.
- As much information that is possible about the health needs of the child and clear procedures governing consent for the child to receive medical treatment. If full details of the child’s health needs are not available at the time, a high priority will be given to providing information to the carer as it becomes available.
- Any additional information about the child or his/her family that may potentially affect the care arrangement and/or assist in the care of the child.

**Carers cannot expect to be provided with:**

- Personal background information about the child’s family that is not relevant to the care of the child. This information may be blacked out on the CAR provided by the Department.
- Copies of court reports.
- Information that is not available despite everyone’s best efforts.
8. Planning and decision-making processes

8.1 Care planning

Under the Act, every child in the CEO’s care must have his/her own care plan (a child in provisional protection and care must have a provisional care plan).

The care plan (or provisional care plan) is a written document that outlines the steps and measures required to address the needs of an individual child and sets out decisions about the child’s care, including decisions about the care arrangements and contact between the child and his/her birth parents and other family members.

The care planning process should be an inclusive process where the views and wishes of the child, the child’s birth parents, carers, and any other person considered to have a direct and significant interest in the wellbeing of the child are gathered and documented by the Department. The care planning process provides all parties, including carers, with an opportunity to participate in significant decisions regarding the child’s care. Carers will be supported to be present and participate in the care planning meetings including prior notice when setting the time and date of planning meetings.

The child will also be supported and encouraged to participate in the planning and decision-making process. The child’s inclusion needs to take into consideration his/her age and wellbeing. Even if the child does not want to attend care planning meetings, the Department child protection worker will explore creative ways for the child’s voice to be heard, including using Viewpoint. Viewpoint is an interactive computer-based software program that promotes participation in planning for each child in care aged five to 17 years. An information sheet on Viewpoint can be downloaded from the Department’s website.

The day-to-day management, coordinating and monitoring of the child’s care plan is the responsibility of the Department child protection worker and the Act requires that the care plan is reviewed at least once a year.

8.2 Case planning – permanency planning

Case plans are not a legislated requirement and generally relate to a family group not an individual child. The purpose of a case plan is to provide a clear explanation of why the Department is involved with the family and identify the expectations and next steps in working with the family.
Case planning is an ongoing process throughout the duration of a case with a family. It involves assessing, planning, reviewing and evaluating case information. The case plan for a child in the CEO’s care will inform decisions in the child’s provisional care plan or care plan such as decisions about contact between the child and a birth parent, sibling or other relative.

Carers may be asked to attend case planning meetings.

In assessment, planning and review processes, carers can expect:

• That their views and opinions are important and will be treated respectfully.
• To be supported to be present and participate in the planning and review processes.
• That their knowledge of the foster child will inform the planning and review processes.
• To be given at least two weeks’ notice prior to formal planning or decision-making forums (a care plan or care plan review) with courteous consideration in setting the time.
• To be given an opportunity to provide a ‘Carer Report’ to care planning and review meetings.
• To be provided with the reports of other care team members at least three days in advance of the meeting.
• To be provided with a copy of the final care plan, along with a copy for the child.
• To be able to request that a care plan review be undertaken if they are experiencing significant problems or if positive outcomes are being achieved that affect the child’s care plan.
• That changes to key elements of the care plan during the formal review process are discussed with them within one week, if they have not been able to be present at the review meeting, and to be informed of any minor changes to the care plan within a similar timeframe.

Carers cannot expect that:

• Their recommendations will always be reflected in final decisions made in assessment, planning and review processes.
• There may be circumstances where the carer’s recommendations are not reflected in the decisions made because the Department takes into consideration information from multiple sources when making decisions that are in the child’s best interests.
9. Caring for Aboriginal children

The Act outlines guiding principles about involving Aboriginal and Torres Strait Islander people in decision-making processes that concern Aboriginal children.

The Aboriginal and Torres Strait Islander Child Placement Principle aims to enhance and preserve the connections that an Aboriginal child has with his/her family, community, culture and country.

Despite a commitment by the Department to the Aboriginal and Torres Strait Islander Child Placement Principle, the reality is that a number of Aboriginal children in the CEO’s care are placed with non-Aboriginal foster carers who are not related to the child. This is due to the difficulty in locating family carers and a shortage of Aboriginal foster carers.

Non-Aboriginal carers and staff who are caring for an Aboriginal child have a responsibility to make sure that the child does not lose connection with his/her family, community, culture and country. The Department has Aboriginal Practice Leaders (APLs) located in each district office who provide advice to Department staff and carers to enable them to care effectively for Aboriginal children in the CEO’s care.

If a non-Aboriginal carer has an Aboriginal child placed in his/her care, the Department will provide support, information and resources to help meet the needs of the child, including his/her cultural needs. The carer will also have a direct link with an APL and will be included in the development of a cultural plan for the child. The plan is developed so that the child’s identity and connection with his/her birth family, community, culture and country are enhanced. The plan will also outline how the child will be involved in cultural activities and community events.
10. Caring for children from culturally and linguistically diverse communities

If a carer has a child from a culturally and linguistically diverse (CALD) background placed in his/her care, the Department will provide information on the services provided by the Translating and Interpreting Service and be linked with relevant CALD community groups and agencies.

Caring for a child from a CALD background can present particular challenges for carers and staff. It may take some time for the child to get used to a different environment where people speak a different language or eat different types of food.

Carers and staff need to be sensitive to the linguistic, cultural and religious diversity of the child, and acknowledge the importance of these factors in his/her life.

Wherever possible, relevant members of the child’s extended family or community will be involved in decision-making processes and, where necessary, interpreters should be used. Assisting a child to maintain links with his/her culture is vital to his/her long-term development and wellbeing, and every effort needs to be made by carers and staff to encourage these links.
II. Contact with families

It is important that children in the CEO’s care maintain links with their birth family through regular contact wherever possible and appropriate. Contact allows the child to develop or maintain a sense of identity and connection with his/her birth family, community and culture, and helps the child better understand his/her situation. Contact is also important because it can minimise the impact of disrupted attachment and bonding which is crucial for the child’s development.

Contact can take many forms such as telephone calls, letters and visits (referred to as contact visits). Most children have regular contact with their birth family while they are in the CEO’s care. Either the Children’s Court or the Department makes decisions about the frequency of contact including the level of supervision required. Details about contact visits, including agreed days and times, will be documented in the child’s care plan or provisional care plan.

Carers play a vital role in supporting a child before, after and sometimes during contact. Carers can support contact visits by using the Communication Book to provide information to the parents about significant events that have occurred for the child, such as the child receiving a certificate at school.

Where possible, the Department aims to support direct contact and the development of positive relationships between carers and the child’s birth parents and family.

It is in the best interests of children in the CEO’s care for the significant adults in their life to share harmonious relationships with a shared goal of meeting the child’s needs. The benefits of these relationships, and the consequent sharing of information and experiences, can be hugely significant to reducing stress and trauma for the child.

The Department’s child protection worker is responsible for assessing the appropriate level of direct contact that should occur between the carer and the child’s birth parents and family. The child protection worker will consult with both the birth parents and carer regarding their expectations and support the early introductory meetings.

If the child protection worker has assessed that direct contact is not appropriate, carers are encouraged to use the Communication Book to assist in building a positive relationship. This book is provided to carers, or a copy can be obtained from the child’s Department child protection worker.
With regard to contact with families, carers can expect:

- That dates, times and arrangements will be documented in the child’s care plan and adhered to where possible (sometimes the Children’s Court may impose contact arrangements at short notice, which are not negotiable).
- To be provided with information on the details of the visit.
- To have their other commitments considered when contact is being arranged.
- That child protection workers will negotiate variations in contact visit arrangements as set out in the care plan with them at least 24 hours in advance.
- To always play a role in supporting a child before and after contact.
- That they will be supported to deal with any difficult contact issues that arise.
- To be provided with feedback by the person supervising the contact (if it is supervised) about any issues arising from the contact that may affect the carer.
- To be informed if a child requires food, drinks and clothing during a contact visit.
12. Health

Full information about the child’s health may not be known when he/she is taken into the CEO’s care. All known information will be provided to the carer when the child is placed, and subsequent health information will be provided as it becomes available.

12.1 Health care planning

Health care planning includes:

- When a child enters the CEO’s care, he/she will have a general medical examination (unless an examination has already occurred upon entry to care); a doctor will usually undertake this.

- A school age child will be enrolled in school dental services and receive treatment as required.

- Each child will be referred for an age-appropriate health and developmental assessment as part of the care plan development and annual review process.

- If the child is four years or older, the Department child protection worker will arrange for a mental health screening once he/she has settled in his/her care arrangement (usually within six months); this will then be arranged on an annual basis.

- Each child in the CEO’s care will receive a Child Health Passport. This should be presented at all health appointments so information can be kept up to date.

The Department child protection worker will discuss the health assessments with the carer and the child and may ask the carer to arrange the appointments with the medical practitioner or health provider. The carer may be asked to take the child to the appointment.

Reports and referrals from the health assessments will be discussed and acted upon as part of the child’s overall provisional care plan or care plan.

More information can be found in the Health Care Planning Information Sheet on the Department’s website.
12.2 Medical or dental treatment, including consent

If a child in the CEO’s care requires a general anaesthetic for any dental or medical treatment, consent must be obtained from the Department. The Department child protection worker will advise the medical or dental practitioner of the child’s medical or dental history.

*Short-term illness, medical checks or emergency treatment*

Carers do not need consent from the Department if a child needs to visit a medical practitioner for a short-term illness (such as a cold, the flu, diarrhoea or vomiting), a medical check or for emergency treatment. Carers, however, should inform the Department child protection worker as soon as possible afterwards.

It is the responsibility of both the carer and the Department child protection worker to make sure that the dental and immunisation needs of the child are met while the child is in the CEO’s care. Dental examination and treatment is generally an ongoing and routine process for a child. Dental fillings do not require anaesthetic consent from the Department when they are done under a local anaesthetic.

12.3 Medicare cards

All children for whom the CEO has parental responsibility will be issued with their own Medicare card. The Department child protection worker will apply to Medicare to obtain a card for the child when he/she enters the CEO’s care.

If a child is in the CEO’s care for less than one month, the Department child protection worker will provide the carer with the child’s Medicare number only (not a duplicate card). This will be obtained from the child’s birth parents, where possible.

Once the Medicare card is received by the Department, the Department’s child protection worker will give the card to the carer to use on behalf of the child. The Medicare card must be returned to the Department if the child moves to another care arrangement or if the child returns to his/her birth parents’ care.
12.4 Medical costs

The fortnightly subsidy paid to carers incorporates an amount to cover basic general medical treatment and pharmaceutical requirements (over the counter medication) for a child in the CEO’s care. This includes costs incurred when a child needs to visit a medical practitioner for a short-term illness such as a cold. The Department child protection worker will give authority for the carer to sign the claim form where the doctor bulk bills.

Paying for medical costs not covered by the basic subsidy payment

The Department is responsible for all medical and pharmaceutical costs and any dental costs for the child not covered by the Subsidy Payment. Carers, however, must get approval prior to incurring any costs related to medical dental costs. Carers need to keep all medical, dental and pharmaceutical receipts for reimbursement.

Health costs above normal requirements, such as a wheelchair or orthodontic treatment, should be included in the child’s care plan.

Health care planning assessments for children in the CEO’s care and ongoing medical treatment, diagnostic tests and specialist health services’ costs are not covered by the basic subsidy payment to carers. In these instances, the Department child protection worker will give authority to the carer to take the child to the health appointment and will provide consent for the service provider to conduct the assessment or provide treatment.

Some doctors will bulk bill for services provided to children. If they do not, the carer can check if the service allows delayed payment. If they do, the carer should ask for a copy of the invoice and give this together with a completed Medicare Claim Form to the Department child protection worker to arrange payment.

If the health service needs immediate payment, the carer should pay the invoice and claim for reimbursement from the Department. Given that the receipt is in the carer’s name, the carer will first need to claim the Medicare rebate directly from Medicare. The rebate slip must then be forwarded from Medicare to the Department child protection worker so the carer can be reimbursed for the gap amount.

If the medical treatment, diagnostic tests or specialist health services’ costs are expected to be high and the carer is unable to pay upfront and be reimbursed, the Department child protection worker will arrange to pay these accounts on receipt of the invoice from the service provider.
12.5 Heath Care Cards

A Health Care Card or Foster Child Health Care Card for the child will give carers concessions on health-care costs. This means the carer can get cheaper prescription medicines through the Pharmaceutical Benefits Scheme (PBS) and medical services funded by the Commonwealth Government. The card can also give carers access to concessions provided by State and Local Government agencies as well as some private businesses including household, education, and public transport costs. Carers can access A Guide to Concession Cards from the Department of Human Services website.

If a carer is receiving certain Centrelink payments or supplements, or gets the maximum rate of Family Tax Benefit Part A, he/she will automatically receive a Health Care Card. The cardholder’s partner and dependent children may be covered by the card and receive concessions.

If a carer already has a Health Care Card, the Department child protection worker will assist him/her in adding the child in the CEO’s care to their card.

Foster Child Health Care Card

If a carer is not eligible for a Health Care Card, he/she can claim a Foster Child Health Care Card through the Department of Human Services (Centrelink) on behalf of the child in the CEO’s care. The card is not subject to an income or assets test. It will be issued in the name of the child, but the carer can access cheaper PBS medications and other concessions and services on behalf of the child. The card is automatically reissued when expired, if the carer is still caring for the child.

The Department child protection worker will assist the carer to make the claim. The carer will receive a signed letter addressed to the Centrelink Processing Team that outlines the child’s details and states that he/she is currently in the carers’ care. The Department’s child protection worker will also provide the carer with a copy of the child’s birth certificate and Court Order (or the application for the Court Order) to submit with the Centrelink claim form.

12.6 Private health cover

If a carer has private health cover for his/her own family, he/she can include a child in permanent care on the cover. Before claiming private health care cover for the child, carers need to seek approval from the Department child protection worker about whether or not the Department will cover the difference between the refund and the account.
With regard to health care, carers can expect:

- That at the time the child enters their care, they will be provided with all known information about the health needs of the child and clear procedures governing consent for the child to receive medical treatment.
- That if full details of the child’s health needs are not available at the time, a high priority will be given to providing health information as it becomes available.
- To be provided with a *Child Health Passport* (the child’s health record).
- To be able to take the child to a doctor without the consent of the Department child protection worker for a short-term illness, medical check or emergency treatment.
- To be able to give consent for the child to receive dental treatment, including fillings that involves a local anaesthetic only.
- To be provided with a Medicare card for the child once it is received by the Department.

With regard to health care, carers cannot expect:

- To be able to give consent for operative procedures or for general or local anaesthetic, other than a local anaesthetic for dental treatment (including fillings).
- To be able to give consent for immunisations.
- To be able to sign as legal guardians or having parental responsibility for the child regarding any medical or dental procedures that may be required.
- To be reimbursed for medical, dental and pharmaceutical costs without presenting the receipts to the Department.
- To be able to claim the gap for private health cover for the child (if the child has been included in their family cover) if they have not discussed this with the Department child protection worker first.
13. Education

Education is a vital part of any child’s life. It also plays a significant role in a child’s ability to access future employment and life opportunities.

Children in OOH C often have unique educational needs, and meeting those needs requires planning and support. Extra effort is required so that these children remain connected with school and have a positive educational experience to address barriers to learning.

Providing day-to-day care for a child in the CEO’s care means that carers are often in the best position to contribute to planning for a child’s education needs and support the academic development of the child.

All children in the CEO’s care are required to have an Education Plan that is reviewed annually. Together with the Department and school staff, carers will be involved in an education case conference to inform the development of the child’s Education Plan, and carry out tasks to assist the child with homework.

Carers can refer to the Documented Education Plans Information Sheet on the Department’s website.

13.1 Achiever Awards

The Achiever Awards are a joint venture between the Department and the FCA. They are awarded annually to young people in the CEO’s care for post high school education and training.

Any Department child protection worker, CSO case worker or carer can make nominations. Nomination enquiries need to be made early in the year to the Department child protection worker.

13.2 School excursions and activities

Carers can generally give consent for school excursions and activities.

Carers cannot provide consent for school excursions that involve high-risk activities which require a waiver of legal rights, such as horse riding.
With regard to education, carers can expect:

- That a child in their care will have an Education Plan developed and that this plan will be reviewed annually.
- To be involved in an education case conference to discuss and plan for the child’s education needs, including the development or review of the Education Plan.
- To provide consent for school excursions and activities, except if they require a legal waiver.
14. Providing day-to-day care

As the person providing day-to-day care for a child in the CEO’s care, it is important that support is sought from the Department child protection worker when experiencing difficulties or need assistance.

The Department provides different learning opportunities to assist carers in their caring role. Check the Department website or speak with the Department child protection worker.

14.1 Vehicle restraints

Motor vehicles accidents are one of the most common causes of transport related injury for children.

Whenever children in the CEO’s care are passengers in a vehicle, they should be seated in the most appropriate approved child restraint for their age and size. Carers should refer to the Kidsafe WA website for details on which restraint to use.

14.2 Diary keeping

It is good practice to keep a diary while the child is in foster care. A diary will assist in keeping a record of the child’s progress, recording any fluctuations in behaviour, keeping all notes in one place, aiding memory of events when writing a report, giving accuracy when recalling important dates, validating times and sequences of events, and tracing progress as a carer.

14.3 Communication Book

When a child comes into the CEO’s care, the carer will receive a Communication Book which is passed to the parents at contact visits and should communicate any information the carer believes to be useful or of interest to the child’s parents. Carers should try to keep the communication brief and simple. The book remains with the carers until the child’s next contact visit. If the child returns home, the book will be passed onto the child’s parents. The book is a tool to develop a positive relationship between the carer and parents.

Carers should talk with the Department child protection worker about any unclear or concerning information written in the book by the child’s parents.
14.4 Overnight stays and other activities

In order to normalise a child’s experiences as much as possible, carers can make decisions that relate to the day-to-day activities for a child in the CEO’s care placed with them. This includes providing consent for the child to obtain his/her driver’s licence.

Carers can sign permission slips for activities that do not involve a waiver of legal liability (such as horse riding or abseiling), and use their judgement for the child to have occasional sleepovers at a friend’s house or go on an outing with a friend and their family.

Carers must talk to the Department child protection worker if there are any concerns about an event (such as an overnight stay or activity), and whether or not it presents a risk to the safety of the child. Each situation needs to be considered on a case-by-case basis and, in all circumstances, the potential risk to the safety of the child needs to be considered.

If carers are unsure about a particular situation, they need to seek guidance from the Department child protection worker.

14.5 Babysitting

When choosing a babysitter, carers need to:

- Take into account the age, behaviours and development of the child, as well as his/her historical issues of abuse and/or neglect. For example, it may not be appropriate to leave a child with a male sitter if a male has sexually abused the child in the past.
- Check that the sitter is capable of responding appropriately to behaviour the child might present.
- Check that the sitter is capable of responding appropriately in an emergency.
- If the person is a formal babysitter, staff member from a babysitting agency or a live-in or day nanny, he/she must have a Working with Children Card. Refer to the Working with Children Check website or talk with the Department child protection worker.

14.6 Child care

If the carer needs to enrol a child in child care, please discuss this with the Department child protection worker, as prior approval is required. If approved, the child protection worker will assist with the enrolment process.
There is Commonwealth Government assistance available to carers to help with the cost of child care. The Department child protection worker will help to complete the necessary forms to access this assistance.

A Child Care Services Information Sheet can be accessed on the Department’s website.

**14.7 Smoking**

Carers need to be aware of the increasing evidence of the serious effects of second-hand smoke (also known as passive smoking), especially on babies and young children.

The Department policy on smoking requires that carers do not expose a child in the CEO’s care to second-hand smoke, both inside the home and in confined areas such as motor vehicles.

Refer to the Guidelines on Smoking Information Sheet on the Department’s website.

**14.8 Swimming pools, spas and other bodies of water**

The Department has safety standards for all children in the CEO’s care regarding swimming pools, spas and other bodies of water in and around the home. These include:

- never propping the pool gate open or leaving objects that could be climbed on near the fence;
- regularly checking the pool fence, gate (including locks) and surrounds to confirm the strength and integrity of the structure has not weakened over time or through exposure to the elements;
- swimming lessons and/or being familiar with water are not a substitute for adequate supervision;
- for a young child, supervision means being within arm’s reach of a suitable adult while the child is in or around water;
- an older child is not a suitable person to supervise a young child around water; and
- flotation devices on their own are not enough to ensure the safety of a child.

The Department requires evidence of council compliance for all households with a swimming pool, spa or other body of water.

Refer to the Swimming Pools, Spas and Other Bodies of Water Information Sheet on the Department’s website for further information.
14.9 Travel – overseas, interstate or within Western Australia

Consent must be obtained to take children in the CEO’s care out of the State or country. This can be a lengthy process, so it is important that carers discuss any travel plans with the Department child protection worker well in advance. Overseas travel requires a valid passport with at least six months before expiry. If the child in care requires a passport, it can take up to four months for the application process.

Carers planning to travel with a child in the CEO’s care within the State must notify the Department child protection worker so that the Department is aware of the child’s whereabouts. If the travel is via plane, the carer may need a letter from the Department child protection worker to provide as identification for the child upon check-in.

The Department will not normally provide consent for children in the CEO’s care to travel where travel warnings exist. Refer to the Smartraveller website for further information.

14.10 Opening bank accounts

A child in the CEO’s care 15 years or over must have a personal bank account. Children under this age are permitted to have a bank account if they wish. Carers should speak with the Department child protection worker if the child would like a bank account opened.

The bank account will usually be opened in the child’s name as the sole signatory. If the financial institution requires an adult co-signatory or the Department has assessed that this is necessary, a team leader has the delegated authority to be the co-signatory.

If the team leader changes, the Department will inform the bank of the incoming team leader and make the necessary changes so that the child’s access to his/her account is not affected.

14.11 If a child in the CEO’s care goes missing

If a child in the CEO’s care goes missing, the carer must conduct an initial search of the home and surrounds and contact friends or family who may know of the child’s whereabouts.

If the child cannot be located, the carer must report the child missing to the WA Police by filing a missing persons report at their local police station. If the carer needs assistance to lodge a report, he/she should contact his/her district office, or the Crisis Care Unit (CCU) if after hours.
Once the report is made, the carer must advise the Department child protection worker as soon as possible. If the Department child protection worker is not available, the carer must inform the district duty officer during office hours or the CCU after hours.

In all circumstances, the Department child protection worker is responsible for checking that a report has been made to the WA Police once advised that the child is missing, advise the child’s parent(s) where appropriate and liaise with police as required.

The police may speak with the carer about what happened prior to the child going missing and check what he/she may be wearing. It is handy for the carer to have a current photograph of the child to provide to the Police as well as a list of places he/she might visit and a list of any medical problems or medications the child may need. The Department child protection worker is available to provide support to the carer and family at this time.
15. The review process with carers

15.1 Annual review meeting with carers

An annual review meeting is undertaken as a joint partnership process, usually with the Department child protection worker, using the *Signs of Safety* three column tool (what is working well, what are we worried about and what needs to happen). The meeting is additionally informed by the continuing conversations that have been occurring throughout the year with Department workers.

The annual carer review meeting is an opportunity for the carer and the Department child protection worker to look at what has gone well for the carer and any challenges that may have been encountered, as well as looking ahead to developing the partnership and learning.

The review process formally affirms that the carer is maintaining his/her competencies as a carer.

Most importantly, this is the carer’s time to reflect, ask questions or raise concerns, and highlight achievements.

The outcome of the review meeting may include identification of changes the carer may wish to make; for example, participating in particular learning or activity.

The meeting with the carer will also include a discussion about the status of his/her Working with Children Card and any changes to the composition of the household.

15.2 Reassessment of carers

The reassessment of a carer is undertaken when there is a change in the carer’s household, such as a new partner or adult person living in the home and/or a carer returns to providing care after being unavailable for 12 months or more.
15.3 Revocation of a carer’s approval

Reasons for the revocation of a carer’s approval are identified in the *Children and Community Services Regulations 2006* and relate to the competencies.

The CEO may also revoke approval:

- if a carer receives an Interim Negative Notice or a Negative Notice under the Working with *Children (Criminal Record Checking) Act 2004*.
- any reasonable grounds to believe that the approval to be a carer was obtained improperly; and/or
- persistent actions that are contrary to and undermine quality care principles and case planning decisions.

The carer will be advised and then given written notice of the proposed revocation and the reasons for revocation being sought. The carer will be given 28 days to provide a written response.

If the carer’s approval is revoked, he/she will be informed in writing of the reasons why the decision was made.

Revocation means the person can no longer practice as a carer with the Department or any other foster care agency in WA.
16. Money matters

16.1 Subsidies

All children in the CEO’s care living in an approved care arrangement are eligible for a subsidy payment that is paid to the carer. The subsidy payment is provided fortnightly in arrears and is paid into the carer’s bank account.

The subsidy payment will be calculated from the first day the child is placed with the carer and ceases if the child needs to move to another care arrangement or is reunited with his/her birth parents. The subsidy is to cover day-to-day costs of maintaining the child and is expected to cover the following:

- food and accommodation;
- heating, electricity and gas;
- local transport (20km return trips);
- outings and entertainment;
- haircuts;
- small toys for the child;
- general expenses related to personal hygiene items, basic general medical treatment and pharmaceutical requirements (over the counter items); and
- incidental expenses for education, leisure and hobby activities which may be reasonably considered to be met by the standard age-related subsidy.

The subsidy payment includes pocket money for all children up to 16 years of age (the amount is dependent on the child’s age). The Department child protection worker can arrange for this to be paid into the child’s bank account.

A clothing allowance is also paid for all children in the CEO’s care up to 16 years of age. It is paid three times per year (January, May and September). The payment will be deposited into the carer’s bank account or it can be paid into the child’s account, if this is arranged with the Department child protection worker. The payment ceases once children turn 16 years of age as they are then eligible for Centrelink’s Youth Allowance.
16.2 Additional financial and other support

There are additional funds (case support costs) available to support children in the CEO’s care and their carers. These funds cover expenses that are above the general day-to-day costs covered by the subsidy payment and may be one-off or recurrent. Some of these costs include educational expenses, such as school uniforms and tuition, medical and dental expenses, excursions and camps, counselling and legal costs.

When a child is initially placed with a carer, there may be some essential items that need to be purchased (such as a bed, bedding, clothing, toys, etc.). These requirements should be discussed with the Department child protection worker who will need to get approval for the expenses prior to purchase.

Carers are required to discuss the need for additional costs with the Department child protection worker who will arrange for the purchase of any additional items or payment of accounts, either directly with the supplier or by way of providing the carer with a pre-paid card. Carers are not reimbursed for purchases made outside of these arrangements unless the expense (up to a maximum of $50.00) is due to an emergency and prior approval cannot be obtained.

A Special Needs Loading subsidy may be paid in addition to the basic subsidy where the child has extra care needs. This payment recognises the extra care tasks needed to manage the special needs of the child. Requests for Special Needs Loading need to be discussed with the Department child protection worker.
16.3 Government allowances and benefits

Some children in the CEO’s care are entitled to assistance from other State and Commonwealth departments. This is especially relevant to children with disabilities and young people who are eligible for Youth Allowance. Discuss this with the Department child protection worker.

Carers may also be eligible for Commonwealth Government assistance as they are providing for the child. The following allowances or benefits will not affect the subsidy payment:

• Family Tax Benefit
• Child Care Benefit
• Parenting Payment
• Carer Payment
• Carer Allowance

Carers should contact the Department of Human Services to check their eligibility for any allowances or benefits to which they may be entitled while caring for a child in the CEO’s care. Carers can contact the Department of Human Services on 13 24 68, check their website – www.humanservices.gov.au – or go to their local Centrelink Customer Service Centre.

Carers who are also grandparents can contact the Centrelink Grandparent Advisor Line on 1800 245 965.

Note: Carers who are in receipt of Newstart Allowance and intend to leave Australia temporarily should contact the Department of Human Services before travelling as their payments may be affected.
16.4 Carer insurance

All Department carers, CSO foster carers and any other person permanently living with the carers are covered by the Department with RiskCover. Cover is limited to events that result from specific incidents caused by the actions of a child in the CEO’s care placed by the Department. It also includes specific incidents caused by the actions of a natural relative of the child. General wear and tear cannot be claimed.

The cover includes property, general liability, personal accident, motor vehicles and professional liability.

If an incident occurs, it is the carer’s responsibility to inform the Department child protection worker of the incident immediately. CSO foster carers must inform the relevant worker in their organisation.

The Department will review any damage and ascertain the facts of the incident.

When making an insurance claim through the Department, it is important that carers:

• retain the receipts if immediate repair and/or replacement are necessary;
• obtain a claim form from the Department child protection worker. This form must be returned and lodged with the Department within 30 days;
• arrange for three quotes for the damage and/or repairs and attach these with the claim; and
• check that the Department child protection worker clearly states on the claim form who should be paid for the damage.

RiskCover will assess the insurance claim and deal directly with the carers. The time taken to assess the insurance claim will depend on the claim itself and RiskCover’s workload.
17. Managing a child’s behaviour

Foster families are in a prime position to help make positive changes in the life of a child in the CEO’s care. How a child’s behaviour is managed can have a lasting effect on the child. A range of Department staff (e.g. child protection worker, psychologist or education officer) are available to support foster families to understand a child’s behaviours, the underlying emotional and physical needs, and how best to respond to promote the child’s healing and development.

The majority of behavioural problems stem from previous experiences (such as experiences in their birth family or moving between several carers) and, if these have been negative or traumatic, the child is likely to display behaviour that adults may find difficult to understand and manage.

Before reacting to the behaviour of a child in the CEO’s care, remember the following:

• The child’s developmental age may not necessarily equal his/her chronological age.
• Children model themselves on significant people in their lives.
• Punishments such as physical discipline reinforce negative beliefs the child may have about himself/herself.
• The behaviour may be a grief and loss reaction to being placed in care.
• The child may not understand the ‘rules’ of the foster family’s household and his/her behaviour may be related to uncertainty and confusion around this.
• The behaviour may be the result of past trauma and learned negative patterns.
• Disrupted attachments may affect the child’s behaviour.
• Children who enter OOHC have often suffered trauma. They are emotionally fragile and have complex needs.

Carers must not use discipline such as physical punishment, restraint, deprivation of basic needs or anything else that may be detrimental to the foster child. It is the Department’s policy that no child in the CEO’s care is to be physically disciplined in any way.

Refer to The Use of Physical Punishment and Other Discipline Information Sheet on the Department’s website.

For further advice, contact the FCA or discuss with the Department child protection worker. The Department provides learning and development opportunities on managing a child’s behaviour.
18. Disclosure of sexual abuse

Sometimes Department or CSO workers are unaware that a child in the CEO’s care has been sexually abused prior to placing the child with a foster family. A member of the foster family (including their own children) may be the first person to suspect or find out that the child has been sexually abused.

If this should happen, carers should inform the child that they will support him/her to tell his/her account to the relevant people. Carers should not question the child about the information they have been given.

Even if a disclosure sounds unbelievable, it is important to listen to and believe the child. The child has chosen to entrust the carer with the information. The child usually has fears about what will happen if he/she discloses abuse.

As soon as possible after the conversation, the carer should record exactly what the child has said, using the child’s words. The carer must then contact the Department child protection worker to report the alleged abuse. If it is after hours, contact should be made with the CCU.

What to do if a child in the CEO’s care discloses sexual abuse:

- Remain calm and listen.
- Accept what the child says.
- Allow the child to express his/her feelings.
- Do not clarify words for the child as it is important not to interfere with what the child is saying.
- Do not question the child for detail, as this may have ramifications if legal proceedings occur.
- Tell the child that he/she is not to blame.
- Do not promise the child that you will not tell anyone else.
- Thank the child for talking with you.
- Record exactly what the child has said, using the child’s words.
- Contact the Department child protection worker or the CCU as soon as possible.
Carers need to be aware that, in making the decision to take a child into their care, they expose themselves and their family to the possibility that a safety and wellbeing concern may be made against them.

The information in this section is provided at the recommendation of experienced carers and workers. They want foster families to know what to do to reduce the risk of an allegation being made against them or a member of their family.

The Department is required to investigate all safety and wellbeing concerns regarding a child in the CEO’s care, including cases where the child has left the foster family’s care.

The child, and other children in the family’s care, may be removed from the home while an investigation is being carried out. All decisions will be made in the best interests and safety of the child(ren).

If the foster family requires support while a safety and wellbeing concern is being investigated or they have further queries, they can contact the FCA.
19.1 Suggestions to protect foster families from safety and wellbeing concerns in care

There are a number of precautions a foster family can take to protect themselves and their family from an allegation being made against them. During Preparation Training foster carers will learn more about identifying stress factors and improving communication between each member of the foster family and the child in the CEO’s care to assist in minimising the risk.

The following strategies may be implemented before the child is placed in foster care to allow the foster family time to adjust:

- Establish clear household rules about acceptable behaviour, privacy, and discipline such as knocking and seeking permission before entering a closed door.
- Establish a rule that everyone wears suitable clothing when walking between the bathroom and bedroom or get dressed while in the bathroom. Nudity of adults and young people in front of a child in care is not appropriate.
- Establish a privacy rule for the bathroom, toilet and bedroom for the child and the foster family. Consider appropriate ways to attend to emergencies in the bathroom or bedroom that would not place the foster family in a risky situation.
- Establish an open-door policy when children are playing in their bedrooms or areas where they are not directly supervised.

Additionally, the following may be considered once the child is placed in foster care:

- Inform the Department child protection worker of any significant events regarding the child such as illnesses, injuries or violent temper tantrums.
- Record when, where and why significant events occurred including the actions taken. While it may not be evident ‘why’ certain behaviours have occurred, it will be helpful to note what was happening immediately prior to the incident. Be objective in recording this.
- Keep a diary of observations and events about the child and, as mentioned above, remain objective in the diary keeping and recording.
- It is preferable for the female carer to attend to personal care.
- Be mindful when engaging in physical contact games with children. Assess the child’s reaction and proceed cautiously.
• Carers must not let a child in the CEO’s care into their bed or for members of the foster family to share the child’s bed. Carers should also consider whether it is appropriate to share their bed with their own children while the foster child is in the home.

• Encourage the carers’ children and the foster child to report any behaviour that makes them feel uncomfortable. Speak to the Department child protection worker about age appropriate ways of talking to their own children and the child about protective behaviours.

• If the child has experienced abuse or neglect, check he/she is not left in the care of other people or exposed to other people without appropriate supervision until the foster family knows the child well.

• Some children, particularly those who have been sexually abused, may demonstrate inappropriate sexualised behaviours towards a carer or another family member. Carers need to be aware of their own reactions to this behaviour and remind themselves that this behaviour arises out of the child’s experience and that their job is to provide safety. The child should be gently, yet firmly dissuaded from inappropriate behaviours of this nature. This behaviour must be discussed with the Department child protection worker including appropriate the use of management strategies.

• All children need positive displays of affection, but it is important to assess the child’s reaction to determine the level of physical contact with which the child is comfortable.
When a safety and wellbeing concern in care is made, carers can expect:

- That the safety and wellbeing concern will be treated seriously as the Department has a duty to investigate all safety and wellbeing concerns for a child in the CEO’s care.
- To be treated fairly and respectfully in accordance with the Department policy, procedures and guidelines.
- That their explanations may not be automatically accepted in preference to the explanations made by the child or the child’s family.
- That they will be informed by telephone that a Department child protection worker will make a time to meet with them.
- That the precise nature of the allegation will be provided to them in writing.

What to do if a safety and wellbeing concern in care is made against a carer or a family member:

- Carers should make time to collect their thoughts and recover from the initial shock before progressing with an interview.
- Have a support person with them during all meetings, interviews and discussions to assist them in remembering what has been said. The support person can take notes.
- If the support person is not available at the time of the interview, ask for the interview to be rescheduled so he/she can attend later.
- If a support person is not available, carers should take notes.
- If carers do not wish to participate in the interview, they can request to have the concerns put in writing, and they can then respond in writing.
- Carers can ask for copies of all documentation relating to the interviews, meetings, and discussions.
- Carers can obtain support from the FCA, if required.
20. Support for carers

The Department is committed to supporting and sustaining stable care arrangements and is, therefore, committed to a partnership through teamwork with carers. A range of Department staff will be available to support carers and their families.

The Department can coordinate access to support and mentoring activities for foster families (including the carer’s children and the child in the CEO’s care) and opportunities for formalised peer support. This is where more experienced carers are linked with less experienced carers.

The Department will also provide opportunities for carers to debrief when required (ideally with a Department psychologist or by referral to an external agency).

The FCA is available to provide support to carers. This includes telephone support, office meetings and home visits, and advocacy services to support carers through the Department processes and at times of crisis. The FCA also provides information, emergency items for children in care, and regular morning teas for carers.

20.1 Learning and development

The Department believes that carers who are supported and have access to learning opportunities to increase their skills as carers, will be better carers and remain carers for longer. Carers can access learning opportunities in a variety of ways. These include:

• e-learning and foster carer workshops; and
• carer meetings held in each district.

Carers are encouraged to discuss learning opportunities with the Department child protection worker.

20.2 Counselling

From time to time, carers and their families may find caring for a foster child difficult and personal or family counselling may be required. As part of the Department’s support to foster families, counselling is available through independent psychologists and counsellors. Carers and family members can obtain details from the FCA or the Department child protection worker.
The service is free, completely confidential and objective. In metropolitan and major regional areas, the counselling will be face-to-face whereas in remote areas, telephone access to a counsellor will be available.

Counselling may also be offered from within the Department. Carers can talk to the Department child protection worker about this service.

20.3 Ngala Parenting Line

Ngala provides support and information for parents and carers with children from pre-birth to 18 years of age including parenting workshops and the Indigenous Parenting Service (for parents and carers of children 0-8 years and living in the City of Swan).

Ngala’s online parenting consults are private, online talks about a parenting challenge. Consults are designed for the early years with a focus on birth to 2 years of age. Ngala will also be able to offer help about trauma and attachment issues of children in OOHC.

Support and information are available by calling (08) 9368 9368 or 1800 111 546 (freecall).

20.4 Short-break support

Carers, like other parents, may need a break from time to time. The aim of short-break support is to enhance the child’s quality of life, support carers to continue in their role as the primary carers and sustain the foster caring relationship.

Short-break support should be as normal as possible with the focus on identifying natural supports, whenever possible.

Some short-break support options include using family or friends, child care, holiday programs, camps, babysitting or formal planned or emergency short-break.

Short-break support should be child focused and take into consideration the best interests of the child at the time; for example, an infant’s needs for attachment and bonding, or a child who has experienced many carer changes and requires stability as a priority. Carers should discuss this with the Department child protection worker.
To support a child in the CEO’s care in the respite process, carers should refer to the Preparing a Child for Respite Information Sheet on the Department’s website.

20.5 Taking a break from fostering

Carers may choose to take a break from fostering for a range of personal and family reasons. If carers find the need for a break, they should discuss their plans with the Department child protection worker, including when they may be ready to recommence their carer role.

If the break is longer than 12 months, carers will need to undergo a reassessment before commencing fostering again.

20.6 After a child leaves

A child leaving a care arrangement can mean many changes and feelings for the foster family. The family may need time to grieve. The foster family can debrief with various Department staff should they have a need.

To assist in the grieving process, carers may find it useful to:

• Allow themselves to have mixed feelings when the child leaves.
• Support their own children in expressing their feelings.
• Discuss how the family feels about fostering in general.
• Talk their feelings through with other carers.
• Talk to the FCA, as they will know exactly how foster families feel.

20.7 Other services

There is a range of other community services available to assist carers, their families and children in the CEO’s care. Some of these services, including contact details, are listed in Section 24: Handy services.
21. Transitions and leaving care

21.1 Transitions

When a child enters the CEO’s care, is returning home or going to another care arrangement, carers play a vital role in making the transition as positive as possible for the child.

While every effort is made to plan transitions for children in care and to support the transfer of attachment, it is not possible to plan all transitions. Transitions can produce grief reactions for everyone involved. Key messages given to a child in conversations and the behaviour of those in the care team (Department staff, carers and the birth parents) towards each other and the child at this time are important ways to show support for a child during such transitions.

21.2 Leaving care

Planning for leaving care commences when a child in the CEO’s care reaches 15 years of age. The initial focus of planning is the identification and development of life and independent living skills. Planning is designed to occur incrementally to allow the child/young person time to develop skills and deal with these life decisions in a supported way.

Part of leaving care planning is to help the young person obtain a driver’s learner’s permit and assist him/her in planning and preparing for the process of obtaining his/her driver’s licence. The Department can provide funding to help with the cost of obtaining a driver’s licence. Carers can discuss this with the Department child protection worker.

The Department has developed a guide for carers supporting young people preparing to leave care. The Leaving Care to Independence Guide provides information on the available services and support from both the Department and other agencies.

Carers can request a copy of the guide through the Department child protection worker or access it on the Department’s website.
22. Dispute resolution

Carers will not always agree with decisions made about a child in their care. It is essential, however, that carers feel confident that their views and opinions about the decision are heard by the Department and that these views have been considered.

Working together is the best way to fix many problems. In most instances, disputes are best resolved if relevant parties sit down and discuss the issues. Issues may be resolved by:

- focusing on the shared commitment to meeting the best interests of the child;
- identifying areas of agreement;
- agreeing to shared goals rather than being stalled in the process to achieve these goals;
- using an independent facilitator, if required; and
- involving an advocate, if the carer wishes.

Carers who have a complaint about the Department are advised to first speak to the Department child protection worker or team leader. If they are still dissatisfied with the outcome, the carer should talk to the district director. The carer can also contact the Department Complaints Management Unit (telephone 9222 2594 or country free call 1800 013 311).

Carers can obtain a copy of the Department *Resolving your Complaints Kit*, either by requesting a copy from the Department child protection worker or accessing it from the Department website. The kit provides information about how to make a formal complaint where the issue cannot be resolved through discussion with the Department child protection worker or team leader.

Carers who are dissatisfied with decisions made by the Department in a child’s care plan, can initially speak to the person who chaired the care plan meeting. If the carers are still not satisfied, they can request a review of the decision by the Care Plan Review Panel. Foster carers should be given a copy of the Care Plan Review Panel brochure which outlines the application process.

Carers who are still dissatisfied can appeal to the State Administration Tribunal (SAT).

Carers can contact the FCA for assistance and support.
22.1 Advocate for Children in Care

The Department needs to protect and promote the interests of children in the CEO’s care. The Advocate for Children in Care (the Advocate) position has a specific focus on children in the CEO’s care, their views and their concerns.

The Advocate can help children in the CEO’s care with problems or complaints that are not able to be resolved with their Department child protection worker. The Advocate can also help children have a say in decisions that affect their lives.

The Advocate will:

• Listen to children, help them say what they want to say and help get adults to listen.

• Give information and advice about what children are entitled to and how they should be treated.

• Support children if they want to have a decision reviewed or complain about things they believe are wrong.

• Speak to people in authority about what children say works or does not work in their lives.

Carers should let the children in their care know about this service.

Contact details:
Telephone: 08 9222 2518
Freecall: 1800 460 696
Mobile: 0429 086 508
23. Glossary

Aboriginal and Torres Strait Islander Child Placement Principle
The Aboriginal and Torres Strait Islander Child Placement Principle is a nationally agreed standard in determining placement of Aboriginal and Torres Strait Islander children in out-of-home care. The principle aims to enhance and preserve the connections an Aboriginal and Torres Strait Islander child has with his/her family, community and culture. It is also outlined in the Children and Community Services Act 2004.

Carers
Foster, family or significant other carers who care for a child in the CEO’s care.

Care plan
Is a written plan that identifies the needs of the child in the CEO’s care, outlines the steps and measures required to address those needs, and sets out the decisions about the care of the child while he/she is in care.

Care plan meeting
A meeting initiated by the Department to bring together the child, birth parents, carers and other people who have a direct and significant interest in the wellbeing of the child to discuss the child’s needs and to decide on a plan of action for the child in the CEO’s care. Carers are to be supported to participate in this process.

Carer Report
Is a written report that carers may write and provide to other parties attending a child’s care plan meeting (including a review meeting).

Care Plan Review Panel
An independent panel that receives applications made to the CEO for the review of care planning decisions made at a care plan meeting for children who are in the CEO’s care. The Panel makes recommendations to the CEO who decides on the outcome of the review.
Chief Executive Officer (CEO)
The Chief Executive Officer of the Department assists the Minister for Child Protection in the administration of the *Children and Community Services Act 2004*. In Western Australia, this is the Director General of the Department of Communities.

CEO’s care
A child is referred to being in the CEO’s care when he/she is in provisional protection and care, under a protection order (time limited), protection order (until 18 years), negotiated placement agreement or provided with placement services.

Child
Means a person who is under 18 years of age or, in the absence of positive evidence as to age, is a person who is apparently under 18 years of age.

The term ‘child’ is used throughout this publication to mean children and young people.

*Children and Community Services Act 2004 (The Act)*
This is the legislative basis for child protection responses in Western Australia.

*Children and Community Services Regulations 2006 (the Regulations)*
This is the legislative basis which includes details of the competencies an individual has to meet to be approved as a carer. The Regulations also outline the process for the revocation of carer approval.

Care Arrangement Referral (CAR)
A record of information specific to the child in the CEO’s care such as current health status, any medication he/she is prescribed, allergies, the school he/she is attending, sporting and other activities in which he/she is involved, favourite toys, pets they have and have had to leave behind, and when they will see their parents next.

Foster Carer
Approved volunteers who are willing and able to care for a child in the CEO’s care on a temporary or permanent basis.

Family Carer
An approved carer who is a relative of a child in the CEO’s care (parent, grandparent, step-parent, sibling, uncle or aunt, cousin).
Leaving care plan (care plan modified for leaving care)
When a child in the CEO’s care reaches 15 years of age, the Department child protection worker in consultation with all relevant parties will revise the child’s care plan and modify it to reflect the leaving care arrangements. In doing so, each child leaves care in a planned and supported way.

Permanency planning
Permanency planning is the case management practice used to provide children in the CEO’s care with safe, continuous and stable living arrangements, lifetime relationships and a sense of belonging.

Protection Application
Is an application made by a Department child protection worker to the Children’s Court for a finding that a child is in need of protection.

Protection Order
Means any of the following orders made by the Children’s Court – protection order (supervision); protection order (time-limited); protection order (until 18); and protection order (special guardianship).

Significant Other Carer
A type of family carer who is not a relative of the child in the CEO’s care but would be included in the child’s ecomap, has known and demonstrated an interest in the child, and/or family for a significant period and belongs to the same cultural group.

Subsidy
A sum of money paid to the carer to cover the normal day-to-day costs of caring for the child.

Wellbeing
Wellbeing of a child includes the care, development (physical, emotional, psychological and educational development), health (physical, emotional and psychological health), and safety of the child.
<table>
<thead>
<tr>
<th><strong>24. Handy Services</strong></th>
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</thead>
<tbody>
<tr>
<td><strong>Aboriginal Legal Service of WA (Inc)</strong></td>
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</tbody>
</table>
| **Alcohol and Drug Support Line (24-hour service)**  
www.mhc.wa.gov.au | (08) 9442 5000 1800 198 024 |
| **Department of Communities**  
www.communities.wa.gov.au | (08) 9222 2555 1800 622 258 |
| **Advocate for Children in Care** | (08) 9222 2518 1800 460 696 0429 086 508 |
| **Complaints Management Unit** | (08) 9222 2594 1800 013 311 |
| **Crisis Care Unit** | (08) 9223 1111 1800 199 008 |
| **Foster Care Association of WA**  
www.fcawa.com.au | (08) 9242 4222 |
| **Kids Helpline (24-hour service)**  
| **Kidsafe WA**  
www.kidsafewa.co.au | (08) 6244 4880 1800 802 244 |
| **Health Direct (24-hour health advice and information)**  
www.healthdirect.gov.au | 1800 022 222 |
| **Legal Aid WA**  
www.legalaid.wa.gov.au | 1300 650 579 |
<table>
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<tr>
<th>Organization</th>
<th>Contact Information</th>
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</thead>
<tbody>
<tr>
<td>Lifeline WA (24-hour crisis support)</td>
<td>13 11 14</td>
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<tr>
<td><a href="http://www.lifeline.org.au">www.lifeline.org.au</a></td>
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<tr>
<td>Ngala Parenting Line</td>
<td>(08) 9368 9368</td>
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<tr>
<td><a href="http://www.ngala.com.au">www.ngala.com.au</a></td>
<td>1800 111 546</td>
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<tr>
<td>Poisons Information Centre</td>
<td>13 11 26</td>
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<tr>
<td>Relationships Australia</td>
<td>1300 364 277</td>
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<tr>
<td><a href="http://www.relationshipswa.org.au">www.relationshipswa.org.au</a></td>
<td></td>
</tr>
<tr>
<td>Sexual Assault Resource Centre (SARC)</td>
<td>(08) 6458 1828</td>
</tr>
<tr>
<td><a href="http://www.tisnational.gov.au">www.tisnational.gov.au</a></td>
<td>1800 199 888</td>
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<tr>
<td>Translating and interpreting Service (24-hour service)</td>
<td>1800 131 450</td>
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<tr>
<td>Yorgum Aboriginal Family Counselling Service</td>
<td>(08) 9218 9477</td>
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