Committee Secretary  
Senate Standing Committee on Community Affairs  
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To the Senate Standing Committee on Community Affairs

Re: Out of home care inquiry

MacKillop Family Services (MacKillop) would like to thank the Senate Standing Committee on Community Affairs for considering the issue of out of home care. The terms of reference have provided a unique opportunity for important issues about out of home care to be considered at the federal level, and for recommendations to have lasting impact, providing guidance for all levels of government and the community sector.

MacKillop provides services to children, young people and their families in Victoria, New South Wales (NSW) and Western Australia (WA). The agency is one of the largest out of home care providers in Victoria, where we currently provide residential care, specialist residential care and foster care. We provide residential care, foster and kinship care in NSW and foster and kinship care in WA. As part of a suite of services, MacKillop works with families providing family referral, support and early intervention services, disability services, specialist education services and refugee services.

As an agency that works with children, young people and families across three states, MacKillop supports approaches to care that are reflective of best practice and nationally consistent.

MacKillop’s submission addresses the questions raised in the Committee’s terms of reference and have provided a list of recommendations for consideration. As the terms of reference are quite broad we have chosen to focus our responses on areas where we believe the Commonwealth can make a positive and lasting difference to out of home care.

Thank you for the opportunity to contribute to the Inquiry, and look forward to learning of the findings. If you have any queries related to this submission, please contact Dr Nick Halfpenny, Director of Policy and Quality, on 03 9257 2323.

Yours sincerely,

Micaela Cronin  
CEO, MacKillop Family Services
MacKillop Family Services
Submission to Inquiry into Out of Home Care
Prepared for the Senate Standing Committee on Community Affairs

Recommendations
In undertaking its inquiry, MacKillop urges the Committee to consider:

1. Families that come to the attention of Child Protection are often vulnerable across a number of domains. Interventions with vulnerable families should focus on a range of factors impacting on parenting capacity and capability;
2. Research on the numbers of children with a disability in out of home care is inadequate and inconsistent and requires further development;
3. The potential impact of the National Disability Insurance Scheme (NDIS) on the numbers of children with disability entering out of home care, and the need to monitor this;
4. If the NDIS has a role to fund the support of families and carers at risk of child relinquishment;
5. Promoting a nationally consistent policy approach to funded support for young care leavers, up to the age of 21;
6. Promoting a nationally consistent policy on early intervention support for families at risk of Child Protection interventions;
7. Advocating for the prompt consideration of the options provided to the government in the report Professional Foster Care Barriers, Opportunities and Options and determination of a plan to remove barriers to the implementation of professional foster care;
8. Seeking clarification on the status of COAG’s role and responsibilities in relation to the National Framework for Protecting Australia’s Children;
9. Supporting and promoting the further development of reporting measures for the National Standards for Out-of-Home Care;
10. Promoting funded support for the maintenance of client files and the supported release of client records;
11. Promoting the federal government’s continued involvement in family support through early intervention.

1. Drivers of the increase in the number of children placed in out of home care, types of care that are increasing and demographics of the children in care

In MacKillop’s experience, Child Protection interventions occur within vulnerable communities, amongst families that are disadvantaged on multiple domains. Families we work with increasingly seek support on a range of issues such as poverty, mental ill health, drug and alcohol abuse and intergenerational trauma, which negatively impact on parenting capacity. We also recognise that Aboriginal children and young people continue to be over-represented in the population of out of home care.

MacKillop is concerned with the numbers of children with a disability entering out of home care. Research suggests a significant percentage of children and young people who enter the out of home care system have some degree of disability and are at higher risk of a mental health disorder. This is supported by anecdotal reports from MacKillop staff suggesting the proportion of children and young people in care with a disability is high. The data on this issue is far from robust or comprehensive. For example, a recent CREATE Foundation report noted that estimates as to the proportion of children and young people in out of home care with a disability range from between four and 60 per cent1.

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There are anecdotal reports from the NDIS in Barwon launch site that the lack of support for families with a child with a disability, such as respite care and specialised case management support, under NDIS is pressuring families to grapple with the issue of child relinquishment potentially resulting in these children being placed into out of home care. Where previously agencies were able to provide a range of funded supports this type of support has not been well recognised under the NDIS and is placing increased pressure on vulnerable families.

MacKillop is of the view that the NDIS has a role in better supporting families in which a child has a disability, in ways that the family themselves deem to be useful. MacKillop is concerned that without NDIS funded tailored support for families, there could be an increase in the numbers of children and young people with disability entering out of home care.

**MacKillop urges the Committee to consider:**
- **Families that come to the attention of child protection are vulnerable across a number of domains and interventions with vulnerable families should focus on a range of factors impacting on parenting capacity;**
- **Research on the numbers of children with a disability in out of home care is inadequate and inconsistent and requires further development;**
- **The potential impact of the National Disability Insurance Scheme (NDIS) on the numbers of children with disability entering out of home care, and the need to monitor this;**
- **If the NDIS has a role to fund the support of families and carers at risk of child relinquishment.**

2. The outcomes for children in out of home care (including kinship care, foster care and residential care) versus staying in the home

MacKillop notes the literature review on care leavers undertaken by the Australian Institute of Family Studies that found:
- Just under half of care leavers were unemployed after leaving care
- Most experienced homelessness and housing insecurity
- One in three young women were pregnant or had a child since leaving care
- Around half had committed criminal offences since leaving care, and
- Many had troubled relationships with family.

Although a state issue, MacKillop strongly advocates for the position that National Standards should include fully funded accommodation and support for young people with a care experience, up to the age of 21. This would give young people longer to establish themselves and move towards independence. Longer periods of support for young people leaving care are likely to result in better long term outcomes.

**Outcomes for young people for whom family life was traumatic but they were not removed to care**

It is difficult to make a direct comparison of the outcomes for young people who have experienced out of home care against the outcomes for young people who remain in a home environment where they are experiencing violence, abuse and trauma. MacKillop is of the view that many family situations require immediate intervention to protect children and safeguard their best interests. In some cases, this means removal from parents. MacKillop however, is not in a position to compare outcomes for those staying in the home and being removed from the home.

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Certainly MacKillop is of the view that every effort should be made to support families to parent well and remain together, if that is in the child’s best interest.

**MacKillop urges the Committee to consider:**

- **Promoting a nationally consistent policy approach to funded support for young care leavers, up to the age of 21:**
- **Promoting a nationally consistent policy on early intervention support for families at risk of child protection interventions.**

3. **Current models for out of home care, including kinship care, foster care and residential care**

The majority of children (93 per cent) in out of home care across Australia are placed in home-based care, with foster carers or kinship carers. As at 30 June 2012 in Victoria, 91.6 per cent of children in out of home care were placed in home-based care, of which 34.9 per cent are placed in foster care and 45.6 per cent are placed with relatives/kin, with similar rates observed in previous years.

MacKillop acknowledges that there are a number of models of out of home care including, foster care, kinship care, residential care, lead tenant and transitional care and therapeutic models of care. We note the majority of children (93 per cent) in out of home care in Australia are placed in home-based care, with foster carers or kinship carers.

In this submission we have chosen to focus on two specific models of care – foster and therapeutic residential care.

**Foster care**

The foster care system in Australia is experiencing a shortfall in foster carers to accommodate the increasing numbers of children in out of home care, widening the gap between the demands for, versus supply of, foster carers.

The availability of foster care placements and proportion of children placed in foster care has declined for a number of reasons, including the complexity behaviours of children and young people requiring care, the need for ongoing contact with family and deliberate policy shifts to promote kinship models of care. Another reason is social and economic shifts resulting in more women in the workforce and women returning to paid employment after having children.

In spite of the challenges in the foster care system, MacKillop is of the view that foster care can produce positive outcomes for children and young people but there is significant scope to improve the support provided to foster carers, specifically financial support.

Additionally, professional foster care has the potential to fill a gap between foster care provided by volunteers and residential care. The professional foster care model can be described as:

A model of home-based foster care whereby carers are employed in a professional capacity to care for children and young people with complex needs, who are unable to be placed in more traditional less intensive forms of out of home care. Under professional care models, carers would be paid a salary that is commensurate with their level of skill; would be required to hold a relevant qualification and / or undertake ongoing competency based learning and development; and would provide, or have access to, therapeutic clinical support and other specialist supports.

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4. ACILAllen Consulting, *Professional Foster Care: Barriers, Opportunities and Options*, 2013, page 1
Such a model would be a valuable supplement, as opposed to an alternative, to existing models of foster care. There are however, a number of complex and interlinked barriers to introducing a professionalised foster care model, including provisions relating to conditions of employment, taxation and occupational health and safety.

As noted in the research undertaken by ACIL Allen Consulting titled Professional foster care: Barriers, opportunities and options, there is a need for a professional home-based out-of-home care option for children and young people with complex needs. They recommend state and federal governments agreeing on a set of policy parameters to underpin the development of professional foster care in Australia. MacKillop supports that view.

Therapeutic Residential Care
Across Australian states, the practice of therapeutic residential care is based on attachment theory, trauma theory, the neurobiology of attachment and trauma and/or the concept of resilience.

In addition to kinship care, foster care and residential care, MacKillop operates a model of residential care known as Therapeutic Residential Care (TRC). The elements of the model include:

- Direct support of a therapeutic specialist;
- Trained staff and consistent rostering;
- Engagement and participation of the young people;
- A focus on the mix of young people;
- Consistent and comprehensive care teams;
- Reflective practice;
- Organisational congruence and commitment;
- A therapeutic physical environment;
- Exit planning and post exit support.

MacKillop operates a number of TRC homes across Victoria and is concurrently implementing the Sanctuary model, which is a trauma-informed framework for creating a culture of safety for the children, young people and families we work with, and our staff. In MacKillop’s view, a therapeutic approach to care, such as the Sanctuary model, is an essential component in better supporting children and young people in care.

As indicated in the Evaluation of the Therapeutic Residential Care Pilot Programs undertaken for the Victorian Department of Human Services, TRC practice leads to better outcomes for children and young people, compared to their counterparts in general residential care, including in achievement of developmental milestones, stability, better continuity of care and greater opportunities for family reunification.

Children and young people in out of home care have experienced trauma and abuse prior to their entry into care. MacKillop acknowledges that the experience of trauma can have significant impacts on the development and behaviour of children and young people. The impacts of trauma include difficulties forming positive relationships (disrupted attachment). MacKillop is of the view that high quality therapeutic residential care should be one of the suite of out of home care placement options for vulnerable children and young people with multiple and complex needs.

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5 ACIL Allen Consulting, Professional Foster Care: Barriers, Opportunities and Options, 2013, page 39
7 Verso Consulting, Evaluation of the Therapeutic Residential Care Pilot Programs: Final Summary and Technical Report, Department of Human Services, 2011, page 4
Therapeutic Residential Care is better resourced, allowing for more innovative and responsive staffing arrangements, higher staffing ratios, better training for staff and carers and access to therapeutic professionals. MacKillop notes that the Victorian Department of Human Services’ Out-of-Home Care: A Five Year Plan has committed to increase therapeutic residential care places. In our view, all residential care should be funded and delivered from a therapeutic perspective. It is expected that the introduction of therapeutic residential care across the state will be accompanied by increased funding commensurate to delivering enhanced therapeutic services.

There is enormous potential for the out of home care system to provide a more healing environment for the children and young people in its care through TRC and therapeutic foster care approaches.

MacKillop urges the Committee to consider:

- Advocating for the prompt consideration of the options provided to the government in the report Professional Foster Care Barriers, Opportunities and Options and determination of a plan to remove barriers to the implementation of professional foster care;
- Promote therapeutic models for all out-of-home care

4. Current cost of Australia’s approach to care and protection

No comment.

5. Consistency of approach to out of home care around Australia

MacKillop provides services to children, young people and their families in three Australian states. To improve the efficiency of the system and reduce administrative burden, MacKillop is supportive of consistent national approaches to some areas of out of home care. Areas include a national working with vulnerable persons check scheme and the further implementation of the National Standards for Out-of-Home Care, including the development of the full suite of reporting measures.

The progress of these initiatives is unclear given the recent changes to the Council of Australian Governments (COAG) and the COAG agenda.

In our view, these issues require thorough national oversight to drive implementation in the interests of consistent approaches to care and protection, regardless of where a child lives.

MacKillop urges the Committee to consider:

- Seeking clarification on the status of COAG’s role and responsibilities in relation to the National Framework for Protecting Australia’s Children;
- Supporting and promoting the further development of reporting measures for the National Standards for Out-of-Home Care.

6. What are the supports available for relative/kinship care, foster care and residential care?

No comment.
7. Best practice in out of home care in Australia and internationally

As mentioned above, MacKillop is of the view that the therapeutic residential care model in Victoria represents an excellent example of best practice in out of home care. The evaluation of the TRC provides solid evidence of the efficacy of the model.

Similarly the model of therapeutic foster care developed in Victoria (The Circle Program) is a further example of promising practice in out of home care supported by evidence of a recent evaluation.

8. Consultation with individuals, families and communities affected by removal of children from the home

MacKillop’s Heritage and Information Service, funded by MacKillop, assists people who, as children and mothers, lived in the homes of MacKillop’s founding Congregations. The Heritage and Information Service provides supported access to records, facilitates family reunifications and plays a lead role in advocating for and raising community understanding of the experiences of former residents.

For this reason, MacKillop is in a unique position to reflect on the experiences of those affected by the removal of children and we encourage the Committee to review findings of earlier inquiries on these issues, including:

1. *Bringing them home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families* (Human Rights and Equal Opportunity Commission, April 1997); and

Both of these Inquiries, along with the Royal Commission inquiring into institutional child sexual abuse, document the long term impacts of removal of children and the negative outcomes for those with a care experience. We note, in particular the historical and ongoing impacts upon the group known as the Stolen Generations as well as the people who experienced forced adoption practices.

MacKillop urges the Committee to consider promoting funded support for the maintenance of client files and the supported release of client records.

9. Extent of children in out of home care remaining connected to their family of origin

Families will continue to be the primary and enduring source of identity and social connection for the majority of children and young people in care. The needs of vulnerable children and young people cannot be separated from that of their families. Vulnerable children and young people benefit from initiatives aimed at including and strengthening families. For example, children and young people in care achieve better outcomes when their family is actively engaged in their lives and we know that a large proportion of young people leaving care return to their families for support.

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There is considerable scope to improve the engagement of families with children in care from enhancing participation in decision-making with their children through to the provision of better wrap-around supports to improve the prospects of reunification. We believe the resources currently directed towards engaging families (including extended family) are insufficient.

We support actions to properly resource initiatives to engage families at all levels of intervention to build on their strengths. There is an urgent need at the point children and young people enter care to provide the family with significant intervention to ensure the ongoing safety and development of children. Our experience suggests that the levels of support available to parents decrease dramatically once the child enters the care system. While it is important to ensure interventions with the child or young person in care are supported, more could be done to support parents towards reunification.

10. **Best practice solutions for supporting children in vulnerable family situations including early intervention.**

MacKillop supports early intervention with families and MacKillop’s Community Programs include early intervention services funded through the Commonwealth Department of Social Services.

It is our experience that many of the families we support through our Community Programs services have experienced their own trauma.

It is our view that early intervention to build parenting capacity is best undertaken through a multi-disciplinary approach, which includes family support workers, disability support workers, early childhood intervention services and specialist and allied health services. Importantly, the approach must be open and flexible to the range of issues a parent may require assistance with. A suite of other supports may need to be in place just to ensure participation in early intervention programs (for example childcare, transport costs, assisting with managing conflicting appointments). It may also be that assistance with a mental health issue or homelessness is of higher priority than parenting capacity. Parenting capacity may improve by virtue of the right kind of support and assistance with other issues. Therefore early intervention focussed on parenting capacity has to be accompanied by a range of necessary supports.

Early intervention for vulnerable families may also require more tailored interventions. In particular, women with disabilities, Indigenous families and families from culturally and linguistically diverse (CALD) backgrounds may require specialised supports. Families in which family violence is a factor will also require a more specialised approach.

*MacKillop urges the Committee to consider promoting the federal government’s continued involvement in family support through early intervention.*