



Audit

For the Information of the Complaints in Care
Monitoring Group (CAFS)

*CAFS Policy: Responding to complaints about the
safety and well-being of children and young people
who are in out of home care 2008*

**MR PAUL MASON,
COMMISSIONER**

August 2008

The Commissioner for Children is an independent, statutory office responsible to the Parliament of Tasmania. The Commissioner's functions include promoting the rights and well-being of children and young people, examining and advising the Government on policies, practices and services provided for children and laws affecting their health, welfare, care, protection and development.

This report arises from an audit of Children and Family Services (CAFS) files conducted by the office of the Commissioner for Children, at the Southern, North Western and Northern Service Centres of CAFS from July 16 – 30, 2008.

The Commissioner wishes to record his appreciation for the professionalism, cooperation and warm welcome afforded by staff and management in all three centres. The Commissioner would also like to express sincere thanks for the significant work undertaken by the Planning, Performance and Evaluation Unit, Children and Family Services who developed the data sample methodology after consultation with this office.

The Audit is predicated by the Commissioner's membership in the OOHC *Complaints Monitoring Group*, DHHS and a specific request by the Commissioner for Children (CfC) to the Deputy Secretary, DHHS to conduct an audit of the Department's policy "*Responding to complaints about the safety and well-being of children and young people who are in out of home care 2008*".

CFC Audit 2008

This project was proposed under Para 14.6 of the current DHHS policy *Responding to complaints about the safety of children and young people who are in out of home care 2008*. (*"the Policy"*):

"The Commissioner for Children is invited to conduct random audits of the complaints process for quality assurance purposes."

The CFS Policy has been in place since January 2006, with revisions to the policy and process implemented in April 2006 and January 2008. This audit is concerned with the most recent policy amendments implemented on January 2, 2008 and is limited to the first six months of operation since implementation of the new Policy.

Responding to complaints about the safety of children and young people who are in out of home care 2008 :

2. Purpose

2.6 *Children in out of home care are particularly vulnerable by virtue of their history and need someone supportive to talk with about their concerns. Early and ongoing engagement with children through frequent visits, discussions and activities provides the opportunity for children to develop a trusting relationship with their Child Protection Practitioner¹. This relationship is central to early intervention and prevention of placement concerns.*

¹ CfC clarification by email 7/10/08 (Mark Byrne, CAFS) to mean Child Protection Worker

2.7 Carers are entrusted with the day-to-day care of very vulnerable children. Carers are 'ordinary' people doing 'extraordinary' work. This requires equally extraordinary support to provide for the physical and emotional needs of children in their care. Ongoing engagement with carers is central to identifying and resolving concerns and issues before they arise or escalate.

This audit specifically examined two Standards embedded in the Policy regarding the support and visitation of children and young people in care as well as their carers by Departmental Child Protection Workers (CPWs).

The Policy

4. Policy principles

4.1 The operation of this policy will be based on the following principles:

4.1.7 Children will be visited and talked with frequently by their Child Protection Practitioner to foster a trusting relationship and enhance the child's opportunity to talk about their concerns.

4.1.8 Carers will be visited and talked with frequently by the Out of Home Care Worker to ensure that adequate support is provided.

The Policy:

6.1 Engaging with children

The Tasmanian Practice Framework emphasises and evidences the importance of a child's stability of care and sense of attachment to their future well-being and life outcomes. The Practice Framework equally emphasises the importance of engaging with children to build a trusting relationship that promotes their opportunity and willingness to talk about their concerns, fears and feelings. In the same way that assessing a child's safety requires sighting the child and talking with them (where possible and appropriate), engaging and building a relationship with children and young people similarly requires spending time with them. This is critical to prevent care concerns from developing in out of home care placements and allows for early intervention when care concerns are apparent.

The scope of the audit was restricted to looking at numbers of visits as per the wording and content of the policy, without reference to other practice in place.

The audit was based on the following Standards:

6.1.1 *All children in out of home care will receive visits from their Child Protection Practitioner according to the following standards. Part of the time spent with the child will involve specific inquiry about the placement, their thoughts and feelings about their care, and what they would like to see improved.*

Standard:

Children will be visited and spoken with by their Child Protection Practitioner as below. At least some of the visit will be held away from the usual care-givers and in private.

- ***Child on an Assessment Order will receive a visit and will be talked with no less than once in every one week period.***
- ***Child on a twelve-month Care and Protection Order will be visited and talked with no less than once in every four week period.***
- ***Child on a Care and Protection Order until age 18 years will be visited and talked with no less than once in every six week period.***

AND

6.2.1 *All carers will receive visits from their Out of Home Care Support Worker according to the following standards. Along with required medication management standards checks, there will be specific discussions with the carer to highlight any concerns they are experiencing in caring for the children in their care and identifying the supports that are needed to address the concerns.*

Standard:

Carers (who have children in their care) will be visited and spoken with by their Out of Home Care Support Worker as below

- ***Carer with less than twelve months experience in caring for children will be visited and talked with no less than once in every four week period.***
- ***Carer with more than twelve months experience will be visited and talked with no less than once in every six week period.***

Methodology

Files were audited by the Commissioner for Children and qualified staff in each of the Area Service Centres over a period of three weeks in July 2008 using a tool developed by the CFC office. The sample for the audit was developed by the Performance and Evaluation Unit, Children and Family Services and the Commissioner for Children after a request by the Commissioner for such assistance from CAFS. The office of the CFC requested certain inclusions, exclusions and the size of the sample. The sample included:

Children

- on Care and Protection orders (CPO) and Assessment orders who were in out-of-home care prior to January 1, 2008 and who were still in care on June 16, 2008 (the audit sample period)

And

Foster carers

- with less than 12 months experience who were carers prior to January 1, 2008 and had children in their care on June 16, 2008 (the audit sample period)
- with equal to or more than 12 months experience who were carers prior to January 1, 2008 and had children in their care on June 16, 2008 (the audit sample period).

Children

There were 542 children Statewide who:

- were in out-home-care on or before 1/01/2008 and on 16/6/2008;
- had been in care for more than 90 days during 2008; and
- were subject to one of the following orders:
 - Guardianship to 18yrs or
 - Guardianship for 12 months.

Region	Total
North	170
North West	114
South	258
Statewide	542

There were 40 children Statewide who were on an Assessment order at any time between 1/01/2008 and 16/06/2008, inclusive, and were in out-of-home care.

Region	Total
North	26
North West	6
South	8
Statewide	40

Audit Selection Methodology (Children)

1. Children from the CPO sample were randomly selected by region until the sum total children (on assessment orders or CPO) in the sample was 95 in the South, 42 in the North West and 63 in the North, giving a total sample size of 200, and a regional distribution which matches the regional distribution of children in the CPO sample.
2. Independent of region, 30 children from the Assessment Order Sample were randomly selected and included in the final sample.

Foster Carers

There were 149 foster carers caring for children on 16/6/2008 who:

- were in out-home-care on or before 1/01/2008 and on 16/6/2008;
- had been in care for more than 90 days during 2008; and
- were subject to one of the following orders:
 - Guardianship to 18yrs;
 - Guardianship for 12months; or
 - Assessment Order or extension.

Region Area	Carer Experience	Total
North	Less than 12 months	4
	More than or equal to 12 months	56
North Total		60
North West	Less than 12 months	1
	More than or equal to 12 months	35
North West Total		36
South	Less than 12 months	5
	More than or equal to 12 months	48
South Total		53
Total		149

Audit Selection Methodology (Carers)

1. All carers with less than 12 months experience were selected.
2. Carers with 12 months experience or more were randomly selected for each region separately, such that the regional distribution matches the distribution of the total sample.

Final Sample

Final Sample (Children):

200 children were selected for the final sample by region;

- 95 children in the South;
- 42 children in the North West; and
- 63 children in the North.

Children on Assessment Orders	29	
Children on CPO 12 months		55
Children on CPO 18 years	111	

Final Sample (Carers):

100 foster carers were selected for the final sample by region:

Foster carers with less than 12 months experience:

- 4 carers in the North;
- 1 carer in the North West; and
- 5 carers in the South.

Foster carers with 12 months experience or more:

- 36 carers in the North;
- 23 carers in the North West; and
- 31 carers in the South.

Note: A final sample of 195 children and 99 carers were included in the audit after the exclusions of any cases identified in the sample that were not within the scope of the audit after initial file examination.

STATISTICAL ANALYSIS

The major findings of the audit are highlighted below with full statistics provided in Appendix A.

Children

Standard 6.1.1 of the *Responding to concerns and complaints about the safety of children and young people who are in out of home care 2008* policy outlines the number of visits that should be made to a child in out of home care by their Child Protection Practitioner (CPW). The number of visits a child should receive is dependent upon the type of order that the child is the subject of. For a child on a CPO until the age of 18 the minimum number of visits that a child should have received over the 6 months of the period of the audit is four. Although it appears that eight children on CPO's until the age of 18 in the

audit received four or more visits thus meeting the standard, the Policy standard has not been met in any of these cases due to the timing of the visits. For example the child may have received a visit in one week, a follow up visit the next week but no further visits for the next three months. The Policy requirement of at least one visit in every six week period has therefore not been met.

Number of visits

Of the 195 files of children in out of home care examined by the Commissioner for Children, none met the visitation requirements outlined in Standard 6.1.1 of the Policy.

Eighty four children (43.1% of the sample) did not receive any visits in the six months following the commencement of the Policy. A further 54 children (28% of the sample) received only one visit during the audit period.

The number of visits received by children statewide is shown as a percentage of the total number of children in the sample in *Figure 1*.

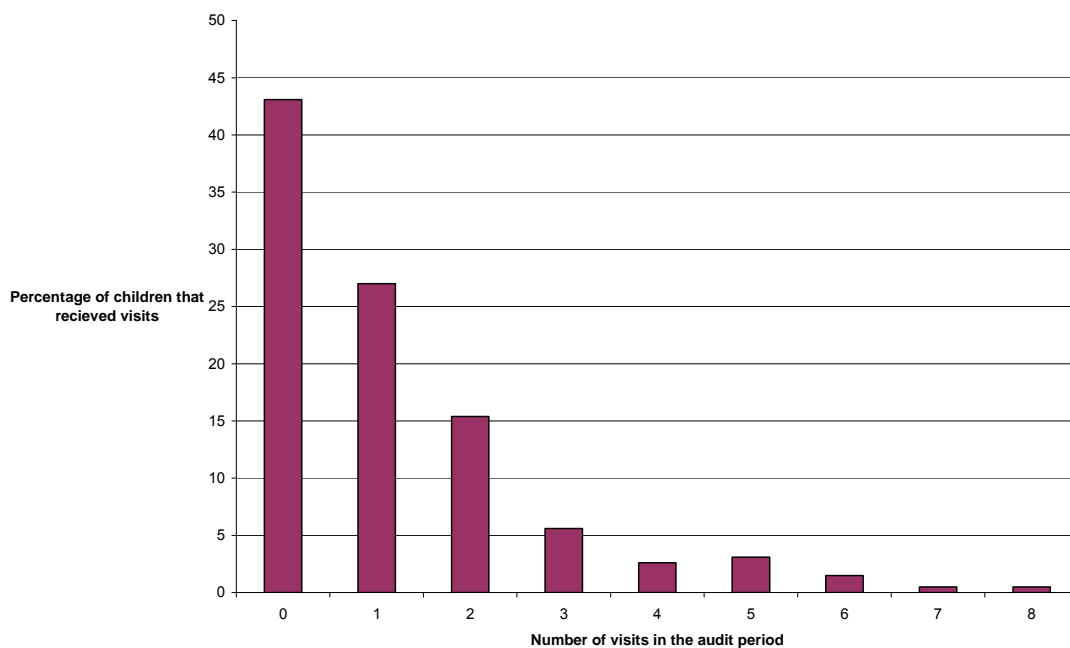


Figure 1 Number of visits to children statewide

Visits by region

Figure 2 demonstrates that the pattern of visitation is similar across the different regions, with the highest percentage of children receiving either no visits or one visit during the audit period across the North, North West and South. Although a similar pattern of visitation occurred across the regions, the percentage of children in the South that received no visits was considerably higher than that in the North and North West with more than half of the children in the south (52.7%) receiving no visits in the audit period.

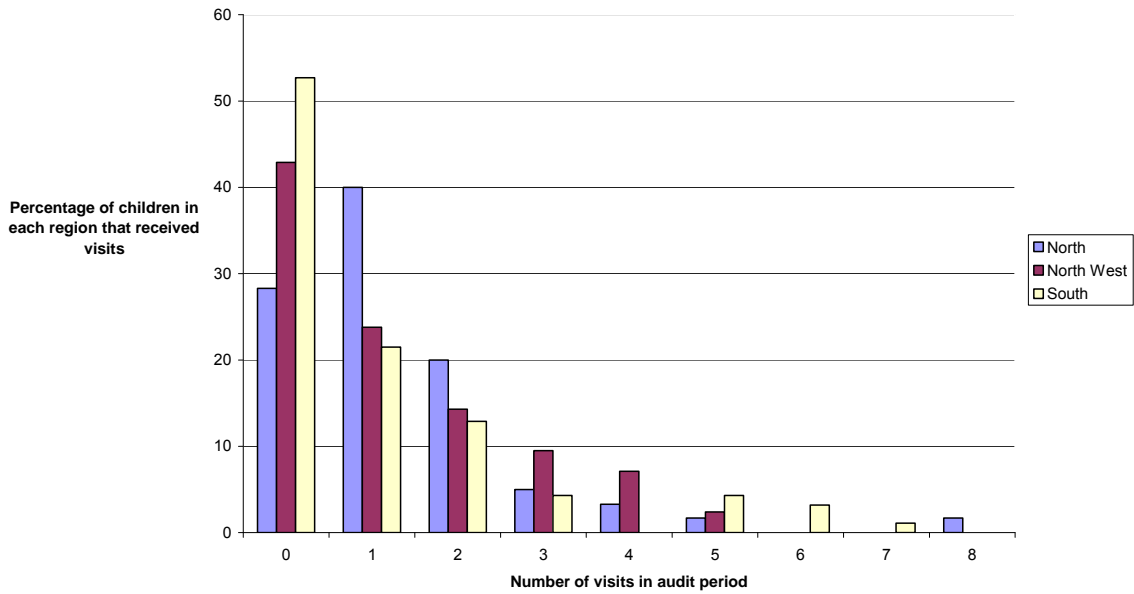


Figure 2 Number of visits to children by region

Visits and type of order

Despite differing visitation requirements for children on the various orders, the type of order that a child was the subject of had little impact on the number of visits received by a child. The highest proportion of children again received no visits or one visit in the audit period regardless of order type. These results are demonstrated in *Figure 3*

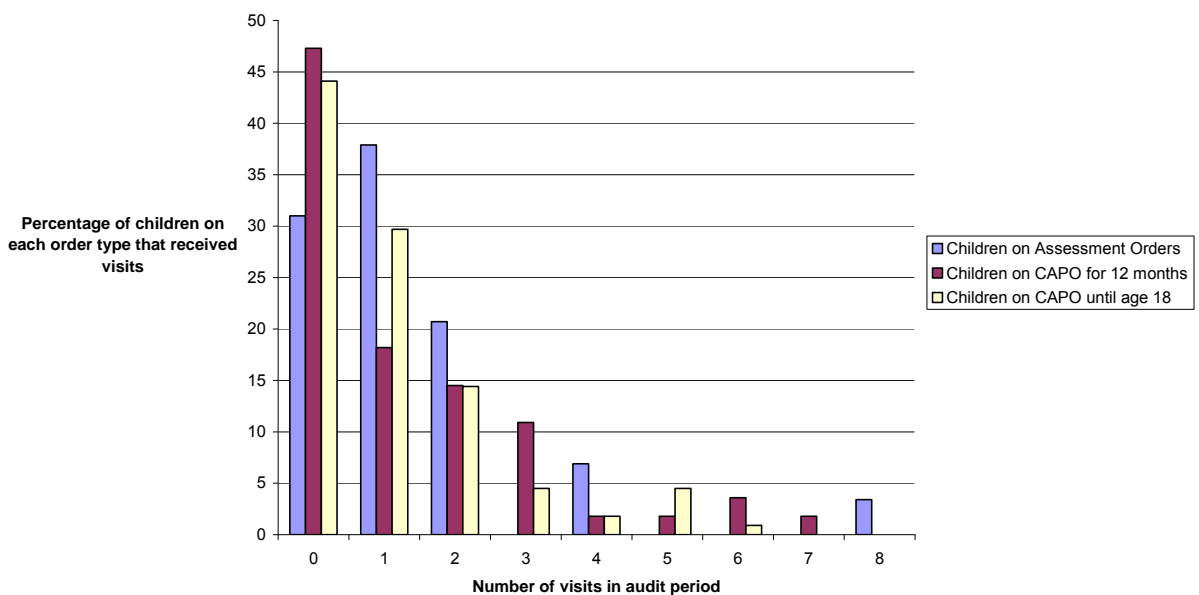


Figure 3 Number of visits to children by order type

Visits and age of child

Figure 4 shows the number of visits by the age of the child. These results indicate that across all four age groups, the highest percentage of children received no visits during the audit period, regardless of age. This figure also demonstrates that the older children (11-18 years) were more likely to receive a higher number of visits than the younger children. Information contained on the children's files suggests that this outcome is a result of the older children taking a proactive approach and demanding visits from their Child Protection Worker.

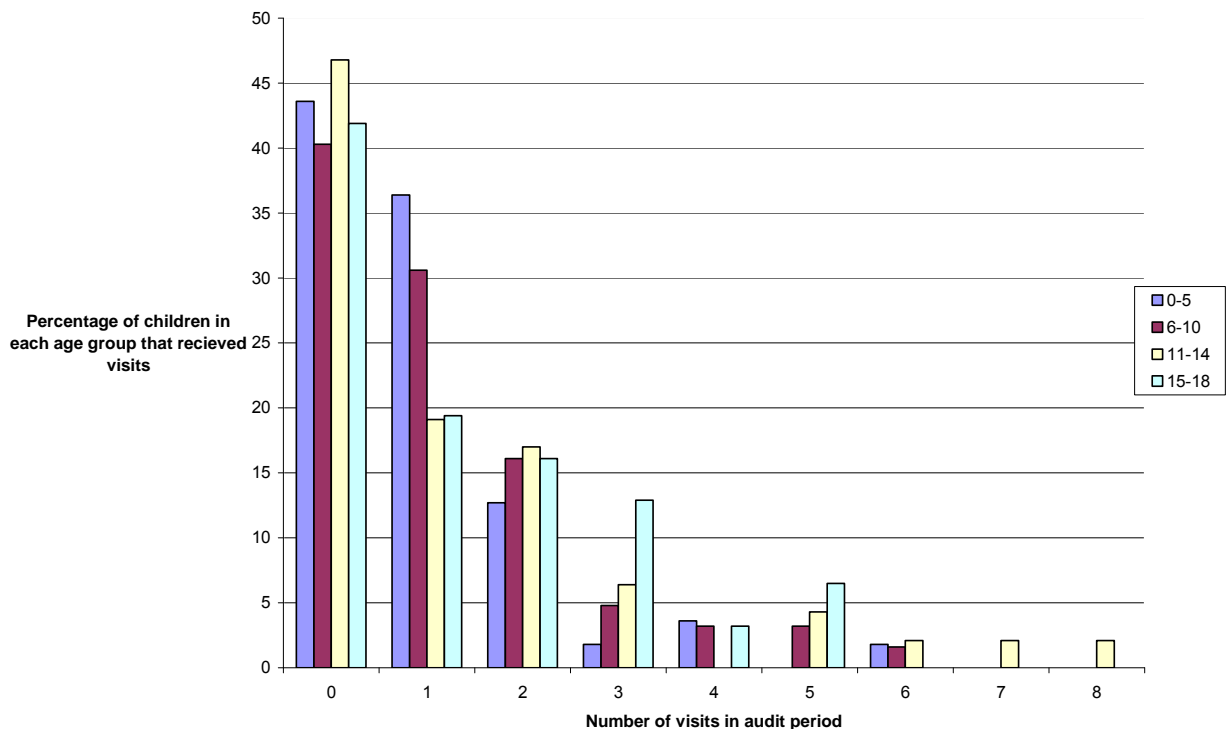


Figure 4 Number of visits to children statewide by age

Note: An additional requirement of Standard 6.1.1 of the Policy requires that at least some of the visits to children by their Child Protection Practitioner should be conducted away from their usual care givers and in private. Of the 195 children in the sample 165 (84.6%) did not receive a visit in private during the period of the audit.

Carers

Standard 6.2.1 of the policy outlines the requirements for visitation of carers by their Out of Home Care Support Worker, with the level of visitation required dependent upon the length of experience of the carer. A carer with more than 12 months experience should be visited and talked with no less than once every six weeks meaning that each carer with more than 12 months

experience should have been visited no less than 4 times in the audit period. Although there were four carers who received four or more visits in the period, as discussed above regarding visits to the children, the timing of these visits precludes them from having met the Standard.

Number of visits

Of the 99 carer files examined by the Commissioner for Children none met the visitation requirements of Standard 6.2.1 of the Policy.

Figure 1 shows the number of visits received by carers statewide. This demonstrates that 57 carers (57.6%) did not receive a visit in the audit period. A further 24 carers (24.2%) received only one visit during the audit period.

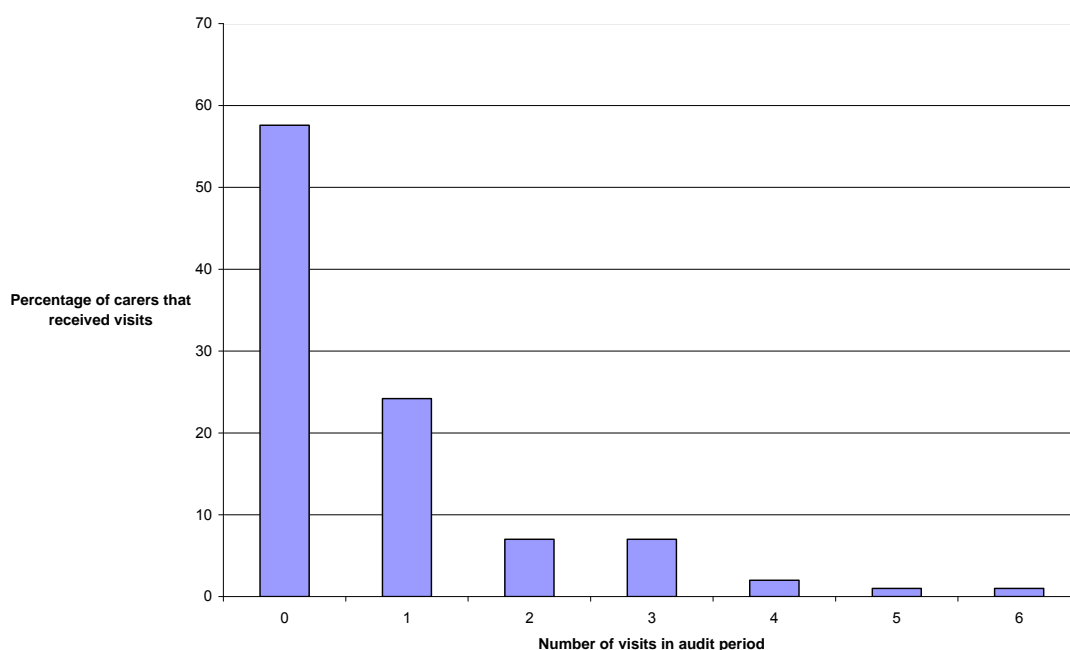


Figure 5 Number of visits to carers statewide

Visits and carer experience

Only 10 carers with less than 12 months experience fitted the criteria required for inclusion in the audit (see methodology above). Carers with less than 12 months experience are required to be visited and talked with at least once in every four week period. Of the 10 carers with less than 12 months experience included in the audit, six did not receive any visits during the six months of the audit period.

The remaining 89 foster carers in the sample all had 12 months experience or more. The number of visits received by these carers across each of the three regions is displayed in *Figure 6*. The pattern of visitation shows that the greatest percentage of carers received no visits during the audit period across all regions. Although still apparent, this pattern of visitation was less pronounced in the North West with a greater percentage of carers receiving

multiple visits during the audit period than in the North or South. Fifty five percent of carers in the North West received two or more visits during the audit period compared to six percent and three percent of carers in the North and South respectively.

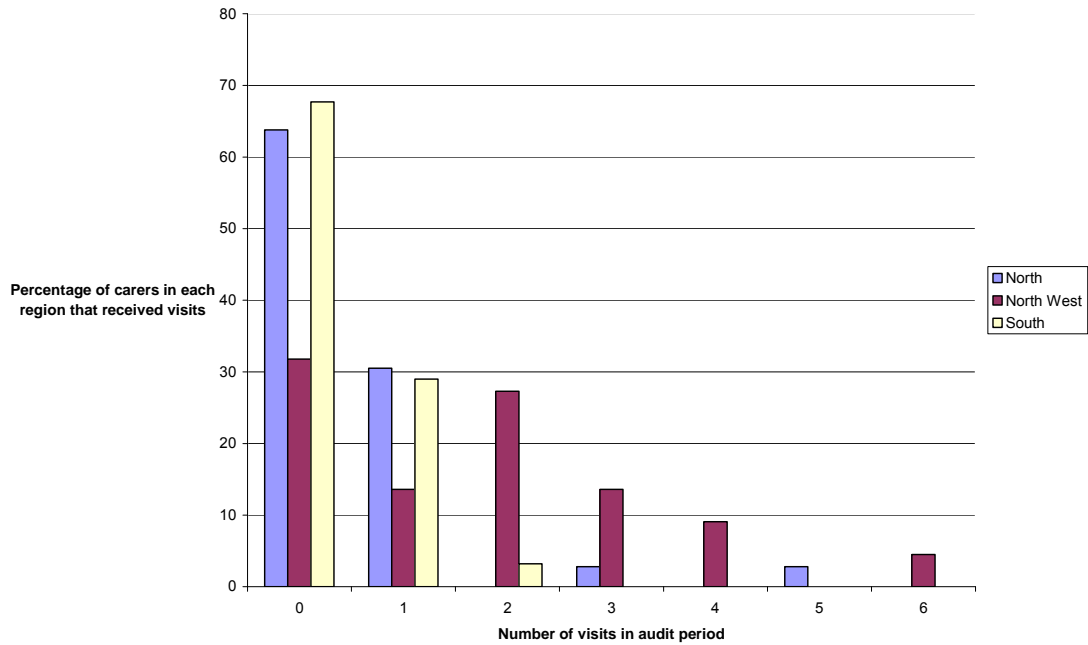


Figure 6 Number of visits to carers with more than or equal to 12 months experience by region

Issues Identified

These issues are not arranged in any particular order. Observations made here are impressions and do not refer to every CPW or every case audited. There was wide variation in practice identified across the State and no Area Office appears to warrant specific focus.

A desirable outcome of the audit was seen as the Commissioner contributing to the establishment of a culture in the CPW workforce of accepting the practice validity of routine private visits to children who have been placed in the care of the Secretary.

1. Child Centred Culture Generally Absent: Child as client

There is evidence that the file itself represents an important part of the child's life if revisited in adulthood through an FOI. The child should be able to read and know that during their period in care, the State was an "exemplary parent" (*Jacob/Fanning High Impact Strategies, Number 8*).

Child Protection Workers do not appear to be clear that the child is the client. Although there is often a clear rationale that supporting the family equates to supporting the child, roles often become blurred. Time spent on parents arranging housing, transport, counselling and addiction therapy is time not spent reassuring the child and reassuring the Secretary that the placement is safe. In many files the largest part of a CPW's time and work was spent organising and notifying family contact visits, which is administrative work.

The CPW often does not identify as the human face of the Secretary as statutory parent in the child's life. Only infrequently would the CPW accompany the child to Police interviews, criminal court, surgery etc as would a parental figure. Some attempts were made, for example a letter from a CPW to a 10 year old congratulating on a school report was signed "Your Friend" but did not enclose the school report and the CPW did not sit down with the child to go through it and congratulate the child face to face.

CPWs, throughout the period of the audit, did not routinely visit the child either before or after major life events such as when there was a CPW change, when the child was first removed from their family, at each placement change, when there were major incidents in the child's life (a grandparent died, a birthday, eye operation, police interview and court events). There was also no evidence in Complaints in Care cases that the child was visited after the Final Report for de-briefing.

In one case the CFC held concerns that charges were pressed over children's behaviour in Rostered Care, including against a child with intellectual disability. The concern included that the police and criminal process was supported by the CPW, as that could raise direct conflict between CPW roles in the eyes of the child. It was also very concerning that the child was not visited immediately upon the charges arising.

1. RECOMMEND: practice direction be considered to direct CPWs to have face to face visits with the child additional to the current Policy:

- each time the allocated CPW changes
- when the child is charged with a criminal offence,
- when the child undergoes surgery,
- when the child experiences a death in family; and
- at the discretion of the CPW at the time of other important life events.

2. CPW acceptance of the Policy rationale for private routine home visits.

Visiting does not appear to be seen in the context of

- a) the child's need for connection;
- b) the child's underlying belief structure post-removal: of abandonment and that no-one cares ;and
- c) the child's safety in the placement and systemic risk management.

If visiting the child were seen in those contexts, then it becomes obvious that asking the carer for a verbal report about a child's progress is contradictory.

Most CPWs do not see it as core business to be in regular, routine face to face contact with the child, sometimes having no contact at all.

From the examination of the files many CPWs see their role as a remote "air traffic controller": For example some CPWs do almost nothing more with the child in 6 months than complete Support Worker Access Requests and send letters to carers and parents outlining the monthly access program and organise medical and expert assessments and reports. Many did not even note on the file that they had read the Support Workers supervised contact notes.

CPWs tended to leave face to face, and even expert observation and assessment to Support Workers and Rostered Carers. For example quality of the child's relationship with their parents, cause of distress or affect), Support Workers, Case Workers and Rostered Carers are usually not qualified to undertake this level of assessment and evaluation, nor is it part of their statement of duties.

When a Non Government provider (for example Kennerley or Glenhaven) has their agency Welfare Officer reporting to them, CPWs seem to feel completely hands off. There was almost no direct and private contact with the child as the client in those cases, with a strong reliance on the NGO Social Worker/staff.

There was evidence that CPWs believe that the Policy and purpose are met by visiting all siblings together, visiting the child at school, giving the child a lift between school/access, meeting in the kitchen with the child and carer over a vegemite sandwich after school or kicking a ball in the yard. The CPW should have enough private focused time alone with the child to develop a relationship with the child as well as complete a standard template recording compliance with the Policy.

Some young people get CPW engagement by turning up at the Service Centre repeatedly or committing attention-seeking offences. This indicates that young people are aware of the need for and seek out contact. Young people in care who don't get parent-like attention from 'their' CPW force themselves on the CPW and may still get ignored or managed by remote control.

3. Culture changing

Some CPWs did seem to be coming to terms with the Policy requirement for visits by about July 2008. This was evidenced by the introduction of ad hoc templates to note visits, ad hoc letters to carers referring specifically to the policy, and notes of conversations with carers about the Policy. One file note only was observed of a conversation with children describing the Policy.

However even CPWs who explained the new visiting regime to carers and/or children or wrote a letter to the carer setting out visiting frequency under the Policy, didn't seem to follow through. One long term carer remarked "I'm not used to having a proactive worker. It'll take some time to get used to it". However in that case, the carer support visits still did not occur in accordance with the Policy.

There does not seem to be any reason that CPWs cannot diarise the day or the week in which the next visit to Child X or Carer Y is supposed to be organised. Something is required to enable an incoming new CPW or a busy continuing CPW to flip back and check the last visit notes.

2. RECOMMEND: Practical tools for staff use in planning and time management ie. Microsoft Outlook recurring appointments.

4. Northern Area Yellow ad hoc "Child Sighted" form.

This yellow "Child Sighted" form was observed to be used for

- 1) Support Worker taking the child to school bus and
- 2) phone conversation by the CPW with school principal describing the child's school day.

The ad hoc form also has a tick box:

- by another professional

Following this logic, there should be one or two of these forms for every day of the school week! Ticking the “by another professional” box ironically records the fact that the child was NOT sighted by the CPW in accordance with the Policy.

This use of the form also raised the question of whether the CPW considered completion of yellow “Child Sighted” form on these occasions to be de facto compliance with the Policy.

On one file, the North-West Area Office seemed to have recently adopted the use of two separate forms that explicitly refer to the requirements of the Policy, with tick boxes for the CAPO status or carer experience status as the case may be, boxes to identify where the child was visited, and whether in private, and a narrative line for content.

3. RECOMMEND: State-wide adoption of North West Area forms (ANNEXED “B”) as templates`

4. RECOMMEND: Policy-compliant visit reports be colour coded like the yellow "Child Sighted" sheet or visits that do comply with Policy be noted in a list of contact dates at the front of the file, similar to carer contact sheets on carer files.

5. Practice Supervision Issues

The question arises from the outcome of the audit: are CPWs not aware of the Policy, or forget it in the daily torrent, or are they unable to find time to comply? An enormous amount of time is spent organising family contact supervision and transport, which is administrative, not child protection work.

It is not always clear from the file whether the CPW has visited and whether the visit meets the Policy Standard criteria. For example a passing reference to an earlier (unrecorded) visit in the text of an email or in compilation case notes at the end of the month.

There was one file of particular note where it was quite apparent that the CPW had cut and pasted home visit notes from February to April, including observations and conversations with three siblings.

Early in 2008 there was an internal CAFS structure change to teams who would work for the child in "long term stable placement or whose orders are about to end". The “teamwork” ideal could become an unintended opportunity for a) buck passing home visits within the team; or b) more staff available for visits; c) inconsistency of staff identity for the child: a child not able to "form a relationship" with a team of three.

5. RECOMMEND: A single primary CPW continue for the child’s long term placement joined by a specialist Leaving Care CPW for those about to leave care, working with the primary CPW.

6. Carer Support

In most office and home visits with Carers it was not clear whether the CPW was there for the child or for carer support. The delineation between the child's worker and the carer's worker was indistinct. Carer files were noticeably sparse, perhaps because the details are on the children's files. It was observed that placements broke down when the child's behaviour prompted a complaint by a carer. There were no visits to follow up with either the child or the carer and in one case the carer then abandoned the placement.

6. RECOMMEND: The child's CPW refers carers to their Out of Home Care Support Worker for carer support. The carer support system should operate in tandem with the child's wider system of supports.

7. Interface of Policy and Practice

There was a departure from the Policy for certain child characteristics and the rates of visiting as defined in the Policy were not always appropriate to the child's maturity level. For example a pre-verbal or intellectually disabled child, the stability of the placement (eg where child 16yo has been in care for 14 years and has changed their name to the carers'), geographical factors (eg King or Flinders Island) are all possible qualifications to the Policy Standards.

There is a Policy gap about visiting frequency when the child is on an interim CPO which is not specifically addressed in the Policy.

7. RECOMMEND: The Complaints in Care Monitoring Group reviews visitation frequency rates, and qualifications for these factors.

8. File Organisation

The Policy:

6.4 Recording information on the child's file

6.4.2 *All case notes relating to each visit with a child in out of home care (see standard in Section 6.1.1) are to be filed in the relevant section of the child's file in chronological order. The notes should outline the date, time, place of the visit and the placement issues, concerns and solutions discussed with the child. An action plan to address any placement concerns will also be included in this file section with regular updates regarding intervention progress.*

DOCUMENT IDENTIFICATION

8. RECOMMEND: Consistent hard copy colour coding across areas for CWIS entries, court orders, visits to the child

ELECTRONIC FILING

A question is raised about how Policy monitoring and Practice Supervision will be undertaken when CPIS2 is implemented. Will copies of all emails be held on CPIS2 as can happen with CPIS1? Is it possible for a monthly summary of file activity to be held on CPIS2? What will files look like? These questions are raised for future consideration.

MANAGEMENT OF EMAIL TRAFFIC.

Staff seem unaware of the Outlook email preference not to print a whole email string. Thus there are pages and pages of extraneous information on files, making it even more difficult to find relevant information.

There were multiple copies of large documents (eg LAC, long professional assessments) found on files. Staff should be alerted to check files for copies before copying again OR CAFS could consider segmenting professional reports out of the running file, eg behind page dividers or in clear folders. The importance of reverse chronological filing is highlighted for the flow of file notes, letters, supervised contact notes, home visit notes and email traffic, not assessment reports.

The legal and residential status is not usually clear from file and often had to be deduced by sleuthing or is assumed corporate memory.

9. RECOMMEND: Staff training in the use of Microsoft Outlook as part of overall training in file management.

PHOTOGRAPHS

There is gross inconsistency of policy in keeping photos of the child in the file. Some have photos of the child as a toddler, though she is now a teenager; some have none; some have up to date photos with siblings, some with siblings and birth parents.

In one file, a CPW noted that she did not recognise a young person who was her client as he approached her. He frightened her with abuse so she left in a hurry, but his carer later told her that the young person was angry because she never visited.

Protection of the child's privacy cannot be an issue when there are numerous far more personal details on file (e.g. abuse history, menarche, therapy and medical details, parents' mental health history). On the other hand it is the strong view of senior staff canvassed that keeping even a patchy photographic record helps establish some emotional understanding of the

client, and reinforces the child's status as the client and the emotional and developmental rationale for the Policy. It would be of value to a client revisiting the file in adulthood, especially if their carer or CPW had not enabled them to maintain a photographic record of their time in care.

10. RECOMMEND: Inclusion of an envelope of photographs at the front of the file either in the CRITICAL DOCUMENTS section or under a separate tab in the tabbed section.

RECOMMENDATIONS (FULL LIST)

1. RECOMMEND: Practice direction be considered for CPWs to have face to face visits with the child additional to the current CIC Policy:

- each time the allocated CPW changes
- when the child is charged with a criminal offence,
- when the child undergoes surgery,
- when the child experiences a death in family; and
- at the discretion of the CPW at the time of other important life events.

2. RECOMMEND: Practical tools for staff use in planning and time management ie. Microsoft Outlook recurring appointments.

3. RECOMMEND: State-wide adoption of North West Area forms (ANNEXED "B") as templates.

4. RECOMMEND: Policy-compliant visit reports be colour coded like the yellow "Child Sighted" sheet or visits that do comply with Policy be noted in a list of contact dates at the front of the file like carer contact sheets on carer files.

5. RECOMMEND: A single CPW continue for the long term placement joined by a specialist Leaving Care CPW for those about to leave care, working in with the primary CPW.

6. RECOMMEND: The child's CPW refers carers to Out of Home Care Support Worker for carer support. The carer support system should operate in tandem with the child's wider system of supports.

7. RECOMMEND: The Complaints in Care Monitoring Group reviews visitation frequency rates, and qualifications for relevant factors.

8. RECOMMEND: Consistent hard copy colour coding across areas for CWIS entries, court orders, child visits.

9. RECOMMEND: Staff training in the use of Microsoft Outlook as part of overall training in file management.

10. RECOMMEND: Inclusion of an envelope of photographs at the front of the file either in the CRITICAL DOCUMENTS section or under a separate tab in the tabbed section.

Appendix A

Data: Children

Table 1 Number of visits to children statewide

Number of Visits	Number of children visited
0	84
1	54
2	30
3	11
4	5
5	6
6	3
7	1
8	1
Total	195

Table 2 Number of visits to children by region

Number of Visits	North	North West	South	Total
0	17	18	49	84
1	24	10	20	54
2	12	6	12	30
3	3	4	4	11
4	2	3	0	5
5	1	1	4	6
6	0	0	3	3
7	0	0	1	1
8	1	0	0	1
Total	60	42	93	195

Table 3 Number of visits to children statewide by age of child

Number of Visits	Age of Child				Total
	0-5	6-10	11-14	15-18	
0	24	25	22	13	84
1	20	19	9	6	54
2	7	10	8	5	30
3	1	3	3	4	11
4	2	2	0	1	5
5	0	2	2	2	6
6	1	1	1	0	3
7	0	0	1	0	1
8	0	0	1	0	1
Total	55	62	47	31	195

Table 4 Number of visits to children by age and region

North

Number of Visits	Age of Child				Total
	0-5	6-10	11-14	15-18	
0	3	5	5	4	17
1	6	7	7	4	24
2	2	2	5	3	12
3	0	1	1	1	3
4	0	1	0	1	2
5	0	0	0	1	1
6	0	0	0	0	0
7	0	0	0	0	0
8	0	0	1	0	1
Total	11	16	19	14	60

North West

Number of Visits	Age of Child				Total
	0-5	6-10	11-14	15-18	
0	5	5	5	3	18
1	5	5	0	0	10
2	1	2	2	1	6
3	0	2	1	1	4
4	2	1	0	0	3
5	0	0	0	1	1
6	0	0	0	0	0
7	0	0	0	0	0
8	0	0	0	0	0
Total	13	15	8	6	42

South

Number of Visits	Age of Child				Total
	0-5	6-10	11-14	15-18	
0	16	15	12	6	49
1	9	7	2	2	20
2	4	6	1	1	12
3	1	0	1	2	4
4	0	0	0	0	0
5	0	2	2	0	4
6	1	1	1	0	3
7	0	0	1	0	1
8	0	0	0	0	0
Total	31	31	20	11	93

Table 5 Number of visits to children statewide by order type

Number of Visits	Children on Assessment Orders	Children on CAPO 12 Months	Children on CAPO until 18	Total
0	9	26	49	84
1	11	10	33	54
2	6	8	16	30
3	0	6	5	11
4	2	1	2	5
5	0	1	5	6
6	0	2	1	3
7	0	1	0	1
8	1	0	0	1
Total	29	55	111	195

Table 6 Number of visits to children on Assessment Orders by region

Number of Visits	North	North West	South	Total
0	2	2	5	9
1	9	1	1	11
2	5	0	1	6
3	0	0	0	0
4	1	1	0	2
5	0	0	0	0
6	0	0	0	0
7	0	0	0	0
8	1	0	0	1
Total	18	4	7	29

Table 7 Number of visits to children on CAPO for 12 months by region

Number of Visits	North	North West	South	Total
0	8	6	12	26
1	3	4	3	10
2	1	2	5	8
3	2	3	1	6
4	0	1	0	1
5	0	0	1	1
6	0	0	2	2
7	0	0	1	1
8	0	0	0	0
Total	14	16	25	55

Table 8 Number of visits to children on CAPO until 18 by region

Number of Visits	North	North West	South	Total
0	7	10	32	49
1	12	5	16	33
2	6	4	6	16
3	1	1	3	5
4	1	1	0	2
5	1	1	3	5
6	0	0	1	1
7	0	0	0	0
8	0	0	0	0
Total	28	22	61	111

Table 9 Number of visits in private to children statewide

Number of Visits	Number of children visited in private
0	165
1	11
2	9
3	5
4	4
5	1
6	0
7	0
8	0
Total	195

Data: Carers

Table 10 Number of visits to carers statewide

Number of Visits	Number of Carers
0	57
1	24
2	7
3	7
4	2
5	1
6	1
Total	99

Table 11 Number of visits to carers statewide by time as carer

Number of Visits	More than or equal to 12 months	Less than 12 months	Total
0	51	6	57
1	23	1	24
2	7	0	7
3	4	3	7
4	2	0	2
5	1	0	1
6	1	0	1
Total	89	10	99

Table 12 Number of visits to carer by region and time as carer

More than or equal to 12 months

Number of Visits	North	North West	South	Total
0	23	7	21	51
1	11	3	9	23
2	0	6	1	7
3	1	3	0	4
4	0	2	0	2
5	1	0	0	1
6	0	1	0	1
Total	36	22	31	89

Less than 12 months

Number of Visits	North	North West	South	Total
0	3	1	2	6
1	0	0	1	1
2	0	0	0	0
3	1	0	2	3
4	0	0	0	0
5	0	0	0	0
6	0	0	0	0
Total	4	1	5	10

Appendix B

CASE NOTE - Complaints in care policy standards 6.2.1

Carer Visit

Name of carer:.

Name/s of child/ren:

Date of visit/contact:

Duration of visit:

Location of visit:

Order relevant for the child:

Name:

42(4) (a) 42(4)(b) 42(4)(c) (d) 42(4)(g)

Assessment order

Name:

42(4)(a) 42(4) (b) 42(4) (d) 42(4) (g)

Assessment order

Name:

42(4) (a) 42(4)(b) 42(4)(c) (d) 42(4)(g)

Assessment order

Carer discussion:

1. Medication management standard check completed satisfactorily

(tick only if satisfactory)

If not, issues in the completion discussed:

2. Concerns in caring for the child/ren:

1. Supports identified or action plan devised with carer to assist in addressing the concerns

CASE NOTE - Complaints in care policy standards 6.1.1

Child Visit

Name of child:

Date of visit/contact:

Duration of visit:

Location of visit:

Order relevant:

42(4)(a) 42(4)(b) 42(4)(c) 42(4)(d) 42(4)(g)
Assessment order

Child's view regarding:

1. Placement

2. Care by CPS and carer

3. What they would like to see improved

Signed: _____

Date: _____