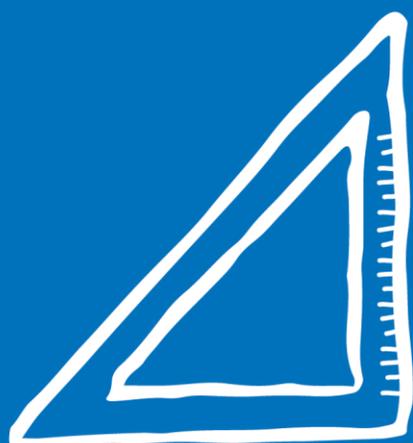


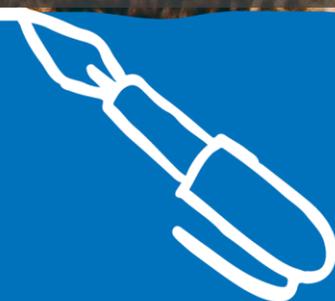


Monitoring Plan: “Being Loved and Safe”

Out-of-Home Care Monitoring Program



Commissioner
for Children
and Young
People Tasmania



FEBRUARY 2021

The Commissioner for Children and Young People acknowledges and pays her respects to the palawa people of lutruwita as the original and ongoing custodians of this land, and for the more than 40,000 years they have cared for their country and their children.

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The Commissioner for Children and Young People conveys her sincere thanks to all the children and young people with a care experience, out-of-home care providers and the Department of Communities Tasmania as system owner, who shared their experiences and insights with her during consultations and discussions to inform this Monitoring Plan.

The Commissioner also wishes to acknowledge the members of the Expert Panel for the CCYP Out-of-Home Care Monitoring Program – Professor Sharon Bessell, Professor Daryl Higgins, Dr Greet Peersman and Professor Kitty te Riele. The Expert Panel’s insights and expertise have informed the development of this Monitoring Plan.

A note about terminology...

The Commissioner acknowledges that the term “out-of-home care” is not necessarily used or well understood by Tasmanian children and young people with a care experience. The vast majority of Tasmanian children in out-of-home care are, of course, cared for within a home, regardless of whether they’re living in family-based care or residential care.

However, the term “out-of-home care” is widely used and understood in Australia by governments and the community sector, and as such, it has been used in this Monitoring Plan.

Monitoring Plan: “Being Loved and Safe”
Out-of-Home Care Monitoring Program

Author: Commissioner for Children and Young People Tasmania

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1. Out-of-Home Care Monitoring Program

1.1 Aim

The overarching aim of the Commissioner for Children and Young People's Out-of-Home Care Monitoring Program (Monitoring Program) is to promote and protect the rights and wellbeing of Tasmanian children and young people in out-of-home care (OOHC), through independent, systemic monitoring of the Tasmanian OOHC system and contributing to system-wide learning and continuous improvement.

1.2 The Monitoring Program to date

The Monitoring Program was established in 2018, following the Tasmanian Government's commitment of funds for the Commissioner to undertake independent, systemic monitoring of the Tasmanian OOHC system. In December 2017, Interim Commissioner David Clements established an Expert Panel to provide expert advice to the Commissioner's Monitoring Program.

In April 2018, Interim Commissioner Clements released a guiding plan for monitoring OOHC – [Laying the Foundations: A Conceptual Plan for Independent Monitoring of Out-of-Home Care in Tasmania](#). In July 2018, Interim Commissioner Clements released the [Out-of-Home Care Monitoring Plan 2018-19](#) which included a thematic focus on the wellbeing domain of "Being Healthy".

In October 2019, Commissioner Leanne McLean released the first monitoring report, [Monitoring Report No 1: the Tasmanian Out-of-Home Care System](#)

[and "Being Healthy"](#). In March 2020, the Tasmanian Government provided its response to the Commissioner's first monitoring report, [Tasmanian Government Out of Home Care Response Report and Action Plan 2020](#), which includes Priority Actions and other actions for implementation by the Tasmanian Government (refer to Section 2.5 below).

For most of 2020, a primary focus of the Commissioner's monitoring was on the impacts of the COVID-19 pandemic on Tasmanian children and young people, including those in the Tasmanian OOHC system. During that time, the Commissioner's OOHC monitoring activities were largely conducted under the umbrella of COVID-19 pandemic monitoring and advocacy as outlined in the [CCYP Pandemic Framework: Monitoring and Advocacy During COVID-19](#).

In November and December 2020, the Commissioner published several *COVID-19 Monitoring Insights* briefs which provide insights into the Tasmanian experience during the COVID-19 pandemic and outline some key learnings for policy and practice to promote and protect the wellbeing of children and young people, including those in OOHC. These briefs are as follows:

- [New ways of working during the COVID-19 pandemic](#)
- [Children and young people in out-of-home care during the COVID-19 pandemic](#)
- [Mental health and psychosocial recovery](#)
- [Family violence during the COVID-19 pandemic](#).

In 2021, the Commissioner is returning to a more programmatic approach to OOHC monitoring. This Monitoring Plan provides an overview of the next cycle of the

OOHC Monitoring Program, which includes a thematic focus on the wellbeing domain of “Being Loved and Safe”, along with the cross-cutting theme of children and young people’s participation.

1.3 Structure and scope of the Monitoring Plan

The structure of the Monitoring Program, as originally conceived and described in [Laying the Foundations: A Conceptual Plan for Independent Monitoring of Out-of-Home Care](#), was comprised of three parts (regular data monitoring, thematic monitoring and responsive investigations). The Monitoring Plan for “Being Loved and Safe” introduces a fourth part, as shown in Table 1 below.

Part A and Part B of the Monitoring Plan will be conducted concurrently. Monitoring activities for Part C may be conducted at any time, subject to resourcing and consistent with the Commissioner’s functions and powers as outlined in the *Commissioner for Children and Young People Act 2016* (the CCYP Act). Similarly, activities for Part D of the Monitoring Plan may be conducted at any time, according to the Commissioner’s strategic priorities and any emerging or ongoing issues.

This Monitoring Plan was informed by views expressed by children and young people with a care experience, OOHC providers, the Department of Communities Tasmania as system owner, and other stakeholders, as well as a targeted literature review and advice provided by the Expert Panel.

Table 1: The structure of the Monitoring Program for “Being Loved and Safe”

Part of the Monitoring Program	Primary focus
A: Regular Data Monitoring	An overview of the Tasmanian OOHC system.
B: Thematic Monitoring of “Being Loved and Safe” PLUS Cross-cutting consideration: Participation	Factors contributing to outcomes for the wellbeing domain of “Being Loved and Safe”, specifically in relation to stability and safety . This will include exploration of children and young people’s experiences of “Being Loved and Safe” in OOHC.
C: Responsive Investigations	Depending on what, if any, matters of particular concern arise, and subject to resourcing and the Commissioner’s functions and powers outlined in the CCYP Act.
D: [New] Monitoring the Tasmanian Government’s implementation of the Commissioner’s recommendations to strengthen Tasmania’s OOHC system	Informed by the recommendations made in the 2019 CCYP Monitoring Report, the Tasmanian Government’s March 2020 response, and any progress reports.

The Monitoring Program is systemic in nature – it is concerned with monitoring overall or aggregated wellbeing outcomes for children and young people in Tasmania’s OOHC system, as well as monitoring the processes or features of the OOHC system that lead to those outcomes.

The Commissioner will monitor the care arrangements and wellbeing outcomes for Tasmanian children and young people who are placed by the Department of Communities Tasmania in interstate placements, including Many Colours 1 Direction (MC1D) in the Northern

Territory, in a manner consistent with the CCYP Act. The Commissioner will also monitor the implementation of recommendations contained in the Department of Communities Tasmania’s October 2020 report, [Investigative Review: Allegations for the Safety and Wellbeing of young people participating in the Many Colours 1 Direction Therapeutic Residential Placement Program](#).

It is important to note that the Commissioner may change the approach to monitoring at any time to reflect changing circumstances or to improve the monitoring process.



2. “Being Loved and Safe”

2.1 The wellbeing domain of “Being Loved and Safe”

During the last cycle of programmatic monitoring, and before the Commissioner’s responsive shift to COVID-19 related monitoring, the Monitoring Program had a thematic focus on “Being Healthy”. As indicated above, the thematic focus of the next phase of the Monitoring Program will be on the wellbeing domain of “Being Loved and Safe”.

“Being Loved and Safe” is one of six wellbeing domains in the [Tasmanian Child and Youth Wellbeing Framework](#) which builds on ARACY’s Nest model of child and youth wellbeing. According to the Tasmanian framework, “Being Loved and Safe” means that children and young people:

- Have a safe, stable and supportive home environment
- Feel safe, secure and protected at home and in the community
- Feel valued and respected
- Have positive, trusted relationships with other people
- Have a voice and the ability to raise concerns and have these concerns addressed.

Acknowledging the complexity and breadth of the wellbeing domain of “Being Loved and Safe”, the Monitoring Program will focus on two aspects of this domain: **stability** and **safety**.

This focus is consistent with the Tasmanian Government’s [Outcomes Framework for Children and Young People in Out of Home Care Tasmania](#) which identifies two wellbeing outcomes for “Being Loved and Safe”:

- Tasmanian children and young people have positive, **stable** and supportive relationships
- Tasmanian children and young people are **safe** at home, at school, and in the community.

Additionally, the *Outcomes Framework* identifies three “OOHC Outcomes” for “Being Loved and Safe” of relevance to the Commissioner’s monitoring:

- 1.1 Children and young people live in caring, loving and stable homes
- 1.2 Children and young people feel safe where they live
- 1.3 Children and young people have timely decisions made about their long-term home.

Alongside the topics of safety and stability, monitoring activities will also consider the participation of children and young people in OOHC in decisions affecting them, especially in relation to “Being Loved and Safe”. Research and consultations have found that a child or young person’s participation in decisions affecting them is a key factor in determining their safety and stability while in OOHC. Monitoring will take account of the two wellbeing outcomes related to participation in the Tasmanian Government’s [Outcomes Framework for Children and Young People in Out of Home Care Tasmania](#), as follows:

- Tasmanian children and young people are able to engage with their peers and the community and participate in recreational activities, according to their capabilities
- Tasmanian children and young people are informed and have a say in decisions that affect them.

The OOHC Outcomes Framework identifies two “OOHC Outcomes” for the wellbeing domain of participation, which will also be taken into account during the Commissioner’s monitoring:

- 5.1: Children and young people contribute to decisions about their life, care and future
- 5.2: Children and young people have the confidence to pursue their goals and manage challenges.

For further discussions about children and young people’s participation in OOHC, refer to the Commissioner’s publications, [Laying the Foundations: A Conceptual Plan for Independent Monitoring of Out-of-Home Care in Tasmania](#) and [Out-of-Home Care Monitoring Plan 2018-19](#).

2.2 What does the research tell us about “Being Loved and Safe” in out-of-home care?

Sections 2.2.1 and 2.2.2 below provide a brief overview of key issues relevant to safety and stability in OOHC sourced from a targeted literature review canvassing research and consultations conducted in Australia and internationally. The observations below are not intended to be determinative; instead, they help to focus the Commissioner’s monitoring, by underlining how vital “Being Loved and Safe” is for the wellbeing of children and young people in OOHC. As well, these observations point the way to particular issues which may warrant further exploration during the Commissioner’s monitoring of stability and safety, especially via engagement activities with children and young people.

2.2.1 Stability in out-of-home care

Understanding stability as subjective and relational

In OOHC, stability has traditionally been viewed as something that is objective and that can be measured quantitatively; for example, by the number or duration of placements a child or young person has while in OOHC, or the percentage of placements which result in a ‘permanent’ care arrangement such as adoption.

However, stability can also be more broadly defined to include a sense of *felt* stability, as well as objective stability. Felt or subjective stability is defined as “a sense of security, continuity, commitment, and identity throughout childhood and beyond”.¹ Some researchers have argued that felt stability may be as important, or even more important, for children and young people’s wellbeing than their objective stability (such as placement duration or number of placement moves).^{2,3}

Significantly, felt stability also incorporates *relational stability*, which reflects a sense of belonging felt by a child or young person in their relationships. Thorburn’s 1994 model of foster care viewed stability as being characterised by loving relationships experienced within a strong, mutually reinforcing family-like environment.⁴ Children and young people in foster care have emphasised that, in their experience, stability is synonymous with a strong sense of belonging and attachment to either a primary caregiver or a larger family unit.⁵ However, relational stability for children and young people in OOHC is also shaped by their relationships with their families of origin and people in their wider community.⁶



Stability in out-of-home care influences children's wellbeing outcomes

Research shows that a feeling of stability in OOHC, including experiencing a sense of security, continuity and social support, is positively associated with better wellbeing outcomes for children and young people, including after they leave care.^{7,8}

These findings are consistent with Bowlby's theory of attachment, which states that long-term and stable attachment to a caregiver is crucial to the healthy emotional development of a child.⁹ Secure attachment relationships are foundational to a child or young person developing a sound sense of personal identity, which is important for wellbeing throughout their life.¹⁰

Thus, achieving stability for children in OOHC is important because "placement stability makes it far more likely that young children will be able to form and sustain the kind of attachment relationships that promote optimal development".^{11,12} Children and young people have confirmed this, telling researchers that stability in OOHC allows them to feel 'normal' and have a 'normal' family life, which helps them to know who they are and where they come from.¹³

A sense of stability during childhood is further developed by forming and maintaining friendships beyond the family unit: these relationships can have a positive, stabilising effect on children and young people in OOHC, and are often highly valued by them.^{14,15} Children and young people's sense of stability can be further bolstered by long-lasting and supportive relationships with their social workers or care workers.¹⁶ And finally, young people's relationships with their families of origin (including their siblings) may further support their sense of identity

and stability in OOHC, depending on the quality and nature of those relationships.¹⁷

For Aboriginal and Torres Strait Islander children and young people, stability is deeply tied to their cultural identity and community connections: "their stability is grounded in the permanence of their identity in connection with family, kin, culture, and country".¹⁸ From this perspective, achieving stability for Aboriginal and Torres Strait Islander children in OOHC is not necessarily dependent on them being cared for by one set of foster parents or living in one household.¹⁹

Quality care is important for children's stability in out-of-home care

Researchers who conducted interviews with children living in stable foster care placements in England found that the *quality* of their experiences in foster care, including their *sense of belonging* to both their foster family and their birth family, was as important for their wellbeing as their placement stability, if not more so.²⁰

The social practices engaged in by a child and other members of a foster family, generally over a longer period of time, generate and sustain a sense of belonging within that family. Such practices might include interacting with caregivers and others in their foster family, sharing a home, eating meals together, holding family celebrations, playing with family pets and participating in daily routines together.²¹

From this perspective, the objective stability of a child's foster care placements is relevant to the subjective stability they experience; longer placements allow time for a sense of belonging within a foster family to be generated. Research conducted in New South Wales found a strong relationship between the number of

placements children experienced in foster care and their sense of felt security, and subsequently, their wellbeing outcomes 4-5 years after leaving care.²²

However, nationally, a general shortage of foster carers is a potential driver of placement instability within OOHC. When there is a shortage of foster care placements, a placement for a child is less likely to be chosen according to the particular needs of a child because achieving a good placement match becomes less important than identifying an available placement.²³ When placement options are limited, there is a risk that a placement may be unsuitable for either the child or the carer, or both – thereby increasing the chance of a subsequent placement breakdown.²⁴

Additionally, ensuring placement stability in OOHC may be particularly challenging for children and young people with high or complex needs arising from their complex trauma, as well as health conditions or disabilities.²⁵

Children's participation supports their stability

Research has consistently shown that children and young people in OOHC value their relationships with social workers as a potential source of constancy in their lives, especially when experiencing placement instability.²⁶ The benefits of this relationship to children can extend to supporting their objective stability as well: in Ireland, children reported that having a stable and trusting relationship with their social worker helped them to achieve stability in their placement because they could have their voices heard and work with their social worker to address problems in their placement.²⁷ In the United Kingdom, children in OOHC have explained that their ability to trust their social worker, which was important to their

sense of stability, was built over time through multiple, positive interactions.²⁸

2.2.2 Safety in out-of-home care

Safety is valued by all children and young people, including those in out-of-home care

Children and young people generally value safety highly and see it as important for their wellbeing. In consultations with the New Zealand Children's Commissioner, they prioritised feeling safe – at home, at school and in public – as one of the most important elements of a good life.²⁹

Research and consultations in Australia and elsewhere have demonstrated that children and young people in OOHC understand and value *being* and *feeling* safe. For them, safety is characterised by feeling relaxed, comfortable and calm: "...their bodies were relaxed, they felt happy rather than anxious, and could 'let their guard down'".³⁰ *Being* safe and *feeling* safe is especially important for the wellbeing of children and young people in OOHC, given their previous life experiences, which may have included significant experiences of being or feeling unsafe.

The majority of research and consultations about children's safety in OOHC has been conducted with children living in group residential care settings. However, the experiences of children and young people living in other placement types, including foster care, kinship care and other, single-child forms of residential care, are worthy of further exploration.

Children and young people's safety includes their cultural safety

In addition to ensuring the physical, psychological, and sexual safety of children and young people in out-of-home

care, it is important to protect and promote their cultural safety, too. For Aboriginal and Torres Strait Islander children and young people in out-of-home care, cultural safety:

“...encompasses the child being provided with a safe, nurturing and positive environment where they are comfortable with being themselves, expressing their culture... their spiritual and belief systems, and they are supported by the carer and family”.³¹

Cultural safety is also important for children and young people who are culturally and linguistically diverse (CALD), who may come from different nationalities, cultural backgrounds, languages or religious groups. According to the Victorian Commission for Children and Young People, organisations can achieve cultural safety for children and young people by:

“sharing knowledge, raising awareness, developing understanding that leads to cultural sensitivity and finally, cultural competence. ...Organisations can demonstrate that they value diversity by accepting, respecting and welcoming the differences between and within cultures”.³²

Experiences of safety for children and young people in group residential care

A review of international research into children’s perceptions of group residential care found that “for some children, residential care can meet their complex needs, enhance their lives and help them to develop as an individual within a secure and positive environment”.³³ In a separate Australian study, some young people reported that the workers in their residential care program were physically present and emotionally attuned to their needs, and provided psychological comfort and practical support, which they saw as important to their sense of safety.³⁴

However, the Royal Commission into Institutional Responses to Child Sexual

Abuse found that residential care can sometimes pose serious risks to children and young people: “according to children who live in residential care facilities, safety is something that they hope for but do not always experience”.³⁵

Relationships are important for children’s safety in residential care

Children and young people have said that their safety in residential care is primarily relational, rather than concerned with physical security measures, for example. They have emphasised the importance of “consistent, reliable, strong and lasting relationships with trusted workers” who will “champion their case and make them feel they cared about them as individuals, they foster a sense they have worth, that they are connected and are not alone”.³⁶

Supportive relationships with workers are important for ensuring the ongoing safety of young people by “looking out” for them and taking their safety concerns seriously, but also for providing emotional support which fosters their sense of being in safe relationships of care.^{37, 38, 39} Young people living in residential care in NSW said that they felt safe when residential care workers were actively engaged with them and involved in their lives, providing both practical and emotional support.⁴⁰

Children and young people in residential care also report that they feel an even greater sense of safety when they maintain multiple relationships with people outside the residential care setting, including other young people and trusted adults in the wider community.⁴¹

In one Australian study, children and young people with a disability reported that their sense of safety was highly relational, extending beyond their relationships with paid carers, to include: “having friends, feeling known and valued,

having someone to confide in, avoiding contact with people they didn't know, and being able to tell someone if they felt unsafe".⁴²

Children and young people in residential care have said that living in home-like environments brings them additional feelings of safety and security. As well as living in a comfortable and unique physical environment, children also value the efforts of care workers to develop and maintain home-like daily routines and expectations in residential care, such as regular meal-times and rosters of household chores, which help to generate an atmosphere of consistency, predictability and reliability.⁴³

Children's participation is important for their safety in residential care

Being heard, being involved in decision-making about their own lives, and being treated with respect and fairness in residential care is highly valued by children and young people, as well as being integral to their feelings of safety in OOHC.^{44, 45, 46}

Importantly, children have expressed a particular desire for adults to *respond* as well as *listen* – “having someone to talk to is really important but there's no point having someone to talk to if they don't believe you or they do not follow up”.⁴⁷

Participation and being heard contributes to the safety of children and young people, especially in institutional contexts, as acknowledged by the National Principles for Child Safe Organisations.⁴⁸ Children and young people told researchers looking at safety in institutions that a good response to safety concerns happens when “adults and institutions take the time to listen to children and young people and to acknowledge their concerns when they arise”.⁴⁹

Young people in residential care have said it is important to have a say and be involved in decision making, especially when decisions are being made about them. They've also said it is important that they know what happens in response the views they share with workers, rather than wondering if they are talking to “just another worker who won't believe what I say”.⁵⁰



3. Part A: Regular Data Monitoring

The purpose of Regular Data Monitoring is to generate an up-to-date overview of the key characteristics of the Tasmanian OOHC system and the children and young people in OOHC.

Regular Data Monitoring will primarily utilise and consider data provided to the Commissioner for Children and Young People via an established data sharing arrangement with the Department of Communities Tasmania. The Commissioner may also request additional

data from the Department of Communities, other Government agencies, OOHC providers and other stakeholders as appropriate.

Regular data monitoring will include data relevant to Tasmanian children and young people placed by the Department of Communities Tasmania in interstate placements, including with MC1D in the Northern Territory.

The Commissioner anticipates publishing selected findings of regular data monitoring at least once during the monitoring cycle.



4. Part B: Thematic Monitoring of “Being Loved and Safe”

4.1 Approach to Monitoring

Part B: Thematic Monitoring will consist of two complementary elements:

1. Regular monitoring of quantitative data for “Being Loved and Safe”, and collection of additional quantitative data if required and appropriate.
2. Collecting qualitative data through conducting and participating in engagement activities with:
 - a. Children and young people in OOHC and those with a care experience, which may include visits to residential care settings
 - b. Foster and kinship carers, both current and past
 - c. Staff of agencies or organisations, including the Department of Communities Tasmania (as system owner), other Government agencies, OOHC providers and other stakeholders such as Aboriginal organisations, advocacy groups and peak bodies.

The activities listed above may be conducted either in parallel or sequentially, as required. Engagement activities (including monitoring discussions and monitoring visits) may be conducted concurrently with an individual OOHC provider when appropriate. The timing of activities, discussions and visits will be informed by changing circumstances, aiming to maximise the participation of children and young people, carers, OOHC providers and other stakeholders.

4.2 Engagement activities for monitoring “Being Loved and Safe”

A variety of engagement activities are proposed for Part B Thematic Monitoring of “Being Loved and Safe”, as described below.

1: Activities with children and young people in out-of-home care or with an out-of-home care experience

The design and implementation of engagement activities will be informed by the views of children and young people with a care experience, carers, OOHC providers, and others who work with children and young people in care. Activities could include informal conversations, one-on-one conversations, focus group discussions or activity-based sessions. Engagement activities will be guided by the [CCYP Ethical Consultation Policy and Procedure](#).

Engagement activities will also be informed by previous consultations conducted by the Commissioner with children and young people with a care experience about how to approach monitoring of “Being Loved and Safe”. The Monitoring Program’s approach will reflect an intent to ask *the right question of the right person*. For example, young people in care have told the Commissioner that they don’t want to be asked factual questions such as “How many workers have you had?”, in order to gather information about how many workers children and young people have had while in OOHC.

Young people have said such questions can be upsetting – and in fact, those kinds of factual, systems-focused queries are best directed to the system owner, the Department of Communities Tasmania. During monitoring activities, children and

young people are best placed to be asked about their *lived experiences, insights* and *opinions* about “Being Loved and Safe” in OOHC.

Some engagement activities will be conducted in collaboration with organisations with their own consultative mechanisms and processes, such as OOHC providers, other service providers or advocacy organisations (e.g. health, disability or Aboriginal organisations).

The Commissioner may also conduct or participate in informal engagement activities as opportunities arise, e.g. conversations with individual young people with a care experience who initiate contact with the Commissioner.

2: Activities with foster and kinship carers

Engagement activities with carers, including former carers, may be conducted to ascertain their views and

experiences of factors relevant to children “Being Loved and Safe” in OOHC, and the participation of children and young people, including in relevant decision-making processes.

3: Monitoring discussions with agencies and organisations

Engagement activities will be conducted with workers or managers in organisations providing services to children in OOHC, or services otherwise relevant to the Tasmanian OOHC system, including:

- Department of Communities Tasmania, as the system owner for OOHC
- OOHC providers, including the Department of Communities Tasmania
- Peak bodies and advocacy groups
- Tasmanian Aboriginal organisations
- Other stakeholder organisations.



5. Part C: Responsive Investigations

In Part C of the Monitoring Program, the Commissioner may, consistent with her statutory functions and powers as outlined in the CCYP Act, undertake a targeted in-depth investigation of a specific issue in the Tasmanian out-of-home care system, particularly in response to an emergent issue.

How such investigations are to be conducted is a matter for the Commissioner, taking account of relevant provisions in the CCYP Act.



6. Part D: Monitoring the Tasmanian Government's implementation of the Commissioner's recommendations for the out-of-home care system

In October 2019, the Commissioner published [Out-of-Home Care Monitoring Report No. 1](#). In that report, the Commissioner made 23 recommendations for strengthening Tasmania's OOHC system, addressing five key themes:

1. Making sure children and young people in OOHC have a say about their care and their lives
2. Making sure everyone involved in the care of children and young people in OOHC is doing a good job
3. Making sure everyone involved in the care of children and young people in OOHC knows about the

child they are caring for, what they need and how they are going

4. Making sure we know about and promote Aboriginal culture
5. Making sure children and young people in OOHC can be healthy.

In March 2020, the Tasmanian Government published its response to that report, [Tasmanian Government Out of Home Care Response Report and Action Plan 2020](#). In its response, the Government committed to implementing 15 Priority Actions as well as several other actions, across the five themes listed above; and to reporting in December 2020 on progress to implement its Priority Actions, which has occurred. Part D of the Monitoring Program will involve monitoring the Tasmanian Government's progress against both its Priority Actions and the Commissioner's recommendations.



7. Reporting

Reporting relating to activities undertaken in the course of the OOHC Monitoring Program may include:

- “Focus reports” – findings from a deep-dive into a particular topic
- “Snapshot reports” – short and visually engaging fact sheets or summaries of a longer report
- Visual media – e.g. infographics, animations, videos
- Media releases – succinct briefings of key monitoring findings, plus commentary by the Commissioner
- Forums or talks to communicate findings and develop momentum on an issue
- Digital formats – e.g. emails, webpages, social media, YouTube, etc.



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