

Securing a Safe and Effective Foster Care System

Australian Foster Care
Association

Priorities and Position
Statements

2004

For Foster, Relative and
Kinship Care Across
Australia

Securing a Safe and Effective Foster Care System

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FOREWORD

As at 30 June 2003 there were 20 297 children and young people who were unable to live at home with their own families. Of these 20 297, 92% of the children were either in foster care or relative or kinship care.

Unfortunately there are no national statistics collected on the numbers of carers in Australia, but we do know that while the number of children and young people needing care is increasing, the number of available carers is decreasing.

The successful placement of children and young people in alternative care arrangements is heavily dependent on the levels of support and assistance that the children, young people and carers receive during the placement. With the decrease in the number of carers available this becomes even more important.

Foster carers do not receive an income for the voluntary service they provide. Most receive a subsidy and partial reimbursement for the costs they incur, and access to some services for the child in their care.

Relative and kinship carers sometimes receive a subsidy and access to selected support services, but most struggle to make ends meet from within the family's own limited resources and this in turn puts even more pressures on the family.

The Australian Foster Care Association (AFCA) is the national peak body for foster, relative and kinship carers and enjoys the support of all State and Territory peak associations.

One of the activities that AFCA has been involved in is the participation in research projects that relate to placement support and improved outcomes for children and young people in care. Summaries of the key recommendations from some of these studies are appended to this document.

AFCA has also worked with its members and carers through out Australia to identify key priority areas that need to be addressed to ensure the success of placements for children and young people in care. Flowing from this work, AFCA has been able to develop policy and position statements that reflect the views of carers nationally. These have also been adopted by all State and Territory Associations and have been used to inform policy and practice within individual States and Territories. The latest version of the policy and position statements appear in this document. Copies can also be downloaded from our web site www.fostercare.org.au.

AFCA reviews its policies and priorities from time to time to maintain a current, agreed strategy for working with the Commonwealth Government, State and Territory Governments, and State and Territory Departments to address areas of concern and progress reports are made on these issues to the annual national foster care conference. AFCA's current priorities have been included in this document, as has a process for annual review and evaluation to report on progress and to plan for the next year.

I commend this document to all those with an interest in improving the provision of foster, relative and kinship care in Australia. AFCA is committed to working in partnership with other sector stakeholders throughout Australia because we believe that by working together we can make a difference.

Bev Orr
AFCA President

Australian Foster Care Association

Priorities for Action in 2004

At the National Foster Care Conference in September 2003, AFCA members, State Foster Care Association representatives and foster carers reviewed AFCA's priorities and position statements for 2002-2003 and contributed to setting the focus for action in 2004.

The outcome of the Conference input is that much of the 2002-2003 content has been retained (with some changes) and some new priorities and position statements have been added.

This booklet, *Securing a Safe and Effective Foster Care System 2004*, will provide all Foster Care Associations with a focus for cohesive action across the country in raising through the various levels of government a number of issues that have been determined to be problematic for foster carers regardless of where they live.

With this in mind, the following strategy has been agreed upon:

- Specific issues will be identified and raised with Directors-General/Department Secretary nationwide by individual State and Territory Associations.
- The reports entitled *Supporting Strong Parenting in the Australian Foster Care Sector*, *The Costs of Caring: A Study of Appropriate Foster Care Payments for Stable and Adequate Out of Home Care in Australia* and *A Comparative Analysis of Carer Payments in Australia* should continue to guide State and Territory governments to achieve improvement.
- Specific issues will be raised with State/Territory and Commonwealth Governments with a focus on continuing the cooperative national approach shown in the development of a National Foster Care Plan in 2003. AFCA believes that more consistency in policy, practice, funding, and reporting across the nation will lead to better outcomes for children and young people.

The priority issues to be raised with Directors-General are:

1. Implementation of the National Foster Carer Plan which includes the establishment of National Standards for foster care.
2. The retention of foster carers through respect for them and their work and the provision of appropriate support to meet the needs of the children they care for as well as the related needs of the foster family.
3. Processes developed and implemented to respond to allegations against foster carers which ensure the safety and well-being of the child while respecting the foster family and providing a system that is fair, just, timely and accountable

The issues to be raised with State and Territory Governments are:

1. State/Territory Governments have the statutory responsibility for the care of children under child protection orders and as the parent/guardian they have a duty to provide the funds to ensure that all the needs of children are met. Adequate weekly basic fostering allowances, other allowances, medical and therapeutic costs, together with appropriate respite for foster carers are essential to meet the statutory responsibility and Governments should not expect costs to be supplemented by the foster family.

2. Use of the reports entitled *The Costs of Caring: A Study of Appropriate Foster Care Payments for Stable and Adequate Out of Home Care in Australia* and *Supporting Strong Parenting in the Foster Care Sector* should guide responses to support and related foster care issues.
3. Relative/kin care is an appropriate care option for children under child protection orders but these carers should receive the same financial and other support as foster carers with a recognition that relative/kin care can have complex and demanding intra-family issues as well.

The issues to be raised with the Commonwealth Government are:

1. Payment of full Family Tax Benefit or Youth Allowance, and full Child Care Benefit for all children in foster care.
2. Responsible and adequate preparation for the transition of young people leaving care must include support for them to acquire the skills for independent living (including continuing to live with their foster family if that is the case) with an emphasis on entry into employment or further study and support to achieve this continuing beyond 18 years of age.
3. Continued Australian Government leadership in the implementation of the National Foster Care Plan and the development of appropriate responses to the other recommendations contained in the AFCA report entitled *Supporting Strong Parenting in the Foster Care Sector*.

To assist in seeking progress in these areas in 2004, AFCA has prepared this booklet which contains more detailed discussion of issues related to the above priorities

AFCA is determined to work for progress together with each State and Territory. By working together to achieve the outcomes sought, we can make fostering more satisfying and achieve better outcomes for children and young people, foster carers and workers.

Reporting on Progress

It is intended that each State and Territory Association will provide an annual report to AFCA to enable AFCA to produce a National Progress Report of the implementation of the priorities and positions covered in this document. The following Report for 2003 was presented to the National Conference in September 2003.

REPORTING NATIONAL PROGRESS FOR 2003 ON THE AGENDA OF THE AUSTRALIAN FOSTER CARE ASSOCIATION (AFCA)

In the AFCA booklet Securing a Safe and Effective Foster Care System 2002-2003 which was produced from the National Foster Care Conference 2002, we committed to producing an Annual National Report on progress in advancing the Priorities and Positions included in the booklet for presentation at the Conference in 2003. This Report uses the headings of the AFCA booklet and the collated responses from States/Territories.

State and Territory Governments

A description of how the following reports have been used in discussions with State or Territory Governments and to what extent changes have been made that reflect the recommendations contained in the following reports:

- *Supporting Strong Parenting in the Australian Foster Care Sector;*
- *The Costs of Caring: A Study of Appropriate Foster Care Payments for Stable and Adequate Out of Home Care in Australia; and the*
- *Comparative Analysis of Carer Payments in Australia.*

RESPONSE

The three documents have been distributed and discussed with Departments and with some Ministers. Generally the response has been a commitment to improve foster care with a willingness to use the Reports and to work with Foster Care Associations and foster carers to achieve improvements. There are reviews in some States/Territories, working parties, and documents being produced that address the issues in the Reports. While these are welcome, the real test of progress will be to see actual outcomes in place by the 2004 Conference.

Directors-General/Department Secretary

A description of how the following issues have been raised with the Directors- General and what has resulted from this:

- *Permanency planning and stability of placement;*
- *Consistent foster care training, accreditation and protocols for allegations against carers; and*
- *National standards of foster care.*

RESPONSE

Permanency is an issue that is being considered in some States/Territories as part of a Review of the current Act or as a separate issue. The situation should become clearer next year.

Training and Accreditation is an area of activity across the country. There are a number of States/Territories conducting Reviews and there is also planning for more consistency across areas and agencies.

The approach to handling allegations is being reviewed in a number of States and Territories. The need to protect children, to treat foster carers fairly and to have consistency of procedures are the concerns that are being addressed.

National Standards have not been pursued to the same extent as other issues this year. However, there has been a general push to have States/Territories support the National Plan which will open up this area.

AFCA Position Statements

For each of the following position statements, a description is provided of what changes have occurred in this area in the past year.

- *Aboriginal and Torres Strait Islander Care;*

In general this continues to be an issue requiring much more support. There are some new programs or trials being put in place but also some agencies have been closed. Several working groups are seeking new ways of providing effective services.

- *Allegations of abuse in foster care;*

This remains a contentious area with a number of Reviews/working parties in place. Progress is slow.

- *Financial conditions in foster care;*

There have been some increases and some promised future increases but the issue of CPI indexation remains a real problem for all but one State/Territory. Movement towards the FCE of the McHugh Report and Commonwealth FTB for all children in care are not being addressed seriously.

- *Good Practice;*

The need to have good practice is generally accepted but lack of training, lack of funds, staff turnover, and resistance to change are negative factors. Some steady practice is reported but most are counting on working/partnership groups to effect improvement.

- *Permanency and long term stability in foster care;*

There is concern that this is not being dealt with effectively and the response of Governments vary. The situation should be clearer next year.

- *Relative care;*

With relative care being used more and more, the provision of payment of foster allowance, of support, and of training are important issues to be addressed. While some of these are available to some relative carers, the general position is fairly negative.

- *Support for foster carers*

This is related to funding and good practice. With funding generally being inadequate, the pressure on workers can lead to less support. Where foster carers are part of the team, the result seems to be better.

- *Training and accreditation of foster carers*

There is a lot of action with both initial and on-going training being considered. Delivery is an issue in relation to time constraints from employment. Assessment and accreditation are being considered in a number of States/Territories.

Any other comments

This section will detail any other progress achieved in any State or Territory or any other information that may assist Associations in gaining additional positive outcomes.

Seeking improvement requires a constant effort on the part of Foster Care Associations [FCAs]. The AFCA booklet ‘Securing a Safe and Effective Foster Care System’ with priorities and position statements has helped in presenting/discussing issues but resources for foster care are a constraining factor. Funding of FCAs is necessary for them to support and advocate for foster carers and the children they care for. There is general acceptance of the need to involve foster carers and FCAs in reviews, planning, etc and this will facilitate better partnership and better outcomes for children who have been abused and neglected.

As many of the responses this year include Reviews, Working Parties, documents being produced, issues being considered, etc., AFCA expects that the National Report on Progress for presentation at the National Conference 2004 will contain much more specific statements on the real outcomes of these.

National Progress Report 2004

This Report will be presented to the National Foster Care Conference in Canberra in October 2004. As 2003 was the first Report, action in many areas was only starting. It is expected that the 2004 Report will provide more critical reporting of outcomes for the year.

Securing a Safe and Effective Foster Care System 2005

At the National Conference in 2004, a process will be put in place to identify priorities for 2005; to review current position statements; and to add further position statements to produce the 2005 edition of this booklet.

Aboriginal and Torres Strait Islander Care

Position:

AFCA recognises SNAICC as the National body responsible for Aboriginal and Torres Strait Islander care and is committed to working with and supporting SNAICC in the raising of issues affecting Aboriginal and Torres Strait Islander carers and children and young people in the care system. AFCA believes that all Aboriginal and Torres Strait Islander carers, including relatives, should be provided with the same level of training, and financial and non-financial support as other carers. Wherever possible, Aboriginal and Torres Strait Islander children and young people needing a placement must be placed within their own community.

Commentary:

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004. This is not meant to be an exhaustive statement, but rather covers the major issues raised by foster carers in relation to Aboriginal and Torres Strait Islander care. The statement has been produced to encourage:

- Quality outcomes for children and young people in care;
- Satisfying partnerships between foster carers, Indigenous carers and workers; and
- Consistency across the nation.

Definition:

Aboriginal and Torres Strait Islander children and young people are over-represented in the care system throughout the country. This situation requires both urgent attention and special culturally appropriate programs to address the particular issues faced by this group.

Acknowledgements:

1. The over-representation of Aboriginal and Torres Strait Islander children and young people in the care system is unacceptable but addressing this must not leave children in abusive situations.
2. The current problems faced by the Aboriginal and Torres Strait Islander communities are the responsibility of us all.
3. Early intervention and support to Aboriginal and Torres Strait Islander families is crucial.
4. Aboriginal and Torres Strait Islander carers need to be assessed with recognition of their cultural practices and within their community norms and boundaries.
5. Notwithstanding that abuse can occur in any community, no child should endure abuse within those cultural norms. Every child has a right to be safe and secure.
6. Despite every best effort to place an Aboriginal and Torres Strait Islander child in accordance with the Aboriginal and Torres Strait Islander Child Placement Principle, some children and young people may not be able to be placed with appropriate Aboriginal and Torres Strait Islander carers. Non-Indigenous foster carers should complete a cultural orientation program.
7. Aboriginal children can move around within their family often and this can lead to more damage/trauma.

Issues:

1. Aboriginal and Torres Strait Islander carers require training, assessment and supports that are culturally sensitive, culturally appropriate, and recognise the life experiences and community practices of the people.
2. Aboriginal and Torres Strait Islander carers need to be recruited, trained, assessed and supported by Aboriginal and Torres Strait Islander workers, agencies or community councils. They should have an assigned worker to maintain contact and supervision of placement, to provide support to both carer and child/young person, and to help in meeting standards of care.
3. Financial and non-financial support to Aboriginal and Torres Strait Islander carers should be the same as that afforded to other foster carers.
4. Aboriginal and Torres Strait Islander carers will commonly be relatives of the children and young people placed with them and this in itself requires special support and understanding
5. Aboriginal and Torres Strait Islander carers should be included in the decision-making regarding placement and movement of children and young people in the care system.
6. The Aboriginal and Torres Strait Islander Child Placement Principle should be strictly adhered to but if such a placement is not possible or leaves the child exposed to those who abused the child, then a sensitive alternate placement should occur.
7. National genealogical tracking should be part of standard casework for all Aboriginal and Torres Strait Islander children and young people entering care.

8. There needs to be recognition that issues facing remote, rural, urban and traditional people are very different, requiring different solutions, programs, sensitivities.
9. Children in care should be supported to gain cultural knowledge and experience their culture.
10. Aboriginal and Torres Strait Islander carers need to be provided with opportunities to attend training and discussion forums within their State and nationally to exchange ideas and experiences, to gain support from other carers.
11. Non- Aboriginal and Torres Strait Islander carers need to be supported to gain cultural knowledge and have access to appropriate training and cultural support structures.

Accountability in Foster Care

Position:

Children and young people who have been taken into care because of abuse and neglect in their own family are entitled to be safe from abuse and neglect by the system, workers and Foster Families. This means there needs to be effective accountability protocols for the system (Government Departments and Non-Government Organisations), workers (Government and Non-Government), and Foster Families, which should be open and transparent and have consequences for any actions, which significantly harm a child or young person or significantly impact negatively on their wellbeing.

Commentary

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004. This is not meant to be an exhaustive statement but rather covers the major issues raised by foster carers in relation to sector accountability. The statement has been produced to encourage:

- Quality outcomes for children and young people in care;
- Satisfying partnerships between foster carers, relative carers and workers; and
- Consistency across the nation.

Definition:

Accountability needs to be related to the safety and well being of the child. The needs of the child must be paramount and any action taken must be in the best interests of the child. Significant harm should be identified as something that threatens the safety of the child/young person rather than the quality of the care provided.

Acknowledgements:

1. Alternative Care is a difficult and complex area where it is identified that actions need to be taken in context
2. Foster Carers provide care 24 hours a day 7 days a week for children and young people who can be damaged and present on-going challenges that need to be addressed in a family situation to help them progress.
3. Workers have a responsibility to children, birth families and foster families to ensure that any process is fair, transparent and equitable and has the best interests of the child as focus.
4. There need to be accountability processes that ensure government funding is being used effectively.

Issues:

1. The system needs to have policies and practices that are suggestive of good practice and recognize the diversity of families and the difficult roles of workers and foster families.
2. Workers should be adequately trained and supported to provide children and young people and foster families with support and with good decisions related to the care of the children and young people in the foster family.
3. Foster families should be adequately trained and supported to provide quality care for the children and young people in their care.
4. Foster families and workers need to accept that there has to be an appropriate system of monitoring their actions and the care of the children and young people so that the community as a whole can have confidence in the foster care system.
5. Foster families should be able to demonstrate that allowances provided to care for the children have been used to provide quality care. This should involve visits and discussions with foster families and children and young people to monitor and enhance the quality of care provided. (Note: this does not include itemised accounts but the range and quality of resources and activities provided for the child.)
6. Government has a responsibility to ensure adequate funds are available to provide the appropriate services to enable the system, workers and foster families to meet their responsibilities.
7. Government has a whole-of-government responsibility to ensure that all Government Departments provide quality resources and support to children and young people in care and their foster families.

Allegations of Abuse in Foster Care

Position:

All parties in foster care share a responsibility to ensure that children and young people in placement are provided with quality care free from abuse. At all times the safety of the child or young person, and the foster family, is paramount.

The raising and addressing of concerns and allegations of abuse in foster care must be acknowledged as a stressful time for all those involved. The principles of openness, honesty, dignity, fairness, due process and equity must apply. Investigations of allegations must be conducted in the least intrusive manner whilst ensuring that they are thorough and accurate and detailed information is obtained.

Commentary:

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004. This is not meant to be an exhaustive statement but rather covers the major issues raised by foster carers in relation to the raising of issues or allegations. The statement has been produced to encourage:

- Quality outcomes for children and young people in care;
- Satisfying partnerships between foster carers, relative carers and workers; and
- Consistency across the nation.

Definition:

Allegations can occur in foster care due simply to the nature of the work undertaken and the experiences of the children and young people requiring care. A range of issues may be raised involving the day-to-day activities of the foster family; the standard of care afforded the child or the harm or risk of harm to the child. Foster carers are particularly vulnerable and worldwide research indicates that the longer carers are in the system, the higher their chances of being notified to the authorities.

Acknowledgements:

1. Foster carers need to be informed and educated in relation to the raising of concerns and allegations against them, their rights and responsibilities in these circumstances, and the processes that will be followed.
2. Foster care families are not required to be “super” or “perfect” families. They are “real” families and will experience many of the disagreements, competition for attention, juggling of everyone’s needs, medical crises, tantrums, etc. as any other family.
3. Some children and young people coming into care, or their parents, have a history of making allegations in order to break down a placement. They need to be assisted to understand the consequences of their behaviour.
4. Foster carers are not the only party responsible for the protection of the child or young person and the provision of quality care. This can only be achieved if all parties work collaboratively in a supportive and open relationship where responsibility is shared. Failure of workers to respond to requests for assistance or failure to provide agreed support must be taken into account in any investigation.

Issues:

1. Foster carers need to be informed and educated in relation to the raising of concerns and allegations against them, their rights and responsibilities in these circumstances and the processes that will be followed.
2. The process and framework used to address concerns and allegations in foster care must be published and made readily accessible to foster carers.
3. Concerns and allegations raised need to be treated with sensitivity, and a process undertaken that ensures the protection of the child or young person and the protection and dignity of the foster carer/s.
4. Decision-making regarding how to approach the raising and assessment of concerns involving foster carers must have a consistent framework.
5. Where possible, concerns need to be raised in the least intrusive manner, that is, as part of general casework. Where this is not possible, low key, informal assessment needs to occur. Only in the most serious of cases should foster carers be subjected to a full formal assessment that may also include members of other Departments such as the police.
6. Foster carers, in all cases except where criminal activity may have occurred, have a right to be informed in person or by telephone and then in writing that concerns have been raised, specifically what these are, how they are to be addressed and within what timeframe.

7. Foster carers have a right to access legal advice and support and to be assisted by an advocate.
8. During any process where concerns are raised, foster carers should have free access to independent and departmental counselling, and support for themselves and the children in their care, access to their State or Territory Association, family, friends and other members of their support network.
9. Where allegations are to be addressed with the foster carer in a formal way, this should be conducted by an independent authority or person not directly involved with the foster carer or the child or young person in placement.
10. Children should not automatically be removed from a placement. Removal should only occur in extreme cases.
11. Foster carers should not automatically have their license/approval withdrawn. Withdrawal should only occur in serious cases. Additional training and support should first be offered. Discussions should occur as to the most appropriate placement types. All carers having their license/approval altered or withdrawn must have appeal rights.
12. Foster carers are to be acknowledged for the difficult work they do and have the opportunity to defend themselves against any concerns or allegations raised in a way that is fair and non-judgemental.
13. Communication during the raising of a concern or allegation must be verbally clear and extensive in detail and must also be made available to the foster carer in writing.
14. In all interactions with foster carers over concerns or allegations, those making the assessment must take into consideration the effects of the contribution or lack of response by other parties to the situation. That is, has the placement agreement been adhered to, have requests from the foster carer for support and services been responded to, have offers of assistance been made etc.
15. Timelines for the commencement and completion of any process must be clear and should be within 24 hours of the receipt of information for commencement and not longer than 30 working days for completion (except in exceptional circumstances).
16. Outcomes of meetings and assessments should be well documented and should focus on future development rather than punitive measures.
17. Copies of all reports and outcome documents must be provided to the foster carer within the 30 working days timeframe for completion.
18. The outcome of an investigation should be advised to all parties interviewed as a part of the investigation process. This is particularly important in instances of unsubstantiation.
19. Copies of reports signed by the foster carer and as received by the foster carer must also be filed on the foster carer file, and on the file of the child or young person to whom the concerns or allegations relate.
20. Foster carers must be informed of their right to appeal any information contained in the reports or any action resulting from the assessment. They must be assisted in accessing their rights of appeal.
21. Follow-up with the foster carer and the child or young person must occur and should include the offer of free debriefing or counselling by an independent person.
22. Financial costs associated with legal advice, lost income from work, babysitting costs, counselling etc should be met by the Department where the concerns or allegations are unsubstantiated. Foster carers must be informed of their right to claim financial outlays.

Children and Young People With a Disability in Foster Care

Position:

Children and young people with disabilities in the care of the State/Territory have the same rights as all young people in care. In consideration of their special needs they have the right to adequate support services and financial assistance to enable them to learn and participate in family activities and mainstream society to their maximum potential. Foster families caring for these children have a right to adequate support services including financial assistance and training to enable the provision of consistent quality care and stability for the child/young person in their care.

Commentary:

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognized Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004.

This is not meant to be an exhaustive statement but rather covers the major issues raised by foster carers in relation to children and young people with disabilities, who are in care. This statement has been produced to encourage:

- Quality outcomes for children and young people with disabilities, in care;
- Satisfying partnerships between foster carers, relative carers, social workers and others involved in the delivery of services to children/young people with disabilities, in care.
- Consistency across the nation.

Definition:

Caring for children and young people with a disability who may have experienced abuse and neglect requires specialized care from highly skilled and well-supported foster carers.

Acknowledgements:

1. The Disability Discrimination Act applies to children and young people in care.
2. Duty of Care should be a balance between safety and the right of the individual to the experiences and risks of normal life.
3. Most foster children with disabilities are in long-term care. A home-based care placement is the preferred option.
4. Foster families require support services and financial assistance for the young person well past the age of 18 years until he/she is ready to move to alternate accommodation.
5. In the case of the foster family taking guardianship support services and financial assistance should continue.
6. Where possible and within their capacity the child/young person should contribute to decision making about all aspects of their lives.
7. The needs of foster children with disabilities are often better understood and addressed by experienced foster carers and therapists than by workers, who do not generally have the specialised training required in this area.
8. Families caring for foster children with disabilities are often financially disadvantaged due to their contribution to the cost of equipment, household alterations and extra costs incurred in enabling the foster child to fully participate in family life. The additional time associated with caring for a person with a disability reduces the opportunity for paid employment.
9. Foster carers are not covered by Occupational Health and Safety Guidelines.
10. Caring for children with disabilities automatically brings additional stress to foster carers and their family.

Issues:

1. Government disability services are not consistent between states, agencies and workers.
2. Existing support structures are not adequate. Whatever support is needed for the foster family to maintain the placement should be provided:
 - a. Adequate respite hours;
 - b. Financial assistance for home alterations and additions, accessible vehicle and equipment; and
 - c. Holistic case planning is required to identify individual specific needs and support services.
3. Additional training and accreditation for foster carers should be mandatory and appropriate to the child/young person in their care.

- a. Independent living skills need to be taught at whatever level the child/young person is able to participate in.
 - b. The child/young person needs opportunities to participate in activities outside of the foster family to prepare for independent living.
4. Government policy assumes birth families are financially responsible for their adult children in education up to the age of 25, but generally does not continue to support foster children in the same circumstance.
5. Young people may not complete their education and may never be able to live independently. Therefore they will need ongoing financial and other support.
6. In some states support for foster families is often reduced or withdrawn at 16 years of age when the child/young person becomes eligible for the Federal disability allowance.
7. Foster Carers, educational staff, therapists and workers should collaborate to create Case Plans and Individual Education Plans with regular reviews.
8. When developing Plans for the child/young person all parties need to work respectfully together.
9. A right of choice exists for the child/young person with a disability to attend the most appropriate educational facility, whether a special or mainstream school.
10. Young people with disabilities should have equality of opportunity to continue into tertiary education.

Financial Conditions in Foster Care

Position:

As volunteers, foster carers give much of their time, home and personal resources to the children and young people who come to live with them. Foster carers should not be required to subsidise from their own income or savings, the care of these children and young people. These children and young people are the financial and moral responsibility of the State, and as such should be fully financially supported by the State and Commonwealth governments. This will ensure that children and young people in care have the same opportunities as their peers.

Commentary:

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004. This is not meant to be an exhaustive statement but rather covers the major issues raised by foster carers in relation to the financial conditions of foster carers. The statement has been produced to encourage:

- Quality outcomes for children and young people in care;
- Satisfying partnerships between foster carers, relative carers and workers; and
- Consistency across the nation.

Definition:

Caring for children and young people is expensive, and more so for those who have experienced abuse or neglect in their early life and have additional needs. The financial support for children and young people placed with foster carers is the joint responsibility of the States and the Commonwealth.

Acknowledgements:

1. Foster carers are volunteers and are currently heavily subsidising the care of children and young people across the nation.
2. Foster carers do not receive a salary or regular income from foster care.
3. Foster carers do not wish to be paid in a professional sense for the work they do (except in some specific cases), but cannot sustain the current level of costs associated with being a foster carer.
4. Inequity exists across the nation in regard to reimbursement rates to foster carers.
5. Some foster carers are deemed ineligible for various Commonwealth payments due to income/assets testing, when children or young people in care are deemed to be the dependents of their foster carers rather than of the State.
6. All foster carers should be held accountable in a broad sense (not itemised accounting but rather the range and quality of resources and activities provided) for the monies they receive for the care of the children and young people placed with them.
7. Foster carer reimbursement must continue NOT to be classed as income to maintain tax-exempt status.

Issues:

1. Fostering allowance and clothing allowance need to be paid to foster carers immediately a placement commences, not in retrospect.
2. An upfront placement payment needs to be paid
3. Reimbursement of additional costs to foster carers needs to be timely, adequate, documented, accessible, transparent in process and consistently applied. These need to be kept to a minimum and the majority of payments, once agreed to, should occur on a regular cycle
4. Assessments of the needs of highly challenging children needs to be completed quickly and additional financial costs associated with their care agreed upon.
5. Dual payment of foster carers for the same child or young person needs to occur where the child or young person is placed in planned respite care as part of case management or in respite so that the full-time or usual foster carer can take a break before resuming an on-going caring role.
6. Costs, apart from on-going daily needs, involved in the education of a foster child should be paid (eg: camps, tutoring, text books, equipment, fees, representing school, senior formal etc).
7. Children and young people in care need to have free access to ambulance transport, preschool, kindergarten and childcare based on the child's Health Care Card recipient status.
8. Funds need to be made available for children and young people in care to achieve social and physical development through attendance at such activities as drama, music, ballet, sport, tutoring etc.
9. Family Tax Benefit and Child Care Benefit (or an equivalent payment) should be automatically available for all children and young people in care.

Foster Carers' Personal and Identifying Information

Position:

Foster carers have a duty of care to ensure that all foster children, their own children and other family members are safe. When foster children join a foster family, strategies need to be put in place to ensure the safety of everyone in the foster family unit.

To satisfy the information needs of the birth family when a child is taken into care, non-identifying information such as the make up of the foster family unit, the number of children and adults in the home, the type of school the child will be attending (if different), whether the foster parent/s work in general terms, special cultural or Indigenous reassurances, etc should be provided to the birth family in the first instance.

The release by a worker of any foster family's identifying or personal information is only to be made with the written approval of the foster carers after they have been provided with a full assessment of the risks associated with such a disclosure, and it has been determined by the worker that the release of the identifying information would not create any risk to the child or foster family, and/or risk in terms of placement stability. The final decision on release is the right of the foster carers not the worker/system.

Commentary:

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004. This is not meant to be an exhaustive statement, but rather covers the major issues raised by foster carers in relation to the release of foster carer' personal and identifying information. The statement has been produced to encourage:

- Quality outcomes for children and young people in care;
- Appropriate protection of foster families from community risk factors;
- Satisfying partnerships between foster carers, birth families and workers; and
- Consistency across the nation.

Definition:

Many foster children come from unsafe environments. The release of personal and identifying information about a foster family has the potential to put the child in care and that foster family at risk, both whilst the foster child is in the home and after the child has left the home. Information about the foster family must NOT be shared with third parties, including birth families, unless it is approved by the foster carers after they have received clear written advice that there is NO current /potential risk associated with the release of the information.

Acknowledgements:

1. Foster carers are volunteers and are not paid as employees to provide foster care.
2. Foster carers volunteer their homes, skills and time to care for the community's abused, neglected and 'at risk' children.
3. Foster carers do NOT automatically volunteer to waive the privacy rights they enjoy in our society as normal, law abiding citizens.
4. When a child or young person comes into care, their birth family will seek information about where their child is. Foster carers are aware that there are often good reasons for the birth families of children in care to be provided with certain information about foster carers in order to re-assure the birth parent/s that their child is being properly cared for.

Issues:

1. Foster carer identifying information is often included in documents that may be passed onto third parties without the knowledge of the foster family. Sharing this information can jeopardise the safety and protection of the foster family unit both whilst the foster child is in the foster home and after the foster child has left.
2. Foster family information can appear on Court documents which are passed to other parties without an appreciation of the implications for the foster carer family. This can be partly addressed by substituting the department or agency address or telephone number in place of the foster family's address and telephone numbers on such documents.
3. Workers must not release or share foster carer information with third parties, including birth families, without first obtaining the written approval of the foster carer family.
4. To enable foster carers to make an informed decision, the worker must provide them with a written assessment of the risks associated with releasing information and must be held accountable for that assessment outcome.

5. Assessments or determinations made to release personal or identifying information about a foster family without the full participation of the foster carer/ family in the process, and the carers providing their written approval to the release of the information, on a case by case basis must not occur.
6. The release of any personal or identifying carer information to any third parties, or for purposes other than what the information was originally collected for, without the written approval of the foster carer/s concerned must not occur.
7. The Federal Privacy Commissioner's eleven Information Privacy Principles that apply to certain government agencies, the non-government and health sectors and the ten National Privacy Principles should also apply to foster carers.

Foster Carers' Rights

Position:

The role of the foster carer carries much responsibility, but often without equivalent rights. When rights and responsibilities are unbalanced, issues and concerns can arise which can impact on the quality and availability of foster care. Foster carers' rights need acknowledgement to ensure quality care and stability for children/young people in care, and the safety and stability for the foster family.

Commentary:

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004.

This is not meant to be an exhaustive statement but rather covers the major issues raised by foster carers in relation to foster carers' rights.

This statement has been produced to encourage -

- Retention of foster carers throughout Australia
- Quality outcomes for children and young people in care.
- Satisfying partnerships between foster carers, workers, children/young people in care and all other stakeholders
- Consistency across the nation.

Definition:

Foster carers are essential and valuable members of an important team concerned with the well being of children/young people in foster care and as such require indisputable rights in relation to their role, their person and their family.

Acknowledgements:

1. Foster carers have the right to be treated with dignity and respect by all staff involved in the case management of the child/young person in care.
2. Foster carers have a right to be an advocate/representative for the child/young person in their care. (Exceptions would be where the child is lodging a complaint against the foster carer concerned or where the carer's capacity to advocate is hindered by a conflict between their interests and those of the child.)
3. Foster carers have a common law Duty Of Care to the child in their care and Departments/NGOs/CSOs/agencies have a Duty of Care towards foster families to ensure no foreseeable harm comes to them in caring for a child, and that the foster families have the necessary and appropriate support and financial assistance to carry out their role.
4. Foster carers have a right to information and training in relation to the rights of children placed in their care including: appropriate standards of care, freedom of expression, involvement in decision-making that affects them, making complaints about the standard of services provided by the Departments/NGOs/CSOs/agencies, and having complaints resolved in an approved and legal way.

Issues

1. Foster carers have a right to:
2. Be treated with consideration, respect for personal dignity, and privacy.
3. Be included as a valued member of the service team.
4. Receive support services which assist in the care of the child in their home including an open and timely response from department/agency personnel.
5. Be provided with all information regarding the child that will impact on the child, members of their family, or their family life throughout the time they care for the foster child. In particular, they will be provided with an assessment of risk associated with the release of personal/identifying information before making a decision about whether to approve this release.
6. Have input into the case plan (including any permanency plan) for the child in their care.
7. Assurance of safety for their family by having the sole right to approve the release of their personal/identifying information to third parties including birth families on a case by case basis.
8. Assistance in dealing with loss and separation when a child leaves their home.
9. Be informed of all agency policies and procedures that relate to their role as foster carer.
10. Receive training that will enhance their skills and ability to cope as foster carers
11. Be informed of how to receive services and reach personnel on a 24-hour day 7 days a week basis.
12. Be granted a reasonable plan for relief from the role of foster carer.

13. Confidentiality regarding issues that arise in their foster family
14. Not be discriminated against on the basis of religion, race, colour, creed, sex, national origins, age, or physical handicap.
15. Receive evaluation and feedback on their role as foster carers.

Good Practice in Foster Care

Position:

Foster carers and workers in the sector must strive for continuous improvement of service to children and young people in the care of the State. Good practice must be the minimum acceptable practice in foster care and better practice shared across the sector on a regular basis. Governments must be encouraged to commit resources to the researching, piloting and implementation of programs and projects designed to improve outcomes for children and young people in care and that support the notion of developing partnerships. Our ultimate goal is to achieve best practice in the provision of care for all children and young people in care.

Commentary:

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004. This is not meant to be an exhaustive statement but rather covers the major issues raised by foster carers in relation to good practice. The statement has been produced to encourage:

- Quality outcomes for children and young people in care;
- The retention of foster families as active carers;
- Satisfying partnerships between foster carers, relative carers and workers; and
- Consistency across the nation.

Definition:

Good practice in foster care predominately depends on the commitment of all parties involved to work on issues of partnership. Where good practice occurs, the outcomes for children and young people in care are significantly improved. Further, the work satisfaction levels of both workers and foster carers increases.

Acknowledgements:

1. Good practice is occurring around the nation and needs to be acknowledged, shared and celebrated.
2. Good practice needs to appear in the simplest of tasks through to the management of extremely complex tasks.
3. Good practice is the responsibility of all parties within the sector.
4. Evidence based good practice from overseas needs to be researched and, where appropriate, strived for in Australia.

Issues:

1. The achievement of good practice needs a commitment by all stakeholders. An open, honest and trusting relationship between them is needed to allow good practice to develop.
2. Good practice can only be achieved where parties have a mutual respect for each other's roles and are committed to equality of power.
3. Good practice includes:
 - recognising the role, expertise, life skills and contribution of foster carers, and the treatment of foster carers as an equal member of the corporate parent/caring team;
 - the children and young people in care are involved in decision making concerning their lives wherever possible and appropriate;
 - actions and interactions such as how people are spoken to, the level of information shared, open and honest communication and the provision of support;
 - adherence to the requirements of legislation and commitment to policy such as placement agreements, planning meetings, reimbursement of claims, handling of concerns and allegations, renewal of approval, etc;
 - commitment to responsibilities such as the development of children's life histories, encouragement of positive family contact, dealing with the emotions and behaviours of children in placement, etc;
 - improvement in learning such as ongoing training, attendance at seminars, support groups, etc; and
 - recognition of the role of others, such as the sharing of positives and negatives, joining in social events, etc.
4. For the future development of good practice, the following are required:
 - a system for the collection and publication of good practice from the eyes of all parties involved;

- gatherings focussing on the showcasing of good practice;
- shared practice workshops; and
- funding to pilot and report on programs and projects to improve outcomes for children and young people in care.

Long Term Stability in Foster Care

Position:

Children and young people in the care of the State have a right to return to the care of their family where this is safe and appropriate. Where this cannot be achieved within a reasonable time period, they have a right to secure, continuous, long-term care where they can achieve stability and have the best possible chance to grow into happy, mature, responsible adults.

Commentary:

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004. This is not meant to be an exhaustive statement but rather covers the major issues raised by foster carers in relation to permanency or long-term stability. The statement has been produced to encourage:

- Quality outcomes for children and young people in care;
- Satisfying partnerships between relative carers and workers; and
- Consistency across the nation.

Definition:

Many children and young people entering the care system often drift with decisions made only about their short-term care. Permanency or long-term stability for children and young people in care has an impact on the identity of the child or young person. It is one of the most significantly important variables in the success and ongoing stability of placement for a child entering the care system from a young age. Decisions about stability are made in a variety of ways across the country.

Acknowledgements:

1. The decision for a child or young person to remain in care in the long-term is a serious one, but nonetheless one that needs to be made so that planning with direction can occur.
2. The focus of the decision to place a child or young person in long-term care must be focussed on the child, not the biological parents. Wherever possible and developmentally appropriate, the children or young people should be involved in decision making about their care.
3. Decisions such as that for a child or young person to remain in care long-term should not be made by front line workers but by senior staff. Following such a decision, the role of front line staff would be to consistently implement the plan of stability.
4. Governments should have the right to step in and remove the decision making power from parents where this is necessary to ensure the long-term stability of a child or young person.
5. The needs of foster carers and children or young people in care are best met in a system that clearly differentiates the provision of short-term care and long-term care.

Issues:

Efforts for the reconnection of children or young people with their families should occur at an intensive level from when the child or young person is taken into care. If progress is occurring, then efforts for reunification should continue. When progress is not acceptable and reunification cannot occur, a decision must be made on a stable, long-term placement. If a second or subsequent child is taken into care from the same family, decisions on reunification or long-term care should be fast tracked.

1. Once a decision for long-term care has been made, careful selection of the foster carers must be undertaken to ensure the needs of the child or young person are matched to the strengths of the carer. (Carers include foster carers, relative carers, guardians and adoptive parents.)
2. Where foster carers are designated short-term or long-term care providers, consideration should be given to continuing the current placement and altering the status of the foster carer should this be an option supported by all parties.
3. Contact between the child or young person in long-term care and their family should be encouraged and arranged between the carer and the parent wherever possible but needs to be in the best interests of the child. Consideration needs to be given to the frequency and type of contact given the long-term nature of the placement and the goal of stability for the child or young person.
4. Long-term care should be supported financially in the same way as other care placements.
5. Worker support should be available to the carer and child or young person when needed.
6. At all times, young people in care, and where appropriate, children, should be consulted about their placement including any discussion of reunification.

Relative and Kinship Care

Position:

Relative care, sometimes also known as kinship care, of children requiring alternative care should be encouraged and fully supported. Where relative care is considered to be the best option for the child, the relative carers and the child should have full access to support and services as if they were in mainstream foster care. This should include financial and personal support for both the relative carer and the child or young person. Relative carers should be trained, accredited and accountable for the provision of a quality service, similar to accredited or approved foster carers.

Commentary:

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004. This is not meant to be an exhaustive statement but rather covers the major issues raised by foster carers in relation to relative care. The statement has been produced to encourage:

- Quality outcomes for children and young people in care;
- Satisfying partnerships between foster carers, relative carers and workers; and
- Consistency across the nation.

Definition:

Relative care occurs when a child or young person is taken into care and placed with a person approved or nominated under state legislation as a relative carer (sometimes also referred to as kin or kinship carer). A relative carer may be a person:

- To whom the child is related by blood or marriage; or
- Who is a member of the child's community; or
- Who is considered as family or a close friend; or
- Someone with whom the child has a previous significant connection.

Acknowledgements:

1. Relative care is the preferred option for placing a child or young person taken into care if a safe and appropriate placement is available and sufficient support is provided.
2. Placements with relative carers can occur prior to any approved training occurring and if the relative carers have no previous experience of fostering, they should be trained, assessed and accredited to ensure that the placement is appropriate for the child or young person and also for the relative carers as soon after the placement as possible.

Issues:

1. Formal initial and on-going training and approval/accreditation should be available for relative carers with the same support and conditions as for accredited or approved foster carers. This includes renewal of accreditation or approval.
2. A suitable process for providing initial information (including written, video, or computer based materials) needs to be available and used at the time of placement (or beforehand if possible).
3. Relative carers should have an assigned worker to maintain contact with both relative carers and the child or young person in care in order to provide support and to help in meeting standards of care which will be monitored as for other foster carers.
4. Support should be provided to assist with sensitive intra-family issues as well as to facilitate any child-specific and on-going training required.
5. Financial support should include all relevant State subsidies/allowances and respite as well as all Commonwealth Benefits available to accredited or approved foster carers.
6. Relative carers should be aware of the standards of care and accountability required of them and these should be no less than for approved or accredited foster carers.
7. Relative carers provide care for a child requiring protection and should have access to the same support, training, processes and rights as approved or accredited foster carers as well as meeting the same responsibilities.
8. If relative carers are subject to an allegation, it should be treated in the same respectful and open process as for accredited or approved foster carers.
9. Relative carers should be encouraged to join a local support group of foster carers and to become a member of their State Foster Care Association.

Support for Foster Carers

Position:

Foster carers are volunteers who give of their time, skill, love, home, personal resources and family to care for children and young people unable to live at home with their own families. Foster carers commit to these children and young people 24 hours a day, seven days a week. In order to provide a high level of quality care, foster carers need the assistance and support of a network of people. This network needs to be readily accessible and immediately responsive to the foster carer.

Commentary:

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004. This is not meant to be an exhaustive statement but rather covers the major issues raised by foster carers in relation to support for foster carers. The statement has been produced to encourage:

- Quality outcomes for children and young people in care;
- Satisfying partnerships between foster carers, relative carers and workers; and
- Consistency across the nation.

Definition:

Support for foster carers encompasses a wide range of areas. It can include everything from a listening ear when needed, to the commitment of funds to undertake major extensions to a home to facilitate placement of a sibling group.

Acknowledgements:

1. Foster carers are volunteers.
2. Foster carers are not paid for what they do.
3. Foster carers are multi-skilled people and whilst many do not have a formal qualification, their life experience is invaluable.
4. When a foster carer contacts a departmental worker, agency worker, or foster care association, they are looking for genuine understanding and consideration for the difficult tasks they face.
5. Current levels of support to foster carers are inadequate and the continuation of the fostering system is at risk if this is not addressed as a matter of urgency.

Issues:

1. Foster carers are significantly under resourced in the area of support.
2. Foster carers need support in the form of:
 - prompt and comprehensive responses when a foster carer contacts a worker for a decision/solution/advice/answer
 - full re-imbursment of foster child related costs;
 - access to appropriate support on a 24 hour basis;
 - regular respite and leave entitlements;
 - dedicated telephone lines to officers/workers for requests;
 - computers for email communication with workers;
 - regular follow-up visits and planning meetings with workers;
 - trauma and grief counselling by independent counsellors;
 - full and accurate information about the child or young person prior to placement;
 - up front placement grants and allowances from State and Commonwealth departments;
 - placement grants for new children, sibling groups or children with special needs;
 - full reimbursement for additional out-of-pocket expenses and a fast and efficient system for claims;
 - full inclusion in information sharing and discussion of decisions that affect the child or young person;
 - full assistance with medical and educational needs of the child or young person;
 - additional support for the care of children and young people with disabilities;
 - regular training, and support to attend conferences and seminars;
 - funded advocacy and legal services, lobby groups and peer support groups;
 - insurance cover; and
 - regular updates of policy changes, newsletters and foster carer manuals.

Training and Accreditation of Foster Carers

Position:

All foster carers, including relative carers, must receive initial pre-service training that is designed to equip them with the basic knowledge needed to provide effective foster care. Ongoing training and specialist training must be made available to all foster carers throughout the year. Costs associated with foster carers attendance at training should be fully met by the foster care agency or the Department. Foster carers should be encouraged and assisted to attend further and additional training, seminars, workshops and state and national conferences. Initial accreditation and renewal of accreditation/approval of foster carers is necessary to ensure children are being cared for appropriately.

Commentary

The Australian Foster Care Association (AFCA) membership consists of representatives of the recognised Foster Care Associations of each State and Territory. The above statement represents the position of AFCA as at 30 April 2004. This is not meant to be an exhaustive statement but rather covers the major issues raised by foster carers in relation to training and accreditation. The statement has been produced to encourage:

- Quality outcomes for children and young people in care;
- Satisfying partnerships between foster carers, relative carers and workers; and
- Consistency across the nation.

Definition:

The full and ongoing training and accreditation of foster carers is critical to the standard of care provided to the children and young people in placement. Acquisition of knowledge and the development of a strength based model of partnership can only occur through groups of foster carers and workers coming together and sharing their experiences. The opportunity for learning must be afforded to every foster carer in every State.

Acknowledgements:

1. More and up-to-date knowledge means better working relationships and better outcomes for children and young people in care.
2. Without initial and ongoing training, foster carers are putting themselves and the children and young people for whom they care at risk.
3. Much can be achieved from the opportunity of workers and foster carers learning and teaching together.

Issues:

1. Prior to accreditation/assessment, foster carers should undergo a minimum number of hours of training, covering the same basic content, providing an accurate and honest picture of fostering. This could possibly be linked to a nationally accredited course. Relative carers should also have access to this training.
2. Training of foster carers must involve the State or Territory Foster Care Association and/or foster carers for the duration of the training.
3. Foster carers interested in becoming trainers should undergo training for this task.
4. Foster carers participating in training as part of the training team should be paid or recompensed (eg: equal number of hours of housekeeping paid for).
5. All costs associated with foster carers attending training should be met by the foster care agency or department to ensure that foster carers are not out of pocket (travel, parking, babysitting etc).
6. Assessment and approval/accreditation of foster carers should be conducted in partnership by a worker and a trained foster carer.
7. Newly approved/accredited foster carers should be mentored by a more experienced foster carer in a buddy system.
8. A series of follow-up training sessions should be available to new foster carers during their first year.
9. A range of ongoing and specialist training packages should be available to all foster carers throughout the year. Specifically these should include First Aid and infectious diseases training, and wherever possible, also include courses in general parenting skills to cope with a range of behaviours in children.
10. A variety of media should be used to assist in learning (videos, audio tapes, work books, home study, online).
11. Foster carers should be approved/accredited for an initial period and have regular ongoing renewals of approval/accreditation.

SUPPORTING STRONG PARENTING IN THE AUSTRALIAN FOSTER CARE SECTOR

A study conducted by the Australian Foster Care Association and funded by the Commonwealth Department of Family and Community Services

The purpose of the study was to assess the support needs and provisions for foster carers and to address issues related the prevention of abuse within the foster care sector.

The recommendations listed in this report require a cooperative approach of the Commonwealth, State and Territory Governments and community organisations working together for significant improvements to occur in the foster care sector.

The Commonwealth and State Ministers Advisory Council is the important body to ensure that national action is agreed to and implemented. The Council responded to the recommendations of the Report and worked throughout 2003 to produce a National Foster Care Plan to which all governments would commit to implement.

This National Plan should be considered for approval in early 2004 and if approved will be released and see action commence on implementation. While many of the Report recommendations (see summary below) have been considered in the preparation of the Plan, those that have not been included will still need to be pursued at the appropriate times.

SUMMARY OF RECOMMENDATIONS

RECOMMENDATION 1

A National approach on foster care including Indigenous and kinship care be developed as a cooperative venture by the Commonwealth and State/Territory Governments and peak community organisations directly involved in foster care.

RECOMMENDATION 2

Commonwealth and State/Territory Governments work with and involve the State and National Associations of foster carers, and help fund their support at a sufficient level to enable them to support carers and provide consultative forum for ongoing policy consultation.

RECOMMENDATION 3

All governments and non-government organisations commit to working together to present the community with a contemporary view of foster care to increase community recognition and support.

RECOMMENDATION 4

The Commonwealth and State/Territories establish a policy on statistical recording of information pertinent to foster care, including the national collection of statistics related to allegations of abuse, and initiate a national collection process.

RECOMMENDATION 5

The Commonwealth and States/Territory Governments initiate a national approach for the recruitment, training and accreditation of foster carers including those providing kinship care.

RECOMMENDATION 6

The Commonwealth and State/Territory Governments address the issues of providing full costs of foster care so that the combination of State and Commonwealth support is sufficient to fully recompense foster carers experience in providing appropriate care for children and young people.

RECOMMENDATION 7

Along with standards advocating respite care for foster carers, conditions be altered so that provision for fully supported respite care is available to carers and is included in all case planning.

RECOMMENDATION 8

The State/Territory governments develop ways of supporting foster carers to reduce instances of allegations of abuse in care and develop processes for handling allegations against foster carers. This

should be encouraged and facilitated by the Commonwealth government because of its interest in the longer term outcomes of children, and in a manner similar to the leadership role adopted by the Commonwealth when addressing long-term homeless, juvenile justice, and carer issues.

RECOMMENDATION 9

A national approach to the handling of allegations of abuse be developed so that the inequities of the current systems can be removed and notified foster carers receive recognition and support until such time as the allegations are substantiated.

RECOMMENDATION 10

A program evaluation of foster care provision be undertaken at both Commonwealth and State/Territory levels to provide accountability to the Australian community of the resources committed to foster care.

RECOMMENDATION 11

A joint government representative body, such as the Commonwealth and State Ministers Advisory Council (CSMAC), be given responsibility for preparing and implementing a set of standards to apply specifically to foster care in place of the current national baseline out-of-home care standards.

RECOMMENDATION 12

As part of any overall review of foster carer in Australia, the possible benefits of the Alberta classification system be examined for potential application in Australia.

RECOMMENDATION 13

Revision of the structures, processes and practices concerning allegations of abuse in care in Australia, be revised so that they reflect standards and practice that are nearer to the good practice standards pertaining in Alberta, Canada.

RECOMMENDATION 14

Governments commission and/or fund appropriate research into foster care as a means of further development of foster care in Australia.

RECOMMENDATION 15

The Commonwealth and State Ministers Advisory Council (CSMAC) host a round table for representatives of peak national bodies predominantly involved in foster care, along with senior Commonwealth and State/Territory representatives, to discuss the recommendations of this report and to plan for action to occur.

THE COSTS OF CARING: A STUDY OF APPROPRIATE FOSTER CARE PAYMENTS FOR STABLE AND ADEQUATE OUT OF HOME CARE IN AUSTRALIA

A study conducted by Marilyn McHugh of the Social Policy Research Centre, University of New South Wales for the Child and Family Welfare Association of Australia, the Australian Foster Care Association and the Association of Children's Welfare Agencies

Introduction

Since the mid-eighties there has been growing disquiet among a number of major foster care organisations in relation to certain aspects of fostering. One aspect of concern is the low level of standard subsidy paid by States to foster carers to meet the costs of children in care. In addition there is concern that unless payments to carers are increased there will be great difficulty not only in recruiting and maintaining carers in fostering but in expanding the available number of carers.

The Child and Family Welfare Association of Australia (CAFWAA), the Australian Foster Care Association (AFCA) and the Association of Children's Welfare Agencies (ACWA) commissioned the Social Policy Research Centre (SPRC) at the University of New South Wales (UNSW) to examine the adequacy and effectiveness of foster care payments in Australia. Funding for the project was received from the Ian Potter Foundation; a number of non-government agencies; the SPRC; and the Department of Families, Queensland. Foster carers and foster care associations provided in-kind support.

Findings

The findings from the survey confirmed that the low levels of standard subsidy, paid by States to foster carers, were not meeting the costs of children in care. The main issues included:

- inadequacy of the standard subsidy to meet basic costs of care;
- difficulties for carers in accessing, arranging and obtaining reimbursement for additional services;
- common occurrence of 'top-ups' to the standard subsidy by agencies to assist carers with meeting costs meant to be covered by the standard subsidy. Lengthy delays and debates with departmental workers in relation to obtaining reimbursement for these and other costs;
- high levels of stress experienced by both carers and agencies in attempting to meet the needs of children, exacerbated by inconsistent departmental policy, in relation to the reimbursement of costs to carers;
- carer reliance on public health services to meet the needs of children in care resulting in long delays (e.g. 6-12 months) in obtaining specialist services with some services being unavailable;
- no regular annual adjustment to the standard subsidy to reflect rises in the costs of living;
- high turnover of people caring for children with substantial numbers of carers coming in and also leaving fostering over a 12 month period;
- lack of acknowledgement, respect and support for carers from many workers;
- the nature of foster care being not only arduous but also at times hazardous for both carers and their families;
- the importance of allowances and reimbursement of expenses for the maintenance of foster care placements;
- for carers in rural and regional areas, there was an intensification of issues and concerns relating to accessing and arranging additional services; and in meeting costs associated with transporting children either on a day to day basis, or in relation to access/contact visits with children's birth families; and
- inequities in the subsidies and reimbursement for kinship carers.

Carers highlighted areas in current budgets where costs specific to fostering are not reflected. These included:

- housing – significant costs for general wear and tear and damage to household goods;
- energy – more frequent use of water for laundry, heated water, pool pumps, tank water, electrical appliances, lighting, air-conditioning, heating, televisions, stereos etc;
- food – over-eating, excessive consumption of food or drinks, higher wastage of foods, provision of additional food during visits with parents;
- clothing and footwear – one of the most problematic areas: children coming with nothing or poor quality, ill fitting, loss and replacement of items is constant;
- household goods and services – wear and tear on appliances, furniture, fittings, linen, bedding;
- health – need for assessment and access to specialists, costs of over the counter medicines;
- transport – often specific to geographical locations, need for a car every day, need for large cars;

- leisure – pocket money, purchase of gifts; and
- personal care – use of disposables and pull-ups in young children who wet and soil frequently, overuse of toiletries such as medical shampoo etc.

The research finds that the estimates of the costs of children in foster care are on average 52% higher than the costs of children not in care.

The study shows that **NO State or Territory** is, overall, paying an adequate reimbursement to foster carers at the standard subsidy level, compared to the estimated costs of foster children.

The research also confirms that there is a **high level of discontent** amongst carers about reimbursement of costs in all states and territories.

Table 1 below presents an overview of the standard subsidy payments for all States and Territories compared to the estimated basic, everyday costs specific to fostering as determined by this study. In providing the standard subsidy, States and Territories generally expect this to cover basic living costs associated with housing, food, power and gas, transport to and from daily activities, basic recreation, standard ongoing school requirements and the bulk of ongoing clothing. Some States expect other items to be paid for out of the standard subsidy, for example the NSW standard subsidy is expected to cover health, education and also childcare.

Both current and recommended standard subsidy payments do not cover additional child related costs that are needed to fully provide for the child or young person. These include things such as medicines, disability aids, school functions and camps, tutoring, ongoing sporting and recreational activities, dental, medical and therapeutic work, etc. Currently, in some circumstances, States and Territories may make these additional payments when a cost is incurred. These are known as contingency/child related costs payments. However, it should be noted that most of these are discretionary payments, and the report found payment to be both arbitrary and slow.

COMPARISON OF WEEKLY STANDARD SUBSIDIES WITH RESEARCH RECOMMENDED SUBSIDY ADJUSTED FOR CPI

TABLE 1: The Foster Care Estimates (FCE) compared to the Standard Subsidy Levels for all States by age of the child (\$ per week) Notes: 1These figures are indicative only and must be read with regard to the impact of contingency payments 2 Rates for States/Territories as at 30 March 2004 with the recommended FCE rate from the Report in 2000 increased for CPI similar to Commonwealth indexation process.

TABLE FOR 30 March 2004

Age	TAS	WA	NT	SA	VIC	ACT	QLD	NSW	FCE
0-1	124	90	105	89	110	97	114	175	169
2	124	90	105	89	110	97	131	175	-
3	83	90	105	89	110	97	131	175	168
4	83	90	105	89	110	97	131	175	-
5	83	90	114	96	110	110	131	175	-
6	106	90	114	96	110	110	152	175	181
7	106	113	114	96	110	110	152	175	-
8	106	113	137	103	115	130	152	175	-
9	106	113	137	103	115	130	152	175	-
10	125	113	137	103	115	130	152	175	212
11	125	113	137	103	130	130	185	175	-
12	125	113	155	125	130	148	185	175	-
13	125	136	155	125	175	148	185	175	-
14	164	136	155	125	175	148	185	175	261/267 ¹
15	164	136	186	153	175	180	185	175	-
16	83	136	186	153	175	180	175	175	-
17	83	136	186	153	175	180	175	175	-

Notes: All dollar amounts rounded.

(1) Amount of \$261 applies to a boy aged 14. Amount of \$267 applies to a girl aged 14.

Recommendations

1. Consideration be given by the Commonwealth, States and Territories for a national framework for payments that would address issues of adequacy and equity for all foster carers across Australia and better reflect the real costs of caring for children and young people in care.
2. All States and Territories review their level of standard subsidy, including higher payments for specified categories of need, paid to carers and increase levels to reflect the direct costs of fostering. The review process should include consultation with non-government agencies and carer associations.
3. All States and Territories cover a similar set of budget items in the standard subsidy to meet the extra costs to a family of a child in care.
4. Regardless of the type of care order a child is under, all carers to be paid the same rate of weekly subsidy.
5. The issue of additional allowances, (sections 7.5 and 7.9 of main report) that is 'one-off' payments for initial clothing and footwear, and allowances for gifts (for children's birthdays/Christmas) be reviewed to ensure that costs are adequately met in a consistent and systematic way.
6. The additional allowances for initial clothing and footwear requirements and for gifts should be mandatory payments for all children in medium to long-term care.
7. States and Territories maintain age-related payment schedules for standard subsidy payments. That age-related payments more closely reflect the real costs of fostering for children in particular age groups, in particular, younger children.
8. All States and Territories systematically update the level of weekly subsidy paid to carers to correspond with regular changes in the CPI.
9. Unless a placement is of a temporary nature, that is, children are aware they will be returning to their birth family in a relatively short period of time, all children and young people in care should be offered specialist counselling to assist them to recover from the impact of any family violence, abuse or neglect they may have previously experienced, and to assist them to adjust to their changed circumstances. The offer of counselling should not be at the discretion of a worker but be viewed as the right of the child or young person in care. All costs for specialist counselling to be met by the Department.
10. In the case of carers of pre-school aged children, good quality child care should be made available on a regular basis, and paid for by the Department at no cost to the carer.
11. All carers be provided with policy documentation in relation to their entitlement to discretionary and mandatory payments, and amounts for the children in their care. That all States and Territories consider a review of their administrative procedures to ensure that carers, and/or services, are reimbursed within a reasonable period of time, such as within 14 days, after carers/services have lodged a claim. That administrative 'ceiling and threshold payment levels' be removed from reimbursement systems to ensure equity for all carers and adequacy to meet children's costs for specialist services.
12. All States place a high priority on funding access to suitable respite care on a regular basis for all carers. On the grounds of equity alone, no carers should be penalised by any reduction in their subsidy payments for either weekend respite or when the child is on short periodic visits to their birth family.
13. Agencies and departments who administer foster care systems find a prompt and appropriate policy response to the significant problem of insurance coverage for carers. That all States ensure that carers have full indemnity against all damage caused by foster children to either their property or the property of others.
14. On the grounds of equity, the costs for all over-the-counter medications purchased for children in care be reimbursed regardless of the amounts.
15. The appropriate Commonwealth, State and Territory Departments explore the feasibility of legislative changes to enable carers to include foster children in long term care in a carer's private health fund.
16. Where it is deemed appropriate and necessary to meet the pressing health needs of children, private health insurance in a child's name should be provided by the agency/department and the costs of premiums paid by the department.
17. A temporary Departmental (or Agency) Medicare card be issued by workers to all carers when a child is placed or until other arrangements for a card in the child's own name can be made.
18. As part of the assessment process, where medical details or the background of children coming into care are unknown, they are seen by a general practitioner and any relevant health or medical information relayed to the carer as soon as practical.
19. All costs of travel using a carer's personal car should be reimbursed by the department/agency at the rate used to reimburse workers in the public sector in the particular State or Territory where the travel takes place.

20. The cost incurred by carers for overnight stops, for example accommodation and food, on access visits be fully reimbursed. Carers should be able to choose to either have their costs reimbursed by tendering receipts or to take the per diem rate paid to public servants in the particular State or Territory where the travel takes place.
21. All carers should be entitled to receive financial assistance with the purchase of a larger vehicle, if due to their caring role, for example caring for sibling groups or with several children in care, they are required to purchase a larger vehicle.
22. All carers using larger vehicles should be able to apply for a loading on their subsidy payment to cover the increased costs of transport.
23. Carers in remote and regional areas receive a loading on the standard subsidy payment to assist with extra costs attributable to distance.
24. All (Indigenous and non-Indigenous) kinship carers receive the same level of standard subsidies paid to other carers.
25. All (Indigenous and non-Indigenous) kinship carers receive the same level of support and access to services for children in care as other carers.
26. Training and support groups be made available for all Indigenous and non-Indigenous kinship carers.

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