

# Family Contact



**Queensland**  
**Foster and**  
**Kinship Care**

# Acknowledgement of Country



# Content

- ▶ Contact requirements
- ▶ Benefits of Contact
- ▶ Carers responsibilities
- ▶ What makes a good contact experience
- ▶ Beliefs/Values and Attitudes
- ▶ What do children want
- ▶ Grief and Loss - carers and children
- ▶ Preparing for Contact
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# Contact Requirements

Child Safety are legally required to facilitate contact between children and their families as per Section 87 of the Child Protection Act (1999).

If Child Safety make a decision to restrict the level of contact between a child and their family, the family member whose contact has been restricted has a right to appeal this decision as does the child or young person.

# Delegated Authority

Aboriginal and Torres Strait Islander children may be referred to an Aboriginal and Torres Strait Islander Community Controlled organisation that is approved to undertake Delegated Authority.

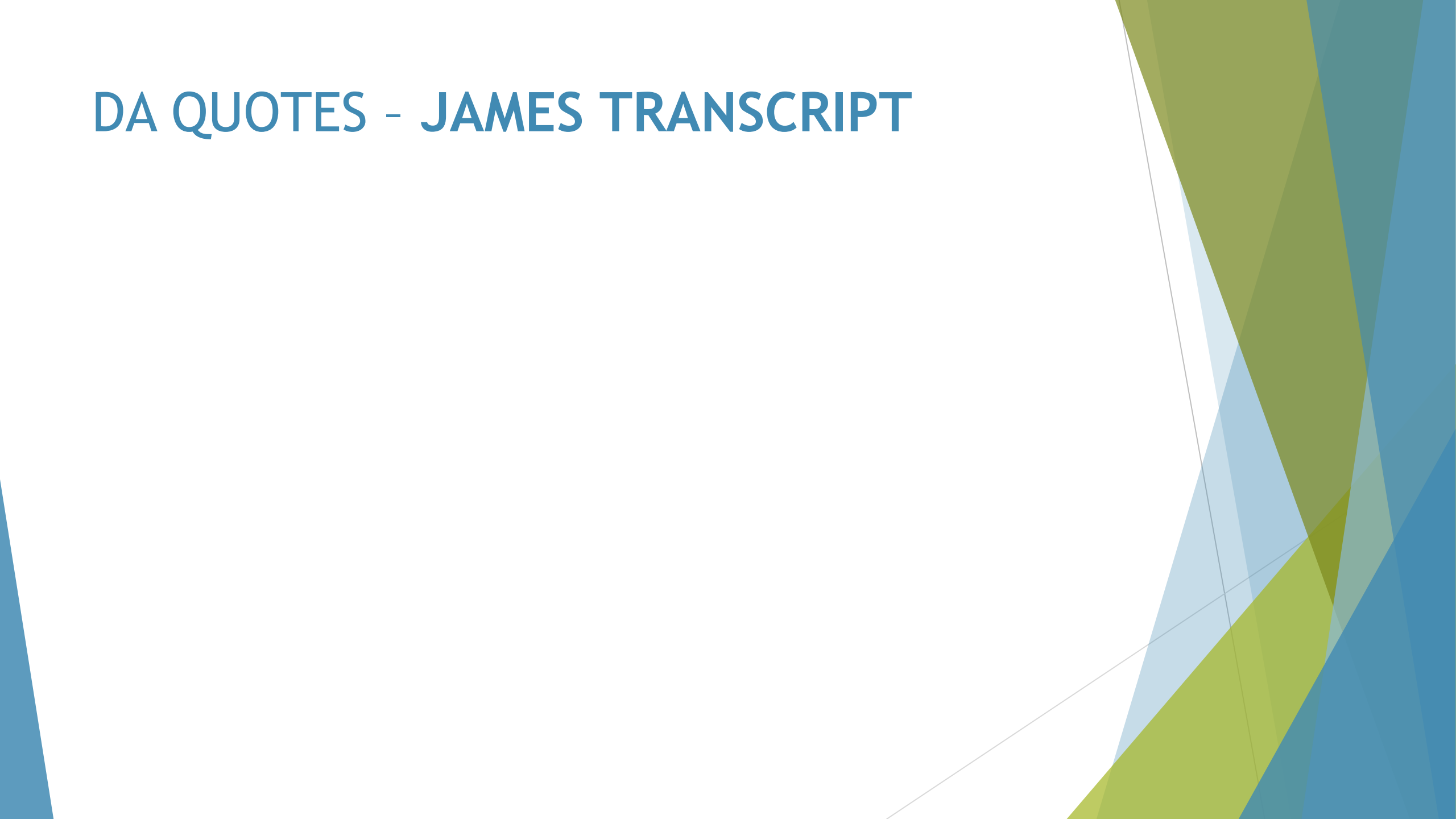
A CEO from a DA can be delegated to make decisions for a child or young person under **Section 87** of the Child Protection Act.

Important points

- ▶ Families must consent to the referral
- ▶ DA CEO is governed by Child Protection Act principles and applicable policies and procedures when making decisions
- ▶ Affected parties continue to have review rights through QCAT if restrictions are imposed on contact.



# DA QUOTES - JAMES TRANSCRIPT



# Activity



In groups of four, discuss why you believe Contact is legislated within the Act - What is the benefit of contact to the child/young person and the parent/family member.

# Benefits of Contact

## Child Safety Practice Manual reads

- ▶ Continuity of relationships, and connections to familiar environments and activities can help children in care to better cope with the difficulties of transition,
- ▶ Family contact promotes the child's sense of identity,
- ▶ Assists towards achieving reunification,
- ▶ Ensures ongoing relationships and support following the child's transition from care,
- ▶ Maintaining sibling relationships is positively associated with child well-being and adult functioning.

# Did you know...

- ▶ Family contact visits will only be held in a CSSC where there are legitimate reasons for doing so, such as threats of violence or risk of abduction.
- ▶ Senior Team Leader and CSSC Managers have delegation for making decisions around contact. CEO of DA has delegation for matters referred to an ACCO
- ▶ Any transport carers provide for contact can be claimed as mileage - you do not have to reach 250km threshold.

# Continued...

- ▶ A CSO must comply with contact arrangements directed by the Children's Court and the Family Court of Australia, however, orders made under the *Child Protection Act 1999* take precedence over Family Court of Australia directives (*Family Law Act 1975*, section 69ZK (2)).

# Cultural Considerations

- ▶ Child Safety have a responsibility to work alongside Aboriginal and Torres Strait Islander families in a way that promotes self determination and where families lead decision making.
- ▶ The proclamation of the amendments to the Child Protection Act that came into effect on 29<sup>th</sup> October 2018 saw the introduction of Family Participation Programmes across Qld, the role of these programs is assist in the implementation of the five principles of the Child Placement Principle and the main principle of self determination.

# Delegated Authority

- ▶ The first two DA pilot sites were introduced in 2019. CQID in Central Qld were approved for delegation under Section 87 and Refocus was approved for delegation both under Section 82 and 87
- ▶ Success stories of children who were disconnected from community and culture being connected to over 100 family members were shared by CQID, these children did not have a sense of identity and/or culture and now are surrounded by culture through their connections to kin
- ▶ DA is now operating in ??? sites

# Principles

- ▶ **Prevention** - a child has the right to be brought up within the child's own family and community.
- ▶ **Participation** - a child and the child's parents and family members have the right to participate in an administrative or judicial process for making a significant decision about a child.
- ▶ **Partnership** - Aboriginal or Torres Strait islander peoples have the right to participate in significant decisions under the *Child Protection Act 1999* about Aboriginal or Torres Strait Islander children, including the design and delivery of programs and services.
- ▶ **Placement** - if a child is to be placed in care, the child has a right to be placed with a member of the child's family group.
- ▶ **Connection** - a child has a right to be supported to develop and maintain a connection with the child's family, community, culture, traditions and language.

# FPP continued...

- ▶ A key function of the FPP is the facilitation of independent Aboriginal and Torres Strait Islander Family Led Decision Making (ATSIFLDM), a process whereby authority is given to parents, families and children to work together to solve problems and lead decision-making in a culturally safe space.
- ▶ This program operates to keep children safe in a way that optimises a families' participation and confidence in the process while meeting any statutory requirements.

Contact is a fundamental decision where the Family Participation Program supports families in participation in any decision making.

# Carers responsibilities

As carers you must be guided by the principles of the Child Protection Act - there are many that relate to supporting contact as follows:

## Section 5A -

*‘The main principle for administering this Act is that the safety, wellbeing and best interests of a child, both through childhood and for the rest of the child’s life are paramount’*

The amendments to the Child Protection Act that came into effect on 29<sup>th</sup> October 2018 saw a change to the paramount principle to include ‘and for the rest of the child’s life’.

***What implications do you feel this may have in respect to contact decisions?***

# Continued...

## General Principle

### Section 5B

*(k) A child should be able to maintain relationships with the child's parents and kin, if it is appropriate for the child;*

## Principle for achieving permanency for a child

**Section 5BA** the child experiences or has:

*(2) (a) ongoing, positive, trusting and nurturing relationships with persons of significance to the child, including the child's parents, siblings, extended family members and carers.*

# Continued...

Responsibilities of carers to support contact extends beyond the principles of the Child Protection Act. The right for children to be connected to family is embedded in the [Statement of Standards, the Charter of Rights and the Human Rights Act](#)

A carer has legislated responsibilities to meet these needs under the Child Protection Act and Statement of Commitment

# Activity



Groups will be given a copy of the Statement of Commitment, Standards of Care and Charter of rights and Human Rights to explore

- ▶ What are the relevant sections that speak to family contact in the Statement of Standards, Charter of Rights and Human Rights
- ▶ What are the responsibilities of Child Safety and then the carers when referencing the Statement of Commitment in relation to family contact.

# What this means

- ▶ In essence what the legislation is telling us is that carers need to be supportive of family contact, whilst also being considerate of other principles of the act, including safety, wellbeing of the child being paramount.
- ▶ Conflict can occur when the care team members don't agree with what is in the best interests of the children and what deems a child unsafe.

# What makes contact a good experience

- ▶ In groups of four write down from a **child's** perspective, **carers** perspective, **Child Safety's** perspective and **parent's** perspective what makes contact a positive experience
- ▶ Then reflect on what makes contact a good experience from a **Cultural** Perspective.



# Child's Perspective

- ▶ Child does not feel divided loyalties;
- ▶ Child is prepared in a positive way for contact;
- ▶ Contact is consistent and predictable;
- ▶ Contact occurs at the child's pace;
- ▶ Child enjoys safe and appropriate contact with parents/family and siblings;
- ▶ Child is able to reflect on contact without fear when returning to carer;
- ▶ Child's concerns and worries are listened to and responded to appropriately.



# Carer's Perspective

- ▶ Carer is part of the discussion process when contact decisions are being made;
- ▶ Carer is not directed to facilitate contact;
- ▶ Carer is updated on progress;
- ▶ Carer is able to provide feedback to Care Team and have concerns and worries acknowledged;
- ▶ Carer is genuinely treated as part of the Care Team regarding contact.

# Parent's Perspective

- ▶ Child is consistently there during scheduled contact;
- ▶ Parents are provided with opportunities to demonstrate parenting capacity in a safe environment;
- ▶ Parents concerns and worries are listened to and responded to appropriately.

# Child Safety's Perspective

- ▶ Contact progresses in a safe and appropriate way for the child;
- ▶ Child Safety has assistance when negotiated from the carer with transport;
- ▶ Child Safety is provided with relevant feedback from carer regarding contact;
- ▶ Child Safety can use contact as a means of continued assessment relating to potential reunification and case plan goals being met.

# Cultural Perspective

For Aboriginal and Torres Strait Islander children - Family Contact should be considered in the context of their wider family and community.

Connection to extended family and community are essential elements to ensuring that a child or young person remains connected to their identity and culture.

**WHEN YOU HONOR THE  
BIRTH FAMILY, YOU  
HONOR THE CHILD. WHEN  
YOU DON'T HONOR THE  
BIRTH FAMILY, THE CHILD  
WILL BELIEVE THAT  
SOMETHING IS  
INHERENTLY WRONG WITH  
HIM/HER.**



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# A Case of Labelling

- ▶ A father and son decided to go for a drive one Sunday morning. Unfortunately, both were involved in a very serious car accident.
- ▶ Two ambulances arrived. The father, on being placed in the ambulance, died. The son was critically injured and rushed to emergency for an immediate operation.
- ▶ The surgeon, on entering the theatre, saw the boy and said, '*I can't operate on that boy, he's my son.*'

What relationship was the surgeon to the boy?

# Our beliefs/values and attitudes

We are shaped by our experiences in life...

- ▶ Family & childhood messages
- ▶ Folklore of the culture
- ▶ Social pressures: rewards and punishment
- ▶ Religious education
- ▶ Formal schooling
- ▶ Peer groups

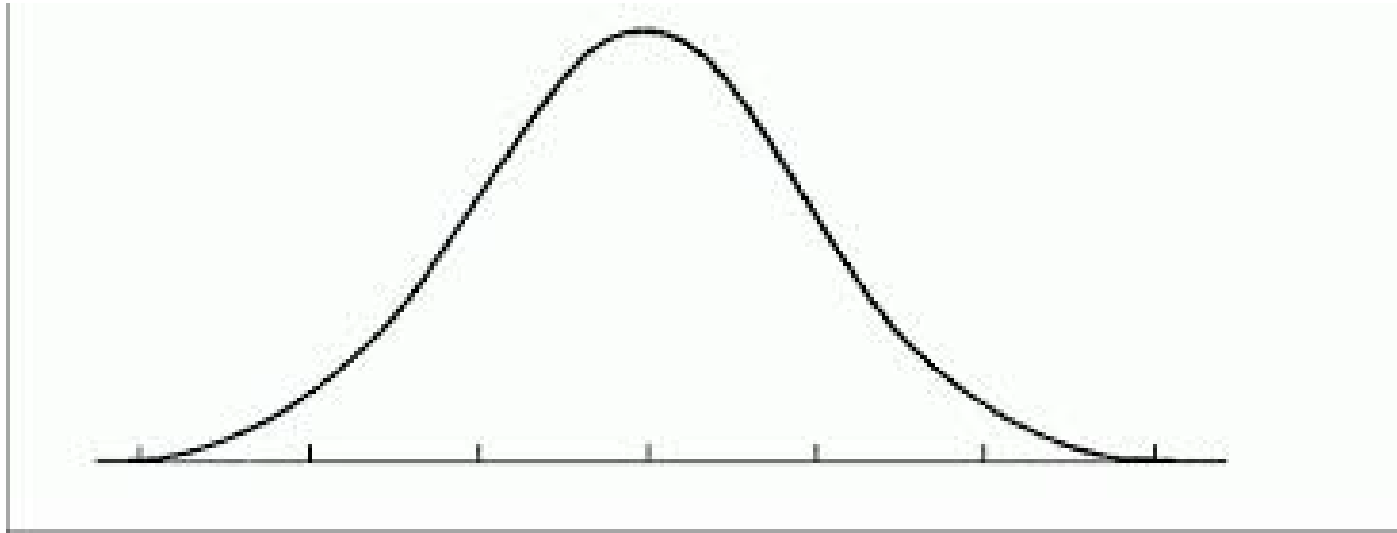
# Activity



In pairs make three columns and provide examples in each column of the following:

1. Harmful parenting
2. Poor parenting
3. Good parenting

# The Spectrum of Care



Most parents parent in the middle - carers are expected to parent at a higher standard in line with the Statement of Standards and to accept when children are placed back to not even average parenting but in a lot of cases safe enough parenting.

# Definition of Harm

## What is harm (Child Protection Act 1999 **Section 9**)

- (1) Harm to a child, is any detrimental effect of a significant nature on the child's physical, psychological or emotional wellbeing
- (2) It is immaterial how the harm is caused
- (3) Harm can be caused by -
  - (a) physical, psychological or emotional abuse or neglect or
  - (b) Sexual abuse or exploitation
- (4) Harm can be caused by
  - (a) A single act, omission or circumstance; or
  - (b) A series or combination of acts, omissions or circumstances

# What does this mean

- ▶ If a child is experiencing physical, emotional, or psychological harm or is at significant risk of it, the law focuses on protecting the child, not on the technical details of how the harm happened
- ▶ The Act therefore defines harm and then under **Section 10**, defines 'who a child in need of protection' is -
  - (a) Has suffered significant harm, is suffering significant harm or is at unacceptable risk of suffering significant harm; and
  - (b) Does not have a parent able and willing to protect the child from the harm

# Continued...

- ▶ When considering what is in the best interests of children, we *must not allow our own value systems to interfere with contact and subsequent reunification.*
- ▶ You must instead have a clear understanding of harm as defined within the act and understand that whilst the parenting during contact may not be in line with your values, this does not mean the child is not being parented effectively.

**PARENTING IS...**  
**THE EASIEST THING**  
**IN THE WORLD**  
**TO HAVE AN OPINION ABOUT**  
**AND THE**  
**HARDEST THING**  
**TO DO.**



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# What do children want?

- ▶ CREATE explored Family Contact in their 2013 Report Card  
- 1069 children and young people were interviewed across Australia ranging in age from 8-17 years of age, this is what they had to say ...

## ▶ CARISSAS UPDATE

# Continued...

- ▶ Most children and young people reported most frequent contact with their siblings (37%), then grandparents (25%) and then mothers (20%) with 49% of respondents stating they don't see their father at all.
- ▶ Respondents in Qld reported the least amount of contact with all family members with significantly less contact with their mothers compared to siblings.

# Continued...

## Foster Placements

The hierarchy of contact for children and young people in foster placements overall was:

- Sibling contact
- Contact with mother
- Contact with others

# Continued...

## Kinship Placements

The hierarchy of contact with kin placements overall was:

- Sibling contact
- Grandparent contact
- Other Relatives contact
- Contact with mother
- Contact with father

# Continued...

Of the over 1000 children and young people over Australia who were interviewed, the results showed that the majority of children and young people stated that they **would like more contact**.

- ▶ Qld and NSW children and young people specifically requested more contact with their mother, father, siblings, grandparents and other relatives in that order.
- ▶ Those in permanent placements did request less contact.

# Continued...

Children and young people were asked how supportive their caseworkers and carers were when it came to promoting and supporting contact.

- ▶ 45.3% stated that their caseworker was either very or quite supportive
- ▶ 68.5% stated that their carers were either very or quite supportive
- ▶ carers in Qld particularly were seen as supportive.

# Grief and Loss

Grief and loss is a natural and healthy experience that assists us to work through the very strong feelings attached to losing something significant in our lives.

Grief is an important and necessary reaction that eventually leads to emotional healing. However, it can be a prolonged and intensely painful experience and can result in significant emotional stress.

# Types of Grief

- ▶ **Normal Grief** - also called uncomplicated grief. The normal, healthy response to a major issue.
- ▶ **Anticipatory Grief** - grief that begins before (in anticipation of) the loss, such as when a loved one is diagnosed with a terminal illness, or in a Carer's situation when they are advised of a reunification with birth parents or family.

# Continued...

- ▶ **Complicated Grief** - this is also known as traumatic grief and occurs when grief becomes chronic, disabling and more intense. This is often seen as a progression of grief into major depression and/or post traumatic stress disorder. Symptoms could include nightmares and flashbacks.
- ▶ **Disenfranchised Grief** - refers to grief that is not or cannot be openly acknowledged, publicly mourned, socially supported or that is misunderstood or trivialised. This type of grief can be a common form of grief experienced by carers where care team members and communities share a view that 'this is what a carer signed up for' meaning they knew they were only going to care for the child for a short time so should not be so upset.

" It deeply saddens  
me that we live in a  
world where grievors  
have to defend their  
right to grieve. The  
only thing it does is  
create more grief."

Angie Cartwright



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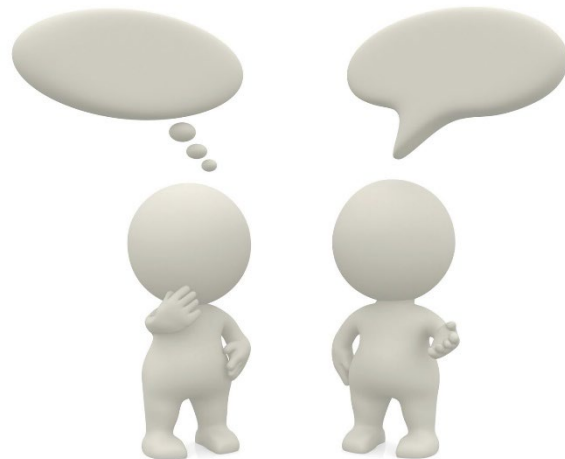
# Contact and Grief & Loss - A carer's experience

- ▶ In most situations carers will experience **Normal**, **Anticipatory** and **Disenfranchised Grief** as increased contact for children is scheduled.
- ▶ Whilst grief and loss is a normal and healthy experience, carers should be careful to ensure that their grief and loss does not become a negative experience for children and young people and result in issues such as divided loyalties.

# Activity



Speak with your neighbour about some of the ways you manage grief and loss within your own family context or if an agency worker how you support a carer family to manage their grief



# Grief and Loss for Children

Children can often live their whole time in care in the cycle of grief and loss due to the very nature of the child protection system - it can come to feel like a revolving door for both children and carers as children and young people navigate their relationships with family which can bring with it disappointment, joy, fear, anger and sadness.

# Activity



Break out into groups of five - each group is to consider one of the stages of grief and loss - shock, denial, anger, deep sadness and acceptance:

- Write down how children may behave in the stage you have.
- Write down why children may behave in that way.

# A Child's Experience

- ▶ The most important thing to be mindful of as a carer is that a negative behaviour displayed by a child is not necessarily linked to a negative contact experience. It could actually be linked to a very positive experience i.e. a child is angry because contact was really great and they didn't want to leave their mum and/or dad.

# Continued...

- ▶ Remember that grief and loss can be extremely complex for children in care - children and young people will continue to find themselves in different stages of the grief and loss, there is unlikely to be any sequence to the stages.
- ▶ Your role as a carer is to continue to provide support to the child and ensure they feel safe to express any feelings of joy, anger, sadness and frustration that a contact experience may bring.

# Let's get ready for contact...

The way in which carers prepare children for contact can be vital in ensuring a positive contact for children and young people.

*How do you prepare children for contact?*

# Continued...

- ▶ Speak positively about the child's family (this helps the child view themselves in a positive light also).
- ▶ Encourage child to prepare something for contact i.e. draw a picture, take an updated photo or an activity for child and parent to do together
- ▶ Encourage child to ask for updated photos from family that can be displayed at your home.

# Continued...

- ▶ Speak with the CSO about possibility of different activities that parent can engage with child in i.e. child may be able to take along some homework (readers, spelling etc).
- ▶ Consider the benefits for the child of transporting them to contact yourself if able, this allows for a better transition for the child to contact.

# Your role in the care team

- ▶ In order for your feedback around contact to be considered in any legal jurisdiction, it needs to be balanced and objective - you are not an attachment expert or a Paediatrician.
- ▶ Therefore, any statements made in written feedback to Child Safety that makes assessments around the child's reactions to contact can not and will not be used by Child Safety.

# Continued...

Feedback in the Template can only consist of...

- ▶ What you observed
- ▶ What you heard

You must not then try to make assessments from what you heard or saw.

# Activity - Rewrite



David came home from contact today and was very angry, he ran to his bedroom and slammed the door. Contact must not have been good today.

When David came out of his room, he would not speak to me and was withdrawn. I asked David how contact was and he told me it wasn't any of my business, his parents must be in his ear.

# Template

Using the template, think of the most recent contact you have supported a child through, fill in the template to reflect your feedback about this contact.

Hold onto your feedback and consider providing this to the CSO for the child, keep in your records or dispose

# What if you have concerns

- ▶ Firstly we need to bring our minds to Child Safety's framework for practice so that any worries that you have can be addressed in a way that considers what might be working well and what still needs to happen to address your worries.

# Signs of Safety – CARISSA TO CHECK

| What Are We Worried About?                                                                                                                                                                                                                                      | What's Going Well?                                 | What Needs to Happen?                              |                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|----------------------------------------------------|----------------------------------------------------|
| <p>Past harm:</p> <ul style="list-style-type: none"> <li></li> </ul> <p>Current worries:</p> <ul style="list-style-type: none"> <li></li> </ul> <p>Complicating factors:</p> <ul style="list-style-type: none"> <li></li> </ul>                                 | <ul style="list-style-type: none"> <li></li> </ul> | Carer Views                                        | Worker/Agency View                                 |
|                                                                                                                                                                                                                                                                 |                                                    | <ul style="list-style-type: none"> <li></li> </ul> | <ul style="list-style-type: none"> <li></li> </ul> |
|                                                                                                                                                                                                                                                                 |                                                    |                                                    |                                                    |
| <p>Safety Scale: Rate the situation on a scale of 0 - 10, where 0 means things are so bad the family can no longer have contact with the children and 10 means that everything that needs to happen for the children to be safe in the family is happening.</p> |                                                    |                                                    |                                                    |

As with every team you are a part of, when you have an issue - you firstly need to speak to your team members

- CSO
- Team Leader
- Manager

It is through discussions with your team members that you can use the Signs of Safety address your worries.

# Activity



Read the Scenario hand out and using the Signs of Safety handout fill in the columns.

# Continued...

If you don't feel that your worries are being heard, other internal avenues for addressing them include:

- Raising a First Attempt at resolution
  - Regional Complaints Officer
  - Central Complaints Unit

You should only ever write to Minister or DG or local MP when you have exhausted all internal avenues for a complaint.

# Office of the Public Guardian

- ▶ The 'OPG' replaced a number of functions that were held by the old Commission for Children and Young People and Guardian and was a recommendation of Carmody (2014);
- ▶ Although holding onto some similar functions as the Commission – the powers and capabilities of the OPG have been extended;
- ▶ The OPG provides an external avenue of complaint for carers, children and young people.

# Continued...

- ▶ CV program remains - however visitable sights have now changed to ensure only the most vulnerable children are being visited;
- ▶ Anyone can request a CV visit a child or young person that is not being visited, this can include a carer or the child/young person themselves;
- ▶ CV's continue to monitor the Standards of Care being provided to a child both from Child Safety and the carer.

# Continued...

- ▶ The Child Advocate role ensures that all children and young people have opportunity to be represented in Children's Court and QCAT matters;
- ▶ The OPG has ability to access all and any information Child Safety hold on file in respect to a child;
- ▶ The OPG has ability to take matters to QCAT on behalf of children when they feel that a child or young person's standards of care are not being met or where the OPG feel that contact decisions are not being made in the best interests of children.

# What this means for Carers

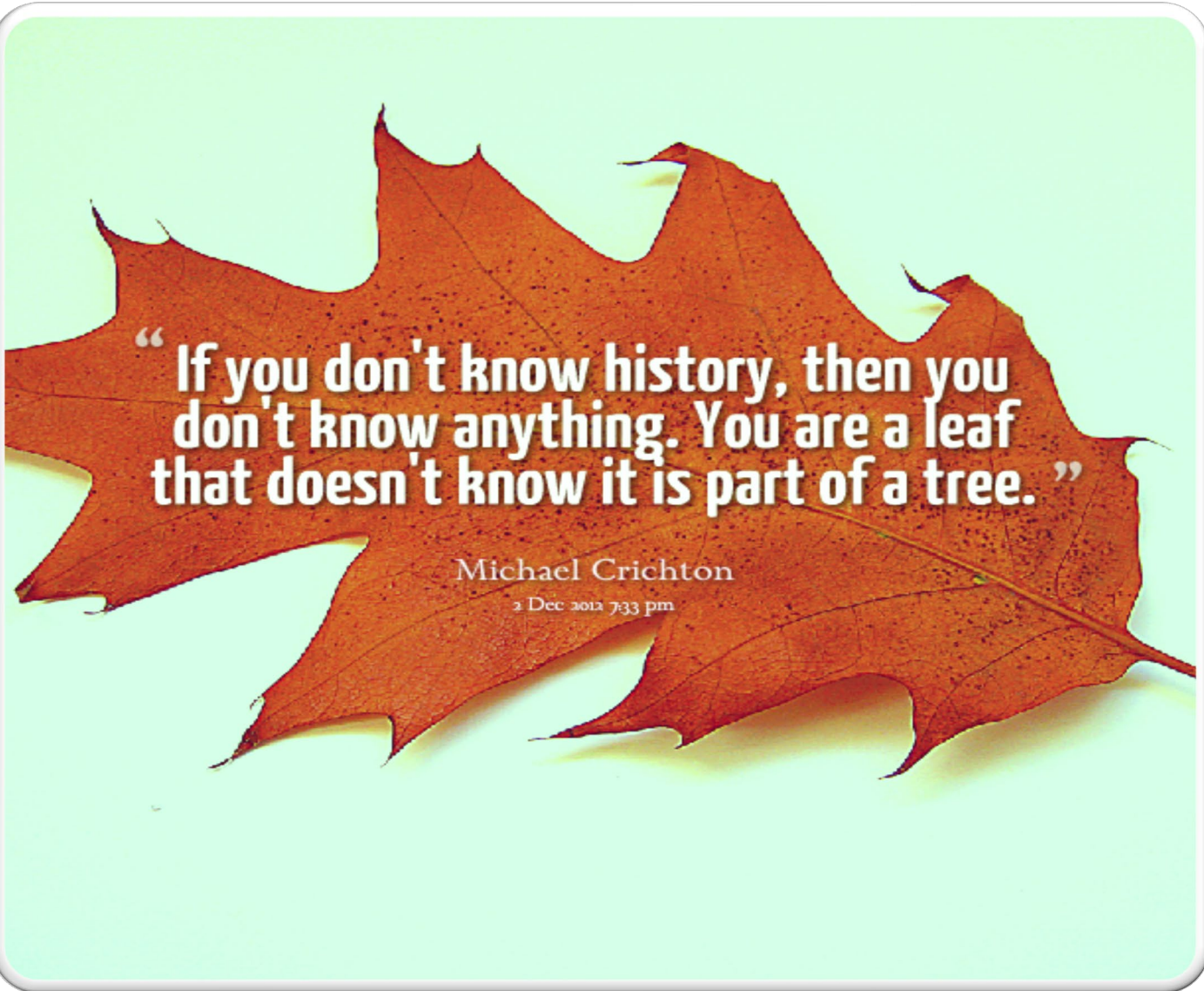
- ▶ The OPG is a great source of support, advocacy and advise for children and young people;
- ▶ The OPG is completely independent of Child Safety (sits administratively under Department of Justice) and can ensure that the decisions being made on behalf of children are safe and appropriate;
- ▶ The OPG is there to act on behalf of children, not carers.

# Process

- ▶ If you have exhausted all avenues of internal review/complaint regarding concerns you have around contact for children or young people in your care - contact the OPG on behalf of the child or young person in your care to raise the issues you have.
- ▶ They can access all the relevant information to guide their intervention if any - they will then deal directly with Child Safety on behalf of the child.

# Summary

- ▶ Family contact is an essential element to a child remaining connected with their identity.
- ▶ Family contact does not just mean contact with mum and dad, contact should be supported to take place with siblings, grandparents, aunts and other people of significance to the child.
- ▶ You play an essential role in the contact process and your feedback is valuable.



**“If you don't know history, then you  
don't know anything. You are a leaf  
that doesn't know it is part of a tree.”**

Michael Crichton

2 Dec 2012 7:33 pm

Thank You



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# QFKC Support Team

Would you like to support and advise other carers? Training and support will be provided by QFKC.

Would you like to be involved in community events to support other carers?

Would you like to build stronger networks in your community?

If you are interested in becoming a QFKC Support Team member please let the trainer know and they will provide your details to the coordinator, alternatively ring the QFKC office on 3256 6166

**Don't miss this great opportunity!**

Telephone (07) 3256 6166

Email [admin@qfk.com.au](mailto:admin@qfk.com.au)

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**NB: This training is a Queensland Foster and Kinship Care tool.**

*Policies and Procedures do change over time.*

*All efforts are made to provide accurate information at time of training.*