



Queensland
Foster and
Kinship Care

FOSTER & KINSHIP CARERS SURVEY 2020 REPORT

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Executive Summary

Region	Completed surveys*	Total carers in Region	% of carers who completed survey**
Central Queensland	240	880	27.3%
Moreton	297	1518	19.6%
Northern Qld	146	969	15.1%
South East	244	1213	20.1%
South West	212	1031	20.6%

**Source: Department of Children, Youth Justice and Multicultural Affairs

In total 1139 carers completed a carer survey, as of June 2020 there were a total of 5,611 registered carers according to the records of the Department of Children, Youth Justice and Multicultural Affairs (Child Safety).

Therefore, a total of 20.1% of carers in Queensland completed a carer survey which represents a significant sample size to gather and analyse information from and an increase in sample size from the 2018 Carer Survey by 5.6%.

Overall State Data

Demographics

- 96% of carers reported being attached to a Fostering and Kinship Care Service.
- 73% of carers identified as Foster Carers, 25% as Kinship and 2% as provisionally approved.
- 88% of carers identified as being over the age of 35 years with 59% being between the age of 35 - 54 years.
- 10.1% of carers (106) who completed the survey identified as Aboriginal and/or Torres Strait Islander.
- The majority of carers reported being married (56%) with 10% identifying as being in a defacto relationship, 31% single and 3% identified 'Other'.
- 71% of carers reported having been a carer for nine years or less, 15% identified they had been carers for 10-14 years and the remaining 14% identified having spent 15 years plus as a carer.
- 61% of carers reported providing long term care, 23% reported providing short term care, 16% reported providing emergency care and 25% providing respite and short break care (note carers were able to list more than one type of care). 29% identified that they provide all types of care including long term, short term, emergency and respite.

It is positive to note that the vast majority of carers who completed the survey are being supported by a Foster and Kinship Care Agency, only 45 carers out of the 1139 who completed the survey identified they were not with an agency. The carer surveys continue to evidence that the majority of carers experience positive support through being attached to a Foster and Kinship Care Agency.

The 2020 survey saw very similar demographics to that of the 2018 survey. Of note, there was an increase of 4% in the number of kinship carers who engaged in this survey and an increase of 1.6% in the number of Aboriginal and Torres Strait Islander carers who engaged.

Carer Connect

Since the 2018 Carer Survey, Carer Connect has been introduced to carers across Queensland. QFKC took the opportunity to explore with carers their knowledge and use of the app in the 2020 Carer Survey.

Carers were asked if they were aware of the Carer Connect app and 1050 answered the question with 836 (79.6%) stating they did and 214 (20.4%) stating they did not.

Those that were aware of the app were asked if they used it, 47.6% of those that were aware of the app stated they used it with 52.4% stating they do not.

Statement of Commitment

Given the work undertaken in 2020 by the sector regarding the Statement of Commitment, QFKC wanted to explore current knowledge of the Statement of Commitment. QFKC will revisit this again in the 2022 survey following the launch of the new Statement of Commitment in 2021 to gauge an idea as to whether there has been an increase in knowledge and understanding in this area.

1050 carers answered the question relating to knowledge of the Statement of Commitment and QFKC were very impressed to see that 763 (73%) of those carers who answered this question were aware of the Statement of Commitment. Of those that knew of the document, 64% stated they felt it was a useful document to have in their role as a carer.

Cultural Diversity

As with the 2018 survey, there is a vast gap between the amount of carers who have identified as Aboriginal and/or Torres Strait Islander and the number of carers who have identified looking after an Aboriginal and/or Torres Strait Islander child throughout their carer journey. This of course continues to evidence the over representation of Aboriginal and/or Torres Strait Islander children in care who are being cared for by non-indigenous carers. In this survey 106 carers identified as Aboriginal and/or Torres Strait Islander and 646 carers advised they had cared for an Aboriginal and/or Torres Strait Islander child.

If Aboriginal and/or Torres Strait Islander children cannot be placed within kin or community in line with the Aboriginal and Torres Strait Islander placement principle, the sector has a responsibility to ensure that their cultural needs are being appropriately met through their placement. The introduction of new legislation on 29th October 2018, compels the department to place Aboriginal and Torres Strait Islander children in a placement where there is 'demonstrated capacity' if having to place in a non-indigenous placement (Section 83 5 (d) (ii) states – '*if it is not practicable to place the child in the care of a person mentioned in paragraphs (a) to (c), a person who (11) has a demonstrated capacity for ensuring the child's continuity of connection to kin, country and culture*'. This is further highlighted in Principles 5C (e) which states

'The principle (the connection principle) that a child has a right to be supported to develop and maintain a connection with the child's family, community, culture, traditions and language, particularly when the child is in the care of a person who is not Aboriginal or Torres Strait Islander'

QFKC highlighted the above legislation and responsibilities of the sector in our last carer survey in 2018, it was recognised at the time that the legislation stated above was very new and it was our hope in the 2020 survey to have seen a vast improvement in the way the sector responds to and meets the cultural needs of Aboriginal and Torres Strait islander children. Unfortunately, when comparing data, this does not appear to be the case. In 2018, 59% of carers reported not having a cultural plan for

children they had cared for, in 2020 with a much higher representation of carers having completed the survey, 57% reported not having a cultural support plan. In 2018, 58% of carers reported not having access to or completed cultural awareness training, in 2020, 61% reported not being provided with cultural awareness training. In 2018, 24% reported not understanding the Aboriginal and Torres Strait Islander placement principle, in 2020, 32% reported not understanding it.

In the 2020 Carer Survey carers were also asked an additional question as to their knowledge of the Additional Principles for Aboriginal and Torres Strait Islander children that were introduced in 2018 contained in Section 5C of the Child Protection Act, 967 carers answered this question with 56% stating they did know of these additional principles and 44% stating they did not know of them.

Meeting the cultural needs of Aboriginal and Torres Strait Islander children is a legislated Statement of Standard under the Child Protection Act – it requires a commitment from the entire care team. Carers require a cultural plan they understand and are committed to meeting. They also require appropriate training to assist them to navigate the complexities of caring for a child from a different culture to their own. Carers require assistance to connect children and young people in their care to community in a meaningful way. It is disappointing that the introduction of legislation that is aimed at protecting the cultural rights of children and young people in care has not appeared to have made a lot of difference in practice.

Carers were asked where they accessed the majority of cultural information and the majority of carers reported from family and friends (40% - same as 2018). There was a decrease in those that have sought advice and support from elders in the community to that of 2018 with only 24% compared to 29% in 2018. Other sources of access to community information included Foster and Kinship Care Agency (37%), Cultural Practice Advisor Child Safety (17%), Independent Entity (18%) CSO and/or CSSO (32%), Cultural Centre (17%) and other carers (22%). Carers were able to choose more than one option in this section as demonstrated in percentages.

Carers provided over 535 comments relating to ways in which they meet the cultural needs of children placed in their care. All comments have been provided to Child Safety for their information; comments are not included in the public reports however overall these comments included:

- Ensuring connection to family
- Engagement in cultural groups at school
- Attending community events
- Storytelling, through music and books
- Taking children back to country and community
- Through expression in Aboriginal Art

As with the last 2018 survey, there were some comments from carers that raised concern for QFKC and demonstrated a lack of understanding of the importance of supporting culture from infancy. Some comments spoke to the children being of an age where their culture was not applicable. This demonstrates a real lack of understanding in the overall meaning of immersing a child in their culture.

In the previous survey results QFKC spoke of the importance of providing carers with an in-depth module of training that helps them to understand the Aboriginal and Torres Strait Islander Principles and what these mean in terms of providing day to day care. The Child Protection Act is very clear that carers who are non-aboriginal caring for children who identify as Aboriginal and Torres Strait Islander must have demonstrated capacity. Carers in Queensland do not currently acquire any skills through Quality Care Pre-Service training that would deem them to have demonstrated capacity to meet cultural needs. Whilst the majority of comments made by carers in this section were very positive and spoke to their best intent in ensuring children were connected, there were also comments that were

very concerning made by carers who have or still are caring for Aboriginal and Torres Strait Islander children and whom have no commitment to supporting these children to connect to their culture.

As stated in the previous report, the in-depth module should cover matters involving the role of an Independent Entity and a Community Controlled Organisation, what it means to be a carer with Demonstrated Capacity, what is meant by Self Determination and family led decision making, the additional principles covered in the Act relating to Aboriginal and Torres Strait Islander families and the cultural considerations when making decisions around permanency for Aboriginal and Torres Strait Islander children. This module of training should be made mandatory alongside the other three modules in the first year of caring for those non-indigenous carers who wish to provide care for Aboriginal and Torres Strait Islander children.

CALD (Culturally and Linguistically Diverse) Community

QFKC once again sought information regarding our CALD community, only 54 carers who completed the survey identified from the CALD community. 87 carers identified they had provided care to a child from the CALD community. When asked if they had been provided with cultural awareness training and information, 72% stated they had not.

These statistics are very similar to 2018 statistics with a slight increase in the amount of carers who had access to cultural awareness training from 22% in 2018 to 28% in 2020.

Child Safety Services

Carers were asked a range of questions relating to their experiences with Child Safety which are specifically outlined in the individual regional reports. Carers were provided options of answering 'always, mostly, sometimes, never or n/a'. QFKC kept the same options provided in the 2018 report following feedback from carers that in some instances they had good experiences with CSO's and CSSO's and others they did not. For this reason, it was felt that providing options that reflected a carers experience across their years would be a more reflective and accurate record of carers' views.

With this in mind the following responses were provided in respect to the following question.

Are your satisfied that staff at your local office are;

Respectful	59% reported feeling always or mostly respected (59% 2018)
Treated as part of a team	40% reported feeling always or mostly part of the Team (37% 2018)
Considering your views	40% reported feeling that their views are always or mostly considered (39% 2018)
Consider your family as a whole	38% reported feeling that their family as a whole is always or mostly considered (37% 2018)
Are responsive to your calls and emails	45% reported staff are responsive to calls and emails (43% 2018)
Provide a supportive environment	44% reported feeling mostly or always supported by their local CSSC (39% 2018)

As demonstrated in above data, there has been either no change or slight improvements across the board as compared to results in the 2018 Carer Survey.

43% of carers identified overall they feel mostly or always satisfied with Child Safety’s respect in advocating on behalf of children and young people in their care for resources, goods and services. Carers are assessed against their ability to undertake this very task in their initial approvals and subsequent renewal of approvals (up from 41% in 2018). It is absolutely vital that carers are encouraged to advocate on behalf of children in their care with an understanding that whilst all stakeholders may not always have the same view, all views can always be respected and responded to appropriately.

37% of carers identified that they were mostly or always satisfied in respect to their CSO letting them know when they are going to be away on leave or unavailable (up from 34% in 2018). QFKC has recently seen some significant positive practice out of the Southern Downs Child and Family Service who are providing monthly newsletters to carers and all planned leave is put into the newsletter. The Christmas 2020 edition included a separate page that provided all staff’s leave details. This is a great and simple example of a communication strategy that is not reliant on one person remembering during what is probably a very busy time to let everyone know of their leave. Rather it puts a process in place that ensures carers receive this information as a matter of course.

Child Safety Processes

Carers were asked a range of questions relating to Child Safety processes and their satisfaction. Once again carers were provided options of ‘always, mostly, sometimes and never’.

Approval and Renewal of Approval	55% always or mostly satisfied (57% 2018)
Placement Agreement completion	42% always or mostly (37% 2018)
Home visits being completed by CSO	48% always or mostly (44% 2018)
Ability to engage in Case Plan for children in care	44% always or mostly satisfied (40% 2018)

There have been some slight improvements in the reported number of completed Placement Agreements and carers reporting engagement in Case Planning for children, however the majority of carers have still reported only sometimes or never feeling satisfied with Placement Agreement completion and their engagement in Case Plan. Carer’s rights to be included in both these processes are reinforced through legislation i.e. Child Protection Act 1999, 51W (1) (d) – speaks to participation in Case Planning and specifically provides an example of an approved carer and Section (84) which speaks to Placement Agreements. Participation of carers in these crucial processes are also reinforced through Child Safety’s Policy and Procedure and the Statement of Commitment. All these platforms recognise the crucial role that carers play in children and young people’s lives, 24/7 care of them and therefore the criticality of consultation through these processes.

The completion of comprehensive Placement Agreements and Case Plans lead to placement stability and a decrease in the likelihood of Standard of Care matters. The current procedure when a Standard of Care has not been met for a child in family based care is to review the Placement Agreement, if there is not one in place or if the one in place has not been completed in a way that is collaborative with the whole care team at the table, there will no doubt be an increased chance of that placement not being able to meet the Statement of Standards for a child.

Standard of Care/Harm Report Process

Carers were asked a range of questions relating to their experiences of Standard of Care Reviews and Harm Reports. For the purposes of this section, those carers who felt the question was relevant to them have been analysed, 251 carers identified they had experienced either a Standard of Care Review or a Harm Report.

Carers were asked if they were satisfied or not satisfied – the following responses were provided;

	Satisfied	Not Satisfied	%
Standard of Care Review process	66	167	28 % Satisfied 72% Not Satisfied (19% more carers less satisfied than 2018)
Harm Report process	46	121	27% Satisfied 73% Not Satisfied (10% more carers less satisfied than 2018)
Communication during process	74	161	31% satisfied 69% Not Satisfied (2% more carers less satisfied than 2018)
Sensitivity during process	69	168	29% Satisfied 71% Not Satisfied (9% more carers less satisfied than 2018)
Information provision during process	56	182	23% Satisfied 77% Not Satisfied (6% more carers less satisfied than 2018)
Timeliness of process	59	174	25 % Satisfied 75 % Not Satisfied (2% more carers less satisfied than 2018)
Review of process if not satisfied with outcome	44	123	26% Satisfied 74% Not Satisfied (1% more carers less satisfied than 2018)

This survey represents the second time there has been a decline in satisfaction rates amongst carers as it relates to the Standard of Care process. During 2020 QFKC has been working very hard alongside Child Safety to identify significant changes to policy and procedure as it relates to the way in which Child Safety responds to Standard of Care matters. QFKC are feeling extremely positive with the direction the Standard of Care Review is going so whilst the above results are not positive, the fact that there is already significant work and progress underway to address these concerns is extremely promising and we look forward to revisiting this section in 2022 to observe how the proposed changes will impact on carer family's experience in this area if accepted by the department.

Confidentiality

It is important that carers have all the relevant information in order to provide safe and appropriate care to not only children and young people in care, but other children and household members too. It is also important that carers and the care team have a comprehensive understanding of the confidentiality provisions of the act (Child Protection Act 1999, Section 186, 187, 188) and what this means in terms of providing day to day care. It is just as important that all workers in the Child Protection sector also have a comprehensive understanding and these understandings are shared.

Carers were asked a range of questions relating to confidentiality and the sharing of information;

- 58% of carers felt that they were never or only sometimes provided with information relating to the child or young person at the time of placement – there was a slight improvement from the 2018 survey with a reduction of 3% in this area.
- 62% of carers felt that they were only sometimes or never provided with information about a child or young person as it became available to Child Safety. This figure represented a 1% decrease from the 2018 survey of carers feeling this way.
- 54% of carers reported only sometimes or never feeling satisfied in relation to safety checks being completed prior to their identifying information being given out. This figure represented a 3% decrease of carers feeling this way.
- 69% of carers felt that they did have a good understanding of the confidentiality provisions of the act and how this related to them as carers. This figure represented a 7% decrease in carers feeling this way.

Carers who are able to make informed decisions about placements they accept based on the information that is provided to them are more likely able to maintain a placement as they are aware of what will be required of them and their family. When information is not shared, this can place the child, the carers and their family at risk in many different ways and lead to another placement breakdown for a child. This of course then adds to that child's trauma history and it is often increasingly difficult to find family based placements for children when they have a history of placement breakdowns. It is therefore critical that the care team is open and transparent with the information they share and that CSO's are confident in the knowledge of what they can and cannot share. It is QFKC's experience that Child Protection staff can often be confused about the confidentiality provisions of the act and how this relates to what they can and cannot share with carers. This can lead to airing on the side of caution given the penalties that apply when confidentiality for a child or their family is not upheld as intended in the act and critical information that is relevant to the child not being shared with the carer.

Financial

Carers were asked a range of questions relating to their satisfaction around financial matters.

The dissatisfaction rate for the fostering allowance continues to decline.

- 2014 84% satisfaction
- 2016 65% satisfaction
- 2018 59% satisfaction
- 2020 53% satisfaction

Carers were also asked about their satisfaction in respect to CSNA and HSNA requests being met, of those who felt that the question was relevant to them (560 carers) 61% reported not feeling satisfied with this area (62% not satisfied in 2018 survey).

In respect to Child Related Costs (CRC's), carers were asked whether they were satisfied in relation to a range of CRC's, only those who felt the question was relevant to them have been included in the following and these results have then been compared with the 2018 Carer Survey to provide some additional context and meaning;

CRC	Percentage 2020	Percentage 2018
Medical/Health/Therapy	Not satisfied – 62%	Not satisfied – 63%
Kilometric Allowance (over 250km allowance)	Not satisfied – 56%	Not satisfied – 58%
Educational Costs	Not satisfied – 66%	Not satisfied – 71%
Client Support	Not satisfied – 66%	Not satisfied – 67%

There have been slight increases in satisfaction rates across the board as demonstrated above, however the majority of carers have still identified feeling dissatisfied in the areas relating to requests for CRC's.

Carers were asked in the 2018 survey about their provision of Dual Respite which has not been asked in previous years. 43% of carers identified not being satisfied in this area. In the 2020 survey 40% of carers identified not being satisfied in this area. QFKC continue to seek policy and procedural change that will support consistency in decision making in the area of approval for Dual Respite. This is not an area that has been resolved despite carers raising it through the Partners in Care and QFKC Carer Forums. At the present time a carer, with the exact same circumstances, could be provided with very different outcomes in relation to their ability to access Dual Respite dependant on the CSSC they are attached to as was reported in the last carer survey Executive Summary.

On 2nd July 2018, the Australian Federal Government through the Department of Education and Training extended the Australian Child Care Subsidy at risk category to include all children in care across Australia. During the past two and a half years, Child Safety alongside other stakeholders, have continued to face challenges in this area as systems continue to create confusion that can lead to carers having substantial debt against their names. In the 2018 Carer Survey QFKC put the question to carers about whether they were satisfied with the provision of required documentation from Child Safety in order for them to access the Australian Child Care Subsidy, 56% reported not feeling satisfied in this area. The same question was asked of carers two years later in this survey, 592 carers reported this question as relevant to them and 65% reported feeling satisfied in this area. It is positive to see an increasing trend in satisfaction in this area. QFKC continue to work closely with Child Safety to develop a simple fact sheet that clearly identifies each party's roles and responsibilities as it relates to the ACCS, this can be a document shared with the day care provider, Centrelink, the carer and Child Safety and provides clear messaging to all.

Carers were also asked if they were encouraged to apply for ex-gratia payments; 110 carers reported that they were satisfied in this area, 581 carers felt this question was relevant to them meaning that 81% of carers across the state reported not feeling satisfied in this area (87% not satisfied in 2018). QFKC reported back in our 2016 Carer Survey and then again in our 2018 Executive Summary that the policy and procedure relating to this was locked therefore carers were not able to access it. In both reports, QFKC recommended that the policy and procedure was unlocked and/or a fact sheet provided to carers that gave clear guidance on their rights to claim property and personal damage caused by children whom they are providing care to. This has not taken place to our knowledge and the vast majority of carers remain unsatisfied in this area.

Finally, carers were asked about their satisfaction in relation to information provision relating to Child Related Costs – of those carers who felt the question was relevant to them, 65% reported feeling dissatisfied in this area (67% 2018). It is hoped that the changes relating to the streamlining of

approval of CRC’s and the connection of this to Carer Connect, they will support positive change in this area and that in the next carer survey the results will evidence this.

The true cost of care was introduced in 2006, which was the last time the Queensland Government has reviewed the actual cost of caring for a child or young person in family based care. Since this time carers have received an increase in the carer allowance in line with the CPI index. In 2014 QFKC provided a report to Child Safety that highlighted concerns with this approach evidencing that CPI index increases did not accurately reflect the actual rise in the cost of living with the rise in essential household needs costs far outweighing the CPI index increases.

In an article written by Fidelity International on the very topic of CPI and increases in the cost of living they state ‘we can get an understanding of the price pressures that Australian households face by looking at the underlying sub-categories of the CPI. In this sense, it is possible to identify the price of household “needs” like food and housing, versus the price of household “wants” like a new computer or toys’.

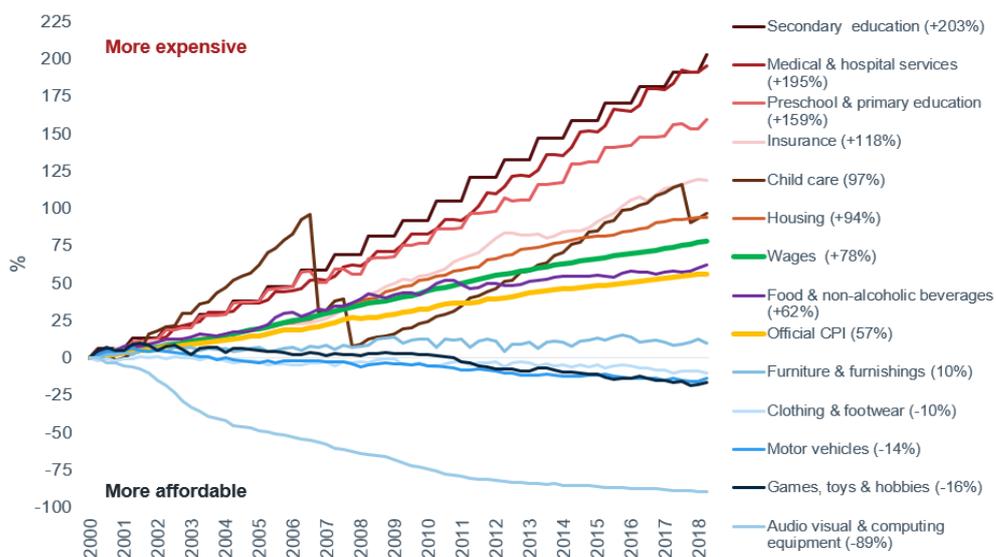
The article goes on to state:

Looking at the long-term (Q4 2000 to Q1 2019) price trends within the Australian economy, it can be observed that there has been significant inflation in household “needs” such as secondary education (+203%), medical and hospital services (+195%), and housing (+94%). The inflation in these categories is far greater than both the wage growth over the same period (78%) and the official CPI (+57%). On the other hand, the category of clothing and footwear (-10%) has experienced deflation. Turning to household “wants”, the prices of motor vehicles has fallen (-14%), as has the audio visual and computing equipment (-89%) category. These categories face structural deflationary pressures, as newer products are generally of a higher quality. As a result, statisticians quality adjust these categories to ensure continuity in the basket of goods and services over time.

Fidelity International presented a graph that captures the household needs, vs household wants very well and how this compares to the CPI index increase as follows:

The price of “needs” versus “wants”

Selected Australian goods and services, CPI, wages (Q4 2000 to Q1 2019)



Source: Fidelity, Australian Bureau of Statistics, July 2019. Rebased to 0 as at Dec-2000)

Chart of the Week



During the Partners in Care and again during the QFKC Carer Forums, carers raised concern that the allowance needed to be reviewed. We now have the fourth carer survey where there is a decline in satisfaction amongst carers relating to the rate at which the fostering allowance is provided. Carers are volunteers, families across Australia are struggling to keep up with the demand in the cost of living and they simply will not put their hand up to care or continue to provide care when it is not a financially viable option for them.

The evidence is very clear, the measure by which Child Safety have determined the rise in the allowance over the past 14 years is not equitable to the rise in the cost of household needs. There has not been any further reviews and carer satisfaction rates in this area continue to decline. It is vital that Child Safety commit to reviewing the true cost of care again.

(source: <https://www.fidelity.com.au/insights/investment-articles/chart-of-the-week-needs-versus-wants/>)

Local Practice in CSSC

Carers were asked a range of questions relating to their interactions with their CSO and CSSC. Communication continues to be a key factor to carers feeling like part of a care team, if communication is clear, open and transparent, carers are more able to cope with some of the other challenges faced with parenting in the context of a statutory system. In any team, all members need to share a common goal, they need to know what the goal is and they need to be abreast of any changes that may affect the likelihood of that goal being achieved.

In the 2018 survey, QFKC asked carers whether they were satisfied regarding communication when they had a changeover of CSO, only 27% of carers reported feeling always or mostly satisfied in this area. The same question was asked of carers in 2020 and 26% of carers reported feeling satisfied or mostly satisfied. Carers then report only a 29% satisfaction rate with CSO's knowledge of the history of the child in their care (28% 2018). There has been a real focus since the Partners in Care initiative and QFKC Carer Forums to promote the relationships between carers and CSO's as being just as critical as that of the relationship between a carer and their agency worker. It appears to be an accepted view across the sector that an unintended consequence of the transfer of carers to foster and kinship agencies and the removal of Alternative Care Officers from Service Centres from 2005 are significant contributing factors in the loss of relationships between carers and CSO's. There is increasing awareness however of the criticality of that relationship and the need for carers, Foster and Kinship Care Agency support workers and CSO's to work together to meet Case Plan goals for children and young people through the support of the placement.

Case Plans and Placement Agreements are both areas where carers should play a key role in the development and implementation. Carers were asked about their satisfaction with the timeliness and provision of approved Case Plans, only 30% of carers reported feeling always or mostly satisfied in this area (27% 2018). In order for carers to actively engage in Case Plans and assist the department and family to work towards reunification as per the Principles of the Child Protection Act (1999), a carer must have an understanding of the Case Plan goals. The Child Protection Act (1999) allows for the sharing of Case Plans with *'anyone else affected by the plan or who the Chief Executive considers should receive a copy'* Section 51 (Y). Although the entire Case Plan may not be relevant to the carer, the Case Plan activity relating to the child whom they are providing 24/7 care to is. Carers are assessed against many criteria when applying or reapplying to be a carer, one of these is their ability to be *'able to help in appropriate ways towards achieving plans for a child's protection'*. In order to help to achieve this for children, carers must have access to relevant information. QFKC are hopeful that continued messaging through new and improved documents such as the 2020 version of the Statement of Commitment will promote the importance of these conversations and sharing of information with carers. A recent update to the Statement of Commitment promotes discussion with carers around

concurrent planning, a critical and legislated element to case planning for children and young people that ensures all care team members, including birth family, are informed about what the Case Plan goals are if reunification cannot be achieved.

In the 2016 report carers overwhelming provided feedback that they were not satisfied with the level of information provided by either their local CSSC's or regional offices, with around 80% of carers expressing only feeling that information was forthcoming either sometimes or never. The Partners in Care initiative provided an opportunity for carers to come together and be heard on those matters that challenged them as carers and this area was highlighted as a concern for carers across all areas. Lack of communication links to a carers feeling of being devalued and unsupported in their role. In 2018, the figures continued to raise significant concern in this area with 77% reporting feeling only sometimes or never satisfied with CSSC updates and 86% feeling sometimes or never satisfied with regional updates.

In the 2020 Carer Survey there has been a slight improvement in this area which is positive to note with 74% of carers stating they are only sometimes or never satisfied regarding timeliness to help keep carers updated in respect to matters relating to CSSC and 76% reporting only feeling sometimes or never satisfied with updates relating to regional/department change. As mentioned earlier in this Executive Summary, QFKC has seen an exceptional example of how CSSC and regional updates can be communicated to carers through the monthly newsletters currently being undertaken by the Southern Downs Child and Family Service Centre. These newsletters provide updates about new staff and introduce existing staff with bios about them which are interesting and engaging. The newsletters also provide updates around department structure changes, new policies and procedures, CSSC initiatives and projects and much more. QFKC have loved receiving these newsletters and have even found out information we have not been aware of through reading them. We commend this CSSC for taking this initiative and would encourage all Child and Family Service Centres across the state to adopt this means of communication.

Carers were asked if they felt supported to access respite. Whilst 26% of carers felt this question was not relevant to them, there were 635 carers who felt that the question was relevant (i.e. have a desire to access respite) and 64% of those carers stated they only felt supported to access respite some of the time or never.

This dissatisfaction rate has increased by 13% since 2018. Unfortunately, it would appear through conversations with regions that the issue of carers accessing respite appears to be more related to a lack of respite options rather than carers not being supported to access it. This is a reflection of the critical shortage of family based placement options in every region.

Carers were asked about family contact and whether consultation takes place, 66 % of carers reported feeling only sometimes or never satisfied in this area (increased dissatisfaction of 3% from 2018 survey). This particular question aligns with questions regarding whether a carer's whole of family is considered when decisions are made, the matter of contact can be the very source of conflict in this area as carers continue to be told about when contact will occur, sometimes without any thought to the carer's own family commitments. There appears to be a widely held view within Child Safety that the responsibility of facilitating contact lies with carers. During the update of the practice manual, a section was included that stated this, QFKC raised it with Child Safety and highlighted that whilst carers certainly had a responsibility to support and promote contact, that the legal responsibility to facilitate family contact sits with Child Safety. QFKC will always encourage carers, where safe to do so, to assist with family contact through transport and facilitation, however this must always be undertaken through consultation and agreement.

The figures above once again do not represent a culture that is considerate of the Statement of Commitment which recognises a carers views as being important to seek in decision making given the

24/7 care provided by them and which also recognises the importance of a carer's family being recognised and respected when making decisions about children in care as follows:

6.1 Foster and kinship carers have the right to participate in the decision affecting the lives of the children or young people in their care and have their knowledge and opinions inform decision making processes to ensure the best interests of the child

6.3 Foster and kinship carers' right to feel supported; to have the needs and rights of their own family recognised and respected when considering decisions regarding the child or young person in their care

Education Support Plans

Please note 860 carers answered this question

Overall 59.6% (60.3% in 2018) of carers reported having an Education Support Plan (ESP) for children and young people in their care.

- 71 % felt always or mostly satisfied with their inclusion in the process (57% 2018)
- 65% felt always or mostly satisfied with the timeliness of the plan (54% - 2018)
- 66% felt always or mostly satisfied with the finalised plan (55% 2018)
- 64% felt always or mostly satisfied with the review of the plan (50% 2018)
- 60% felt always or mostly satisfied with the implementation of the plan (49% 2018)

It is pleasing to see an increase in satisfaction rates amongst carers in relation to their engagement with Education Support Plans. It is disappointing to see completion rates of ESP's still so low and QFKC would recommend that Child Safety share these statistics with the Department of Education given they are funded to have an ESP in place for all children and young people subject to a child protection order.

Please note comparisons from 2018 report are not entirely accurate as percentages have only been calculated according to those who did not tick "not relevant".

Child Health Passports

Please note 860 carers answered this question

Of those who answered only 43% identified they have a Child Health Passport for children in their care (49% reported in 2018 they had one)

- 52% felt always or mostly satisfied with their inclusion in the process (32% 2018)
- 44% felt always or mostly satisfied with the support provided (28% 2018)
- 42% felt always or mostly satisfied with the process itself (28% 2018)
- 39% felt always or mostly satisfied with information provided (26% 2018)

Please note comparisons from 2018 report are not entirely accurate as percentages have only been calculated according to those who did not tick "not relevant".

QFKC was a key member of the Executive Advisory Committee for the Strengthening Health Framework. In late 2017, the Brisbane South Primary Health Network was funded by Child Safety to deliver this state-wide PHN network project and it has subsequently been extended until March 2023. The most recent involvement in this space from QFKC has been an invitation from the Project Coordinator for a Working Group that has been tasked with achieving a key milestone in the initiative of

“A state-wide program and communication strategy for Child Safety staff, foster and kinship carers, residential care staff and non-government foster and kinship and residential care providers, ensuring the training program promotes the master health pathway and educates staff on the use of the pathway across all regions in Queensland”.

QFKC has a Case Officer and FAST Rep both sitting on this project who have received Terms of Reference and who look forward to working alongside key stakeholders in this space to achieve the overall goal of the framework – to improve health outcomes for children and young people in care.

The identification of health and wellbeing issues in those early weeks of a placement is essential to a carer understanding the needs of the child or young person they are caring for. It enables a carer to access appropriate medical and therapeutic support and assists the care team to identify potential learning and support needs for the carer family.

Placement Agreements

Please note 860 carers answered this question

Carers were asked whether they had a current Placement Agreement that had been generated from a placement meeting.

Overall 62% of carers stated that they did have a current Placement Agreement (61% 2018)

- 53% felt always or mostly satisfied with inclusion in process (53% 2018)
- 49% felt always or mostly satisfied with the process (50% 2018)
- 49% felt always or mostly satisfied with the outcomes (49% 2018)
- 40% felt always or mostly satisfied with follow up (38% 2018)
- 40% felt always or mostly satisfied with review process (38% 2018)

Please note that around 17% -20% of carers reported this question was not applicable to them leaving between 29-35% of carers not feeling satisfied in this area.

79% of carers reported they did not receive a copy of the minutes from the placement meeting (77% 2018).

QFKC continues to highlight the importance of carers actively participating in meaningful Placement Agreement meetings and being provided with the minutes from those meetings. Placement Agreements are a legal requirement of a placement and the very document that is reviewed when it is found that standards of care for a child or young person in a placement are not being met. From a sample size of 860 carers having 322 state that they do not have a Placement Agreement for the children or young people currently in their care is very concerning and whilst Child Safety records may show a higher rate of completion, if carers have not been included in the development of the agreement and/or have been provided with a copy of the agreement, then we would question the validity of such records. Partner in Care forums, QFKC forums, QFKC bi-annual surveys and annual Exit Report surveys have provided consistent data from carers themselves in the space of Placement Agreements, which do not appear to align with records held by Child Safety. It is therefore essential that a best practice approach is adopted rather than a tick box approach in this space to ensure that when Placement Agreements are completed, that they are done as intended with all care team members participating and agreeing with the outcomes. Areas such as dissatisfaction with CRC's, family contact arrangements, the completion of ESP's, Cultural Plans and Child Health Passports can all be addressed through the completion of proactive Placement Agreements with the whole care team.

Centrelink

Carers continue to report low satisfaction rates in this area, demonstrating a lack of understanding and communication amongst all care team members. This can be a very complex area to understand and it is accepted that some Child Safety staff may also struggle to understand the complexities of the system.

- 74% of carers reported feeling that information from the department about Centrelink only sometimes or never happens (76% 2018)
- 77% of carers reported feeling that support provided by department to access Centrelink services only sometimes or never happens (73% 2018)
- 73% of carers reported they only feel satisfied sometimes or never in respect to the ease of access to Centrelink services (72% 2018)
- 71% of carers reported they only sometimes or never feel satisfied in respect to timeframes for provision of Medicare Cards (70% 2018)
- 65% of carers reported they only sometimes or never feel satisfied in respect to timeframes for provision of Health Care Cards (63% 2018)

QFKC maintains the need for a dedicated section through Centrelink for foster and kinship carers across the Nation. Commonwealth benefits are relevant to all carers across Qld and having a section of Centrelink that carers could contact to speak to who are specifically trained in the area of foster and kinship care formal care would be an incredibly useful resource. This section could speak to:

- Australian Child Care at Risk Subsidy
- Exemptions to Work
- Health Care Cards for all children and young people in care
- Medicare Cards
- Transition Independence Living Allowance (TILA)

And all other financial support such as Family Benefit A and B and Carers Allowance.

QFKC has a module of training available to the sector that is specifically on financial matters for carers, this module includes everything relating to how Child Safety in Queensland supports carers financially, however, it also includes sections relating to commonwealth benefits and supports. This module of training has always received good feedback when delivered to all stakeholders that attend. Financial pressure will always be a stress factor for any family and feedback across the board would indicate that communication with Centrelink can be extremely challenging for carer households as they often receive different information on any given day depending on who they speak to. Having a dedicated section of Centrelink to carer households who are caring for over 50,000 children across Australia will ease the burden for carer households and QFKC would like to see the state advocating for such a service. The National Foster and Kinship Care Collective comprising 7 state and territory peak foster and kinship organisations continue to lobby as a priority, for all children in care to be entitled to all family tax benefits and carers should not be means tested through this process.

In the meantime, carers and sector staff would benefit from a fact sheet developed by Child Safety that provides clear messaging around commonwealth entitlements for carers.

Support

Carers were asked a range of questions relating to where they access their support from. Carers were able to tick more than one source of support; mostly carers ticked their fostering agency at 64% (61% 2018). However also high up on the list was family and friends 60% (62% 2018), other carers 30% (34% 2018) and then Child Safety 22% (17% 2018). 19% of carers also stated that they mostly contact QFKC and/or FAST Representatives for support (17% 2018).

In relation to where carers access their information from, once again fostering agencies were the highest source 70% (68% 2018), with other carers coming in second, 28% (31% 2018) CSSC 23% (18% 2018) and QFKC/FAST 20% (17% 2018).

Fostering and Kinship Care Programs

Carers were asked a range of questions relating to the support provided by their Foster and Kinship Care Agencies. 96% of carers reported being supported by an agency and reported the following in relation to their experiences of support;

- 80% reported feeling always or mostly satisfied with the regular support visits (at least monthly) (79% 2018)
- 82% reported feeling always or mostly satisfied with response provided by their agency to their (the carers) contact (76% 2018)
- 77% reported feeling always or mostly satisfied with support to complete paperwork (76% 2018)
- 68% reported feeling always or mostly satisfied in respect to access to support networks (68% 2018)
- 72% reported feeling always or mostly satisfied in respect to access to training (72% 2018)
- 71% reported feeling always or mostly satisfied with the on call service (10% felt this was not relevant to them leaving 19% feeling only sometimes or never satisfied) (69% 2016)

In the 2016 and 2018 surveys, a question was asked of carers as to satisfaction relating to information provided to them by their Foster and Kinship Care Agency. In the 2020 Carer Survey this question was expanded and read

‘your worker’s knowledge of current policy, procedure and legislation’

79% of carers reported feeling either always or mostly satisfied in this area which is very promising.

As can be evidenced above, the satisfaction rates amongst carers in relation to their Foster and Kinship Care Agency support has either remained stable or increased in terms of satisfaction which is pleasing to see as the 2018 Carer Survey had seen a decline in satisfaction across the board in this section.

QFKC continues to provide a wide range of supports to Fostering and Kinship Care Agencies across Queensland and our role has continued to grow. QFKC receives daily phone calls and emails from Foster and Kinship Care Agency staff across Queensland seeking legislation, policy and procedural advice. QFKC also plays a significant role in the professional development of Foster and Kinship Care Agency staff and assist in the professional development of carers attached to their programs. QFKC continues to reach the staff from over 80 Foster and Kinship Care Agencies across Queensland via email with all relevant information that is then able to be passed on to their carer communities.

Foster Carer Agreements

Carers were asked if they had a current Foster Carer Agreement (FCA), this question specifically pointed out that kinship carers are not required to have a Foster Carer Agreement. Only 670 foster carers answered this question. Of those that answered the question 583 stated they did have one (87%) with 6% stating they did not have one and 7% stating they did not know what a carer agreement was.

Carers were then asked a range of questions as to the value of Foster Carer Agreements;

- 70% of carers felt that the Foster Carer Agreement accurately reflected the needs of their family (74% 2018) (15% felt this question was not relevant meaning only 15% felt that the FCA did not reflect the needs of their family)
- 68% felt that the FCA accurately represents learning and support needs (71% - 2018) 15% felt that it did not. 58% felt that it had then gone on to be a useful tool to assist with the actual learning and development (64% 2018), 21% felt it had not and 21% felt the question was not relevant to them
- 60% felt that the FCA has been a useful tool to establish appropriate placement options (62% 2018), 21% felt it had not and 19% felt the question was not relevant to them

It is vital that carers are provided with relevant and up to date training that reflects the placement types they have identified will match their family.

Training

Carers were asked a range of questions relating to their experiences of training. In previous years, this has been an area where carers have shown high satisfaction rates. 59% of carers have told us they always or mostly feel satisfied with the relevance of training (61% 2018) and 62% of carers were always or mostly satisfied with the amount of training offered (66% 2018).

Carers once again expressed less satisfaction with the appropriateness of the time of day/night training was offered with only 44% feeling only sometimes or never satisfied in this space (51% 2018). 31% of carers identified that they were only sometimes or never satisfied with the provision of support to access childcare for the purposes of training (50% 2018), 32% identified they were mostly or always satisfied with 24% identifying this question was not applicable to them and 44% being either sometimes or never satisfied in this area.

It is important that Foster and Kinship Care Agencies offer a range of training opportunities to carers that assist them to provide care for the increasingly complex behaviours of children presenting in care. Carers then require follow up home visits where training sessions are discussed and reflected on to ensure that carers have understood the key concepts of the training and understand application of the acquired knowledge in their day to day caring roles.

There needs to be a collective effort from all stakeholders to provide a range of training opportunities to carers that is informative, relevant and practice based. From the moment a carer enters into their journey through the Quality Care Pre-Service Training, through to the critical first year of their caring journey and beyond, the training that is provided will be key to whether a carer family continues their journey. Currently the Pre-Service Training is well outdated and whilst QFKC appreciates this is currently under review, the timeframes for reviewing this training have been of great concern to QFKC given substantial legislative change and the recommendations that came from the Queensland Family and Child Commission in 2017. QFKC spoke to this recommendation in our 2018 Carer Survey Executive summary as follows:

Recommendation 29

It is recommended that the Department of Communities, Child Safety and Disability Services revises all aspects of carer training to make sure:

- It is reflective of current research and evidence
- It provides carers with the skills to manage complex behaviour and trauma including modules on
 - Understanding the impacts of trauma and providing trauma-responsive care
 - Risk factors for child abuse in care
 - The principles of child safe organisations
 - Cultural competency in all pre-service training (tailored to specific culture and language groups where possible)

Some two years down the track, the system is still a long way out from delivering the above outcomes and QFKC recommends this be placed as a priority for 2021.

QFKC are currently working alongside Peakcare in readaptation of the Hope and Healing Framework to accommodate family based placements. This training when rolled out will provide a practice based consistent training framework for carers to help in their understanding of trauma and how to provide care that is trauma informed.

Complaints/Appeals

Carers were asked a range of questions relating to their knowledge and experience of the various complaint and appeal processes available to them in the Child Protection System.

The following percentage of carers reported knowledge and then access of these complaint/appeal processes.

Complaint/Appeal Process	Knowledge	Accessed
Regional Complaints Office (Child Safety)	42% (45% 2018)	14% (17% 2018)
Central Complaints Office (Child Safety)	22% (28% 2018)	6% (8% 2018)
Queensland Family and Child Commission	26% (28% 2018)	3% (2% 2018)
QCAT	40% (43% 2018)	7% (9% 2018)
Queensland Ombudsman	37% (40% 2018)	3% (3% 2018)
Office of the Public Guardian	58% (63% 2018)	19% (21% 2018)

22% of carers reported never having heard of any of the complaint and appeal processes (17% 2018) and 70% reported not having ever accessed any of them (62% 2018).

Of those carers who had accessed a complaint or appeal process, 60% reported they felt heard during the process (61% 2018), however only 44% reported feeling satisfied with the outcome achieved (44% 2018).

Queensland Foster and Kinship Care

Carers were asked a range of questions relating to their experiences with QFKC;

- 60% of carers reported satisfaction with information provision about QFKC, 21% felt this question was not relevant to them (61% 2018 with 11% in 2018 feeling question was not relevant to them)
- 59% of carers reported they had knowledge and understanding of the services provided, 19% felt this question was not relevant to them (63% 2018 – 11% felt question was not relevant to them)

Of those carers who felt the questions were relevant to them, the following feedback was provided in relation to QFKC

- 71% reported feeling mostly or always satisfied with access to QFKC staff (71% 2018)
- 73% reported feeling mostly or always satisfied with timeliness of response from QFKC (71% 2018)
- 67% reported feeling mostly or always satisfied with outcome achieved (62% 2018)

QFKC continues to have an on call roster system that means all carers will be responded to either the same day or the following day at the latest in matters where the on call worker is busy and the call comes in late. QFKC has an on call procedure which clearly outlines expectations for staff in the area of responding to on call matters. QFKC has not received any formal complaints from carers that would indicate that Case Officers are either not responding to initial on call matters or not following up on matters that are open with staff.

Carers were asked a range of questions in relation to our FAST program; those carers that felt the question was relevant to them provided the following feedback to QFKC in relation to FAST;

- 69% reported feeling satisfied in relation to information provision about the FAST program (68% 2018)
- 66% reported feeling satisfied in relation to knowledge of their local FAST Rep (65% 2018)
- 50% reported feeling supported to access their local FAST Rep from Child Safety (41% 2018)
- 63% reported feeling supported to access their local FAST Rep from their Fostering and Kinship Care Agency (56% 2018)
- 66% reported feeling mostly or always satisfied with advice provided by FAST (69% 2018)
- 66% reported feeling mostly or always satisfied with support provided by FAST (66% 2018)
- 58% reported feeling mostly or always satisfied with advocacy provided by FAST (57% 2018)
- 56% reported feeling mostly or always satisfied with outcomes achieved with FAST (55% 2018)

Satisfaction rates in the area of FAST appear to have remained stable since the 2018 Carer Survey. It is pleasing to see an increase in both Child Safety staff and Foster and Kinship Care Agency staff supporting carers to access FAST. FAST Reps will always only provide advice that is accurate and reflects what is the current policy, procedure and legislation. It is never the role of a FAST Rep to take 'sides' in matters relating to support and advocacy, rather to ensure that carers have all the accurate information and are afforded a fair and just process. In reviewing comments in this section it would appear that there is a sense from some of the carer population that the use of FAST Reps would be of no benefit to them as they too are carers and therefore powerless to change situations.

In 2016, QFKC launched a Facebook page that aims to provide accurate advice relating to policy, procedure and legislation to carers across Queensland. This page now has over 2500 members and has resulted in many great outcomes for carers and continues to be used as a platform to share important information such as Carer Connect updates, procedure change such as the fostering allowance

being extended to young people in family based placements until the age of 19 and much more. The incredible results from this carer survey can also be attributed to QFKC's social media presence on both this page and our QFKC Facebook page.

Given the introduction of social media as a way of carers accessing FAST, the 2018 Carer Survey also asked carers how they mostly access FAST. 46% advised via phone, 26% via email and 28% via social media. These results definitely demonstrate that the social media means of communication is an effective and well used method of communication for carers across Queensland.

Carers can sometimes access QFKC and FAST with a desired outcome they want achieved, this could be to have children returned, to have a SOC matter overturned, or to have CSNA reinstated. QFKC and FAST will only provide advocacy that fits with legislation, policy and procedure, therefore we will advocate a process, and this process may not always result in the desired outcomes for carers which can be difficult at times for the carer to accept.

Partners in Care

In the 2018 Carer Survey, QFKC took the opportunity to ask carers about whether they noticed any positive change following the Partner in Care initiative which took place over 2017, this is the second bi-annual survey that has now been able to explore carers views around Partners in Care. In the 2018 survey, Partners in Care initiatives were still in their infancy with Regional Action Plans having only just been developed, therefore carers were expected to have seen little change. Now that over two years has passed by it is timely that we seek carers feedback as to the effectiveness of the initiative.

Carers were asked if they had noticed any positive change in practice since Partners in Care workshops occurred in 2017, 819 carers answered this question and 173 stated they had seen a positive change (21%) with 79% stating they had not seen a positive change in practice.

Carers were then asked if they considered the culture and practice in Child Safety had improved in the last three years, 819 answered this question, 248 (30%) stated yes and 571 (70%) stated no.

Looking Forward

Carers were then asked a range of questions relating to their future as carers. 82% of carers recorded that they intend on fostering for three or more years (86% 2018), 12% said only for another year (10% 2018) and 6% for another 2 years (4% 2018).

When asked whether there was anything that would influence this decision, 42% of carers stated that there would be (47% 2018), and carers were then able to provide comment. 345 carers provided comments on this particular question, the overall theme that came across as to what may be some things that would change this decision included:

- Level of support provided by Child Safety
- Increased financial support
- Inclusive decision making
- If the overall experience with Child Safety improved
- Child Safety starting to be considerate of the whole carer family
- Reviewing the Harm Report process
- Provision of regular respite
- Permanency seen as realistic option for carers to obtain

Carers were then asked if they had suggestions for Child Safety to improve services for foster and kinship carers, 427 carers provided comment and additionally if they had two things that they could

change about the system, what would these things be, 561 carers provided comment. All of these comments will be provided to Child Safety for their consideration.

Finally, carers were asked whether they would advise a friend to be a carer, 48% stated yes (49% 2018) and 52% stated no. All sectors understand word of mouth to be the most powerful source of marketing – QFKC's Exit Reports consistently highlight that carers are not leaving the system because of the complexities of children, rather because of the complexities of parenting within a statutory system. In the majority of cases, carers will be drawn to fostering for child focused reasons, this will continue to be the primary motivation for carers who are retained within the system, however if the system continues to challenge them in ways they are not able to cope with and in ways that start to impact on their own family, carers will choose to leave the system.

Summary

2020 was a year like no other, for those of us who are not carers, we were given a taste of what a world looks like where you are told by the government what you can and cannot do, that you cannot cross a border, that you cannot have your children engage in the activities you want them to and that you cannot have whoever you want in your home. Whilst Queenslanders waited for their world to return to normal, we came to realise that for carers who choose a life of volunteering where they invite the most vulnerable children into their home to parent in a statutory system, this is their normal. When we recognise the significance of this, we come to understand the importance of doing what we can do and what is within the systems control to make the lives of carers families easier. We do this by genuinely treating carers as part of a care team, informing them of why decisions are made, not just that a decision has been made and we include them in this decision making. We acknowledge that the role of being a carer is like no other, it means parenting alongside a system and birth parents, all of whom may have very different ideas about how parenting should be done. We recognise that like all human beings, carer families will have their tough days and moments and that during these times, the best thing we can do is offer our support, just like an extended family and community would do when they see a family in need of support. The worst thing we can do during these times is act in a punitive blame driven way that makes a carer family feel hopeless and helpless and which will eventually lead to them making the decision to walk away.

In 2020 we learnt very quickly to do things differently, systems changed in the blink of an eye because they had to. What this demonstrates is the capacity of the system to find effective ways to address challenges when we all put our minds to it.

QFKC would like to recognise the significant commitment from Child Safety over the past couple of years in recognising carers worries and working towards solution focused outcomes. QFKC's participation in the Oversight Committee has enabled a platform for stakeholders to keep our carer community and the children they provide care for at the centre of our practice through work plan goals. There have been many achievements over the past two years including:

- The enhancement of the Carer Connect App with additional features being made available to carers
- Procedure change relating to approval of CRCs, who approves and how this is approved
- Extension of the CSNA and HSNA review periods
- Extension of the fostering allowance for young people living in family based placements through to the age of 19
- A review of the Standard of Care Procedures with some very promising recommendations for change going forward
- A revised up to date Statement of Commitment

The work plan is evolving and whilst 2020 meant that Partners in Care unfortunately in many regions stopped in its tracks, it is hoped that the results of this survey will provide each region with renewed focus for 2021. There has never been a bigger survey sample provided to Child Safety from their carer community – a carer community as a system we are completely reliant on to provide family based placements for over 10,000 children and young people in care, we simply must listen, be solution focused and seek resolution and change in a timely manner.

Report presented on behalf of QFKC by:

Hazel Little
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12 January 2021