



Supporting permanency case planning for children and young people

A practice resource for FACS-funded service providers to support the transition onto PSP and ChildStory

Permanent Placement Principles

Permanency case planning for children and young people¹ follows the permanent placement principles set out in the *Children and Young Persons (Care and Protection) Act 1998* (the Care Act). Permanency is about giving every child the best opportunities for permanent connections, belonging and stability throughout childhood and into adulthood.

Children deserve every opportunity to live safely with family. This is why the first (1) permanency preference for children is to keep them safely with parents or family/kin. If a child is taken away from their family and placed in care because they are not safe, the permanent placement principles clearly set out the order of preference for permanency. For children currently in care these principles are (in order of preference):

2. returning them to parents or family/kin,
3. arranging a permanent legal guardian, or
4. supporting and facilitating adoption (for non Aboriginal children).

For a smaller number of children (over time), when preservation, restoration, guardianship or open adoption is not possible:

5. providing long-term foster care or residential care (Intensive Therapeutic Care) under parental responsibility of the Minister.

Each permanency option must be independently considered and a clear justification about why a particular option is not in the child's best interests identified, in order to move on to considering the next option.

For further information, see:

- *Permanency Case Planning* section in the [Permanency Case Management Policy \(PCMP\)](#).
- [Section 10A](#) of the Care Act 1998.

Setting, reviewing and changing a child's case plan goal

Permanency case planning for a child involves setting a case plan goal focused on a permanency outcome (preservation, restoration, guardianship, adoption, long-term foster care or residential care /Intensive Therapeutic Care).

¹ Throughout this document 'child and young person' is shortened to 'child', and 'children and young people' is shortened to 'children'.

At regular case review meetings, the child, and people who love and care for the child, such as parents, relatives, carers, community members and professionals monitor progress towards achieving the child's case plan goal with casework staff. If there has been a significant change in circumstances for the child, their parents or family/kin the case plan goal needs to be reviewed, and the child's case plan goal may be changed. Tools like Family Group Conferencing can be used to support a collaborative and inclusive approach to family decision making when case plan goals may need to be changed.

Where decisions are being made about Aboriginal children, these should be made in partnership with Aboriginal families and community.

The decision to change and approve the child's case plan goal is made by FACS. This decision is to be made in consultation with service providers, families, communities and children and a rationale for the decision must be clearly documented and accessible in the child's file. The final decision to approve the case plan goal rests with FACS as:

- the agency with statutory responsibility for assessing children's safety and risk and exercising parental responsibility for children in OOHC
- the commissioner of the permanency support service (whether or not the child is in OOHC).

For further information, see:

- *Permanency Case Planning (Developing a Case Plan)* section and *Permanency Support Services (Monitoring progress and Changing the case plan goal)* sections in the Permanency Case Management Rules and Practice Guidance (PCMP).
- *NSW Child Safe Standards for Permanent Care, Office of the Children's Guardian, November 2015.*

Proposed permanency outcomes

In preparation for full service delivery commencing from 1 July 2018 and as part of the Foster Care and Aboriginal Care SIP (Single Invited Process) negotiations, service providers have been considering whether a change in permanency case plan goal is appropriate for the children in their care. This practice resource is not intended to replace any previous assessments or decisions – but rather to support validation of these case plan decisions for the purpose of enabling the transition of children onto the PSP (via ChildStory) with accurate child information for automatic payments.

Restoration

Every child has the right to have every possible opportunity to live safely with their family. When a child is taken away from their family and placed in OOHC, the first consideration is whether returning the child safely back to their birth parent(s) care is in their best interests and a realistic possibility.

Casework at this time will be focused on supporting parents to make the changes needed so their child can return home and be safe long term. Working with a family to have their child return home is a skilled balance of assessing risk and change, supporting and motivating change, supporting the child (and their bond with their parent) and other important people through this process. It also means planning for the best option for the child if they can't return.

Comprehensive mapping of the child's extended family/kin network is vital to:

- identify and make contact with the child's father (including having him named on the child's birth certificate and exploring what relationship and support he can provide to his child)
- make sure extended family/kin (maternal and paternal) are aware that the child has entered OOHC and working alongside family to establish and keep their connection to the child strong.

- provide opportunities for the child to be placed with their family, kin or community while their parents make the changes they need to keep their child safe.
- involve family, kin and community to create support and safety for the child when they return home involving family/kin in decision making about the child
- supporting children to develop or maintain safe connections given we know that these connections are vital for healing and the impact of loneliness can be devastating.

The comprehensive mapping process will involve partnering with family members to create an extensive family tree/genogram and using tools designed with the best available evidence, noting the preference for evidence based models such as Family Finding and Family Group Conferencing. Due to Australia's history of forced removal of Aboriginal and Torres Strait Islander children from their families, extra assistance may be needed to trace Aboriginal kinship networks. Assistance can be sought from family tracing services such as LinkUp.

Determining whether restoration is realistic for a child or young person:

1. Consider the following in determining suitability to proceed to an assessment that takes into account information from children, parents, family, support services, community as well as observation:
 - the child's views about where they want to live (OOHC Standard 2: Child's participation)
 - the plans for the child's future if restoration cannot happen, and the effect the harm has had on the child's physical, cognitive, emotional and social development
 - the parents and any family/kin views about where the child should live, and in the case of an Aboriginal child the views of Aboriginal family and community members
 - what factors were barriers to any previous failed attempts to return the child - what were the circumstances then? is it likely to be different this time if restoration progresses? It is important to consider whether barriers may also have been about the quality of casework or service provision to the family.
 - family visits (with the purpose of strengthening the parent-child relationship) showing:
 - bonding is developing between the child and parent
 - parents have reasonable expectations about the child's development and are committed to learn to meet their needs
 - parents respond (or are learning to respond) to the needs of the child (both verbal and non-verbal cues)
 - parents prioritise the child's safety and wellbeing
 - parents put in place (or are learning to) manage their children's behaviour in an age-appropriate way
 - it is safe to leave the child with their parent without supervision for periods of time right now.
 - indicators the parents are making progress towards the case plan goals:
 - they are showing an understanding about what they need to do to keep their child safe
 - they are carrying out the tasks agreed to in the case plan
 - they are demonstrating changes they need to keep their child safe if the child was returned to them

- parents are taking steps to develop support networks to assist with restoration and beyond
 - they are willing to accept help from others to create and sustain change
 - they are showing a consistent commitment to care for their child.
 - indicators the parents are demonstrating an ability to protect their child:
 - parents have the cognitive, physical and emotional capacity to participate in safety interventions that are appropriate to their circumstances
 - parents are able to solve problems and resolve conflict
 - parents recognise problems and threats that would place the child or young person in imminent danger following restoration
 - parents have supportive relationships with one or more appropriate adults who are participating in planning, AND parents are willing to accept this assistance
 - parents in the home have taken, and will continue to take action, to protect the child from a person suspected of causing harm.
 - parents accepting support offered by caseworker and/or other community agencies.
2. FACS is notified of the recommendation to change the case plan goal to restoration. Evidence provided to support the request for FACS to approve a change to the case plan goal.
- The decision and rationale for that decision should be recorded appropriately in the child's file including who was involved and the role and input of the child, family and community. For Aboriginal children this should also include the role and input from community organisations.
- Through the process of transitioning children onto the PSP approval is to occur following discussions with relevant district staff as well as completion/verification of the NGO spread sheet. FACS Contract Managers are the key point of contact. Casework practice guidance can be sought from FACS Permanency Coordinators.
3. FACS approval is obtained. FACS approval is delegated to a Manager Casework.
4. Develop a case plan with the goal of restoration which specifies a child focused timeframe that considers the child's age and developmental needs including a step down approach. This should include the plan to conduct a comprehensive restoration assessment using an evidence based model (for example, FACS uses a Structured Decision Making Restoration Tool).

Note: The minimum timeframe for ongoing regular case plan review for restoration is 6 months.

We should expect that in the process of change that some parents will have a lapse and we should plan for this. This is a normal part of the process of behaviour change. Lapses can bring on feelings of shame and impact a parent's confidence that they can maintain the changes or provide important learning opportunities that strengthen a parent's skills and determination to sustain change.

Guardianship

If restoring the child to their family has been assessed as not a realistic possibility, the next consideration is whether a guardianship order is in the child's best interests.

Casework at this time will be focused on understanding the child's current and future needs, and assessing the capacity of the prospective guardian(s) to meet these needs independently of ongoing casework support, such as through linking with community and informal support networks.

Comprehensive mapping of the child's extended family/kin network and other people important to the child is vital to:

- make sure they are aware that the child has been taken away from their parents and is in care
- Give all opportunities for the child to be placed with their family, kin or community while guardianship is assessed
- making sure that extended family and kin are able to be assessed as prospective guardians
- supporting the child to strengthen meaningful connections and lifelong relationships that support their identity development, well into adulthood.
- support the parents in their process of grief and loss and ongoing connection to the child.

Under a guardianship order the child is not in OOHC. They grow up with their guardians, who may be family/kin or another suitable person, making all parenting decisions. This includes decisions about the child's education, health, emotional and behavioural development and day to day decisions like going on holidays. Guardians are also responsible for supporting the child to remain connected to their family and culture, including spending time with their family, and to see their parents, grandparents, brothers and sisters. A comprehensive guardianship assessment determines whether the prospective guardians are able to care for and raise the child both now and into the future, without ongoing OOHC casework support.

If a guardian passes away while the child is under 18 years, the child returns to the parental responsibility of the parents (not the Minister) unless there are concerns about the child's wellbeing. In cases where returning the child to the care of their parents places the child at risk, the service provider should they become aware should make a ROSH report. FACS will respond to the ROSH report and assess the child's safety. FACS will identify people they have strong connections with (ie the deceased guardian's extended family) to assess who would best meet their permanency care needs.

A guardianship order can be rescinded through section 90 of the Care Act if there is significant change in the child's circumstances. A guardianship order expires when the young person turns 18 years of age.

Determining whether guardianship is in a child or young person's best interests:

1. Consider the following in determining suitability to proceed to an assessment that takes into account information from children, parents, family, support services, community as well as observation:
 - the child's views about guardianship, and for a young person aged 12 years or above, who is capable, they consent to guardianship progressing (OOHC Standard 2: Child's participation)
 - the parents and family/kin views about guardianship, and in the case of an Aboriginal child the views of Aboriginal family and community members
 - there is evidence of bonding between the child and prospective guardians
 - current probity checks of prospective guardians (WWCC, national police check, CS check) raise no concerns and there are no active reportable conduct investigations
 - the child's family/kin and carer are currently managing contact without casework support
 - the prospective guardians are supporting the child to develop their identity with their family/kin
 - prospective guardians are demonstrating willingness, commitment and ability to meet all of the child's health, education, social, cultural, emotional, identity and behavioural development needs without casework support for the duration of their childhood
 - prospective guardians have the ability to be able to financially meet the needs of the child during their childhood and beyond (they will receive a guardianship allowance after a guardianship order is made and, if approved in the Care Plan, may receive limited additional support payments)

- there are no court undertakings in place in relation to the prospective guardian
 - cultural consultation supports guardianship progressing and confirms the prospective guardians are implementing the Cultural Care Plan.
2. Before commencing a guardianship assessment make sure the child, family, their carer and other important people have been consulted about permanency options for the child and that all efforts have been made to find the child's family. This includes cultural consultation for Aboriginal and Torres Strait Islander children or migrant and refugee children. Make sure the child, parents and prospective guardian have been given information about what Guardianship is and have had the opportunity to express their initial views.
 3. Check that the following criteria have been met:
 - if the child is Aboriginal or Torres Strait Islander, the prospective guardianship order follows the Aboriginal and Torres Strait Islander Child and Young Person Placement Principles
 - if child or young person is 12 years or over, that they have suggested verbally they support a guardianship application
 - restoration is not part of the court ordered care plan or
 - if currently before the court, the court has made a finding that there is no realistic possibility of restoration.
 4. FACS is notified of the recommendation to change the case plan goal to guardianship. Evidence provided to support the request for FACS to approve a change to the case plan goal.

The decision and rationale for that decision should be recorded appropriately in the child's file including who was involved and the role and input of the child, family and community. For Aboriginal children this should also include the role and input from community organisations.

Through the process of transitioning children onto the PSP approval is to occur following discussions with relevant district staff as well as completion/verification of the NGO spread sheet. FACS Contract Managers are the key point of contact. Casework practice guidance can be sought from FACS Permanency Coordinators.
 5. FACS approval is obtained. FACS approval is delegated to a Manager Casework.
 6. Develop a case plan with the goal of guardianship. This should include the plan to conduct a comprehensive guardianship assessment using an evidence based model (for example, Step by Step Assessment Tool).

The case plan should also include ways the prospective guardians can be supported to develop their skills and abilities, and support the child through the guardianship assessment and court process.

Note: The minimum timeframe for ongoing regular case plan review for guardianship is 6 months.

Open Adoption

If guardianship has been assessed and is not in the child's best interests, the next consideration is whether open adoption is in the child's best interests (for non Aboriginal children only).

Open adoption is considered the last preference for Aboriginal children, after long term OOHC and must be considered in consultation with a local, community-based and relevant Aboriginal organisation.

Open adoption differs from guardianship in many ways. A child who is adopted is not in OOHC and the adoption order cannot be rescinded. It is a permanent, life long order that does not expire when the young person turns 18 years of age. They grow up with their adoptive parents making all

parenting decisions including decisions about the child's education, health, emotional and behavioural development and day to day decisions like going on holidays. Adoptive parents are also responsible for supporting the child to stay connected and spend time with their family/kin, as well as their culture. Children who are adopted are afforded the same legal rights to inheritance from their adoptive parents as any biological children of the adoptive parents. Children who are adopted also receive an amended birth certificate which lists the adoptive parents as their parents, and any biological siblings also adopted along with the adoptive parents children as their siblings.

Casework at this time will be focused on identifying the child's needs; assessing the capacity of and supporting the prospective adoptive parents to meet their needs both now and into the future, independently of casework support; and supporting the child's birth family with the process of grief and loss and what their connection to the child will look like into the future.

A comprehensive life story, from the day the child is born, is to be prepared by the child's caseworker and provided to the child (where age appropriate) and prospective adoptive parents prior to an adoption assessment. Identifying and adding a father's name to the child's birth certificate prior to an adoption is also vital to ensure completeness of the child's life story.

Comprehensive mapping of the child's extended family/kin network (maternal and paternal) and active work connecting the child to these people is vital to ensuring the child can form and maintain meaningful connections and lifelong relationships that support their identity development, after adoption but to also have family/kin involved in decision making about their life and about adoption.

Determining whether open adoption is in a child or young person's best interests:

1. Consider the following in determining suitability to proceed to an assessment that takes into account information from children, parents, family, support services, community as well as observation
 - the views of the child about adoption, and for a young person aged 12 years or above, who is capable, that they consent to open adoption progressing (OOHC Standard 2: Child's participation)
 - the parents and family/kin views about where the child should live, and in the case of an Aboriginal child the views of Aboriginal family and community members
 - evidence of an established relationship and bonding and secure attachment developing between the child and prospective adoptive parents
 - current probity checks of prospective adoptive parents (WWCC, national police check, CS check) raise no concerns and there are no active reportable conduct investigations
 - prospective adoptive parents and the child's parents and family/kin demonstrate the ability to manage contact without casework support and the prospective adoptive parents are supporting the child to develop their identity with their family/kin
 - prospective adoptive parents are willing to develop an adoption plan that is in the child's best interests, and register it where necessary. If the child is Aboriginal or Torres Strait Islander, the adoption plan (that includes the cultural plan) must be registered by the Supreme Court
 - prospective adoptive parents demonstrate a willingness and ability to meet all of the child's health, education, social, cultural, emotional and behavioural development needs without casework support during their childhood and beyond
 - prospective adoptive parents have the ability to be able to financially meet the needs of the child during their childhood and beyond (depending on their financial circumstances, prospective adoptive parents may be eligible to receive an allowance or payment after adoption)

- cultural consultation supports adoption and confirms the prospective adoptive parents are implementing the Cultural Care Plan
 - evidence that open adoption is clearly preferable to guardianship
 - evidence that open adoption is clearly preferable to any other parental responsibility order.
7. Before commencing an adoption assessment make sure the child, family, their carer and other important people have been consulted about permanency options for the child and that all efforts have been made to find the child's family. This includes cultural consultation for Aboriginal and Torres Strait Islander children or migrant and refugee children. Make sure the child, parents and prospective adoptive parents have been given information about what adoption is and have had the opportunity to express their initial views.
 2. Check that the following has occurred:
 - child and parents have been provided with the relevant Mandatory Written Information on Adoption
 - prospective adoptive parents have been referred and invited to attend a Preparation to Adoption Seminar
 - pre-enquiry meeting has occurred with the relevant Regional Adoption Caseworker
 8. FACS is notified of the recommendation to change the case plan goal to adoption. Evidence provided to support the request for FACS to approve a change to the case plan goal.
 9. FACS approval is obtained. FACS approval is delegated to Manager Casework.
 10. Develop a case plan with the goal of adoption. This should include the plan to conduct a comprehensive adoption assessment.

The decision and rationale for that decision should be recorded appropriately in the child's case including who was involved and the role and input of the child, family and community. For Aboriginal children this should also include the role and input from community organisations.

Through the process of transitioning children onto the PSP approval is to occur following discussions with relevant district staff as well as completion/verification of the NGO spread sheet. FACS Contract Managers are the key point of contact. Casework practice guidance can be sought from FACS Permanency Coordinators.

The case plan should also include ways the prospective adoptive parents can be supported to develop their skills and abilities, and support the child through the adoption assessment and Supreme Court process.

Note: The minimum timeframe for ongoing regular case plan review for adoption is 6 months.

Long term OOHC

If adoption is not a realistic possibility, for a small number of children (over time), an order allocating parental responsibility to the Minister is made (or has already been made). This means FACS will meet the child's permanency needs through long-term foster care or in some circumstances residential care/Intensive Therapeutic Care.

Regular case plan review is vital to consider if the child's needs are being met and if the case plan goal can change to restoration, guardianship or open adoption. This allows children every opportunity for the chance to have a loving, permanent home for life,

When long term OOHC is in a child's best interests:

1. A case plan review identifies factors including (but not limited to):
 - there are concerns about the relationship and the bond between the child and their carer

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- prospective permanent carers, child and the child's parents and family/kin need support to manage visits
 - the child needs ongoing casework support to support their healing, wellbeing and development
 - the carers need casework support to help them provide care for the child
 - significant financial support is required to support the child
 - the child aged 12 and above does not consent to guardianship or open adoption
 - ongoing cultural consultation is needed to support the child's cultural identity development
2. Continue existing case management arrangements

Continue to conduct regular reviews of the case plan goal. The minimum timeframe for ongoing regular case plan review for long term care is 12 months.