

Family Based Care – Foster Care Service Model



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Anglicare acknowledges the essential role that Foster Carers play in supporting and nurturing young people and keeping them safe. Carers' input was sought in the development of this document and we are grateful for their valuable time and input.

1. Introduction

1.1 Purpose

This document outlines the model of service delivery of the Anglicare Southern Queensland's (Anglicare) Children, Youth and Families (CYF) Foster Care Program. It supports the provision of high-quality care to children and young people residing in foster care, family-based care arrangements as funded by the Department of Families, Seniors, Disability Services and Child Safety (hereinafter referred to as the Department). It provides information on the service delivery context, key components of the model, reporting requirements and the expected service outcomes.

Use of the model may be (but is not limited to) a guide for reference and training to promote consistency and is to be read in conjunction with the Improving Lives Framework and Care Documentation Practice Guide – Out of Home Care, Child Safety Practice Manual, and the Hope and Healing Framework.

1.2 Background

Anglicare's Foster Care Program is a Care Placement Service funded by the Department. Family Based Care service provision is provided across two key programs:

- Foster Care
- Kinship Care
(see Family Based Care – Kinship Model).

Care placement services provide physical, psychological and emotional care for young people when assessment indicates separation from their family is required to ensure the child or young person's safety or wellbeing. The Department retains case management responsibility for young people, including care arrangement decisions and the approval, cancellation, or suspension decisions for carers while Anglicare recruits, assesses, trains, and supports carers.

Anglicare works with the Department as part of a young person's safety and support network, which includes their approved carers, to provide available supports and share information to meet young people's needs while in care. The views and wishes of the young person are essential considerations for the safety and support network.

Anglicare's Foster Care Program delivers services that connect, equip and support carers to:

- Obtain and maintain their carer approval, including fulfilling training and assessment requirements (including Blue Card approvals). See also Blue Card Practice Guide
- Respond to referrals from the Department for children and young people in need of protection and home-based care arrangements
- Provide family-based care arrangements consistent with the Statement of Standards, legislation and policies, and understand their responsibilities and obligations when holding the authority to care for a child under the Act
- Make day-to-day care decisions aligned with the child/young person's case plan and supported by the carer's placement agreement
- Positively contribute to the outcomes of the child or young person's case plan, including permanency outcomes consistent with legislative principles for achieving permanency for a child or young person and the additional principles for Aboriginal and Torres Strait Islander children.

Anglicare's Foster Care Program provides high quality care arrangements for children up to 18 years of age who require family based Out of Home Care (OOHC) support. The program caters for children who present with moderate to high needs. Moderate needs are those typical for most children and young people in care due to the harm and trauma they've experienced, and that can be managed through limit setting or other interventions. Where possible, children are reunited with their families. Carers assist this process by committing to maintaining ongoing relationships between children and their birth families.

Support to carers is a core feature of this program as it aims to create a safe therapeutic environment for vulnerable children, where carers feel they can seek help, sustain the caring role and promote the best outcomes for young people in their care.

1.3 Governing Framework

The Child Protection Act

The Child Protection Act 1999 provides the overarching legislative framework for protecting children in Queensland, including reporting concerns. Anglicare's services comply with all relevant legislative requirements under the Act, including care service licensing provisions to ensure quality care consistent with the Charter of Rights of a Child in Care, the Statement of Standards and the Aboriginal and Torres Strait Islander Child Placement Principle. Anglicare's services also comply with relevant Departmental policies, procedures, program descriptions and related guidelines.

The Human Rights Act

The Human Rights Act 2019 protects the rights of everyone in Queensland. The Act requires organisations providing services to the public on behalf of the Queensland Government - to act and make decisions compatible with the rights it protects. Of the 23 human rights protected in the Act, the following are directly relevant to the delivery of placement services:

- Protection of families and children (s. 26)
- Cultural rights for Aboriginal and Torres Strait Islander peoples (s.28)
- Cultural rights, generally (s.27)
- Privacy and reputation (s. 25).

The National Framework for Protecting Australia's Children

The National Framework for Protecting Australia's Children 2009-2020 (COAG, 2009) consists of high-level and supporting outcomes and strategies to be delivered through a series of three-year action plans and indicators of change that can be used to monitor the success of the National Framework. The National Framework also recognises the importance of promoting the wellbeing of Aboriginal and Torres Strait Islander young people and families across all outcome areas.

The National Standards for Out of Home Care

The National Standards focus on those children and young people whose care arrangements have been ordered by the Children's Court, where the parental responsibility for the young person has been transferred to the Chief Executive. The standards were designed to guide continuous improvement and consistent levels of care to provide young people in out of home care with the same opportunities as their peers.

Statement of Standards

The Statement of Standards provides a way to measure the quality of foster care for children in care and forms a basis for assessing whether a care environment is appropriate. Section 122 of the Child Protection Act 1999 outlines the standards. Foster carers are responsible for ensuring that young people are cared for in a safe, nurturing and predictable environment that meets the standards. If there are concerns with the standard of care provided, the Department is responsible for responding to ensure the young person's safety.

Standards of Care Matters

Anglicare works in partnership with the Department to provide quality care in a safe and stable living environment to meet young people's needs in accordance with the Statement of Standards and the Charter of Rights of the Child (Child Protection Act 1999). The Department is responsible for adhering to specific timeframes for decision making, commencement and completion of Standards of Care (SOC) processes.

Human Services Quality Framework

The Human Services Quality Framework (HSQF) is the Department's quality framework. The HSQF was developed to safeguard the needs of clients. These six standards cover the core elements of quality service provision and provide a benchmark for measuring service delivery to promote consistency across the sector. Anglicare has a three-tier approach to compliance to support services to monitor performance against policy, procedure and the HSQF standards, which support best practice and continuous improvement.

Anglicare's quality management system ensures the provision of safe quality care to clients. The 'Assess to Action' program supports staff to monitor performance against policy, procedure and relevant external standards, legislation, regulation, and contractual requirements and supports best practice. The first tier is self-assessment guided by an assessment tool. Findings may contribute to the continuous improvement plan. Advice, education, and support for services is available from the Quality Assurance and Improvement Team. The Quality Assurance and Improvement team conducts internal audits as the second tier, and external audits are the third tier.

The Aboriginal and Torres Strait Islander Child Placement Principle

The Aboriginal and Torres Strait Islander Child Placement Principle was created to reduce rates of child removal, enhance child-community connection, and preserve cultural identity (Arney et al, 2015). The principle states the preferred order of options for an Aboriginal and Torres Strait Islander child who has been removed from their birth family, as below:

1. The child's extended family (kin)
2. The child's Indigenous community (kith)
3. With Aboriginal and Torres Strait Islander carers
4. With non-Indigenous carers.

According to the principle, if no suitable Aboriginal and Torres Strait Islander carers can be found, as a last resort children are placed with a non-Indigenous

carer, if connection between the young person and their family, community and cultural identity can be maintained.

Acts and regulations:

- Child Protection Act 1999
- Child Protection Regulation 2011
- Child Protection (International Measures) Act 2003
- Childrens Court Act 1992
- Information Privacy Act 2009
- Working with Children (Risk Management and Screening) Act 2000
- Statement of Standards.



2. The Foster Care Model

2.1 Practical Principles

2.1.1 Improving Lives Framework

All Out of Home Care (OOHC) programs within Anglicare are committed to working within the practice principles of the Improving Lives Practice Framework. The framework has been co-developed between Anglicare and the Australian Childhood Foundation to ensure it meets the needs of the individuals and families that access Children and Families programs, staff, and the organisation. The Improving Lives Practice Framework integrates the following principles:

- Being Child Focused, Person Centred and Family Oriented
- Being Trauma Informed and Recovery Oriented
- Strengthening and Empowering Practice
- Valuing Diversity and Cultural Responsiveness.

The framework is underpinned by trauma informed relationships whereby the therapeutic relationship formed between the young person and carers is one of the most powerful determinants of outcomes (Siegel, 2010). The framework emphasises physical, psychological and emotional safety for both staff and clients, which builds on the strengths of the individual and community, creating an opportunity to rebuild a sense of control and empowerment.

2.1.2 Family led decision making

This practice approach sees families supported to lead decision making and actioning plans to meet the safety, belonging and wellbeing needs of their children and young people.

- Anglicare adopts the key principles and values of family-led decision making:
- Families are the experts in their own lives. Choice and self-determination are essential
- With support, families are capable of planning for and acting towards safety and meeting the care and protective needs of children and young people
- Participation, collaboration and inclusion are essential to working positively with families
- Values such as cultural integrity, fairness and curiosity supports family-led decision making
- Strengths-based and solution focused approaches create better processes and outcomes for families and children.

In addition to the above principles, Anglicare advocates for the inclusion of the following principles when working with First Nations families:

- The process is facilitated by an Aboriginal or Torres Strait Islander person
- The facilitator is employed by an Aboriginal and Torres Strait Islander community-controlled organisation or is a private convenor
- The meeting is run in an Aboriginal or Torres Strait Islander way
- There is a focus on:
 1. creating a culturally safe space; and
 2. mapping kinship networks.

2.2 Care arrangements

A variety of care arrangements are required to meet the individual needs of children and young people. The type of care arrangement that best matches needs will be determined through comprehensive assessment.

Emergency care: sometimes, a safe place for a child/ young person is required at very short notice. These can last for a few nights or weeks. These arrangements can be required outside of office hours. These may be needed when a young person first comes into care whilst options for longer term care are explored.

Short term care: can last from a few months and up to two years. These arrangements are made where the plan is for children to return to the family home, and Child Safety works towards this goal. Carers support regular contact between the child and their family.

Respite care: is provided on weekends or holidays to give the regular carer a break. It can be difficult for young people to go to different carers, so the aim is to provide respite with the same carer to build relationships and promote a sense of safety. Carers may start as respite carers to build their experience.

Long term care: these arrangements are for children and young people who cannot return to the family home. Long term care provides an opportunity for children to form stable attachments that can persist throughout their childhood. Care arrangements can last until the young person leaves care.

Foster care aims to deliver family-based care arrangements for children and young people with moderate support needs. These care arrangements will be characterised by the following:

- Carers who are specifically recruited and provided with comprehensive training to equip them to effectively respond to the needs and manage the behaviour of children and young people placed with them;
- Agreement by carers that they will be available to provide direct support and supervision to the child or young person in their care daily and to attend case planning and other meetings/appointments related to the child/young person;
- The active involvement of carers in the development and implementation of the case plan for the child/young person so that they will become, in effect, key members of the casework team for the child/young person;
- Support to carers by way of regular home visits and telephone contact; and
- Availability of after hours on-call support in the event of crises.

2.3 Core Model Elements

The core elements of the Foster Care Model are entry, assessment and planning, delivery, transition, and exit.

2.3.1 Entry

Anglicare's Foster Care services uphold the best interests of children residing in foster care arrangements. This element covers recruitment, intake, screening, pre-service training, induction and transfer in of carers. Anglicare's recruitment and assessment of potential foster carers is carried out consistently and in line with the Statement of Standards outlined in section 122 of the Child Protection Act 1999 and in line with the Departmental Child Safety Practice Manual.

Anglicare conducts regular brand recruitment campaigns. Recruitment may also occur through local campaigns, as relevant, and other promotion events like stalls, expos, and media coverage, e.g. billboards and social media. Foster care services will develop a range of strategies to recruit carers, considering the need to:

- Target couples or individuals with the competencies to care for and support children and young people effectively

- Recruit carers who understand the needs of children requiring care
- Target carers from relevant backgrounds and with the competencies to meet the diverse needs of children and young people requiring care. Diversity of backgrounds and competencies should include those relevant to children and young people of Aboriginal and diverse cultural, linguistic and religious backgrounds. Specific strategies may need to be developed to recruit these carers
- Meet the identified number of care arrangements within the geographical areas.

During intake, enquirers are provided with general information about fostering, the Queensland foster care system, and the assessment and approval process, and they are sent our Information Kit and a link to view the online information session. Applicants are asked to complete application paperwork prior to the intake appointment.

Pre-service training is then provided to enquirers. Pre-service training, which comprises the first four modules of the 'Getting Ready to Start' program, is required by the Department to be undertaken by all potential general foster carers. The training is delivered by suitably experienced Anglicare staff. Attendees are observed and assessed against their capacity to meet the Statement of Standards of Care.

All prospective applicants are eligible to make a formal application. As part of the recruitment and assessment process, Anglicare may support potentially unsuitable prospective applicants to 'self-select' out of the process. Similarly, Anglicare may identify potentially unsuitable applicants who choose to continue progressing with an initial assessment, where Anglicare are unable to support this.

Carers may transfer from another agency; Anglicare will provide a transfer process for carers that's respectful of individual and family rights and ensures that carers continue to provide a safe, healthy, and nurturing environment for the child during the transfer process. Anglicare's care services acknowledge that partner agencies may have their own processes and procedures for transferring carers. Where this is the case, Anglicare's foster care services will reasonably support the partner agencies' requests, undertaking parallel processes if necessary. Regardless of the partner agencies' procedure, Anglicare's Foster Care services must ensure that the processes outlined in this procedure are undertaken.

2.3.2 Assessment and planning

The assessment of foster carers is currently mandated under the Regulation of Care provisions in the Child Protection Act 1999 (QLD). The purpose of these provisions is to outline the process of approving carers who can provide a child with a safe and acceptable standard of care, when Departmental intervention with a child and family requires that a child is placed away from their parent's care.

The purpose of regulating foster carers, including provisionally approved carers, is to ensure that an individual who provides care for a child placed with them, by the Department, is suitable to care for the child and continues to meet suitability requirements for the duration of their approval.

Anglicare conducts thorough evidence informed initial and renewal assessments that are child-focused, family-sensitive, and trauma-informed to determine the suitability of applicants to safely meet the needs of children in care in line with the Statement of Standards. Assessments include:

- "Get Ready to Start" pre-service training attendance, participation and reflections
- Interviews – multiple in-person interviews over several weeks, including adult household members and biological children, where present
- Checks – referees (where applicable), Blue Card, personal history
- Household Safety Study (see Household Safety Study Practice Guide)
- Health and Wellbeing Questionnaire and General Practitioners' report (where applicable).

Anglicare submits all signed and finalised assessment documents to the PSU/PSS or CSSC for progression to the regional carer assessment panel and if required, attends the regional carer assessment panel or local CSSC approval process. The Department is responsible for determining the carer's status.

The Foster Care Agreement is the Department's document articulating the care scope the foster carer will provide. A Foster Care Agreement is required for all approved foster carers and is completed at the commencement of any new care arrangement. A placement agreement aims to ensure that carers and Anglicare have access to relevant information about a child to provide adequate support for the care arrangement.

Anglicare receives and assesses referrals from the Placement Services Unit (PSU)/Placement Support

Service (PSS) within the Department and undertakes family-based care arrangement matching for children/young people. The local Child Safety Service Centre identifies a placement need. The Placement Support Service (PSS)/Placement Services Unit (PSU) receives a placement request from the service centre. Anglicare receives a placement request from PSS/PSU and will identify an appropriate match and contact the respective foster carer/s. Foster carers have a right to say no to care arrangements they are contacted about. Anglicare sends PSS/PSU an offer of placement, and PSS/PSU seeks confirmation of placement from the service centre.

An approved foster carer is required to renew their approval one year from the date of their initial approval and every three years thereafter. The renewal of approval is the process of assessing the continued suitability of the carer and any adult household members, taking into consideration whether the carer has met the Standards of Care of young people placed with them during the preceding one or three year period, and their continued commitment to meeting the suitability requirements set out in legislation and policy. Approved foster carers must make an application for the renewal of their approval three months prior to the expiry of the current certificate of approval, if they wish to continue as approved carers.

- Regular support for carers by way of face-to-face home visits, telephone and email contact;
- Additional support and services to carers during critical phases which may arise from issues relating to the child/young person in their care or from matters within their own family, including counselling, debriefing and crisis responses;
- Support to carers through the process that occurs following Standards of Care matters, at the same time ensuring the wellbeing of the child or young person;
- Arrangements for the provision of specialist support and advice to carers to assist them in their role (e.g. help from a psychologist, speech pathologist, medical specialist);
- 24 hour on-call service for carers;
- Ongoing mandatory and advanced training;
- Assistance to carers in developing peer support/network groups through access to local support groups, Facebook page and get-togethers with other carers;
- Opportunities to attend events, camps, holiday activities, and foster care conferences;
- Stakeholder engagement and follow up;

- Access to respite care;
- Support carers to provide culturally safe households; and
- Access to cultural practice guidance and support where First Nations or Culturally and Linguistically Diverse (CALD) children are placed with a carer.

Levels of support required by a carer may change over time, depending on the level of experience and circumstances for young people in their care. Support levels may scale up or down depending on the needs of the carer and the young person at any point in time. Access to High Plus and Intensive Programs can be facilitated when the need increases (See Appendix A Intensive Foster Care). Anglicare is constantly identifying, assessing, and responding to risk within an approved carer household as a part of their ongoing work with carers. Upon commencement of a new care arrangement within a carer home, Anglicare will seek key documents from the Department and schedule a Placement Agreement meeting with the Child Safety Officer (CSO).

Training and development

Carer training and development is an ongoing process informed by emergent issues and incidents, assessed needs and the ongoing needs of clients. Training and development of foster carers occur through ongoing support and monitoring and through formal training avenues. Anglicare Foster Care staff are responsible for facilitating or referring to external training courses that will benefit and develop carers supported by the agency. This is best undertaken in partnership with the Department and, where appropriate, partner agencies. 'Starting out' training consists of the following modules and must be completed by all foster carers during their first 12 months of approval, including water safety and Hope and Healing. Completing this training is a prerequisite to the foster carer's renewal of approval. In addition to the standard training, Anglicare offers carers a range of advanced training on various topics.

1. Safety planning

Safety planning occurs at any time when there is a greater need to manage risk. The Practitioner will work with the carer to identify triggers, explore safety options, and create a plan that includes reducing risks and accessing informal and formal support.



2. Transition to Independence

Transition to Independence, is the opportunity for young people to identify their future goals and needs, and to work towards these with the support of the Department and other key stakeholders. It's made up of numerous experiences, successes, attempts and challenges. A parallel planning approach will assist young people to meet both their immediate day-to-day needs, as well as short and long-term goals. Carers are well positioned to assist and support the young people in their care to meet these challenges and prepare for adult life. From the time the young person turns 15.5 years, staff can support the carer and young person by:

- advocating with the Department for a transition plan to be developed and a meeting held
- providing information about transition support, including services like Next Step Plus
- providing information about financial resources such as Youth Housing and Reintegration Service (YHARS) and Transition to Independent Living Allowance (TILA), and independent living skills development tools.

Young people exiting care can continue to reside with their carer after 18 years with the support of the Department, or they may choose to live independently. During this time, supporting the carer with any grief and loss issues can be essential.

2.3.4 Exit

A foster carer may request to transfer-out of an Anglicare foster care service and be supported by another agency. If the request to transfer is due to dissatisfaction, the service should explore the issues and endeavour to resolve the issue. A carer may exit the service by moving to another catchment area. Anglicare would alert the Department about the transfer to organise support and monitoring for any children and young people in care arrangement, hold a transfer out meeting, and complete paperwork to facilitate transfer to the new organisation.

- Foster care arrangements may end for a variety of reasons, including:
 - Young person is reunified with parent(s)
 - Guardianship/Permanent Care Order/Long Term Guardianship Order may be granted
 - Young person is no longer of a care age and chooses to live independently
 - Carer resigns
 - Care arrangement breakdown
 - Department ends arrangement due to safety concerns
 - Transfer to Aboriginal Controlled Community Organisation.

End of care arrangement support

It's normal and expected that a carer would experience grief and loss at the end of a placement agreement. Carer grief varies in form, duration, and in how it differs for everyone, and for each child regardless of how the placement agreement has ended. Farewell rituals and celebrations are important in supporting the carer with this experience.

3. Context for Delivering Foster Care Services

3.1 Operating hours

Anglicare's office hours are generally 9am to 5pm on Monday to Fridays. 24-hour on-call support for crisis and emergencies is provided seven days a week, every day of the year. The service includes access to after-hours care arrangements for the Department, urgent support for carers and support with incident management. The on-call service is shared among the foster care team members, on-call workers have access to Departmental on-call and Anglicare management if escalation is required.

3.2 Staffing

The Service Manager oversees the service operations, ensuring the organisational strategic plan is enacted. They work with the Group Manager to provide leadership and support to the service in service delivery; client-centred culture development; human resources management; business performance and financial management; quality care governance; contractual compliance and risk management, innovation and best practice.

The Coordinator's role is to provide guidance, direction and supervision to a team of Foster Care Practitioners to ensure that the recruitment, training, assessment and ongoing support of carers are maintained as per service agreements. This role also includes ensuring that the Foster Care Program meets the standards set out to ensure ongoing licensing of the program.

The Practitioner's role is to recruit, train, assess and support foster carers within Anglicare. They are also responsible for ensuring that appropriate care arrangements for foster children occur. Within the practitioner team are staff who provide intensive support to children and carers where required.

Youth Workers work with and support young people individually or in groups by developing and facilitating

programs that address social, behavioural, welfare, developmental and protection needs. This role can include several different duties and is often tailored to meet the needs of the child/young person in the home.

3.3 Diversity and Cultural Inclusion

Anglicare has an organisation-wide Diversity, Equity, Inclusion and Belonging Strategy. Staff receive Diversity, Equity, Inclusion and Belonging (DEIB) training, which has been co-designed by Anglicare specifically for the context of our practice in the child protection sector, including a specific module for leaders to ensure the concepts are embedded in our workplace cultures and foundational concepts around bias, power, privilege, language, intersectionality and positionality which can be applied across all elements of diversity. Staff also receive Cultural Capability and Awareness training led by a respected First Nations community member, with mandatory refresher requirements. Staff consider all information relevant to the individual needs of carers during referral, intake, assessment and planning, delivery and review, and exit processes, focusing on the unique lived experience of each carer and their intersectional identity. Service delivery governance, responsible for guiding frontline practice (specifically Care Arrangement Matching Procedure, Assessment and Planning, and Care Planning), requires staff to consider elements of diversity in collaboration with the carer and children and young people's care team, including those who identify as Aboriginal and/or Torres Strait Islander, Culturally and Linguistically Diverse (CALD), diverse gender and sexual orientation, immigrant or refugee, living with disability and/or mental health.

Anglicare acknowledges that Aboriginal and Torres Strait Islander families and communities have endured significant human rights violations, which continue to impact their daily lives. Anglicare acknowledges the profound grief, suffering and loss caused by

the removal of Aboriginal and Torres Strait Islander children from their families, their community and their culture, and we continue to be committed to ensuring Aboriginal and Torres Strait Islander children's cultural identity and relationships with their families and communities are maintained. Anglicare adheres to the Child Placement Principle when making care arrangements for Aboriginal and/or Torres Strait Islander children. Cultural Support Workers support non-Indigenous carers and staff to better understand the needs of Aboriginal and/or Torres Strait Islander children in care and respond holistically to consider family, spiritual, community and individual needs. They work closely with Child Safety service centers to achieve the young person's cultural plans. They also assist other team members to better understand Aboriginal and Torres Strait Islander children and families and support them toward best outcomes for safe care and connection. Carers can request a worker who identifies as Aboriginal or Torres Strait Islander. If Anglicare cannot provide an identified worker, access to additional culturally appropriate services or other local Aboriginal and Torres Strait Islander Community Services will be facilitated.

Anglicare supports self-determination for Aboriginal and Torres Strait Islander children and young people by partnering with Community Controlled Organisations who are proactively collaborating with service users and CCO partners to transition First Nations families to CCO's. The Cultural Practice Lead implements a cultural protocol practice tool connected to the Improving Lives Framework for practice to better equip staff to enable more meaningful self-determination for First Nations children and young people, their families, and their communities.

3.4 Participation of carers, children, young people and families

In ensuring the participation of carers, children and young people, and their families, Anglicare:

- Conducts genuine, ongoing consultation and facilitates the participation of carers, children, young people, and their families in the making of decisions that affect them;
- Provides carers, children, young people and their families with information (in a manner and language that they can understand) that facilitates their participation; and
- Conducts genuine, ongoing consultation and facilitates the participation of carers in decision-making processes.

Anglicare creates opportunities to hear the voices of kinship carers. Current methods of seeking feedback include, but are not limited to, evaluations following training and events, reflections from training, compliments and complaints process, and Client Voice surveys.

3.5 Workforce capability – staff development, support and supervision

Anglicare supports staff to meet the requirements of their role successfully. This occurs through induction, internal and external training, professional development plans, and professional supervision.

Communities of Practice

The Anglicare Children, Youth and Families Practice Development team facilitates a Community of Practice (COP) focused on carer recruitment and another for Coordinators. COP's focus on sharing practice wisdom, better practice and new knowledge on a specific topic. The COP occurs once every eight weeks.

Anglicare provides a space for staff to engage in safe, supportive supervision for critical reflection and practice improvement; self-care and professional safety planning; incident debriefing; and post crisis support. In keeping with the Improving Lives Practice Framework, it's expected that supervision is provided through a trauma informed lens. Supervisors are provided with a day of Improving Lives training focusing on the supervision relationship and are supported by Staff Supervision and Support Practice Guide.

Complex Case Panels

Anglicare established Complex Case Panels internal reflection and planning for employees working alongside clients with complex support needs. The process seeks to leverage the knowledge, skills and expertise of the panel members and the referring care team to support contemporary, high quality, evidence-based service delivery. Panel members work collaboratively with the team to develop and implement a risk management/action plan that provides clear direction, a fresh and creative perspective, decision making and recommendations for the next steps to support practice and encourage the development of best practice.

4. Data Collection and Reporting

4.1 Performance Management Framework and Performance Measures

The Department's Performance Management Framework for funded service providers sets out how the Department will monitor and assess all the outsourced service delivery contracts.

4.2 Queensland Care Services Outcomes Framework

The Queensland Care Services Outcomes Framework is the Queensland Government's commitment to operationalising the National Framework discussed

above. The OOHC Outcomes Framework provides domains, applications, outcomes, critical success indicators and measures of success for young people in OOHC. The framework states the following vision:

Children and young people in out of home care are safe and healthy, have a sense of belonging and wellbeing, and achieve their potential.

It also provides a principle of cultural integrity in care. SNAICC (2011, as cited in Queensland Government, 2021) stated that culturally responsive and safe care is about being part of a family, community, and extended network and knowing where you belong. Culture and identity as concepts are dynamic and must be prioritised as part of every child's daily life.

5. Foster Care Program Logic

Objective/s

To provide a safe, culturally responsive and stable family-based living environment for young people requiring OOHC. In this environment, they receive nurturing caregiving that meets their broad range of needs and supports them in reaching their full potential.

Needs Statement

There's a high and growing demand for foster care in Queensland, as more children and young people are entering the child protection system due to abuse, neglect or other reasons. As of 30/6/23, there were 4,238 young people in foster care arrangements in Queensland (Queensland Government, 2024). However, there is a shortage of available and suitable carers

who can provide safe, stable and nurturing care for these children and young people, especially for those with complex or special needs, such as Aboriginal and Torres Strait Islander children, children with disabilities, sibling groups, or older children. This shortage negatively impacts the wellbeing and development of children and young people in care and the carers themselves.

Children and young people in care may experience multiple care arrangement disruptions, reduced access to education, health and social services, loss of connection to their family, culture and community, and increased risk of harm or abuse. Carers may experience stress, burnout, isolation, lack of support and recognition, and difficulties meeting the needs of the children and young people in their care.

Inputs	Activities	Outputs	Short-term outcomes	Medium-term outcomes	Long-term outcomes
<ul style="list-style-type: none"> • Funding • Qualified and experienced staff and managers • Partnerships with organisations and stakeholders • Office infrastructure • Cars • Technology • Supervision and professional development • Practice Framework • Incidental resource (books, therapeutic tools). 	<ul style="list-style-type: none"> • Recruitment activities • Carer enquiries • Pre-service, standard and advanced training • Initial and renewal assessments • Home visits • After hours on-call • Placement agreements • Standards of Care matters • Carer transfers • Carer resignations • Support groups • Events • Referrals • Advocacy • Care planning. 	<p>Recruitment and Assessment</p> <ul style="list-style-type: none"> • No. carers • No. recruitment activities conducted • No. pre-service, standard and advanced training sessions • No. and profile of potential carer recruits who attended training sessions • % carers who completed the recruitment process • No. Initial and renewal carer assessments completed. <p>Support, monitoring and exit</p> <ul style="list-style-type: none"> • No. home visits completed • No. Standards of Care incidents • % complaints satisfactorily resolved • % carers with current placement agreements • No. carers exited. <p>Stakeholder satisfaction</p> <ul style="list-style-type: none"> • % stakeholders who report high levels of satisfaction with the program, feel that it meets the needs of clients, feel that it's a high-quality program, and would recommend the program to others. 	<p>Increase carer's knowledge, skills, confidence and connectedness, supporting them to provide high quality care and maintaining their motivation to continue to be carers.</p> <p>Carers have increased knowledge and skills about:</p> <ul style="list-style-type: none"> • child development ages and stages and impacts of trauma • positive parenting styles and strategies • how to manage challenging behaviours in their children • how to cope in difficult situations. <p>Provision of safe and nurturing care arrangements to children and young people</p> <p>Carers have increased knowledge about how to access support.</p>	<p>Safe and Nurtured</p> <ul style="list-style-type: none"> • Young people experience safety in their foster care arrangement, particularly safe and nurturing relationships with their caregivers and their material needs are met • Young people have stability with a reduced number of care arrangement breakdowns. <p>Connected</p> <ul style="list-style-type: none"> • Carers are more connected to personal, social, and professional resources that help them sustain high-quality caregiving practices • Young people and their carers have improved relationships with each other • Young people are positively connected to family, culture, and community • Young people feel a sense of identity and belonging. <p>Achieving</p> <ul style="list-style-type: none"> • Attend and engage in education • Meeting developmental milestones • Engage in, and benefit from, recreational activities • Developing independence and life skills. <p>Healthy</p> <ul style="list-style-type: none"> • Physically healthy • Emotionally and mentally healthy • Leading an active and healthy lifestyle • Young people can receive support that helps them manage the impacts of past traumas • Young people have improvements in their functioning in various areas (e.g. socially, emotionally, and behaviourally), which fosters healthy growth and development. <p>Resilient</p> <ul style="list-style-type: none"> • Feel confident and have social skills • Possess coping skills and an ability to manage adversity • Display positive and appropriate behaviour • Carers have increased skills, knowledge, and confidence to provide high quality care to young people. <p>Satisfaction</p> <ul style="list-style-type: none"> • Carers and stakeholders have high levels of satisfaction with the service, feel it is a quality service, feel that the client's needs have been met and that they would recommend the service to a friend or colleague. 	<p>Children and young people in and/or leaving foster care have improved:</p> <ul style="list-style-type: none"> • personal safety • quality of life • family and carer relationships • reunification opportunities • cultural identity and connections • social and community connections • life skills • stable and secure living arrangements • education and employment opportunities • access to services • prospects and reduced involvement with the justice system.

5.1 Theory of Change Statement

Underpinning the activities of the General Foster Care Program is a foundation of core principles and assumptions that are drawn from practice experience, the OOHHC literature and the Child Protection Act (1999) – Queensland.

To deliver quality services, it's Anglicare Southern Queensland's belief that:

- The welfare and best interests of young people residing in foster care are paramount
 - Foster care and care management practices are child-centred, and family focused. Foster carers will be supported through learning and development opportunities to meet the needs of young people in their care
 - Actions taken, whilst in the best interest of young people, seek to maintain family relationships and cultural connections
 - Quality foster care services should respect and recognise the importance of ethnic and cultural heritage, religious beliefs and language of young people and their families
 - Quality foster care is needs-based, trauma sensitive, and attachment focused. Carers and staff clearly identify, emphatically understand, and respond to the needs of each young person. They are sensitive to the effects of the trauma they have experienced and seek to develop caring and nurturing relationships to facilitate the healing process
 - Young people in foster care arrangements are supported to feel safe and be protected from further harm. It's in the context of this caring and nurturing family environment that emotional and psychological healing occurs, and the skills required for a successful transition to adult living are healed
- Young people need to be cared for within a healthy family environment that is characterised by positive parenting practices, including:
 - Structure and routine
 - Reasonable rules
 - Expectations and age-appropriate limits
 - Guidance, support and encouragement
 - Positive reinforcement
 - Fair, consistent and reasonable boundaries; and
 - Demonstrating tolerance for typical and/or symptomatic behaviour.
 - Irrespective of the extent of the young person's unacceptable behaviours, they're entitled to be listened to and treated with respect. Young people need to receive appropriate positive guidance to help them change inappropriate behaviours. Behaviour management and parenting strategies are consistent with the Statement of Standards (s122 of the Child Protection Act 1999) and the Department's Positive Behaviour Support Policy and Procedures
 - Young people are provided with age and developmentally appropriate opportunities to grow in identity, intimacy, and independence. They should also be able to engage in the full range of acceptable activities available to their peers in the general community
 - Positive experiences and participation in activities are essential for the young person's wellbeing. Opportunities to participate in critically important 'therapeutically based activities' are unconditional

6. Conclusion

The Anglicare Children and Families Foster Care Program has a long history of delivering family-based care in Queensland. The program strongly emphasises and responds to the unique needs of young people in OOHC and those that care for them. Anglicare's Children Youth and Families recognises the challenges that currently face OOHC but continue to be successful in being able to deliver the support required to establish and maintain a sufficient pool of quality

foster carers.

This Service Model aims to guide and direct staff in their work with foster carers, their families, and young people in general foster care arrangements. Staff should be able to draw on the Service Model to strengthen their roles with carers, young people, and stakeholders.

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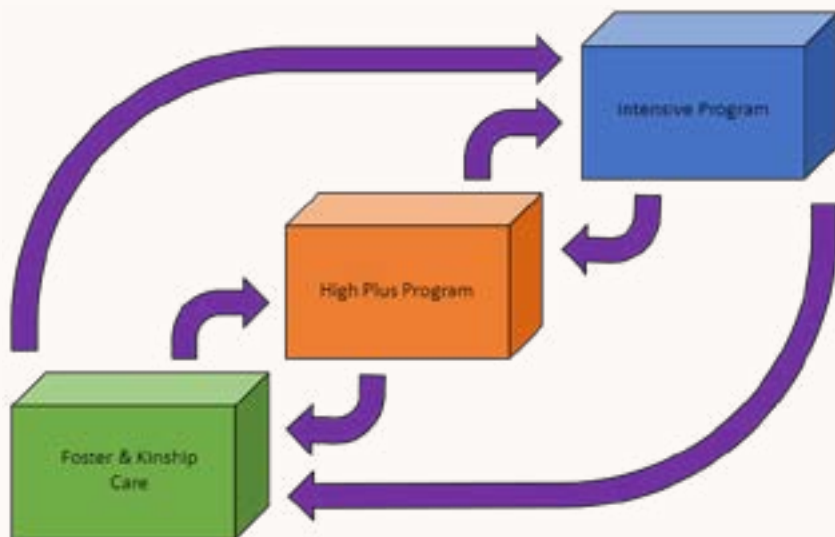
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Appendix A: Intensive and High Plus Programs



The High Plus and Intensive Programs provide a flexible, step up/step down model of support for Anglicare's foster and kinship carer.

This Appendix to the Family Based Care Models provides staff with information about the delivery of two complimentary sub-programs that meet the additional needs of children, young people and carers during times of high stress and care arrangement instability and those caring for young people with higher needs. The High Plus and Intensive programs include practical and therapeutic interventions to assist practitioners in supporting carers to manage challenging behaviour, build stronger relationships and promote emotional regulation in young people in care arrangements.

The work undertaken by the staff in the High Plus and Intensive Programs is underpinned by the Improving Lives Practice Framework. The Improving Lives Practice Framework is a 'bespoke' framework that reflects the mission and values of Anglicare and the specific needs of the young people in the Intensive and High Plus Programs. The framework is strengths-based, trauma-informed, and relationship-focussed.

High Plus

For Anglicare Southern Queensland's (Anglicare) High Plus Program, a separate High Plus support range was introduced by the Department to enable services

to provide additional and practical 'wrap-around' support for the care of a discrete number of young people to achieve one or more of the following core outcomes:

- Improve care arrangement stability
- Improve wellbeing outcomes for children and young people
- Supporting transition plans, including transitions to kin and/or positive connection with family.

The High Plus support can also be implemented where a carer's stress has the potential to impact the primary care arrangement, e.g., carer injury/hospitalisation, unexpected changes in employment, or having to care for an unwell relative temporarily.

The focus of the intervention is always the wellbeing of the child/ren, including facilitating their inclusion and participation (where appropriate) throughout the intervention period. A child-centred and family-focused approach ensures the child remains at the forefront while balancing the needs and support of the carer household. By building the carer's capacity and empowering them to continue to be successful once the intervention is complete, the child will feel and experience greater security, stability and safety.

Intensive Foster Care

The Anglicare Intensive Foster Care Program provides therapeutic support for children, young people and carers in foster and kinship care arrangements who are under stress, at risk of breakdown or require support to deal with the complexity of needs presented by the young person being cared for. The Intensive Foster Care Program provides the following activities:

- Carer education and training;
- Behaviour management and care arrangement support;
- In home support;
- Practical and financial assistance;
- Youth worker support; and
- Access to therapeutic and allied health services.

Carers and young people receive tailored trauma-informed intervention, which supports carers in understanding and responding appropriately to the young person's often complex attachment needs. The provision of specialised intervention to young people and their carers supports more sustainable care arrangements and, ultimately, better outcomes for young people in OOHC.

The Intensive Foster Care Program is part of Anglicare's continuum of care. It provides intensive intervention for foster and kinship families who are caring for young people with higher and complex needs or where the care arrangement is under stress, at risk of breakdown and/or a Standard of Care notification has been raised. Intervention is tailored to meet the individual needs of the young person by enhancing the carer family's capacity to meet those needs. Anglicare aims to maintain the stability of the care arrangement through education, information, and support in areas such as attachment and the effects of trauma on a young person, as well as through strategies to address related behaviours.

Core model elements

The core elements of the High Plus and Intensive programs are entry, assessment and planning, service delivery and exit.

Entry

Anglicare's High Plus and Intensive programs uphold the best interests of children within foster and kinship care arrangements by providing an avenue for flexible "step up, step down" support. The support is tailored to the individual needs of the child and/or carer family,

leading to increased stability and improved outcomes for children and young people in care.

Referrals to the High Plus and Intensive programs are received via three pathways:

1. Identified from existing primary care arrangements within the foster and kinship care program
2. Request from the Department for additional support
3. Placement Services Unit (PSU)/Placement Support Service (PSS) request to transfer a carer family into the service with a recommendation for High Plus or intensive support to be implemented.

The primary source of referrals is from existing care arrangements within the Foster and Kinship Care Program. It may become evident through the course of the Foster and Kinship Care Practitioner's support of a carer family that there is a need for additional support to be implemented. This may be due to a range of factors, including:

- Complexity of need for the child in care
- Care arrangement in jeopardy
- Additional child being placed in the carer's home
- Need for psychoeducation for the carer
- Carer's personal situation
- Multiple complex factors impacting care arrangement stability.

The Foster and Kinship Care Practitioner is responsible for completing the referral to the High Plus or Intensive program. For Intensive, the child's Child Safety Team Leader must approve the referral.

Referrals are reviewed and triaged to determine priority for allocation. If a referral cannot be allocated due to service capacity, it's placed on a waitlist. The waitlist and capacity are reviewed at regular intervals. If the program does not have the capacity for a PSU/PSS referral, the Coordinator advises the PSU/PSS of the approximate wait time for the High Plus/Intensive program, allowing for the PSU/PSS to determine if they will proceed with the carer transfer.

An entry meeting is held with the Anglicare care team, Child Safety Officer (CSO) (recommended, but not required for High Plus intake meetings), carer and the child/young person (if appropriate). The meeting is an opportunity to:

- Introduce the carer and child to the High Plus/Intensive program and practitioner
- Ensure all stakeholders are clear on the purpose of the referral

- Discuss care arrangement strengths and worries
- Explore goals and proposed interventions/supports.
- The High Plus care plan is developed during this meeting; however, for Intensive, the care plan is developed after an assessment period.

Assessment and planning

High Plus

The initial care plan is developed in consultation with the child/young person, the carer, the CSO and other key stakeholders. Using the Queensland Care Services Outcomes Framework domains, the plan will specify the support that is being provided. Support is goal-driven and is measured against definable and measurable improvements in strengths, attitudes, behaviour, values, skills, knowledge, and ability.

During the intervention, the care team will meet on a six weekly basis to review the High Plus Care Plan and make updates as necessary. The carer can share their worries and identify the support they need to reduce the stress or pressure within the home. The High Plus program may provide support in the following areas:

- Child focused therapeutic case work
 - Trauma-informed direct support, which may be in-home, in-school or other community-based settings
 - Supporting access to child-specific services, health and/or therapeutic services
 - Increased levels of in-home support, for example, work with the carer to develop and implement individualised and sustainable routines for children
 - Providing and/or facilitating access to specified training to meet the care needs of children in care arrangement
 - Care arrangement specific services (e.g. transportation, access to counselling for carers)
 - Participation in casework processes for children and young people in care to successfully manage transitions through their care journey
 - Improving stability
 - Working with the carer to improve their ability to provide skilled therapeutic parenting
 - Working with children and carer to improve children's self-efficacy, self-esteem and self-concept, which will then have a positive impact on social and emotional adjustment and behaviour.

- The Practitioner reviews care plans six weekly (at a minimum). At each stage, feedback is sought from stakeholders, and progress towards goals is reviewed. At the twelve-week review, a decision is made whether to close the High Plus support or if further support is needed, e.g., referral to the intensive program. On some occasions, all the High Plus goals may not be met in the 12-week intervention, and an extension may be considered.

Intensive

The Practitioner undertakes a comprehensive assessment phase (usually four to six weeks), focusing on building rapport with the young person and completing activities to assess how the child is progressing against the Queensland Care Services Outcomes Framework domains. Activities are focused on exploring a child's:

- Ability to form and maintain relationships
- Emotional wellbeing
- Ability to identify emotions
- Learning styles
- Strengths and challenges
- Self-concept
- Social skills
- Life skills
- Support network.

Tools used during the assessment phase may include:

- Three Houses
- The Future House
- Strengths and Difficulties Questionnaire.

The information gathered during this phase is used to develop the Intensive Care Plan. Plans usually have a maximum of four goals, with at least one goal focused on increasing the carer's skills and capacity to care for the child. The goals are established through a Care Plan meeting with all key stakeholders, including the child or young person.

The Intensive Practitioner reviews care plans on a six-weekly basis (at minimum). This is usually an internal process drawing on the child and carer's feedback on progress towards goals. Twelve weeks after the care plan was first developed, a full review is completed with the care team. The review evaluates the child and carer's progress towards goals and identifies goals that have been met and goals that have been unable to be achieved or need to be refined. The care team will decide whether the child will remain in the program for a further care plan period or begin the child's transition from the program.

If a decision is made for the child to continue in the program, the care team will develop a new care plan, building on the outcomes of the previous care plan.

Delivery – support and monitoring

High Plus

Anglicare’s High Plus Program provides:

- A twelve-week intervention period that can be extended once, but with the aim of being able to exit the program or, if further support is needed, step up into the Intensive Program
- Fortnightly visits with capacity to increase this as needed
- Focus on providing wrap around support for the carer, carer household or child during times of increased stress
- A range of carer supports, including:
 - Psychoeducation on trauma, attachment, child development, pain-based behaviours, or topics specific to the needs of the child, e.g., self-harm, foetal alcohol spectrum disorder
 - Advanced training (Circle of Security, Therapeutic Crisis Intervention for Families, PACE)
 - Getting Ready to Start Training for kinship carers
 - Carer self-care, building resilience, building a support system,
 - Practical support for the carer household, e.g., cleaning, meals, transport, babysitting etc.
- Supports for the child, including building community connections (e.g., sporting groups), cultural connections, life skills and social skills.

High Plus Child Related Costs and Brokerage of Services to Third Parties

Within this program, brokerage may be used to support stability, to achieve documented High Plus goals or to respond to one-off or emergent needs, including:

- Provision of specialist assessment, therapeutic and/or health services
- Engagement of youth workers to meet High Plus goals, e.g., transportation assistance, access to recreational activities
- Providing children and/or carers with equipment and resources to meet specific developmental needs of children. In some circumstances, this may be the only support required by the carer family
- Provide practical support to help with stability and continuity (e.g., cleaning service while a carer

recovers from illness, transport to/from school to support an emergency care arrangement). In some circumstances, this may be the only support required by the carer family

- Other activities and resources as required.

Intensive

Anglicare’s Intensive Program is a short-term intervention designed to provide weekly support to children and young people through one-on-one sessions. Intensive Practitioners hold small caseloads to allow them the capacity to develop a thorough and detailed understanding of the needs of each child. The Intensive Practitioner will complete specific goal-oriented work with the children, young people and carers. The program provides:

- A twelve-week intervention period that can be extended as needed but with the aim of being able to exit the program or step down into High Plus
- Weekly sessions with the child and/or carer
- Focus on building the carer’s capacity to respond and support the child
- Flexible support that adapts to the needs of the carer and child
- Flexibility with goals: they may evolve as the relationship with the child progresses
- A range of carer supports, including:
 - Psychoeducation on trauma, attachment, child development, positive behaviour support or topics specific to the needs of the child, e.g., self-harm, foetal alcohol spectrum disorder or mental health diagnoses
 - Advanced training (Circle of Security, Therapeutic Crisis Intervention for Families, PACE)
 - Development of self-care and/or safety plans
 - Support the carer’s capacity to learn and develop new skills
 - Support to work through blocked care and blocked trust
 - In-home support, e.g., support during transition times or times of high activity, role modelling how to support a child through an emotional/behavioural escalation, validation of a child’s feelings, etc
 - Transport support appointments
 - Relationship building/strengthening between the child and carer family
- Support for the child, including
 - Emotional regulation

- Protective behaviour education
- Social skills
- Education in healthy relationships
- Self esteem
- Grief and loss
- Life story work
- School support (including in school support, transitioning back to school following suspension/ period of disengagement)
- Improve sibling connection (i.e., through joint sessions with sibling(s))
- Positive behaviour support
- Transition to independence
- Community connection
- Cultural connection
- A range of therapeutic programs, including
 - Camps and school holiday programs focused on skill development and building connections
 - Partnerships to support attendance at external camps and programs
 - Cultural education, events, and activities
 - Program to improve self-worth, self-esteem, and resilience,
 - Program to support healthy relationships.

Regular communication with stakeholders is essential to the success of the Intensive Program. This ensures that all parties are aware of the child's progress, challenges, and achievements and ensures consistency in approach.

Exit

High plus

The High Plus Program is intended to continue for twelve weeks with an option for one extension. The Practitioner will facilitate a closure meeting with the carer and CSO. During this meeting, the Practitioner works through the closure summary, reflecting on whether progress towards goals has been made over the intervention period. This includes feedback from all stakeholders. A closure report is shared with the care team.

If a higher level of support is needed than what can be provided in the High Plus Program, consideration is given to stepping up to the Intensive program.

Intensive

The decision to exit a child from the Intensive Program is made collaboratively with the child and the care team. At either review point, it may be discussed and

agreed that the child is ready to begin their transition from the program. This is based on a range of factors, including:

- The reason for the referral is no longer relevant or present
- The child and carer have met all or most of the care plan goals
- The child and carer's willingness to continue with the program
- The program's ability to provide meaningful and purposeful support (i.e., referral to another service may be more appropriate).

Following the decision to transition the child from the program, the Intensive Practitioner will develop a transition plan to support the child through the exit process. This may involve:

- Providing the child with a transition calendar so they're aware of the time when the service ceases
- Gradual reduction in support (e.g., reducing visits from weekly to fortnightly)
- Reviewing with the child their support network, safe people, and community supports/connections
- Facilitating referrals to other services, including Anglicare's High Plus Program
- Gathering the child's feedback on their experience in the program
- Celebrating with the child when they 'graduate' from the program. The child may be provided with a scrapbook/journal detailing their journey with the program (photos, updates on their progress, goals they achieved, etc.) and a graduation certificate.

The Intensive Practitioner completes an exit report summarising the program's goals, progress, and recommendations and shares it with all members of the care team. If a gradual reduction in support is needed before returning to the Foster and Kinship Care Program, stepping down to the High Plus Program is considered.

Data Collection and Reporting

Performance Management Framework and Performance Measures

The Department's Performance Management Framework for funded service providers sets out how the Department will monitor and assess all the outsourced service delivery contracts.





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Anglicare Southern Queensland acknowledges the Traditional Owners of the lands on which our services now stand. We pay our respect to Elders – past, present and emerging – and acknowledge the important role of Aboriginal and Torres Strait Islander people in caring for their own communities.