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Service Stream	Families and Young People Services	Category	Foster and Kinship Care
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Purpose

- The welfare and best interests of children and young people residing in foster and kinship care is paramount.
- Quality foster care services should have respect for and recognition of the importance of ethnic and cultural heritage, religious beliefs and language of children and young people, their families.
- Continuity in the lives of children and young people in foster and kinship care is critical for psychosocial wellbeing. All efforts are taken to maintain continuity of relationships with family, friends, schools, and communities that the child/young person has previous links to.
- Assessment of the child's or young person's needs - An assessment of the child's or young person's needs is made prior to any placement, communicated to all parties concerned and updated regularly. The depth and type of assessment undertaken is determined by the funding level and program type detailed in the Service Agreement.
- Matching carers with children or young people – each child or young person placed in foster and kinship care is carefully matched with a carer capable of meeting her or his assessed needs and meets foster carer family agreed placement category as documented in carer agreements.

Scope

This procedure applies to all employees, volunteers and contractors engaged within Foster and Kinship Care (FKC) programs across Mercy Community (MC) – Families and Young People Services (FYPS).

This procedure relates to general FKC placements, Intensive Intervention Placement Support (IIPS), High Plus (HP) support programs, and Intensive Foster and Kinship Care (IFKC).

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1. Referral and matching – overview

- 1.1 This procedure relates only to the referral and matching of care arrangements. Support and intervention planning processes occur following this (refer to *FS PROC FKC Support and Intervention Planning* for actions following placement).
- 1.2 At times, regional Placement Services (PS) may express different practice standards regarding the referral of children/young people and placement with carers. Services will liaise with PS and workers regarding this.
- 1.3 Most referrals are received via the Department of Child Safety, Seniors, and Disability Services' (the Department's) Unify Portal. Prior to commencing intake duties, a delegated MC representative will make a Unify Portal access request to add the worker to the relevant service outlets, allowing access to view referrals on the Unify Portal. Upon cessation of a worker's employment with MC, the delegated representative will request that the worker's access to the Unify Portal be ceased.
- 1.4 All confirmed and accepted care arrangements will be entered into the Client Management System (CMS) under the child's name (or using the naming convention for unborn/newborn babies – First Name: *Unborn*, Surname: *Mother's Surname*) with the 'Teams' tab *Status* reflecting 'Pending' for actively seeking placement for child, 'Active' for placement sourced, and 'Inactive' when the referral is closed. Top *Status* on a Child or Carer file refers to a child/client receiving a MC service. This may indicate that whilst a child is no longer part of any FKC Team,

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they may be receiving a service through the Family Intervention Program (FIP). Completion of all minimum data fields is necessary for saving files, this includes 'Contact Details' and 'Cultural Background' tabs.

2. Carer and placement availability

- 2.1 A list of placement availability is available in the CMS (hereinafter referred to as Placement Availability List), which collects information from various tabs on Carer files. The allocated Business Support team members and FKC Practitioners will have access to the Placement Availability List, as required.
- 2.2 To view current placements available on the CMS; the CMS Foster Carer List page column selector provides for viewing both 'Carer Restrictions' outlining the carer's *Foster Carer Agreement* capacity, and 'Current Vacancy' outlining the carer's space in the household for a child's placement. Other columns that may be selected for intake purposes are 'Carer Preferences', 'Physical Address', 'Service Centre', '(Contact Details Extra Notes) Notes', 'Mobile Number'; or any of the worker's choosing.
- 2.3 Each allocated worker is responsible for ensuring that information regarding carer availability is updated with current and accurate information, as this informs potential care arrangements. It is the responsibility of the allocated worker to ensure that this information is updated regularly.
- 2.4 The Foster Carer List page can be exported to excel by right-clicking anywhere on the 'List' page and selecting 'Export'.

3. Referrals and matching: general foster care arrangements

- 3.1 Referrals for general foster care arrangements will be circulated via the Department's Unify Portal. Should referrals be received through other avenues, then workers should action these in accordance with agreed protocols for that region, in consultation with PS.
- 3.2 Each service will receive notification from PS of referrals for care arrangements that need to be responded to in the Department's Unify Portal. Each service will have an allocated intake worker who is responsible for monitoring and responding to the referrals received in a timely manner.
- 3.3 When notification is received of a care arrangement referral, the intake worker will:
 - Locate and review the referral for the child/young person using the Department's Unify Portal;
 - Consult the Placement Availability List. If a possible carer is identified, the intake worker will contact the allocated worker for the household (or line manager if allocated worker is not available) to discuss the possible care arrangement match; and
 - If the care arrangement match is deemed suitable, make enquires with the identified carer as to whether they are willing and available to make an offer of a care arrangement.
- 3.4 If the carer is willing and available to make an offer of a care arrangement, the worker will make an offer via the Unify Portal. When submitting an offer via Unify the worker will make an assessment around whether the care arrangement match is considered 'high', 'medium', or 'low'. For care arrangements that are assessed as "low", the line manager will be notified prior to an offer being made.
 - **Note:** Examples of a low match would include:

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- Where the proposed care arrangement is outside of the carer's Foster Care Agreement (FCA);
 - Where the proposed arrangement does not align with the care arrangement request (PS seeking a primary care arrangement but offer being submitted for an emergency care arrangement only); or
 - Where there is significant support needed or risk identified with a proposed care arrangement.
- 3.5 'High' and 'medium' matches can be approved by the Coordinator/Team Manager (TM)/Program Manager (PM). 'Low' matches and any potential placements involving a financial commitment by MC must be approved by the TM/PM/Senior Program Manager (SPM), in line with their financial delegation outlined in *GOV POL Delegation of Authority*.
- 3.6 If a care arrangement offer is accepted:
- 3.6.1 The worker will search the CMS to see if there is an existing CMS profile for the child/young person using the "Search" tab.
- **Note:** This function will show all fields created within the CMS Team allocated, whether the file is 'inactive', 'active', or 'pending'. If there is a profile created already, the profile will be made 'active'. If there is no existing CMS profile, the allocated worker will create a new profile by selecting the 'Level 4 Team' the referral was received by and create a new profile (following steps outlined in section 1.4).
- 3.6.2 Once an offer for a care arrangement has been accepted, the allocated worker will upload a copy of the child/young person's referral (exported from Unify Portal), a copy of the offer submitted to the Unify Portal (exported from the Unify Portal), and any other relevant placement documentation received and attach to the child/young person's and carer's profiles. The allocated worker will ensure that the worker supporting the carers is made aware that an offer for a care arrangement has been accepted so that the care arrangement can be recorded correctly (refer to 5. Placement Types below).
- 3.6.3 If PS accepts the placement offer, the allocated worker will liaise with the Department and the carer regarding transport of the child/young person to the care arrangement and a time to develop a *Placement Agreement*.
- 3.6.4 If an offer for a care arrangement has not been accepted by PS, the allocated worker will contact the carer and advise of the declined offer, and record a case note on the identified carers file noting that the offer has been declined.

4. No carers available or willing to offer a care arrangement

- 4.1 The allocated worker will respond on the Unify Portal in a timely manner that there is no carer willing and available to make an offer.
- 4.2 If carers were contacted but not available or willing to make an offer, a case note will be added to the 'Case Notes' tab of the carer's CMS profile, referencing the name of the child/young person they were approached for and reasons for them being unable to offer a care arrangement.

5. Placement types

- 5.1 The following Placement Types may be selected to record the whereabouts of children/young people receiving MC FKC services on the CMS:
- *'Kinship Primary'* – is used for all Clients placed with a Kinship Carer on an ongoing basis;

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- *'Kinship Respite'* – is used for all Clients placed in respite with a Kinship Carer within the same Team (i.e., receiving respite from Kin within the 'Team' that supports the Primary placement). A Client who attends respite with a kin member that belongs to an external agency or other MC FKC 'Team' is recorded as Respite External (see below);
- *'Kinship Respite – Incoming'* – is used to reflect kinship respite being provided for a child/young person from an external agency and/or other MC program;
- *'Primary'* – is used for all children/young people in ongoing placements. No need to close during respite;
- *'Respite – External'* – is used to reflect outgoing respite (i.e., the child/young person being placed with an external agency and/or other MC programs). This includes children/young people who leave an FKC service (e.g., FKC Greater Ipswich) to receive respite or primary care from another MC service (e.g., IIPS Greater Ipswich or FKC Toowoomba). Ensure the 'Team' is 'Set To' reflecting the 'Team' that is sending the child/young person away for 'Respite – External'.
- *'Respite – Incoming'* – is used to reflect respite being provided for a child/young person from an external agency and/or another MC program. This includes children/young people who are referred to an FKC service (e.g., FKC Toowoomba) who require placement from another MC service (e.g., IIPS Greater Ipswich) or an external agency.
- *'Respite – Internal'* – is used to reflect respite occurring within an FKC service (e.g., the child/young person is placed with another MC foster carer within the same 'Team').
- *'Emergency'* – is used for all Emergency placement circumstances.

5.2 For all placement End Dates in the 'Carers' tab, including respites, the last night (until 11:59pm) spent in the listed Carer's home is the date recorded in this column.

6. After hours referrals

- 6.1 Each service will allocate an 'On-Call Worker' to respond to placement enquiries received after hours. These referrals will be received from the Child Safety After Hours Service Centre (CSAHSC) as well as via the Unify Portal. Kinship Care, IIPS, and HP placements cannot be considered after hours.
- 6.2 Where The Department enquires about the possibility of a placement after hours, the On-Call Worker will:
- 6.2.1 Complete Part A of the *FS FORM FKC Interim and After-Hours Referral* to ensure that sufficient information is obtained about the child/children or young person/s to match sufficiently. If advised by CSSC that a referral has been circulated via the Unify Portal, search and review the referral on the Unify Portal.
 - 6.2.2 Consult the CMS Carer Availability list to determine whether any carers are available and willing to offer a placement.
 - 6.2.3 Make enquiries with potential carer options as to whether they are available and willing to offer a placement. The On-Call Worker will update the On-Call Manager if an offer is being made.
 - 6.2.4 Document enquiries with potential carers on the 'Case Notes' tab on CMS.

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6.2.5 Liaise with the CSAHSC regarding the outcome of the referral and, if accepted, the placement of the child/young person with the carer. If there is an active Unify Portal referral, respond on Unify Portal.

6.2.6 On the next business day, the On-Call Worker will complete records management duties, as per section 11 of this procedure.

7. Kinship care referrals

7.1 Referrals for support to kinship carers are made by the regional PS to the TM/PM. The TM/PM will ensure that PS has provided the following information:

- Any assessment information held by the Department relating to the kinship carers;
- Any Standard of Care information relating to the kinship carers; and
- Any current placement documentation.

7.2 The TM/PM will accept the referral within five (5) days of all relevant information being provided.

7.3 If the TM determines that the referral is inappropriate and will not be accepted, they will confirm this with the PM prior to advising the Department.

8. Referrals to IIPS and HP

8.1 Where new placements are established as part of an IIPS or HP service, the placement and matching process, outlined in section 3 of this procedure, must be followed.

8.2 Placements requiring additional support may be eligible for a referral to HP or IIPS services. Where this is being considered, this will be discussed between relevant CSSC staff and/or PS, the allocated worker, and the carer. Local Service Agreements are to be consulted regarding eligibility and support provision for these services.

8.3 If it is determined that a HP or IIPS referral is warranted and the placement meets the criteria for this, the *FS FORM FKC Intensive Program Referral* must be completed, specifying that an HP or IIPS placement is being requested. A Child Safety Officer (CSO) should complete this form, however, if the service holds sufficient information, an MC worker may complete it.

8.4 Following the receipt of the referral, the Team Manager/Program Manager will review the referral.

8.4.1 If the referral is accepted, the TM/PM will allocate the case and support will commence immediately (refer to *FS PROC FKC Support and Intervention Planning*).

8.4.2 If the referral is not accepted, the TM/PM will contact the Department to discuss the reasons behind this decision.

8.5 Where IIPS or HP support is to be provided to carers and children not supported by MC, new CMS files must be made for the carers and children.

9. Respite

9.1 Where a child/young person is not currently placed with MC and a referral is received via the Unify Portal, the general foster care referral and matching process applies, as per section 3 of this procedure.

9.2 Where referrals for respite have been received from other foster and kinship care agencies, regional process apply.

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- 9.3 Where a child/young person is currently placed with MC supported carers and requires respite, wherever possible, this will be sourced within the local MC carer pool.
- 9.4 Where a child/young person is currently placed with MC supported carers and requires respite and all internal options are exhausted, regional process apply.

10. Records management

- 10.1 For referrals that are placed:
 - 10.1.1 The *Top Status* will show 'Active'.
 - 10.1.2 The Intake Worker will update the 'Contact Details' tab to include the carer household and allocated worker's name into the 'Key Support Worker' section and 'Case Worker' section, 'Source of Referral' detailing the Child Safety Service Centre (CSSC) the child is case managed by.
 - 10.1.3 All documents pertaining to the placement such as the Unify referral, the Unify offer and confirmation that the placement has been accepted will be saved as a PDF and will be entered in to the 'Case Notes' tab and attached to this.
 - 10.1.4 The allocated worker will request that the Department provide a copy of the *Authority to Care* for the placement. This will also be attached to the relevant tabs in the Carer and Child's CMS files. The Carer CMS file is also updated with relevant correspondence regarding the carer and placement.
 - 10.1.5 The allocated worker will update information regarding the child/young person's new placement by linking profiles within the 'Carers' tab, added under the heading 'Worker'. Any connections to biological or foster siblings can be indicated under the heading 'Clients'.
- 10.2 Saving emails to Child and Carer files requires workers to export the email from Microsoft Outlook to PDF for uploading into the CMS.
- 10.3 All documentation is to be uploaded to the CMS within ten (10) working days. Where uploading is anticipated to take longer than this, workers must negotiate this with their line manager.
- 10.4 The Business Support Coordinator of the service is responsible for running weekly reports via Unify to obtain additional information regarding current offers, referral responses, and current referrals. This report is then saved to:
\\mercynet.net\Data\MercyNet\MCS\MFS\Global\Quality Registers\Client Incident Registers\Monthly Unify Reports

Definitions

Worker/Allocated Worker/FKC Practitioner

The employee who has been delegated by the line manager to undertake specific case management or placement support tasks.

Line Manager

Employees with supervisory and program management responsibilities within the fostering service.

Team Manager

Employees tasked with client care planning and care management oversight within the program.

Program Manager/Senior Program Manager

Employees tasked with day-to-day oversight MC programs. The Program Manager/Senior

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Program Manager reports to the Regional Director.

Regional Director

The manager with overall finance and program management responsibilities, who is a member of the leadership team.

References

Child Safety Practice Manual (CSPM)

Foster Carer Agreement (found on the Department's website)

Related Documents

FS FORM FKC Intensive Program Referral

FS FORM FKC Interim and After-Hours Referral

FS PROC FKC Support and Intervention Planning

FS WF FKC Referral Matching and Placement

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