

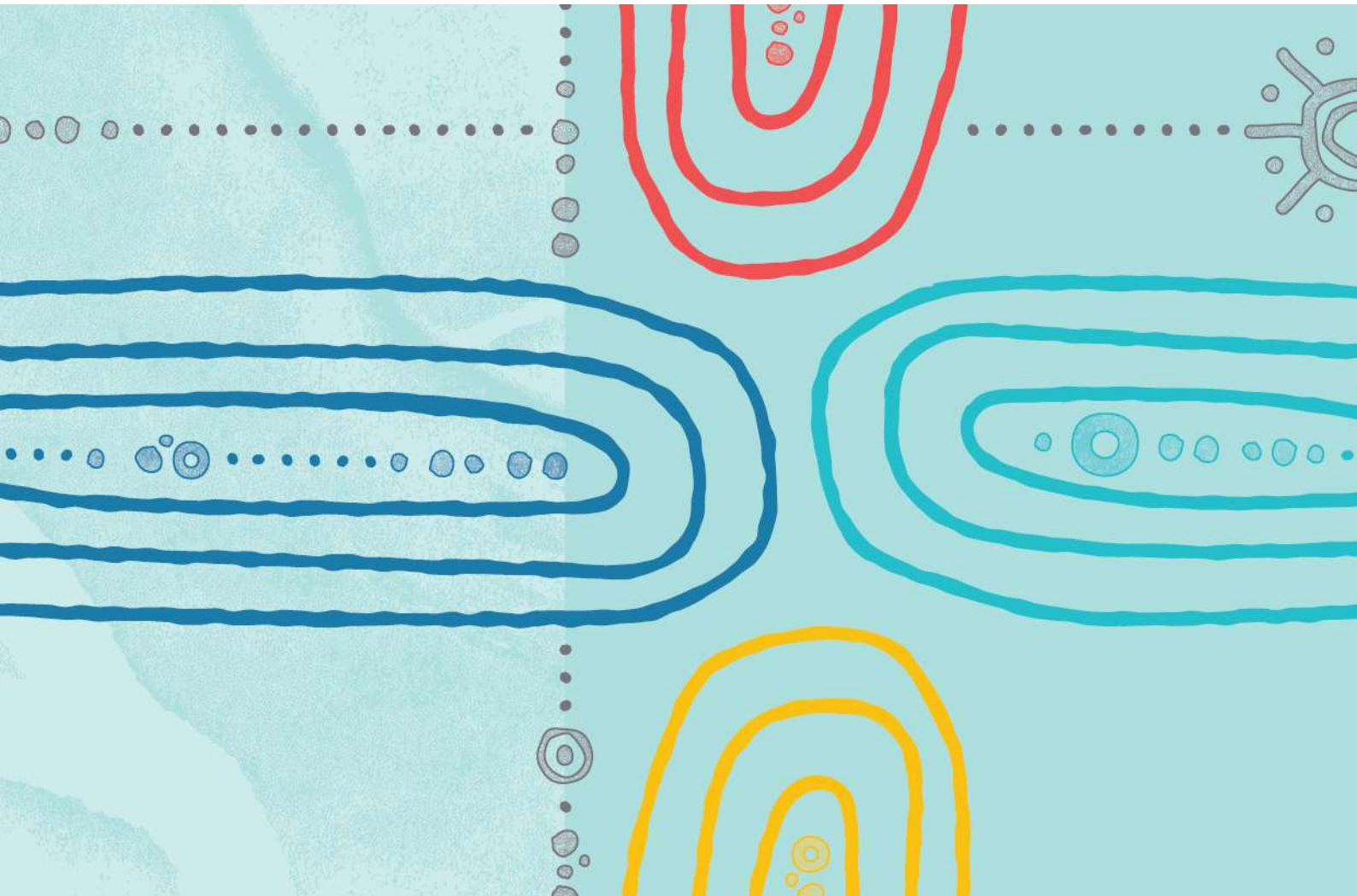


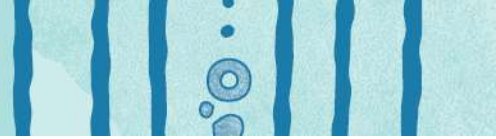
Government of **Western Australia**  
Department of **Communities**



# Out of Home Care Transition Guide

Children, Young People and Carers





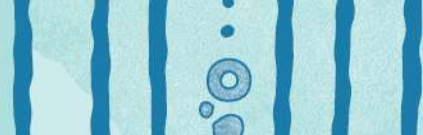
## Acknowledgement of Country

**The Department of Communities proudly acknowledges Traditional Custodians throughout Western Australia and recognises their continuing connection to their lands, families and communities. We pay our respects to Aboriginal and Torres Strait Islander people and cultures, and to Elders past, present and emerging.**



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# 1. Foreword

Since 2016, Department of Communities (Communities) has embarked on a significant Out of Home Care (OOHC) reform agenda. The OOHC system has been redesigned to align services with current evidence-based, trauma informed child protection case practice with a focus on reducing the number of children in care.

The key priorities of the sector wide reform include greater stability for children entering care and particularly for siblings remaining together; improved opportunity for early reunification and young people leaving care well prepared; greater cultural connection and a service system that is Aboriginal led; is flexible and needs driven with improved accountability and regulation.

For all children and young people – but especially Aboriginal children and young people – changes to the whole system will result in children being cared for in care arrangements that meet their physical, emotional, cultural, and spiritual needs in keeping with the Aboriginal and Torres Strait Islander Child Placement Principle.

With the development of the Out of Home Care Transition Guide - Children, Young People and Carers, in partnership with Yorganop Association Incorporated, we reconfirm our commitment to ensuring the best possible outcomes for children living in Out of Home Care in WA with the recommissioning of the CSO sector as the first step.

Communities, its carers and our OOHC Transition Team will continue to work collaboratively with service providers in the facilitation of a flexible OOHC service system to support the successful transition of children and carers.

I wish to acknowledge the input of our OOHC Implementation Team, Child Protection District Office staff around the state, sector peak bodies including Child and Family Alliance WA (CAFAMA), the community services sector and organisations, ACCOs and Yorganop for helping us to develop this guide. Your contributions to this work, our state and children and young people are very much appreciated and valued.

**Mike Rowe**

Director General

Department of Communities

A key focus of The Building a Better Future: Out of Home Care (OOHC) Reform in Western Australia, April 2016 (the Reform Plan), was the acknowledgement of the growing rate of Aboriginal children entering OOHC and a commitment by the Community Services Sector and the Department of Communities (Communities) to end this trajectory. Also significant was a commitment to reconnect children with culture, family and country.

Since the launch of the Reform Plan, Yorganop Association Incorporated (Yorganop), Aboriginal Community Controlled Organisations (ACCOs) and other OOHC Providers in Western Australia have been on a journey with Communities to re-design and improve the whole OOHC system to better serve Aboriginal families and children.

The launch of the ACCO Procurement Strategy; reformed legislation requiring Aboriginal Representative Organisations to be involved in care arrangement considerations to prioritise the placement of children in accordance with the Aboriginal and Torres Strait Islander Child Placement Principle and to prioritise cultural support planning; along with the reinvigorated National Agreement on Closing the Gap targets has created a space for the voice of Aboriginal people to be heard and for self-determination to prevail.

The OOHC Transition Guide (the Guide) has been developed jointly by Yorganop and Communities with consultation and feedback provided from OOHC Providers and members of the Children and Families Alliance Western Australia (CAFAWA). It comes following the long-awaited commissioning of CSO OOHC services in 2022-23 and is the first step in a broader plan for all children in OOHC. The Guide paves a way forward for the transition of children in care in the CSO sector and their carers to newly awarded service providers, including ACCO providers, entering the OOHC system. Yorganop is proud to contribute to the transition of care arrangements for Aboriginal children in OOHC to culturally safe and place-based providers.

**Dawn Wallam**

Chief Executive Officer

Yorganop Association Incorporated



## 2. Glossary of Terms

**Aboriginal and Torres Strait Islander Child Placement Principle** - the objective of the principle is to maintain connection with culture, family and country for Aboriginal and Torres Strait Islander children who are subject to a care arrangement.

In accordance with section 12 of the *Children and Community Services Act 2004*, when making a decision about the placement of an Aboriginal child under a placement arrangement, any placement of the child must, so far as is consistent with the child's best interests and is otherwise practicable, be in accordance with the following order of priority:

1. placement with a member of the child's family;
2. placement with an Aboriginal person in the child's community in accordance with local customary practice;
3. placement with an Aboriginal person who lives in close proximity to the child's community;
4. placement with either an Aboriginal person or with a non-Aboriginal person who:
  - a) lives in close proximity to the child's community; and
  - b) is responsive to the cultural support needs of the child and is willing and able to encourage and support the child to develop and maintain a connection with the culture and traditions of the child's family or community;
5. placement with a non-Aboriginal person who is responsive to the cultural support needs of the child and is willing and able to encourage and support the child to develop and maintain a connection with the culture and traditions of the child's family or community.

**Aboriginal Community Controlled Organisation (ACCO)** - an organisation that is:

- incorporated under relevant legislation and not-for-profit;
- controlled and operated by Aboriginal and/or Torres Strait Islander people;
- connected to the community, or communities, in which they deliver the services; and
- governed by a majority Aboriginal and/or Torres Strait Islander governing body.

**ACCO OOHC Provider** - a service provider that is an ACCO that has entered into a contract to provide OOHC services.

**Aboriginal Representative Organisations (ARO)** - organisations that support Aboriginal children in care to maintain and strengthen connections to culture, community, family and Country.

**Better Care, Better Services: Safety and Quality Standards for Children and Young People in Protection and Care** - the standards framework developed and adopted by Communities and the Community Services Sector in Western Australia for children in out of home care.

**Care arrangement** - a "placement arrangement" as defined in section 79(2) of the *Children and Community Services Act 2004*.

**Care Team** - the group of identified people who hold a shared responsibility for the planning and implementation of strategies and services to support a child in a care arrangement.

**Carer Transition Template** - to be used when a foster carer chooses to transition from one service to another. To be completed by the Outgoing Existing Provider and used in the Transition Meeting. The consent for exchange of information about the foster carer should be sought from the foster carer by the Outgoing Provider (current provider) prior to the Transition Meeting.

**Chief Executive Officer (CEO)** - the Director-General of the Department of Communities.

**Chief Executive Officer's care (CEO's care)** - children in the care of Communities as per section 21 of the Children and Community Services Act 2004.

**Care Arrangement Referral (CAR)** - the CAR provides relevant information about the background and needs of a child in care or who is entering OOHC including information pertaining to the family. The information is gathered across the nine dimensions of wellbeing and includes relevant aspects of a child's needs to be considered when determining the most appropriate care arrangement for the child.

**Child and/or Carer Transition Plan** - the plan developed at the Transition Meeting between the Outgoing Provider, the Incoming Provider and Communities. The plan details the transition of a child and/or their carer, where in the best interest of the child, or a child from one OOHC Provider to another or to a care arrangement with Communities or from Communities to another CSO OOHC provider.

**Child Transition Template** - to be used when a child is transitioning from one provider to another. To be completed by the Outgoing Provider and used in the Transition Meeting. The child should participate in the planning process as commensurate with their age and capacity.

**Community Sector Organisation (CSO)** - a non-government organisation providing out-of-home care services.

**Complex Care arrangements** - care arrangement type with intensive support for young people with the most complex needs.

**Contract Implementation** - the process to setup new services which is documented by the provider in their Implementation Plan. It may include set up of new service models; establishing service provision locations, plant and equipment; establishing administrative, service delivery, record keeping, reporting and financial processes; the recruitment of carers and staff; and the possible transition of children and carers.

**Existing OOHC Provider** - an OOHC Provider who has an existing contract with Communities to provide care arrangements for children in the CEO's care.

**Foster Carer** - volunteers who provide care to children who are unable to live with their birth families with a safe, stable and secure home environment. Foster Carers are



assessed and approved against competencies outlined in Regulation 4 of the *Children and Community Services Regulations 2006*.

**Foster Carer - Other Residence** - a person in an employment arrangement with a Community Sector Organisation or Aboriginal Community Controlled Organisation, who provides care to children who are unable to live with their birth families, with a safe, stable and secure home environment. Foster Carer (other residence) are assessed against competencies outlined in Regulation 4 of the *Children and Community Services Regulations 2006* via an employment process.

**Incoming Provider** - a Service Provider that has entered into a new contract to provide OOHC services. This can include an increased number of care arrangements, a new type of care arrangement or the delivery of services in locations new to the Provider.

**Needs Assessment Tool (NAT)** - the tool that is used to identify children's needs within a care arrangement, and associated level of supports required.

**OOHC Provider** - an ACCO or CSO contracted by Communities to provide care arrangements for children in the care of the CEO.

**Outgoing Provider** - an OOHC Provider whose contract with Communities to provide care arrangements for children in the CEO's care will cease or the number will reduce.

**Service Agreement Exit Plan** - a documented plan completed by the outgoing provider that should include tasks such as notification to key parties that the contract is ceasing; finalising administrative, service delivery, record keeping, reporting and financial matters; and the transitioning of children and carers. This document will be shared with the Communities Contract Manager as part of the exit planning process.

### 3. Purpose

The purpose of this Out of Home Care Transition Guide - Children, Young People and Carers (Guide) is to outline an agreed strategy between the community services sector, including Aboriginal Community Controlled Organisations (ACCOs), Community Service Organisations (CSOs) and the Department of Communities (Communities), to transition children and carers from the existing OOHC system to the future OOHC system. This includes transition of children, carers and agencies to the new care types and service models.

This Guide describes the roles and responsibilities of existing Out of Home Care (OOHC) Providers, newly commissioned OOHC Providers and Communities to facilitate the successful transition of children and carers across all care arrangement types.

Consistent with Closing the Gap, Priority Reform 2<sup>1</sup>, Communities acknowledges the key role of ACCOs in delivering better outcomes and employing more Aboriginal and Torres Strait Islander people to care for children in OOHC. Additionally, ACCOs have expressed their commitment to working alongside Aboriginal children, families, and communities to maintain a sense of identity and strong connection to family, culture, community, and country to achieve positive long-term outcomes for Aboriginal children and young people.

The preferred outcome is for children and their current carers to remain together and on Country, where Communities considers this is in the child's best interests. The goal is that no permanent or stable care arrangement will be disrupted as part of the transition from Outgoing Providers to Incoming Providers. However, it is acknowledged, in some instances, carers may not wish to continue caring for a child. In these instances, this Guide provides details of the process to be undertaken.

The Guide outlines that some situations will need to be addressed on a case-by-case basis as they will require an individualised response. This includes the need for flexible responses, for example, when cases involve keeping or bringing siblings together. Communities will be responsible for determining the appropriateness of any individualised response.

The success of this process depends on all stakeholders committing to engaging with each other in a respectful, open, and transparent manner. All parties involved must work together with the primary focus always being the best possible outcome for the child.

Communities along with ACCOs and CSOs have a shared responsibility to work collaboratively in the facilitation of a flexible service system.

This collaborative approach requires working together to:

- ensure the best interests of children are fundamental in all decision making and in accordance with Communities' care planning approach;

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<sup>1</sup> Closing the Gap, Reform Priority Two – Building the Community-Controlled Sector 2020. <https://www.closingthegap.gov.au/national-agreement/priority-reforms>

- provide trauma informed care arrangements;
- maintain existing relationships and attachments;
- and uphold the rights of the child or young person.

To support the successful transition of children and carers, Communities will establish an OOHC Implementation Team that will coordinate and facilitate activities related to the transition process. This team will include an external community stakeholder advisory group.

**Alternative accessible formats of this Guide are available upon request. Please email [OOHCcommissioning@communities.wa.gov.au](mailto:OOHCcommissioning@communities.wa.gov.au).**

## 4. Background

Over the last 15 years there have been significant changes in the Western Australian community. These changes have flowed into the OOHC system, putting extreme pressure on the system and providing the impetus for reform. These changes and pressures include:

1. Increased demand - growth in the proportion of Aboriginal children in care; increasing complexity of children's needs; and children entering care earlier and staying longer, all mean that the way services are currently provided are no longer fit for purpose.
2. Changing expectations - how human services are provided, in particular, services for Aboriginal children, families, and communities, is now very different.
3. Outcomes rather than activities - contemporary service provision focusses on outcomes being achieved rather than activities being delivered.

Starting in 2017, in response to these challenges, Communities embarked on a significant OOHC reform agenda. Since then, Communities has implemented significant reform actions including<sup>2</sup>:

- Partnering with the Secretariat of National Aboriginal and Islander Child Care (SNAICC) - National Voice for our Children to develop the 10-year Roadmap to Reducing the Number of Aboriginal Children in Care.
- Implementing the Outcomes Framework for Children in Out-of-Home Care in Western Australia.
- Prioritising strengthening connection to culture, family and country for Aboriginal children in care including partnering and investment with ACCOs.
- Developing staff and building capacity - increasing the number of staff and improving the quality of work with families, through Signs of Safety Reloaded.
- Innovation focus - doing things differently and intentionally to get better outcomes.
- Restructuring district service delivery teams.
- Commissioning and implementing the Earlier Intervention and Family Support Strategy and associated programs.
- State-wide roll out of Home Stretch WA to increase support for young people exiting the care of the CEO until the age of 21 years.
- Developing and implementing the Needs Assessment Tool (NAT).
- Developing the Care Arrangement Support Costs (CASC) model.

As part of its commitment to delivering better outcomes, Communities is undertaking a key component of its OOHC reform agenda – the strategic re-commissioning of the CSO OOHC system. This commissioning reform signals a significant step away from the current system and a shift towards:

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<sup>2</sup> Building a Better Future Out-of-Home Care Reform Program Roadmap 2019-2023.

- greater cultural connection, building on community strengths, and a service system that is Aboriginal led;
- a flexible and needs driven system, with improved accountability and regulation for both CSO and Government services;
- greater stability for children entering care with a key focus on siblings remaining together;
- improved opportunity for early reunification; and
- a focus on young people leaving care well prepared.

Communities is seeking an OOHC system for children and young people that is focused on the best interests of the child or young person; is coordinated, flexible and innovative; delivers quality services accountable to high standards; and is sustainable.

For all children, but especially Aboriginal children, changes to the CSO OOHC system will result in children being in care arrangements that meet their physical, emotional, cultural, and spiritual needs in keeping with the Aboriginal and Torres Strait Islander Child Placement Principle.

Communities OOHC Commissioning is informed by its work developing the Western Australian 10 Year Roadmap for Reducing Overrepresentation of Aboriginal Children in Out-Of-Home Care<sup>3</sup> which will inform the Western Australian Government's response to Target 12 of the National Agreement on Closing the Gap<sup>4</sup>.

Communities partnership with the community services sector has been a critical part of delivering an OOHC system that improves the life outcomes for children in the CEO's care. Communities has worked in partnership with the community services sector to develop a suite of care arrangement models to be implemented by ACCOs, CSOs, and Communities (see Diagram 1). These include:

- Emergency Care,
- Temporary Care,
- Community Foster Care,
- Family Care,
- Group Foster Care, and
- Complex Care.

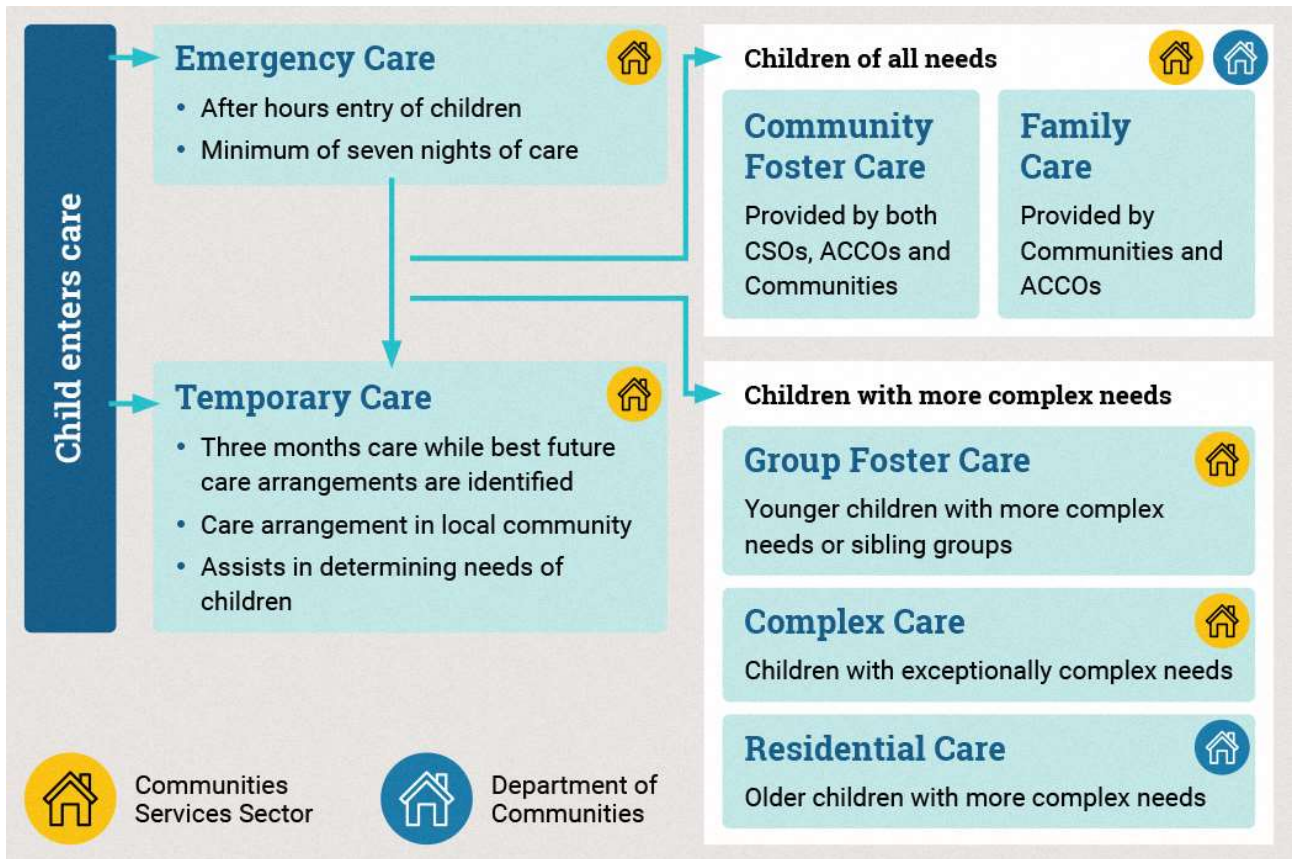
An overview of the OOHC service system can be seen in the below diagram.

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<sup>3</sup> Western Australian 10 Year Roadmap for reducing overrepresentation of Aboriginal children in out-of-home care: Background paper.

<sup>4</sup> Closing the Gap Target Outcome 12: 'By 2031, reduce the rate of over-representation of Aboriginal and Torres Strait Islander children in out-of-home care by 45 per cent'.





**Diagram 1: Suite of care arrangement models**

Communities will continue to provide OOHC services including Community Foster Care, Family Care, Residential Care and Secure Care. Communities will commission Emergency Care, Temporary Care, Community Foster Care (including Family Care), Group Foster Care and Complex Care services with a view to commence new contracts in 2023.

Planning is required for the cessation of current CSO contracts, the commencement of new contracts and the potential transition of children and their carers across the system.

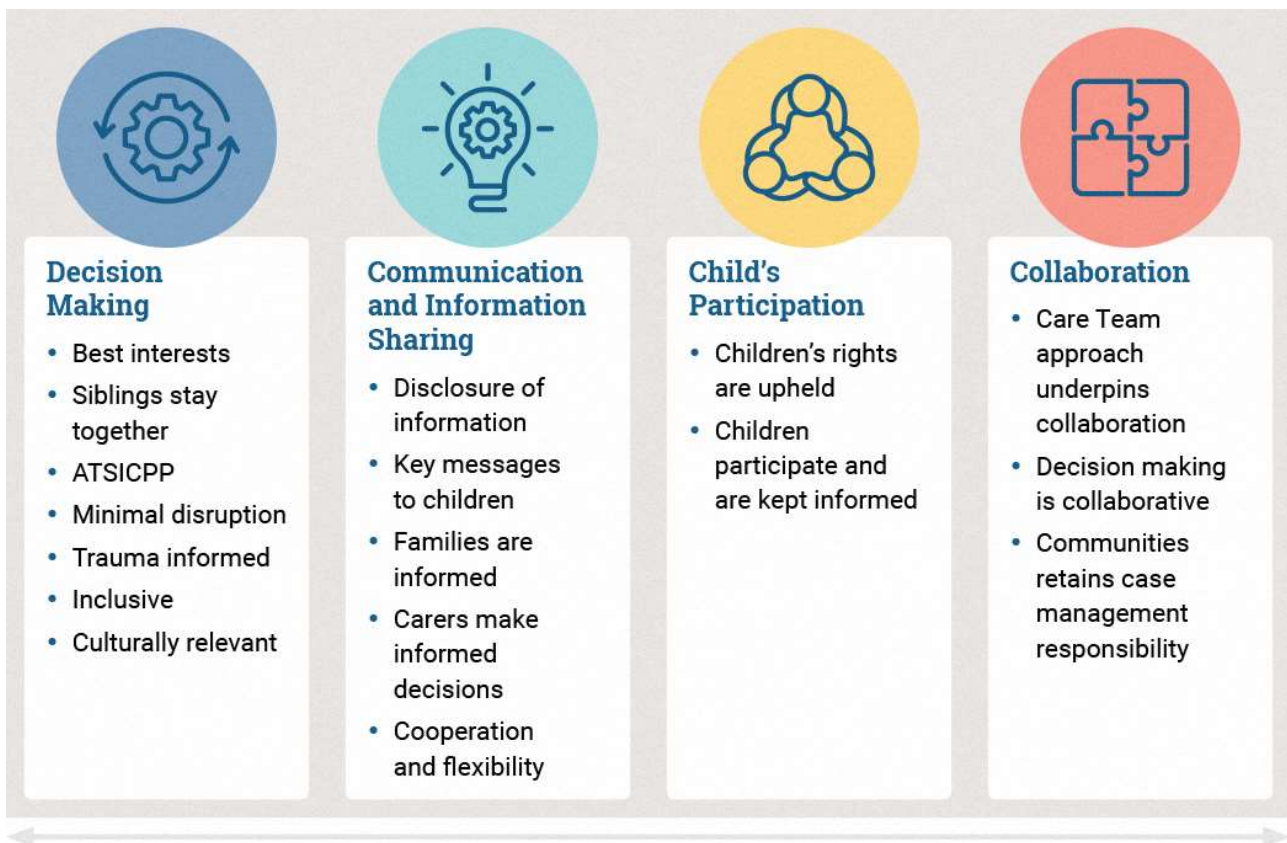
In 2022-23, Yorganop Association Incorporated in partnership with Communities and in collaboration with existing OOHC Provider members of the Children and Families Alliance Western Australia (CAFAWA) have revised and revamped the previous transition guide for CSO OOHC services and incorporated relevancy for the current OOHC environment. The revised guide is now known as the Out of Home Care Transition Guide - Children, Young People and Carers.



## 5. Guiding Principles

The information contained in this Guide is premised on 17 Principles. These principles were jointly identified by existing OOHC Providers and Communities through a co-design process and fall under four main themes:

1. Decision making
2. Communication and information sharing
3. Child participation
4. Collaboration



**Diagram 2: Guiding Principles**

The 17 Principles of this Guide are outlined below in more detail.

### Decision making

1. The best interest of each individual child is paramount in all decision making. Each child impacted by the transition process must have an individualised transition plan to identify and accommodate the child's needs.
2. Sibling groups will be placed in one care arrangement where it is in their best interest, and it is safe to do so.
3. The Aboriginal and Torres Strait Islander Child Placement Principle and the Culturally and Linguistically Diverse (CaLD) guidelines will be complied with to ensure care arrangements are culturally appropriate.

4. All decision making must occur in a manner that causes minimal disruption or change for the child. This includes consideration of location, proximity to family, therapeutic, social, and recreational factors, educational and health services, and maintaining existing relationships.
5. Decision making and practice will be informed by therapeutic and trauma-informed models of care.
6. An inclusive decision-making approach will be implemented. Differences of opinion will be worked through in a collaborative way with relevant parties and if necessary, involve intervention from the OOHC Implementation Team.
7. Where practicable, Aboriginal children and their carers in outgoing care arrangements (including any other children in the care arrangement) will be provided the opportunity to transition to a culturally appropriate care arrangement by an ACCO.

### **Communication and information sharing**

8. Disclosure of relevant information between all parties will be in the best interest of the child and in accordance with legislative and confidentiality requirements.
9. Information provided to the child, the carer and child's family during the transition period must include key messages to confirm to the child that any changes are due to OOHC system reform, not due to anything they have done.
10. Children and families will receive information, using culturally appropriate and trauma informed principles, and be given an opportunity to discuss and be involved in the transition process in advance of any changes to the child's care arrangement.
11. Carers will be provided with all relevant information to enable them to make informed choices about their future caring options. Communities partnership with OOHC sector organisations is based on respect, maturity, and acknowledgement of the strength of the working relationships. Open communication and face-to-face meetings are the preferred method for achieving successful transitions.
12. It is acknowledged that the transition process will have an impact on children, their families and carers, Communities and CSO OOHC Provider staff and systems. The process, therefore, requires cooperation, flexibility and planning by all parties that prioritise the needs of children and carers to enable seamless transitions. This includes flexibility to negotiate timeframes to support the success of the process.

### **Child participation**

13. Children's rights will be acknowledged and upheld during the transition period as per the Charter of Rights for Children and Young People in Care and the United Nations Declaration on the Rights of the Child 1990.
14. Children will be supported and empowered to express their opinion, to participate in the transition process and will be kept informed of, and made aware of, the decisions that are made. They will also be supported to access avenues to appeal decisions, if required (See FAQ 8 on page 39 of this guide for more information).

### **Collaboration**

15. A Care Team approach will be implemented to help OOHC providers and Communities support each other and the child, carer and child’s family throughout the transition.
16. An inclusive decision-making approach is to be implemented throughout the transition process. Differences of opinion in relation to decisions for children will be worked through in a collaborative way with all relevant stakeholders in the child’s Care Team including the child, where appropriate.
17. Communities as the holder of parental responsibility for the child and in line with legislative and practice requirements, is ultimately responsible for determining what is in the child’s best interest after consultation with all parties.

## 6. Transition of OOHC Care Arrangements

The possible outcomes for OOHC Providers, carers and children are summarised in the table below, followed by detailed descriptions.

Outcomes	
<b>Providers</b>	<ul style="list-style-type: none"> <li>• An existing OOHC Provider is awarded a contract for the same or increased number of care arrangements.</li> <li>• An existing OOHC Provider is awarded a reduced number of care arrangements.</li> <li>• An existing OOHC Provider is not awarded any care arrangements.</li> </ul>
<b>Carers</b>	<ul style="list-style-type: none"> <li>• Carer/carer (other residence) and child remain with existing OOHC Provider in same care arrangement.</li> <li>• Carer/carer (other residence) and child transition to an Incoming OOHC Provider</li> <li>• Carer/carer (Other residence) only transitions to a new Provider</li> <li>• Carer/carer (other residence) no longer provides care arrangement.</li> </ul>
<b>Children</b>	<ul style="list-style-type: none"> <li>• Child and carer/ carer (other residence) remain with existing OOHC Provider in the same care arrangement.</li> <li>• Child and carer/carer (other residence) transition to an Incoming OOHC Provider.</li> <li>• Child transitions to an incoming OOHC Provider, to a new carer/ carer (other residence) and a new care arrangement.</li> </ul>

### Outcomes for Providers

- An existing OOHC provider is awarded a service agreement for the same or increased number of care arrangements - in this case, carers with Aboriginal children in a care arrangement (and any other children within the care arrangement) will be given an

opportunity to transfer to an incoming ACCO. If the carer does not wish to transfer, there will be no change to existing care arrangements.

- An existing OOHC provider is awarded a service agreement with a reduced number of care arrangements - in this case, some of the children and carers will transition. In the first instance, carers with Aboriginal children in a care arrangement (and including any other children in the care arrangement) will be given an opportunity to transfer to an incoming ACCO OOHC. Following this, carers will be given the opportunity to transfer to other incoming providers, existing CSO OOHC providers or Communities.
- An existing OOHC provider is not awarded a service agreement. If this occurs, all children and carers will need to transition. In the first instance, carers with Aboriginal children in a care arrangement (and including any other children in the care arrangement) will be given an opportunity to transfer to an incoming ACCO. Following this, carers will be given the opportunity to transfer to other incoming providers, other existing CSO providers or Communities.

### Outcomes for carers and children

The needs of all children who are required to transition from an outgoing provider to an incoming provider will be considered on a case-by-case basis. Individual arrangements will be managed with the OOHC Implementation Team and worked through with the child's Care Team including the relevant outgoing and incoming providers.

Where an ACCO is awarded a Service Agreement to provide OOHC services, the child's Care Team will decide if it is in the child's best interest for the care arrangement to be provided by an ACCO. Considerations will include:

- if the child is Aboriginal,
- if the carer is Aboriginal (this is not an essential requirement),
- impact on any non-Aboriginal children in the care arrangement; and
- the carer's willingness to transition to an ACCO.

Given the preference to support Aboriginal children being cared for by Aboriginal carers or organisations, a foster carer and child may still transition to an ACCO even if the carer is currently registered to a provider who is awarded a service agreement for the same or increased number of care arrangements.

For children and carers who transition to an incoming provider there are two possible outcomes:

1. A possible match for both the child and carer/carer (other residence) to an incoming provider will be flagged by Communities and consultation with the outgoing and incoming provider will be undertaken, following the steps described in the 'Key Transition Activities' section of this Guide.
2. If the carer/carer other residence is unable to transition with the child, then the OOHC Implementation Team will match the child to a care arrangement that best meets their

needs. Only as a last resort will the possibility of the child being placed with a Communities carer be considered.

## 7. Roles and responsibilities

### Communities responsibility

**Contract Manager** - Contract Managers will provide support and advice on contractual requirements for both incoming and outgoing providers. The contract manager will coordinate contract meetings and discuss all contractual requirements and negotiate outcomes as needed.

**OOHC Implementation Team** - The OOHC Implementation Team will retain overall responsibility for the management and coordination of child and carer transitions and will guide and support the OOHC provider and Communities staff through the process. This may include liaising between providers and Communities to help identify the best care arrangements for children and carers that need to transition to new care arrangements; and identifying suitable possible incoming providers for carers without children who want to transition to an incoming provider. The team is responsible for ensuring compliance with legislative requirements related to the Aboriginal and Torres Strait Islander Child Placement Principle, CaLD guidelines and Care Planning requirements.

Once received from the outgoing provider, the OOHC Implementation Team will review and forward the Child Transition Template, Child Information Placemat, and Carer Transition Template (see Appendices 4 to 6) to the most suitable incoming provider at least five (5) working days prior to the scheduled Transition Meeting.

The OOHC Implementation Team may also facilitate access to additional supports, assist in negotiating time frames, review transition decisions and work through individual scenarios on a case-by-case basis.

During this process, the outgoing provider should be involved in the discussions about suitable options for their carer/child and should be maintained as the primary communication conduit to their carer until the transition is complete.

**District Office** - The district office will advise the CSO agency if a child and their family need to transition. The CSO will gather the necessary information to pass onto the incoming provider and will participate in the matching process. All decisions to transition the child or children from their existing care arrangement will comply with legislative requirements including the Aboriginal and Torres Strait Islander Child Placement Principle, CaLD Guidelines and a modification or review of the Care Plan.

The NAT is required to be updated for all children in care as a priority for the new CSO contracts. The district should also complete the Care Arrangement Referral (CAR) and forward this along with other relevant information to the Child and Carer Connection Hub (the Hub) to commence a matching process where children need to transition.



The district office attend the Transition Meeting, which can be combined with other care planning forums or be a separate meeting. The district office will record the transition plan decisions and follow up actions on the Record of Transition Meeting Template (Appendix 7) and distribute to all parties. The district office is responsible for ensuring someone is allocated to inform the child, their family and Care Team of the transition decision and Transition Plan. Where possible the current CSO agency will inform the carer/carer (other residence) and the child in their care.

The district office will also attend a welcome meeting. This can occur as part of other planning forums or as a separate meeting. At this meeting the district office will confirm plans for the physical transition of the child (if required) and plan for the modification of the Care Plan and other case planning documents including any needs based funding allocation. The outgoing CSO should be a part of this meeting to ensure a smooth handover.

**Child and Carer Connection Hub (the Hub)** - the Hub will assist with the matching process, as needed. In the rare instance a carer cannot transition with the child, the Hub is responsible for matching children transitioning to a new care arrangement (that is, transitioning without their carer). The Hub may also participate in the Transition Meeting.

### OOHC Provider's responsibility

Once notified of the procurement outcome, OOHC providers will attend a Contract Meeting with their appointed Communities contract manager to plan for transitions.

Outgoing providers will notify carers of the procurement outcome specifically as it effects them and if required, obtain their consent to release their carer assessment information as part of the transition process if they wish to transition.

Using the Child Transition Template, Child Information Placemat, and Carer Transition Template, outgoing providers will advise the OOHC Implementation Team of the children and carers that will transition together, carers without children who want to transition to an incoming provider, and children who will transition without a carer. This information is to be provided to the OOHC Implementation Team at least ten (10) working days prior to the scheduled transition meeting.

Outgoing providers will provide information and support to carers and staff during the process to enable a smooth transition to an incoming provider.

Relevant staff from the outgoing provider and incoming provider attend the transition meeting arranged by Communities and develop the Transition Plan. Following the transition meeting, the outgoing provider will share the plan with the carer.

The outgoing and incoming providers will attend the Welcome Meeting arranged by Communities to introduce the child and carer to the incoming provider and to confirm the arrangements for the physical transition of the child. This requires cooperation, flexibility and planning by all parties that prioritise the needs of children and carers to enable a seamless transition.



## Communities and OOHC Provider's joint responsibility

**Child participation** - Communities and the OOHC provider are jointly responsible for engaging children in the transition process and giving them a range of age-appropriate options to be included in the transition planning. It is expected children are supported to understand and participate in a way that is appropriate to their age and stage of development, culturally appropriate and trauma informed. This would occur through direct contact and communication with the child and through existing tools used in engaging with children and gaining their views, including:

- Ongoing meetings and catchups
- Viewpoint;
- Genograms; and
- Ecomaps (consult with Communities about the sharing of these tools).

Utilisation of the Signs of Safety Practice Framework is also an important part of working with children and young people to obtain their views. Signs of Safety engagement tools include:

- Three Houses Tool;
- Fairy or Wizard Tool; and
- Words and Pictures Explanations.

These tools should be used during the planning stages of the transition process as well as to assess how the child has settled post-transition by the worker closest to the child. This may be the CSO case worker and/or the Departmental caseworkers.

It is important that additional supports including speaking with the Advocate for Children in Care, counselling and emotional support are available and provided to the child during this time as required.

**Care Team Approach** - Communities, OOHC providers and other members of the care team will work together to support and enable the transition of carers between providers as appropriate. It is imperative that the care team work together, are seen by the child to be working together, and make joint decisions in the best interest of the child.

The Responsibilities Checklist (see Appendix 8) provides a summary of the transition activities each party is responsible for.

Details of the key transition activities required to provide a transition from the current OOHC service system to the future OOHC service system are outlined in the following section and relevant templates are included in the Appendices.

## 8. Key Transition Activities

The key activities that make up the transition process are summarised below.

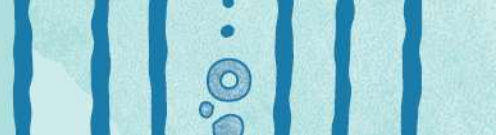
Pre-Transition		
<b>Procurement Outcome</b>	Communities sends unsuccessful Letter to outgoing provider; or	Communities sends Award of Contract Letter to incoming provider
<b>Contract Meeting</b>	Contract Manager meets with outgoing provider to develop and implement Service Agreement Exit Plan; or	Contract Manager meets with incoming provider to confirm details of the new service agreement and commence Contract Implementation Plan.
<b>Matching Process</b>	<p>Communities reviews all children placed with existing providers; maps children and carers impacted and identifies possible matches for transition. OOHC Implementation Team assists in identifying the best care arrangements or incoming provider with the assistance of the outgoing provider.</p> <p>Information is shared with incoming providers for provisional acceptance of potential transitions. Child's case management team, foster carer, existing service provider are consulted along with the child and their family members; approval is provided from district office.</p>	

### Step 1: Transition Meeting

#### Prior to Meeting

- outgoing provider notifies impacted carers of the procurement outcome, discusses options, obtains views, and confirms their written consent to share information; completes required templates and sends to Communities 10 working days prior to meeting. Provides information or support to carers.
- Incoming provider receives child and/or carer information; undertakes carer transition process; participates in matching process; accepts referrals.
- The OOHC Implementation Team coordinates flow of information and tracks progress of transition.
- District office notifies family and significant others, ensuring their views are considered in the matching process and transition planning. Should a new care arrangement be required, the district notifies family and updates NAT and CAR, sending to the Hub and OOHC Implementation Team, if required.

#### At Meeting



### Step 1: Transition Meeting

- OOHC Implementation Team ensures compliance with legislative requirements and tracking of transition activities.
- Outgoing provider and incoming provider develop transition plan.
- District office attends meeting; records transition plan decisions; informs child, family and care team of the transition decision and transition plan.
- Outgoing provider informs carer of the outcome.

### Step 2: Welcome Meeting

#### At Meeting

- Outgoing provider introduces carer and child to incoming provider; confirms arrangements for physical transition.
- Incoming provider confirms arrangements for physical transition.
- District office plans for the physical transition of the child (if required).

#### Post Meeting

- District office modifies or reviews the care plan and other planning documents.

## Pre Transition – Contract Meeting

### What is the purpose?

The purpose of this meeting is to:

- confirm and discuss the details of the new service agreement, including the care arrangement types, number, and location with the incoming providers.
- discuss and initiate contract implementation with incoming providers that have been awarded service agreements.
- discuss and initiate service agreement exit plan for outgoing providers that have not been awarded a service agreement or who have been awarded a reduction in care arrangements or types, and locations.

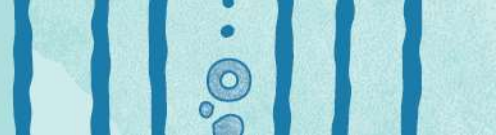
Contract implementation may look different for each provider.

The following considerations may form part of the Service Agreement Exit Plan:

- notification to staff and Board of Management by providers
- risk and mitigation strategies
- notification to children as needed
- notification to carers as needed
- finalising administrative requirements



- finalising end of contract requirements as relevant, including assets inventory and property inspections
- finalising accounts and preparation of financial reports as required
- final hand-over
- the transitioning of children and carers – as per the process in this Guide.



### **When is it undertaken?**

An initial contract meeting is held once service agreements are awarded. Additional contract management meetings will be completed to support the implementation, commencement and exit planning as required.

### **Who is responsible?**

The contract meeting is arranged and chaired by Communities and recorded by Communities' contract managers who will distribute the recording to relevant parties.

### **Who attends?**

The meeting is attended by Communities' contract manager, the incoming or outgoing provider, the Hub staff and district office staff as appropriate.

## **Pre transition - Matching process**

### **What is the purpose?**

The purpose of the matching process is to match children and carer/carer (other residence) who need to transition from an outgoing provider to an incoming provider. It is a collaborative process between all parties involved in the care of a child or young person.

Matching may also be required for a child to a new care arrangement, in some instances, where the carer/carer (other residence) is unable or unwilling to transition with the child. In these circumstances, the district office will ensure the NAT has been updated, complete the CAR, and forward this to the Hub to commence a matching process.

### **When is it undertaken?**

This process is undertaken once outgoing providers have been notified of the procurement outcome, identified the care arrangements that will be impacted and prior to the transition meeting.

### **Who is responsible?**

The matching process is actioned by the Communities OOH Implementation Team and the Hub matching team.

### **Who is involved?**

Matching is a collaborative approach with all parties involved in the existing and ongoing care of a child or young person.

- A review of care arrangements will be conducted by the OOH Implementation Team and the Hub, in consultation with the child's Communities child protection worker, service providers, the child, their carer, the child's family and community.
- The outgoing and incoming providers participate in planning processes with Communities for the transition and ongoing care of the child. Planning around care arrangements is a collective effort, with collaboration between Communities and service providers needed to identify the approach best suited to the child or children involved.



- Responsibility for approval of care arrangement decisions remains with the district office.
- As a volunteer, the foster carer retains the right to choose the service with which they engage. Should a foster carer decide to remain with an existing service provider, the ongoing care arrangement of the child will be assessed in accordance with the considerations outlined in the Factors Impacting Transition Decisions document (Appendix 2).
- As part of this process, in the event there is a non-Aboriginal child sharing the same care arrangement as an Aboriginal child, consideration must be given to the impact on the non-Aboriginal child transferring to an ACCO and ensure that all decisions are in the best interest of the child. The decision making and matching of children and young people into care arrangements with ACCOs is informed by the Factors Impacting Transition Decisions (Appendix 2).

## Step 1 - Transition meeting

### What is the purpose?

The Transition Meeting is held to jointly develop and agree to a Transition Plan for the child and/or carer/carers (other residence). The meeting provides a forum to address issues regarding the transition of a child and/or a carer transitioning from one provider to another. Any decision to transfer a care arrangement must give due consideration to the Factors Impacting Transition Decisions (Appendix 2).

Prior to the Transition Meeting, the Child Transition Template (Appendix 3), Child Information Placemat (Appendix 4) and Carer Transition Template (Appendix 5) need to be completed by the outgoing provider for each child and carer. This will create the agenda for the transition meeting.

These templates along with the foster carers consent to release their carer assessment information and agreement to participate in the transition process must be completed by the outgoing provider and provided to the Communities OOHC Implementation Team at least 10 working days prior to the Transition Meeting.

The completed templates will be reviewed by the Communities OOHC Implementation Team and forwarded to the incoming provider at least five (5) working days prior to the transition meeting. Incoming providers should consider acceptance of assessed carers from other providers in a timely way and support a smooth transition for carers, especially when they are existing carers of transitioning children.

The Transition Checklist (Appendix 6) provides a list of items to be considered during the transition meeting. All discussions and decisions from the meeting are recorded on the Record of Transition Meeting (Appendix 7) by the Communities team member. The child must be notified about the pending transition by the CSO and the family by the district office

### Transition of child and carer



In cases where the child is transitioning with their existing carer, the [Carer Transition Process](#) must be followed, as described in section 11 of this Guide.

Where possible and appropriate, the transition of more than one child between an incoming provider and an outgoing provider can be discussed at the transition meeting. The appropriateness of this must be agreed to beforehand by all parties; however, a detailed transition plan must be developed and recorded for each individual child by the outgoing provider in the record of transition meeting (Appendix 7). In some cases, more than one district officer may be present at these meetings if multiple children from different districts are involved.

Where practicable, carers with Aboriginal children in a care arrangement will be provided an opportunity to transition to an ACCO.

### **Transition of carer only**

Should an approved carer without children in their care wish to transition to an incoming provider then the Carer Transition Process will be completed.

### **Transition of child only**

In situations where a child is transitioning without their existing carer/carer (other residence), the Communities' child protection worker must ensure the NAT is updated and an updated comprehensive CAR provided.

This will be sent to the Hub to locate a suitable care arrangement and a matching process will be undertaken based on the Aboriginal and Torres Strait Islander Child Placement Principle, CaLD guidelines, needs of the child and the availability of the required model of care arrangement across OOHC providers.

Once a care arrangement has been identified, the Hub will refer the case to the relevant incoming provider and in consultation with the district office will commence the care arrangement process.

Where possible, Aboriginal children will be provided a care arrangement by an ACCO.

### **Transition of Group Care Arrangements**

Transition of group care arrangements will be underpinned by transition guiding principles and key activities outlined above. Where there is significant disruption to a group care home; such as change of carer (other residence), or physical relocation, the children and young people impacted by the transition from one service provider to another must be provided with a clear developmentally appropriate explanation of why the transition is occurring, outlining what changes are going to occur, and an estimated timeline to help them manage any significant changes.

It is important in group care arrangements that the child/young person's views are considered in any transition process. The child's view will form a significant part of the transition plan and will be key to successful transition.

There is an expectation that the outgoing care provider will provide all relevant information relating to the care needs of the individual children in the care arrangement, as well as general routine and operations of the household.

Communities should ensure that the CAR and NAT are up to date and shared with the incoming service provider. Where safety planning is required, it should be relevant to the child or young person's individual needs, and subsequent to any safety risk Communities has assessed the child or young person may pose to other children in the group care arrangement. Where possible, siblings should be supported to remain together.

### **Transition of Complex Care Arrangements**

Transition to complex care arrangements will be underpinned by transition guiding principles and key activities outlined above. Complex care arrangements are designed to provide intensive support to children and young people who are assessed as having the most complex needs. Children and young people in a complex care arrangement will often be cared for by a carer (other residence).

Communities will determine the suitability of a complex care arrangement for the child, young person or sibling group. It is crucial in complex care arrangements, that the child's views are considered and inform any transition. Most children/young people who transition into complex care arrangements are likely to be adolescents, and should be involved in decisions that are made about their care arrangements. The child's view will form a significant part of the transition plan and will be key to successful transition.

A collaborative Transition Plan will be developed, inclusive of all relevant parties, that considers the child or young person's specific individual and complex needs. For complex care arrangements, children and young people who are transitioning will present with high level behaviours, and are likely to have been involved with other services. It may be relevant to include key agencies or services linked to the child during the transition planning process. For example, The Department of Justice where the child or young person is subject to Youth Justice Orders, Police if they are a recidivist offender and/or subject bail conditions, or the Department of Health where the child or young person has significant medical or mental health needs. The Transition Meeting may also include contingency/safety planning around specific behaviours such as absconding and substance use.

### **When is it undertaken?**

The transition meeting occurs once the contract meeting is completed and the outgoing provider has identified the care arrangements that will be impacted. It is vital the transition meeting occurs as soon as possible to enable the joint planning for the successful transition of the child and where possible and appropriate, the carer/carers (other residence).

This meeting could be part of an existing care planning process or a separate meeting.

### **Who is responsible?**

The Transition Meeting is arranged and chaired by the outgoing provider (Team Leader or Assistant District Director) and recorded by Communities' child protection worker on the Record of Transition Meeting (Appendix 7) and distributed to all parties.

### **Who attends?**

The Transition Meeting must include staff from:

- the outgoing provider - case manager, if possible;
- the incoming provider - case manager, if possible;
- Communities, including, the child's child protection worker and other relevant district office staff such as the team leader, Aboriginal Practice Leader, CALD officer and Assistant District Director; and
- OOHC Implementation Team (if required or complex).

## **Step 2 - Welcome meeting**

### **What is the purpose?**

A Welcome Meeting is held to plan for the transition of a child and/or carer (other residence) from an outgoing provider to an incoming provider and, where required, this will include planning for the physical transition. The welcome meeting may be held at the child's home or at an alternative location, as appropriate.

The welcome meeting is held to:

- confirm the physical transition timeframes and arrangements;
- develop the individual case plan for the child (or arrange a meeting to develop an individual case plan);
- develop a carer support plan for the carer/carers (other residence) and plan for their induction into the organisation;
- confirm the roles and responsibilities of each party in relation to the settling in period; and
- update contact details of each party.

### **When is it undertaken?**

In situations where the child is transitioning with the carer/carers (other residence), a welcome meeting may be held directly following the transition meeting, however if this is not the case, it should take place prior to the child or carer transitioning to the incoming provider.

This meeting could be part of an existing care planning process or a separate meeting.

### **Who is responsible?**

The welcome meeting is arranged by the incoming provider. Any actions from the welcome meeting are recorded by Communities' child protection worker and distributed to all parties.

### **Who attends?**

The welcome meeting will include:

- staff from the incoming provider - including the case manager;
- case manager from the outgoing provider;
- the child, where age and stage appropriate;
- the carer/carer (other residence);
- Communities child protection worker and other relevant workers, such as, the Team Leader, CaLD Officer, Aboriginal Practice Leader and/ or Assistant District Director; and
- other members of the child's Care Team, as appropriate, including the Advocate for Children in Care, where relevant.

The below diagram demonstrates the child's journey throughout the transition process.

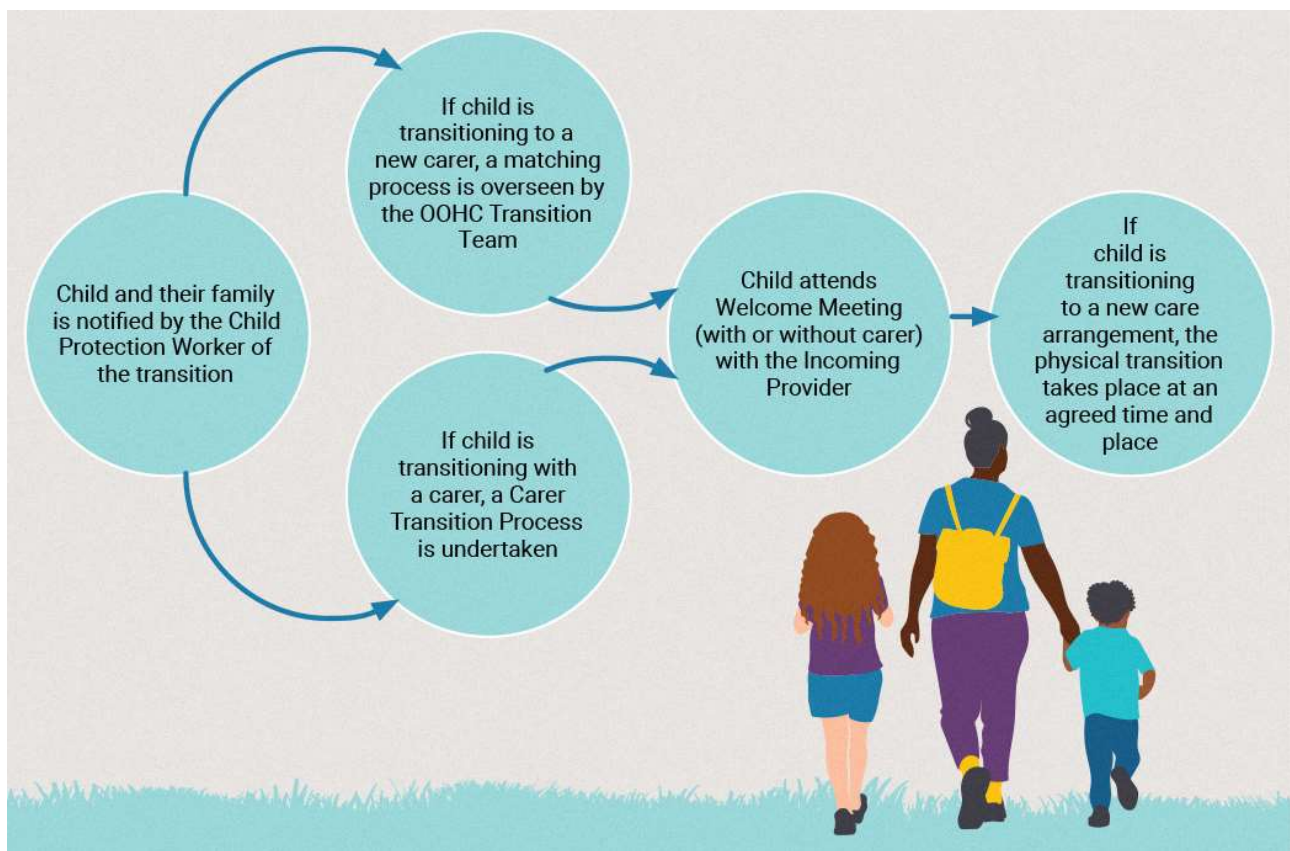


Diagram 4: Child and Carer Transition Journey

## 9. Review of transition decisions

### What is the purpose?

The purpose of this process is to discuss and mediate any disputes between Communities and the incoming or outgoing providers regarding transition planning. A child who disagrees with the transition decision can access the Child Advocate to assist them in ensuring their point of view is heard.

### When is it undertaken?

The district office or the incoming or outgoing provider may communicate to the OOHC Implementation Team that there is a difference of opinion relating to a transition decision that requires third party mediation.

The incoming or outgoing provider and Communities will work to resolve the differences quickly. If these differences can not be resolved, the OOHC Implementation Team will manage the dispute resolution process. More detail is available in the Factors Impacting Transition Decisions, (Appendix 2).

This process can occur at any stage during transition planning.

Communities is ultimately responsible for the final decisions about transition for a child.

### Who is responsible?

The Director of the OOHC Implementation Team is responsible for chairing a meeting between representatives of the incoming or outgoing provider and the relevant district office staff. Formal notes and outcome will be recorded and distributed to both parties at the end of the process.

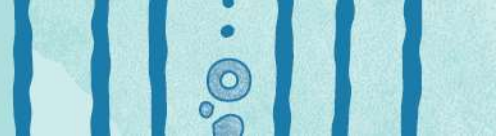
### Who attends?

- Staff from the incoming provider including service manager and team leader
- Staff from the district office including Assistant District Director, Team Leader Aboriginal Practice Leader and the CaLD officer
- Other members of the child's Care Team, as appropriate.

The following matters will be taken into account when addressing the issue:

- The child's care plan, cultural plan, and care arrangement requirements;
- The best interest of the child and the evidence to support this;
- The views of the child as relevant and appropriate;
- The possibilities within existing contractual responsibilities; and
- The options that are available to address the points of difference and an analysis of these options.

A detailed plan will be documented by Communities including roles and responsibilities of parties, time frames and a review process, and circulated to all parties.



Should the difference of opinion not be resolved following the meeting, the matter will be referred to an independent Communities director or district director (outside of the OOHC Implementation Team and district) to review the dispute and make a final decision regarding the outcome of the transition. Final decisions for transition of a child will remain with Communities.





## 10. Foster Carer Transition Process

The following process must be undertaken when transitioning a foster carer to an incoming provider.

Outgoing providers will provide foster carers information about their options to maintain their foster carer approval status. These options include:

- transitioning to an ACCO if the carer has an Aboriginal child in their care;
- transitioning to an incoming provider (or to Communities as a last resort) if the carer has no Aboriginal children in their care and if the current OOHC provider is not awarded a contract or has been awarded a reduced contract; or
- Carers currently being assessed may also be given the opportunity to transition to incoming providers if the outgoing provider will no longer have a contract to provide foster care services.

The time to complete a Carer Transition Process may vary between foster carers depending upon:

- how recently their carer assessment information was gathered;
- when they had their last carer review;
- if there are any non-compliances; and
- unresolved standard of care matters.

For carers wishing to transition to an incoming provider or to Communities, the outgoing provider will be required to complete a carer transition template ten (10) days prior to the transition meeting. This includes provision of the following information that will assist with assessment and decision making regarding the acceptance of the carer:

- Consent for release of carer assessment report;
- Confirmation of attendance at training relevant to caring;
- Foster carer reviews (completed within the previous twelve (12) months);
- Any standard of care reports;
- Carer support plans;
- Any other relevant information.

The documents provided will be reviewed by the incoming provider who will decide whether further information is required. New providers will need to undertake their own review and welcome meeting with carers to satisfy their own agency risk management requirements.

A carer review may be required where gaps are identified and/or in cases where competency concerns have arisen, such as any non-compliance, standard of care concern or an allegation against a carer. Incoming providers may agree to accept the transition of a carer/s conditional on further actions being undertaken by the carer/s.

Where there are no gaps or competency concerns identified, a carer review will be undertaken by the incoming provider.

The diagram below provides an overview of the Carer Transition Journey.



**Diagram 5: Carer Transition Journey**

## 11. Frequently Asked Questions (FAQ)

### FAQ 1: What information should be provided to children, carers and families?

The transition process can be an unsettling time for children, families, carers and Providers. During this time, it is important that providers and Communities provide frequent and relevant information to all parties.

**Outgoing Providers** may wish to share the following information:

- Activities involved in exiting the organisation e.g. carer resources to be returned, farewell events, documents to be provided to the provider or Communities;
- Information on how to maintain connections, where relevant;
- Services no longer offered to the carer;
- Transition of subsidy payments; and
- Transition process (described in this Guide);

**Incoming Providers** may wish to share the following information:

- Information about the organisation;
- Key contacts;
- Services offered;
- Case management support;
- Assessment, screening and review processes;
- Therapeutic frameworks; and
- Other supports available to the carer e.g. cultural support, trainings, events, online information, etc.

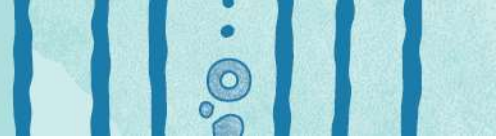
**Communities** is responsible for supplying information to children and their families about:

- reasons for the commissioning of OOHC services;
- how they can be involved in the matching process; and
- the transition decision.

**Communities** is responsible for supplying information to providers about the:

- procurement outcome;
- reasons for the recommissioning of OOHC services;
- transition process for carers and children (this Guide);
- matching process for carers and children; and
- carer transition process

It is important that information is communicated to children through a collaborative approach between Communities and the outgoing or incoming provider using culturally appropriate and trauma informed principles.



## FAQ 2: What is the Needs Assessment Tool (NAT)?

The NAT is a case management tool used by Communities to identify and assess individual needs of a child in the CEO's care. This assessment provides information regarding the needs of the child and will help to determine the most suitable care arrangement options and resources that will be allocated for the child's care arrangement.

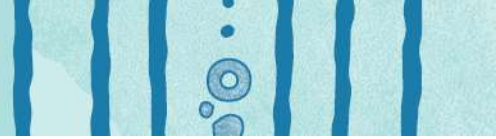
The NAT provides comprehensive information regarding the child to support more effective and successful matching of children with carers.

The NAT is undertaken when an initial care arrangement is required or within 90 days of the child entering care. The NAT will be reviewed annually or when there is a significant change for the child (whichever is sooner).

Wherever possible the NAT will consider and include the child's self-assessment as provided in response to Viewpoint questionnaires. The NAT outputs are included in all care arrangement referral information.

It is the responsibility of the child protection worker to update the NAT when assessing the needs of children. Child protection workers must gather information through discussion with the child, the child's carer, the provider, the Aboriginal Practice Leader (if applicable) and other members of the child's care team, including the family.





### **FAQ 3: When is a Care Arrangement Referral (CAR) needed?**

The CAR provides relevant information about the child and family background, the needs and strengths of a child in care or who is entering OOHC. The information is gathered across the nine dimensions of wellbeing and includes relevant aspects of a child's needs to be considered when determining the most appropriate care arrangement for the child.

The nine dimensions are:

- Safety
- Care Arrangements
- Health
- Education
- Social and Family Relationships
- Recreation and Leisure
- Emotional and Behavioural
- Identity and Culture
- Legal and Financial

The CAR identifies the type of care arrangement being sought, either emergency, temporary or permanent, in line with the child's case plan.

The CAR must be completed by the child protection worker for any child requiring a care arrangement and is sent to the Hub for consideration throughout the care arrangement matching process.

The CAR is completed by the child protection worker who will consult with other members of the child's care team, as appropriate. It must be reviewed and endorsed by the team leader or senior child protection worker.

The CAR is forwarded by staff in the Hub to the identified Provider as part of the referral process. The CAR should also be provided to the carer when the new care arrangement is identified.



## FAQ 4: Which records need to be provided and kept?

Section 12.2 of the *General Provisions for the Purchase of Community Services by Public Authorities* in the December 2021 Edition “the General Provisions” (and previous interactions) details the Service Provider’s requirements related to creation; retention and disposal of records associated with a Service Agreement.

Client records created by a Service Provider in the provision of a service are included in the definition of “Records” for the purposes of Section 12.2 Records of the General Provisions:

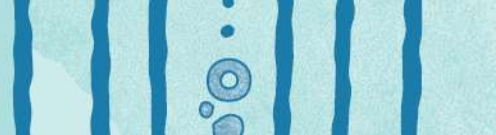
- (a) The Service Provider must keep accurate, complete and current written Records in respect of the Service Agreement, including:
  - (i) the type of Services, including the separate tasks, supplied to the State Party on each day during the Term;
  - (ii) the time that the Service Provider spent providing the Services on each day during the Term; and
  - (iii) the name and title of all Associates who provided the Services or were responsible for supervising the provision of the Services.
- (b) The Service Provider must comply with the directions of the State Party in relation to the keeping of Records whether those directions relate to the period before or after the expiry of the Term.
- (c) The Service Provider must keep all Records for at least seven (7) years after the expiry or termination of the Service Agreement.
- (d) The Service Provider must do everything necessary to obtain any third party consents which are required to enable the State Party to have access to Records under clause 12.1.

Service agreements will have additional requirements for the creation, retention and destruction of client records specified either directly or through reference to associated protocols, standards, or procedures in the request document.

The Better Care, Better Services: Standards for Children and Young People in Protection and Care (the Standards) is the reference document that OOHC Providers should refer to which provides guidance on an OOHC Provider’s responsibility to adhere to relevant legislation, maintenance of records, and protection of the confidentiality and privacy of children in OOHC.

Any originals of a child’s records must be provided to the child’s Child Protection Worker to be kept in Communities’ Child History Folder and File. Copies of records that are held by the carer may be retained by the carer during the transition process in cases where the carer and child are transitioning together as they form part of the child’s history in the care arrangement.





## **FAQ 5: A foster carer is currently registered with a provider that is exiting the sector. Can they choose the provider they want to transition to?**

Foster carers are volunteers who have the right to choose which provider they engage with. However, if their current provider is not awarded a contract, a transition to another provider will be required to continue providing foster care.

Options may include transition to an ACCO or another CSO. Transitioning to Communities is only an option if all other options have been exhausted.

Provider choices will vary depending on where the carer lives, the number of agencies in their local area, what type of services they provide, and how many care arrangements they provide. If carers are caring for a child with a disability or an Aboriginal child, their choice of provider will be specific and tailored to best meet the needs of the child and provide support to the carer.

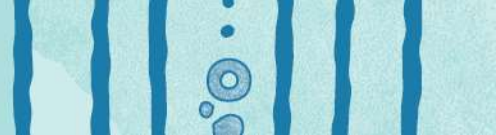
Carers will be supported by their current provider to ensure they have the information they need to help them decide which provider to transfer to.

## **FAQ 6: Foster carers who are currently caring for an Aboriginal child and want to transfer to a new ACCO service provider, what are the next steps?**

Priority to transfer will be given to foster carers managed by an outgoing provider in the first instance. Carers caring for Aboriginal children will have the option of transferring to ACCO providers once all outgoing provider care arrangements have been allocated.

Once an ACCO has been matched with a carer, a transition meeting will be held with the child's care team to discuss and develop a transition plan.





## **FAQ 7: If a foster carer is currently caring for an Aboriginal child and does not want to transfer to an ACCO service provider, what are their options?**

If the carer's service provider is an outgoing provider and they care for an Aboriginal child, the opportunity to transition to an ACCO will be strongly encouraged as this will help support carers and families to provide culturally responsive care.

All decision making must occur in a manner that causes minimal disruption or change for the child. Ultimately, the best interest of each child is paramount in all decision making and decisions will be made in consultation with the child's care team. The ultimate goal is for Aboriginal children to be cared for by Aboriginal people or Aboriginal organisations and all providers and carers will be encouraged to support this approach.

Any differences in relation to decisions for children will be worked through in a collaborative way with all relevant stakeholders. However, final transition decisions for children will remain with Communities.

## **FAQ 8: Do the views of a young person in care count?**

Yes, the views of a young person are important. They are always encouraged to express their opinion, and they will be supported to actively participate in any planning if there are changes that will affect their life.

Decisions about their life will be made with their care team, which includes their family wherever possible, their carer and the services that provide their care.

They will be kept informed and supported to access avenues to review decisions, if they disagree with the final decisions made by their care team. A young person can raise their concern the following ways:

- Discussion with the case manager and/or Team Leader, and Aboriginal Practice Leader (APL)
- Contact the Advocate for Children in Care via:
  - Freecall: 1800 460 696
  - Mobile: 0429 086 508
  - Email: [advocate@communities.wa.gov.au](mailto:advocate@communities.wa.gov.au)

## **FAQ 9: What supports are available to those experiencing a transition?**



The provider and the care team will be central to coordinating any support required throughout the transition process.

The care team approach is a core and integrated element of how Communities staff work together with children, carers, and their families so it is inclusive of all stakeholders.

The care team maintains and supports a child's care arrangement and their continued connection to parents, siblings, their wider family, their community, and their culture.

In addition to the care team, the following supports are available:

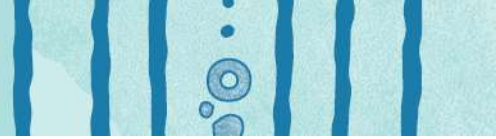
- The current service provider is a primary source of support, and many provide access to counselling or assistance for foster carers.
- The Foster Care Association of WA provides ongoing support and advocacy to foster families throughout Western Australia.
- The Foster Family Southwest (Carer's Southwest) supports foster carers in the southwest region of WA.
- The Family Inclusion Network WA (Fin WA) assists families through advocacy, support, participating in meetings and various other tasks that relate to engagement with Communities.
- The CREATE Foundation supports children and young people in all types of out-of-home care.
- The Advocate for Children in Care addresses concerns and complaints relating to a child in care, raised by child and/or members of the community.
- The District Aboriginal Practice Leader provides case consultation, advice, and leadership to Communities staff on issues relating to Aboriginal children, families, and services, through a cultural lens.
- The District Psychologist provides consultation, assessment, and intervention services to children in care and is available to Communities staff as a point of referral and consultation.
- The Care Plan Review Panel supports with direction and recommendation where a care plan decision is contested and cannot be resolved within the district.

## Appendix 1: Service Agreement Exit Plan Template – example only

Outgoing providers will be required to develop an Exit Plan that is appropriate for their organisation.

**Transition of carers and children** (in accordance with the agreed Transition Plan)

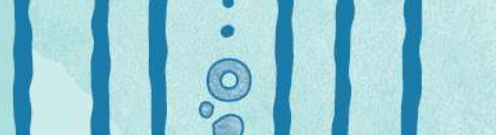
Activity	Action	Due date	Responsible party	Date completed
Prepare carer information for Incoming Provider	e.g. Complete outstanding Carer Reviews	Prior to Transition Meeting		
	Complete outstanding WWC and Police Clearances			
Prepare child information for Incoming Provider	Complete outstanding CSO quarterly reports			
Other				



**Communication to affected parties**

Activity	Action	Due date	Responsible party	Date completed
Communication to Board members	Inform Board members of change/ cease of Service Agreements		CEO or State Director of CSO	
Communication to Staff	Implement internal communication plan			
	Formally notify staff of change/ cease of Service Agreement			
	Inform staff of re-deployment opportunities			
	Provide staff redundancy information			
	Prepare references for staff			
	Support staff through management and EAP			





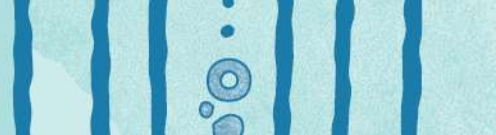
Communication to external stakeholders	Implement external communication plan			
	Direct stakeholders to Communities for Incoming Providers CSOs			
	Advise all relevant government departments			
	Update website and publications			
Other				

**Administration and contractual requirements**

Activity	Action	Due date	Responsible party	Date completed
Administration and contractual requirements	Manage child records (storage or disposal) in accordance with legislative requirements			
	Manage any government records in accordance with <i>State Records Act 2000</i>			
	Finalise contractual requirements including: <ul style="list-style-type: none"> <li>• review of performance or feedback</li> </ul>			

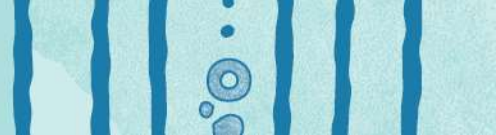






Activity	Action	Due date	Responsible party	Date completed
	<ul style="list-style-type: none"> <li>• outstanding discussions or disputes</li> <li>• progress reports</li> <li>• audited financial reports and financial statements</li> </ul>			
	<p>Finalise accounts:</p> <ul style="list-style-type: none"> <li>• payment of accounts/invoices</li> <li>• account reconciliation</li> <li>• collection of outstanding debts</li> <li>• staff payments (including superannuation and leave balances)</li> <li>• child subsidy payments</li> </ul>			
Assets and property management	Disconnect and pay final utility bills			
	Audit of furniture in property and identify owner			
	Arrange for removal and storage of property			
	Ensure all maintenance requirements are reported			





Activity	Action	Due date	Responsible party	Date completed
	Provide notice to vacate premises including office if required in accordance with their lease agreement			
	Determine further use for property (if owned by Provider)			
	Work with Communities to arrange property inspection and handover process if required.			
Other				

<b>Completed by</b>	
<b>Title</b>	
<b>Organisation</b>	
<b>Date</b>	



## Appendix 2: Factors impacting transition decisions

The following factors must be considered prior to the transition of a care arrangement and must inform the Transition Meeting and any disputes between parties.

### 1. Safety

First and foremost, the child's safety and/or risk to safety of others must inform decision making.

The assessment should consider:

- immediate and potential safety needs of the young person;
- risks to the young person in relation to the where they are living, including any risk from others, risk to self and other concerns; behaviours that may cause harm to other children; and
- siblings should, where safe to do so, stay together.

### 2. Best interests

When making a care arrangement for a child, the best interests of the child are the paramount consideration and the matters listed in section 8 of the Children and Community Services Act 2004 must be considered when determining what is in the child's best interests.

Care arrangements need to be a place of healing and provide support appropriate to the specific needs of the child. The nine dimensions of care should be completed and reviewed to identify the individual needs of the child, to inform their NAT level, and to match them with a suitable care arrangement type.

Capacity of child to manage change considering:

- emotional wellbeing of child;
- psychological wellbeing of child;
- history of the child's capacity to manage change in the past; and
- what supports does the child have or need to manage change.

### 3. Family and community connections

Any care arrangement of an Aboriginal or Torres Strait Islander child, so far as is consistent with the child's best interests and is otherwise practicable, must be in accordance with the Aboriginal and Torres Strait Islander Child Placement Principle.

All family connections need to be considered, including those between children in care in permanent care arrangements with foster carers, and foster siblings. Priority will be given to the preservation of long-term connections and relationship attachments for children in care, and as such may result in non-Aboriginal and CALD children transitioning to an ACCO provider with the Aboriginal child or children in their care arrangement.

Decisions about a child should be consistent with cultural, ethnic, and religious values and traditions relevant to the child.

Consideration must be given to relationships the child has with the wider community, including school, friendships, and long-term short break care arrangements. In regard to short break care, where possible, agencies will work together with the Hub to ensure continuity of long-term existing relationships.

Prior to deciding on care arrangements for an Aboriginal child, consultation must occur with at least one of the following:

- an Aboriginal officer of Communities;
- an Aboriginal person with relevant knowledge of the child, their family and/or community; or
- an Aboriginal agency that in the opinion of the CEO has relevant knowledge of the child, their family and/or community.

An Aboriginal Representative Organisation (ARO) should also be given opportunity to participate in the preparation of an Aboriginal child's cultural support plan.

Where practicable, Aboriginal children and young people should be supported in a care arrangement with an ACCO.

#### **4. Working in partnership with young people and family**

As per the Principle of Child Participation (section 10 of the Act), in accordance with their age and level of understanding, children and young people must:

- be given appropriate opportunity to participate in decision making relating to them;
- be provided with information relating to themselves, their care planning and living arrangements in a manner and language they understand; and
- have their views and wishes considered in decision making about their care arrangements.

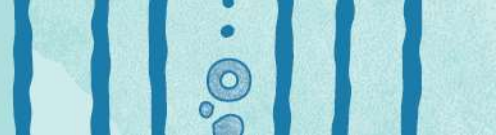
Parents, family members, and/or people significant to the child are provided opportunity to participate in decision making and are included in care planning activities.

#### **5. Future plans for the child as outlined in the Care Plan**

- long term care; or
- reunification

#### **6. Environment**

- history of relationships within care arrangements;
- behaviours that may cause harm to other children;
- trauma profile of the child; and
- carer's capacity to continue to provide for the needs of the child.



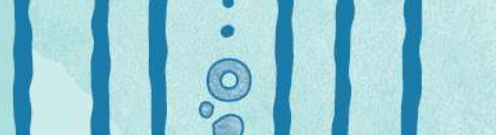
## Appendix 3: Child Transition Template

To be completed by the Outgoing Provider prior to the Transition Meeting.

The child should participate in the planning process as appropriate.

Child's details			
Date of birth			
Date of transition			
Cultural background		Language:	
Country		Date of last cultural plan:	
Date child was last sighted		Date of last quarterly report:	
Date of last Care Plan or Leaving Care Plan		Are there any active referrals for the child? Please specify	
Parent 1		Parent 2:	
Have family ben notified of transition <input type="checkbox"/> Yes <input type="checkbox"/> No			
Carer/s details			
Carer 1		Carer 2	
Is child transitioning with carer? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Date care arrangement is ending?			
District Office details			
Child Protection Worker		Team Leader	

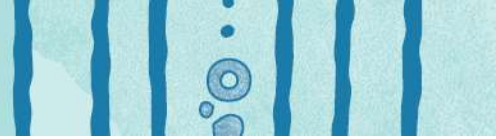




Incoming Provider details			
Organisations		Case Manager	
Outgoing Provider details			
Organisation			
Team Leader		Case Manager	
Proposed plan for records or items belonging to child to be transitioned			
Has the following been provided by the Outgoing Provider and/or Communities?			
Communities		Outgoing Provider	
<input type="checkbox"/> Birth family details, names, addresses, contact arrangements and genogram		<input type="checkbox"/> Case summary	
<input type="checkbox"/> Care Plan or Care Plan Review, Leaving Care Plan		<input type="checkbox"/> Like/ dislike /pets	
<input type="checkbox"/> Quarterly Report (for past 12 months)		<input type="checkbox"/> Photos	
<input type="checkbox"/> Child History Folder documents, e.g., birth certificate, Medicare card, medical records (including the immunisation record and the health passport) and school reports		<input type="checkbox"/> Significant relationships for the child – school, friends, other family, sporting and recreational activities- and how will contact be maintained over the next three to six months	
<input type="checkbox"/> Specialist reports, psychological reports and therapeutic plan (if permission has been provided to share)		<input type="checkbox"/> Risk management plans – including absconding <input type="checkbox"/> Summary of critical incident reports	
<input type="checkbox"/> Cultural plan		<input type="checkbox"/> Safety, behaviour management and support plans, including, triggers, and calming strategies	
		<input type="checkbox"/> Daily Routine – personal care arrangements and habits (Child Information Placemat)	
		<input type="checkbox"/> Story book/ life story book	







Incoming Provider details			
Organisations		Case Manager	

<b>Completed by</b>	
<b>Title</b>	
<b>Organisation</b>	
<b>Date</b>	



# Appendix 4: Child information placemat

**All About Me**

Name \_\_\_\_\_  
Birthday \_\_\_\_\_

My Country \_\_\_\_\_  
My Language \_\_\_\_\_  
My Culture \_\_\_\_\_

Things I want help with \_\_\_\_\_

How I like to relax \_\_\_\_\_

People I like to see \_\_\_\_\_

My Favourite Things  
Food \_\_\_\_\_  
Movie / TV show \_\_\_\_\_  
Book \_\_\_\_\_  
Music \_\_\_\_\_  
School Subject \_\_\_\_\_

My Hobbies & Sports \_\_\_\_\_

What makes me feel safe \_\_\_\_\_

What I want to be \_\_\_\_\_

# My Weekly Routine

	Monday	Tuesday	Wednesday	Thursday	Friday
Before 9 AM					
9 - 3 PM	SCHOOL				
3 - 5 PM					
5 - 7 PM					
7 - 9 PM					

**People I See:**

Who	When	Where

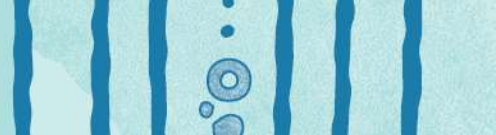
**My Contacts:**

GP: \_\_\_\_\_  
Dentist: \_\_\_\_\_  
Case Manager: \_\_\_\_\_

**My School:**

Year: \_\_\_\_\_  
Address: \_\_\_\_\_  
Teacher: \_\_\_\_\_

**My Out of School Activities:**



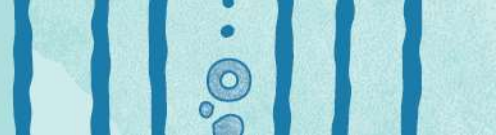
## Appendix 5: Carer Transition Template

To be completed by the Outgoing Provider prior to the Transition Meeting.

The consent for exchange of carer information should be sought from the carer prior to the Transition Meeting.

Carer/s details			
<b>Carer 1</b>		<b>Carer 2</b>	
Date of Birth		Date of Birth	
WWC Check expiry		WWC Check expiry	
Police clearance		Police clearance	
Cultural background		Cultural background	
Approval requirements			
Date carers approved		Foster Carer Directory notified (date):	
Date of last review		Date of last time safety check	
Children In Care Arrangement			
Name		Date of Birth	
Name		Date of Birth	
Name		Date of Birth	
Name		Date of Birth	
Other household members			
Name/s		Date of Birth	





Other adults in household			
Name/s		Date of Birth	

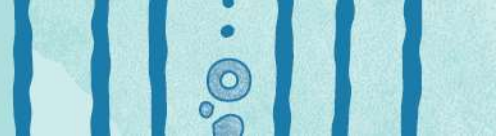
District Office details			
District Office			
Team Leader		Child Protection Worker	

Incoming Provider details			
Organisation			
Team Leader		Case Manager	

Outcoming Provider details			
Organisation			
Team Leader		Case Manager	

Has the following been provided by the Outgoing Provider?	
<input type="checkbox"/> Consent for release of information	<input type="checkbox"/> Carer support or cultural plans
<input type="checkbox"/> Evidence carer has attended Communities foster carer prep training and any other relevant trainings	<input type="checkbox"/> Have screening checks been completed?
<input type="checkbox"/> Foster Carer Assessment Report	<input type="checkbox"/> Is the Working with Children Card valid?
<input type="checkbox"/> Foster Carer Reviews (Completed within the previous twelve (12) months)	
<input type="checkbox"/> Any other relevant information	





**Has there been any of the following relating to this carer/s, please provide details, including the nature of issue, dates, outcomes?**

- Standard of care issues and relevant insurance details (include all from time of registration)
- Allegations leading to a concern for a child’s wellbeing (and related insurance information)
- Performance management issues

**Additional information**

<b>Completed by</b>	
<b>Title</b>	
<b>Organisation</b>	
<b>Date</b>	





## Appendix 6: Transition checklist

### Child's participation

The child in the transition process should be encouraged and supported through the provision of information about the process in a manner that best suits the child's understanding and capacity.

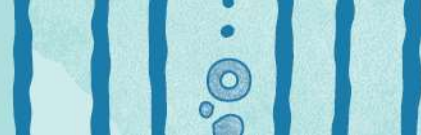
A conversation between those who know the child best should occur to determine the most appropriate way to provide information to the child. This includes the OOHc Provider's case manager, Communities' child protection worker and the carer. Others in the child's Care Team, including the family, may be consulted and involved as appropriate and this must be determined on a case by case basis.

Efforts must be made to ensure the child's views are heard and taken into account in whatever format they are presented. Engagement with the child must take into account their level of development and capacity to participate.

### Child's information

The Outgoing Provider and/or Communities is responsible for providing the Incoming Provider with the following information about the child:

- Birth family details, names, addresses, contact arrangements and genogram
- Care Plan or Care Plan Review
- Case Summary
- Child History Folder documents, e.g., birth certificate, Medicare card, medical records (including the immunisation record and the health passport) and school reports
- Critical incident reports
- Cultural plans
- Daily Routine – personal care arrangements and habits
- Likes or dislikes or pets
- Photos
- Psychological reports and therapeutic plan
- Quarterly Reports (for past 12 months)
- Risk Management Plans – including absconding
- Safety, behaviour management and support plans, including, triggers, and calming strategies
- Significant relationships for the child – school, friends, other family, sporting and recreational activities- and how will contact be maintained over the next three to six months
- Specialist reports
- Story book or life story book



## If a child is moving house

In addition to the above, the Outgoing Provider must also supply the child's belongings (clothing, toys, books) that will transfer with the child to the Incoming Provider. List any other child's belongings that will not be transitioning to the Incoming Provider and detail where they will be stored and how the child will have access to them in the future. A suitcase is recommended to transport the child's belongings.

## Carer information

The Outgoing Provider is responsible for providing Communities and the Incoming Provider with the following information about the carer/s:

- Consent for release of information
- Attended Communities foster carer training and other relevant training
- Foster Carer Assessment Report
- Foster Carer Reviews (completed within the previous twelve (12) months)
- All Standard of Care reports and relevant insurance details
- Allegations leading to a concern for a child's wellbeing (and related insurance information)
- Carer support plans
- Any other relevant information

## Transition plan

Time frames for the transition process are to be carefully identified, taking into account that the arrangements may need to change within a short period of time to meet the child's needs. It is suggested that the transition should take place as soon as possible to meet the child's needs.

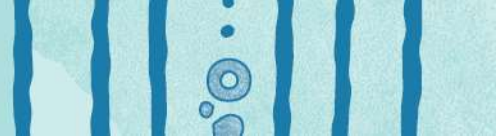
The scheduling of the transition needs to include notifying family, a period of exiting the current care arrangement as well as a period of entering a new care arrangement. A calendar should be developed that includes review points or check-ins with the child and carer and agency including farewell and welcome events.

The exiting process includes any farewells that the Outgoing Provider may have in place for children leaving their care arrangement and consideration of the impact on the carer family and other children in the care arrangement

Entering a new care arrangement, this includes the impact on any children already in the home (including the carer's own children) and planning for events such as:

- initial visit
- play time
- sharing a meal
- overnight stay





## Physical transition

This includes the logistics around the physical arrangements for transition.

- Will the child be picked up or dropped off?
- Who will pick up the child or drop the child off?
- What time?
- Who will be there to farewell or welcome the child?
- Will all the child's belongings be taken or collected at the same time as the child moves?
- If not, what arrangements will be made for the child's belongings to be moved?
- Is there a need to store any of the child's belongings? Who is responsible for this?
- What does the child wish to take or move with them?

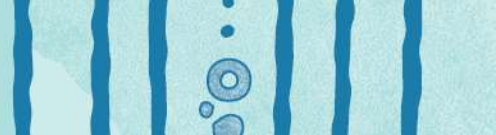
## Legislated requirements

- If the decision to change a child's care arrangements is made outside of the care planning process, the decision will result in a modification of the child's care plan and all stakeholders should be notified in writing and this should be appealable to the Care Plan Review Panel.
- Compliance with legislative requirements related the Aboriginal and Torres Strait Islander Child Placement Principle and CaLD guidelines will be applied

## Post transition

- Arrangements for contact between the child and previous carers if relevant
- Time frames for this contact to occur - in view that the child will need to settle in new care arrangement and the need for the child to be able to freely establish new relationships
- How often will this arrangement be reviewed and by whom?
- Time frames for reviewing new care arrangement





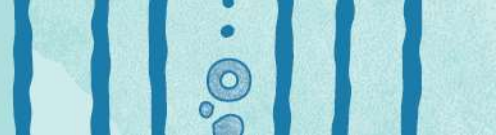
## Appendix 7: Record of Transition Meeting

<b>Date of meeting</b>		
<b>Attendees</b> (name and position)		
<b>Apologies</b> (name and position)		
<b>Agenda items</b>	<b>Discussion</b> (Note any outstanding items and decisions)	<b>Action/s</b>
<b>1. Carer Transition</b> refer to the Carer Transition		
<b>2. Child Transition</b> Refer to the Child Transition Template		
<b>3. Child's Information</b> Refer to the Child Information Placemat		
<b>4. Child's participation</b> in transition planning and throughout the transition process.		

### Agreed Transition Plan

Activity	Date	Responsible Party
Introduce child to new care arrangement		
Farewell existing care arrangement		

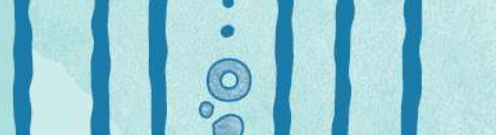




Activity	Date	Responsible Party
Transport child to new care arrangement		
Take child's belongings to new care arrangement		
Carer transition to Incoming Provider		

<b>Completed by</b>	
<b>Title</b>	
<b>Organisation</b>	
<b>Date</b>	





## Appendix 8: Responsibilities Checklist

### Contract Meeting

Responsible	Checklist
<p>Communities Contract Manager</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Arranges meetings with Outgoing and Incoming Providers to                             <ul style="list-style-type: none"> <li>• confirm outcome of commissioning process</li> <li>• confirm the number and type of care arrangements that have been awarded</li> <li>• commence service agreement exit planning or contract implementation planning</li> </ul> </li> <li><input type="checkbox"/> Identifies and communicates details of next steps</li> </ul>
<p>Outgoing Provider</p> <ul style="list-style-type: none"> <li>• no longer funded, or</li> <li>• funded for a reduced number of care arrangements</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Attends the meeting.</li> <li><input type="checkbox"/> Confirms and commences Service Agreement Exit Plan</li> <li><input type="checkbox"/> Identifies types, numbers, and location of care arrangements that will no longer be provided</li> </ul>
<p>Incoming Provider</p> <ul style="list-style-type: none"> <li>• newly funded, or</li> <li>• funded for additional care arrangements, or</li> <li>• funded for same number of care arrangements</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Attends the meeting.</li> <li><input type="checkbox"/> Commences contract implementation.</li> <li><input type="checkbox"/> Discuss details of new Service Agreement including the number, type, and location of care arrangements</li> </ul>





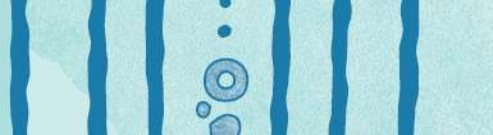
### Prior To Transition Meeting

Responsible	Checklist
Outgoing Provider	<ul style="list-style-type: none"> <li><input type="checkbox"/> Notifies carers of the procurement outcome and obtain their consent to release their information and agreement to participate in the transition process.</li> <li><input type="checkbox"/> Using the Child Transition Template, Child Information Placemat, and Carer Transition Template informs the OOHC Implementation Team, at least ten (10) working days prior to the scheduled Transition Meeting, of the:                             <ul style="list-style-type: none"> <li>• children and carers that will transition together</li> <li>• carers without children who want to transition to an Incoming Provider</li> <li>• children who will transition without a carer</li> </ul> </li> <li><input type="checkbox"/> Provide information and support to carers and staff during the process to enable a smooth transition to an Incoming Provider.</li> </ul>
Incoming Provider	<ul style="list-style-type: none"> <li><input type="checkbox"/> Receives Child Transition Template and Child Information Placemat</li> <li><input type="checkbox"/> Receives Carer Transition Template and undertakes Carer Transition Process</li> <li><input type="checkbox"/> Participates in matching process and accepts new referrals</li> <li><input type="checkbox"/> Accepts new referrals</li> </ul>
OOHC Implementation Team	<ul style="list-style-type: none"> <li><input type="checkbox"/> Coordinate and oversee the transition process, including:                             <ul style="list-style-type: none"> <li>• identifying the best care arrangements for children and carers that need to transition in consultation with the outgoing provider</li> <li>• identifying suitable Incoming Providers for carers without children who want to transition</li> <li>• review and forward the Child Transition Template, Child Information Placemat, and Carer Transition Template to the most suitable Incoming Provider at least five (5) working days prior to the scheduled Transition Meeting</li> </ul> </li> </ul>
Communities District Office	<ul style="list-style-type: none"> <li><input type="checkbox"/> Notifies CSO and in collaboration with Outgoing Provider, the child. District office notifies the family of the transition</li> <li><input type="checkbox"/> Participates in matching process</li> </ul>

Responsible	Checklist
	<ul style="list-style-type: none"> <li><input type="checkbox"/> Updates the NAT (of all children) and sends updated CAR to Hub if child is transitioning without the carer</li> <li><input type="checkbox"/> Provides relevant information on the child to the Incoming Provider</li> <li><input type="checkbox"/> Arranges the Transition Meeting</li> </ul>
Communities Hub	<ul style="list-style-type: none"> <li><input type="checkbox"/> Assists the matching process, as required.</li> <li><input type="checkbox"/> Matches child to new care arrangement if transitioning without carer. This is done in consultation with the new and outgoing providers</li> </ul>

### Transition Meeting

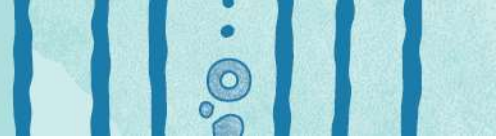
Responsible	Checklist
OOHC Implementation Team	<ul style="list-style-type: none"> <li><input type="checkbox"/> Ensures compliance with legislative requirements related to the Aboriginal and Torres Strait Islander Child Placement Principle, CaLD guidelines and Care Planning requirements</li> </ul>
Communities District Office (Team leader / Child Protection Worker)	<ul style="list-style-type: none"> <li><input type="checkbox"/> Attends the meeting as a part of a care plan or other case planning meeting</li> <li><input type="checkbox"/> Records the transition plan decisions and follow up actions on the Record of Transition Meeting Template and distributes copies to all parties</li> </ul>
Outgoing Provider	<ul style="list-style-type: none"> <li><input type="checkbox"/> Chairs and prepares agenda for meeting</li> </ul>
Incoming Provider	<ul style="list-style-type: none"> <li><input type="checkbox"/> Attends meeting</li> </ul>



## Welcome Meeting

Responsible	Checklist
Outgoing Provider	<input type="checkbox"/> Introduces carer and child to Incoming Provider
Incoming Provider	<input type="checkbox"/> Confirm arrangements for physical transition <input type="checkbox"/> Develops a carer support plan for the carer and plan for their induction into the organisation <input type="checkbox"/> Arranges a Welcome Meeting
Communities District Office	<input type="checkbox"/> Plans for the physical transition of the child (if required) <input type="checkbox"/> Modifies the Care Plan and other planning documents including needs based funding plans. <input type="checkbox"/> Develops the individual case plan for the child (or arrange a meeting to develop an individual case plan) <input type="checkbox"/> Confirms the roles and responsibilities of each party in relation to the settling in period <input type="checkbox"/> Updates contact details of each party





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If you are deaf, or have a hearing or speech impairment, contact us through the National Relay Service. For more information visit:  
[www.communications.gov.au/accesshub/nrs](http://www.communications.gov.au/accesshub/nrs)