



SPARK AND CANNON

TRANSCRIPT OF PROCEEDINGS

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THE HONOURABLE TIMOTHY FRANCIS CARMODY SC, Commissioner

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IN THE MATTER OF THE COMMISSIONS INQUIRY ACT 1950

COMMISSIONS OF INQUIRY ORDER (No. 1) 2012

QUEENSLAND CHILD PROTECTION COMMISSION OF INQUIRY

IPSWICH

..DATE 31/10/2012

Continued from 30/10/2012

..DAY 29

WARNING: The publication of information or details likely to lead to the identification of persons in some proceedings is a criminal offence. This is so particularly in relation to the identification of children who are involved in criminal proceedings or proceedings for their protection under the *Child Protection Act 1999*, and complaints in criminal sexual offences, but is not limited to those categories. You may wish to seek legal advice before giving others access to the details of any person named in these proceedings.

THE COMMISSION COMMENCED AT 10.10 AM

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COMMISSIONER: Good morning, Mr Haddrick.

MR HADDRICK: May it please the commission, my name is Haddrick, H-a-d-d-r-i-c-k, initials R.W., of counsel, counsel assisting the commission instructed by officers of the commission.

MR HANGER: My name is Hanger, initials, R.I. I continue to appear for the State of Queensland.

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COMMISSIONER: Good morning, Mr Hanger.

MS STEWART: Good morning, my name is Stewart, S-t-e-w-a-r-t, counsel for the Aboriginal and Torres Strait Islander Legal Service.

COMMISSIONER: Ms Stewart. Mr Capper?

MR CAPPER: Thank you. Capper, C-a-p-p-e-r, initial C, for the Commission for Children and Young People and Child Guardian.

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COMMISSIONER: Thank you.

MR HADDRICK: Good morning, commissioner. I call Mr Robert Ryan.

RYAN, ROBERT sworn:

ASSOCIATE: For recording purposes, please state your full name, your occupation and your business?---Robert Ryan; I am the director Key Assets Queensland, 2728 Logan Road at Eight Mile Plains.

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Please be seated?---Thank you.

COMMISSIONER: Good morning, Mr Ryan, welcome?---Good morning, commissioner.

MR HADDRICK: Might the witness see this document, please?

Mr Ryan, do you recognise that document?---I do.

What is that document?---That's my statement, witness statement.

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When was that document signed?---This morning.

Are the contents of that document true and correct?---Yes, they are.

Are the opinions expressed in that document your sincerely held opinions?---Yes, they are.

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I tender that statement, Mr Commissioner, and it's suitable to be published. 1

COMMISSIONER: Thank you. That will be admitted and marked exhibit 104 and I direct that it be published.

ADMITTED AND MARKED: "EXHIBIT 104"

MR HADDRICK: Whilst the commissioner's associate is on his feet there are four further documents I wish to place before the commission and tender. I will read them for the record. The first document is described as "Key Developmental Assets" and it's a two-page document and its subheading is "Using Today to Plan Tomorrow". The second document is described as "Review of the Transitional Placement Program for Children and Young People with Disabilities in Care South-East Region 2011". 10

The third document is "Relinquishment of Children with Disabilities, Literature, Current Practice and Recommendations for the Future in South-East Region". The final document is "Recruitment and Retention of Kinship Carers, Literature Review, Current Kinship Care Practice in South-East Region and Recommendations for Further Practice". In respect of the last three documents I am tendering them but I propose that they not be published at this stage. In some of them material it tends to identify particular children and I propose to have officers of the commission examine them to ensure that those children are de-identified before the material is placed in the public domain if that is suitable to the commission. 20

COMMISSIONER: All right. Mr Haddrick, the "Using Today to Plan Tomorrow" document will be admitted and marked exhibit 105 and it will be suppressed until further order or direction. 30

ADMITTED AND MARKED: "EXHIBIT 105"

COMMISSIONER: The document dated 30 September 2011 entitled "Review of the Transitional Placement Program for Children and Young People with Disabilities in Care" will be admitted and marked exhibit 106 and it will also be suppressed till further direction.

ADMITTED AND MARKED: "EXHIBIT 106"

COMMISSIONER: The document entitled " Relinquishment of Children with Disabilities, Literature, Current Practice and Recommendations" dated 2 December 2011 will be admitted and marked exhibit 107 and it will be suppressed until further direction. 40

ADMITTED AND MARKED: "EXHIBIT 107"

COMMISSIONER: Exhibit 108 which will also be suppressed

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till further direction will be the draft document "Recruitment and Retention of Kinship Carers" dated June 2011. Thank you.

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ADMITTED AND MARKED: "EXHIBIT 108"

MR HADDRICK: Thank you, Commissioner.

Mr Ryan, can I first identify for the court your professional history and qualifications? You have worked for 19 years in the field of child protection. That is correct?---That's correct.

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You were from September 04 to September 08 the principal training and support staff officer for the then Department of Child Safety?---Correct.

And prior to that you fulfilled a number of different roles for the department in its previous manifestations going back to what year?---1993.

And in that time you have fulfilled the offices of starting from family services officer, team leader, crisis care worker, acting senior crisis care worker, principal policy office, senior policy officer, acting manager for a number of centres, then the principal training officer role that I mentioned before and then director of training and specialist support branch. That's correct, isn't it? ---That is correct, yes.

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What is your current role?---I've just recently been appointed to the director position of Key Assets Fostering Queensland which is a specialist or intensive foster care agency.

Can you further describe what Key Assets is for the commission's benefit?---In broad terms Key Assets is part of a bigger group called "Core Assets" and Core Assets was established about 20 years ago. It was set up by a social worker and a foster carer in the United Kingdom so it's currently a company that's in 17 countries worldwide and the primary focus of the work that they do is intensive foster care ,so in simple terms intensive foster carers working with some of the more extreme and complex children and young people in a foster care family based setting.

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Who acquires your services? Is it a company? Is it actually a registered company?---It's a not for profit in Queensland and the services primarily in Queensland are driven by the department - referrals from the department.

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What's the size of the workforce of your organisation?---At the moment we have about 15 staff.

Located where?---Eight Mile Plains.

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Are all of them located there?---There are some home based workers in Toowoomba. 1

What I proposed to do is divide my questions up into effectively two categories. I want to ask you a series of questions about your previous experience as an officer in the department, whatever it was called at that particular point in time, and about some of the challenges associated with qualifications, training and retention in the department and then I want to move onto the nature of foster caring. In fact whilst I'm on my feet I think I might flip that around the other way. I might start off with the foster-care issue because that's where you are now. Can you broadly explain to the commission how does someone become a foster carer?---So the process is actually quite a complex process and I think it varies - slightly differently varies across agencies, but essentially what happens is that somebody either through a marketing campaign or a publishing campaign will identify their interest in being a foster carer. In our particular agency there will be either a call to us or we will respond with a call back to somebody who has made an online inquiry. At that point then we'll have a conversation with the person. We go through a series of checklists. In an intensive foster care agency such as ours there are some things that actually immediately limit people out. So, for example, one of the things that we would expect that if it's a couple, one of the parents will actually be at home full-time, particularly because they're looking at complex in extreme young people. So if the person says, "Look, I'm not in that position. We both work full-time," then we would potentially refer them to a different agency. 10 20

Just before you move on to sort of the analysis of their suitability I just want to tease out the different roads in which members of the community become aware and become interested in and eventually end up as foster carers. Can you just identify to the commission the different forums where people become aware of the opportunities to become a foster carer?---Yes. It's probably primarily the biggest recruitment - successful recruitment process that we know of is actually by word of mouth from other carers or people who have done that before, but certainly we advertise in the paper. There are some media campaigns so certain radio stations have been used recently in our agency to promote fostering to people. 30

Who does that advertising? Is that the department or your organisation?---Our organisation currently does that. 40

Okay?---So we would spend in the last year probably somewhere in the vicinity of about \$100,000 to actually recruit and promote because the number of people who actually apply to foster - the actual number of people at the end of the day that we get is very, very low because of the expectations on fostering. For instance, I think if we

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took 100 people coming through, we might get 5 per cent of those who actually - - - **1**

Who actually end up as foster carers?--- - - - end up as foster carers so it's a very expensive exercise at the beginning to get the right people at the end.

Your organisation - it competes against other organisations, if I could put it that way, doesn't it? Who else is, to use that sort of language, in that space? ---There are definitely other agencies out there. Life Without Barriers is one of the agencies out there. FFK is another agency that's out there. **10**

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There are also a range of other agencies that do general foster care as well, but the word "compete" is probably not absolutely accurate, because essentially, you know, some of these children move between agencies so we try to work in a collaborative way.

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Where do you see your footprint of your organisation? Do you provide the service for the entire state or a particular locality or are there any sort of demarcation disputes that go on in the terrain?---There can be, certainly, and I think sometimes if people have a particular location that they've been in a long time there can be a bit of challenge if somebody else comes into that space, but like anything I think it's good to have a range of providers, because children are unique and different and so we need to have different options available for them, and I think that's a fundamental issue for the whole system, is having a range of options that suit the needs of kids. But, yes, look, at the moment, to answer your question, we are in the south-west region, the Brisbane region, north coast region and the south-east region and at this stage we're not in the other regions of the state.

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Who funds - who pays for your operations?---Essentially the department funds us for the intensive foster care placements. So in some aspects we're grant funded and in other aspects we will be paid a sort of a - - -

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Per capita?---Per capita arrangement, yes, as we go.

So there is a financial incentive if you have a per capita arrangement to get more people in, because your organisation gets more revenue?---Absolutely, yes.

So if it expands - if you're no longer getting 5 per cent of people who express interest actually ending up as foster carers, if you get 10 per cent then you're increasing your operating budget for your body?---Absolutely, and any ability to increase that operating budget can be reinvested back. So I guess this is in an issue, is that the more - the more revenue you have the more your ability to actually provide a scope of services. So it's the challenge between a user pays environment. You pay a premium if you're buying something in a one off, whereas if you have something that you're actually paying for - you know, if you buy 10 placements you can reduce costs on those placements. So there is an incentive to the grant funding arrangement.

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You say you get a grant also from the department?---That's correct.

Do other participants in the sector also get a similar grant?---Absolutely, yes.

Is it a static amount or is it a - - -?---There are what's

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called grant funding benchmarks, so there's usually a range in the benchmark for intensive foster care, for general foster care, and so we will fall within that range, as will other agencies, which is part of any tendering process. 1

Now, once a potential foster carer has made contact with your organisation is it always your organisation or other organisations similar to you that they make contact with? What are the doorways into the sector?---Well, they could ring the department.

Yes?---I think some of the non-government agencies and some of the Peak support agencies will also get referrals coming through to them, but primarily one of the big drivers appears to be - is the Internet now. Internet - certainly people sort of hear about fostering and they do a Google search and then come across an agency name. So that's - - - 10

I mean, it's a very general question, but why do people express interest? In your experience over the years why do people express interest in becoming foster carers? Describe the cohort of people?---Probably our primary sort of group of carers currently would be people who are entering into their sort of pre-retirement or into retirement sort of space of life, is a very big cohort, so certainly 50 to 65-year-olds, probably more often driven by a female rather than the male in a partnership, or a single relationship. They tend to have a very sort of high heart base, so wanting to actually make a difference. Often their own children are at a point where they can actually provide a good care system, so they've left home or their kids are a bit older. 20

Do you detect from the people who express interest any - I don't put this accusatorially, but interest in monetary benefits of being a foster parent?---There are some, yes. If it's entirely about financial benefits I think some of those people often self-select out by the time it gets to the end point, because to be honest, you know, we could double what we pay for carers across the state and it's still a heck of a job and, you know, I wouldn't put my hand up to do it. It's a very, very tough gig and we're expecting - essentially we're still operating on a mindset of a volunteering, when fostering was set up at a time when it was seen as volunteering, and we're expecting the volunteers to be able to do things that are, you know, quite complex and extreme with children and young people whose needs are very high, but also an expectation from the state and from the public at large that certain things will happen for these children and young people. So, yes, to my mind actually I think, you know, absolutely we should be supporting people economically in this and I believe professionalising foster carer is a pathway that we need to seriously consider. 30 40

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Okay, I'm going to get to that particular aspect because I want to tease that out in more detail, but I just want to follow the foster parent through the process so that we have a clear understanding of how one goes from being someone interested to somebody who has got a child in need of protection in their home. Okay, so they've come to your organisation or any of the other participants in the sector and expressed interest. Then what physically happens to that application or expression of interest?---Okay, so they've expressed interest. We've gone through the checklist and identified that they have a spare room for the child, that they actually meet all the requirements. At that point for our agency we would then organise an advice visit, so the advice visit would then occur, which would be us going to see their place in more detail, getting a sense of the space that they live in, the environment, and just providing a little bit more of an explanation of the work we do, particularly because we're in the higher end specialist type work, so that people need to have that level of input.

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Could you just tell us, in those two stages, both in the initial assessment and in the visit to the home, what are the features that you're - the salient features that you're looking for in terms of a foster carer's home? What is going to rule someone in and what's going to rule someone out?---Okay, so, you know, certainly what may rule somebody out is having a history of criminal activities, behaviours. So we will have some people ring up and say - and this is not flippant, this is true - "Yes, I was convicted of an offence and I can't get a blue card, but that was 15 years ago and I've changed." So we're honest with people and say, "Look, that rules you out and it's going to rule you out from all fostering agencies around." There may be some people who come in - we have a checklist of what sort of behaviours are exhibited by complex and extreme young people. Some people may go through that checklist and say, "Look, I am not in a position to have these sort of children. I want more moderate children." The reality is there's not many of those moderate children in the child protection system because they're all suffering from trauma, but that would be a rule-out, if they sort of are saying, "These are not suitable." We may then say, okay, we'll refer them back to a general agency to look at that.

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Okay?---Having a spare bedroom for us is a big thing. So if they don't have a room that the child can live in that would be a big - you know, a wind-out clause. They would need to be able to have somebody at home full-time, so that's also another factor that's part of the process.

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What about locality, the locality of the home? For instance, if they sort of live off in a country area or they live smack bang in the CBD, are there any of those sorts of features that - - ?---No. In fact, in some

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respects, if you look at other jurisdictions, one of the biggest challenges that we're facing in Queensland is the - in places like the UK, a child must live within 30 miles of the place where they're removed from. So we're talking 45 or so kilometres from their place of removal. That's just not realistic in a Queensland context if a child - - -

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Why do they do that in the UK?---I think there's a view, and, you know, it's based in research, that if you can keep children in their own community they can maintain schooling, they can keep connected, it's easier for contact with parents, particularly if the order is a short-term order and we're trying to reunify the child back to the family of origin.

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Now, you spoke about the spare bedroom being a key feature. Are there any other particular features of a house that you look to? For instance, the size of the home, whether it's a safety risk in any respect?---Yes, we do a safety assessment. So, I mean, there would be things like fences for pools. Obviously that would be a factor we'd look at. It wouldn't be necessarily something that would rule somebody out, but if their fence was not - their pool was not fenced appropriately then these would be things that would need to be rectified. Dogs is one that we look at. So if there's a dangerous dog in the household, listed dangerous dog, that in our agency would be a rule-out, particularly given sort of some of the incidents with dangerous dogs. It wouldn't necessarily rule out that person from fostering completely, but given the nature of some of the children and young people we have that would be a factor.

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Don't read anything into this, but what about other children in the household, if there are other children physically there in the household? So you've described before that typically they're slightly older people?---Yes.

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What if they have other children in the household?---That won't rule them out, no. It depends on the children's views and wishes as well in that case. We would certainly expect that the carers - or potential applicant carers - had a conversation with their own children and that their children were open to the idea of actually also being part of fostering. Sometimes some of the best carers we have, have their own children and they become almost part of that care network.

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Now, a carer is the person who is given the responsibility after the process has been completed?---Correct.

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But if there are other adults or indeed older teenage kids living in the house, what checks are done on those persons who will be living in the same location as the potential foster parent and the child has been placed in the home? ---So a similar blue card check arrangement would happen for anyone who's an adult living in the household or who has frequent contact. So for example if there was a good family friend who visits and stays over two nights of every seven, we would certainly look at having that person checked and assessed. If the house was on a sort of a property where there was another house closely located - I was involved in a referral recently where there landlord lives in a house close by; in a case like that we would ask for the landlord to be checked as well because of the proximity and the ability for that person to come frequently to the house.

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COMMISSIONER: What are you assessing them for? ---Assessing them to ensure that they meet the requirements within the blue card. So basically we're - you know, the working with children check, so no criminal history, any child protection risks - - -

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Are you assessing them for their suitability overall to take the care of a particular child that you're going to place with them?---Are you referring to the foster carer, Commissioner?

Yes?---Generally for our agency we're assessing them holistically, so we're looking to see whether or not they've got the capacity to meet certain needs. But we will then look at a matching process around that. So some carers are better matched to certain things. Some carers will say, "Look, I have a young child myself and my own child is six. I don't want children who are sex offenders or who have a history of sexualised behaviours because I think that will put my own child at risk." So in that case we wouldn't then match that particular carer with a 14-year-old - - -

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What about the child? Do you ask the child what sort of foster parent they want or don't want?---The child - that would be probably something that would more happen at the

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departmental level and knowing what the child's needs and wishes are, but certainly in an ideal situation you'd have a fairly good idea about what the child's needs were so that you could do an appropriate match.

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But it's a risk where there's supply being outstripped by demand that you take a beggars can't be choosers attitude - - -?---Absolutely.

- - - take whatever's going?---I agree, absolutely. I think that's the tragedy of the system not having enough carers out there, because sometimes these children are moved around, not to the right places or the best places, and the match is not excellent, and some of these children - you know, we've seen children recently who've had multiple placement moves, and it does beg the question whether or not the outcome of them coming into the system was actually a good outcome, when sometimes, you know, if you looked at how much moves have happened, sometimes the investment could be invested earlier back in the family.

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One thing that has been exercising my mind is that in terms of assessing the performance of the system, one of the questions you need to ask and answer is whether the system can show that removing a child into the care that that child got was better overall and did less harm overall in the long term for that child than leaving them at home to be neglected would have done?---I absolutely agree. And I think that's one of the - for my mind a primary thing that we need to have in the system, is an outcome measure that actually measures that children are better as a result of coming into the care system. I don't know whether it's appropriate to refer to the document that you've got there, but there's a document that's provided in that more recent hand - documents tendered, and one is called a Key Developmental Assets. There was research done many years ago looking at what is it that you need to create a healthy adult, and they came up with a range of assets that were needed, or basically things that are needed for a person to be a good functioning adult. The agency I work for has drilled that down and there are 20 assets that they've identified; some of them are internal and some of them are external; and carers will weekly measure how things are tracking for those children and young people. I think that in the care population something like that would be fundamental to look at how we actually measure success. Because if a child is not improving in the system - and also that could equally be provided to families so that they have the opportunity.

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But there doesn't seem to be any longitudinal study that - you know, properly controlled groups - with properly controlled groups that can give you the answer to that key question?---There is limited studies in an Australian context. Certainly overseas there are some studies. That particular document I was referring to, I can provide

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details, but it certainly has a long history of rigour. 1
Certainly in the US they're starting to pick up that
tool - - -

But in any event, even if you can show that for most
children - it doesn't really help when you're a
best-interests based system because what you've got to show
is that that particular child was better off?---Sorry, I
missed the last part of what you said.

You have to show, if you're a best-interests based regime, 10
that your intervention into that particular child's life
helped more than harmed?---Yes.

Don't you?---Yes, definitely. The hard part, I think,
Commissioner, is that we don't know what may have happened
in a different circumstance. So this is the unknown test
of child protection, is that a child who is removed - with
the benefit of hindsight you can look back and say, "Okay,
maybe had we have left that child things wouldn't have been
as bad," but you don't know. And the child who's kept at
home, you know, the benefit of hindsight, you might look at
that and say, "That child probably should have been 20
removed." And with multiple people sitting around the
periphery everyone will have a different view about what is
in the welfare and best interests of a child, and we don't
have a collective sort of "this is" or what that looks
like.

There's no consensus about that, is there?---No, there
isn't.

But there's a lot of literature about the psychological
parent attachment and the consequences of rupturing that
relationship?---Absolutely. Absolutely. 30

Does the system have regard to that, you know, like Anna
Freud's writings and Solnit and those people - Balby?
---Look, the system does have regard to that. I think
that - - -

I mean, the CSOs who actually make the decision?---Yes,
absolutely. I often say this in groups, I probably - after
nearly 20 years now in child protection I'm well placed to
be a really good child safety officer, so either I'm
particularly slow or it's a very difficult and complex job
to be a child safety officer and a team leader, because 40
what you have to know in your head is all that research and
theory, but you also have to understand Family Court and
you have to understand domestic violence and mental health
and drug and alcohol, and then to understand from practiced
wisdom over many years, examples of what may or may not
happen. You've got to be able to work with very, very
difficult families who are aggressive. So the skill set
required is actually a very, very high level skill set.

Do they get training - the CSOs get training in attachment theory, just for example?--Well, this is one of the challenges in the current sort of environment, is that no, they wouldn't because there would be an expectation that that would have happened through some degree-based program prior to coming into the system.

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But what if they were a retired policeman?---They would not be getting an attachment-based training program through this process.

Thank you.

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MR HADDRICK: I intend to explore the issue of the qualifications for CSOs in greater detail further.

If I could just - the Commissioner invited you to clarify one of your earlier answers in terms of what you're actually assessing when you and your officers go to a potential foster carer's home. Effectively you're invited to say whether the person in the household met the requirements or was suitable for the child, and you understand the distinction between the meaning "legal requirements" and the suitability or a qualitative assessment. Would you agree with me that what you're undertaking is both ensuring the legal requirements are satisfied as an initial tick-off process - - -?---Mm'hm.

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- - - and then you're also making a qualitative assessment about the potential of the person who expresses interest to be a foster carer?---I think that would be accurate, yes.

Yes?---Probably just to clarify, because of the nature of our intensive input in our agency we have a higher standard than perhaps you may have in a general space. So you can meet the minimum requirements of being - - -

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What do you mean by "general space"?---So a general foster carer. So there's general foster care and then there's an intensive space. By "higher standard", I'm not saying that the general foster care doesn't have high standards; what I'm saying is that to be an intensive foster carer you are committing to dealing with complex and extreme young people so you need a higher level of ability to build your skills and to use a wrap-around support team.

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Okay. Now, that, of course, leads to the possible effect of a huge number of possible kids who could be placed in foster homes?---Mm'hm.

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A known number of people who are expressing interest in foster carers. Isn't there some pressure on your organisation and similar organisations to try and make as many applicants jump the bar as possible?---Yes; yes, that is a reality. There is a pressure to find carers because the demand is outstripping supply. Certainly when we ran the recruitment campaign that was held several years ago - I think that of all the carers that went through the system - and, you know, there were several thousand carers who sort of were entered through, I think 8900, something in that vicinity, applicants, of whom at the end we got just over 500 through, but by the time that process had happened we'd lost 500 carers at the other end. They had actually exited from being carers so the net gain was one or two carers in that period. I could give you specific figures later, but, you know, there's a lot of energy in maintaining the carer pool.

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Replenishing the spots?---Because it's a hard job and I think carers - you know, a lot of carers will tend to probably pull the pin, for want of a better word, when it get very difficult.

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I'm going to get to the issue of retention very shortly, but as a result of your answer there, accepting the proposition that there is pressure to make as many applicants jump the bar and be classified as suitable, using appropriate language, of course, does that have - the natural flow on from that is that there might be some dropped standards in terms of what is a suitable carer. Do you see that as either being a real risk or having occurred in the past?---Certainly the history of evidence would say it has occurred in the past. I don't think that - I think that would be a rare situation currently and it would more be by something not being picked up and then coming out later than by any sort of malicious intent. That said, one of the challenges that we have is that often the desire to actually get carers in the system - we had this lovely recruitment campaign that was run, sandy-coloured hair, little, young kid, and the message was, "Anyone can foster. We will have anyone be a foster carer, even if you can only do one night." So there were all these carers that came into the system that said, "I can only do a Friday night or a Saturday night," so we had this big spike of respite carers but essentially that wasn't what we needed. We needed people available. So the risk of the system is to get the numbers of carers in that you don't get the carers you actually need.

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When you're making an assessment as to a house and a household, are you thinking of a particular child or are you looking against a generic checklist?---For us

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ordinarily it would be against the generic, but there could be circumstances where the department says, "Here's a particular young person we're really struggling with. Can you come up with some solutions?" and as we're constantly recruiting and constantly assessing, we'll be matching as we're assessing so there will be a carer who will be coming through who we think is going to meet the standards and is going through the process. We'll be thinking, "Okay. There's a child that actually may be well and appropriate to line up against." 1

So when you go into a home and you engage in the interviews, your officers might form the view that this is a suitable home for a 15-year-old girl or this is a suitable home for a six-year-old boy with the particular features of that individual child. Are you classifying - how do you classify? I mean, is everybody in one bucket? ---No, it would be rare, but what they will be doing is they will be looking - there's a matching checklist - and I'm certainly happy to provide that - where we actually look at a series of things that the person will be able to do. A lot of it's carer based so the carer will drive the process. If a carer says, "Look, I'm really, really interested in looking after males only. I'm a sporting based person. I want to be able to have males who we can get in because I like to take them to sport," then we will take serious consideration into that to try and match as appropriately for what the carer sees their skill-sets as. That said, once carers come in, we'll try to build their capacity and their skills in other areas because ultimately what you really want is carers who are paraprofessionals who are able to provide a higher level of input across a range of children and young people. 10 20

Can you explain to us how multiple children might end up in one foster home?---Historically it wouldn't happen in our organisation. We might have sibling groups for two, but certainly you're talking about seven or eight, I presume. 30

Or maybe a smaller number; say, for instance, I was a foster carer and I had one child in my place and I thought I had the capacity and the facilities to have two because I have two spare rooms?---Yes.

How often does that occur? How I that facilitated? Is there anything done to ensure that child 1 is compatible with child 2?---There are a couple of questions or statements there, but to answer your first part, often sibling groups is the biggest area where we will have multiple children placed, but in the past there have been circumstances where just due to need we've had carers - and carers are really good, willing people and a lot of the carers - they don't want to see children placed in a residential facility if family based is suitable and if they're the only carer, some of the carers in the past would have put their hand up for multiple children so - and 40

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in the past our systems probably weren't as good in terms of saying, "This is the maximum number of children that can stay with you," but with the foster-care agreement they now have requirements about what they can and can't do and that will change. It will vary over time.

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So what is the maximum that from your experience foster carers have in a house at any one time?---That would be too hard to give you a generic answer. There are some carers who will have four or five children and that could be a sibling group of Mali or Samoan children and that trying to keep them together. There are some carers who only ever one child. It would be quite varied. I couldn't even give you a ballpark on a general answer there.

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Okay?---The second part of your question in relation to matching of children in placements, that would be ideal, but I think it refers back to your earlier comment that when you're in a demand-pressure area, sometimes that's just not a reality, you know, if we have a placement and particularly when we've got transitional placements sitting at one end where there's a huge pressure to reduce the costs associated with that. If there's a vacancy in a general foster-care placement and the carer is happy to take the child and it looks like a reasonable fit, then that's probably likely to be the big driver rather than is this in the child's - particularly the child's best needs or interests in terms of matching.

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Wouldn't it also be suitable or useful for the foster carers as well - I'm thinking of an example whereby if there were two children, one is primary-school age, one is high-school age, it might reduce the amount of travel to and from different schools. To your knowledge, has any work gone into better ways to match children together?---I think that happens all the time. The placement services units, the service centres would be - that would be a very big driver in terms of how they would be approaching that, but, look, the problem I think that we face again is the demand and supply issue. Every night there will be a placement services unit, a service centre who are under a high degree of stress because kids are having to be placed well out of patch and then we're having to negotiate around those children driven back to school to keep connections to school and things like that. So there is a lot of competing demands in the system.

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COMMISSIONER: Do the questions change depending on whether or not the placement is to be temporary? I mean, fundamentally foster care is a temporary proposition, isn't it?---It depends on what the order is. So if a child is on a long-term order, it would be not so, but in a short-term order, yes. Fundamentally we're looking to - where we're reunifying, that's the intent, yes.

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That's right. So until there's a long-term guardianship

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order in place it's definitely supposed to be temporary?
---Until there's a long-term guardianship order we are
actively working to resolve the protective needs and get
the kids home, yes.

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That's right, and after that, after the order is made, does
the question change?---After the order is made for the
long-term order?

Yes?---Yes, once a long-term order is made, we should be
looking to get the child in stable permanently placed,
wherever that may be, so that they have a sense of
long-term security. The challenge is that the short-term
orders - they go for two years so you may well get to a
point one year into a short-term order that we're no longer
trying to resolve the protective needs and that child's not
going to go home.

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In an ideal world you may well then go straight back to court and actually apply for a long-term guardianship order, but if you have a parent who is going to contest that matter and that's going to drag for months and months and months and you've got a range of other cases that you've got before you, the case may actually be deferred until - - -

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In the US that's exactly what happens. They have a 12 month period and then there's an application made to sever the parental responsibility, which is a discrete application. What do you think about that process here, and tied up in that is whether you should have a time limit on the short-term order or should it be based on a decision that can be established to a standard of proof that's appropriate that there is no reasonable prospect of reunification?---Look, I think there is a place for that. I think there is a place for having very quick - especially in the early years. We know that attachment is very critical. Children bounced around the system in the early years actually does more damage than good. There is a place where we need to make quick decisions. There is an unintended consequence for some of these, and that is that particularly for older children - and certainly in the US one of the things that we've seen over there is that those children then are relinquished - the parental rights are terminated but no placement can be found. So their parental rights are terminated here and then at the other side they're left to buffer around the system.

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They're in limbo?---They're in limbo, without - and I guess in the sense of attachment, if you actually have your parents' rights terminated on one end and at the other side you have a situation where you're left to be in limbo, it would be pretty disheartening.

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Is there an age where you wouldn't make an application for a long-term guardianship order for a child?---Look, no - no, but yes. So to answer that in two ways - - -

What about a 14-year-old who - - -?---No, a 14-year-old we would definitely still make a long-term order.

A 15-year-old?---15-year-old we would be likely to. I guess it would depend on the child and the young person's wishes or views. So a young person at 16 can apply for Centrelink benefits and they can do some independent things. Some children at 17 actually live quite well independently. The issue often comes down to the point of guardianship decision-making. So if a child is between those ages, up until 18, and the parent has nothing to do with them, if they don't have a guardian they can't get a passport. You know, there are certain things guardians have to sign off for, so in those circumstances that's where we actually can play a part, but for a lot of young people in their - you know, sort of 15 to 17, they can

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quite easily manage their own lives and they'd like the department not to be in their life. There are some children, though, as many parents would know, that stay at home till their 26, 27, come back at 30. One of the challenges for transitioning is that for those young people in our system the department - up until recently once they turn 18 they've lost that guardianship and many, many - you know, as many as 80 per cent of children who exit care end up back connected or living at home with their families down the track anyway. So again with that termination of parental rights the question then does come, if they're going to exit and end up back at home at some point do we need to look at that and consider what that looks like. Does that make sense?

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Yes. Thank you.

MR HADDRICK: Can I just move to the issue of, okay, so your organisation or similar organisations have made assessments as to whether a potential foster carer is suitable and the household is suitable and you've formed a positive assessment of that household. What's the next step in the process?---So we've gone through the advice visit. We would then organise for a formal assessment process to occur so that they - - -

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What does that mean?---So we'll have an assessor who will go into the home and actually go through a series of questions. There's a departmental document, a template that actually provides a series of questions and things, and it's quite an in-depth process, actually.

Who undertakes that function?---It would vary in different agencies, but traditionally its done by an agency staff member.

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When you say "agency", you mean an organisation like yours? ---Yes.

Not departmental officials?---In some cases departmental officials will do that, whether departmental carers or kinship carers as well.

Okay?---So it would vary, and in some circumstances the department might refer out to a private contractor to do that if they're time-pressured. So it would be varied.

How do we describe again that particular stage in the assessment process. It's more than a checklist, isn't it? ---Yes, this is the assessment of the carer's capacity and it goes into the carer's own upbringing, their experiences as a child. So it looks at their background, some of the sort of pressure point things that we might need to look at in terms of their needs.

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At each step in this process is - I'll use the expression

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"trip wire", but, I mean, I think you understand what I mean?---Yes. 1

There are points where - - -?---Trigger points.

Trigger points, where a person can self-select out?
---Absolutely.

Or your organisation could break the news that that individual is perhaps not suited and will not progress to the further stage in assessment?---That's right, and also in the midst of this we've got the carer training. So there's carer training that they have to complete before they're finally approved. 10

Okay, and that's what I wanted to turn to next. Can you explain to the commission - describe the training, the length of it and what happens as part of that training?
---Yes, so there's a series of modules. I could give you the specifics of the modules post today, if that would help, because I haven't actually done the modules myself for some time, but there are five key modules that we provide in the carer training and these are - - - 20

Okay, so just stop. Who delivers the training?---In our agency it's us, and in most agencies it would be the agency staff, but again, there may be some circumstances where the department is involved in that.

When you say "involved" in, does the department deliver the training or - - -?---Well, they would be - particularly with their own carers they may well deliver something, yes.

How long does the training go for?---It varies, but the five modules usually - ours will happen on a Tuesday night for a few hours, then they will have a day on a weekend or a day and a half, potentially, and another follow-up Tuesday night. So it's essentially two days but it can be up to four days depending upon what you're covering. 30

So most potential foster parents undertake through your organisation or similar organisations between two and four days of training to be a foster parent?---Prior to - - -

Prior to actually becoming a foster parent?---However those who don't necessarily do that would be kinship carers.

Okay?---So this is the challenge, because we're talking about a need to increase our number of kinship carers but there's nothing that sort of requires kinship carers to have to go through process. 40

So when the department places a child with a member - brought a member of their extended family, a kinship carer, those obstacles don't need to be jumped?---Those obstacles - well, yes, I'm not sure "obstacles" is the right

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terminology to use, because if we don't provide good training and support we absolutely know - and, you know, I know we'll talk about retention later, but without good training for carers and without them knowing what they need to know there can be - so the problem for kinship carers is they're still measured against the same set of standards.

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But you'd accept it's slightly different for kinship carers, because it's obvious that one of their principal drivers for looking after the child is because in some way they're related to the child or have an association with the primary family that the child is no longer residing with?---Absolutely, and that is a big driver for them. The challenge, though, is that they don't put their hand up to do it. Most of them come to that by virtue of the child having entered the child protection system, but most of the kinship carers we see, they didn't plan in their life to be a kinship carer, you know. We see grandparents who have long since had their own children leave home, were thinking, "Now is my time to go and travel the world," and suddenly their own child, let's say a daughter, falls into bad company, ends up using drugs, the child comes into care. As grandparents, of course, they say, "Yes, we want to be here," but suddenly at the age of 60 they could be in a position where they're then becoming kinship carers, and there's a lot of grief and loss associated with that. So in the region I was previously attached to we had staff members who would spend a day working with kinship carers and half of that day was just about managing the grief and the disappointment about the outcome for their own children.

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So if I'm to understand you correctly, you're saying to us that there is not a great deal of resentment, a great deal of - well, there's a lack of enthusiasm to perform the function by those who are asked to be kinship carers?---No, I don't think so, not a lack of enthusiasm, and certainly some people absolutely without question - and most kinship carers, a lot, without question say, "This is what I want to do because it's the right thing and this is my kin."

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Yes?---But when we talk about kin we're not just talking about family. Kin in our terms can be someone connected to the child, so this is where it starts getting different. You know, you may have somebody who the child has known since birth. They're a good family friend. That's in our terminology kin. They well may be somebody who comes into that mix.

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And again, from a heart level they'll say, "I want to do this because it's the right thing to do," but it doesn't mean that it was necessarily in their life plan.

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Okay. Returning to non-kinship foster carers, once they've had between two and four days of training - so how much of that day - and are we talking about a whole day or are we talking about several hours, or what are we talking about in terms of over that period of time?---So ours is a Tuesday - we do a Tuesday night, Saturday or a Sunday, and then a Tuesday night.

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So in - - - ?---So there is one whole day and then two sort of half days, if you could call it, by night.

Okay. And what do they study in that period, so to speak? ---Well, some general information about what happens for children in care; some information about trauma; they'll look at behaviour - positive behaviour strategies, techniques. There will be some information about the basics, things like matters of concern, what happens when things go wrong, standards of care.

First aid?---First aid - I don't think that's covered in the program, but I'd have to get back to you on that to clarify.

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Okay. Now - - - ?---First aid is covered. We do first aid, but I think we do that separately.

Not as part of that - - -?---Not as part of that - - -

- - - initial training process?---But I'd have to clarify that.

Okay. Someone gets through that initial training process and they've been successfully assessed in the two previous stages - - -?---Mm'hm.

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- - - the assessment and the more enlarged assessment. Then what happens to them? When do they actually become foster careers? When do they cross the Rubicon, so to speak?---So in our organisation then there is a panel process and all the material is provided to a panel. It's interesting that in many other jurisdictions the panel actually sits with the non-government sector and that is where it ends, and at that point the decision is made, the carer is assessed and approved. In Queensland the decision-making sits with the department, so we actually have a duplication there - I think would be something that could be streamlined. So we will have a panel; on the panel will have a representative from Create foundation, so a young person representative; we will have an indigenous representative on our panel; we'll have a representative from the assessor, the person who's done the assessment; and we'll talk about the assessment, we'll have staff from

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our agency, and then the carers will come in and present and some questions and conversations will happen with them. Subsequent to that panel approving, then the matter will go to the department for final sign-off, because at the end of the day the delegate at the moment for who determines whether a carer can or not be a carer will be the manager of the local child safety service centre.

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So that manager is performing the final function of deciding who is in and who is out?---That's right.

And at any stage prior to that process the application or expression of interest initially can fall over for one reason or another?---Absolutely.

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Okay. What is the - I think you gave us some rough figures before - what is the percentage of people who get from the expression of interest to the delegate saying, "Yes, they're in"?---Look, I think it's about 5 per cent. It really does vary. Certainly there is a higher percentage from people who are related or known to the carer, so that is a request referral stream. But that 5 per cent, you know, there is other figures that say it is as low as 2 per cent, so - - -

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So it is roughly between 95 and 98 per cent of people who express interest in being a foster carer for one reason or another don't end up foster carers?---That's right.

Okay?---And again, to look at this we have to go back to the history. Like, if we think about the series of inquiries, particularly the previous inquiry, you know, the whole system was very, very - it was criticised strongly about the way in which carers did come into the system, so there is a very high degree of rigour here because we are placing the most vulnerable children in society with these people, and essentially a child safety officer might get out to a family once a month or twice a month; the agency staff might be out there once a week, but the foster carer is there 24 hours a day, seven days a week, so if you don't get it right, they're not the right person, you run serious risks.

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You've been in this game for a couple of decades. Does the troubled you at all that there is such a low success rate for people who have initially for the best reasons put their hand up to help out?---No. I think what troubles me more is that still see foster carers as volunteers. I mean, that is clearly articulated, they are volunteers, even in our agency. And if we're expecting people to spend the vast majority of their time actually supporting and caring for these most vulnerable children and young people, I think we have to move out of seeing them in that space. And the reason why people opt out is because this is the only volunteering job that you do 24 hours a day, seven days a week for the rest of your life. And I heard a carer

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yesterday as a not only is she caring to 18, she is beyond 18 and she's still got these children and young people living with her, no longer supported by any agency or the state. And those children have their own children and they become quasi-grandparents or grandparents to the children. So, you know, becoming a carer if you commit to the long-term order, as we were talking about before, that's our life commitment and it becomes an addition to your family.

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And just touching upon that issue of volunteering; what is your experience - obviously foster carers receive some government assistance to partially recompense the expense and the trouble they go to, to perform a wider function for the community - are you aware off the top of your head what that level of remuneration or benefit is?---Look, it varies. Currently there is a system that identifies the needs of the child and the needs of the child determine what level of support is. So there will be a ratio allocated for a child who is moderate, there is a high support ratio. The departmental figures on that could certainly be provided that actually outlined step-by-step how much is actually provided, all the way up to a complex level, so there's level 1, 2 and 3, and at the top end of complex will then be determined by the age of the child.

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Okay. Just before we go into that in a bit more detail and what those levels are, who makes the determination as to where a child fits into that sort of triaging system which has a flow-on effect to the monetary compensation? ---Ultimately currently it's the department. This is a very new system, so this system has only come into place since the start of this year and effectively one of the challenges with the system - and historically the agencies were provided with the full financial support and then they would provide the money to the carers. At the start of this year that changed, where the money was actually then moved so that the department was - actually in July - the department pays all support to carers.

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Okay. Now, just follow an example here, if I could, please: a child comes into a foster carers home; the child is classified as high needs, it's in place there by - or your organisation has assisted in the placing of that child in that particular home; is that assessment as a high needs - how often is that reassessment done?---At the moment, six monthly.

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So a child arrives in the house and six months down the track a departmental official reclassifies that child from being a high needs to moderate needs?---Mm'hm.

Does that occur?---Yes, in the current system at will, yes.

And it has, okay. So now the child is in the home and the foster parents are getting x number of dollars - - -?

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---Mm'hm.

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- - - for a high-needs child because they're having to do - or expected to do greater functions associated with caring for that child. Now the child has gone down to another rung, is that a lower amount for a moderate needs child?

---Yes, it is. And probably in our agency it would be a complex level because it's an intensive agency, so carers would be funded at a complex needs level.

Yes?---And if that child's level of need drops, that would go down to - and the carer's remuneration would drop. And it's interesting because I met with a group of carers in my old role before I came into this current job and that was one of the biggest pressure points, because these foster carers who were intensive carers had given up working full-time, and they said, "Yes, we know we're volunteers, but this remuneration provides our ability to not have to work full-time and it allows us to be able to be at home with these children. By virtue of that then dropping, I have to question whether I can stay at home full-time. But also, I have a mortgage to pay. I'm not working and I need to be able to look at a set income coming into my household."

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So what you're saying is effectively some foster carers are giving up being foster carers because the money has dropped?---Some foster carers are saying, "I am struggling to be able to see how will maintain this if this money drops." And certainly one of the comments they made to me, and I think it was a very great comment, it was that they said, "Look, Rob, if you'd did an excellent job all year and you succeeded really, really well, and at the end of the year your boss said to you, 'You've done such a good job that I'm going to dock you 20 per cent of what you actually get,' how would you feel about it?"

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So the incentive is not in actually succeeding and allowing children to succeed. What it actually is doing is actually creating a system where we will actually have - be encouraged for children to be constantly identified as complex because that's the only way the remuneration will be able to be maintained. 1

So the system artificially penalises successful foster parents?---Absolutely; I think this current system - and, look, we do have to look at the needs of the child, yes. We do need to do that, but somewhere there needs to be a balancing effect about then how do we support the carers at the other end to be - how do we keep carers? How do we say to a carer, "You've been now a carer for seven, eight, nine, 10 years"? What is the incentive to actually be able to maintain that? Is there a way to say - look, they don't get superannuation. They don't get tax benefits. So you can be a carer for 25 years. You don't get long service leave. 10

Do you have any experience of people giving up being foster parents - and don't take this the wrong way, but returning the children to the state, so to speak, as a result of diminished benefits?---Yes. 20

How often does that occur?---It's less frequent than it could be but it certainly does happen.

Okay?---Interestingly in New South Wales when they went down this path recently they've had a very, very - on my understanding, a very high spike in carers saying, "I can't do this any more." So there is a risk. The unintended consequences of saving dollars, a small amount here, may be that we end up with more children transitionally placed because if you have foster carers - and for some of these children they're not children who have just entered. They've been in the care system for some time so they're not going to be in the position to go home. 30

If you have got a process where children are being re-assessed every six months, that naturally, human nature being what it is, leads people to try and jig the system a bit to ensure that they remain at their current classification or something better if there is a financial reward - well, I use the word "reward" wrongly, but if there are financial consequences, if you're a high needs, you obviously don't want to slide down the scale?---Yes. 40

Do you find - - -?---Look, yes, there is that but we're not talking about big dollars, you know. Even at the complex end we might be \$35,000, something like that. You have to ask the question of the general populous; like, the reason these people do it is mostly from the heart and we provide some additional remuneration but we're not talking about massive amounts of money. Certainly you wouldn't put your hand up to do it solely for the money and anyone who did

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that I think would - - -

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Let's talk about money. What are we talking? What is the ballpark figure for - I don't to commodify children, but what's the ballpark figure for one child at home?---The ballpark about 35, 36 thousand.

For a high needs?---For complex - - -

For complex needs?---Yes, but the general carers could be getting 6 or 7 thousand dollars potentially. The range is actually quite - - -

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What I'm wanting to tease out is that difference between what they get for being complex needs to being general needs?---Yes.

So if they're reclassified down from one rung to the next rung down, they lose what, \$19,000 in compensation?---If they're dropping down, they could lose significant amounts of compensation, yes. I could give you the specific figures from a document that actually outlines it or the department could provide those details.

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You know of cases where people have, as a result of that drop down - felt they had to walk away from the system as a result?---Absolutely, yes.

I take it from your comments there that you hold the view that in some fashion a foster carer's benefits should be grandfather cloused, if I could put it that way, so that they don't go backwards?---I think so. I mean, if you were working in any other sort of role, you know, in a public-service-type job and then suddenly the role changed, there would be grandfather clauses attached to that. You don't suddenly drop down multiple pay packets unless you choose to change the job; like, this is not the carers making this decision and absolutely we need to look at the needs of the children and wrap-around models that fit for the needs of the children and we should be looking at outcome measures to get children to actually be more effectively functioning, but some how we've got to actually balance that then with a support mechanism for carers at the other end, I think, otherwise we'll end up with fewer and fewer carers coming into the system.

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But it's your view that currently the system punishes successful foster parents?---Not always, but it can do.

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Now, I just want to take one step backwards in terms of the qualifications issue. You've told us in great detail how one becomes a foster carer and we have now learnt about how a child is re-assessed every six months for their classification. Is there a re-assessment process associated with a foster carer? So, for instance, in six months' time after the care arrangement has been

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entered into, do you or the department or somebody come back and say, "Okay. We'll just double-check that blue card and we'll see that the house is still standing," all those sorts of things?---Yes, there is. So there is a renewal process that exists.

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How often does that occur?---Two years, although it's one year and then two years so it changes depending upon the points in time, and this is a problem because all the systems don't align. So the blue-card system, I think, is three years. We've got a one-year renewal, then a two-year renewal. None of those all align and in some respects it's quite an administrative burdensome task to actually re-assess carers. There would be merit in actually looking at a model that says we re-assess by exception rather than by the rule so that if a carer is doing a good job, there may well be a potential to do some sort of small, you know, process across the course of the year review of the placement needs, but to actually not have to do the full assessment process I think could actually save a lot of time.

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But you would accept that by assessing by exception rather than as the rule you open the system up to integrity issues?---Yes, you do; yes, you do.

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But I take it from your expressing of that proposition that you think that those - the compromise to the system is less than the benefit gained by streamlining the system?---I think the purpose of it is to have really good checks and balances to make sure that children don't drift in poor placements, but we're in a much better position that we were, you know, 10, 15 years ago, even five years ago in terms of the rigour in the system and the way in which people check and know what they're actually for. So I think that if you're looking at reduction of red tape, that would be certainly an area that should be explored.

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Now, a person has crossed the Rubicon. They're now a foster carer. They have passed all their assessments. A particular child has been selected as being able to benefit from being in this foster home. The child moves into the home and then it doesn't go well for the next three weeks. What is the process whereby that initial phase in is assessed and monitored and controlled just in case something falls over in week 3?---So I can talk to our agency.

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Yes, and also more generally, if you could, so the commission has an understanding of how the sector works? ---In our agency we operate on a team-parenting model so at an intensive level every placement - wrapped around it has a supervising social worker, an educationalist supporting, a therapist and a youth worker attached to it around the placement. So we see the carer as the central agent of change. Basically to get change in this child's life and

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to support that child the carers at the centre with the child. Wrapped around is a community model with that team-parenting approach. The other agencies operate with models where they have the support of a carer-type worker, plus a case-manager-type worker and then some other support functions around and at the general level because the funding is less, there would be a different type of approach where a worker may actually be responsible for a broader pool. So there will be some slight variations, but obviously in the intensive area the idea of team parenting is really about trying to provide an in-home wrap-around support model for that carer so that if things start to unravel, then we can maintain that placement because the research is clear. Placement stability is fundamental. If you can't get it right very early and you have children who have placement breakdown and placement breakdown, the future risks to that child and the ability of that child to be sustained in a placement system becomes harder and harder.

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Okay. Week 3 the foster parents find that the child has a drug problem that nobody knew existed previously and they discover this at 9 o'clock on a Friday night. Who do they ring?---In our agency they ring us. We have someone available 24 hours a day.

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Is that indicative of all other agencies?---Most agencies would have some sort of on-call, I believe, yes.

And then through that process you activate that group of people who are assembled to assist that particular child? ---We'll activate what we need to activate. If we can deal with it over the phone we'll try to deal with it over the phone. In some cases we will mobilise youth worker support to get somebody in there into the home to provide assistance, that can happen over the weekend, weeknight; we will try and look at what we can do to actually provide the assistance to that area where we can.

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Now, I want to move on to the issue of retention. Could you tell the commission what your experience has been in terms of once someone becomes a foster carer, how long do they remain a foster carer; how many children are they likely foster care for? Explain the different experiences of people who become foster carers for us?---That's a very broad question. I think some people become foster carers, they on paper look fantastic; we've had some people who come in and when you look at all the skills that they've got on their background you think: this person is going to be brilliant, we can put some very, very complex, difficult children with them; and then we find that within a week they're absolutely struggling. So just because you've got qualifications and skills doesn't necessarily mean you're skilled up for that particular child. Some of those people opt out very quickly. There seems to be sort of like - if I can use an analogy, it's a bit like a marathon runner and the marathon runner hitting the wall, and a lot of people, you know, when they get to that wall they just go, "That's just too hard. I don't want to do it any more," and then a lot of people who never get past that, they never go on; that's as far as they go.

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Okay. Just before you go on, imagine that the foster parent hit the wall at week 10?---Yes.

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It's just not working out to them?---Yes.

It's just not working out their household unit. The agreement is terminated, the relationship is over, what happens to the child?---So in our - - -

Are they put back on the shelf, or what happens?---So in our world what ideally - and it doesn't always happen, we had circumstances where, you know, a placement has broken down on a day and that child has had to be removed that day, but more often than not we would try to, before that, have what's called a disruption meeting where we actually meet with the agency and the representatives from the agency, the child safety office, to say, "Look, things are not going so well. What we need to do to try and pull this together?" There are some carers that because it's such a unique and complex area, that once you provide them with the skills and that realise they can do it - it might be mentoring from other carers, it might be support - that then once they get through that they know: actually, this wasn't as hard; and it's almost like buffering through the wall, and then they just get into this rhythm, and the next time they do it it's not as difficult because - - -

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But conversely, given that your agency deals with complex needs kids, is it more likely to be the pressures are so much larger on the carer that there is more likely to be people hitting the wall, to use your metaphor?---I think every carer, regardless of whether they're general or intensive, would hit the wall at some point when they first

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start fostering. You know, you'd have to ask that question to carers directly, but my experience of it is that that is what is a part of the best part of the system, is providing that really high-level support early so that you can build people's skills and capabilities.

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Okay. I want to just explore for the commission what happens to the child. So let's draw on the proposition that they have hit the wall?---Yes.

And through the various corrective processes, that person no longer either wishes to be a foster carer or is no longer suitable to be a foster carer?---Mm'hm.

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Where does that child go?---So, in our agency if we had another carer available we would find another carer.

Okay?---But generally speaking in certain circumstances, like that where that child is identified as extremely complex, they've gone through a process and they have a circumstance where they then - there are no foster care options available and the placement services unit has gone through the range of options, then at that point is where we start to get into looking at whether or not there is some other residential type facility.

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Because it begs the question if that child is in some way associated with by the foster care - that parent hit the wall, to use your expression - - -?---Yes.

- - - and then they've gone on to another home and presumably the trait still exists, and perhaps that parent has either hit the wall generally or with respect to that one particular child, that leads to the obvious conclusion that there might be a group of children out there who we're trying from foster home to foster home, it doesn't work, and there just bunny-hopping between foster homes?---And there are a group of children out there who are in that position, and in some respects the model - and this came up at the peak care meeting yesterday that was held, was that children in some cases fail to their next placement; so if the one placement fails - - -

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Sorry, explain that, they fail to it?---So that basically what is happening is that we're not actually planning and saying, "This is a really good option," a placement will fail and say that as a result of that failing, that's the trick to move on to the next option. That is a really, sort of, messed up system, to have a working in that way. Certainly the ideal state would be to sit at that point when a placement disrupts and breaks down and say, "Okay, this is a very complex young person. What do we need to bolt on around the side of this child and this placement in any future model and what is the ideal model for this young person?"

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So let me get this clear, if a child has the insight enough to know the system and they are desirous of severing the relationship with that particular foster carer, children can and do fail the relationship, if I can use that, or they sully the relationship, or however they - so that they can get out of that home and go to another?---Mm'hm.

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So there actually controlling the bunny-hopping between homes?---Look, yes, that's one way to look at it. I guess the other way is that these children are very, very traumatised little young people and often are coming to us with very poor and limited skills in how to manage environments, and the only thing that they can control is what actually happens to them, and particularly children who've had multiple breakdowns in placements, they actually often - I've seen children who will actually deliberately break it down because, "At least then I'm in control and if I was to actually connect to you too closely, what's going to happen to me is that ultimately I'm going to be actually - I'm actually going to be hurt. So instead of me being hurt, I'll control my world." And if they then end up in a system where they sort of move from placement to placement to placement, they become particularly good at managing themselves in terms of their self-protection for that. And this is why, I guess, the idea of having a team parenting approach probably could wrap around every single foster care placement, not just general placements - - -

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What sort of numbers are we talking about of kids effectively bunny-hopping?---Well, I couldn't tell you the specifics of the bunny-hopping from a state perspective, but in the South East region when I was there, you know, it would probably be anywhere between 15 to 20 children would be well-known for having moved in multiple placements.

So what do you mean, 15 to 20 children for the whole South East region, or - - -?---Yes, that would be in that position; there were certainly also transitionally placed children, you know, maybe talking, sort of up around the 60 mark there, but some of those children are the children with disabilities, so you couldn't factor that into - - -

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COMMISSIONER: Transitionally-based is children being placed in - from place to place, is it?---No, the transitionally placed is those children where we actually don't have a particular grant funded source and so there's - it's currently a deficit-type model where we are looking for some alternative arrangement to create for that young person. But because it's not a grant funded there's no dollars attached to that particular placement. So it may well be - - -

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Until you get the placement?---Yes, then even when we get the placement the money - there's not a bucket of money attached to that transitional pool. So across the state

there is a lot of pressure to reduce the transitionally placed children and young people to find an alternative grant-funded option for them to be transitioned into - - -

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This is where you've got a gap between what the department has bought - - -?---Yes.

- - - and what it actually needs to have bought?---That's correct. That's correct. And part of that gap I think is borne out of perhaps a lack of models, too, so there's a need to look at alternative models. One of the models - and I think there's a lot of question marks about it, but one of the things that we do have to consider is that there are some children, I think, who need a secure care type arrangement who are so, so badly damaged, we have to really seriously consider how that looks. But having sat on the ground in the region, you know, some of these children really do some serious damage to themselves, carers and others and from a duty of care as an agency or department, to put that child with a residential facility all with a fostering agency, a carer, we're actually breaching our duty of care to those particular people.

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Because we haven't placed them in the right place? ---Because we haven't placed in the right place.

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And sometimes the department orders and pays for placements that don't suit some children in its care?---Absolutely. Absolutely. And that's just the reality when you - - -

So what happens to them?---Well, it depends on the placement, but some of these placements where it's very expensive, the - - -

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Are these inappropriate placements?---No, no, I don't think they're inappropriate. I think, though, that the challenge is that if it's not a grand-funded alternative the first thing that is required if it's transitionally placed children or young people is to look at to find a grand-funded option - - -

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So just tell me how the grant funding works again. My idea of it, my sense of it, is the department sort of designs it. It's a bit like you designing your own house and then getting an architect to have a look at it?---It can be a bit like that, yes. Ideally, if you had your ideal system, you would actually set up your model and say, "In the south-east region here's the sort of 1700 children we have in the care of the state and of these children in care we've done a very high degree of rigour about what the needs of these children are. We know this many children are going to need this sort of a model," and as a result then we can create that model. The challenge is that the needs of children are evolving and changing, so what you might need for a child - you might have a child who has been placed - and this is not dissimilar to examples that I've had, where a child has been in a foster care placement for 20 - for five years with the same carer, something happens and there's a big disruption and the placement breaks down. Overnight that child may escalate and need an alternative arrangement in some sort of a residential type arrangement, or they might need a specialist foster carer, but if that doesn't exist you then have to transitionally find that in that space.

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A motel room?---Motel rooms are - they're certainly not something that we use anymore in our region and haven't used for some time.

What would you use if you had someone whose placement has broken down, you need to place them for four days?---If there were no intensive foster carers available through - that would be our first port of call, to look at the intensive foster care agencies, who may not have grant funding but have carers - for instance, our agency, other agencies that are out there, who have carers where we could buy an intensive placement, but then if you go through all those options, you've gone through all the grant-funded residential options, and then there is still nothing left, this child needs a placement, then it could well be one of the agencies that provide - they may rent a house somewhere and provide some youth worker type support.

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So what are you saying? When you say you haven't got grant funding, are you carrying the cost of that?---No, we will charge the department for that.

Okay. That seems like an inefficient way to do it. Do you have any involvement in the grants funding design?---Does the - - -

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The NGO community?---The NGO. Traditionally, no. Not really, no. 1

Could you play a role in it?---Absolutely. I think the NGO sector has a huge amount of wisdom that could be used in that space, yes.

How would you tap into it if you were the department?
---Well, I think if you're going to recreate a child protection system we need to look at what are the - it's not just about the child protection component of it. I think we also need to consider things like early intervention models and how do we support families in the home, how do we prevent children coming into care. So there's a very big piece of work about creating a model for the future of Queensland that really is about - the model at the moment sort of pushes people into the top end of the system. We actually should be pushing them the other way around, so that if they're coming to the buffer point, the edge of care, that there's a way we can say, "We'll push you back out if we can and we'll support your family. "What we put into an intensive foster care placement could easily be put into a family that's at risk of coming into the system. We've seen - - - 10 20

His own family?---Yes, that's right, the child's own family. Not always, but there would certainly be a place for that, I believe.

All right. What about an appropriate adult who is not a parent, who is not a kinship carer and not a foster carer?
---For that particular child? Absolutely, yes.

Are they around?---In some cases, yes.

But under the legislation at the moment you sort of don't look for them because they're not really part of the mainstream placement?---No, ideally we would, yes, from a departmental context, the exploration of all options available for children when they come into the care system. I mean, this is a piece of work in itself. You could do a huge amount of eco-mapping work around who are the people in this child's community, and if you look at networking theory, most children and young people and families are connected to at least sort of 15 to 20 others. Somewhere in that mix there's bound to be somebody. The question then is, you know, currently that person, do we then try and - if they're prepared to provide the support, can we put on the sort of same level that we offer at the intensive space into that person to support at that point in time. If you could do that - - - 30 40

Outside the system?---Outside the system, yes.

Before the system?---Before the system, yes.

So what proportion of foster carers are you - or the children in the placements are you responsible for? What proportion of foster placements?---In the state?

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Yes?---It's very small at this stage, intensive foster care, in Queensland. We have about 30 kids placed. We are a very new agency in Queensland. Internationally we're probably one of the largest agencies. We're in 17 countries and about 3400 kids intensively placed.

Is that because in Australia we're just coming into the intensive foster carer contact?---No, intensive foster care has been around for some time. I think that the agencies only recently sort of put a footprint into the Australian context over the last few years, and certainly, you know, I had the opportunity in starting in this role to go and look at the models used in the UK. There are many things we can learn from the United Kingdom, the USA, in relation to how placements actually are managed, but particularly the way in which carers are professionalised and supported in a robust way.

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Do you think that we put too much emphasis in Queensland on residential placements for high needs, multiple complex children and too little - or under-utilise the intensive foster care option?---I think there is definitely a place for residential care, but I would put more of my investment into intensive foster care and I would put more investment into general foster care at the front end to support carers to be the best they possibly can be so that the placements don't break down to begin with.

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Even for those who have more demanding needs?---Absolutely.

You can do that?---Absolutely. If you put the right support into carers - and it won't always work. There will always be children and young people who need a residential model, there will always be a need to look at alternatives across the system, but, you know, some of the stuff that happens in the UK, there are examples where foster carers might go and actually live in, or parents might live in with foster carers. You know, that's a model that we haven't really explored in a the Queensland context, but build the carer's capability, I think, with the parent.

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So there are options available that would be fit for purpose that could replace the dependence we have on residentially currently?---I believe so. You're always going to have residentially. Worldwide, that's fairly common. I think that it's getting the right residentially too and the right mix and looking at, you know, what is it we need rather than necessarily a sort of demand-based type model.

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Because they're the highest cost to government, of course? ---Absolutely, yes.

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What about the group residence model? Do you see any role for that in - - -?---Like small group homes or - - - 1

Yes, up to 12, 15?---It's interesting, because, you know, when I first started small group homes were certainly something we used. We've moved away from them. I think that there's been a lot of challenges with some of the sort of experiences in some of the big institutions where they were closed down, where we've had those models in Queensland - - -

Yes, but they're big places, aren't they?---Yes. Well, say, for instance - I mean, Four Corners recently reported on BoysTown. So some of that history is still quite raw in Queensland. 10

There were 50 boys or so at BoysTown, but what about - - -? ---I saw a model in the US at a place called Andrews. They had 83 children all co-located, age appropriate type residential in that space, but on site was an education facility. The education facility had a one to four ratio. They had a therapist attached to it, they had the therapy dogs running around. I actually - I went in thinking this may not be so good. There was actually some merit in it, I think certainly something to consider in the space of the suite of options that we've got available, but you would want to do good research, because I think there's always unintended consequences with creating models like that that we don't end up with, you know, a rack and stack type arrangement where the children aren't actually supported. You've got to actually invest into those services. 20

Sure, and you wouldn't do anything unless you were, again, convinced that it was appropriate, but there would be economies of scale in such a model, wouldn't there? ---Absolutely. I mean, from an economics perspective, yes, the outcomes measures would have to be there. I mean, certainly I know, talking - - - 30

There might be also some value in the socialisation aspect of it, if you have a mix - - -?---Yes. One of the models we have done some exploration of when I worked with Christian Wale, who is the CEO of Shaftesbury, to create a model that was sort of an equine therapeutic model, and this has been - there's work being done on that at the moment, with a residential facility attached, and so you could actually - because some of that sort of adventure based programming actually has merit for young people and certainly my indigenous colleagues over here could comment on this, but talking with Wally Tallis, who was our director of Aboriginal and Torres Strait Islander services, he did say that there was in the indigenous community some thoughts that a communal based model could actually be really beneficial, that the opportunities there to create connectedness and to build kinship, particularly if we're moving young people so many times through the system that 40

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ultimately they're getting no connection with their families or their kin, if you can create a kin environment for them through their peers that could be quite beneficial. So, you know, there's a lot of provocation in the conversation that we're having now and potentially a lot of people will question whether it's right or wrong, but I think the conversation needs to be had.

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Having the debate can never be right or wrong?---Yes.

People who get concerned about plain speaking don't have the job of examining all the available options before reaching any conclusion. You have to explore everything, even what might appear to people to be inappropriate, and they might turn out to be exactly that, but you don't know unless you test it?---Yes, and I think that's - I love provocation. I think the ability to test and question is really critical to our system and we need to examine something - you know, particularly some of the models which have been in place for so long that they've almost just become an entrenched part of the way in which we operate.

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The other thing we know from history in this industry is the pendulum swings?---Absolutely.

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What we do today will be outmoded tomorrow and back again the next day.

MR HADDRICK: I'm just conscious that the witness has been in the box for in excess of an hour and a half. I'm proposing that he be given a five minute break and then when we return I'm going to move on to some other topics, if that suits, commissioner.

COMMISSIONER: All right. We'll make it 10.

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MR HADDRICK: Okay.

THE COMMISSION ADJOURNED AT 11.42 AM

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THE COMMISSION RESUMED AT 11.57 AM

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MR HADDRICK: Thank you, commissioner.

Now, before the break, Mr Ryan, the commissioner asked you a series of questions in regard to the options available to this commission and you have provided the commissioner with some answers about possible models that could complement the existing suite of devices used to provide protection and care for children who are judged as needing protection in addition to the foster care and kinship care models. In particular you provided some evidence in respect of what might be described as a secure residential facility or a larger residential facility which I think the commissioner or yourself described as sort of group homes. I want to just flag an issue or an idea that was raised quite early on in the commission and see based on your two decades of experience in this field whether you see boarding schools or a program whereby children who are taken into the state's care could where judged appropriately be placed in boarding schools so that that part of their time is spent in an educational institution and they receive all the benefits that those who go to boarding school receive. Do you see for some part of the cohort of children requiring protection that boarding school might be one of the answers that should be available?---I can answer this in two ways, but if I answer by way of a story, we actually had a young person who was in our region who was having some difficulty finding a placement. He was about 12 or 13, an Aboriginal young man, and a very, very good boxer, exceptionally good boxer actually, and it was - his boxing was at risk because he was unable to sustain his placement with his carer and we were able to have conversations with a school, a boarding school, who were able to accept that young person on a scholarship and by all accounts last I heard he was doing exceptionally well and I do wonder, had that experience not been forthcoming, where he actually would have ended up had the placements in general foster care broken down and he had been buffered from pillar to post. So I think, yes, there is a place for a boarding school option in certain circumstances within the suite of options for young people that can match the needs of children and young people.

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That might be both financially beneficial to the state in that the cost of the placement in the boarding school might be cheaper than the associated costs of either general-needs care or complex-needs care. So it might be financially better off for the state, but it's also - depending on the child, also better for the socialisation of that particular child and educational achievement as well?---Yes, I think that something we would have to consider in some sort of model like that is if the decision is this is a long-term order and that child's not returning home is not being the sole part of it. So the boarding

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school might be one component in terms of the educational outcomes and the needs of the child and stability for placement sort of options, but you would still want a kinship support network around. So in that particular case I talk to you about that young person has a very good relationship with one of their parents and that has been maintained and strongly supported and in fact it's actually been developed because the amount of contact and time is less so they still have a lot of interactions but it's actually not full-time caring. So you don't want to actually isolate children or young people from their connections or their kin. You actually want to keep them connected to that.

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It would also relieve pressure on the system in general, wouldn't it, if you had some percentage - I'm not trying to describe how much, but some percentage of the cohort spend their term times in boarding facilities and obtained the benefit of a boarding experience as they're growing up and all the other flow-on effects because of it, then that would free up spots or pressure for children who couldn't be necessarily placed in those arrangements and who still needed to lean upon foster-care home arrangements, particularly for general-needs kids?---Yes. Look, I think one thing that you'd want to not do is create a children-in-care boarding house, school-type arrangement that is solely for the children in care and that that become stigmatised, then it becomes a quasi sort of model of, you know, this is where we put them. In that particular case I was talking about it was with a very well-known, reputable school who actually that young person ended up going to. So I think if you could create a suite of options across existing schools so that the experience of being in the care system, the boarding experience is part of normal growing up, not as a punishment or not as a result of inability to find placement.

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Yes?---So if it's the right option for the young person and it fits the child's need, absolutely there's a place for that.

COMMISSIONER: Yes, you wouldn't want the qualification for entry to be because you're in care?---Yes, or because you've broken down in other placements.

But you wouldn't want to exclude someone who was in care if that was an appropriate placement for that person or number of people?---Yes, and certainly, as you mentioned, in terms of building relationships, you know, the ability to build a connection of relationships, peers, to have a sort of learning experience like that. Education outcomes for children and young people in care are, you know, traditionally very poor so the ability to provide that sort of space to learn - and it's not just learning from, you know, the maths-type side of things and the science. It's also the holistic learning, access to sport, access to

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community, access to social events, that sort of stuff. 1

It's negotiating relationships with other people as well?
---Yes, but I think there is a place for it definitely.

MR HADDRICK: So just to make sure I understand your evidence correctly, if the commissioner was disposed to at the end of this commission recommend that the chief executive had the authority as part of being given the care of the child from the court to decide for that particular child their care plan involves going to a boarding facility and the state picks up the tab for that and then only places the child in a home outside term times or around the schooling arrangements, you would see that as a positive development in terms of the suite of options available? 10
---Absolutely. To extend the suite of options available can only be a good thing because children are unique and individual and having a limited option, creates limited capacity.

COMMISSIONER: Would there be a pool of foster carers, do you think, who would be willing to take children from boarding school who are in care for the school holidays, the summer holidays?---I'm sure there would be. I'm sure there would be some people who would say, "Look, I don't want to do - I don't have the capacity to be doing this all the time, but my own children - when they're on holidays, I'm home with them. I'm not working so that would allow me to do it in the times when the school term" - yes, absolutely. 20

MR HADDRICK: I just want to return to just ever so briefly a couple of the aspects you mentioned prior to the break. I wanted you to tell the commission how in a complex-needs or, indeed, in a general-needs home where the child is classified in those categories - how is a connection with the biological parents maintained if it's deemed appropriate? So in a complex-needs home, do we welcome in the biological parents if that can be facilitated or do the shutters go up?---Ideally - the ideal model is absolutely the parents should be, you know, involved in the process but it's very much a case-by-case basis so it would depend on the safety of the carers, what sort of arrangements were in place in terms of risks to children and young people. I guess across the whole system it's constant assessment of risk so the risk decision-making points isn't just at the point of entry. It's at the point of contact. It's at the point of reunification. We're constantly making judgments about: is this risk an okay risk or not okay risk? So in circumstances where all the parts align and it was appropriate, yes, absolutely, carers - and in fact I mentioned earlier a carer who spoke yesterday who presented a beautiful statement about her own experiences of actually having a very strong connection with family of the young person and of also maintaining links into that child's 30 40

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adult life with that child's own children. Yes, good carers can build capacity of our parents so I think that's definitely a good thing.

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Is it your experience that the bulk of foster carers welcome into their homes and their lives, where possible, the parents of the kids they're looking after?---I would not think the bulk. I think that it depends on the circumstances and some of our families, to talk about the counter to that, are very damaged people.

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They have very, very high levels of need, and as a result the interactions can be quite tense and the sort of approaches between carers, they can be quite upset with carers and see carers as the enemy. So in circumstances like that it's a very tricky space to be in, and again this leads back to that what sort of capabilities do carers have to be able to navigate that sort of experience of interacting with families and managing through conflict, grief and loss? Is it safe for the person to be in their home?

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As a flow-on to that, what is your experience or what can you tell us about where a child has been placed in a foster home, obviously pursuant originally to court order, and the biological parents wish to retrieve the child or interfere with the placement in some fashion; is that common and how is it managed?---Look, it's probably less common than actually you might think, but certainly in circumstances where there was a belief that the child might actually - ordinarily parents are provided with the details about where the child is placed, so by exception, we won't, and usually that is based on some evidence that indicates that there is a risk to this child or to the young person or to the carers with the parent knowing the location of the child.

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Moving on to perhaps the more positive side of the relationship, what can you tell us about how often a positive relationship is built up between the child and the foster carer, so much so that they wish to continue the relationship on forever?---All the time. All the time. And unfortunately the sad part about the child protection system is that so often we hear the negative stories and we hear the circumstances where things haven't worked well. But every day there are huge numbers of heroes, and they are literally heroes, both within the child protection statutory system, within the non-government sector, but also the carers who actually make amazing differences in children's lives. I actually brought with me something which read to you because this is from a young person - and I asked permission when I was in the department that is to be shared and - - -

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Just when you read out, don't read any names?---No, there's no names in it. So this was a young person who was placed with a relative, actually, after some horrendous time, and this is his story in a 2011 writing competition:

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My biggest inspiration is my auntie because she taught us not to do drugs or be an alcoholic after she became our legel -

l-e-g-e-l, legel -

guardian. And my mum is a drug addict and alcoholic, so we was always hungry and we had no food because my

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mum spent all her money on drugs and alcohol. My mum had a boyfriend named Paul who was always got into fights and my mum, we had moved school and homes a lot because my mum's bad behaviour. We moved away from her because he hurt mum a lot. Me and my older brother said to my mum that we are going to the park but we got to the train to the city and we saw my uncle there first. He took us to his house and my auntie was there. My mum said she would kill my little brother, but we saved him. Me, my younger brother and my auntie all together with clean clothes and food to eat every day, so thank you, auntie, you are my biggest inspiration.

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And that's it from a - a writing competition - a school writing competition. So whilst other young people were reporting about their biggest inspiration was Justin Bieber or something like that, this is the experiences of people who can make real differences and kids' lives, and I think that's the stuff that we need to celebrate.

How is that flow on? What I'm just trying to tease out how do we as a system manage where the connection grows so strongly between the foster carer and the child that it diminishes the possible reunification with the biological parents; or if a decision is taken by the department or whoever that this relationship has come to its natural end, that it continues on? Other effectively separation problems between carers and foster children if and when the time comes?--Yes, there can be, which is natural because certainly if children and young people are in a long-term placement then as attachments form, they can be quite tricky. I suppose in the ideal state it's about very clear points of case planning and being very up-front about what decision-making is made. So where a child is on a short-term order we absolutely have to be clear that the goal of that, legislatively and procedurally, is actively to work towards getting the child back home. That's what we're working towards. So the carer is aware of that, the department is aware of that. Where it gets tricky is where short-term orders get extended, so we have a two-year order, it becomes another two-year order, suddenly the child has been there for years but it's still a short-term order so we still trying to work with the family and - - -

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But that is a good thing, isn't it, that there is certainty in the child's life, that they are there for the four years rather than being at three different homes in that period of time?--Absolutely. Absolutely. And, you know, at the end of the day if it's a model of building community, that's building an extended community for that young person, so if they actually do return home, then certainly, you know, it's someone else who's like a safety net still in their life. I guess the question may well be in those circumstances: what's the child's views and wishes? What is the child actually saying at that point in time, given that that then is probably - they're the ones that are most

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likely to be impacted upon.

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How often does a foster care relationship result in a foster carer wanting to adopt a child?---That's a very rare thing. It's more likely that a carer will identify that they want to consider long-term guardianship - a long-term guardianship to suitable other in the legislation.

Okay?---And it's not that it can't happen, but the current systems to allow for that adoption to occur are probably more complex in Queensland, they're a little bit more tricky than they are in some other jurisdictions. It certainly is a possibility and it's within the suite of placement options.

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Okay. Now, I want to move on to the first topic I mentioned at the outset of your evidence. I'm putting aside foster care arrangements, I want to move across to the child protection system's workforce and ask you a few questions about that. I identified earlier the variety of different roles that you had over 19 is that the department in its various manifestations. I want to put a proposition to you that I put to a couple of witnesses much earlier on in the commission, and it's in light of also evidence the commission received yesterday: if you were the chief executive of the department - the DG - and you were charged with having a HR policy for your workforce, if you were faced with a choice between a 57-year-old nurse, perhaps a mother of five kids - paediatric nurse - or a 22-year-old bachelor of social work graduate, mother of no children, who would you employ as a child protection worker and why; and they were your only two choices?---Okay, they're my only two choices. I would first ask the question, "What am I employing them to do?" I think we lump child safety officers in one bucket and say that they can do everything; the reality is the variation in the roles within the child protection system is extreme and so what a person is required to do at the investigatory stage is very, very different to the ongoing intervention, kids in care-type space. So I would ask the question about what is the job that they're going to be undertaking, and then I'd want to know what's the skill set that they bring to that job that allows them to be able to undertake the role.

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Okay. Perhaps if I was to divide the workforce into two categories: if I said that one part of the workforce - a clearly discernible part of the workforce - has a therapeutic function?---Mm'hm.

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And the other part of the workforce has a clear investigative and enforcement sort of function?---Okay.

Let's look at the therapeutic function: who do you want working in that workforce?---So therapeutic workforce, you want people who understand child development; not child development level 1, child development level 5, so that

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they understand - so that they can actually articulate very, very clearly what are child who is five needs to look like and should look like and how this child who's come into our system is different; they would understand attachment, trauma-based theory; they would also probably be starting to get into the emerging areas of neuroplasticity and understanding brain functioning and how can we actually reshaped brains; so that's probably what I'd be looking for in a therapeutic space. I'd also be seriously looking at a wraparound model of occupational therapists, speech pathologists and other professionals or practitioners who have a range of skills that can bolt on, because a lot of these young people have needs around the OT space. In the investigatory phase - - -

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Just before we get to the investigatory phase, the descriptors that you just gave us in terms of the workforce I understand would be the upper end of the workforce, the highly specialised members of that particular workforce. The rest of that therapeutic workforce, those who have perhaps daily or weekly contact with a child in need of assistance, what sort of attributes should they have? ---Well, this is the rub, I think, because they still need all those attributes and we expect all those attributes of them, and that's - when it goes wrong it is often because some of those key points of skill sets aren't there.

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One of the challenges that we have is that the - and it was 1
sort of similar to what I said earlier. To do that
particular really specialised work you actually need a lot
of skills and a lot of development over a range of areas
and unfortunately in Queensland traditionally the front
entry of child protection has been seen as the starting
point post-qualification. So a lot of people go in and
they test the waters either there or in a residential and
then they progress and we progress people into leadership
positions. In fact in some respects it should be turned
around so that you actually progress into highly skilled 10
working-with-family positions when - you know, not that you
don't progress into leadership but economically it is more
valuable to be sitting in a leadership than it is to be
sitting in a child safety officer position. So there is
merit, I think, in looking at how we structure that.
Financially it's difficult.

So we promote the good people out of doing the job that the
good people should be doing?---Sometimes we do and they're
not always the best leaders. Sometimes they are.
Sometimes they're very good leaders but they're not
necessarily trained in leadership either so I guess it's - 20
you know, certainly the job of the leadership aspects and
the delegations that sit on the shoulders of team leaders
and managers are very, very heavy. You wear that heavily
and you wear that 24 hours a day, yes.

Just returning to the - perhaps in addition to skills I
should refine my question and say "qualifications". You
would be aware through your observation of this commission
up until this point in time that it has been floated that
there is a dichotomy between do you have the right bits of
paper or do you have the right life experience to perform
the functions. Where do you see the balance laying and 30
have we got the balance right in Queensland?---It's an
interesting question because I started straight out of
university. I have no children and I just had a piece of
paper so my experience was to go into that. 20 years later
though, looking back at what I now know, sometimes I shiver
and think, "God, the things that I didn't know." There
would be things now as a parent that I would look for much
more in-depth than I never would have looked for. There
would be other things that I wouldn't be as worried.

Such as?---Well, a really simple one, for example, is a
child's red book; you know, like their passport that they
get basically from the GP that identifies that they have 40
had immunisation that they have had other points in time.
I don't think I even knew what that red book was when I
actually was first starting out. An understanding that
came up yesterday in one of the conversations was somebody
was talking about going to a - it was actually Lindsay from
PeakCare going to a carer's house when he first started out
and the carer saying, you know, about formula and he's
saying, "I didn't even know there was different types of

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formulas." So if you're starting out and you don't understand the basics of what a child might need, well, that's - and this is child development so the carers have a function then in actually educating. They actually do the education process and I had some exceptional carers in my early career that taught me some great things. So going back to your comment about the paediatric nurse in the same instance, those sort of people can provide great capacity building and learning. The problem is we don't keep the staff in that space by the time they know that.

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Before we get to the issue of retention, when we attract in the first place, the second part of question is: have we got the right balance in Queensland?---Yes, so, look, I think that we do need to look at what are the jobs that we want people to do rather than talking about the right balance, but certainly life experience and skills has a lot to be - a lot to add to the way in which work actually occurs.

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COMMISSIONER: Is it viable to rejig the system so that you have different types of child protection workers who, say, perform as a specialist the forensic role? That's all they do?---Yes.

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Can you train them and employ just to do that and will you keep them if you do?---I think the answer to that is yes. However, there is an unintended consequence of specialisation and the problem with specialisation is that people can patch or ring-wire that specialised - - -

Soloists?---You get solo operating and saying, "I am only doing this piece of work." "But things are going completely pear-shaped over here. As a manager, I need you to go and do this work." "No; no, that's not my responsibility." So I think there is a need for specialisation but probably the specialisation you could have is that in every region they could call on their own staff who are forensic, their own doctor, paediatrician who sits there, so all these things could be all contained within the one space so that the resources can be used equally rather than sitting in separate departments, if that makes sense. So if there's different departments, then people get worried about their resource and how that's used and it's meted out, but there is a set of skills there that I think we do need to be able to either skill people up in or purchase in.

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MR HADDRICK: Moving on to the retention issue, you touched upon it briefly in an earlier answer. In addition to pathways into the workforce, where are we going wrong in terms of retention?---Well, partly that was answered in my previous response in terms of the ability to keep people at an appropriate remuneration level when they first enter. I think for our non-government agencies part of the problem is that they're not funded appropriately to support - so

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particularly in residential spaces what we're expecting them to do and the level of remuneration in terms of the revenue base for agencies it would need to be far higher to attract the right people who currently - you know, some agencies will have certificate-qualified people. Some may not even have that in terms of residential and yet these are the kids at the other end of the extreme who have the highest needs so - - -

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But above and beyond the remuneration issue, are there burnout issues?---Yes, there are burnout issues. I think caseload is a factor. I also think though that again it's about job fit so understanding what job people are actually getting themselves in for. I put it in my statement and it wasn't flippant, but certainly when I started, I had a higher caseload but far less paperwork. The paperwork now - and it's no sort of criticism of the computer system, but the computer system is burdensome and a vast majority of time of child safety officers is spent in front of a desk author keying information to actually ensure that the system meets certain requirements of monitoring organisations and that doesn't mean you get good outcomes for families. So if you want child safety officers to be working with families, then we have got to find ways to strip back the administration part of the system.

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Alternatively, if you want people to be really good at administration and author keying of information and managing of data, then maybe you don't need to have child safety officers. You need administrators who can type 100 words a minute so they can just enter that and who understand IT systems, but fundamentally now if somebody came into a role that I was advertising and they could not type and they could not - they had no demonstration about their ability to learn it and they had very low IT literacy sort of in that area, in computer literacy, I would question whether or not that would be a good job fit because they would spend so much time just trying to author key, let alone to actually get to the other stuff. However, that person could - I've seen workers who've come in who - for example, the person you talked about who might have been in their fifties who never learnt to type, who may not know how to use a computer system, but they could work with kids and they could work with families like nothing else. So if you're then looking at their files, they'll be some of the worst files on the system. They won't have recorded information but the outcomes they get for the children are exceptional.

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But you do see as a component of the workforce a stream of people who come in who don't necessarily bring in the right pieces of paper from the word go but they come because of their composite skill-set they've received over their life? ---Yes, definitely, but I think that's holistic across the whole system. I think the piece of paper is - you know, there is a lot of debate about the piece of paper, but it's actually the skill-sets underpinning the person doing the

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job. So I want somebody if they're an investigator investigating who's really good at investigating and there are some people who really get it and you get them into the job and they just - it's like a duck on water. They just know how to investigate. They're very good at it. They understand a forensic environment. They understand the legal context. They're good writers, but they're finishers. They get stuff done so you can move through your assessment process, but you get some people who go into that job and then they struggle. They don't get - they don't enjoy going out. They don't enjoy challenging conversations, but you move them into a family-type environment working with carers and they're exceptional. They just do a great job. So I think it has to really be about much clearer - clearer expectations about what we're asking people to do and then really a quite solid sort of skills base attached to that. I don't think any university or academic institution, vocational or otherwise provides that pre-entry. So if we were to do that, I think what we'd have to look at is something like British Columbia, Vancouver.

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So when I was there they actually offered - they said to universities, "We think child protection is so specialised that if you are going to work in child protection you must do certain things," and so they actually then said - they provided funding to universities to set curricula up that if you had not done that curricula within a social work stream with a range of child protection specialisations you could not work in the statutory child protection system.

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But there's a problem associated with that proposition, isn't there? When you raise the bar to that level you diminish the number of players in the game?---Well, interestingly that didn't. The opposite actually happened, and again, this is about profile range within an industry. So they attached it to a particular base. It was within social work, social science, but what actually happened was that people coming in saw it as much more prestigious and the skills development provided through that program included three levels of practicums attached to local authorities, so that the people would be going out, learning on the job as they progressed through their program, and then at the end of the program a 90-day face-to-face process before they saw their first client on their own, and then across the course of the first year they had delegations that were staggered. The delegations would be incremental, so on day one I only had limited delegations as to what I could do. By the end of it I would have delegations fully attributed to my ability to be able to work with the family, a high cost at the first part, but what I found when I was over there, I think they had 60 people going through university doing that course of whom only seven would end up in roles in the child protection statutory system because they don't turn over their staff. So I was meeting with staff who had eight to 10 years' experience on average, who had PhDs, masters level qualifications, who were highly skilled, and they were staying because they actually were very, very well trained and supported. The challenge was that unis were then saying, "We've got 43 applicants here who are not going to get a job in that area. Why would they continue to do that degree?" So I was saying, "Bring them out to Australia. We'll take them," but I think this is - everything has some - - -

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That's the same across many professions. I mean, it's the same with medicine. You've got a huge number of MBBS graduates coming out of Australian universities but there isn't specialist placements in hospitals?---Yes.

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That's common right across the allied health workforce, isn't it?---Yes, I would say it probably is in other areas, but in our area it's a different space, in that we probably don't have a particular specialisation in child protection. You know, I think that there is - child protection is now - like, even if you go back 10 years, there is so much to know in child protection that I really do think there is a

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need to create some specialisation within the paradigm of whatever it be, social work or some other area, and say, "To be able to do this work, before you hit the ground this is the sort of things you need." I think once you shift that you would potentially see some changes, and in universities they could access, you know, a level of input. They could get academics coming in who actually have the practical experience so we could match practice and research.

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As just a final topic, or final head of questions, in your statement on page 2 at paragraph 15 you have identified that you wish to - you see this commission's role as considering or looking into ongoing skills development for those in the child protection workforce. I just wanted to make sure I gave you an opportunity to explain what you meant by "ongoing skills development" and what you think needs to be done in terms of the workforce?---So I think there's two answers to this question you're asking. One is that firstly we invest so much energy currently into staff who come in, child safety officers, in their first 12 to 18 months and then after it's sort of like this sort of amount like this that then drops off rapidly and then there's nothing, or very, very little input. Actually, those people who get to the two-year marker, we know they're most likely to stay. If you can get people past their first year you've got a very good chance of keeping them. If you get them past the three years you're almost certain to keep them for a long period, but we'll keep even more if we're investing in them constantly. So I think there needs to be a program of learning so that things like neuroplasticity, the amazing technology that's now available to us, who knows what in 10 or 15 years we will be able to do with online technology around how we support families in homes and things like that. That should all be weaved into learning for those in the system now. For those coming through the system, ongoing skills development, I am not sure, I am not convinced, that putting every energy and bucket of resource into training people at the entry point is the sole way to do it, because there's only so much information people can carry in their head at which point then the grey matter starts leaking out their ears, and I've seen that through training programs. So a learning model probably needs to be staggered over time so that you come in, you get a suite of base level skills provided to you beyond what was provided in an academic setting that's specific to the statutory space and then over time you have refreshers and top-up, because things change, but the problem is people tend to run their model based on what they know.

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Okay, and as a final question; I should have asked you this at the outset when I was going through your qualifications, but just for completeness of the transcript, you were formerly the president of the Queensland council of the National Association for the Prevention of Child Abuse and

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Neglect. When were you the president of that body?---Is it my notes there? 1

No, it's not. That's why I asked the question?---Probably it would have been not last year, the year before.

Okay, and you remain on that council, don't you?---I'm still on that council, yes.

How long have you been on that council for?---It's probably getting up to about 12 years. It's a voluntary role. 10

Okay, yes. No further questions, Mr Commissioner?---Could I make one comment on - - -

Yes, certainly?---That's the other part of our system, is the primary prevention.

Yes?---And I stay on NAPCAN council - we need good people in the statutory end but primary prevention is fundamental to solving the problem of child protection and the suite of intervention has to begin there. One of the programs that we offer is Play a Part through NAPCAN, and that is really about getting communities to play a part and saying our role, right early, is that communities should all be taking responsibility. When my neighbour is starting to arc up and there's a bit of a fight my responsibility is not to ring and notify and say, "My job is now done." I actually want a community that says, "Hey, look, can I help out? It seems like things are a bit tough at the moment." Because if they do that and they never notify and the child never enters into the system we solve so many of the problems, but at the moment communities are disengaged and disfranchised. So part of the solution is the suite from that very, very early primary intervention all the way through to the tertiary, and it should be the pyramid, as the RACI's report and the national framework report is on, that the pointy end of the pyramid should be very small and the investment in universal service delivery should be very high, with a secondary system that buffers people out where they can and only lets people through. The problem at the moment is that the triangle got inverted. We all know that sort of model. There's like this big sponge where the holes to get into the tertiary system are big. So everyone gets into the tertiary system but the holes to get out are very small, so once you're in it's very, very difficult to get people back down to the other parts of the system. So that needs to be considered. 20 30 40

Thank you, Mr Ryan. No further questions, Mr Commissioner? ---Thank you.

COMMISSIONER: Thank you. Mr Hanger?

MR HANGER: It's NAPCAN's job or NAPCAN's task to try and keep people out of the tertiary system?---They are one of many agencies in that space, but, yes, certainly that's a function, and, you know, helping people to understand what they can do.

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Mr Ryan, the Canadian province of British Columbia is quite a leading area in the field of child abuse and neglect prevention, is it not?---Certainly they have some - yes, they have some things they do exceptionally well. I think - like, I've found nowhere in the world where I've sort of thought, "This is the silver bullet, the magic bullet." There were parts where I'd say, "Look, this is really good," and there's parts where I'd think, you know, no, but certainly they're doing some things that I think we could learn from.

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I understand from your evidence that ideally you think in terms of education there probably should be some kind of specialised child protection degree available throughout Australia?---Yes. Maybe not as - well, in British Columbia they've attached it to a social work qualification, but it's a specialisation within that, so I think - - -

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Yes, so that in your last year or something like that you specialise?---Yes. I think from memory it was in the second year of the qualification you had to make a choice and at that point you then went through that. It didn't mean you couldn't practice in other areas. So people could still go through and practice in a different area of social work but it just meant that you had to choose at that point that this is where you really wanted to work.

Yes?---I think that there is merit in exploring that, certainly.

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The other point you were making in terms of education was there should be continuing professional development spread over many years?---Absolutely.

In particular with a view to keeping up to date with all the latest research, such as the neuroimaging - - -?---Yes, definitely. I think the contemporary research that's out there in the medical professions and in other professions and what we know needs to be factored into the learning of staff so that they can be looking for the signs very early about how to intervene. A fundamental premise should be how else can any other person in this system help to get this child supported to be the best possible functioning adult for life and to support that family and/or that carer. So if every single person in our system had that as their primary driver then that would be a good outcome.

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At the moment I think, though, that there's a lot of people that if you asked them to then present how they make a difference to children, it would be very hard to draw a through line between what they do and what actually happens on the ground.

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Thank you. I just wanted to make one point which I doubt if you'll disagree with, and that is this: that the foster care payment is not a wage, is it?---In Queensland, no.

No?---The foster carer payment is a remuneration for the providing the support to the child.

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And if we work on the principle that it's not a wage but is intended to pay for the cost of care, then it follows that if the cost of care goes down the amount of money you receive goes down?---Yes. Although one could argue that as a child gets older, whilst you might have a reduction in the child's level of need, the cost of care that may go up is the fact that you've got a 14-year-old who will eat you out of house and home and it costs a lot more to do that.

The point I'm trying to make is simply that foster carers are voluntary workers?---They are.

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And that the money that's paid to them by the department is labelled as being, "This is what it costs to care for the child"?---Yes. And, you know, there are - I mean, some of the parts of that is that there are some strengths base to what it costs to care for a child. So if you're travelling with a child and doing lots of sport, for instance - the example I said earlier where they're going off to boxing four nights a week - that may be something where we'd factor in that. That's above and beyond what you would normally do.

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And of course it's not regarded as a wage for taxation purposes?---No, not in this state. In other jurisdictions it certainly is and yes, it is regarded as a wage. They would have options for a range of other suite of supports available to them.

I wanted to try and understand a little more where the line is between your organisation that you work for now and the state. You talked about team parenting. Now, the people that you mentioned, are they employed by your organisation?---Employed by us, yes.

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So give us the example of these positions that you would employ at the moment here?---So supervising social worker, whose role is primarily to work with the family - the foster carer - and to support that placement in whatever way possible to ensure the stability, building the capability, using the key developmental assets I mentioned earlier to look at the child actually improving and building skills and capability over time. There's an

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educationalist, so that educationalist's role is to actually work with the young person around their education needs and the carer, but primarily a lot of the work that they do is actually working with the schools to try and support schools, match the right school to the right young person. We're talking about very skilled practitioners in these roles. We have a therapist. The therapist's function, they have family therapy skills and background. The therapist function is to support carers in some of the therapeutic skill set and underpinning, but also things like team parenting, so we will have frequent team parenting meetings where the departmental staff member, our therapist, supervising social worker and the carer will meet to talk about how things are travelling, what's working well, what needs to be improved. So it's, I guess, a function of the case planning process. And we also have a youth worker. So when young people enter care full-time our youth worker provides support to the young person. Sometimes that might be transportation to assist the carer, other times it might be quite concrete support, getting them to do some work around their own skills development; it might be some work around a piece of art. Every young person who comes into care actually does a piece of art to represent how they're actually travelling, which is framed, and we actually keep that in the office to keep us very connected to the children and young people in our system.

So that's four basic experts that you mentioned?---They would be the key four, yes.

Thank you. And so those people are paid for by your non-profit organisation?---That's right. And that's why the intensive placement is a higher cost placement, because you are getting a wrap-around support that provides that sort of immediacy and responsiveness to the placement needs.

And where is the interface with the state system there? Where do they keep a check on you? Does a social worker check on your social worker, or is there a state employee that checks on you and - - - ?---Yes. So probably the primary interface would be through family group meeting, case planning processes. That would be probably one of the big drivers; placement meetings, any placement meetings that occur. But if there's things starting to unravel it would be through general casework as well. So there's quite a strong interface between us and the service centres.

Strong bond, yes. All right. Now, I haven't as yet understood or had a definition of what "intensive" is and what "non-intensive" is. I did pick up that you mentioned before that most of these cases are hard because children have been abused or neglected?---Mm.

So we're starting probably not with the perfect child even

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at the best level?---Yes.

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"Perfect child" being one who doesn't give their parents any problems. So could you sort of elaborate a little bit more on these levels of problems that they confront?---Yes, certainly. I mean, there is a document which if you haven't got, I'm sure the department can provide, that actually outlines the levels of needs, so from moderate to high too complex to extreme.

Right?---I actually think that needs some significant review. We need to look at actually what is the mechanism to determine what is complex, because certainly what we're seeing - and after 19 years I've seen that the level of need of children and young people coming into the care system has certainly increased. The data shows that there hasn't been an increase in the number of extreme children in the South East region based on the current measure, and yet everything we're seeing is that their needs are far more complex and extreme and the amount of support we have put in; so to answer that question I think probably what is really critical is to review that document. But from an intensive perspective there's a bit of a mindset that - historically we call a specialist foster care - there was a mindset that specialist foster care meant that you got a "special" foster carer who had some specialised skills. I think that that is a false model in that when we look at what we're remunerating, you're not able to attract people who have qualifications or degrees or any of that sort of stuff into that space. And even if you did, certainly I've seen a lot of people over the years and I don't think necessarily that people who are social workers or psychologists would make the best foster carers. So in that space you would actually - what we're saying is that you have an intensive wraparound model, and that is what is a specialist aspect of it, that you've got a range of providers who all work towards stabilising placement.

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And the carers that you use, they don't have any special training because they're dealing with complex needs?
---We'll provide additional support and training, yes,
so - - -

There's additional training?---Yes. They have regular carer forums; we get special support in. And in circumstances where we saw something happening where there was perhaps some trauma issues that we felt needed some additional skill sets, we would broker in the service delivery to provide that for the carer.

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I take it that doesn't occur in this two days of training you referred to earlier?---No. The two days is really pre - - -

That's the basic - - -?---That's the basic, and that is pre-determining that that person is suitable to be a carer

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at that very, sort of - so at a base level. There is still a heck of a lot of work that has to happen and support the carers beyond that, yes.

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Okay. Now, you used the term "complex needs" and you've used the term "intensive". Are they interchangeable?---So there's four; moderate, high, complex, extreme, is the way that the process works.

And does your organisation just deal with the second top of those?---Complex and extreme, we will deal with.

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You do both?---But we also will - increasingly we are seeing young people with high needs coming into our system, and we see that they are rated at high, some of the young people are rated as moderate - and in the placement services I've seen this as well - on paper you look at that when the child comes in they're far more - their needs are actually more likely to be higher or complex. And it's the nature of child protection. If you think of your own children and your own child was suddenly removed from your family and placed with a stranger family and had all these external providers all coming around prying into your life, your school was potentially disrupted, even the best, most well rounded young person is going to have a level of high needs from that. So I think every child coming and has high needs. I don't think we could even say that there was any moderately children in our system. We're at the buffer of that.

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All right. But for my benefit, the complex needs kids, is this physical disabilities or - - -?---Yes, it could be - - -

- - - or mental disabilities?---It could be disabilities, yes. Disability is one of the interface areas. And we are seeing an increasing number of children who are relinquished from the care of parents because they are unable to care to children in their home and who are unable to be supported. And certainly in my old role the tragedy was some of these parents will be saying, you know, "If I could get a bit more support at home I be able to do this," but it would get to a buffer where we were unable to provide any financial support and those children would be relinquished to the care of the state based on they can get more support at that point.

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And based on the fact that they have disabilities?---That's right. 1

Yes?---So that would be one environment and we have some extreme children and young people who have very, very high needs with 24-hour medical supervision; nurses going in and out of the house; high demands on carers. So then you can have potentially children and young people who are suicidal risk, suicidal ideations.

These are kids with psychiatric problems?---Mental health issues. You can have absconding young people who are high-level absconders. Self-harming could be a factor. Sexualised behaviour is another sort of area that comes into the complex extreme space. 10

Right, thank you. Autistic kids?---Autistic young people, yes; so some of the intellectual functioning, yes.

All right, thank you. Now, your organisation is charitable, non-profit?---Not for profit, yes.

Are there overseas examples of profit organisations? ---Absolutely, yes. Look, I think the profit has a bit of a slightly negative connotation, but if you actually have the capacity for agencies across the sector - I think we've relied too heavily on a model that says that traditionally church based institutions would do this stuff and a lot of the way in which the system has been funded has been by the government contributing and church based institutions topping up so we really haven't reflected the true cost. The advantage of an agency that's able to provide additional costs through a profit-type area is that the revenue then can be used to build other capabilities. So certainly the agency that I am part of has a profit base in other parts of the world. 20 30

You mentioned to me outside funding some research at Oxford University which the commissioner may like to - - -?---Yes, publicly I can't talk about the actual amount but the agency has just contributed to a three-year partnership with Oxford University to set up a research centre for foster care and education, understanding foster care and education, and part of setting that agency up, that partnership up, was really about the lack of international research and evidence base in this area and the lack of sort of interest in really seeing this as a really important area. So to have one of the penultimate universities to actually take the carriage for that - and we've got some Australian academics who are part of that international program, one of whom is Dr Leah Bromfield. 40

Thank you. Could I just ask you about one piece of evidence you gave? Someone else has said the same thing. 80 per cent of long-term people go back home?---Yes, I believe that's the figure. When we say "go back home",

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obviously they're adults so for many of them they maintain connection to kin and to family beyond their care experience, but put it this way: at the end of the day if you're not with a foster carer and that foster-care relationship finishes up, most of these young people have some desire to actually reconnect with that family base, yes.

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A perfectly natural sort of thing?---Yes. It's a bit hard to measure it in true form because we don't do longitudinal studies of kids' placements.

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I was going to say do you know how those relationships then go - - -?---No; no.

- - - because they didn't start off very well?---No; you know, look, some of these children who come into care at three and five for reasons of neglect or reasons of parents' drug use - those concerns at 10 are no longer the same things that we need to actually be worried about and this is - some of the challenge is that the children in care in our state - in 92 when I started there were about 3600 children in the care of the state, give or take. I'm rounding. In 2000 it was about 3800. By the time of the CMC it was 4500. We're now up to 8200. That trajectory cannot continue. We have to look at that and say, "How is that with two types of order over 10 years we maintained?" and certainly there would be an argument that we should have increased, but with only a million children in Queensland and 8000 or so children in the care of the state here - we have got 1.2 million children in Victoria and they have less children in care. So there is something that we need to look at in that space about how do we do things differently and part of that I think is the early intervention space and putting energy back into that ability to divert people out of the system and when they're in the support, to support them at every point along the way intensively at the earliest possible point so that when they actually - they don't escalate into higher and higher parts.

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That statistic doesn't necessarily mean much though, does it, because it might mean that Queensland is doing a better job?---It could do, yes, and certainly that's conversations I've had. It could mean that we're actually particularly picking up all of the cases that are really necessary and the children that are really necessary. I guess that's the research stuff that would be really good to see. We do know that what is happening is that children who enter the care system at staying in care much longer and the longer you stay in care, the harder it is for the children to leave the care system.

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Yes?---So when we only had one type of child protection order which was care and protection which existed until the year 2000, that order - often we would administratively

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return children home and make that - the managers would make those decisions. There was no returning to court and so that allowed a lot more flexibility in that space and it wasn't - you know, there was a lot of things that needed to change but I guess the administration part of it was far less burdensome and it was built around supporting family.

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Are there problems when a child is in care with the parents moving home and therefore saying, "The foster parents are too far away from our home"?---Say that again; explain that again?

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Are there problems when - well, a foster parent is in, say, Brisbane and then the parents say, "Well, we're actually moving from Brisbane to Byron Bay"?---Okay. There are problems.

"You better find a foster parent in Byron Bay now to be near us"?---Yes, there are, and probably more so it's not so much at the point when the parents move. It's actually at the point when we're looking for a placement to begin with, particularly in inner city Brisbane and this is, I think, again an area about how - they need to look at how we attract and support foster carers. It costs a lot of money to live in the inner city of Brisbane and people are not willing - two people have to work to sustain their level of sort of, you know, mortgage and/or rent. So if you want to find carers in that space and then say, "Look, we really need one of you to be home full-time," we have got to find ways to actually remunerate and support people for their cost of living.

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I will just ask you one final thing about medical treatment. Once a child goes into long-term care, a decision about medical treatment is made by the department?---Long term, yes.

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Yes, long term?---Yes, we become the guardians.

Yes, but in short-term care in the two-year period, does the department make the decision about medical care or does it still reside with the parent?---It depends on the order. So there are suites of orders in the short-term space. There's a short-term custodial order, short-term guardianship order, and a short-term custodial order can be to a relative or it can be to the department and it depends on the medical intervention necessary. So there are actually three different spaces in there. If we have guardianship and a short-term order, we can make all the decisions. If the parent has guardianship and we have custody, then subject to what the order - the medical intervention required is we may have to get the parents' input unless, of course, it's urgent where medical professionals can make their own decisions at that point, life threatening.

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So it really depends on what order is sought?---It depends on what orders are sought.

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COMMISSIONER: Custody is day to day?---Custody is day to day.

Guardianship is long term?---Absolutely.

Do you think that we have got too many child protection orders available to magistrates to make now?---I have often wondered that. I have often wondered whether or not we do have too many orders now in the system and it's become overly complex. That said, there are opportunities to use - you know, the same as having a suite of placement options, having a suite of orders is a useful thing, but when you've got a suite of orders, taking it back to learning environments, it becomes more and more complex for people to know what does that order actually do. So there are some orders we're not using very frequently, particularly in the short-term non-custodial orders and so that does beg the question: have we either (a) not communicated what the order's purpose is or is the order not actually affecting a need?

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Did I detect an implication in an answer that you gave before that you think that administrative management by the right CSO is better than court management of a case of them? You were saying that in the old days, in the Children's Services Act days, you had one order, a care and protection order?---Absolutely, yes.

You were the manager of that and you did a better job than the court would?---It's always risky, isn't it, because with hindsight you get rose-coloured glasses and I don't want to sort of pretend that it was all great, but certainly the amount of administration - we know it takes about 70 hours on average for a court matter for a CSO.

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So if you look at an average CSO's caseload and you take off the fact that they have their four weeks leave a year, 10 days of public holidays, and they have four weeks in the old model of face-to-face training, the amount of available time for them to do work - when you're taking 70 hours of court work and you think of a caseload of 20 - it might leave them with about 13 weeks in the whole year to do casework. So I think if all the energy is spent there then - if that's what we want people to do then that's what will get them to do, but then someone else has to do that other part.

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You have to give the system a different name if that's what you wanted to do?---That's right.

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All right. But that creates tension between the advocates of intervention in family being so contrary to our social value of family autonomy that it needs to be court supervised rather than leaving it to the discretion of even a professional person?---Yes, absolutely. And I would never want to sort of, you know, look at parental rights not being able to be challenged. Absolutely they need to be challenged in this space more than any other space in the world because this is one of the most fundamental issues, when we are removing rights. The challenge, I think, is that in allowing people to do that well and in having a really good robust legal capacity in our system, we generate a huge amount of work, so that actually then creates an inability to do other parts of that family intervention.

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So you think it would be better, say for example, if the court - once the court made the order it stepped aside and let the experts get on and do their job with a report back facility or something like that?---Maybe. Maybe something like that or some sort of mechanism - I think the mechanism needs to really be again about that: how are we actually making a difference for families? Because if a child safety officer is spending most of their life preparing affidavit material and talking in court, then how they do casework to actually get the child home? And so then we find these positions where six months on the matter goes back for hearing and no case work has happened and the matter hasn't actually been addressed with the parent. So is almost counter-productive because if they were with the family might actually be able to stop them even going back to court.

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While in America adoption is almost fast-tracked after 12 months, that sounds a dangerous practice through the prism of our system, but it's ameliorated, I think, to a large extent because they ask a different question of the system at the outset. They say to the system, "You prove to me in the next 12 months why you can't reunite this child with its family"?---Mm.

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And if you can show that you've done your best to do so and you can't, then we might predict that it's unlikely that you will in the foreseeable future either?---Mm. 1

We don't do that here?---No. And I think there's real space in that area to be able to look at decision-making on - you know, every day a child is away from home we should actively - - -

Justify?--- - - - be justifying why, then, this is still a really fundamental thing that's - - -

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So you've really should be justifying the initial intervention on the same basis as the ongoing intervention?---Absolutely. And I think that is that - I think it was - it might even be British Columbia as well, but they have decision-making points - - -

California does too?---Yes.

MR HANGER: it is British Columbia as well?---Risk entry points, they sort of intervene at different points and everything is about risk. And this is the other part of our system we really have to look at, is that the decision to leave children at home is risky. So we have to then be prepared with that risk is going to carry some potential - you know, at its worst extreme - and Eileen Munro's works talks about this - that sometimes children - bad things will happen to children. Even with the best of intentions we will never prevent it. The problem is if you have a model then that is set up that when that happens, people are richly hung out to dry, people become paranoid. And I think that this is what can happen, is that over time through a series of child deaths there's a level of risk management that's about saying, "I know what's going to happen if things go wrong, so give me two decisions: should this be done in 24 hours or five days," I'll say 24 hours because that's quicker and if I'm wrong, I've gone with the most extreme entry point. But then every person along the way, they don't want to reduce that down to a five-day type response because if they do and something went wrong, the person looking at it will say, "That should have been 24 hours." So the system has to be set up in a way that allows you to carry risk, but then to be supported in risk if you - - -

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COMMISSIONER: Even the very term "risk management" suggests that you can manage it?---That's right. So on the balance of probabilities people should be afforded with if you've done everything in your power that you could have done generally speaking, then we will support that in that environment.

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Then you have to enter into a social contract with the balance of the society to say, "And if we do that, don't jump all over us if we make a mistake"?---Absolutely, yes.

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Don't put it on the front page of the paper and say that this has been a complete stuff up of the state government, you know, when one situation happens; when, you know, 99 per cent of the time actually the successful outcome has occurred, yes.

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MR HANGER: And you fear that we're in a phase where people are forced to become risk averse?---Absolutely. Absolutely, yes. That is a big driver.

I've nothing further.

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COMMISSIONER: Thanks, Mr Hanger.

MR HANGER: We'll move away from the bar table so that our friends can come down.

COMMISSIONER: How long are you going to be? We'll keep going if we don't finish in the next hour.

MS STEWART: I'll be about 35 minutes, up to an hour.

MR CAPPER: I don't have any questions at this stage.

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COMMISSIONER: Do you want to be excused?

MR CAPPER: Not at this stage. I'll give you an answer -
- -

COMMISSIONER: Do you want to stay, Mr Hanger? No need if you don't want.

MR HANGER: Thank you. I'll discuss it.

COMMISSIONER: Okay. Do you mind if we keep going, Mr Ryan, rather than have a break if it's - - - ?---I'm more than happy to keep going, and then you can take a break after, that's fine.

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COMMISSIONER: Yes. We'll get some sandwiches brought in for you if you like?---No, that's fine, I'm used to missing lunch.

I was joking?---If I had a coffee - I couldn't even have a coffee.

MR HADDRICK: I notice you didn't offer whether I could be excused. Apparently not.

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COMMISSIONER: Yes, Ms Stewart.

MS STEWART: Good afternoon. I'm Lisa Stewart, counsel for the Aboriginal and Torres Strait Islander Legal Service. My first question is just in relation to paragraph 11 of your statement where I understand you - with the Churchill Fellowship - you spent some time in

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Canada?---Yes.

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I just wanted your opinion and your view - given that Canada is one of the leading international models for indigenous child protection - if there's any learnings regarding firstly training and programs that you identified when were there that would assist and be transferable to the Queensland child protection system?---Yes. And certainly in my report, page 49, I talk about the First Nations Caring Families Society. Cindy Blackstock from that agency was absolutely incredible and I think the work that they do could certainly be uplifted almost in full and used in Queensland context, particularly considering that the indigenous communities in Canada have a great degree of similarity is in terms of population percentage as an overall population, some of the remote community locations; so I think that the work that they have done is excellent, particularly the fact that they've created curricula for learning around looking at how people actually understand reconciliation and how they use their systems of colours to determine what is the heart and what is the head and what is the land. It's a very, very impressive system and I would certainly recommend using that.

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Did you have any experience or have any knowledge of - are you aware about their partial and fully delegated responsibility that has been given to the community? Did that inform any part of your research?---Not in a great degree, no. I didn't actually get to go - I only had one day to meet with them, actually, and it was a fly-in fly-out of Ottawa, so it was a very small component, unfortunately.

Are you just aware of that model, though?---I am aware of that model, yes.

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Would you have a few on if we were to borrow some of that learning and put in place in Queensland, whether as far as even partial delegation, we could assist, say, the recognised entity in performing a family group meeting function? Would you have a view on whether that - - -?---I think probably there would be a component of that, that to begin that would be around actually up-skilling people to do it well. I think if you're going to do any of these things there's no point saying, "Okay, now it's your responsibility," and then beating people over the head when they can't do it but we've not ever afforded them the capacity-building exercise. Anything in that family group meeting space is obviously a very high degree of skill set around it. But yes, I think allowing indigenous communities to actually take responsibility and to be able to drive their own agendas is a really important part of our practice.

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We had Mr Bradford give evidence yesterday on the training component?---Yes. 1

He didn't see an impediment to transferring that knowledge. Would you agree?---Look, I think the - I don't think there's an impediment to it. I think probably we just have to think differently about how the learning space sits, particularly in communities, you know, the way in which communities operate. Are you talking with the recognised entities or in local communities?

Probably starting with the recognised entities, since we have that model available?---No, well, I mean, the old certificate IV that was run through the program was actually very successful and the Aboriginal and Torres Strait Islander people who had gone through that, both CSSOs and recognised entity staff, gave great praise for that program. 10

Just moving on to paragraph 20 of your statement and your paper, it's attachment 3 entitled Team Parenting?---Yes.

That's a fairly comprehensive research and understanding of trauma. Would you agree that these type of responses that you've identified in that paper should be available to all children entering the child protection system? 20
---Absolutely. I think that should be fundamental to every single program, every single child in care, yes.

Would that follow on (1) in reducing the social cost to the child?---Absolutely. It would be a financially high cost initially but the cost benefit down the track for our community and society would far outweigh that, I believe.

So might spend a dollar there to save it later on down the track?---Absolutely. Probably to go a little bit further than that, though, there is also that could be easily transferred into families. So that's some - - - 30

The wraparound effect?---Wrap around a family, and so one of - the agency in Canada, they have just put in a worker into Moosonee, which is many hours' flight from Toronto, and the founder of the organisation was at a conference where children were being flown out of this community to Toronto because they couldn't find placement options, moved from community, and so they've actually just put a worker into Moosonee to actually provide a team parenting type approach in that environment because he was so distressed about the lack of opportunities to actually the support the communities to come up with their own solutions. So it's already being used. 40

Just while we're on this point, because in your evidence you did talk about early intervention and intensity of wraparound support. I wouldn't mind your view on why we

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have kind of flipped that triangle to the other end and what we would really need to do to flip it back and what are the hurdles that you see, because everyone seems to agree early intervention and intensive support is the key? ---Yes.

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But why it doesn't occur - - -?---I think that probably the unintended - I was with the flag of child safety when that happened. I was definitely there. The unintended consequences of creating child safety was that everyone then deferred to child safety, and in a risk averse environment the easy solution is to push everyone into that top end of the system and then berate that part of the system when it doesn't work, because, "It's not my responsibility anymore. Everyone else around can say, 'No, it's child protection's responsibility. They've failed. It's their fault,'" and then what happened was at that pointy end of the system we had more and more kids started coming into the system. So what do we do in a financially strapped environment, we start taking from the secondary system and the primary system to actually fund that part of the system. So the inverted pyramid happens because all the money starts getting drawn out into the top end of the system. Unfortunately the problem is that the system at the top inverted now is so big that you can't just rip the money out today and try and put it down the bottom, because you would have an absolute explosion and eruption. So somehow we have to almost dual-fund for a period where we say, "This part of the system is going to get a heavy investment because we know this is what's good, but what we intend to see through evidence over time and outcome measures is that things should reduce there. We should see less notifications, we should see stronger communities, we should see less kids in care, and as that happens be aware that we will then start to take that resource and put it back at the other end of our system. So it's both - it's a dual system, I think, maybe.

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I'll just come back to - you've given some evidence about children in residential care. Do you believe with your previous departmental experience that we could strengthen our responses to those children that exhibit these really challenging behaviours and end up in residential care? ---Definitely, yes.

What do you see that we would need to do?---Again, it would depend on the child or young person, but, look, to be honest, one of the things that comes up time and time again is education. So when the kids are in our system they need - we need a suite of alternative education models that provide available options for these children beyond the traditional approaches that we've got, and some of them, like that equine therapy model I talked to you about earlier, you know, the research - and these horses that - I've seen some sort of processes of it. The horses mirror the behaviours of the young people. So when the young

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person is going crazy the horse goes crazy and they actually use that as a therapeutic intervention to say, "When you settle this horse will settle and it will mirror you," and they learn from that. Then underpinning that is a curricula, so it's a learning curricula but it's a very kinesthetic learning curricula. So it's hands based, it's out in the open, and then over time you're trying to get them reintegrated into a mainstream education. So I think there's a big piece of investment that could happen in that space.

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So education would be one element. What about the underlying trauma that you - and I think you've identified that a lot of these children have experienced that underlying trauma?---Yes, I think that's definitely a space and we need to put some investment there, but then probably prior to that there needs to be a feeling of safety and security. So if you can't keep a placement stable, getting into education or trauma or trauma based sort of work probably is quite tricky. So the very first fundamental thing is we've got to be able to stabilise these placements with whatever capacity we can so that young people feel safe and feel like, "I've got a place here and I know I'm going to be here for the foreseeable future and I've got an environment of people around me who I feel safe and I trust me and I've also got a connection of outside community," whether that be kin or others. Once I've done that I then put in some therapeutic support, put in some education support, but I may not even call it therapeutic support, because I think children and young people balk at that. So we do it in a way that's quite - a little bit sort of cleverer so that it's seen as more normal life skills experience but it's therapeutic in its nature.

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I suppose you would agree that the best process for this to be identified and addressed would be in case planning, as a starting point?---Case planning is certainly a great spot towards that, yes.

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You gave some evidence before about some children that exhibit the really challenging behaviour and you did go on to talk about a containment model. How rare - or how many numbers of children in your experience would you be placing in that type of model if we had something like that available in Queensland?---It's probably not how - numbers I couldn't tell you off the top of my head, and I think we just need to explore this. Other jurisdictions do use it. There are some risks of containment models that they don't become quasi prisons and that the young people aren't just contained because we can't find an option, but for some young people I think there is sometimes very short, intensive need for them to have periods of time that's not a gaol, where they can get intensive therapeutic support and potentially come off some hard drugs.

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Yes?---Some of these young people are on really, really

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hard end drugs. We can't settle them. They're breaking
down placements day in, day out, and they're putting
themselves at risk, they're putting carers at risk and the
community at risk. If we put the investment into that,
stabilise them and then move them into some other model.
Rather than it being contained for life it might be two
weeks, it might be one week, it might be two nights,
maximum probably four weeks, I think, is the model that
they use in Victoria.

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When you were overseas and in your research that you were
doing over there did you become aware of what models they
use or have adopted?---I didn't see any overseas in terms
of containment models that I thought were of merit,
although certainly I know Kim Edwards, who is a colleague
of mine, placement services unit director in north coast,
she's recently been doing some travel in that space and
probably could have some commentary. Lisa Hillen,
previously of - she's now in the Northern Territory, also
did a Churchill Fellowship on the topic of residential.

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COMMISSIONER: You know before when you said that you
probably - you know, at the moment if you want to correct
the inverted pyramid for a period of time you have to have
a dual system where you keep supporting the top end which
is being over-utilised while you build up the bottom end
that's being under-utilised

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But doesn't that assume - it certainly looks that way if you look at it in terms of a pyramid, but doesn't that - and that it has a pointy end. Doesn't that assume that at the moment we don't have primary and secondary services at all as opposed to assuming that they're there but they are just not being accessed?---I think we have them but they're not to the extent that we would see another jurisdiction. Particularly Victoria is a case in point. They have invested heavily in that space. If you look back at the history in Victoria, I think, from memory, in around 2000 they looked at their trajectory and they said, "We now need to start putting heavily into the bottom end to actually support that." We've actually probably done, you know, some exceptional work in the tertiary end. The work that's been done across our system has actually been really good and there are many parts of our system that are much better six or seven years on than they were in the past in terms of how we approach things, but we buffered that up to the expense of not actually putting all the supports in. You can't even compare jurisdictions because of the size and scope. So, for instance, if you look at some of our rural and remote locations, they're the really challenging areas, because how do you actually make it viable for a service in a primary or secondary space to be in that community when you don't have actually the broad capacity so - and it's really hard to recruit and attract people to those locations. So I think in the primary and secondary space you've got to look at a whole of system so we're certainly - I'm not saying that there isn't secondary and primary things. It's just that they need to be beefed up.

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What about the level of accessing for people who need them? What do you do about that?---About the level of accessing - - -

Yes, people who need help often don't realise it or don't accept it. They live in denial and at the moment our system is entirely voluntary. They choose their consequence at the moment. If they want the short-term removal to be come long-term, they don't do anything to satisfy their case plan. In America they have short term - say, neglect which is our major substantiation at the moment. Neglect in America you can't lose - you can't make a long-term intervention order on the grounds of neglect unless before you do so the parents had almost compulsory intensive work done so that you do everything you can to even force them to accept help before you take their child on a long-term basis?---I think that's a wonderful model. I think a model that allows us to manage the issues of poverty is really fundamental to solving some of the issues; you know, if you look at - you know, say, for instance, you've got a mother who the child comes into the care system and by the time they're into the care - the child's into the care system who's maybe 14, parent-adolescent conflict, child's placement breaks down, we could be spending several hundred thousand dollars a

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year just in a placement, let alone the supporting staff around. Had we have invested \$10,000 to pay the mum's rent for a year, we may well have prevented her having to work full-time which then could have ensured that we could have allowed her to attend a parenting course and prevented that sort of stuff. So a lot of these things could be addressed earlier and I think - I don't think you'd get too many staff in the system who wouldn't say, "If we could invest money 10 per cent earlier" - and I remember saying once, you know, "If we spent \$100,000 on a placement and we spent \$10,000 at the point of the placement, you know, starting to be an issue with the family, wouldn't that be a great thing?" and a lot of the sort of primary prevention agencies said, "Yeah, and if you'd spent just \$1000 even earlier on good education and universal service delivery, you'd actually get a better outcome overall. You'd never see them."

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In some state of America as well you can't make a guardianship order in favour of the state on the grounds of neglect for a child who is over 16?---The other thing about your question you just asked - and I can't remember the figures, but it was raised yesterday at the forum and it may well come up in the notes, but certainly the people who need the services are actually not the ones who are getting the services. There was some data about it. So the ones who actually need the services at that early intervention, primary intervention and secondary level are not necessarily the ones that are getting the services so we've got to find a way to make sure the services are the right services at the right time for the right people.

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You said before that there's a consensus that children are getting - there is an over-inclusion of the system and in some respects there is an under-inclusion as well so there's a paradox that there are children in the system who don't need to be and there are children who do who aren't, but what's wrong with the system identifying those who are now in the system, have been for some time, but the basis on which they went in and are staying has never been really reviewed?---I think there's a piece of work that's happening around that in the department at the moment, but, absolutely, we should be looking at that. We should be looking at young people constantly to determine, "Is this the right spot for you and is there a way to look at an alternative option or model?" particularly in a transitional space. I think we don't do - and again this was raised over recent areas, but we probably understand at a stronger level of children. We're not so good at youth and so, you know, we see our system as a child protection system but it's actually - there are youth in our system who we need to understand what are their needs and how do we actually start to hear their voices and actually let them contribute to their future.

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Does the system that you're familiar with review regularly

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enough the basis on which children are remaining in the system?---I think that in a resource-limited environment where you're pressure prompted if you've got a child on a long-term order, it's easy to let that sort of drift along for periods of time because it's a long-term order so there's nothing prompting you to go back. You've got case planning that possibly is only happening on a very sort of infrequent basis because that's the nature of the legislation and we've made a long-term decision, but certainly in a transitional spot from the day a child enters care we should be thinking about transitioning, whether that's transitioning after you enter a long-term order and turn 18 or transitioning back to your family of transitioning, but transitioning should be all the way along for the life cycle and it's transitioning through that placement. So some of it's about transitioning from primary to secondary. Transition is fundamental to our system.

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Mindful of what you said before about the proceduralism, do you think there's scope for considering mandated reporting back to the court about the basis on which a child is being kept on a long-term order?---There would be a risk with that that you add another layer of regulation to the system that's already sort of heavily court burdened, so worth exploring. Probably my gut would say, no, I don't think there's a need for it at this stage.

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While I think of it, what do you say to the proposition that the department is taking too long to make too many decisions that could be better made more quickly and just as well by the carers themselves?---Agree. I think there are certain decisions carers could and should be making.

Like what?---Day-to-day functioning stuff; you know, you'd have to legislate around that, but I don't think the department wants to be making a lot of those decisions. I think it creates an artificial environment where children in care feel like they don't get to live like normal children. Who else in the world who wants to go across to New South Wales to Ballina for a holiday has to go and ask somebody who they see once every month to determine to allow them to cross the state boundaries?

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Who might say, "No"?---Who might say, "No." Unlikely in most cases, but - and who may not be there, who may not respond on that day, so - - -

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Who might be on holidays themselves?---I think that sort of stuff creates an environment where kids in care feel like they're actually second-class citizens. They don't get to have an opportunity to make good - day-to-day decisions should be made by day-to-day people who are doing the day-to-day care.

At the moment, how does it work? Where is it retained by

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the - what is the mechanism for the department retaining that? Is that under the custody order or the guardianship order and not delegate to the carer when it could be or a service agreement or what?---I think it would be in the context of policy, procedure, there would be some recording there. Obviously within the act that outlines - - -

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How do the carers know where their jurisdiction begins and ends?---Certainly that would be through part of their training process, yes.

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The carers?---The carer's training. But again, things change so frequently that what is the rule one day may not be the rule the next day because of a change of policy or some other area. So, you know, I think you could have quite a set of parameters about, okay, we're going to extend what you can and can't make decisions on. Again, the variation of this of course comes to the point of the order, that's the problem. Because there's different orders, on a short-term order what a carer can and can't decide is different to what a carer can decide on a long-term order. So, you know, like if a child is placed for a month and the carer says, "I want to go and get that child" - you know - "have their hair dyed purple," or something like that, obviously the parent has a right to be able to be involved in that decision-making, as different to this child is being here for the long term and - so it would have to be on a case by case. But I certainly think a lot more could be deferred over. 1 10

MS STEWART: Just take you back to the containment model. If I understand you correctly, that would only be required for a small number of children?---Very small number, yes. And I think we'd have to have a very high degree of regulation on that part of our system. That would be needing to be very, very well managed so that wasn't abused. But there is a place for it, sort of like the Mental Health Act, the mental health regulation-type - you know, if you are going to contain someone - - - 20

Very restrictive practices?--- - - - it would have to be built around a similar sort of a model to make it safe for all parties concerned, I think.

If I can just take you to paragraph 21 of your statement where you've highlighted key development assets, the KDA tool?---Mm. 30

My understanding of that is that it appears to be a holistic assessment. Would I be correct in - - -?---Yes. It's essentially - I can't remember the specifics and the dates, and I can get them, but there was a piece of research done about what adults need to function in the world and that was drilled down and this piece of work by core assets or foster care associates into a set of 20 that actually relate to be looked after children population, so what these are is the internal and external things needed for a child who's in care to succeed well in life, so it is really an outcome measure tool to say if things are going really well along that then you can actually track success, you can track improvement. But say for instance if you see a child - and the current system has got a carer portal that allows carers - that will be implemented very soon here for our agency - that allows carers to track that online, so you can generate a report at any point. And so if a child was having family contact and then you could look back and say, "Every single time family contact is 40

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happening this is what's going on in terms of the external and internal assets for this child. How do we actually build up level of the child to manage conflict or to manage grief and loss around parents' needs and things like that?" So it's a very well researched and has a great degree of rigour and I think has a great place for potential in the care population.

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So you'd be obviously aware of the department's structured decision-making tool?---Yes.

Specifically the children's strength and needs?---Mm'hm.

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Do you think that adequately assesses a child's needs?---I think that certainly has a place.

What's the difference between the two tools and where would you say one is more beneficial to the child and its needs than the other?---I suppose the fundamental difference is that the key developmental assets is driven primarily by the foster carer with the supervising social worker in our agency outside of the agency. Sorry, I'm just watching the interplay.

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THE COMMISSION ADJOURNED AT 1.31 PM

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THE COMMISSION RESUMED AT 1.31 PM

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COMMISSIONER: Apparently I activated the distress button. It must have been when you were up, Mr Haddrick.

MS STEWART: Were you trying to send me a message there, Commissioner?

If you could just go on, you were just talking about the difference between the KDA tool as opposed to the structured decision-making tool and how one - - -?---Yes. And so essentially the carer is responsible for driving that information as they actually are sighting the child, and it's done weekly, so it's happening every single week, they're updating and reporting that information, so that you're getting a really good word picture overtime on the way in which that child is progressing; as different to the strengths and needs, which is done at more of a point in time looking back over it. So the two could work in complement. The key developmental assets could really support the - and I think probably the other thing is it's an outcome measure base, so it actually measures the outcomes and it can - because it's tracked online in this new model you can see a picture over time of how things are going, whereas the other one sort of builds overtime on each other.

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Can you just talk a bit to how that informs your decision-making process when you're trying to match a carer with a child?---How the KDA informs the decision-making process?

Yes?---So the - well, the - - -

I suppose that would be on the basis there's been multiple placements?---Yes. So it wouldn't inform our decision-making because it is only used by our agency, so that all it would be is that when the child comes into our agency we would then begin the process of using KDA for that particular child, looking at how they're travelling and the supervising social worker working with the foster carer would measure that. I guess how it could work is potentially you could utilise that across the whole spectrum where all children have that so you could see the impact of modern placement breakdowns for a child who was in a different context. Essentially I think it would be great if we could measure the outcomes for children in care longitudinally to say, "Actually this foster carer where this child has had a stable placement, yes, this child came in as extreme, but three years down the track they're now moderate," and we can look at that as a model over time about what actually happened; what were the things that succeeded, what with the things that didn't? But also the child in time can grab the file and say, "Wow, actually, you know, I was pretty ratty and I actually did some really good things," and the child actually contributes to that as

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well, so the child is actively involved. There's a - I don't think I've got it here, but I certainly have document which provide to you at a later point that is the - there it is - it's a word picture of highlights of the week, appointments for the week, All About You.

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COMMISSIONER: You could tender it.

MS STEWART: I'll tender that document, Commissioner?---So this is not the electronic version, but certainly provides you with a bit of an overview of some of the sorts of things that are captured. So it's meant to be interactive, child friendly, and provide that sort of - - -

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That probably leads me onto my next set of questions, and I'll just - I'll tender that, Commissioner. In relation to Winagay, are you aware, or have you had - you may not have had an opportunity to read their submission to the inquiry, but I'm assuming that during your previous role with the department, that you'd have some knowledge of possibly the Winagay Aboriginal kinship care assessment tool?---Yes, I do.

And the principles that underpin that?---A reasonable level, yes.

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Okay. And you're aware that during the time - your position - was it the assistant regional director - - -? ---Yes.

- - - of the placement services unit?---Assistant regional director was one of the jobs I did, and placement services unit director.

That three of the organisations within your catchment participated - - -?---Yes.

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- - - in the pilot?---Yes. Certainly had lots of conversations with them.

Do you see it beneficial - and it will probably lead to more compliance with the child placement adherence rates - if Aboriginal and Torres Strait Islander agencies had the benefit of an alternative method of assessment if we end up coming with the same standards at the end?---Yes. And I don't think it's even would have to be necessary for Aboriginal and Torres Strait Islander families. I think that for kinship care we need an enabling model.

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Yes?---As different to the model that we use the general foster care, because kinship carers don't ordinarily put their hand up to do this, they don't know it's coming in their life, and an enabling model works on the presumption that we're supported you around a particular child, you're not caring for a range of children, you're not going to be a general carer and having kids come and go. So what we

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need to then do is put a wraparound model to build your capacity overtime, but we can't hold you against the same set of standards that are held against for a general approved carer, but not give you any training, not give you any support or learning around that to actually help you know what you're going to be measured against.

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COMMISSIONER: Excuse me, Ms Stewart. Mr Ryan, I'm going to mark the All About You document exhibit 106 - 109, sorry. Thank you.

ADMITTED AND MARKED: "EXHIBIT 109"

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MS STEWART: Thank you. You just pinpointed one of the principles of that model, which was enabling and how that's different to what is currently in process. What are the other principles that you're aware of?---Well, fundamentally in a kin type model is that kin have knowledge about their own communities and their own capacities and they know the sort of history, they know what's going to work, what's not going to work. Is that the sort of stuff that you're - - -

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Yes?---So if you actually get the community and the kin to provide that network of support - and it's built around the same premises of family group conferencing. I think this has come up in previous contexts. Family group conferencing is fantastic. Family group conferencing, (indistinct) research, New Zealand model, getting families together to come up with their own solutions, is absolutely fantastic and it will divert people out of our systems. Families often are more intrusive than anything the department would overlay. Family group meeting is a very different beast. It's a much more watered down, tighter context and it doesn't necessarily provide or afford that option. Family group conferencing has highly skilled specialists who are external or who have some sort of high level of input into how to actually build capacity of families. Family group meetings are much more tight. So I've been in family group conferences in the past where we've had 50 people present and the 50 - and we actually set the context, we articulate what are the bottom lines and then let the family decide after that bottom line, "This child cannot live with mum because mum is a drug user, alcoholic, is unable to care for this child ever. Outside of that, as a family, you come up with a solution." The family comes in and they say, "Well, here's what we propose," and the department pulls right back and let's the family drive that process. I have seen recommendations from families come back that are so detailed, but not only that, the family come back saying, "You want a placement option. Well, here's three, and we think the best one is going to be Auntie Beryl. Auntie Beryl is in New Zealand but we all agree that's the best placement for this young person because she's really able to do that, so this is what we support," and then the young person goes off to Auntie Beryl and the family monitor all those things rather than the statutory system.

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So if we're looking at possible reforms would you suggest this as a future model?---I think so, but we have it in the act. The problem is that family group meetings when - conferencing was what was proposed. It wasn't resourced at the time and so we ended up with a watered down model, and then initially there was an intent to have family group meeting convenors but there weren't enough convenors appointed across the state, so then team leaders had to pick up that work. They weren't necessarily provided the training or the skills to do that. It actually needs quite

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a deal of involvement and time to do that well. So it's a time-consuming thing, but if you do it well it actually diverts people out of the system. You only have to look to New Zealand to see that.

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I actually meant the WINAGAI - - -?---Yes, I - - -

But I'm happy with what you've just given?---Yes, sorry. I was trying to make a link to that, because I think that, sorry, the WINAGAI model has a lot of similarities, but obviously it's in its emerging state. So we could use that in the context of it.

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But you would propose that as a good model for this on an ongoing - - -?---I think - yes, I think, yes - - -

That just probably leads me to my next question. If I can just - you might not have a copy of the act there?---I know it pretty well.

Section 82, placing a child in care?---Yes, okay.

Provided that the capacity is built and the appropriate standards are set, do you see benefits about sourcing obligations under section 82 to the non-government sector? ---Absolutely.

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Would you like to have a look?---No, that's all right. Yes, I would move all the long-term guardianship orders out to the non-government sector.

Yes?---I think that the non-government sector - I think that some of the statutory responsibilities that currently sit with the department don't need to sit with the department. If we're very clear about what it is the department should or shouldn't be doing then the non-government could be taking on board some of those responsibilities in some of that space, including case planning and case management.

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COMMISSIONER: Which ones should the department do and should - - -?---I think anything in the short-term space should sit in the short-term space, because you're actively working to try and get the child home, but once you get into that long-term space and we've made a decision this child is not going to be reunified, not going home, and stability is required, then potentially that doesn't need to be sitting in the statutory authority.

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Fair enough for a long-term guardianship to other, but what about long-term guardianship to the chief executive?---Yes, I think you can still do that. I think again you'd have to look at some of the - you'd have to do a bit of research about what would be the parameters around that. So the issues that could come to play in that experience would be you then take the case management responsibility, a parent

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comes up and then says, "I want to revoke the order," and they apply for a revocation of the order and at that point then is it the responsibility of the agency to be the prosecutor of that matter or are they trying to argue in court why that order was made in the first instance, are they privy to all the original documentation, what documentation does the sector have, doesn't the sector have? So you may well put a question mark over that space if there was likely to be ongoing family conflict at some point, but there are a lot of children who are in long-term care who are with carers who are there for, you know, until they're 18, and they probably don't need a departmental person coming into their life. I mean, this is going - this is going - this is not just a current thing. I remember going out to some young people and I was obligated to go and visit them and the young people would say to me, "I don't really want you coming here." You know, "I don't have a relationship with you. I like my carer. I don't need to do a case planning. I just want my normal life and I don't want the department in my life, and the sooner you're out of my life I'll be happy." So in that circumstance I think we could provide other alternatives. Other young people and carers every week might want some sort of level of support, but I certainly think there is scope to look at that in the future.

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MS STEWART: Do you have any proposals to what legislative reforms would be needed for section 82 to be able to delegate that authority to the non-government sector? I think you may have thought about this over the years?---I have sort of thought about it. Certainly New South Wales are doing it now. New South Wales have just gone down the path where long-term guardianship and case management has actually been outsourced in that space. So I think you could look to some of the work they're doing, and given that they're in a position where they're probably sort of part way down the track we could learn from what they've just done, what has worked, what hasn't worked. I'd probably need to do a little bit more thinking about it to give you a really good, solid answer. So maybe if I have a side-bar with you at some other stage, if you like, about that in terms of future state other than the thinking that, you know, in the long-term guardianship space we would need to consider that some of the statutory functions in the act would then fall to the sector. So it would be not much point saying, "Look, all this - the sector is going to be the long-term guardian, but every decision has to still come back to the department," and also we'd have to ensure that we're financially very clear about what we're actually funding in that parameter.

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If I can just talk to you for a moment about care agreements. Do you see any use in utilising the care agreement in order to meet the requirements under section 83(7) of the act? I'll hand it up to you. It's the additional principles for Aboriginal and Torres Strait

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Islander children in care?---Placement principle? **1**

Yes?---Yes, I know that one. It's all right.

Specifically the bits about facilitating contact and things like that, because it's quite an issue - I'll just let you - - -?---It's all right. I know it well.

Would you have any suggestions on how the care agreement can be used to consolidate those principles?---None that I've thought of at the moment, but having raised the question, the care agreement could have particular expectations set out in the obligations or actions. The challenge is - - - **10**

Well, is that a conversation that is had with the carers, the foster carers, or do you leave that conversation for the department to have with them?---Because there's two parts to this. One is there's the element of a kin type placement wherein the carer - you know, there's a one-off placement that's built around the child, and then they've got the generic carer who actually comes in who has got the range of scope about their support for a range of children. So to put this into that would be a bit tricky, because you would be actually trying to drill in for a future child that you don't know what they're going to look like. **20**

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But you could have - certainly we have seen - and I will talk to the agency I'm with currently. There is using team parenting and models like that that has actually provided a high degree of capability building for our non-indigenous carers who have indigenous children and young people, so building really solid relationships and saying that fundamentally we know that we have an over-representation of Aboriginal in the system. If we can't keep them out of the system and we are going to be using non-indigenous carers, then these carers have to be very, very skilled and have understanding that's beyond surface-level understanding to ensure that they can meet the needs culturally of the child and the relationships and connections. So, yes, I think you could. I would have to think a bit more about how you'd do it, but definitely you could weave that in. It's certainly factored into the assessment process but I think what you're trying to get at is an articulated point that's quite clear within the agreement so that it's something that can be measured against.

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Or complied with?---Or complied with, yes. No, you could do that. I mean, probably at a cultural-capability level - and ultimately everyone is culturally capable and it's not something they have to comply with. They do it just instinctively. It becomes so much a part of our thinking that it's not something that we do because we feel we have to do it or because we have to comply, but it becomes a part of our core being and the way in which we operate and think and I think that's certainly some of the stuff that Canada does exceptionally well and you see it within their language. It just is entrenched in what they do. Similarly New Zealand does it well as well. So their whole model is set up on a premise that the indigenous cultural aspects is the overlaying principle across everything that is done, not just for indigenous children.

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Yes, okay. You may have just answered a question I had further on, but I just want to come back to some evidence that you have given before and you mentioned a figure of about 80 per cent of children returning to the home once they've reached of age?---Yes.

How would you build protective factors and resilience in children who are exiting the system given that we have an understanding that many would return home?---By that stage they're adults so, you know, the protective factors that you're building in is the transitioning to adulthood and life. There are some very fundamental things that need to happen for kids that exit care. I know - and I imagine many people in this room when they first left home would have had the opportunity to go back to a parent's house to do their washing if they couldn't afford a washing machine and the parents probably would have done that. If they needed to get a spot of a bit of cash, the parents may well have kicked in some money. There are a lot of families who

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provide additional support beyond 18 and if a child is not in a fostering arrangement or doesn't have a family based support mechanism and if the family can't do that, then we need some mechanism to be able to say, "Hey, look, you're not out on your own. You're not going to be left to your own devices and when things get a little bit tough, if you need someone to come back to, then you've got that fallback mechanism." So the options, I think, would be there would be looking at a suite of tap-in services that could actually provide that assistant for the care-leaver population.

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You spoke a bit about guardianship and long-term orders before?---Mm'hm.

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Do you see the benefit with children that are under - "long-term guardianship" by the definition means the guardianship decisions rest with the department, but if there was a way of amending the legislation so parents still have a say in guardianship matters, do you see any benefit to that?---Probably not. I think once the decision has been made that this child should be in long-term care, then we probably need to leave the decision-making with one person so that they are - because, you know, as a parent in the general population, somewhere in the midstream of your life you don't have someone coming along and saying, "No, you're not going to do that any more," unless it's a Family Court-type matter. So I think if there was a change of circumstances, then we should leave that to a different jurisdiction. At that point if somebody else wants to contest who or who shouldn't be involved in their - once a decision is made, then I think that should be kept. To counter my argument on that though, I think that there is a question mark over very young children and whether or not that should be reviewed at some point down the track if the circumstances changes, but then the act provides an opportunity to revoke so we can revoke an order and make a new order or we can look at some other options as it currently stands so that is within the capacity of what we can do.

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Okay. I have just got perhaps one last question, and you have touched on it in your evidence today and with some questions that I have asked you, but in your experience working with Aboriginal and Torres Strait Islander kinship carer agencies, can you just talk a bit about a solution or some reforms that need to be had? Given there is such a shortage of kinship carers, what possible ongoing arrangement could be put in place to meet the needs of the 40 per cent of Aboriginal and Torres Strait Islander children that are in out-of-home care and whether we look at a different - say, a blended model?---Yes, look, in the first instance I think we - kinship care is being seen as a bit of the solution for everything and I believe it is, but we must resource kinship carers. The system has to be supported so that these people who come in get the same

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level of assistance when they're children carers as anyone else. So I think that there would be some kinship carers who potentially we could build capability from within who may not necessarily meet the requirement for a general carer. Outside of that though I think that probably blended options could work so we could actually have a circumstance where, say, an indigenous care family provide a cultural mentorship across a patch and so what they do is they become the mentor for a patch of non-indigenous carers who then they can actually provide - and we call it "mentoring" or "coaching" rather than an entity that comes in to monitor so it's seen as capability building. One of my best learning experiences was with Auntie Ruth Hegarty and she tells the story a million times whenever she's out there. I was a young, naïve family services officer who knocked on the door. I was working with one of her grandchildren and I said to her - I said, "Is Ruth Hegarty there?" and she said, "Yes, I'm here." I came in. I said, "Look, I'd love to know - I've not worked with Aboriginal people before but I'd love to know what it is that I can learn about it and if I do anything wrong, it's not because I'm meaning to do something wrong. I'd like you to teach me," and she said, "Well, I'll stop you there. In my community I'm an elder and you can call me Auntie Ruth or Mrs Hegarty but by calling me by my first name that's offensive," and from that point she was a wonderful mentor and, you know, we periodically catch up and see each other and it's often over many, many years but I still have a great degree of respect for her support whilst I was working with that young person and helping me to understand cultural capabilities so mentorship like that can be very valuable.

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That's just the point that I wanted to explore because you had that informal arrangement. Can you see a model where that can perhaps be formalised - - -?---Yes, absolutely.

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- - - where a non-Aboriginal carer that was caring for Aboriginal and Torres Strait Islander children - there's a capacity there to build cultural awareness in order to preserve culture?---Absolutely.

What would you say that model would look like?---I mean, the model would start from the entry point with agency so for our agency we have an indigenous person who sits on our panel and that's not - that's not just for indigenous children. They sit on our panel because that's cultural capability weaved throughout from the beginning. So I think, yes, you attach people to services and agencies to build capability and you provide that because some of the best processes is not training. Cultural-capability training is great, but the best training is actually learning in real-life experience and feeling confident to ask difficult questions. I think the same can be said about working with people with disabilities. Working in any of those spaces across our spectrum where people - once

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they know and they build a relationship, they can feel confident to ask difficult questions. 1

Can I just take a minute, commissioner? I won't be a second.

COMMISSIONER: Sure.

While that is happening I just want to test something with you. If you advocate more secondary interventions, you do that because, one, it's better for the family and better for the system. That's the assumption that you make? 10
---Yes.

If you're going to increase intervention into the family unit by the state, even if it's beneficent, you still have to show that you're going to do less harm or more good by the intervention and the cost of it at the front is going to save you at the back?---Yes.

How do we know those two things?---I don't think we do. I think that's the great unknown and I think it's probably why we put money at the tertiary end, because you won't see the benefit of a primary intervention for potentially 18 years until people become parents themselves. The secondary intervention - the success of the secondary intervention is in a person not coming into the system but it might be five years before we know whether or not we have actually reduced the numbers, we have actually seen diversion out of the statutory pointy end of the system, but ultimately the measures would be things like reduction in the numbers of notifications and reductions in the numbers of kids on orders. The challenge is that you would have to check that there wasn't resubstantiation. So, you know, the factor is you could put energy in now but you have got to keep them out of the system for the long term. 20
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You might just delay it?---That's right, exactly, you could. You could easily delay it and that is the unknown.

That would be the worst of both worlds because you would spend a lot of money not keeping them out of the system and then you have to spend a lot more money now that they're in it - - -?---Absolutely.

- - - because the older they are when they get in it, the more needs they're going to have accumulated that are not met by the time they get there?---Yes. 40

So while the advocates for early intervention seem to have a consensus that it's the way to go, that's based more on assumption than empirical evidence, isn't it?---I think there is some evidence out there and certainly in other jurisdictions, but I was talking to some staff from NAPCAN this week and they with some of the work that they're doing believe that they're starting to see reductions in targeted

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communities where they're heavily investing in those communities in keeping people out of the system. So that's early data, but again you almost need - you know, you can't do two case studies, can you? If you could have an island and an island and it was the same population, you could measure what the differences would be but we can't do that, but there is some evidence to indicate that if you invest early - for instance, home based nursing, having health nurses go out there early, and this used to be part of our core system. There used to be home based nurses, parent aides. You would get a minimum of a number of visits from the nurse to the home. That would be standard for all families. We dropped that off our system and then we see an increase in the other part of the system with problems.

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Yes, but we are just creating or shifting them to a different system?---Yes, with the intent that you improve their lot in life because most parents, I think, want to do the right thing. Some of them have just had pretty shabby experiences and have not necessarily been afforded the learning opportunities to actually be good parents. I have a number of professional qualifications. My wife is qualified as well. When we had our first child, you know, I tell you what, as with many parents, it was a very, very hard gig. So if that's our experience of how difficult it is and we have got families out there in the community who don't get any of those levels of support, how do we reinvest in them early so they get the bits and pieces that just might help them with their lot in life in terms of basic parenting sort of skills.

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Maybe the first thing the system, whatever it's called, maybe the child welfare or wellbeing system, should do is to work out what services it actually has at its disposal because I have been doing this for four months now and every day I hear about a new service and I wouldn't know how to access them. How would the people who need to know?---I've got an answer. Again looking at British Columbia, they have the Ministry of Children and Family Development. I wrote this down last night because I was looking at it, but they have six complementary services that all sit under that ministry and so the complimentary services are early child development, child care services which is school readiness, nutrition, health, social and emotional care and attachment, so that's one of them; services for children and youths with special needs so that whole disability space; child and youth mental health services, child safety, family support and children in care services, adoption and youth services. So that's their suite of six services that they have and families can access any part of that system at any point along the way so you are hooked onto the need as the need actually comes up. I think that's sort of a model we need to look at. It's not a child safety system, not a welfare system, but a child and family developmental system with the view that as a society, as wealth society generally as a western

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population, we want to actually in 20 years be in a position where we look back and say, "What an amazing legacy to be able to have created this space in the society. Look at the impact we're having in the world."

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MS STEWART: I just want to finish off. If I can just bring you to paragraph 16 of your statement - and you have identified that you believe that child protection staff need to have a good understanding of a range of child protection concern issues?---Mm'hm.

Do you see the benefit in having an Aboriginal and Torres Strait Islander family support professional who works in a specialist intervention team possibly alongside another person that's tertiary qualified to kind of offer that wrap-around service to the family?---Yes, although I think the challenge would be finding those people. You would have to do it with some skills development and also I guess there's always that constant tension about the historical aspect of being a statutory system and then having people work in that system where there's risks to communities and the perception in some of that sort of area. So, yes, I do think there's a space for that and certainly I know some exceptional workers who would be absolutely at that. The challenge is then: what happens when you get a position where you can't fill that and how do you actually go about then up-skilling someone to be able to do that? So it's well and good in some locations. Other locations we'd struggle to find people based on some past roles.

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I suppose too it would minimise the risk of having to access 10 different services in order to meet child protection needs if it's just managed out of, you know, one team?---The Aboriginal and Torres Strait Islander - - -

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The model I've just proposed, or the framework I've just proposed?---So you're talking about one team for the state or one team for - - -

No, sorry, one - like, for the family?---Okay.

As the commissioner has just identified, there's a lot of services - - -?---Absolutely. I mean - and I think one case plan, not across multiple service deliveries. Now, for families accessing a housing service, you know, an indigenous service, they're accessing a mental health service, you've got to have one holistic case plan that allows the family to say, "Here's the path that we need to take to get things working," not, "Here's one case plan and here's another case plan," and they're all at cross purposes and you have 27 professionals visiting your house and who is this - you know, I mean, some of the stories you hear about families where they end up with so many people coming into their lives no wonder they're confused about what the expectations on them are.

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Just leading to my final point, what would you - in light of the evidence that you've given, what would you say about a model that blends general foster care with the therapeutic needs like the wraparound services that we've just discussed alongside say an organisation like WINAGAI providing the cultural knowledge and support and preservation as a way of responding to a child's placement needs?---Absolutely. Love the idea of a wraparound model with a clear framework about who is at the centre of that. I think, you know, that - I think carers spend so much of their time, we've got to build the carers' capabilities and we put everyone else around that and that the child sits there but we use the carer as the conduit for the change. Rather than having the child having to see 57 different people, they will be supported through someone else, or otherwise we pick somebody who sits there to actually provide that but one person does it with the wraparound sort of making that over time grow and build in capacity, yes.

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In the future would an Aboriginal and Torres Strait Islander transition to this approach be beneficial, in your view?

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---Approach to a team parenting type wraparound model?

Yes?---Yes.

I have nothing further, commissioner.

COMMISSIONER: Thank you, Ms Stewart. Mr Capper?

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MR CAPPER: Commissioner, I have no questions.

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COMMISSIONER: Mr Haddrick?

MR HADDRICK: Just briefly in re-examination, Mr Ryan, you would appreciate that today's proceedings are being web streamed to the world?---Yes.

You would appreciate that we have media present in the room. I've just taken the opportunity to look at some of the commentary upon some of the propositions that you've placed today that's on the web and I wanted to zero in on one and quote one back to you and give you the opportunity to respond to what someone out there in the world is saying about what you've said here today. It's a comment from someone in Brisbane and it's on one of the media outlets. I'll quote it to you and I'll ask you to respond to this view that they express. It says the following: "I think it is also the fear of attachment that puts people off being foster parents. These children may be with you for" - sorry, "For a - - -"

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COMMISSIONER: Indefinable?

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MR HADDRICK: No, sorry, I'm not - "a finite period of time, some from birth, however can be removed from you at short notice. That's a lot of time and effort that a carer has gone into trying to nurture and heal a child to become a well-rounded individual only to have to hand a child you have grown to love back to an undeserving parent. We live in a society where lousy parents are given far too many chances and adoption options are dismal. If the government turned foster care into eventual adoption rather than a babysitting service until parents are either out of gaol, on medication or detoxed there would be (a) more carers and (b) less neglected children." Now, I just wanted to put that proposition to you given that I asked you a question earlier about adoption and invite you, as someone who has had 20 years' experience in this field, to comment upon that proposition as to whether you think there was any merit in the sentiment expressed in that, that there should be greater roads towards adoption for people who are foster carers?---I think adoption is something that's under-utilised in Queensland. We certainly need to look at using adoption more effectively, and when decisions have been made that there is no longer opportunities to resolve any needs in the home environment adoption should be something that we actually look at as an alternative to the suite of options available, yes.

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Do you think that that view is a view shared by many people who are foster carers who would like to pursue that option? ---I think that view would be shared by some foster carers. I think there would be risk, though, or concern that the supports afforded to you as a carer don't drop off at that point in time. So that's the challenge, is that as a

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foster carer you're provided with all this range of other supports and mechanisms around you. There's some financial supports, there's also access to some of - sort of backup of the state if that was to go, but you're still having some very vulnerable children and young people that are placed with you. There would be some concerns that that would also drop off.

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It is effectively an ultimate vindication of the system, isn't it, that a person who didn't know the child beforehand, the child has been placed with them, they not only wish to care for the child, they wish to make that a permanent relationship with the child?---I think that's wonderful. I think it's a wonderful thing and it's a great society that, you know, actually can do that and care for its own children, but on the flip side and probably to make comment to that, some of these families that we see have had very, very tough lives. This is not to sort of say that what they are doing is right, but I think sometimes to walk a day in the shoes of some of the most difficult - the people who have been in the most challenging of experiences is really critical before we get too quick to throw the stones. So, yes, I think it's a balance.

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No further questions, commissioner. Might this witness be excused?

COMMISSIONER: Yes. Mr Ryan, thank you very much for the time you've given in preparing your statement and giving your oral evidence. It's very much appreciated?---Thanks for the opportunity. I think this is a great thing for the state and I look forward to seeing the outcomes of it and the future for our children and young people, which is fundamentally what it is all about.

Let's hope you're not disappointed.

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WITNESS WITHDREW

MR HADDRICK: That completes the Ipswich hearings. The commission resumes at 10 o'clock tomorrow morning in Brisbane, Mr Commissioner.

COMMISSIONER: We're adjourned until 10 o'clock tomorrow morning.

THE COMMISSION ADJOURNED AT 2.11 PM
UNTIL THURSDAY, 1 NOVEMBER 2012

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