Queensland Child Protection Commission of Inquiry

Child Safety workforce survey report

June 2013

Contents

Executive summary

The Queensland Child Protection Commission of Inquiry was established on 1 July 2012. The Commission's terms of reference include examining the effectiveness of the current Queensland government response to children and families in the child protection system, including the appropriateness of the level of, and support for, frontline staffing.

To inform its deliberations the Commission undertook a survey of frontline Child Safety staff between 28 November 2012 and 12 December 2012. The survey was open to all staff working in the positions of child safety support officer, child safety officer, family group meeting convenor, court coordinator, senior practitioner, team leader, manager and other positions deemed by Child Safety to be frontline.

The survey sought the views of frontline staff about a wide range of child protection and workforce matters, including their views about qualifications and training, supervision, cultural competencies, acting and higher duties, being valued and supported, the Integrated Client Management System, the Child Safety Practice Manual and related policies, the use of Structured Decision Making tools, casework, professional relationships, the Child Safety After Hours Service, and court work.

A total of 444 responses were received, mostly from Child Safety officers, team leaders and child safety support officers. Responses were received from 31 per cent of those eligible to participate. Overall, 94 per cent of respondents reported having some form of tertiary qualification ranging from certificate to doctoral level with 88.9 per cent of respondents holding a bachelor level qualification or higher. This report provides an overview of the quantitative and qualitative responses to the survey. Key findings are summarised below.

Training, supervision and professional development

- Just over half (53%) of all child safety officers had completed their child safety officer entry level training at the time of survey and about half of these (47%) agreed that this training was helpful in developing the skills and knowledge they needed to perform their role. Many felt that this training should be more 'practice-oriented' and focused on real-life scenarios.

- Eighty per cent of respondents reported having opportunities for professional development, other than entry level training. Just over half (59%) agreed that the training they had received in Child Safety has been adequate for them to perform their role. Many felt that demands of high caseloads and inability to backfill positions meant that officers often had very little time to attend additional training courses.

- Less than half of the respondents reported receiving scheduled formal supervision (44%) as part of their role and more than half (55%) reported their supervision was mainly administrative in nature. Most agreed that supervision should provide opportunities to discuss professional and personal development, in addition to administrative matters. Many also felt that external supervision would be an effective way to improve current supervision arrangements.

- Overall, only a small minority of respondents (18%) agreed with the proposition that Child Safety is an organisation that invests in the professional development of its workforce. A large number of respondents suggested that a dedicated training 'budget' should be available to assist officers who wished to attend training and that caseloads should be reduced or backfilled while officers attend training.

Working with children and families

- Most respondents (70%) agreed that their caseloads had increased over time, and just over a third (38%) felt their current caseloads were manageable. Only a quarter (27%) felt their role had an appropriate balance between administrative tasks, court processes and frontline service delivery. On average, respondents estimated that 60 per cent of their time was spent on administration and 20 per cent on court work.

- Less than one quarter of respondents (23%) felt that they were able to spend enough time with children and families to be able to form productive relationships. Respondents proposed three key improvements to making caseload more manageable. These were reducing administrative work, capping or reducing case loads, and increasing recruitment of administrative staff and child safety officers.

- Respondents were least confident working with children and families from culturally and linguistically diverse backgrounds, people with disabilities, and people with mental health problems. While 84 per cent of respondents felt confident that they had the skills to work effectively with Aboriginal and Torres Strait Islander children and families, only 22 per cent of their colleagues who identified as Aboriginal and Torres Strait Islander agreed with this statement.

- Approximately one third of respondents (37%) reported that they had completed cultural competency training within the last two years. Most respondents considered ongoing training and education as important to improve cultural competencies of staff. However, many suggested that regular and proactive engagement with Aboriginal and Torres Strait Islander communities and other culturally and linguistically diverse groups was a more effective method of building cultural competency 'on the job' than internal training sessions.

Structured decision making, the practice manual and information technology

- A large majority of child safety officers reported using their professional judgement in conjunction with Structured Decision Making tools (95%) and that they are supported to do so (80%). However, in practice, about one quarter (24%) reported never overriding Structured Decision Making tools. Some respondents suggested that better training be provided to officers on the proper purpose and use of decision-making tools. It was a widely held view that decision-making tools should only be used as a guide to inform practice.

- A large number of respondents (82%) agreed that the Child Safety Practice Manual is a useful resource. However, only half felt that the manual was easy to use (52%), was well structured (54%) or set a standard of practice that was achievable (53%). Some respondents commented that the manual was 'too prescriptive' and should only be used as one of many guides to inform decision-making, without replacing the need to exercise professional judgment.

- Just over half of respondents agreed that the Child Safety Integrated Client Management System supports their practice (66%), allows information to be entered quickly (51%) and allowed easy access to information (58%). However, less than half felt the system provided all the information they needed (43%) or that it was reliable (42%). The most common suggestion for improving the system was to streamline data entry to avoid duplicating the same information across different forms.

Court and legal matters

- Approximately three quarters of respondents (77%) felt they had a good understanding of court and tribunal processes, whereas just under a third (32%) felt local Childrens Court judges and magistrates had a good understanding of child protection issues. Even so, less than half of all respondents (47%) reported having access to timely and appropriate legal advice in relation to their role. Three key areas were identified for improving court related work. These were better training and education for Childrens Court judges and magistrates, access to legally qualified court coordinators, and improving the training provided to child safety officers and other departmental staff in the preparation of legal documentation.

Professional relationships

- Most respondents reported having productive relationships with local public schools (86%) and government agencies, including the Queensland Police Service (85%) and Queensland Health (78%). Most respondents felt that relationships with external agencies would improve if those agencies had a better understanding of the department's role and objectives in child protection work.

- Although a large majority of respondents (90%) also reported having productive relationships with local non-government organisations, less than half (44%) felt confident that these organisations were able to effectively deliver their services. Some respondents suggested that more non-government organisations were required to ensure the timely delivery of services to children and families.

- Just over three quarters (78%) of those who had regular contact with community visitors described their relationship with them to be positive. Just over half (57%) felt community visitors play an important role in ensuring the needs of children and young people in out-of-home care are met.

Being valued and supported

- Most respondents felt their work as a child protection worker is valued within their team (83%) and their Child Safety service centre (71%), but were much less likely to feel their work was valued within their broader organisation (42%) or the wider community (39%). While most felt their workplace is supportive of its staff (69%) and that their colleagues and managers supported their decisions (75%), around half felt they were listened to when raising issues or concerns (53%). Only about a third (35%) agreed with the proposition that Child Safety is an organisation that supports innovative practice.

- It was suggested that staff would feel more supported in their roles if there was open and transparent communication between frontline staff and management, including the opportunity for debriefing with senior staff. Frontline staff also suggested that greater recognition of the emotional stress involved in child protection work would improve the level of staff support. Another suggestion for improving staff support is to backfill roles during leave periods and when employees are acting in higher positions.

Comparison to non-government workforce

As part of its enquiries, the Commission has also undertaken a survey of the non-government child protection workforce. There were similarities between the results of the two surveys but also points of significant departure. The most notable differences related to the perceived caseloads, professional development and support for innovation. The two groups also had different views about the value of their work within their organisations and communities.

Both Child Safety and non-government employees reported that there had been an increase in their workloads over time (70% compared to 77%). However, non-government employees were much more likely to feel that their workloads had remained manageable (71% compared to 38%). Non-government staff were also more likely to report having an appropriate balance between administrative tasks and frontline service delivery (65% compared to 23%) and having enough time to form productive relationships with children and families (70% compared to 23%).

Meanwhile, non-government employees are more likely to feel that their organisation supports innovative practice (70% compared to 35%) and invests in their professional development (63% compared to 18%). Supporting this view, there appears to be a marked difference in the use of supervision between the two sectors. Whereas 77 per cent of non-government employees reported having formal scheduled supervision, this was the case for only 44 per cent of Child Safety employees. Both sets of employees felt that regular supervision was a vital part of supporting frontline staff and that it should be more focused on practice than administrative tasks.

Although both Child Safety and non-government employees felt that their work was valued within their immediate work teams (83% compared to 86%), Child Safety employees were less likely to feel their work was valued within their larger organisation (42% compared to 69%) or the wider community (39% compared to 72%). Both groups highlighted the quality of management as a key factor in helping frontline staff feel valued and supported. Both felt that it was particularly important for managers to have strong communication skills, be proactive in helping employees deal with the emotional strain of child protection work and be available when critical incidents occur.

Methodology

Procedure

The survey was conducted by way of a self-administered online questionnaire. It was distributed to 1,428 eligible staff identified by the Department of Communities, Child Safety and Disability Services as frontline. This included staff in any of the following positions:

- child safety support officer

- child safety officer

- family group meeting convenor

- court coordinator

- senior practitioner

- team leader

- manager

- other positions deemed by Child Safety to be frontline.

Each eligible staff member was sent a link to the survey through their Child Safety email address. Each link was unique to ensure that multiple surveys were not completed by one respondent.

The survey was available to staff for completion between 28 November 2012 and 12 December 2012. Two reminder emails were sent to staff during this period. Participation was voluntary and participants were informed that their responses would be confidential and not accessible by the department.

Survey instrument

The questionnaire comprised 60 sets of fixed response questions, rating scales and open ended questions. A summary of the survey instrument is provided in Appendix A. Questions 1 to 7 of the survey collected demographic information about the participants relating to their location, current position, experience in child protection and qualifications. Following the collection of demographic data, the survey asked respondents to answer a further 53 sets of questions divided into the following topics:

- qualifications and training

- supervision

- cultural competencies

- acting and higher duties

- being valued and supported

- Integrated Client Management System

- Child Safety Practice Manual and related policies

- Structured Decision Making tools

- casework

- professional relationships

- Child Safety After Hours Service Centre

- court work

- recommendations for reform of the child protection system.

The majority of these questions asked the respondent how much they agreed or disagreed with a series of statements. The scale had five possible responses:

- strongly disagree

- disagree

- undecided

- agree

- strongly agree.

An additional response, 'not applicable', was added to some questions where it was determined that the question may not apply to some frontline roles. The survey included 15 open-ended questions and invited respondents to provide comments or recommendations relating to each major topic.

Due to rounding some percentages may not tally to 100 per cent.

Respondent characteristics

A total of 444 employees of Child Safety responded from a total distribution list of 1,428. This is a total response rate of 31 per cent. Response rates for regional breakdowns ranged from 25 per cent of employees in the South West region to 41 per cent of employees in the Brisbane region (Table 1).

Table 1: Number of respondents by Child Safety region

Region	Response Percent	Response Count	Response Rate
Brisbane Region	17.6%	78	41%
Central Queensland Region	16.4%	73	39%
Far North Queensland Region	9.7%	43	29%
North Coast Region	10.1%	45	27%
North Queensland Region	9.9%	44	26%
South East Region	19.6%	87	31%
South West Region	11.5%	51	25%
State-wide	5.2%	23	28%
Total	100%	444	31%

In total, 75 per cent of respondents were based in a regional Child Safety service centre (Table 1 and Table 2). Officers in Placement Services Units and Regional Intake Services accounted for a further 16 per cent of the sample. Just over half of the sample (56%) reported that the majority of their clients live in a major town or city, while 37 per cent reported that a majority of their clients live in regional or rural locations and seven per cent reported that a majority of their clients live in remote or very remote locations.

Table 2: Number of respondents by Child Safety centre

Centre	Response Percent	Response Count
Child Safety Service Centre	75.4%	394
Child Safety After Hours	3.4%	15
Court Services	0.0%	0
Adoptions and Specialist Support Services	2.7%	12
Regional Office	2.5%	11
Region Intake Service	4.7%	21
Placement Services Unit	11.3%	50

Child safety support officers, child safety officers and team leaders accounted for 83 per cent of respondents (Table 3). Those who identified themselves as being in 'other' roles were most often adoption officers, SCAN coordinators, and foster and kinship care officers. The length of respondents' employment ranged from six months to over 20 years, with a relatively even distribution across the range (Table 4). No responses were received by employees who had been employed by Child Safety for less than six months.

Table 3: Number of respondents by Child Safety role

Role	Response Percent	Response Count
Child Safety Support Officer	8.3%	37
Child Safety Officer	62.4%	277
Family Group Meeting Convenor	3.4%	15
Court Coordinator	1.6%	7
Senior Practitioner	3.8%	17
Team Leader	11.9%	53
Manager	0.5%	2
Other roles	8.1%	36

Table 4: Number of respondents by length of employment with Child Safety

Duration	Response Percent	Response Count
Less than 6 months	0.0%	0
6 to 12 months	4.3%	19
1 year+	11.0%	49
2 years+	11.0%	49
3 years+	7.4%	33
4 years+	8.1%	36
5 years+	11.9%	53
6 years+	12.6%	56
7 years+	9.7%	43
8 years+	4.3%	19
9 years+	1.8%	8
10-15 years	11.5%	51
15 -20 years	3.8%	17
More than 20 years	2.5%	11

Of the total sample, 94 per cent reported having some form of tertiary qualification ranging from certificate to doctoral level, with 88.9 per cent of respondents holding a bachelor level qualification or higher (Table 5). Of the Child Safety officer subsample, 74 per cent reported their highest level of qualification to be a bachelor degree, 19 per cent an honours degree or graduate diploma, and 4 per cent a masters or doctoral degree. Table 5 shows the highest qualification held by respondents, according to their Child Safety role.

Table 5: Highest qualification by Child Safety role

Discipline	Child Safety Support Officers	Chid Safety Officers	Team Leaders and Senior Prac.	Other roles	Total sample
No qualification	40.5%	0.7%	0.0%	15.0%	5.9%
Certificate	2.7%	0.7%	0.0%	0.0%	0.7%
Diploma	35.1%	1.1%	1.4%	5.0%	4.5%
Bachelor	13.5%	74.0%	61.4%	50.0%	63.7%
Honours/Grad. Dip.	5.4%	19.1%	27.1%	20.0%	19.4%
Masters/PhD	2.7%	4.3%	10.0%	10.0%	5.8%
Total	100%	100%	100%	100.0%	100.0%

The most common disciplines of study for child safety support officers, child safety officers, team leaders, senior practitioners and other roles are shown in Table 6. Social work, psychology and human services were the most common disciplines of study across all roles. For those with multiple disciplines, at least one of those qualifications was usually a human services related qualification. In all, 84 per cent of the child safety officer subsample reported studying at least one of the following disciplines as part of their highest qualification: behavioural science, community welfare, human services, psychology, social science or social work.

Table 6: Discipline of respondent's highest qualification by Child Safety role

Discipline	Child Safety Support Officers	Chid Safety Officers	Team Leaders and Senior Prac.	Other roles	Total sample
No qualification	40.5%	0.7%	0.0%	15.0%	5.9%
Arts	0.0%	7.6%	5.7%	1.7%	5.9%
Behavioural science	0.0%	4.7%	5.7%	3.3%	4.3%
Community welfare	16.2%	3.6%	4.3%	1.7%	4.5%
Criminology	0.0%	1.8%	0.0%	1.7%	1.4%
Education	5.4%	7.6%	1.4%	1.7%	5.6%
Human services	2.7%	13.0%	10.0%	13.3%	11.7%
Justice	0.0%	1.4%	1.4%	1.7%	1.4%
Law	0.0%	1.1%	0.0%	0.0%	0.7%
Nursing	0.0%	0.4%	0.0%	0.0%	0.2%
Psychology	2.7%	10.5%	25.7%	18.3%	13.3%
Social science	0.0%	10.1%	5.7%	11.7%	8.8%
Social work	8.1%	18.1%	22.9%	13.3%	17.3%
Other	8.1%	4.7%	5.7%	6.7%	5.4%
Multiple disciplines	16.2%	14.8%	11.4%	10.0%	13.7%
Total					

Results

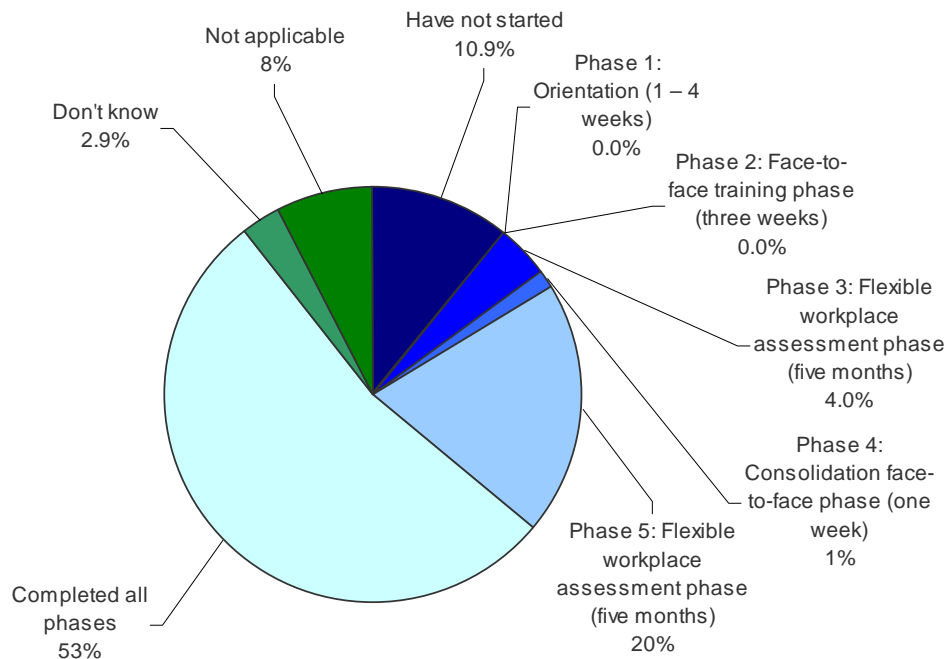## Child Safety Officer Entry Level Training

Just over half (53%) of all Child Safety officers reported they had completed all phases of their Child Safety entry level training and a further 20 per cent reported being in the final phase of training. Eleven per cent of officers reported they had not commenced their training and 8 per cent reported it was not applicable to their role. All Child Safety officers who responded to the survey had been employed for at least six months.

Child Safety officers had mixed views about the extent to which their entry level training has prepared them for their role. About half (47%) agreed that their training had helped them develop the skills and knowledge they need to perform their role while 39 per cent disagreed. The remaining 13 per cent of officers were undecided.

Over half of all respondents (n=258) provided suggestions on measures to improve Child Safety officer entry level training. Most respondents agreed that entry level training should provide a balance between theory and practice. Some respondents considered entry level training as too 'theoretical' and repetitive in content, especially for respondents with relevant tertiary qualifications. Respondents commented that, 'the current model is far too onerous and repetitive...it needs to be more targeted to actual work and applying the theoretical knowledge to our work situations' and there was a 'difficult balance between the procedural content and the principles and practice elements'. Some respondents suggested that entry level training could be improved by adopting a practice-oriented approach and focusing on the application of knowledge in 'real life' scenarios. For example, through the use of 'live role-plays', 'mock court rooms', client interviews and guidelines in compiling case plans and affidavits.

However, a small number of respondents considered ongoing supervision and mentoring 'on the job' provided better guidance and knowledge for child safety officers in the field than the completion of entry level training. Respondents commented that 'training needs to [be]…on the job, with mentors constantly available in the work place whose sole responsibility is to provide training and support to new workers' and there should be 'more opportunity to shadow experienced [child safety officers]' before taking on a caseload'.

Figure 1: Completion of Child Safety Officer Entry Level Training

Pie chart — Completion of Child Safety Officer Entry Level Training:
- Not applicable 8%
- Have not started 10.9%
- Phase 1: Orientation (1 – 4 weeks) 0.0%
- Phase 2: Face-to-face training phase (three weeks) 0.0%
- Phase 3: Flexible workplace assessment phase (five months) 4.0%
- Phase 4: Consolidation face-to-face phase (one week) 1%
- Phase 5: Flexible workplace assessment phase (five months) 20%
- Completed all phases 53%
- Don't know 2.9%

Some respondents considered issues with timing and casework management as affecting the completion of entry level training. One respondent stated that, '…there is no work time to complete the modules while holding a full time caseload and trying to achieve effective case management', another said there should be 'scheduled time allotted in work hours to complete training'. At least half of all respondents reported that child safety officers were expected to manage their current caseload and complete training during or outside of work hours.

Respondents suggested that child safety officers who were required to undertake entry level training should have a reduced caseload or no caseload at all. Given the time and commitment required to complete training modules, respondents agreed that child safety officers should be provided with more internal support for casework management.

Supervision

Half the respondents (49%) agreed they were receiving regular formal scheduled supervision (

Table 7). Unscheduled informal supervision was reported by 77 per cent of all respondents. In total, 16 per cent of respondents reported receiving neither formal nor informal supervision. Three quarters of respondents (75%) agreed they were being supervised by an appropriately experienced practitioner. About half of the respondents (n=225) provided comments on ways to improve supervision for Child Safety staff. Some respondents agreed that formal supervision did not occur regularly due to the demands of high caseloads and the 'crisis-driven' nature of child protection work. Therefore, a majority of respondents considered access to external supervision as an effective method of improving current supervision arrangements. One respondent commented that, 'for experienced staff, the opportunity for external supervision is a great alternative as it provides for ongoing professional development as opposed to the largely administrative supervision that is provided internally'.

Table 7: Supervision arrangements

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I receive regular formal scheduled supervision	12.4%	34.5%	3.8%	38.7%	10.6%
I receive regular informal, unscheduled supervision	4.3%	15.1%	3.8%	53.2%	23.6%
I receive regular direct supervision (ie live or field supervision)	15.5%	34.7%	9.2%	33.1%	7.4%
I receive regular group supervision	18.5%	38.1%	12.2%	27.0%	4.3%
I receive regular external supervision funded by Child Safety Services	66.2%	28.2%	2.7%	2.9%	0.0%
The supervision I have access to assists me to fulfil my role	7.4%	13.7%	15.3%	49.8%	13.7%
The supervision I receive is mainly administrative in nature (ie allocation of work and tasks)	5.6%	30.9%	8.3%	41.7%	13.5%
I am supervised by an appropriately experienced practitioner	6.8%	8.1%	10.6%	49.1%	25.5%

Fifty-five per cent of respondents considered supervision as being mainly administrative in nature. In the survey comments, the respondents reported that current supervision arrangements focused largely on caseloads, work allocation and administrative tasks. Respondents agreed that effective supervision should also provide opportunities to discuss professional and personal development. One respondent stated, 'In order to develop a worker's capacity to make appropriate risk assessment and undertake quality case work there needs to be a focus on self reflection, professional development and the impact and application of values and ethics'. A minority of respondents also suggested peer supervision or mentoring as better alternatives to current supervision arrangements.

Ongoing professional development

Eighty per cent of respondents reported having opportunities for professional development other than Child Safety entry level training. Most respondents (63%) agreed the training they were receiving covered topics that were important to their role with children and families, and just over half (59%) believed their training had been adequate for them to perform their role (Table 9). However, only a small minority of respondents (18%) agreed that Child Safety is an organisation that invests in the professional development of its workforce.

Over half of all respondents (n=243) provided suggestions on how to improve training and professional development for Child Safety staff. The majority of respondents reported that training and ongoing professional development for officers was essential for maintaining best practice standards. One respondent commented that it was necessary to 'develop a culture that encourages and insists upon professional development and staff training…it is seen as an important factor that enhances our ability to work with children and families.' The respondents identified two key factors impeding access to training opportunities: inadequate funding and high workloads.

Respondents stated that in most cases, attendance at training workshops or seminars were personally funded and the costs associated with training prevented regular attendance. Furthermore, the demands of high caseloads meant that officers had very little time to attend additional training. One respondent made the following comment: 'with such high work loads and competing demands on [Child Safety officers] time it is very difficult to find time to seek out training courses or to attend these. Also, without a sufficient budget from the service centre to attend outside training opportunities, very few of these opportunities are able to be accessed'.

A majority of respondents suggested the introduction of a training 'budget' to provide financial assistance for officers who wished to attend external training sessions. For example, one respondent suggested that, '[Child Safety officers] should be allocated a training allowance each financial year to attend professional training relevant to their role within the [Child Safety service centre]'. In addition, some respondents recommended using senior practitioners as they are 'best placed' to deliver training and professional development courses. Most respondents agreed that officers should have a reduced caseload or be 'backfilled' for the amount of time spent at training.

Appropriate qualifications for Child Safety roles

Respondents were also asked their opinion about the types of roles that could be undertaken by an experienced individual without qualifications. The role most likely to be identified was the Child Safety support officer with over 82 per cent of all respondents agreeing that this role did not require a qualification provided the person was appropriately experienced (Table 8). The roles most likely to be seen as requiring tertiary qualification were senior practitioners, team leaders, court co-ordinators and Child Safety service centre managers. At least 80 per cent of respondents disagreed with the suggestion that these roles could be filled by a person without tertiary qualifications.

Table 8: Roles that could be undertaken by an experienced person without a tertiary qualification

Role	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
Child Safety Support Officer	2.3%	9.2%	6.5%	53.8%	28.2%
Child Safety Officer	34.9%	36.7%	9.9%	12.6%	5.9%
Team Leader	49.5%	34.7%	5.2%	6.8%	3.8%
Senior Practitioner	55.0%	34.0%	3.6%	5.2%	2.3%
Family Group Meeting Convenor	18.0%	25.5%	16.0%	30.9%	9.7%
Court Coordinator	50.5%	34.7%	5.2%	7.2%	2.5%
Service Centre Manager	53.8%	27.0%	7.0%	7.9%	4.3%

Respondents were asked to indicate the types of qualifications they believed a person should hold to work as a child safety officer, choosing from the same options identified in Table 6. The most commonly chosen disciplines were social work, identified by 93 per cent of respondents, followed by psychology (87%), human services (81%) and behavioural science (79%). The least chosen disciplines were arts (19 %), nursing (23%), justice (28%) and law (30%). Ten per cent of respondents indicated that a candidate should be able to hold any qualification to work as a child safety officer.

Acting in higher positions

Just under half of all respondents (49%) reported having opportunities to act in higher positions while employed by Child Safety. Those who had acted in higher positions were asked a series of questions about the support they received during that time. Most (59%) reported receiving training prior to acting (

Table 10). However, 56 per cent also felt this training had been inadequate for their acting responsibilities and a majority also reported that their substantive position was not backfilled (63%).

Less than half of all respondents (n=185) provided comments regarding improvements to acting and higher duties arrangements for staff. Most respondents identified two issues with acting in higher positions: namely the inability to backfill substantive positions, and the lack of training and support provided to officers in acting positions. Respondents acting in higher positions reported that they continued to manage caseloads from their substantive position which was described as 'stressful', 'very overwhelming' and 'placed pressure on [Child Safety officers]', especially when 'families don't receive the service they deserve'. This arrangement compromised the quality of casework as respondents were expected to simultaneously manage two workloads. Respondents commented that, 'backfilling substantive positions [is] essential for the ongoing client service delivery' and '…to maintain workloads and effective office functioning'. A number of respondents recommended that the department 'backfill' positions or create a 'relief pool' to use when staff accepted acting positions to reduce pressure on existing staff.

The majority of respondents felt they had not received adequate training and support to effectively perform in the higher role. Some respondents commented that 'staff should be availed of the opportunity to participate in training for higher duties once they reach a level of competency in their current position' and 'further training/mentoring is required in relation to decision making, leadership skills and the role'. Respondents suggested that mentoring or training with a senior practitioner would benefit officers who accepted acting positions. However, a small number of respondents acknowledged the limited opportunities available to act in higher positions, especially for frontline staff.

Confidence in skills

A large majority of respondents felt confident they had the skills to work effectively across a diverse range of clients and cases (Table 11). Relative to other clients and case options, respondents were least confident working with children and families from culturally and linguistically diverse backgrounds, people with disabilities, people with mental health problems and cases involving sexual abuse (also see Table 12).

Table 9: Support for training and professional development

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
The training I have been provided with at Child Safety Services has been adequate for me to undertake my role.	6.6%	20.3%	14.6%	53.1%	5.5%
Child Safety Services offers sufficient professional development sessions run by Senior Practitioners in my Service Centre.	16.4%	37.1%	15.5%	26.2%	4.8%
The detail provided in training sessions is sufficient to meet my needs.	6.6%	24.1%	23.0%	42.8%	3.4%
The training I am provided with by Child Safety Services covers topics important to my work with children and families.	6.2%	15.3%	15.9%	56.7%	5.9%
Senior Practitioners are best placed to deliver training to me in my Service Centre.	8.2%	16.4%	23.9%	39.9%	11.6%
I am encouraged to undertake further education and/or professional development external to the Department, for instance, postgraduate study.	21.9%	34.2%	18.7%	21.0%	4.3%
Child Safety Services offers incentives for me to undertake professional development.	38.0%	36.2%	14.1%	8.7%	3.0%
I am given opportunities to attend	16.4%	31.4%	14.4%	32.3%	5.5%

workshops and conferences.					
Child Safety Services invests in your professional development.	31.4%	32.8%	18.0%	14.4%	3.4%

Table 10: Acting in higher positions

| How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I have been provided with training prior to acting in different roles	9.6%	19.6%	12.0%	45.9%	12.9%
I feel that the level of training has been adequate to enable me to undertake these different roles	22.2%	33.5%	19.2%	20.7%	4.4%
I am supported while undertaking different roles	25.4%	40.7%	6.2%	23.4%	4.3%
My work commitments in my substantive role are fulfilled by someone else while I am acting	35.0%	28.2%	9.7%	21.4%	5.8%

Table 11: Confidence when working with clients and cases

I feel confident that I have the skills I need to work effectively with:	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
Parents	0.5%	1.1%	0.7%	50.6%	47.2%
Children	0.5%	0.9%	1.6%	47.9%	49.2%
Young people (teenagers)	0.7%	1.6%	4.7%	53.7%	39.3%
People with disabilities	1.6%	10.2%	18.3%	52.8%	17.2%
People with mental health problems	0.9%	7.2%	12.4%	54.2%	25.3%
People who misuse drugs and alcohol	0.9%	3.8%	6.1%	59.4%	29.8%
Cases involving domestic violence	1.1%	2.5%	4.5%	59.6%	32.3%
Cases involving sexual abuse	1.6%	7.4%	10.2%	54.9%	26.0%
Cases involving physical abuse	0.9%	2.0%	2.9%	60.3%	33.9%
Cases involving neglect	0.9%	1.8%	2.5%	57.8%	37.0%
Cases involving emotional/psychological abuse	0.9%	2.5%	4.7%	57.8%	34.1%

Cultural competencies

Approximately one third of respondents (37%) reported they had completed cultural competency training within the last two years (Figure 2).

Figure 2: Time since last cultural competency training
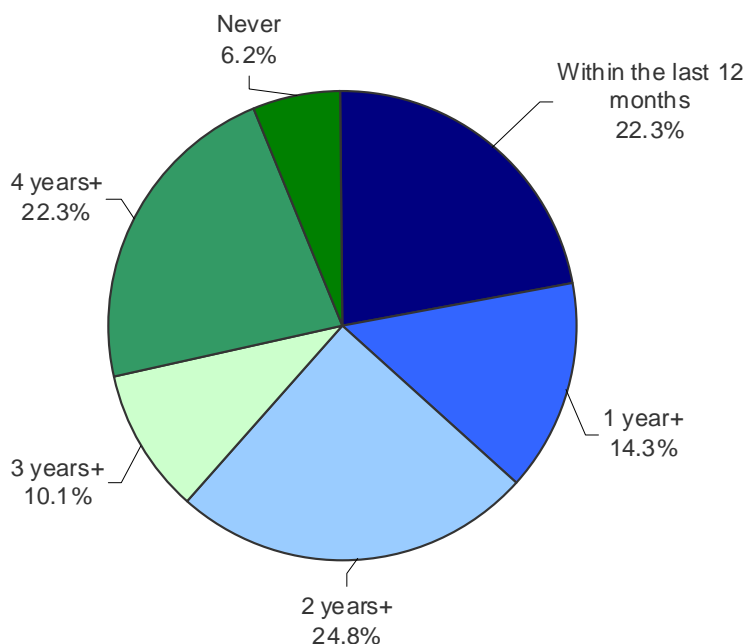
More than half of the respondents agreed their training had prepared them well to work with Aboriginal and Torres Strait Islander families (61%) while about half (47%) agreed their training had prepared them to work with children and families from culturally and linguistically diverse backgrounds. About half of the respondents (49%) agreed that recognised entities had helped them understand cultural issues and work with Aboriginal and Torres Strait Islander children and families.

Table 12: Self-rated cultural competencies

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
The role of Recognised Entity has helped me understand cultural issues and work with Aboriginal and Torres Strait Islander children and families	11.7%	25.8%	13.8%	34.7%	13.8%
My training has prepared me well to work with Aboriginal and Torres Strait Islander children and families	5.9%	16.4%	16.7%	48.4%	12.7%
I feel confident working with Aboriginal and Torres Strait Islander children and families	0.9%	4.5%	8.7%	55.3%	30.5%
My training has prepared me well to work with children and families from Culturally and Linguistically Diverse (CALD) backgrounds	7.5%	24.3%	21.5%	38.1%	8.6%
I feel confident working with children and families from Culturally and Linguistically Diverse (CALD) backgrounds.	2.6%	11.9%	19.2%	47.2%	19.2%

Aboriginal and Torres Strait Islander staff were also asked their views about the cultural competencies of their colleagues and the extent to which Child Safety is pursuing a culturally competent workforce. Of the 444 respondents, 23 identified as Aboriginal and Torres Strait Islander. The responses show that this group of respondents is far less positive than their non-Indigenous colleagues about the cultural competencies of Child Safety and its workforce.

While 61 per cent of all survey respondents reported that their training had prepared them well to work with Aboriginal and Torres Strait Islander families (see Table 12), only 26 per cent of Aboriginal and Torres Strait Islander respondents agreed (Table 13). Similarly, while 84 per cent of all respondents reported having the skills they need to work effectively with Aboriginal and Torres Strait Islander families (see Table 12), only 22 per cent of their Aboriginal and Torres Strait Islander colleagues agreed (Table 13).

Aboriginal and Torres Strait Islander respondents had mixed views about the commitment of Child Safety to creating a culturally competent workforce. Just less than half agreed (43%) that Child Safety was committed to this goal and just over half disagreed (52%). Less than half of Aboriginal and Torres Strait Islander respondents (43%) felt that their colleagues valued their advice when working with Aboriginal and Torres Strait Islander children and families and a similar proportion (48%) felt their colleagues recognised the importance of applying the Child Placement Principle.

Table 13: Views of Aboriginal and Torres Strait Islander staff about cultural competencies

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
The training received by my colleagues is preparing them well to work with Aboriginal and Torres Strait Islander children and families	8.7%	34.8%	30.4%	13.0%	13.0%
My colleagues are competent at working with Aboriginal and Torres Strait Islander children and families	4.3%	43.5%	30.4%	17.4%	4.3%
My colleagues recognise the importance of applying the Aboriginal and Torres Strait Islander Child Placement Principle	4.3%	34.8%	13.0%	30.4%	17.4%
My colleagues value my advice about working with Aboriginal and Torres Strait Islander children and families	8.7%	17.4%	30.4%	30.4%	13.0%
I have enough opportunities to network with other Aboriginal and Torres Strait Islander staff in Child Safety Services	13.0%	39.1%	8.7%	30.4%	8.7%
I believe Child Safety Service are committed to creating a culturally competent workforce	21.7%	30.4%	4.3%	39.1%	4.3%

Less than half of all respondents (n=170) provided suggestions to improve cultural competencies of staff. Most respondents considered ongoing training and education as vital to improving cultural competencies of staff. Some respondents suggested that cultural competency is built from proactive and regular engagement with Aboriginal and Torres Strait Islander communities and other culturally and linguistically diverse groups. Some respondents stated that, 'cultural competence comes from working in culturally diverse communities, not from 3 day training sessions' and 'until you actively engage with individuals and families from varying cultures in a meaningful way for a significant period, one cannot expect to become proficient'. Therefore, some respondents appeared to value 'on the job' training and considered it more effective than internal training sessions. A minority of respondents also suggested that practice-oriented training should be 'region specific' due to cultural variations between families living in different areas.

A small number of respondents regarded the role of the recognised entity as being 'tokenistic'. One respondent commented that, 'the Recognised Entity is rarely available and this impacts upon our ability to effectively engage with families'. Respondents suggested the recognised entity should facilitate the sharing of cultural knowledge with child safety officers and be available in service centres to provide culturally appropriate advice when required. Some respondents recognised the value of having an Indigenous child safety officer in their service centre who could provide staff with cultural advice.

Other respondents suggested that the scope of cultural competency training should be expanded to include other culturally and linguistically diverse groups such as Asian, African and Pacific Islander groups. Respondents have acknowledged the growing presence of these groups in their casework.

Feeling valued and supported

Respondents were asked about the extent to which they feel their work as a child protection professional is valued. A large number of respondents (83%) felt that the work they do is valued within their team and just over two thirds (71%) felt their work is valued within their Child Safety service centre (Table 14). They were less optimistic that their work was valued in their broader Child Safety organisation (42%) or the wider community (39%).

Table 14: Perceived value of child protection work

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I feel that the work I do is valued in my Team.	1.9%	7.5%	7.9%	55.4%	27.3%
I feel that the work I do is valued in my Service Centre.	4.2%	12.1%	13.1%	53.0%	17.5%
I feel that the work I do is valued in my Region.	6.1%	18.2%	32.2%	34.8%	8.6%
I feel that the work I do is valued in Child Safety Services.	8.2%	18.5%	31.5%	34.8%	7.0%
I feel that the work I do is valued by the community.	13.6%	22.9%	24.1%	32.9%	6.5%

Respondents were also asked their views about the support they receive from Child Safety to undertake their work. A majority of respondents agreed their workplace was supportive of its staff (69%), that their colleagues and managers supported their decisions (75%), and that they have access to professional debriefing following critical incidents (68%) (Table 15

Table 15). About half (53%) felt listened to when raising issues or concerns.

Table 15: Perceived workplace support

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
My workplace is supportive of its staff.	5.1%	14.5%	11.9%	44.2%	24.3%
There are staff to take care of my work while I am on flex and recreational leave.	18.4%	33.4%	9.9%	28.5%	9.9%
My colleagues and managers support my decisions.	2.1%	6.1%	16.7%	51.5%	23.5%
I am appropriately supported to fulfil my role in Child Safety Services.	4.2%	15.5%	15.5%	46.7%	18.1%
I am supported to access the Employee Assistance Service (EAS).	1.4%	5.3%	11.0%	55.0%	27.3%
I have access to professional debriefing following critical incidents.	3.6%	13.3%	15.0%	46.6%	21.5%
I have access to legal advice and representation following critical incidents.	7.6%	21.5%	34.0%	25.9%	11.0%
I am concerned about my confidentiality when accessing support services like EAS.	12.3%	38.6%	16.7%	22.5%	9.9%
I am adequately supported if I am subject to a formal complaint, review or investigation, for example System and Practice Review (formally known as Child Death Review)?	8.5%	17.3%	31.8%	31.5%	10.8%
I am provided with sufficient information about the outcome of formal complaints, reviews and investigations.	9.5%	21.2%	34.9%	27.9%	6.4%
I feel listened to when I raise issues or concerns.	7.5%	19.8%	20.2%	38.6%	13.9%
I feel that innovative practice is supported by Child Safety Services.	12.7%	22.1%	26.8%	29.1%	9.4%

There were mixed views about the extent to which Child Safety supports innovative practice. Just over a third agreed with this proposition (39%), about a third disagreed (35%), and just under a third of respondents were undecided (27%).

About one third of respondents (n=141) provided suggestions for improving the support provided to Child Safety Services staff. The respondents' suggestions focused on three issues. These were backfilling, debriefing with senior staff or other independent support bodies, and overall access to support. Some respondents reported that staff were not provided with adequate support or relief during leave periods or when acting in a higher position. The absence of backfilling options increases pressure on staff as highlighted by one respondent's comment that, 'when a person takes leave it results in others having unreasonable and unmanageable workloads and creates an enormous amount of stress'. The respondents recommend that positions be backfilled when officers take leave to ensure available staff can manage existing caseloads.

A number of respondents discussed the need to debrief with senior staff when dealing with crisis situations. One respondent commented that, 'the Department completely fails to support its workers in any critical incidents – it literally moves from one crisis to another with no debrief, no review, no analysis and no reflection'. Many respondents reported that there were limited opportunities to debrief with senior staff and a lack of recognition of the emotional stress involved in child protection work. At times, the respondents felt discouraged from discussing issues that impacted on their ability to perform duties. The respondents suggested that open and transparent communication channels between frontline staff and management will enable staff to feel more supported in their roles.

Some respondents held the view that staff should be provided with easier access to independent support mechanisms. The respondents felt that the Employee Assistance Service offered limited support to staff, considering the Employee Assistance Service was viewed as 'tokenistic', 'only available short term' and officers were placed on waiting lists before receiving help. Some respondents had received 'unhelpful' advice from the Employee Assistance Service and preferred to have the option to access independent counsellors or other external support mechanisms.

Integrated Client Management System

Respondents were asked to provide their views on the functioning of Child Safety's Integrated Client Management System. At least half of all respondents agreed that the system supported their practice (66%), allowed information to be entered quickly (51%) and made it easy to access the information they required for their role (58%) (Table 16). Less than half agreed that the system included all the information they need about their clients (43%), that the system generates all the reports they require for their role (45 per cent) and that the system is reliable (42%).

Almost half of all respondents (n=212) provided suggestions for improving the Integrated Client Management System. A number of respondents indicated that the quality of information contained in the Integrated Client Management System 'is only as good as the staff who enter the information' and '…it is up to the individual whether or not the information provided [on Integrated Client Management System] is relevant or up to date'. Some respondents reported that time constraints and heavy workloads compromised the quality of information entered into the Integrated Client Management System.

Most respondents agreed that the process of entering information into the Integrated Client Management System should be streamlined to avoid duplicating the same information across different forms. One respondent commented that, 'A balance needs to be found where documentation is streamlined or staff have access to other technologies that ease the burden of writing by pen and paper then having to type this into notes in [Integrated Client Management System]'. Respondents often stated that excessive amounts of time were spent on administrative work in the Integrated Client Management System and one respondent described the system as an 'onerous administrative burden'. A number of respondents agreed that time spent on administration could be spent directly working and resolving issues with families.

Table 16: Integrated Client Management System

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
The Integrated Client Management System (ICMS) supports my practice.	4.4%	14.5%	15.0%	59.5%	6.6%
Information can be quickly entered onto ICMS.	10.3%	30.2%	8.7%	46.1%	4.7%
ICMS makes it easy to access the information I need to perform my role.	7.0%	21.1%	13.6%	52.5%	5.9%
ICMS includes all the information I need about my clients.	6.6%	33.5%	16.6%	38.9%	4.4%
ICMS generates all of the reports I need to perform my role.	8.0%	26.7%	19.9%	42.6%	2.8%
ICMS is a reliable information database.	5.6%	27.6%	25.3%	38.2%	3.3%

Respondents were also asked to rate the level of detail in the Integrated Client Management System using a three point scale comprising 'too detailed', 'about right', and 'not detailed enough'. Just over half (58%) reported that they found the level of information contained in the system 'about right' and a further third (33%) reported that the information was 'not detailed enough'. Less than one in ten respondents (9%) reported the information in the database was 'too detailed'.

Figure 3: Level of detail in Integrated Case Management System.

Too detailed
9.3%

Not detailed
enough
33.1%

About right
57.6%
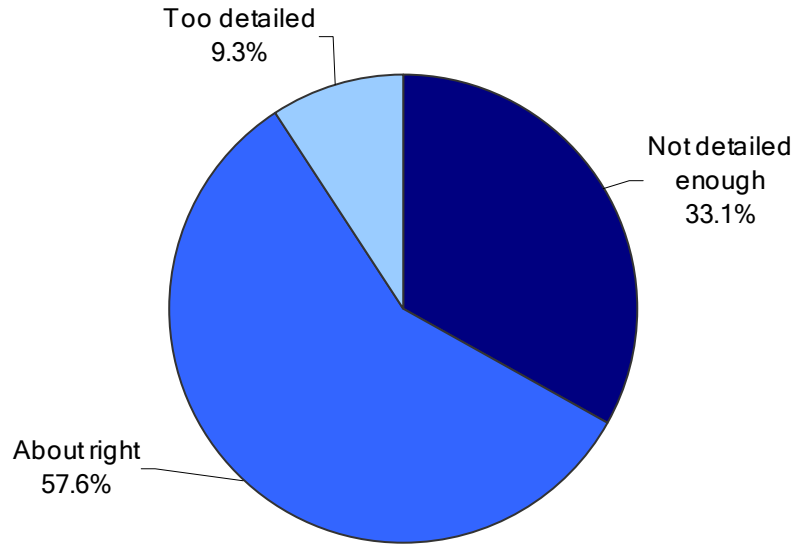
Child Safety Practice Manual and related policies

Respondents were asked to provide their views about the guidance provided by the Child Safety Practice Manual and related Child Safety policies. A majority of respondents agreed that the manual is a useful resource (82%). Just over half of the respondents agreed that the manual provides guidance that works in the field (60%). Only half agreed that the manual is easy to use (52%), that it is well structured (54%), and that the standards set out are achievable (53%).

Over one third of all respondents (n=163) provided suggestions on ways to improve the Child Safety Practice Manual. Although some of these respondents commented on the manual being a useful resource, at least half of the respondents commented that it was difficult to navigate and not 'user friendly'. Those respondents suggested that the manual should have its own search function to locate information quickly and improve its overall 'search functionality'.

Some respondents found the manual 'too prescriptive' and 'compliance-driven'. The manual 'focuses on tasks and actions required from caseworkers…that does not necessarily equate to high standards of casework'. The respondents noted that time spent complying with various administrative requirements contained in the manual meant less time working in the field with children and families. The respondents suggested the manual should be used as one of many tools to guide and inform decision-making but should not replace professional judgement and experience.

In terms of related Child Safety policies, a large majority of respondents reported they know how to access their organisation's policies on the intranet (78%) and that these policies provide enough guidance for their role (78%). However, only about half of all respondents (47%) agreed they have access to timely and appropriate legal advice on policy and procedures related to their work.

Less than one quarter of all respondents (n=100) provided suggestions for improving Child Safety policies and procedures. About one third of respondents identified the main problem as being the process of locating the appropriate policy or procedure using the department's intranet.

Respondents felt that the search function on the intranet was 'unreliable' which made it difficult to locate relevant policies and procedures. A small number of respondents referred to the difficulties accessing legal advice on court procedures. The respondents suggested that court coordinators need to be more available to provide this advice, especially for officers working in remote or rural areas.

Table 17: Child Safety Practice Manual and related Child Safety policies

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I find the Child Safety Practice Manual easy to use.	10.0%	28.4%	9.2%	48.8%	3.6%
The Child Safety Practice Manual guides my practice.	2.1%	4.3%	9.2%	71.8%	12.6%
The standards set out in the Child Safety Practice Manual are achievable.	5.9%	16.4%	24.4%	47.9%	5.5%
The Child Safety Practice Manual is flexible enough to allow me to be innovative in my practice.	4.5%	20.9%	29.1%	41.5%	4.0%
The Child Safety Practice Manual provides practice guidance that works in the field.	3.3%	11.4%	25.6%	55.2%	4.5%
The Child Safety Practice Manual provides advice that can be implemented in urban Service Centres and in rural and remote Service Centres.	5.0%	19.4%	42.7%	30.6%	2.4%
The Child Safety Practice Manual is a useful resource.	2.1%	5.5%	10.9%	72.5%	9.0%
The Child Safety Practice Manual provides sufficient detail.	3.8%	14.9%	16.8%	60.4%	4.0%
The Child Safety Practice Manual is well structured.	6.2%	18.7%	21.1%	50.7%	3.3%
The Child Safety Practice Manual supports my understanding on how to apply the relevant law to my casework.	4.0%	13.3%	19.7%	59.0%	4.0%
I know how to access Child Safety Services Policies and Procedures on the Child Safety Infonet.	2.6%	10.9%	8.3%	65.6%	12.6%
Child Safety Services provides enough policy guidance for me to perform my role.	1.4%	14.5%	16.8%	60.4%	6.9%
I have access to timely and appropriate legal advice on policies and procedures related to my work.	8.3%	18.2%	26.5%	41.5%	5.5%

Respondents were also asked to rate their perceptions about the level of detail in the Child Safety Practice Manual, using a three point scale comprising 'too detailed', 'about right', and 'not detailed enough'. Approximately two thirds (65%) reported that the level of detail in the manual was about right. A quarter (25%) felt the manual was not detailed enough and 10 per cent felt it was too detailed. A small number of respondents commented that the manual was too prescriptive and detailed to accommodate practice-oriented decision-making. However, in other cases, the manual was silent on issues that required further guidance and clarification.

Figure 4: Level of detail in the Child Safety Practice Manual
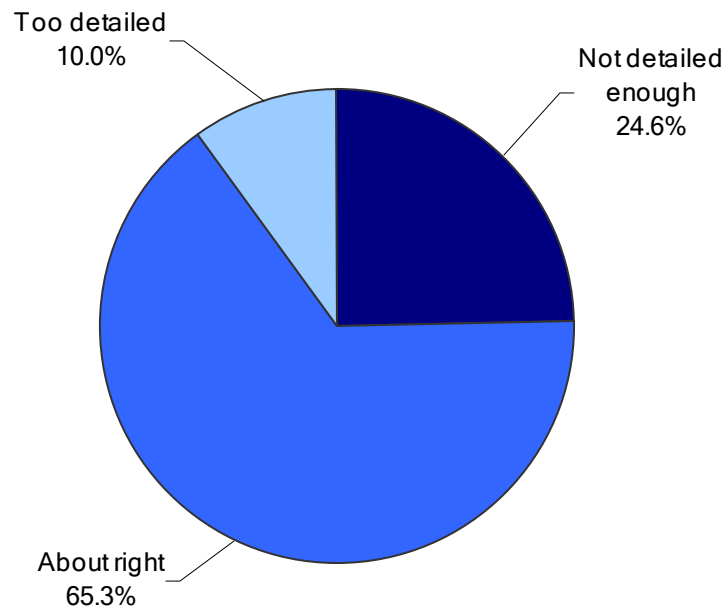
Structured Decision Making tools

Child Safety officers were asked their views about how they use Structured Decision Making tools in their practice. A majority agreed that the tools are integral to their practice (69%), that they use their professional judgement in conjunction with the tools (95%) and that they are supported to use their judgement to override the tools (80%) (

Table 18).

About one quarter of all respondents (n=115) provided suggestions for improving the decision-making tools used in Child Safety. Of these respondents, at least half suggested either training and educating officers in the use of the tools, or reinforcing their use as a guide to inform practice rather than a replacement for professional judgment.

Some respondents suggested that formal and ongoing training be provided to all officers (especially new officers) on the purpose and intended use of decision-making tools. One respondent stated, 'as with all training, brief refreshers should be completed periodically' on the use of these tools. The respondents held the view that decision-making tools should be used to guide practice and intervention. One respondent commented that, 'a tool can never take the place of professional judgement and robust collaborative decision making is always best practice'.
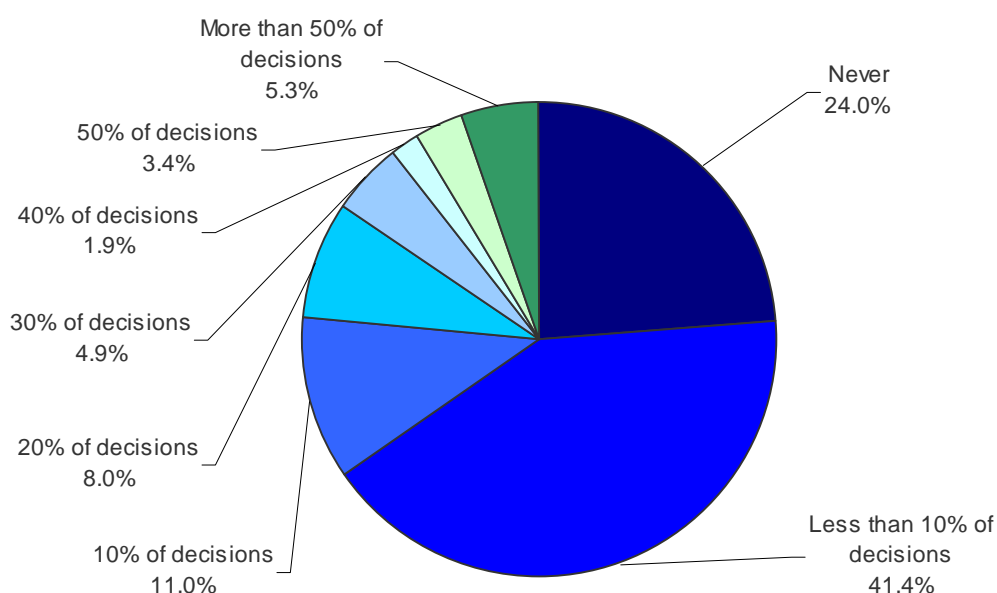
The respondents considered the use of decision-making tools as a helpful guide in practice, but given the complexity of some child protection cases the tools cannot accommodate for all circumstances. One respondent suggested that, 'staff also need to be supported and confident to apply their practice framework and to understand that SDM tools…should not be solely informing/guiding intervention'. Therefore, respondents emphasised that officers should continue exercising professional judgment to inform practice.

Table 18: Structured Decision Making tools

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
Structured Decision Making (SDM) tools are an integral part of my practice.	3.7%	9.9%	16.9%	43.4%	26.0%
I use my professional judgement in conjunction with the SDM tools.	0.4%	2.4%	2.4%	44.8%	50.0%
I am supported to use my professional judgement to override SDM tools.	2.0%	9.6%	8.0%	52.4%	28.0%

Child Safety officers were also asked how often they apply an override to a Structured Decision Making tool. About one quarter (24%) reported they never applied and well over a third (41%) said they did so less than 10 per cent of the time (Figure 5).

Figure 5: Proportion of decisions where an override is applied to a Structured Decision Making tool

Pie chart labels:
- More than 50% of decisions 5.3%
- 50% of decisions 3.4%
- 40% of decisions 1.9%
- 30% of decisions 4.9%
- 20% of decisions 8.0%
- 10% of decisions 11.0%
- Less than 10% of decisions 41.4%
- Never 24.0%

Casework

About one quarter of respondents (27%) felt their role had a balance between administrative tasks, court processes and frontline service delivery to children and families, while even fewer felt they were able to spend enough time with children and families to form productive relationships (23%).

Most respondents (70%) held the view that their caseloads had increased over time, with just over a third of respondents (38%) agreeing their current caseload was manageable. Only 14 per cent of respondents reported that their caseload was back filled while they were on leave and 35 per cent reported that their Child Safety service centre is usually fully staffed.

A majority of respondents agreed with the proposition that pressure to meet performance targets was making it difficult to prioritise work with children and families (77%).

Table 19: Casework and caseloads

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
There is a balance in my role between administrative tasks and court processes, and frontline service delivery to children and families.	25.7%	40.2%	7.1%	23.4%	3.7%
The family group meeting process is best convened by someone in Child Safety Services ie a Family Group Meeting Convenor.	3.5%	11.5%	13.5%	43.1%	28.3%
The family group meeting process is best convened by someone independent of Child Safety Services.	11.3%	35.8%	27.3%	15.8%	9.8%
I am able to spend sufficient time with the children and families I work with to form productive relationships.	25.3%	41.3%	10.7%	20.1%	2.5%
My current caseload is manageable.	21.4%	29.9%	10.4%	36.0%	2.2%
Caseloads have increased over time.	2.6%	13.4%	14.4%	33.0%	36.6%
My caseload is backfilled when I am on leave.	40.5%	36.4%	9.1%	12.7%	1.4%
My Service Centre is usually fully staffed.	23.9%	33.8%	7.3%	31.2%	3.8%
The pressure to meet performance targets makes it difficult to prioritise work with children and families.	6.3%	7.6%	8.9%	30.1%	47.1%
Additional records and administrative support would free me up for case work.	2.1%	3.7%	8.3%	25.1%	60.7%

Respondents were asked to estimate how much of their time was spent on administrative and court-related tasks. The median amount of work time estimated to be spent doing administrative tasks by Child Safety support officers, Child Safety officers, family group meeting convenors, senior practitioners and team leaders was 60 per cent. The median amount of work time estimated to be spent doing court tasks was 20 per cent.
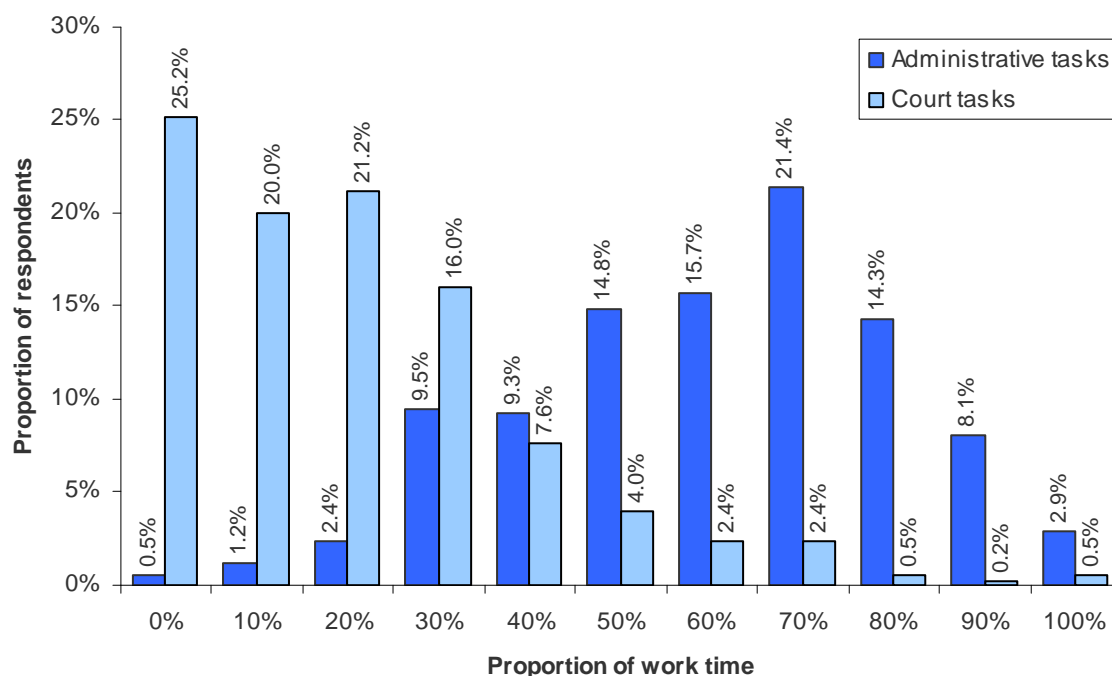
Less than half of all respondents (n=203) provided suggestions for improving casework management in Child Safety. The majority of respondents proposed three key improvements to managing casework. These were less administrative work, capped or reduced case loads and increased recruitment of administrative staff and child safety officers.

A number of respondents reported that officers spent an inordinate amount of time completing administrative tasks for casework. One respondent felt that '…the amount of admin work does not leave enough time to work with children and families and build relationships. There is pressure to meet performance targets as a priority over case work'.

The respondents considered the reduction or 'capping' of caseloads as necessary to maintaining quality standards in casework. Some respondents commented that, 'capped caseloads would alleviate stress and provide adequate time for tasks to be completed' and 'reducing caseloads and/or increasing numbers of staff [would] allow for more meaningful casework with children, young people and their families'. Most respondents acknowledged the effects of managing heavy caseloads on the quality of casework and timely delivery of services.

Some respondents also suggested that the allocation of caseloads should depend on the complexity of individual cases rather than focusing on the 'number of cases' per officer. One respondent made the following comment: 'Case loads should be even, not based on numbers but based on how much time a certain child or family needs. Some children are high-needs and take up the majority of the caseworker's time'. Overall, most respondents agreed that increased recruitment of administrative and frontline staff will improve casework management.

Figure 6: Proportion of work time spent completing administrative and court related tasks

Legend: ■ Administrative tasks □ Court tasks

Y-axis: Proportion of respondents (0% to 30%)
X-axis: Proportion of work time (0% to 100%)

Data values:
- 0%: Administrative 0.5%, Court 25.2%
- 10%: Administrative 1.2%, Court 20.0%
- 20%: Administrative 2.4%, Court 21.2%
- 30%: Administrative 9.5%, Court 16.0%
- 40%: Administrative 9.3%, Court 7.6%
- 50%: Administrative 14.8%, Court 4.0%
- 60%: Administrative 15.7%, Court 2.4%
- 70%: Administrative 21.4%, Court 2.4%
- 80%: Administrative 14.3%, Court 0.5%
- 90%: Administrative 8.1%, Court 0.2%
- 100%: Administrative 2.9%, Court 0.5%

Professional relationships

Respondents were asked to rate the quality of their relationships with professionals and agencies outside Child Safety. Respondents were most likely to report having productive relationships with their local non-government organisations (90%), local public schools (86%) and the Queensland Police Service (85%). Respondents were least likely to report productive relationships with lawyers representing parents (57%), lawyers representing children (68%) and with local private schools (63%).

Just under two thirds of respondents (60%) described their relationship with community visitors to be positive (or 78% of those who reported having regular contact with community visitors). Just over half (57%) felt community visitors play an important role in ensuring the needs of children and young people in out-of-home care are met.

Less than one third of all respondents (n=133) provided suggestions for improving relationships with professionals outside Child Safety. Most respondents felt that relationships with non-government organisations may improve if those agencies had a better understanding of the department's role and objectives in child protection work. One respondent commented that 'feedback from services have indicated that they do not have a solid understanding of our role and consequently lack of knowledge can create problems around mutual working relationships'. The respondents suggested that increased opportunities for networking and regular inter-agency meetings with relevant stakeholders will help to build positive working relationships. Some respondents commented on the importance of adopting a 'partnership approach in child protection work' and that there should be 'regular face to face contact with external services to improve relationships between workers'.

Table 20: Professional relationships

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I am in regular contact with the local Recognised Entity service	2.2%	14.6%	5.0%	49.9%	28.4%
I have a productive relationship with the Recognised Entity service	3.9%	10.9%	12.8%	45.1%	27.3%
I have a productive relationship with Queensland Health.	2.0%	6.8%	13.6%	58.2%	19.3%
I have a productive relationship with the Queensland Police Service.	0.6%	3.7%	10.8%	59.4%	25.6%
I have a productive relationship with local public schools.	0.6%	4.1%	9.0%	63.8%	22.6%
I have a productive relationship with local private schools.	2.5%	12.2%	22.5%	48.1%	14.7%
I have productive relationships with lawyers representing parents.	2.3%	13.2%	27.1%	46.1%	11.3%
I have productive relationships with lawyers representing children and young people.	1.9%	7.0%	22.7%	53.7%	14.7%
I have productive relationships with local non-government organisations.	0.5%	3.9%	5.2%	59.2%	31.2%
I am confident that the funded non-government services in my area are able to effectively deliver their services.	10.3%	28.3%	17.7%	35.2%	8.5%
I am in regular contact with Community Visitors.	8.9%	30.1%	11.3%	41.8%	7.9%
I have a positive relationship with Community Visitors.	4.1%	10.2%	25.3%	50.5%	9.9%
Community Visitors add value to the experiences of children and young people in out-of-home care.	7.2%	15.2%	25.8%	42.1%	9.7%
Community Visitors play an important role in ensuring that the needs of children and young people in out-of-home care are met.	6.6%	12.3%	24.3%	46.2%	10.7%
Community Visitors are appropriately qualified to fulfil their role.	6.9%	15.4%	56.6%	17.3%	3.8%

Although the large majority of respondents reported having productive relationships with non-government organisations, less than half (44%) felt confident that these organisations were able to effectively deliver their services. Most respondents who commented on professional relationships stated that the delivery of non-government organisation services was inadequate to meet the demand and frequency of referrals. One respondent stated, 'The services we have are fantastic but there are not enough and there is usually a waiting list. It can be very time consuming searching for suitable services for our children and young people'. These respondents suggested that more non-government organisations were needed to ensure the timely delivery of services to children and families.

Afterhours Child Safety Service

About half of all respondents agreed with statements indicating that the structure of the Afterhours Child Safety Service enables the service to meet the needs of families on their caseloads (51%), that the service conducts work on their cases afterhours (53%), and that the service is providing expert child protection practice (53%).

Less than one quarter of all respondents (n=95) provided suggestions for improving the operations of the Child Safety Afterhours Service Centre. Most respondents agreed that the Afterhours Service Centre could operate more effectively if provided with additional resources and staff. One respondent described the limitations of the service, 'Child Safety After Hours is a service with community, agency and government expectation to deliver an emergency service to the community without the resources and funding to provide it. A small group of staff (approximately 6-7 on shift at the busiest times) are expected to facilitate the whole child protection response across the state from one centralised location'.

In addition to recruiting more staff, some respondents suggested setting up regional offices for after hours services to help disperse calls and alleviate pressure on staff operating from the central location. One respondent commented that, 'Ideally, each region should have an after hours shift to respond to the specific needs of their region to ensure quality and effective child protection practice and timely responses'.

Table 21: Afterhours Child Safety Service

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
The structure of the Child Safety Afterhours Service Centre enables Child Safety Services to meet the needs of children, young people and their families on my caseload outside of business hours.	11.1%	13.3%	24.8%	45.5%	5.4%
The Child Safety Afterhours Service Centre conducts work on urgent matters for my Service Centre, including investigations and removals, outside of business hours.	8.1%	15.2%	24.1%	45.2%	7.4%
The Child Safety Afterhours Service Centre provides expert child protection practice outside of business hours.	5.7%	11.8%	30.0%	44.0%	8.6%

Court and legal matters

Respondents were asked their opinions of child protection-related court and legal matters, including their opinions about how court work is supported within Child Safety. A majority of respondents (66%) reported being well supported and well prepared for giving evidence in court and tribunal processes. About three quarters (77%) agreed with the proposition that they have a good understanding of court and tribunal processes. In contrast, just less than a third of respondents (32%) took the view that their local Childrens Court judges and magistrates had a good understanding of child protection issues.

When asked about the role of court coordinators, a large majority of respondents (93%) agreed that this role was an asset to their Child Safety service centre. Most (91%) reported that court coordinators were regularly consulted about court matters with just over half reporting that their advice is always followed (59%). About half of all respondents (46%) felt it wasn't necessary for court coordinators to have a legal background to perform their role.

About one quarter of all respondents (n=103) provided suggestions for improving court-related work. The majority of respondents identified three key areas for improving court-related work.

These were training and education for Childrens Court judges and magistrates in the conduct of child protection matters, legally qualified court coordinators, and training provided to child safety officers and other departmental staff in the preparation of legal documentation.

Some respondents held the view that training for Childrens Court judges and magistrates would ensure a more consistent and informed approach to judicial decision-making in child protection matters. One respondent noted that, 'Magistrates often have a poor knowledge of child protection, especially in key areas such as cumulative harm and attachment'. Therefore, it was recommended that magistrates 'need to be educated in child protection work and specialise in it' and/or receive 'compulsory training in the Child Protection Act and its provisions'.

A small number of respondents suggested that court coordinators should provide training and support to child safety officers in the preparation of court applications, affidavits and other documents. One respondent commented that, 'The court coordinator should be the mentor for all court material that is provided to the courts. They should provide regular training to all staff who complete court applications/affidavits. They should also continue to receive training from court services'. Most respondents agreed that training and guidance from the court coordinator would improve the quality of legal documentation presented in court.

Table 22: Court and legal matters

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I have a good understanding of court and tribunal processes	1.8%	12.0%	9.9%	57.7%	18.5%
I feel supported and well prepared for giving evidence in court and tribunal processes.	4.8%	17.9%	11.6%	51.3%	14.3%
I get access to timely and appropriate legal advice and representation to perform my court and tribunal roles.	5.3%	16.1%	14.9%	52.5%	11.2%
Team Leaders should be the applicants for orders if they have decided what applications to make.	6.1%	22.4%	17.1%	30.1%	24.3%
My Child Safety Service Centre has a process to resolve disagreements about child protection litigation.	5.5%	11.8%	43.6%	32.7%	6.4%
The Court Coordinator role is an asset to the Service Centre.	1.6%	1.3%	3.9%	33.9%	59.3%
Court Coordinators do not need to have a legal background to successfully perform the role.	16.0%	20.9%	17.3%	32.5%	13.4%
The Court Coordinator is regularly consulted regarding prospective Child Protection applications, affidavits and case direction.	0.6%	4.2%	4.5%	43.5%	47.2%
The advice from the Court Coordinator is always followed.	1.4%	18.4%	20.9%	41.5%	17.8%
My local Childrens Court judges and magistrates have a good understanding of child protection issues (e.g. cumulative harm).	18.3%	19.4%	30.6%	24.7%	6.9%

Appendix A

Survey instrument

Q1. What is your Child Safety Service Region?
[Brisbane Region; Central Queensland Region; Far North Queensland Region; North Coast Region; North Queensland Region; South East Region; South West Region; Operations; Complaints and Review]

Q2. What is your Child Safety Service Centre?
[Atherton; Cairns North; Cairns South; Cape York North and Torres Strait Islands; Cape York South; Innisfail; Springfield; Edmonton;   Child Safety After Hours; Court Services; Adoptions and Specialist Support Services; Regional Office; Region Intake Service   ; Placement Services Unit; Aitkenvale; Alderley; Beaudesert; Beenleigh; Bowen; Browns Plains; Bundaberg; Caboolture; Caloundra; Charleville; Chermside; Cleveland; Emerald; Forest Lake; Fortitude Valley; Gladstone; Goodna; Gulf; Gympie; Inala; Ipswich North; Ipswich South; Labrador; Logan Central; Loganlea; Mackay; Maroochydore; Maryborough; Mermaid Beach; Mornington Island; Mount Gravatt; Mt Isa; Nerang; Normanton; Redcliffe; Rockhampton North; Rockhampton South; Roma; South Burnett; South Burnett (Murgon); Stones Corner; Strathpine; Thuringowa; Toowoomba North; Toowoomba South; Townsville; Woodridge; Wynnum]

Q3. What is your role in the Child Safety Service Centre?
[Child Safety Support Officer; Child Safety Officer; Family Group Meeting Convenor; Court Coordinator; Senior Practitioner; Team Leader; Manager; Other (please specify)]

Q4. How many days do you work per week?
[1; 2; 3; 4; 5]

Q5. How long have you been an employee of Child Safety Services?
[Less than 3 months; 3 to 5 months; 6 to 12 months; 1 year+; 2 years+; 3 years+; 4 years+; 5 years+; 6 years+; 7 years+; 8 years+; 9 years+; 10-15 years; 15 -20 years; More than 20 years]

Q6. The majority of the clients I work with live in:
[A major town or city; Regional or rural locations; Remote or very remote locations; Not applicable/Undecided]

Q7. Do you hold any formal tertiary qualifications?
[Yes; No]

Q8. What types and levels of qualifications do you hold?
Arts
Behavioural Science
Community Welfare
Criminology
Education
Human Services
Justice Certificate
Law
Nursing
Psychology
Social Science
Social Work
Other
[Certificate; Diploma; Bachelor; Honours/Grad. Diploma; Masters; Doctorate/PhD]

Q9. How much do you agree or disagree with the following statements?
An experienced person without a tertiary qualification can fulfil a Child Safety Support Officer (CSSO) role.
An experienced person without a tertiary qualification could fulfil a Child Safety Officer (CSO) role.
An experienced person without a tertiary qualification could fulfil a Team Leader role.
An experienced person without a tertiary qualification could fulfil a Senior Practitioner role.
An experienced person without a tertiary qualification could fulfil a Family Group Meeting Convenor role.
An experienced person without a tertiary qualification could fulfil a Court Coordinator role.
An experienced person without a tertiary qualification could fulfil a Service Centre Manager role.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q10. Which of these qualifications do you think a person should be able to hold to practice as a Child Safety Officer? (tick all that apply)
Arts
Behavioural Science
Community Welfare
Criminology
Education
Human Services
Justice
Law
Nursing
Psychology
Social Science
Social Work
Any tertiary qualification
No tertiary qualification

Q11. How much do you agree or disagree with the following statements?
I receive regular formal scheduled supervision.
I receive regular informal, unscheduled supervision.
I receive regular direct supervision (ie live or field supervision).
I receive regular group supervision.
I receive regular external supervision funded by Child Safety Services.
The supervision I have access to assists me to fulfil my role.
The supervision I receive is mainly administrative in nature, ie allocation of work and tasks.
I am supervised by an appropriately experienced practitioner.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q12. Do you have any suggestions for improving supervision for Child Safety Services staff?
[Comment]

Q13. I feel confident that I have the skills I need to work effectively with:
Parents
Children
Young people (teenagers)
People with disabilities
People with mental health problems
People who misuse drugs and alcohol
Cases involving domestic violence
Cases involving sexual abuse
Cases involving physical abuse
Cases involving neglect
Cases involving emotional/psychological abuse
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q14. Have you commenced/completed your CSO Entry Level Training?
[Yes; No; Not applicable].

Q15. What stage of your CSO Entry Level Training are you currently undertaking?
[Have not started; Phase 1: Orientation (1 – 4 weeks); Phase 2: Face-to-face training phase (three weeks); Phase 3: Flexible workplace assessment phase (five months); Phase 4: Consolidation face-to-face phase (one week); Phase 5: Flexible workplace assessment phase (five months); I have completed all phases; Don't know; Not applicable]

Q16. How much do you agree or disagree with the following statement?
The CSO Entry Level Training helped me develop the skills and knowledge I need to perform my role.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q17. Do you have any suggestions for improving CSO Entry Level Training?
[Comment]

Q18. Have you had any other training or professional development opportunities while employed by Child Safety Services?
[Yes; No]

Q19. How much would you agree or disagree with the following statements?
The training I have been provided with at Child Safety Services has been adequate for me to undertake my role.
Child Safety Services offers sufficient professional development sessions run by Senior Practitioners in my Service Centre.
The detail provided in training sessions is sufficient to meet my needs.
The training I am provided with by Child Safety Services covers topics important to my work with children and families.
Senior Practitioners are best placed to deliver training to me in my Service Centre.
I am encouraged to undertake further education and/or professional development external to the Department, for instance, postgraduate study.
Child Safety Services offers incentives for me to undertake professional development.
I am given opportunities to attend workshops and conferences.
Child Safety Services invests in your professional development.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q20. Do you have any suggestions for improving training and professional development for Child Safety Services staff?
[Comment]

Q21. Have you been given opportunities to act in other positions, for example, as a team leader?
[Yes; No]

Q22. How much do you agree or disagree with the following statements?
I have been provided with training prior to acting in different roles.
I feel that the level of training has been adequate to enable me to undertake these different roles.
I am supported while undertaking different roles.
My work commitments in my substantive role are fulfilled by someone else while I am acting.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q23. Do you have any suggestions for improving acting and higher duties arrangements for Child Safety Services staff?
[Comment]

Q24. When was the last time you undertook Cultural Competency Training?
[Within the last 12 months; 1 year+; 2 years+; 3 years+; 4 years+; Never]

Q25. How much do you agree or disagree with the following statements?
The role of Recognised Entity has helped me understand cultural issues and work with Aborignal and Torres Strait Islander children and families.
My training has prepared me well to work with Aboriginal and Torres Strait Islander children and families.
I feel confident working with Aboriginal and Torres Strait Islander children and families.
My training has prepared me well to work with children and families from Culturally and Linguistically Diverse (CALD) backgrounds
I feel confident working with children and families from Culturally and Linguistically Diverse (CALD) backgrounds.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q26. Approximately what proportion of your caseload is made up of Aboriginal and Torres Strait Islander children and families?
[None; Less than 10%; 10%; 20%; 30%; 40%; 50%; 60%; 70%; 80%; 90%; 100%;Not applicable]

Q27. Approximately what proportion of your caseload is made up of children and families from Culturally and Linguistically Diverse (CALD) backgrounds?
[None; Less than 10%; 10%; 20%; 30%; 40%; 50%; 60%; 70%; 80%; 90%; 100%;Not applicable]

Q28. Do you have any suggestions for improving the cultural competencies of Child Safety Services staff?
[Comment]

Q29. Do you identify as Aboriginal or Torres Strait Islander?
[Yes; No]

Q30. How much do you agree or disagree with the following statements?
The training received by my colleagues is preparing them well to work with Aboriginal and Torres Strait Islander children and families
My colleagues are competent at working with Aboriginal and Torres Strait Islander children and families
My colleagues recognise the importance of applying the Aboriginal and Torres Strait Islander Child Placement Principle
My colleagues value my advice about working with Aboriginal and Torres Strait Islander children and families
I have enough opportunities to network with other Aboriginal and Torres Strait Islander staff in Child Safety Services
I believe Child Safety Service are committed to creating a culturally competent workforce
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q31. How much do you agree or disagree with the following statements?
My workplace is supportive of its staff.
There are staff to take care of my work while I am on flex and recreational leave.
My colleagues and managers support my decisions.
I am appropriately supported to fulfil my role in Child Safety Services.
I am supported to access the Employee Assistance Service (EAS).
I have access to professional debriefing following critical incidents.
I have access to legal advice and representation following critical incidents.
I am concerned about my confidentiality when accessing support services like EAS.
I am adequately supported if I am subject to a formal complaint, review or investigation, for example System and Practice Review (formally known as Child Death Review)
I am provided with sufficient information about the outcome of formal complaints, reviews and investigations.
I feel listened to when I raise issues or concerns.
I feel that innovative practice is supported by Child Safety Services.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q32. Do you have any suggestions for improving the support provided to Child Safety Services staff?
[Comment]

Q33. How much do you agree or disagree with the following statements?
I feel that the work I do is valued in my Team.
I feel that the work I do is valued in my Service Centre.
I feel that the work I do is valued in my Region.
I feel that the work I do is valued in Child Safety Services.
I feel that the work I do is valued by the community.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q34. How much do you agree or disagree with the following statements?
The Integrated Client Management System (ICMS) supports my practice.
Information can be quickly entered onto ICMS.
ICMS makes it easy to access the information I need to perform my role.
ICMS includes all the information I need about my clients.
ICMS generates all of the reports I need to perform my role.
ICMS is a reliable information database.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q35. The level of information collected in ICMS is:
[Not detailed enough; About right; Too detailed; Undecided/NA]

Q36. Do you have any suggestions for improving the Integrated Client Management System?
[Comment]

Q37. How much do you agree or disagree with the following statements?
I find the Child Safety Practice Manual easy to use.
The Child Safety Practice Manual guides my practice.
The standards set out in the Child Safety Practice Manual are achievable.
The Child Safety Practice Manual is flexible enough to allow me to be innovative in my practice.
The Child Safety Practice Manual provides practice guidance that works in the field.
The Child Safety Practice Manual provides advice that can be implemented in urban Service Centres and in rural and remote Service Centres.
The Child Safety Practice Manual is a useful resource.
The Child Safety Practice Manual provides sufficient detail.
The Child Safety Practice Manual is well structured.
The Child Safety Practice Manual supports my understanding on how to apply the relevant law to my casework.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q38. The Child Safety Practice Manual is:
[Not detailed enough; About right; Too detailed; Undecided/NA]

Q39. Do you have any suggestions for improving the Child Safety Practice Manual?
[Comment]

Q40. How much do you agree or disagree with the following statements?
I know how to access Child Safety Services Policies and Procedures on the Child Safety Infonet.
Child Safety Services provides enough policy guidance for me to perform my role.
I have access to timely and appropriate legal advice on policies and procedures related to my work.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q41. Do you have any suggestions for improving the Child Safety Services' policies and procedures?
[Comment]

Q42. How much do you agree or disagree with the following statements?
Structured Decision Making (SDM) tools are an integral part of my practice.
I use my professional judgement in conjunction with the SDM tools.
I am supported to use my professional judgement to override SDM tools.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q43. In approximately what proportion of decisions do you apply an override to an SDM tool?
[Never; Less than 10%; 10%; 20%; 30%; 40%; 50%; 60%; 70%; 80%; 90%; 100%]

Q44. Do you have any suggestions for improving the decision making tools used in Child Safety Services?
[Comment]

Q45. How much do you agree or disagree with the following statements?
There is a balance in my role between administrative tasks and court processes, and frontline service delivery to children and families.
The family group meeting process is best convened by someone in Child Safety Services ie a Family Group Meeting Convenor.
The family group meeting process is best convened by someone independent of Child Safety Services.
I am able to spend sufficient time with the children and families I work with to form productive relationships.
My current caseload is manageable.
Caseloads have increased over time.
My caseload is backfilled when I am on leave.
My Service Centre is usually fully staffed.
The pressure to meet performance targets makes it difficult to prioritise work with children and families.
Additional records and administrative support would free me up for case work.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q46. Approximately what proportion of your work time is spent doing administrative tasks?
[0%; 10%; 10%; 20%; 30%; 40%; 50%; 60%; 70%; 80%; 90%; 100%]

Q47. Approximately what proportion of your work time is spent doing court processes?
[0%; 10%; 10%; 20%; 30%; 40%; 50%; 60%; 70%; 80%; 90%; 100%]

Q48. Do you have any suggestions for improving the way casework is managed in Child Safety Services?
[Comment]

Q49. Approximately how many reports did you screen in the last month?
[Total number of reports:]

Q50. Approximately how many Investigation and Assessments are on your current caseload?
[Total number of assessments:]
[Total number of children:]

Q51. Approximately how many Ongoing Interventions are on your current caseload?
[Total number of children:]

Q52. Approximately how many Matters of Concern reports are on your current caseload?
[Total number of assessments:; Total number of children:]

Q53. Approximately how many Child Placement Concern Reports are on your current caseload?
[Total number of assessments; Total number of children:]

Q54. How much do you agree or disagree with the following statements?
I am in regular contact with Community Visitors.
I have a positive relationship with Community Visitors.
Community Visitors add value to the experiences of children and young people in out-of-home care.
Community Visitors play an important role in ensuring that the needs of children and young people in out-of-home care are met.
Community Visitors are appropriately qualified to fulfil their role.
I am in regular contact with the local Recognised Entity service.
I have a productive relationship with the Recognised Entity service.
I have a productive relationship with Queensland Health.
I have a productive relationship with the Queensland Police Service.
I have a productive relationship with local public schools.
I have a productive relationship with local private schools.
I have productive relationships with lawyers representing parents.
I have productive relationships with lawyers representing children and young people.
I have productive relationships with local non-government organisations.
I am confident that the funded non-government services in my area are able to effectively deliver their services.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q55. Do you have any suggestions for improving relationships with professionals outside Child Safety Services?
[Comment]

Q56. How much do you agree or disagree with the following statements?
The structure of the Child Safety Afterhours Service Centre enables Child Safety Services to meet the needs of children, young people and their families on my caseload outside of business hours.
The Child Safety Afterhours Service Centre conducts work on urgent matters for my Service Centre, including investigations and removals, outside of business hours.
The Child Safety Afterhours Service Centre provides expert child protection practice outside of business hours.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q57. Do you have any suggestions for improving the operations of the Child Safety Afterhours Service Centre?
[Comment]

Q58. How much do you agree or disagree with the following statements?
I have a good understanding of court and tribunal processes.
I feel supported and well prepared for giving evidence in court and tribunal processes.
I get access to timely and appropriate legal advice and representation to perform my court and tribunal roles.
Team Leaders should be the applicants for orders if they have decided what applications to make.
My Child Safety Service Centre has a process to resolve disagreements about child protection litigation.
The Court Coordinator role is an asset to the Service Centre.
Court Coordinators do not need to have a legal background to successfully perform the role.
The Court Coordinator is regularly consulted regarding prospective Child Protection applications, affidavits and case direction.
The advice from the Court Coordinator is always followed.
My local Childrens Court judges and magistrates have a good understanding of child protection issues (e.g. cumulative harm).
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q59. Do you have any suggestions for improving court related work?
[Comment]

Q60. If you were the Commissioner of this Inquiry, what would you recommend to improve the effectiveness of the current child protection system? Bear in mind that any recommendations should be affordable, deliverable and provide effective outcomes.
[Comment]