

Expert Panel advice and recommendations to the Minister for Children and Youth on the essential therapeutic elements required for an improved service system response for Tasmanian children and young people with highly complex needs.

July 2021

Acknowledgement of Tasmanian Aboriginal People

The Expert Panel acknowledges and pays respect to the palawa people of lutruwita as the traditional and original owners and continuing custodians of this land. We acknowledge elders, past, present and emerging.

Other Acknowledgements

The Panel acknowledges the significance of the reforms proposed within this report for Tasmanian children and young people, families and the Tasmanian community more broadly.

The Panel would like to acknowledge and thank all stakeholders, including children and young people with a care experience, who have provided information that has assisted in the development of this report. This acknowledgement also extends to stakeholders who have previously provided information to the Tasmanian Government about establishing 'On Country' programs in Tasmania.

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EXECUTIVE SUMMARY

The aim of this report is to provide advice and recommendations to the Minister for Children and Youth on the essential therapeutic elements required to improve the service system response for Tasmanian children and young people with highly complex needs accessing therapeutic residential care at the Many Colours One Direction program (MCID) in the Northern Territory. In October 2020, the Department of Communities Tasmania, Children, Youth and Families undertook an [Investigative Review](#) in response to allegations questioning the safety and wellbeing of young people participating in the MCID Therapeutic Residential Placement Program.

The Investigative Review made four recommendations, which were all accepted by the former Minister for Human Services, the Hon Roger Jaensch MP. This report constitutes the advice of an Expert Panel (the Panel), as detailed in Recommendation 4 of the Investigative Review. It should be noted that a State election and subsequent change to ministerial portfolios occurred during the Panel's work. This report is therefore provided to the Minister for Children and Youth, the Hon Sarah Courtney MP.

The Panel considered various documents and publications on Tasmania's Out of Home Care (OoHC) system, including publications, information from the Child Safety Service, a cross-jurisdictional analysis, as well as information generously provided by children and young people with a care experience and staff within the Child Safety Service. Several Panel members also provided their extensive knowledge of the MCID program.

The Panel centred its work within the public health approach to child safety and wellbeing and has made recommendations relating to the full spectrum of services supporting vulnerable children and young people in Tasmania, from prevention and early intervention, through to placement options within the OoHC system.

Recommendations have been designed to sit alongside other key reforms being progressed in Tasmania, including the *Strong Families Safe Kids: Next Steps Action Plan 2021-2023* and the Child and Adolescent Mental Health Service reforms. The Panel has also taken account of the Premier's Economic and Social Recovery Advisory Council's (PESRAC) recommendations relating to the COVID-19 pandemic response in formulating these recommendations.

The Panel makes four key recommendations:

- **Recommendation 1:** Develop a whole-of-government approach to promote and drive systemic change;
- **Recommendation 2:** Develop the Tasmanian Out of Home Care system to improve its efficacy and increase and enhance placement options for children and young people;
- **Recommendation 3:** Transition away from the utilisation of MCID and commit to robust, inclusive and collaborative decision making in relation to interstate residential placements of young people throughout the transition; and
- **Recommendation 4:** Adopt a whole-of-government focus on implementation and investment.

EXPERT PANEL

In January 2021, an Expert Panel (the Panel) was established to deliver advice to the Minister for Human Services (now Minister for Children and Youth) regarding the establishment of a Tasmanian-based program.

The purpose of the Panel was to:

- develop a detailed understanding of the extent and nature of the significant, severe and/or complex psychological and behavioural support needs of the children and young people in care that led to a placement at MCID; and
- provide advice to the Minister for Human Services (now Minister for Children and Youth) regarding an improved service systems response to the highly vulnerable client group by:
 - considering the national cross-jurisdictional report of out of home care therapeutic program evidence-based responses, including ‘on-country’ and other cultural elements, and determining their relevance to the Tasmania context;
 - examining both the pre- and post-placement life trajectories of the Tasmanian young people who have resided, or are residing, at MCID, through de-identified case profiles which are constructed using the Child and Young Person Wellbeing Framework domains; and
 - considering Tasmania’s public health reform approach to child safety and wellbeing in the context of scoping the essential therapeutic elements for an improved service system response that would enhance and increased the likelihood of improved outcomes for the client cohort.

The Panel was not required to make recommendations about who might be best placed to provide any service.

The Panel consisted of:

- Ms Dianne Baldock;
- Ms Raylene Foster;
- Professor Maria Harries AM;
- Ms Claire Lovell;
- Professor Brett McDermott
- Ms Janise Mitchell; and
- Ms Trudy Pearce.

The Independent Chair of the Expert Panel, appointed by the former Minister for Human Services, the Hon Roger Jaensch MP, is Tasmanian Commissioner for Children and Young People, Ms Leanne McLean.

For more information about the Panel member’s backgrounds, please see the Expert Panel’s [Terms of Reference](#) located on the Department of Communities Tasmania website.

INTRODUCTION

The wellbeing of a child or young person relies on the strength of their family, the cohesion of the community they live in and the effectiveness of formal and informal support networks that surround them and their family. A whole-of-system approach is needed when it comes to ensuring the safety and wellbeing of children and young people in Tasmania.

Recent Tasmanian Government initiatives

Recent reforms and reviews undertaken by the Tasmanian Government include the introduction of the [Tasmanian Child and Youth Wellbeing Framework](#), the [Strong Families Safe Kids: Next Steps Action Plan 2021-2023](#), the [Draft Consultation for the Under 16 Homelessness Policy Framework](#), and the [Child and Adolescent Mental Health Review](#). The Panel recognises and supports that each of these initiatives promote the need for cross-sectoral collaboration to improve child safety and wellbeing.

The Panel acknowledges that the Tasmanian Government has committed to a public health approach to child safety and wellbeing, which aims to shift the focus from a statutory response towards one that addresses the needs of all families. Supports to prevent problems occurring in the first place and supports to quickly respond to problems if or when they do occur should be widely available to all, with specific intensive targeted interventions available as required. The Panel strongly supports a public health approach with a strong focus on universal supports and early interventions; recommendations made in this report are based on such.

Out of home care in Tasmania

Targeted interventions include OoHC, which refers to the care of children and young people aged between 0 and 18 years who are unable to reside with their primary caregivers. Children and young people residing in OoHC in Tasmania have been placed in care as a result of formal statutory intervention.

Children and young people residing in formal OoHC placements will, where possible, be placed with another family member. This is referred to as kinship care. Where a family member is not able to be identified to provide care, a child or young person may be placed in formal foster care, therapeutic residential care or special packaged care.

Children and young people residing in the OoHC system often have lived experiences of trauma and have been removed from their primary caregiver because of significant concerns for their safety and wellbeing, including exposure to significant abuse and/or neglect. As a result, children and young people living in OoHC have a diverse range of needs, strengths, interests and behaviours, some of which are highly complex, which must be catered for within the Tasmanian OoHC system.

In Tasmania, as is the case in other jurisdictions, Aboriginal children and young people make up a disproportionately high number of those living in OoHC, with Aboriginal children and young people almost five times more likely to be in statutory OoHC than non-Aboriginal children and young people. The Tasmanian Government, through the National Closing the Gap Agreement, has made a commitment to improved outcomes for Aboriginal children and young people, including to reducing the national overrepresentation of Aboriginal children and young people in the OoHC system by 45 per cent by 2031.

MCID and the its place within Tasmania's out of home care system

While all children and young people living in OoHC can be vulnerable due to their past experiences, there is a small cohort of young people who, as a result of their specific trauma experiences and life trajectories, have developed significant risk-taking behaviours that may be harmful to themselves or others. As a result of these behaviours, it can be extremely difficult for their family and/or caregivers to support them.

Some young people within this small cohort, as a result of all existing options in Tasmania having been exhausted, have been placed at MCID. MCID is a therapeutic residential placement program in the Northern Territory delivered in collaboration with the Australian Childhood Foundation (ACF). Between 2015 and 2020, 13 young Tasmanians have participated or are participating in the program at MCID.

In October 2020, the Department of Communities Tasmania's Children, Youth and Families division, undertook an [Investigative Review](#) in response to allegations questioning the safety and wellbeing of young people participating in the MCID therapeutic residential placement program.

The Investigative Review made four recommendations, all of which were accepted by the former Minister for Human Services, the Hon Roger Jaensch MP. This report constitutes the advice of the Panel, as detailed in Recommendation 4 of the Investigative Review.

This report does not detail the past histories or life experiences of the young people who have resided at MCID. However, as noted above, it is acknowledged that those who have resided there are young adolescents who have experienced difficult childhoods as a result of exposure to significant trauma and adverse childhood events.

The Terms of Reference did not ask the Panel to, nor did the Panel hold any desire to intervene in decisions associated with individual young people currently residing at MCID. The Panel notes that individual OoHC placement decisions are the legislative responsibility of the Secretary of the Department of Communities Tasmania under the *Children, Young Persons and their Families Act 1997* and that the best interests of the child are a paramount consideration in any decision-making processes.

OVERVIEW OF COHORT ACCESSING MCID

The average age for Tasmanian young people placed at MCID is 12 years.

The average length of placement for each young person is 12 months, noting that, of the 13 young people who resided at MCID, one individual spent approximately two years at MCID and four remained at MCID for six months or less.

Three of the young people placed at MCID were placed there directly from Ashley Youth Detention Centre (AYDC) with a Magistrate having input into these placement decisions.

The Panel noted that, although the MCID program has at times been characterised through public commentary as a placement option solely for Tasmanian Aboriginal young people, it is not considered by the Department of Communities Tasmania to be a placement option specifically for Aboriginal young people but, rather, for young people at significant risk for whom all other placement options have been exhausted.

A combination of characteristics of young people placed at MCID includes:

- young adolescents involved in the Child Safety system;
- school refusal or complete disengagement from education;
- exposure to extreme trauma;
- multiple placement breakdowns;
- difficult to engage in the community; and
- extreme behaviours including significant risk taking and anti-social behaviour.

OUT OF HOME CARE IN TASMANIA

Looking after a child is primarily the responsibility of parents and family. Sometimes, for many different reasons, parents or family are unable to ensure the safety and wellbeing of their child and as a result the Child Safety Service needs to intervene, assuming responsibility for day-to-day care of the child. When a child first enters OoHC, the primary aim is to return them to the care of their parents or family, and this is referred to as restoration. However, sometimes this is not possible, and a child or young person will remain in OoHC.

In some instances, restoration may be initiated but may not be sustainable longer term, resulting in a child or young person re-entering the OoHC system. Experiences of OoHC will vary for each child and young person, with some

children and young people experiencing stability in their placement either in kinship care or foster care. Other children and young people's experiences are not as stable and their trajectory within the system, for a multitude of reasons, sees them move between placements and placement types. In some instances, a child or young person who has experienced significant trauma may not be able to remain with their family of origin, in kinship care or in foster care. In these situations, a child or young person may be placed in special packaged care or therapeutic residential care. A brief description of all care types currently available in Tasmania is included in the Glossary of Terms at Appendix A.

A small group of young people in Tasmania has moved through the OoHC system, including those who have self-selected their own placements, without having their complex needs met. This has resulted, to varying degrees, in their engagement in high-level risk taking and anti-social behaviours that place themselves and others at risk. The Panel has identified that, for these young people, placement options that take account of their complex needs in Tasmania are limited or absent. The ability to place these young people somewhere in Tasmania that will meet their needs and keep them safe from harm is difficult. As a result of the limited options in Tasmania, options in other jurisdictions have been sought, resulting in the addition of the MCID program to the Tasmanian OoHC system landscape.

Tasmania's OoHC system has multiple types of care; some children and young people will have experience residing in each type of care placement. The Panel's recommendations, in part, touch on all forms of care available in the Tasmanian system, including making recommendations about the creation of additional care types.

INFORMATION USED TO SUPPORT THE PANEL'S WORK

The Panel was fortunate that multiple members brought with them an intimate practice knowledge of MCID and the therapeutic programs that support its function. All Panel members were able to share their knowledge and experience in the field with the Panel.

The Panel also considered various documents and publications when making recommendations (refer to Bibliography). Please note, some of these documents contain confidential information about clientele and can therefore not be released publicly. Information fits within the following categories:

- information from the Child Safety Service;
- cross-jurisdictional analysis – Therapeutic Residential Care Services for Children and Young People under the age of 18 in the Child Protection and Youth Justice Systems;
- views of young people with a care experience (presented by the Tasmanian Child Advocate);
- views of Child Safety Service staff;
- various documents from the Australian Childhood Foundation; and,
- the Final Report of the Premier's Economic and Social Recovery Advisory Council.

Voice of children, young people and workers

The Panel would like to highlight the contributions made to this review by Tasmanian young people with a care experience, supported by the Child Advocate. Young people highlighted the key issues which contribute to placement stability and trajectories through the OoHC system.

Feedback from young people included, but was not limited to, the following:

- **Choice** – the word heard most in feedback. Having choice within placement, choosing the pace at which they engage with professionals and family, choice to meet friends, to have a phone and engage in social media.
- **Control** – having adults share control, having adults who feel safe and comfortable enough to share control with young people and trust them, allowing them to have a level of autonomy and independence.
- **Space** – having their own space, whilst being supported to engage in education, health, and activities.

- **Pets** – all young people expressed a desire to have a pet.

Likewise, workers within the Child Safety Service also provided their views to the Panel. The key themes identified included, but were not limited to, the following:

- **Early and proactive intervention** – providing support to foster carers and young people at point of entry to care and through their care journey.
- **Education** – continued access or establishing access to education and ensuring that this is always something that is prioritised.
- **Assessments** – having a multidisciplinary approach to assessment and care at point of entry and throughout the care trajectory to ensure that a child or young person has appropriate supports in place to meet their needs and to support placement stability.
- **Circuit breakers** – having a place that is considered ‘remote’ where young people can spend a short period of time to act as a circuit breaker, by removing them from situations/people causing harm, or the circumstances where they may seriously harm other people.

Practitioners expressed that any recommendations made by the Panel need to be implemented slowly and to be appropriately resourced to ensure that new programs would impact positively on the OoHC system and provide demonstrated improved outcomes for young people.

PESRAC Final Report

On 16 March 2021, the Premier’s Economic and Social Recovery Advisory Council (PESRAC) delivered its [Final Report](#) to the Premier. The PESRAC Final Report provides advice to the Tasmanian Government on long-term recovery from the COVID-19 pandemic. It highlights the importance of staying connected with family, friends and community, and shines a light on the challenges of supporting isolated and vulnerable members of our community.

Community-led and place-based recovery was a consistent theme raised in PESRAC’s consultations. Linking to this theme was a strong message about local solutions to local problems, and the role of community, through its leaders, in driving outcomes. The rejection of a one size fits-all approach to programs and approaches that aim to rebuild from COVID-19 was common. There was a strong preference for government to have a clear and unambiguous ‘what’ it is seeking to achieve, coupled with robust and thorough engagement with local communities on the ‘how’ of achieving those ambitions.

The PESRAC Final Report recommended the Tasmanian Government and its agencies should actively seek out and fund community-led, place-based recovery activities; and that priority should be given to activities with the following objectives:

- increased community connection including collaboration across existing community organisations;
- primary prevention of and early intervention in areas such as family or community violence and drug and alcohol misuse; and
- models which promote new and innovative strategies to engage volunteers.

This Panel, in making its recommendations about Tasmania’s OoHC system, has drawn strongly on PESRAC’s advice, specifically on community-led and place-based recovery.

INCORPORATING THE BENEFITS OF MCID INTO THE TASMANIAN SYSTEM

The Panel acknowledges that MCID has many strengths and positive elements and that, in making recommendations about therapeutic programs in Tasmania, it is essential that these positive elements are replicated, where possible.

In establishing the benefits of MCID, members of the Panel with knowledge and experience of the program were able to identify and detail the many benefits of the program for the rest of the Panel members. Furthermore, the views of

children and young people elicited through previous reviews of the program were also considered. The following strengths are highlighted for inclusion in any programs that may be established in Tasmania and the Tasmanian OoHC system more broadly:

- **Education** – The Panel acknowledges the education model at MCID as one of its greatest strengths. Education is provided by Katherine School of the Air, a distance education school that caters for isolated primary and middle school students who reside in the top half of the Northern Territory. Staff encourage and support young people at MCID to engage in the program. The Panel noted that some young people, before being placed at MCID, had little to no engagement with education/schooling and that their time at MCID had enabled them to embrace their education and experience success in their education journey.
- **Healthy Lifestyle** – The Panel recognises that the young people who have resided at MCID have gained an understanding of the important healthy lifestyle factors that contribute to their health and wellbeing. For example, a regular sleep routine, healthy eating and regular physical activity. Smoking and alcohol and drug use prevention and early intervention are also a feature of the MCID program.
- **Pro-Social Activities** – MCID provides young people with the opportunity to engage in pro-social activities and to engage and develop social skills.
- **Engagement** – Relationships and a sense of security and stability in the environment are promoted and prioritised at MCID. These relationships foster engagement amongst the young people living there. The program is strengths focussed and demonstrates a belief that “kids can”, and that young people can succeed within the program.
- **Individualised Assessment** – For young people residing at MCID, an individualised assessment is undertaken on arrival which informs a child’s care plan including any therapeutic interventions.
- **Care Arrangements** – The care arrangements offered at MCID offer significant benefit to the young people residing there. These care arrangements include two primary caregivers who are supported by rostered staff. The Panel acknowledges multiple benefits in the way in which the roster at MCID is structured, including the time period a staff member is rostered on shift (four days on, four days off), creating relational stability for the young people.
- **Geographical Barriers** – The Panel recognises that for some young people, MCID’s physical distance and geographical barrier to Tasmania has helped provide them with the space for a fresh start to learn and develop new skills, to moderate their behaviour and to deal with their trauma. However, the Panel also acknowledges the difficulties inherent in this, which are discussed further below.

DISCUSSION

A Public Health Approach

The public health approach is widely accepted as the most effective approach to ensure the safety and wellbeing of children and young people. The approach includes a focus on preventing child abuse and neglect from occurring in the first place by addressing underlying risk factors that increase the likelihood that a child will experience abuse or neglect ([Consultation paper - Systems for Protecting Children](#), Lonne et al. 2019). Furthermore, it includes a focus, where necessary, on interventions as early as possible to minimise harm. The Tasmanian Government’s commitment to a public health approach to child safety and wellbeing is already evident in the reforms implemented to date through the *Strong Families Safe Kids* initiative, which include a significant focus on supporting families early to prevent the need for statutory intervention. The Panel agrees that this approach should be supported further in Tasmania through a sustained focus on family support programs. There is a particular opportunity to focus on the first 1000 days of children’s lives to positively impact on the life trajectories of vulnerable children and families.

Universal parenting supports

The Panel notes that, consistent with the public health approach, implementing universal prevention mechanisms would reduce the likelihood of families requiring statutory interventions in the first place. Significant opportunities exist to provide greater access to universal parenting supports in Tasmania such as making parenting programs freely available to all. Furthermore, promoting an increased understanding across the Tasmanian community of the impact of the first 1000 days of a child's life on their future development could also provide significant benefits for the safety and wellbeing of children and young people.

The need to integrate reforms to provide greater therapeutic supports

The Panel acknowledges that the systemic practice of utilising MCID as a provider of OoHC for Tasmanian children and young people with highly complex needs has emerged due to all existing OoHC placement options in Tasmania already being exhausted. This situation has in part been driven by Tasmania's inability to provide children, young people and their families with the therapeutic supports they require to maintain placement stability. Therapeutic supports within placements, particularly in early childhood, are essential to ensuring sustainability of placements and establishing a framework that supports a child's positive journey through the OoHC system. Supports are drawn across various systems influencing the safety and wellbeing of children and young people and their families including, but not limited to, health, mental health, drug and alcohol services, education, youth justice, child safety, and the OoHC system.

The Panel acknowledges the various current major reform initiatives underway across these Tasmanian systems, including, but not limited to, the *Strong Families Safe Kids: Next Steps Action Plan 2021-2023*, the implementation of the recommendations of the Child and Adolescent Mental Health Service Review, reforms to the health system, the introduction of a therapeutic approach to youth justice, the development of a policy framework to support under 16 unaccompanied homeless children and the impending Child and Youth Wellbeing Strategy to improve the wellbeing of Tasmanian children and young people.

The Panel notes the significant opportunity to integrate these various reform initiatives with a view to ensuring that children, young people and families, particularly those with highly complex needs, are able to access assessments and effective therapeutic supports as early as possible in their OoHC journey. In other jurisdictions, this approach is known as therapeutic foster care.

In particular, the implementation of the Child and Adolescent Mental Health Service Review reforms will contribute significantly to enabling greater therapeutic supports for children and young people with highly complex needs and the Panel agrees these reforms should be expressly prioritised.

Collaboration and coordination

The Panel recognises that a much higher degree of collaboration and coordination across agencies is required to provide better outcomes for children and young people with complex needs. The interrelationships between Youth Justice, the Child Safety Service, the Department of Health and the Department of Education should be taken advantage of to achieve better outcomes for highly vulnerable children and young people. The Panel agrees that these agencies should work in partnership with the Tasmanian Aboriginal community and other key non-government stakeholders, utilising the common language of the Tasmanian Child and Youth Wellbeing Framework, to make decisions in relation to this cohort of children and young people.

In particular, the Panel notes the underestimated role of the education system in influencing the life trajectories of children and young people with highly complex needs. In doing so, it also identifies early disengagement from education as a common theme amongst young MCID residents. The MCID educational program, in particular, is a key positive element of the program, including success in re-engagement with learning. The Panel agrees that a new and different focus on education is required, which supports highly vulnerable children and young people in Tasmania, which particularly promotes early intervention.

The Panel shares a strong view that the accountabilities for the outcomes of children and young people should be shared across government agencies and that legislative mechanisms should be created to embed such an approach.

The importance of local services

The Panel acknowledges that for some young people, being placed at MCID, so far away from their home and communities, and in perceived isolation, can have a positive impact while they are there. However, the challenge inherent in this arrangement is that the young people must eventually return to Tasmania, and can then find it difficult to transfer any skills they have learnt at MCID to the place where they need to apply them the most – their community.

The Panel also notes that transitions for young people from MCID back to Tasmania have not always been smooth. There are multiple reasons for this, including, in some cases, a lack of early transition planning and, in the case of Aboriginal young people, a lack of engagement with Aboriginal community regarding placement options, planning and decision making.

For some young people, considerations as to whether or not they are considered 'ready' to leave MCID have influenced transition timing decision. This concept of 'readiness' may have at times detracted from a focus on strengthening or rebuilding familial and community connections to support a successful transition. The Panel notes this may have been influenced by the nature of the care arrangement and the children and young people's attachment to their primary caregivers at MCID. In addition, the Panel notes that in the past, external pressures, primarily driven by the media, have resulted in young people coming back to Tasmania sooner than planned and without appropriate transition planning and that this has had a negative impact for these young people.

The Panel agrees that considerable effort should be placed on developing local placement options in Tasmania to overcome the issues identified above. In addition, the Panel agrees that once local placements are available, that the Department of Communities Tasmania transitions away from utilising MCID.

Family and kin connections

The Panel notes the difficulties in maintaining family and kin connection between young people residing at MCID and their families in Tasmania due to distance. These difficulties have been complicated further by the COVID-19 Pandemic where interstate travel could not occur and, due to the fast-changing nature of the Pandemic, there still remains uncertainty with border restrictions between jurisdictions on when travel can occur.

Maintaining, where possible, sustainable connections with family and kin is identified as a primary influencer of stability in an OoHC placement. The Panel notes the need for a greater focus on finding and connecting children and young people with their family and kin earlier in their OoHC journey to improve outcomes across the system, particularly for children and young people with highly complex needs. Likewise, the Panel stresses the power of relationship stability for children and young people, generally as an influencer of placement stability and wellbeing and notes that more could be done in the Tasmanian OoHC system to prioritise the importance of relationships to promote placement stability.

A sustainable placement architecture

The importance of developing a sustainable placement architecture in Tasmania, including the establishment of culturally based programs to improve outcomes for Aboriginal children and young people, is highlighted by the Panel. The Panel particularly notes the benefits of ensuring that such programs are based around a therapeutic model of care and agreed essential therapeutic elements (e.g. [Centre For Excellence in Therapeutic Care - Practice Guide Essential Elements of Therapeutic Residential Care](#)). The Panel strongly urges essential therapeutic elements be adapted to a Tasmanian context with a specific, additional focus on connection to culture and country. The Panel also discussed the importance of incorporating the positive elements of the MCID program, listed previously, into any new programs. The Panel agrees that any such programs should be available for all children and young people in OoHC and consideration should be given to wider availability in alignment with the Tasmanian Government's commitment to a therapeutic approach to youth justice and the emerging policy framework to support unaccompanied homeless children.

The Panel stresses that establishing a new standalone residential service in Tasmania would not alter the system sufficiently to improve outcomes for children and young people with highly complex needs. It is the Panel's view that a new approach to a sustainable architecture of placement options, which embeds agreed essential therapeutic elements and the benefits identified in the MCID program, together with a therapeutic approach to foster care, would reduce the likelihood that a child or young person's complex needs would remain unmet within the Tasmanian OoHC system. Furthermore, additional placement options and new programs that support cultural connection and the concept of being 'On Country' should be introduced to enhance the current OoHC system offerings.

Acknowledgement of culture and country

The Panel strongly notes that the location of MCID creates a barrier for young people in developing cultural connection to where they come from and this is particularly the case for Tasmanian Aboriginal children and young people.

The Panel was able to explore and navigate the meaning of 'On Country' and what it means in the context of the Tasmanian OoHC system. The Panel adopts the view that, whilst the term 'On Country' is inclusive of the land upon which people stand, the meaning is much broader. 'On Country' encompasses feelings associated with identity, sense of self and wellbeing. It is essential that programs developed in the Tasmanian context incorporate opportunities to establish the feeling of being 'On Country' and that those who engage in programs have an opportunity to improve their wellbeing and to form cultural connections. The Panel acknowledges the benefits of this approach for all children and young people, and particularly for Aboriginal children and young people.

Supporting self-determination through genuine partnerships with Tasmanian Aboriginal community controlled organisations

The over-representation of Aboriginal children and young people in OoHC in Tasmania was a primary consideration of the Panel, particularly given the utilisation of the MCID program for some Tasmanian Aboriginal young people. The Panel took into consideration the need to promote and support work that is progressing through the Tasmanian Government's commitment to the National Closing the Gap Agreement, including a commitment to self-determination.

The Panel notes that building the capacity of Tasmanian Aboriginal community controlled organisations to provide OoHC is a significant opportunity in the Tasmanian system, which would support greater self-determination and decision making. Additionally, the Panel notes that opportunities to enable a much greater role for Aboriginal kin and community in decision making for all Aboriginal children and young people exist. At the same time, the Panel also notes the existence of some legislative barriers to this involvement.

Length of stay in therapeutic residential OoHC placements

The length of stay at MCID for Tasmanian young people varies from person to person, with some residents spending only a very brief period of time within the program. However, for some of the young people who have or who are residing at MCID, their time can be considered a long-term placement. It is the Panel's view that for any therapeutic residential program, a length of time should not be stipulated but instead matched to the child or young person's individual needs. It is the Panel's strong view, however, that longer-term residential programs, including those in remote or isolated locations, must carefully weigh up any potential benefits for the young person against the risks of dislocation from family, community and cultural connection. Furthermore, any program must have a strong focus on how young people can take any gains made in the program with them as they transition back into their community. The Panel acknowledges that evidence to support longer-term placements in isolated programs as a means to successful transition to foster care or reunification is very limited.

Avoiding stigma

The stigmatisation of children and young people in any program designed to cater for their complex needs is of great and ongoing concern to the Panel. The Panel wishes to remind the community that we must all take responsibility for the consequences that negative discourse can have on young people who are attempting to recover from their trauma and at some point successfully reintegrate back into the community. This consideration will be particularly important

as therapeutic programs are established in Tasmania and recommendations have been included which are aimed to reduce this risk.

RECOMMENDATIONS

Recommendation 1: Develop a whole-of-government approach to promote and drive systemic change

The public health reform approach to child safety and wellbeing in Tasmania is already foundational to Tasmanian Government policies and practices. Alongside this is the Tasmanian Government's commitment to the National Closing the Gap Agreement. In building on these already established foundations and in alignment with the *Strong Families Safe Kids: Next Steps Action Plan 2021-2023*, the Panel recommends the Tasmanian Government undertake the following:

- 1.1. Implement a whole-of-government approach to investment and reform across the service system, encompassing effective collaboration and common language and practice across all services and support systems for responding to the complex needs of children, young people and families who have been identified as under-resourced and vulnerable to poor outcomes. This will require the establishment and/or capitalisation of cross-sectoral partnerships and decision making wherever possible to maximise shared responsibilities amongst providers and communities.
- 1.2. Lead a cross-partisan commitment to invest in the first 1000 days of children's lives and support vulnerable children and families, increase universal support services for parents and fund a community wide awareness raising campaign.
- 1.3. Review legislation influencing the safety and wellbeing of children and young people to ensure shared accountabilities and responsibility.
- 1.4. Develop a more integrated system response across the whole-of-government and non-government sectors in responding to children and young people who have complex needs as these children and young people most often require tailored responses across multiple service systems. The focus must be on ensuring timely access to physical and mental health services for this vulnerable cohort, with an improved emphasis on the overall physical and mental health of children and young people with complex needs.
- 1.5. Expressly prioritise funding and implementation of recommendations made in the Child and Adolescent Mental Health Review (2020). This will support integrated and collaborative provision of service to this cohort and enable steps to be taken to assess and intervene as early in a child's life as possible.
- 1.6. Ensure all service providers working with children, young people and their families are using the Child and Youth Wellbeing Framework to assist in identifying areas where a highly vulnerable child may need additional assistance as early as possible in the child's life, or as early as possible when problems first emerge for the family. This will enable the alignment of Physical and Mental Health Assessments with the six domains of wellbeing in the Child and Youth Wellbeing Framework.
- 1.7. Support the Tasmanian education system to develop an aligned overarching framework that identifies and supports education provision and emotional wellbeing interventions for all children and young people with increasingly more complex and severe presentations.

Recommendation 2: Develop the Tasmanian Out of Home Care system to improve its efficacy and increase and enhance placement options for children and young people

The Tasmanian OoHC system should be developed to achieve a systemic shift towards a therapeutic sustainable architecture of placement options for young people. This therapeutic sustainable architecture should be needs based, culturally strong and connected and adopt the essential therapeutic elements ([Centre For Excellence in Therapeutic Care - Practice Guide Essential Elements of Therapeutic Residential Care](#)). This is the evidence base that has underpinned residential care reforms in three jurisdictions (VIC, NSW and NT), and it is recommended that these should be adapted for Tasmanian use. All OoHC policies and practices should prioritise relationships as a primary influencer of stability and promote relationship continuity.

Investments in therapeutic supports within placements, particularly in early childhood, are essential in ensuring sustainability of placements and establishing a framework that supports a child's journey through the OoHC continuum. Furthermore, active steps should be taken to seek and prioritise early identification of key informal relationships, with these relationships encouraged and fostered, to ensure support in sustaining placement options. To these ends, the Panel recommends that the Tasmanian Government undertake the following:

2.1 Develop the OoHC system to incorporate:

- 2.1.1 family finding at the point a child or young person enters care in order to enhance the care planning process, and prioritise the development of relationships as a primary influencer of placement stability
 - 2.1.2 therapeutic services that support and follow every child and young person in statutory care; and
 - 2.1.3 a protocol between the Department of Communities Tasmania and the Department of Education prescribing that every child and young person residing in OoHC (particularly residential care) has an education needs assessment that is trauma informed and informs that child/young person's education plan.
- 2.2 Adopt a therapeutic model of family-based care where children and young people, and carers receive specific supports and interventions to support placement stability.
- 2.3 Procure the delivery of new programs that incorporate the positive elements of MCID and the essential evidence-based principles identified in the [Centre For Excellence in Therapeutic Care - Practice Guide Essential Elements of Therapeutic Residential Care](#) to allow individuals to build their capacity or pathways. The programs should also incorporate the following:
- 2.3.1 enable cultural connection, including the concept of being 'On Country';
 - 2.3.2 include respite and mentoring;
 - 2.3.3 have the capacity to have short to medium term residential placement options embedded (as required);
 - 2.3.4 embed flexible education models linked to the Australian Curriculum and vocational pathways for young people who are not best suited by re-engagement in mainstream education settings; and
 - 2.3.5 be delivered by a number of entities and in a range of locations in order to avoid the stigmatisation of children and young people who access the program, as well as their families and communities and the organisation and the people who deliver them.
- 2.4 Embed the Aboriginal and Torres Strait Islander Child Placement Principle (ATSCPP) across Government ensuring:

- 2.4.1 all new care plans for Aboriginal children and young people are developed in consultation with a person from the kinship group, Aboriginal community or organisation representing the Aboriginal people nominated by the young person and/or their family;
 - 2.4.2 no new placements, or placement transitions should be initiated for Aboriginal children or young people without the involvement of their nominated representative; and
 - 2.4.3 statutory obligation for the ATSCPP and 'recognised body' are implemented.
- 2.5 Effective immediately for children and young people identifying as Aboriginal, the following should not occur without consultation and input with the relevant and identified Aboriginal organisation:
- 2.5.1 further placements to MCID;
 - 2.5.2 any other residential care placement; and
 - 2.5.3 any other significant decisions about a child or young person's care.
- 2.6 Invest in genuine partnerships with the Aboriginal community to build capacity towards Aboriginal Community Controlled Organisations provision of OoHC and to further support self-determination.

Recommendation 3: Transition away from the utilisation of MCID and commit to robust, inclusive and collaborative decision making in relation to interstate residential placements of young people throughout the transition

While Tasmania transitions away from the use of the MCID program and towards Tasmanian-based programs, there will be a period of time where alternative placement options for young people with significant and complex needs may be required. The Panel would not be supportive of Tasmanian young people being placed in MCID or any other interstate residential program beyond this transition phase, with the exception of placement in specialist rehabilitation programs, if required. With these important considerations at front of mind, the Panel recommends:

- 3.1 In the event of an interstate placement, Children, Youth and Families establish referral governance arrangements for any new referrals to interstate residential placements, including MCID in the interim ensuring they are considered by a panel which includes:
 - the young person and their advocate;
 - the child's family and their advocates;
 - representative from a Tasmanian Aboriginal community (as appropriate);
 - representative from the Australian Childhood Foundation;
 - Child Safety practitioners;
 - Director of Children and Family Services;
 - Statewide Director of Child and Adolescent Mental Health; and
 - Tasmanian Child Advocate.
- 3.2 A plan which embeds cultural and educational needs and strategies is developed for each young person outlining agreed goals for each domain of wellbeing, actions, key people responsible and agreed timeframes for achieving those goals, including;

- 3.2.1 a placement and service plan aligned with agreed case goals including a transition back to Tasmania or to family in the given state within a specified timeframe;
- 3.2.2 arrangements for keeping the young person connected to their community and their family in Tasmania for the duration of their placement at MCID or any other interstate residential program;
- 3.2.3 arrangements for assisting the young person's family/community and services in Tasmania (or relevant state) to be able to best support the young person throughout their transition and after their return home; and
- 3.2.4 provisions for active monitoring overseen by an advisory group and that the Tasmanian Commissioner for Children and Young People be consulted.

Recommendation 4: Adopt a whole-of-government focus on implementation and investment

A whole-of-system approach is needed to ensure the safety and wellbeing of children and young people in Tasmania. It is essential that the needs of children and young people are prioritised and that there is sustained investment in addressing the service needs of this vulnerable cohort. Commitment to implementing these recommendations, as well as a commitment to other reform agendas must occur. Attention must also be given to ensuring adequate staffing and services are available to support these reforms. Bureaucratic processes should not impede the delivery of services and supporting the needs of Tasmania's most vulnerable children, young people and families. Recruitment to support the implementation of these reforms across the whole-of-government must be prioritised and where necessary creative solutions sought. Investing in workforce development is also critical in ensuring the successful recruitment and retention of staff.

The Panel recommends the following:

- 4.1. Establish a cross-sectoral oversight group to monitor the implementation of the above recommendations, including the establishment of feedback loops, evaluation and action-based research running throughout the implementation phase.
- 4.2. Commit to increased and sustained whole-of-government investment to ensure the timely implementation of recommendations.
- 4.3. That Recommendations 2.2, 2.3 and 4.1 are immediately prioritised, noting that an initial \$500,000 has been set aside by the Tasmanian Government to begin the immediate implementation of these recommendations.

CONCLUSION

The information the Panel has been provided with demonstrates the significant impact that both adverse life experiences, early supports for children and families, and early planning and placement decisions have on children and young people and their life journey through the Tasmanian OoHC system. In light of this information, and the intimate knowledge many Panel members have of MCID, the Panel agreed early in their work to make recommendations across the spectrum of the Tasmanian system from universally available prevention services, to early intervention services and care placement options including On Country therapeutic programs in Tasmania.

It is the Panel's view that, once recommendations are implemented and suitable programs established in Tasmania, the State transitions away from placing young people in residential care in another jurisdiction. The Panel acknowledges this may take some time, and recommendations have also been made to support robust and transparent decision making in the interim.

The Panel's recommendations are aimed at bolstering the current major reform initiatives underway across the Tasmanian system, including calling for a much higher degree of collaboration and coordination across agencies to care for our children and young people.

APPENDIX A – GLOSSARY OF TERMS

OUT OF HOME CARE

Out of Home Care (OoHC) is part of the statutory Child Safety Service. A child or young person may be placed in OoHC when they are unable to safely live at home with their primary carer. OoHC is made of many different care types. Including:

KINSHIP CARE

A formal out-of-home care arrangement made through a statutory intervention, such as a child protection intervention or court order, where a child or young person is placed with a family member (kin) or a member of the child or young person's community or social network (kith).

Where possible, when a child or young person enters the statutory OoHC system, efforts are made to identify a family or community member who is able to provide care. Assessments of these households are undertaken and support is provided to these carers through the OoHC teams within the Child Safety Service. A child or young person may also reside in a kith or kin placement without statutory intervention. This is referred to as an informal kinship placement.

INFORMAL KINSHIP CARE

The informal placement of a child or young person with relatives or friends, without statutory intervention such as a court order. The child's parents are still the legal guardians, so they still have parental responsibility.

FOSTER CARE

Foster Care is provided through the OoHC sector within Children, Youth and Families. Foster care is also provided by non-government organisations who are contracted to provide foster care for children and young people in the statutory system. Where possible, a child or young person is matched with the carer best placed to meet their needs. Children and young people residing in foster care reside with the carer within the carer's home environment.

SPECIAL PACKAGED CARE

Special packaged care is generally the most intensive OoHC type and provides specific supports to children and young people that are not available through other care options. Children and young people residing in special packaged care placements often have identified high needs that are not able to be met in the care of family or foster care. Special packaged care placements are generally one-on-one placements, with care provided on a rostered basis. A special packaged care placement is not considered a long-term option with the overall goal to implement supports for the child or young person to be restored to their family or to re-enter family based or kinship care. SPC is provided on a contract basis by non-government organisations.

THERAPEUTIC RESIDENTIAL CARE

Therapeutic residential care is a form of OoHC for young people who are unable to be placed safely in kin or family-based care because they have increased needs and emerging anti-social behaviours, amongst other traits. Care is provided on a rostered basis. As with special packaged care, the overall goal is to have a step-down program for these young people to return to their family of origin or family-based care. In some situations, therapeutic residential care prepares a young person in their transition to independent living.

Therapeutic Residential Care is delivered on a contract basis by CatholicCare in Tasmania. Children and young people living in therapeutic residential care are assessed for their suitability for the program by professionals from the Child Safety Service and CatholicCare.

FAMILY OF ORIGIN

Family of origin refers to the significant caregivers and siblings that a person grows up with, or the first family group a child belongs to, which is often, but not always, their biological family or an adoptive family.

SELF-SELECTED PLACEMENT

Self-selected placement is when a child or young person living in OoHC decides where they would like to live. This placement is often not approved or endorsed by the Department of Communities Tasmania, or it is yet to be approved because the child or young person has relocated there of their own choice ahead of formal approval process.

CHILD

Child refers to a person aged 0 – 10 years.

YOUNG PERSON

Young person refers to a person aged 11 – 18 years.

RESTORATION

Restoration is the process of reuniting a child who is in an OoHC placement with their family of origin. It is a major priority of child safety legislation and policy throughout a child's OoHC placement. The Child Safety Service will work with parents from as soon as practicable after the child enters care to understand and respond to the needs and issues which meant that it wasn't safe enough for the child to remain in their care.

EARLY INTERVENTION (AND PREVENTION)

Early intervention and prevention focus on supports to prevent problems occurring in the first place and supports to quickly respond to problems if or when they do occur. The supports should be widely available to all, with specific intensive targeted interventions available as required.

WHOLE-OF-GOVERNMENT APPROACH

The purpose of a whole-of-government approach is to create a culture that facilitates a shared vision between state and local governments, non-government organisations, service providers, and other relevant stakeholders. This allows all stakeholders to operate as one system rather than a collection of separate components, a siloed approach. It establishes a unified effort and allows collaboration across and between departments and organisations to allow for a system that is holistic, synergistic, and coordinated in the delivery of its services.

ABORIGINAL AND TORRES STRAIT ISLANDER CHILD PLACEMENT PRINCIPLE

The Aboriginal and Torres Strait Islander Child Placement Principle recognises the importance of connections to family, community, culture and country in child and family welfare legislation, policy and practice and asserts that self-determination communities are central to support and maintain those connections.

ABORIGINAL COMMUNITY CONTROLLED ORGANISATIONS

An Aboriginal Community Controlled Organisation (ACCO) is an incorporated Aboriginal organisation, initiated, based in and governed by, the local Aboriginal community to deliver holistic and culturally appropriate services to the Aboriginal community that controls it.

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