



CatholicCare NT

Further information:

Jayne Lloyd
Director
CatholicCare NT

Mobile: 0416167728
Phone: 08 89442033

Brief response to Child Protection Inquiry

Response System

- Frustration with making notifications, professional staff will make a notification and they often feel as though they are not taken seriously, there is no follow-up with the worker of the family. I am not clear if this is a systems issue, resource issue or that staff do not have the capacity or skills to assess cases.
- A centralised intake system has limitations as it becomes a risk aversion process rather than a people based way of approaching very complex family problems. By relying on their checklists and rules they may miss the obvious, and are not able to accommodate local nuances and situations.
- Frustration with the capacity of Child Protection to consistently provide adequate follow up and support to families that have come to their attention.
- Staff - what is the quality of clinical supervision, what are the peer feedback processes, how targeted is their training? These are workers that are working with incredibly complex and vulnerable families. We need to feel confident and they need to feel confident that this work is valued and that they are doing it properly. If staff are not feeling supported or equipped to do their jobs it results in work practices that are less open, more reliant on tick boxes and legislation, and more cautious rather than work practices that are collaborative, reflective and open to change.
- Child protection cannot continue to work like a bureaucratized Centrelink operation, with call centres and intake teams if they are to be effective. Services need to be locally based, community and outreach driven. Workers need to know their community, their streets and be present and available to people.

Early Intervention Services

- Significant gap in early intervention services, especially for young parents, vulnerable families and remote families.
- Appears to be limited knowledge across both broader NT and Australian government departments about services that are being provided. This results in some communities being over serviced and some receiving no services.
- There is great capacity leverage across existing infrastructure such as safe houses to create more parenting/family centres.

- Services need to be driven by local people and need to be developed on the ground (e.g. not through external consultations, fly in bureaucrats), services need to be flexible and universally available.
- There needs to be greater coordination between AOD, Mental health, SARC and education services and child protection.

Indigenous Services

- There needs to be a clear plan and process to engage with communities about the service delivery of child protection services to communities.
- Legislation needs to allow for Child Protection services to be outsourced to local services that can have a permanent presence and has the authority to respond to child protection issues.
- This will also build the capacity of local communities to develop appropriate out of home care options.
- Strategies to Indigenous communities need to be long term, highly supported and use a partnership approach. A variety of options will allow for success and learning and will not put pressure on a particular model or approach.
- All child protection staff need to have appropriate and on-going training to ensure they are able to provide a service that is culturally competent and robust and allows for the Aboriginal Child placement principal to be used appropriately.
- There are some good commonwealth models e.g. money business, No More – Men’s programs and PHaMs (mental health) programs which are showing signs of successfully developing community based programs at a local level that can be rolled out across communities using different providers.
- Indigenous Children in out of home care who are currently in long term care with non – Indigenous carers or Indigenous carers from a different Indigenous tribe need to be supported to develop appropriate linkages with the child’s Indigenous family/country. This could include ideas such as sending a weekend on the child community with the carers family or shared experiences with both families. There are ways of building connections that can be respectful to the child, the carers and the child’s family. It seems current practice swings between extremes of doing nothing or inappropriate and traumatic reintegration.

Relationships with NGO's

- Relationship with the NGO sector has been difficult on both an operational and higher level.
- Operationally there seems to be a discord between the reform agenda, the objectives of children's safety, good practice and what actually happens on the ground. At a policy level some good decisions can be made but this does not filter down to any observable operational changes.
- There is a chronic lack of communication and consultation with the NGO sector and the Department.
- The complexity of the Department often makes it difficult to understand what direct service work and what policy work is being carried out by the Department. Internal AOD, domestic violence, sexual assault, child protection and mental health services are integrated with each other let alone the community sector.
- Scepticism – given the numbers of reports/reviews (eg: The little children are sacred, Bath Report, Coronial Inquiries) there is scant evidence of the reform agenda actually making a difference in the lives of vulnerable families. The Government will need to demonstrate some kind commitment to a real dialogue with the NGO sector and will need to be prepared to relinquish some of its current roles and practices if the NGO sector is to have any confidence in a future that is different.