



SPARK AND CANNON

TRANSCRIPT OF PROCEEDINGS

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THE HONOURABLE TIMOTHY FRANCIS CARMODY SC, Commissioner

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IN THE MATTER OF THE COMMISSIONS INQUIRY ACT 1950
COMMISSIONS OF INQUIRY ORDER (No. 1) 2012
QUEENSLAND CHILD PROTECTION COMMISSION OF INQUIRY

BRISBANE

..DATE 7/02/2013

Continued from 6/02/13

DAY 43

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

THE COMMISSION COMMENCED AT 10.07 AM

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COMMISSIONER: Good morning, everyone.

MR HADDRICK: Good morning, Mr Commissioner.

COMMISSIONER: Before we start this morning, I reviewed the transcript of the evidence given by a residential carer who appeared as a witness on 4 February and she gave some evidence about Ben. I've taken the view that because of the intimately personal observations she made about him, there'd be a risk in publishing what she said in the event that in particular they came to his notice, taking into account my assessment of his volatility, sensitivities and behavioural capacities.

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So because of that I'm going to order the suppression of Ms Burke-Kennedy's evidence and statement to reduce the risk that they might pose. All right, anyone have any submissions to make about that? Right, I make the order accordingly. Yes, thanks.

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MR HADDRICK: Thank you, Mr Commissioner. I call Ms Marissa Sherry.

SHERRY, MARISSA sworn:

ASSOCIATE: For recording purposes please state your full name and your occupation?---Marissa Lee Joanne Sherry; service manager.

COMMISSIONER: Good morning, Ms Sherry. Welcome?
---Morning.

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MR HADDRICK: Ms Sherry, my name is Ryan Haddrick. I'm counsel assisting the inquiry and I'm the first person who'll ask you some questions today about your role and house E. Just as my standard practice, please don't identify the street address of the house or the correct names of any of the residents in the house. Can I get you to have a look at that document that the Commissioner's associate is handing to you now. Do you recognise that document?---Yes, I do.

What is that document?---It's the statement that I made to Jeff Bell.

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And the signature at the bottom of each page of that document, whose signature is that?---That's my signature.

And does that signature indicate that the contents of the statement are true and correct?---Yes, that's correct.

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And are the opinions expressed in that document your opinions that you hold?---Yes, that's correct. 1

Thank you. I tender that statement, Mr Commissioner.

COMMISSIONER: Can it be published?

MR HADDRICK: Yes, that can be published in full, Mr Commissioner.

COMMISSIONER: I'll allocate number 162 to Ms Sherry's statement as its exhibit number and direct its publication. 10

ADMITTED AND MARKED: "EXHIBIT 162"

MR HADDRICK: Now, what I propose to do is take you through aspects of your statement and highlight particular features that the commission would be most interested to explore in greater detail and also get you to generally explain how the house is set up. Now, house E; how long has house E been a residential house?---Approximately eight years.

And it's located in Mount Isa, isn't it?---That's correct. 20

Are you aware of any other residential homes in Mount Isa? ---Yes, I'm aware of another residential.

How many are there?---One other than ours.

Now, your house particularly responds to the needs of the Aboriginal and Torres Strait Islander community, doesn't it?---Yes.

Does that other house do that as well?---I'm unsure if it's specific, but responds to the needs of children in Mount Isa. 30

Is there any particular involvement between the two houses at all? For instance, do the managers to your knowledge talk to each other?---Absolutely, yes.

Okay. And you're the service manager at this house, so you are effectively the head of this house?---Of the service that operates in Mount Isa. So there's a team leader that manages the residential also.

On a daily basis?---Yes, that's correct. 40

Now, the house is run by [REDACTED], isn't it? ---Yes, that's right.

And that, to your knowledge, is the same organisation that runs an earlier house that this commission has looked at? ---That's correct.

And we heard from Mr Wall the other day - I think his name was, yes, Mr Wall - in respect of a house that he runs?
---That's correct.

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And you work for the same organisation?---That's right.

How long have you worked for that organisation for?
---Nine years.

Always in the role as service manager?---No, I've had a number of positions including youth worker in a residential, case manager in a residential, team leader in a residential, and my current position.

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So you've sort of climbed through the ranks from an entry level carer to the head honcho, if I can put it that way?
---Yes, that's correct.

Very good. Now, Churches of Christ, has this been the only house that you've been associated with?---No, I've also been associated with another service in Brisbane.

So another residential house?---Yes.

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Was that particularly directed towards Aboriginal and Torres Strait Islander kids or was it - - - ?---No, it was broader.

Sorry?---It was all children in that region that were in care.

Same operator, Churches of Christ?---Yes, that's correct.

So you have experience across different locations for the one organisation?---That's correct.

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Okay. Now, can I get you to have a look at some photos which you've kindly supplied to the commission. Now, what are we looking at there?---We're looking at the residential that I - the service I work for operates in Mount Isa.

Now, that has how many bedrooms?---Six bedrooms.

And are they the windows along that side of the building?
---That's correct.

Has the building looked like that all of the last eight years, or has it been added to or subtracted from?
---No, that's how it's been.

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Was it purpose built as a residential accommodation?---No, it was purchased by Churches of Christ Care.

It was purchased and what - - - ?---As it was, yes. So it was already - - -

So it's served no other purpose prior to finding itself at that space?---Other than a normal residential house.

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Okay. So it was actually a residential dwelling - - -?
---Yes.

- - - that was acquired by Churches of Christ - - -?
---That's correct.

- - - and then opened up as a residential home?---That's correct.

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Okay. And this is, I assume, the reverse shot?---That's correct.

And that's the public roadway out there?---Yes.

How much sort of property is the house on?---I'm not aware of the actual size of the block, but it's a normal house block.

Well, we can sort of see a driveway there?---So that's the driveway, and behind the residential there's a yard where there's a shed and a recreation room for young people. So that's the shed that you see at the back with the carport.

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So that's that thing there, is it?---Yes, that's right. The shed sits on the back of the property.

Okay. So behind that shed is the boundary of the property? ---That's correct.

Now, obviously we can see a four-wheel drive vehicle one side of the shed there. What's on the left-hand side of the shed?---So there's the front area of that shed, directly behind those doors is some storage space for camping equipment, and then behind that is another room, which is a recreation room that our young people use.

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Now, we don't unfortunately have any photos of the bedrooms or the internal arrangements of the house. How many bedrooms in total are there in the house, including ones for carers?---Six bedrooms. 1

Okay. Is there only one bedroom for a carer?---There's two bedrooms for carers.

So there's four bedrooms for the residents and two for the carers?---That's correct.

How many staff do you have on at any one point in time? 10
---Two staff are generally on around the clock.

What are the qualifications of those staff generally?---It ranges from certificate in youth work to bachelor level qualifications in psychology, sociology and human service type.

You've told us you're the service manager for Churches of Christ programs there in Mount Isa but you're not the team leader for the particular house. What are the other services that Churches of Christ provides in the Mount Isa area. So we have a fostering program, an intensive fostering program, and semi-independent living program. 20

What role do you have to play in fostering? You say you have an intensive fostering program. What is your function, your organisation's function, in that activity? ---My function is to oversee the running and operation of each of those programs on a fostering level and intensive fostering. We recruit, train and support foster carers who provide in-home family-based care for children.

So how do young people who are subject to a protection order come to your organisation's attention?---They're referred to us by the Department of Child Safety. 30

So the department calls you up and says, "We've got a young person who needs some form of care?---They send a referral, which is a written document.

The referral, does that describe the sort of care that the young person needs to receive?---Generally speaking, yes.

Does the department make that decision or do you have role to play in delineating what sort of care the child requires?---We have a matching process where we, I guess, review the information that is provided to us by the department and determine what carers we have available, so what placements we have available that's best going to suit the needs of the young people - or the young person, sorry. 40

So when the department decides whether the child will be placed in residential care or in foster care on indeed in kinship care, perhaps, you play a role in assisting the

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department coming to that decision?---Yes. We provide placement options to the department. The department also provide us an assessment around the young person's behaviours and needs. There's a range of levels, so moderate, which is generally for family-based care. High to complex assessment is for intensive fostering and high to complex is also for residential placements.

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What I'm trying to get my head around is whether in deciding whether a young person should be placed in residential care or in foster care, whether your organisation or other organisations have a role to play, in terms of what is the scope of your role? Are you simply saying, "We've got a place for that child in this particular type of placement," or do you have some sort of role to play in deciding what is the best type of placement for that child?---That assessment is initially conducted by the Department of Child Safety.

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The latter assessment?---Yes.

So they're effectively telling you that the child needs a residential place and then you have to advise whether you have one open or not?---That's correct.

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If you don't have one of those open is there some chance that the child will go into another program?---Yes, I imagine so. If we're saying to the department that we don't have a placement available we generally have no further dealings with that particular case.

You've identified in your statement at paragraph 1 and also telling me just a few moments ago you have an intensive fostering program, but you also say you have fostering - or you say, "Fostering and intensive fostering." What's the difference?---So fostering is for young people who are assessed by the department as having moderate needs, and that can be around their behaviours, medical needs, their support needs, whereas intensive fostering is a placement that a young person may need additional support. So that can be respite, or a carer may also need additional support. So that can be about regular respite, access to therapeutic services, youth worker, respite for the carer so they have some down time for the carer and also the young person has an opportunity to develop some relationships with somebody outside of the home. There's also - we play an active role in the case management of that young person.

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You identify that for ordinary fostering, if I can put it that way, that was for kids with moderate needs?---That's correct.

Intensive fostering, is that for moderate needs or high needs?---So we're funded for four high to complex placements and two extreme placements.

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So there are complex and extreme needs kids?---That's correct. 1

Who are placed in intensive fostering types of care options?---That's correct, with additional supports.

Wrapped around the provision of that foster care? ---Absolutely.

Now, in terms of you receiving a referral from the department that they have a child who needs a placement, what role do you play in sourcing the foster carer?---So we have - our foster carers have what's called a foster care agreement and they identify the behaviours that they believe that they could manage and assist in supporting a child or a young person in their placement. 10

But that's the step in the process whereby the foster carer or the potential foster carer advises of their ability to supply foster care. I want to consider the step prior to that. How do they come to your attention in the first place? So for you to say, "Here's a foster carer who can take care of child X," how does that foster carer come to your attention?---So how they become a foster carer. Is that what you're asking? 20

Well, how you know that they are a foster carer?---They go through an assessment process which includes an assessment that's conducted by a person who specifically conducts interviews with the person to determine their suitability.

Who takes them through that assessment process?---Certainly our agency does.

Okay, that's what I want to try and get my mind around, is how much your organisation plays a role in sourcing, preparing and setting up foster care arrangements as part of the suite of care options that your organisation provides. So say for instance I wanted to be a foster carer. How do I come to the attention of your agency, or how does your agency identify me as a potential person to assist in the provision of foster care?---So you would make some contact with either the Department of Child Safety or an agency like ours. We would meet with you, explain to you initially what fostering is about and some of the expectations of you as a foster carer, which is called a pre-interview. We then would ask you to participate in some training, so quality care training, which is four different modules and that focuses on the requirements of foster carers, some of the behaviours that carers may experience, working with the department and certainly things like statement of standards, that kind of stuff. 30 40

How many children do you have on the books, so to speak, who are in foster care in Mount Isa currently?---So just fostering, we've got 97 currently placed.

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How many in intensive fostering?---Four currently placed. 1

So effectively you've got 100 all-up?---Yes.

101?---101.

Your agency is responsible for the provision of the services and managing those relationships between the foster carers and the subject child for the foster care relationship?---That's correct.

Are you aware of any other organisations in Mount Isa providing those services?--Not fostering services, no. 10

Now, of the 101 in the two categories what is the make-up between indigenous and non-indigenous young kids?
---100 per cent are indigenous.

So all 101 - - -?---That's correct.

- - - children who are in foster care or intensive foster care in Mount Isa are indigenous?---That's correct.

How long do they remain in foster care for?---It ranges from overnight placements to - we have some young people who have been in foster care their entire life. One particular young person entered care when he was first born and he's currently 15 and remains with a foster carer. 20

You expect him to finish the remaining years of his minority - his or her minority, as a foster child?---Yes, that's correct.

Does your organisation provide any sort of - I assume it's a male child, that one you're referring to?---Yes, that's correct. 30

Does your organisation provide any form of transition services to assist children who are coming out of a foster relationship, or completing the formal aspects of a foster relationship, to transition them into being more self-independent young people?---We certainly assist that process but for fostering a young person placed in a fostering service, that's led by the Department of Child Safety, but we provide support to the carer.

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How does that connect with the semi-independent living, SILS?---So they're separate programs. 1

Yes?---So we've got two young people, two placements, in our semi-independent living program. During my time in Mount Isa I haven't seen a young person transition from fostering to the semi-independent program. I have, however, seen it from our residential to the semi-independent living program.

So predominantly semi-independent living is a desirable transition for a young person who's currently in full-time residential care?---Absolutely. 10

How many young people would go through semi-independent living over, say, a 12-month period?---So in the last 12-month period we've seen four young people.

What services does your organisation provide or facilitate that constitutes semi-independent living?---So the young person lives - so they live by themselves in a unit in the community.

How do they get that unit?---We, as an agency, lease that property and the young person contributes towards that rent so it's - the idea is that we lease the property and we place them in our program. 20

I presume you lease it from when the young person's 16 or 17 years or age or whatever is the correct age for when an assessment is taken that they can become semi-independent? ---For Mount Isa services we have a permanent lease in the private rental market because of rental - I guess, rental prices in Mount Isa. So rental properties are very hard to secure so we have maintained our lease for the properties that we have for five years. 30

So you have two separate units in Mount Isa?---Yes.

Which are constantly available for semi-independent living? ---That's right.

Are they constantly full, as in they constantly have an occupant in them?---They have been, excluding a three-month period last year where we needed to do some repairs to the property, but they have been for the last 18 months.

When you set up a semi-independent arrangement for a young person, is it always just that one young person in the unit or can they be coupled together? So there are two young lads who get along okay. Can they both be put semi-independently in a unit if the unit has two bedrooms? ---Absolutely, yes. 40

And does that occur?---I hasn't occurred.

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Sorry, I didn't hear your answer then?---It hasn't occurred.

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Has not occurred?---And that's generally because we've had a young male and a young female so we haven't co-tenanted, but there's no reason that it can't - if we had two young men to that they can't co-tenant.

Just going back to the 101 young kids who are in foster care, what is the gender split?---From my last review the split would be 60 per cent female, 40 per cent male.

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Do you put that down to any particular factor at all?---I haven't, no.

Now, returning to the current house, house E, we know that there are four bedrooms there. It's a male house, all-male house?---That's correct.

Have you ever had females in the house?---No.

Has it always been a male house since it was established as a residential care facility?---My understanding is, yes.

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Now, in paragraph 6 of your statement you refer to there being some discussion around a female residential. When did that discussion occur and what came of that discussion?---I wasn't a part of those discussions. It was between my operations manager and the regional director at the time, but my understanding is that the discussions were initiated by us and the regional director at the time told my operations manager that there was no funding available for that residential.

I probably should have started by asking: what's the need for a female residential currently in Mount Isa?---I'm aware of a number of young women who are currently placed in transitional placement packages with providers other than Churches of Christ who, I guess, have come in and out of those placements over the last 12 months that are unable to be placed in other options.

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When you say "a number", what sort of number are we talking about?---So there's four I can think of.

So there are four young females who you think would be better placed or should be placed in residential care rather than transitional place?---Absolutely.

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Would it be cheaper or more expensive to place these young people in a residential placement?---Than a TP placement?

Yes?---It would be cheaper in a residential.

So to open up a second facility somewhere in Mount Isa that responded to or addressed the needs of young females would be a cheaper option to deliver than the current transitional placements?---That's correct. 1

How long has there been a need for a female house?---I would say that it's been relatively consistent over the four and a half years that I've been in Mount Isa. So there's definitely periods of time that the four young people, all young women that I'm thinking about, have entered detention for periods of time and come out and were seen to - there's trends where the young people tend to self-place so they're placing with family or friends that aren't approved by the Department of Child Safety or they're placed in TP placements. So I would say fairly consistently over the last four and a half years that I'm aware of. 10

Now, you told us that some time about 12 months ago or greater than that the issue of a female house was raised with departmental officials?---Mm'hm.

Was it raised at an earlier stage at all? How long ago has your organisation said, "Hey, we need a female house here"? ---I guess it's been a constant discussion that we have with staff from the placement services unit around the need for placements and the placement pressures that are experienced in North Queensland. 20

What do you mean by "constant discussion"?---So it's been, I guess, over - again in the four and a half years that I've been in Mount Isa it's been something that's been identified across the Child Safety Service Centre so with managers, team leaders and definitely PSU staff.

So it's a placement services unit?---Yes, that's right. So when we aren't able to place in a fostering placement or in intensive fostering, I guess that's when the need is highlighted regularly. 30

Would it be a fair characterisation to say that over those four and a half years you're of the view that the placement services unit would be aware of a need for a female option in Mount Isa?---Yes, I would.

And has it always been just a question of money?---That's my understanding, yes. 40

I will just take you to aspects of your statement. Do you have a copy of your statement there?---Yes, I do.

We just might have it in front of you. Can I just take you to page 2 of your statement? You talk in paragraph 11 about the neighbours. Now, we have had a look at the picture there and you have told us where the back boundary

is and we can sort of presume where the side boundaries are. What are the dwellings around the house on all sides?---So there's a residential home on one side of the driveway that we saw. The house is actually on a corner block so the side that we can see here - there's a neighbour to that side of the property and no neighbour on the other side - it's a road - and then there's a house at the back of the property.

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Now, in paragraph 11 you said two issues arise between the residential and the neighbours and they have been addressed promptly?---Yes.

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What are those issues?---So one issue was around a young person climbing on the shed of the neighbour and the neighbour raised it with our staff and we addressed it with the young person and took him away from the property so he wasn't accessing - and spoke to him around, you know, that it's not okay to enter other people's properties.

Sorry, you just said "took him away from the property". You mean the property being the neighbour's property, don't you?---And our property. So he went off site with a staff member to discuss what had happened and in that instance he apologised to the neighbour. So we talked to him about the appropriateness of his behaviour - - -

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Conduct, yes?---Yes, and the other was a noise-related issue where the neighbour raised with us that the young people were being quite noisy, and again we addressed that.

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Do you have neighbours coming to you regularly over the - I mean, the number of years that you've been associated with this house, what is the rate of or the regularity of the neighbours or neighbourhood complaining of any issues that arise in respect of the house?---So they're the two instances that I can recall.

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They're the only two incidences?---Yes.

Now, we've had a number of witnesses here this week that have by and large generally told us that in most houses they have - certainly the south east Queensland area - they have a constant concern is interactions with the neighbours. It sounds like your house doesn't have that problem at all?---We haven't experienced it, no.

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What do you put that down to?---I guess we have - the ages of our young people are younger generally than young people placed in resis in the south east corner.

Okay. What are the ages of the four young people at the moment?---They're 11 to 14.

So we've got an 11-year-old, a 14-year-old, a - - -? ---Two 11-year-olds, a 12-year-old and a 14-year-old.

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We've heard evidence also this week that in terms of residential care by and large the age of 12 is the starting point when a young person gets taken into a residential care home. Why do you have two 11-year-olds at your facility?---There were no other placement options for those two young people.

Who makes that exception? Does the department make a decision that residential care is suitable for them and makes that exception?---For these two young people, yes.

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Now, all four of the residents of the home are indigenous? ---That's correct.

What is the turnover rate, if I can put it that way, of young people who live in the home?---We don't have a high - so the average placement for a young person is probably two to three years. We don't have a high turnover of kids in our resi.

Why do they come to your home? What are the reasons why you understand them to be placed in house E?---So they're unable to be placed in fostering placements. So that could be because of their behaviours and they're unable to live with their biological family and kin can't be identified to provide appropriate care for them.

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What do you mean, "kin can't be identified"?---So there's no suitable or appropriate person who can meet their daily care needs.

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In the department's opinion?---Yes.

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Do you ever get told in terms of the referral what were the primary reasons why that child is subject to a protection order?---Generally, no. So we are advised that there's a history of - if there's a history of physical harm or neglect, but we certainly aren't informed of the absolute details.

Wouldn't it be useful for people who have the care, such as employees, of these children on a day-by-day basis to know what the primary reason why the child is subject to protection in the first place is?---The primary reason, yes, but I don't believe we need to know all of the details.

10

What sort of - can you tell us the last time that a young person didn't work out in the house and they needed to leave. Tell us about the last time that occurred?---I can't think of a young person that hasn't - I can't think of a young person that we've ended their placement.

So you've never had to remove permanently a young person from the house?---Not in the residential that I work in now - or that I manage now, no.

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I didn't hear the last answer?---Not in the residential that I work in now.

But you've had experience of that in the past?---Yes.

What do you put that down to, that you haven't had to eject any by - - -?---That our matching process - when we accept the referral of a young person our matching process is thorough.

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That's okay. Now, you identified before that sometimes there are behavioural problems associated with the individual kids in the residential care. What sort of problems are we talking about? Can you describe the types of behaviour that certainly some of the young people come into the house with - - -?---Mm'hm.

- - - as opposed to what they leave with?---So physical aggression, so that can be directed at staff and each other; property damage; chroming.

How often is chroming a feature?---So in the current house that we have at the moment we had a period of eight weeks last year that we saw chroming behaviours.

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By, what, one resident or multiple residents?---By three of the four.

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SHERRY, M. XN

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What do you mean by "chroming behaviours"?---So using solvent-based products to inhale for the purposes of getting high. 1

How often would that occur?---So I guess over the last 12 months we've seen the eight-week period last year. That was around the introduction of the fourth young person to the residential.

So one person came into the house and effectively brought that problem into the house with them?---That's correct. 10

How old was that young person who brought the problem into the house?---He's 11.

How old were the other residents who effectively caught that problem in the house?---12 and 14.

12 and 14; there was a third one, you said?---Said the - - -

The third one was the one who brought the problem into the house?---Yes, that's correct. 20

How did your organisation respond to that?---We put safety plans in place to manage the initial issue; we implemented safety plans and management plans around what staff would do if young people were leaving the resi with the knowledge that young people were going to chrome. And that included following them and I guess attempting to encourage them to come back to the resi and participate in alternative activities. We engaged with indigenous elders from the Mount Isa community and had a number of smoking ceremonies; and I guess continued to work with the young people to address and refrain from those acts. 30

Okay. So one child comes into the home as a new resident of the home and that child has a chroming problem before they came into the home?---That's correct.

And one presumes that that problem is one of the reasons why the child needs protection in the first place?---One of the reasons, yes.

Now, were you aware that that child, when that child arrived in the house, had a chroming problem?---We weren't aware that it was a current issue; we were aware that the young person had had those behaviours previously but at the time of the referral they weren't live issues. 40

COMMISSIONER: So that sort of thing happens when a child who's in need of protection and actually being protected by the state is let out to go home for some reason, and then they come back with a habit or reintroduce bad habits back into the residential; is that the problem?---Sorry, if they're reunified with family, or - - -

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SHERRY, M. XN

I thought you said they went home for ceremonies or something?---No, he was a new referral. He was a new placement. He actually came from another residential that operates in Mount Isa.

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Yes, but I'm looking at the system that - you're looking at it as though each residential is a different system, whereas I'm looking at it as a system as a whole and each residential is part of the system?---Sure.

So it doesn't matter to the state whether he's moved from one residential to another one, they're still responsible for that movement and what happens to that child while he's its responsibility. So he might be a new referral to you but he's not a new referral to the department, is he?---No.

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No. And so therefore somehow you have to find a mechanism for children, for as long as they're in the state system, wherever they're placed in it, whatever residential they're in or moving to, don't develop and spread bad habits. That's what it amounts to. What's the solution to that? How do you achieve that?---Yes, I don't have - - -

I know. See, we can all identify the problem; very few of us that can come up with a solution?---Yes.

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MR HADDRICK: I just wanted to fill in a few gaps in respect of how that sort of manifested itself, that chroming problem. So the young person, the 11-year-old, comes into the house and brings that problem with them, but you aren't aware of that when the young person arrived at the house?---That's correct. 1

When I say unaware of that, you're unaware that they currently have a problem but you were aware that they previously had a problem?---That's correct.

Now, what period of time after the young person arrived in the house did you and your officers discover that the problem had spread?---The first instance that other young people were chroming that we're aware of was probably a week after the entry of the young person. 10

So within seven days of arriving in the house the 11-year-old had passed on this terrible habit to - or terrible problem, to other residents in the house?---That's correct.

What, did a staff member come into a room and discover a child chroming, or how - - -?---A young person came back intoxicated after chroming. 20

Did it ever actually occur at the premises or was it always away from the premises?---It was always away from the premises.

So that necessarily means that the young people can leave the premises at various times unsupervised?---That's correct.

How far away from the premises? Are we talking about in the street or are we talking about the other side of town would these activities occur?---They were going into town, which is probably 10 minutes away from the residential, walking. 30

COMMISSIONER: So where does that policy come from, the unsupervised coming and going? Is that something that you can decide in your discretion or is governed by the service agreement or do you have to check it out with the department? Who makes that decision?---I guess we don't restrain young people so they're free to come and go.

No, I - - -?---Certainly we don't encourage them to do that. 40

No, I know, but when you say "we don't", who is "we"?---My service in Mount Isa and certainly across the state, Churches of Christ care.

Well, that's what I mean. Is that the policy of the centre that's agreed to by the department, or what? Is it just

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something that's grown up because they're young people as opposed to being children or because they're of the age where they should be able to roam the streets with freedom because other kids from other families do? You may not know the answer. If you don't, tell me?---Yes.

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If you do, tell me too?---I don't believe it's an easy - that it's, you know, come from anywhere in particular. As an agency we don't restrain young people and we certainly encourage young people to remain at the residential, but if they choose to go we certainly - staff don't physically stop them. Our staff follow them and, you know, attempt to get them back to the residence but - yes.

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MR HADDRICK: How does that - - -

COMMISSIONER: So they're just responsible for themselves as they choose to. Is that right?---I guess it could be seen that way.

Well, I don't see it any other way. I'm just trying to work out how the system regulates behaviour of children that it's responsible for when people it hires to look after them don't supervise them. You either have to agree that you'll take the risk of letting them go out, and I can understand that if they want to go to the movies, if they want to go here or there, but if they came to you and said, "Listen, we want to go down town to do a bit of chroming," what would you do then?---Well, young people aren't openly saying to us that they want to go down and chrome.

20

Well, of course not. Of course not, but my question is on what basis do you determine that it's safe enough to let them out?---So when young people are choosing to leave we're not allowing them to and we are attempting to engage with them to remain at the property. They certainly negotiate visits to friends and other activities.

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Yes, well, they have to be able to socialise. I understand that?---Yes.

But there's a balance that has to be struck here?---I'm not sure - I'm not sure - - -

Do you ever get back to the department and say, "Listen, young person X is a real problem. He or she keeps going down town, coming back chroming, disrupting everybody else, causing a lot of dividedness within the residential. He's your child. You're his substitute parent. If you want us to look after him for you you're going to have to do something. You're going to have to take some appropriate disciplinary action, because we don't." Do you have that conversation?---We certainly identify the issues that we're experiencing with the department and it's attempted to be responded to through case planning and behaviour guidance planning.

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Well, how's that going?---At the moment I'd say it's going well. 1

Right, so no problems?---Because we don't have current chroming issues and we don't have current issues - - -

So you have no problems, no issues?---We definitely have issues but we don't have current chroming issues.

All right, chroming is off the table, that's good, but it's just a matter of one problem after the next, isn't it? If chroming is not an issue, something else is. I'm trying to look at how you deal with things not on a ball by ball, crisis by crisis basis but as a coordinated management regime. See, someone until 18 is the parent of this child or this young person and in the case of your young people it's the department. If you're acting as a substitute substitute parent surely you and the substitute parent have to have an arrangement or an agreement between yourselves about who is going to actually take disciplinary responsibility for a child or a young person who seems to be left to his or her own devices to make decisions about what they will and will not do in the community?---I'd suggest that comes through a relationship that we develop with young people, and I guess that's our experience at the moment, is that we don't have current property damage, we don't have current chroming behaviours, that our young people do have a relationship with our staff, yes. 10 20

Mr Haddrick?

MR HADDRICK: I just want to tease out a couple of aspects about how you managed the chroming issue when it was a feature of the house. Now, you've told us that the 11-year-old brought that problem in the house and within seven days the problem had cross-pollinated into - or cross-affected other young people in the house. What action did you guys take other than following the young person or young people to try and respond to what is obviously a very significant health threat for the young people?---So each occurrence we would seek medical attention for young people to make sure that physically they were okay. 30

So that's, what, calling a medical practitioner out or taking them to a medical practitioner?---Or taking them - depending on their state, so either taking them to - and it was generally after hours, so it was generally the Mount Isa Hospital where they would be assessed. 40

Did that require the ambulance to - - -?---Certainly staff did at times transport, but there were times that ambulance services were used.

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Just hold on there. You brought the ambulance out to respond to an observation that your staff made that one or more young people were affected by substance abuse?---Yes, that's correct.

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How often would that occur?---I don't have the particular number of times, but - - -

Once, twice, 10 times, roughly?---Roughly four times.

Now, chroming is obviously an illegal activity?---Yes.

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What efforts did you and your officers make to report the matter to police?---When we were aware that young people were at the location where chroming was occurring we would report that to the police at the time. There were also a number of stakeholder meetings that involved other agencies. So Queensland Health were a part of that, the police and CPIU detectives were a part of that meeting, and uniformed police as well.

What would the police do? So if you knew that the young people were at the place where the activity was being conducted and you knew that that's where the crime was occurring, quite frankly, or a crime may have been occurring, what would be the response of the police service when you reported that to the police?---My understanding is that the police would attend the location, but when - so in the beginning young people would take the bolt, so they'd run, but towards the end of that period of time young people would remain, because police wouldn't attempt to remove the substances and certainly weren't - but charges weren't laid.

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So let's just pause there for a moment. On occasions where you and your employees will report that chroming was occurring at a particular locality and the police attended upon that locality after a period of time - after a period of a number of reports the police weren't taking action or weren't taking what some people might describe as significant action to respond to the chroming occurring then and that?---That's correct.

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And would you expect them to remove the substances from the young people?---I would expect that, yes.

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And how old would these young people be who would be gathered at this location and partaking in this activity? ---So the young people that are currently placed with our service but I'm also aware of young people who were aged - nine I believe was the youngest that I'm aware of up to adults.

So we have at least a nine-year-old but more broadly children between the ages of 11 and 13?---That's correct.

Now, I distilled from your answer previously that - you said after a period of time when police weren't removing the substances. Are you indicating to the commission that children would realise that nothing was happening to them and therefore they weren't even bothering leaving the location?---That's my belief, yes.

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Do the children ever speak to you or any of the carers in respect of these problems?---Certainly to my staff, not to be directly, and young people made it very clear that there was nothing police could do and because our young people - they would talk about the no-chase policy that police have around chroming behaviours because of the risks involved in chasing a young people who might be under the influence of solvents. That's why they stopped running when the police would go to wherever they were.

30

So just to be clear, there would a number of young people gathered in some central locality in Mount Isa where they would be engaging in chroming behaviour, the activity of chroming?---That's correct.

And the police would attend upon that gathering and whatever action was taken, it wasn't enough to discourage the children to either give up - stop doing the activity or leave that premises?---That's correct.

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That spot?---Yes, that's correct.

Other than calling the police, what other sort of therapeutic response or services did you engage to respond to that challenge?---So we also - so for our young people we attempted to use our relationship with our kids and also used another program that operates in Mount Isa which is

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the Volatile Substance Misuse Service and they certainly work with young people around supporting them whilst they're intoxicated and watching them come down to make sure that physically they're okay and offer a safe place for them to do that and also offer - they offer alternative activities for young people to prevent them - that aims to stop young people engaging in those activities.

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Now, after the 11-year-old who brought the problem into the house had come into the house in the seven or so days that elapsed and you discovered the problem, "you" being your organisation and its officers, how long did the problem remain a problem for the house?---I would say approximately eight weeks.

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So from that point in town the three affected children were living in the house?---Yes, that's correct.

I suppose some people might ask the question: why didn't you instantly remove the 11-year-old who brought the problem into the house if only to protect the other two who weren't affected by the problem of chroming prior to the new arrival arriving?---Those discussions certainly occurred with the Department of Child Safety around whether that was the best action to take and, as an agency in partnership with the department, we continued at the placement and developed a number of strategies around working with young people and that is certainly when we engaged a number of elders that we work with around the boys in Mount Isa and we followed a number of steps and to this time there hasn't been another period of time that we've seen chroming in the residence.

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But chroming, as I understand it, is an addictive practice. Once, twice, three times tried it has - the more times it occurs, the more times it occurs. Wouldn't it be incumbent upon your officers, your organisation, to at the slightest - I won't say "at the slightest sniff" - the slightest suggestion of chroming to remove the problem from the house and the problem was that particular child who was quite clearly encouraging other children to become involved?---As I said, those discussions did occur to remove that young person.

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What was your view at the time?---I believed that the young person that brought the behaviours in needed to be somewhere and needed to be somewhere safe and believed that we could certainly address his behaviours.

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But equally the other two were affected. They needed to be somewhere and somewhere safe too, didn't they?---Yes.

And for an eight-week period your house wasn't a safe place regrettably?---You could say that.

Sorry?---You could, yes, see it that way.

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What did the departmental officials say? What was their view in terms of how to deal with the primary chromer, if I could call him that?---Their preference was for his placement to remain at our residential because the alternatives were a TP placement or - I guess that was the alternative for this one.

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So everybody had the same view. It's best to keep these three kids together at the residential?---Yes.

Was there a fourth child living there at the time?---Yes.

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And that child was unaffected by these issues?---That's correct.

What was the age of the fourth child?---16.

So that fourth child was somewhat significantly older than the cohort that were engaging in this conduct?---Yes, that's correct.

It's logical that perhaps the age difference counts for the reason why the older child didn't engage?---Yes.

20

Now, you told us before that your employees followed the children. What does that involve, getting in the car and sort of trailing along 50 metres behind as they walked down the road or how did that all work?---Or on foot, yes, and attempting to have the young person come back to the residential.

And how would the young person react when they realised that they had a follower?---So often they would come back to the resi with the staff or they would continue on their way.

30

Would the staff member following the young person go all the way to the location where this activity of chroming occurred?---At times, yes.

How would the staff member respond to that? If the chroming is about to begin or be engaged in in front of them, how would the staff member exercise their duty of care in that situation?---To my knowledge, there wasn't an occurrence where it started whilst staff were there.

Were the young people open about what they were doing? ---They wouldn't leave the resi to say that they were going to chrome, no.

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When they came back, would they say, "I've just been chroming"?---There were visible signs in their behaviour that they were intoxicated or they'd have paint on their clothing or they could - staff could smell whatever substance they had used.

Pretty much a give away if they've got paint on their clothing, isn't it?---Generally, yes; on their hands or on their mouth, yes.

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Other than the expected adverse consequences of engaging in that conduct, were there any emergencies that resulted from the consumption of paint substances?---For our young people, no. I'm aware that one young person who was known to the young people at our residential attempted to hang himself whilst it's believed he was under the influence of paint.

10

So that person was known to the three who were engaged in this conduct?---That's correct, yes.

How much did the department tell you about, as I called him before, the primary chromer's background involved - how much did the department tell you about what his history was in terms of use of paint substances?---That he had a history of substance abuse.

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Did they tell you how recent that history was?---No. 1

Did they tell you how they try to respond to that history?
---No.

Did the department give you a view as to whether he was currently afflicted with that problem or not?---No, they say that it was a previous issue and not a current issue.

So they said it was a previous issue; they communicated to you that - they're at least implying do you that the child is no longer affected by substance abuse?---That's correct. 10

At least that substance abuse?---That's correct.

Did your officers make any inquiries about the chance that that child could relapse?---I'm - - -

Just unable to - - -?---I'm not aware of those discussions.

Okay. Now, moving on in your statement - I probably should ask you what other therapeutic services are there available in the event that you have a child who has a substance-abuse problem, be it pain substances or indeed any other substance? What are the therapeutic services that your organisation provides or has access to do immediately respond to those challenges?---So we have access to Child Youth Mental Health Service and the three young people that we've discussed were referred to that service and two of them are currently still seeing that service. And other agencies include ATODS, Alcohol and Tobacco and Other Drugs service, which is Queensland Health Service. So they're probably the primary services that we access; and the service that I mentioned previously, the Volatile Substance Misuse Service. 20 30

Were those three children who were affected, where they engaged in schooling at the time?---Not at the time, no.

So none of them were engaged in schooling?---The three, no; the fourth young person was.

After the eight-week period when you say it was no longer a problem, how did it not become a problem? How did the problem go away?---So as I said, we worked with the elders that we have a relationship with; we identified and what the issues were. They spent a number of periods of time with the young people talking about their behaviour and talking about the impact of their behaviour, those types of discussions. It came about that the young people identified that they believed a spirit was visiting - a bad spirit that they believe in culturally - was visiting, and that is when we decided to work with the elders around a smoking ceremony because the elders that we were working 40

with, it was their belief that they were being influenced and some of the behaviours that we were seeing were triggered by the spirit that the young people were seeing and identifying.

1

To the best of your knowledge where did these young people get that view that they were being visited by a spirit? ---The riverbed, which is where the chroming is. So it is the riverbed that runs through Mount Isa, which is where the chroming would happen.

But obviously other human beings would have communicated to them or in some way in still upon these young people that a spirit is visiting. Who were these other people?---Sorry, I don't understand what you're asking.

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How did these young people form the view that the spirit is visiting?---Because they were connecting with that spirit and they were seeing that spirit.

Okay?---So the spirit was visiting them.

So there was no interaction with other human beings that constituted the rise of that belief?---No, it's a belief that they have.

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It is particular to those three children?---Particular to indigenous people.

Okay, moving on to - I suppose the very last question I need to ask on that series of questions: how did you know that that problem had passed?---Because we weren't seeing young people leave the resi and coming back under the influence and the young people clearly identified that they didn't want to participate in those activities.

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So it sounds like from your evidence that the primary ingredient for change was the interaction of the young people with their elders?---Absolutely.

And but for the interaction of the elders they might have continued in that criminal conduct?---That's correct. And the peer group that those young people were engaging in those activities continue to chrome.

And that of course speaks volumes, doesn't it? ---Absolutely.

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Okay. Can I just turn to some of the mechanics of how the house operates. You tell us on page 3 of your statement, particularly around paragraphs 28 to 30, that staff regulate the consumption of junk food?---Absolutely.

I can understand why. How is that achieved? If these young people can leave the premises as they see fit then

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they are at liberty, surely, to go and frequent venues that sell food might not meet everyone's nutritional standards? ---If they've got the financial means to purchase those things I guess they could go to McDonalds or you know, whatever else. But young people have limited access or - particularly young people that we have placed at the moment have limited access to funds. They receive on a weekly basis, depending on school attendance and them completing their chores, up to \$15 a week and where - generally with young people our kids don't save money, they want to spend it, burns a hole in their pocket, and at the moment it is being spent on Lego and iTunes cards to get music on the iTunes. 1 10

What was the first thing?---Lego.

Leo?---Lego.

Lego, sorry. In paragraph 34 of your statement on page 3 you say there's \$5 compulsory savings. When is that go to?---So that's held by us and young people identify a particular thing that they want to save for, so things like - so young people have CDs or some of the bigger things that our kids have saved for are iPods, but we negotiate that with young people so they can identify something that they want to purchase. 20

Now, you've told us that young people are free to come and go broadly speaking - - - ?---Mm'hm.

- - - as they see fit from the house. And you've also identified in your statement that they often go away to see family and friends - - - ?---That's correct.

- - - and stay at the other locations. In paragraph 48 on page 4 you say, "Spend nights away at friends." Do they ever have friends that come over to the house?---No. 30

Why don't they have friends come to the house?---Sorry, they have friends visit but certainly not for sleepovers. But they do have friends visit in the afternoon and attend activities with us all with the group.

Do you ever detect - or your staff detect jealousy on behalf of the young people that they might come into contact with, they might have friends whose families are better off or have access to things or things more regularly than the young kids who are in care get, and then they become jealous as a result of that? For instance, example being a young kid who might be able to go to McDonald's as much as they want to is their friend, yet they can't?---I haven't experienced it, no. 40

Now, you've identified also in both paragraph 35 and also further on in the statement in regards to paragraph 81 and onward about damage to the property. How often does the

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property get damaged by the young people?---At the moment we're not seeing significant damage to the property.

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Why not?---I guess our kids are in a really good place. They have some really positive relationships with a number of people and we're not seeing those - they're definitely stabilised significantly. That's through a number of things, definitely contact and relationships that they have with indigenous elders that are positive role models for them; the relationships that they have with staff and how we work with young people.

10

Now, the opening words to that answer were "at the moment". When was it not a moment or when was it the case that there might have been greater damage to the premises?---Towards the end of September and October last year - - -

Last year?---Yes. And that was when we transitioned a new young person into - so we transitioned a young person out and transitioned a young person in.

So there was a departure and there was an arrival - - -? ---That's right.

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- - - and there was damage that was occasioned at that time?---There was an increase, yes.

What's the damage are we talking about?---So there were - there was a smashed window and some damage to - like, cracked wall - cracked walls, so they're fibro walls and they've been punched.

The plasterboard inside the house?---Yes, that's correct, and they've been punched and cracked.

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Is that a common feature that when there's a new arrival, there's an escalation or, sorry, a deterioration in the overall behaviour of the house?---I believe so, yes. 1

The same with a departure?---I guess for our experience is they've generally occurred at the same time. So if we've transitioned a young person out, there's somebody coming in so it generally happened at the same time.

What role does your organisation play and also what role does the department play in terms of making sure the new child who comes into a home gets along well with the other three who are already there?---I don't know that anybody can make sure that they get along. 10

But you can obviously try and work out whether they're a good fit, can't you?---Yes, so I guess that starts initially at our matching process that we operate once we - we do once we've received a referral so any obvious signs or indicators that young people aren't going to get on is identified in that matching process. When a young person is transitioning in, we do it slowly so we do it through a range of - and that can be afternoon teas, morning teas, weekend stays and then eventual sleepovers to when the young person finally moves in so any significant issues or obvious issues generally are identified during that period. 20

Now, how is discipline maintained at the house?---I guess we don't necessarily - we work in a consequence-based model so there's natural and logical consequences for young people's behaviours. If it's around their behaviour towards staff or other young people and a young person has an incident or what could be viewed as an incident, we work in - so we use a behaviour guidance model or framework, therapeutic crisis intervention. So following an incident for a young person staff will engage in a life-space interview and I guess that's aimed to support and assist a young person to identify what their triggers are, how the incident came about, what they were feeling during the incident or, you know, just prior to the incident and developing a plan of how they might respond differently. Our young people don't have - I guess because of their histories, don't always have a good sense of their own emotions and how to regulate those emotions so I would say it's my staff that assist and support them to develop those abilities. 30

Now, you said it was a "consequence-based system"?---Yes. 40

What would be the consequences for a child in addition to the way you respond to it? What would be the consequences to a child for certain breaches of discipline; say, for instance, making a hole in the wall? What is the consequence for that sort of conduct?---So depending on - so if it's a hole in the wall, we would talk to the young

person and, I guess, decide as a team whether police charges need to be made because that could be seen as a natural consequence to damaging property and if charges are laid, that's the consequence.

1

What about the more minor breaches? Say, for instance, two of them decide they don't like each other this hour and they engage in a fisticuff fight? What are the consequences there?---So we would speak to both young people and, depending on who the perpetrator was and who the victim was, if the victim felt that he wanted to press assault charges, we would support that young person in doing that and through that process.

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So if 11, 12 or 13-year-old wanted to press assault charges against another resident in the house, putting aside the legal issues of whether they have capacity to do that, you would assist that young person to make that complaint?---If they felt that somebody had hurt them without their consent, absolutely.

Now, going further on in your statement, at paragraph 33 you identify that the service receives 1.126, so that's \$1,126,000, presumably per annum for the provision of the service. What is the service? Are we talking about just the house or are we talking about the entire Churches of Christ operations in Mount Isa?---So it's 1.1 million that we receive and so that's the residential funding.

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So that's just the component of Department of Communities' funding for the provision of house E?---That's correct.

Off the top of your head, what's the breakdown of that? How much of that is spend on staff?---70 per cent is youth worker wages or staff wages and 30 per cent is operational.

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What happens to any unspent funds?---It's either retained - so we're funded in quarters so if we have over an identified buffer amount, the department don't fund that in the following quarter and funds are withheld so the Department of Child Safety keep those funds.

But there's an incentive, surely, for you to spend all your money, otherwise the money - you don't get it in the next quarter?---I guess if we haven't needed the money, there's no need for us to have it.

So you'd happily return that back to the Queensland taxpayers?---Absolutely.

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Now, school attendance - you said before that the three who were there and associated with the chroming activities did not attend school at the time. We know from your statement the residents there currently are attending school. Are some of the residents ones who were involved in the chroming some time ago?---The three of them are, yes.

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They're all still there?---Yes.

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All three of them?---Yes.

Now they're all attending school?---That's correct.

So not only have they, as a result of the intervention of your strategies and the involvement of indigenous elders, given up participation in substance abuse or at least that substance abuse, they have begun engagement in formal schooling?---That's correct.

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How are they going in school?---They're definitely performing under the expected level, but we've definitely seen improvement in core skills such as reading and maths and that's come about from attending school, number 1, but also - - -

School attendance is a positive in itself, isn't it?
---Absolutely.

Embrace the big steps forward?---Absolutely. So we've seen one particular young person who over his childhood hasn't regularly attended school so when he was placed with his family - he's a young person who had been previously placed at our residential and was reunified with his family and eight months later that broke down so he's returned to our resi and he - so he was attending school before he was reunified and then following his reunification disengaged from school so he - - -

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Sorry, reunification with his - - -?---His family.

- - - natural family?---His parents.

So he's attending school whilst he's in your residential care and he's not attending school when he's not, when he's back with his natural parents?---That's correct, except for the period of time when he transitioned back to our resi. He did take us some time to get him re-engaged back to school but he's certainly there now.

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What grade is he in?---I believe - - -

A senior or junior?---I believe eight.

So it's junior?---Yes, I believe eight.

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How often do residents who live in the house make it through and complete senior secondary schooling, that is, year 11 and year 12?---So none of our kids in the period of time I've been at the resi have been to grade 12.

So in four and a half years no-one has finished - gotten into year 12 or finished year 12?---Finished year 12.

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Has anyone started year 12?---No; no, so we had one young person leave school when he was in grade 11 and he is now doing an apprenticeship with Xstrata.

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That's a success story, isn't it?---Absolutely.

Now, over on page 4 of your statement you talk about after-school activities and staff transporting. What sort of after-school activities are we talking about?---So it ranges from fishing at a lake close to Mount Isa - - -

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There really is only one, isn't there?---Sorry? 1

There is only one big lake there, isn't there?---No, there's a - well, I suppose it depends on how you see close, but there's a number of lakes that we can - - -

COMMISSIONER: There's Lake Julius. There's a few of them?---There's Lake Julius, Lake Moondarra, East Leichhardt, Gregory.

Quite a few?---Yes. 10

MR HADDRICK: That's right, that's your home, if I remember correctly, commissioner.

COMMISSIONER: No, it's my wife's.

MR HADDRICK: Okay. What other activities?---Visiting the skate park, BMX riding, arts and crafts activities, swimming, and that's at any of the lakes or the local swimming pool, the PCYC gym.

What sort of costs are spent on engaging those activities? Obviously swimming in a local lake has very little cost but, I mean, the ones that do cost money, what sort of expenses are incurred?---We have a paid activity once a fortnight and that's - generally we spend \$100 for that paid activity. So that can be bowling or the movies, but that's for all - so two staff and four young people. So that's generally the paid activity for the fortnight, and then takeaway the alternate weekend, and then the other activities I talked about are free activities except for the swimming pool. We buy a season pass for all of the young people at the resi so they can access the swimming pool, because it's pretty hot in Mount Isa as well. 20 30

Down on page 5 of your statement you start to talk in greater detail about elder sessions. At what stage did you inject into your care model a greater involvement of elders in terms of, if I could call it, pastoral care of the young people?---I would say that it's been an aim of our service certainly since I've been there, four and a half years, but over the last 18 months we've been able to - and there's been some intermittent engagement, but over the last 18 months we've been able to develop a very strong working relationship with three particular elders and at this stage it's great. It's amazing. 40

So that new development came about about 18 months ago? ---Yes.

That has changed your world, if I can put it that way? ---Absolutely.

And changed the world of - - -?---Not necessarily mine but for my - - -

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Your organisation's world?---Yes, absolutely. 1

How much contact do the elders have with the young people on a week by week basis?---So on a scheduled level we have - the kids do cultural activities with the elders for around four hours every fortnight, but we also have some - so if young people are struggling they - we've identified that the elders can be a support person. One particular young person was having quite a hard time emotionally around being rejected by a girl and he was really, really sad during that time and we engaged with the elders. During that time he was identifying suicidal ideations and was very sad so at that time we engaged with the elders who worked with him and spent a significant amount of time with him. 10

There was a positive outcome from that?---Absolutely.

You put it down to contact with elders or contact with these three particular elders?---I'd say it's both. These particular elders are great with our kids and they're great for our kids, but I guess because of the community that they live in our kids don't particularly have a lot of positive indigenous role models and they need that. 20

What do you mean by elders? When I think of an elder I think of someone a generation above me. How old is an elder to - how old are these three elders, roughly, knowing that they will probably see the transcript of this?---Yes. I don't know their ages. They're certainly older than me and I guess I'd see the same, that anyone older than - not anyone older than me, but - - -

What I'm suggesting to you, or trying to ascertain, is if say a 25 or 35-year-old indigenous person could play an elder role to a 10, 11, 12, 13, 14-year-old person, or must they be necessarily in their 50s, 60s or 70s?---My understanding is that they're identified by their people as elders, so it can include people who might be seen as younger, so the age group that you identified, but it's not me that determines whether they're an elder. So they're accepted in their culture. 30

So the indigenous community tells you who the elders are? ---Absolutely.

And you take them - no suggestion there's anything wrong about this, but you take them at their word and that's who the elders are?---Yes. 40

You don't make a determination that there needs to be someone who perhaps in closer in age range for bonding reasons or whatever with the young person?---I definitely accept the advice that I'm provided and we have different - or we have other indigenous people involved. So we've got

indigenous staff and there's other key staff in the community that are indigenous that aren't considered elders that are positive role models for our kids.

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Now, talking about positive role models, can I take you to page 6 of your statement and in particular paragraph 74. I'm going to read out the paragraph to you and then get you to comment upon it, please. You say, "The kids haven't had a strong connection to culture or land. The boys have witnessed public intoxication and fighting. My belief is that they believe that that's what being Aboriginal is about," dot, dot, dot, end quote. What did you mean by that?---That the particular young people that we work with haven't had positive experiences to see what their - that their culture is more about than what they see down town. So I don't believe they've been exposed to the - or had an opportunity be exposed to the good things about being Aboriginal, and certainly when we talk about their spiritual beliefs and a connection to what - I guess there hasn't been for the young people that we work with anyone who has passed on, you know, their traditions, their - -

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Do you see that as a vicious cycle? When you say, "The boys have witnessed public intoxication and fighting," and then you go on to say that they believe that that's what being Aboriginal is about, do you accept that that could be seen as a vicious repeating cycle?---Absolutely.

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What you're doing to try and break that cycle is inject into their lives contact with elders who obviously don't participate in that sort of conduct, or don't encourage that sort of conduct?---Absolutely, and teach the things that we can't.

Did you detect any resistance by the young people to spend time with or engage with elders?---Initially, yes, but we tend to experience that with anyone. So if we have a new worker they are a little bit, you know, "Who are you?" They don't trust easily, but that was pretty short lived.

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In paragraph 86 on page 7 you refer to the Sanctuary model, capital S. What do you mean by Sanctuary model?---It's a therapeutic model of care that Pathways or Churches of Christ care are implementing in our services. So it's a model that recognises certainly the impact of trauma and how that can affect people, but not just on a young person level but also a staffing level. So our staff are being looked after, they're looking after themselves, but also by doing that we're looking after - they're in a position to look after our kids better and understand that our kids just aren't malicious, that their behaviours generally come from somewhere, and that can be around trauma and harm that they've experienced.

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Now, in terms of managing behaviour you've said in your statement about the number of times police get called out to the facilities, and it's pleasingly quite small certainly compared to other residential facilities. Obviously you ought to be commended - you and your organisation ought to be commended for that, but what other positive steps does your organisation take to have a good relationship with the QPS, the Queensland Police Service, so that the child protection unit for that area can play a positive role with respect to your house rather than constantly being involved in investigating problems?---So I would say that we have a pretty open relationship with police; they know who we are, we know who they are, but also we haven't - I guess it's not an area that we've been overly successful in so we've attempted to initiate relationships with people like PLOs and positions within the service, so having PLOs come and play, and also uniformed police I guess also to do some of the positive stuff with our kids. That can be afternoon tea, basketball games, cricket games, footy games, whatever. But at this stage we haven't had - so we've had a small number of visits by PLOs, but at this stage we haven't had any - - - PLOs being police liaison officers?---Sorry, yes.

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COMMISSIONER: Mr Haddrick, I'm just looking at - how much longer have you got to go in-chief, do you think? 1

MR HADDRICK: Probably got five, 10 minutes tops.

COMMISSIONER: All right. We'll have a break after that.

MR HADDRICK: After in-chief?

COMMISSIONER: After you've finished.

MR HADDRICK: Okay. I want to take you to paragraph 89 of your statement on page 7. I'm just confused or perplexed as to what actually has occurred here. I'll just read out to you, you say: 10

One of our kids would escalate very quickly. He is a bigger kid and he's pretty scary when he escalates. He's a very loud, bangs, kicks et cetera. He said, "I'm not carrying a safety plan but I'm happy for staff to show me my safety plan if they think I need it." One of his steps on his safety plan was to have a cup of tea. Staff printed out photos of a cup of tea; when we could see he was starting to escalate, we tried it a couple of times and it was really effective. 20

Now, that seems slightly interesting, that printing out a photo of a cup of tea and presenting that to a child would de-escalate aggressive behaviour?---Yes.

Tell us a bit more about that?---So part of the sanctuary model is that all staff and young people have a safety plan. So they're feeling - so for staff if they're feeling anxious or there's a situation that they don't feel that they're coping so well with, and kids as well. So we all wear our safety plan on us at times. When we introduced - and so the safety plan can be about, you know, taking five-minute breath, walk, for some people it's listening to music, some people it's a cup of coffee, you know, it depends on what your needs are. So when we introduced it for this young person he was very clear he wasn't going to wear a safety plan or have it on his - - - 30

Wear a safety plan?---Yes, so it's like a small card.

So all the kids are wearing one of these?---We encourage them do. And generally they do and it's in a wallet. For most of our kids at the moment they have it in their wallet so it's not visible, it is not, you know - but he was very, very clear that he wasn't willing to wear one because he did think it was a bit of a joke. But in his discussion he said that when he's getting anxious or getting angry one thing that really works for him is having a cup of tea and spending some time with a worker to, you know, just talk 40

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about whatever he's angry about or sad about or whatever. So we - rather than insist that he wears a safety plan, we had cards of just a picture of a cup of tea and we would say to him, "You know, mate, we're noticing that you're getting angry or sad. Do you want to have a cup of tea?" And then I guess staff - it was probably the purest form of seeing how effective safety plans are because the first time we tried it it worked and he did, he stopped and had a bit of a moment and he walked out onto the veranda, which is where he identified he would go into that cup of tea; staff making the cup of tea and then he talked through - I forget what the issue was for him at that time - and its continued. He's transition from our service now but he still uses with youth workers the cup of tea as part of his safety plan.

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Whatever works, I suppose?---Absolutely.

Just quickly, over on page 8 you say that you're not aware of any stigmatisation issues for young people who are placed with you. They're now attending school; surely it becomes knowledge to their peers at school where they live and that they're in a house that isn't run by the natural family. Surely that results in some stigmatisation?---I'm not aware of any, but I guess unfortunately it's pretty common for kids in Mount Isa not be living with their natural families.

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In paragraph 99 of your statement you tell us about what happens when a kid goes missing, so to speak, or you alert us to what efforts are made to locate them. If a child has departed the residence, after what period of time does a staff member go, "We better find out where they are"?---I'd probably say safely we would initially have discussions with the other kids in the house and if they say that, you know, he is at a certain place, that's when we would start going to those places. Mount Isa is a pretty small place, though, so yes, I guess if they haven't returned and the other young people don't know where they are we would start looking.

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After what period of time?---Probably around the two-hour mark that we would start, you know, being out and about looking for them.

At what point in time would you report them to the police as a missing child?---If we have concerns for them, immediately. So if we believe that they're vulnerable or there at risk of harm we would report that immediately, and we'd also report it to the department. But if we didn't have those concerns and we couldn't locate them would be at the 24-hour mark.

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So a night could pass without the child being in their bed? ---Yes.

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And a report hasn't been made to the police and none of your employees know where the child is?---That's correct.

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And the police haven't been told that the child is, as it were, at large?---That's correct.

Okay. Now, as a final couple of questions: what involvement, if at all, does a child's natural parents have in the life of the house? Do they ever visited the house? ---The parents of the current kids, no, they don't.

More generally for the residents over the last four a half years of the house, do they ever have their natural parents visit them in the house?---We've had a couple, yes, so we've had - I can recall two parents that have visited and visited regularly.

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So your organisation permits that?---Where appropriate and - so if it's an appropriate time for everyone else in the house, absolutely.

Now, I asked about natural parents; what about broader family, do any of the current kids all kids in the past have kinship in general come and visit them in the house? ---Not that I can think of right now. I don't believe so, that they have contact with those people regularly.

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Via telephone?---No, they can go and visit.

Okay. And that brings me to my last question: what efforts does your organisation take to ensure that those young people have, where the department has approved it - that is the chief executive has approved it - contact with their natural parents or their broader kinship?---So if we, through our discussions with the people in the community, identify possible kin we certainly advise the department of that, but around normal family contact we support - so we can transport - for one of our young people family contact needs to be supervised so we have an arrangement in place with the department that we supervise that contact with his parents. I guess anything that we can do. One young person is from Doomadgee and we've recently sent a worker with him because the department wouldn't approve him going independently, so we sent one of our staff with him he could have contact with his extended family.

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That's the evidence of this witness, Mr Commissioner.

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COMMISSIONER: Will have a break now for 15 minutes.

THE COMMISSION ADJOURNED AT 11.45 AM UNTIL 12 PM

THE COMMISSION RESUMED AT 12.02 PM

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COMMISSIONER: Yes, Mr Haddrick?

MR HADDRICK: Just a formality of tendering the photographs. I tender the four photographs. They are the photographs of house E, Mr Commissioner, and I ask that you make an order that none of the photographs be published. They all tend to identify the house.

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COMMISSIONER: The photographs of house E will be admitted and marked exhibit 163 and I direct they not be published.

ADMITTED AND MARKED: "EXHIBIT 163"

COMMISSIONER: Mr Hanger?

MR HANGER: Thank you.

Ms Sherry, I'm going to ask you a very open question. I would like to hear from of what you find are the most rewarding features of your job or, you know, some success stories in this kind of work you're doing at the home?---I would say that the most rewarding part of my job and what we do is seeing young people make really positive changes and growing into amazing adults and functioning adults. So I can talk about two particular young people that have transitioned through our programs from a residential or one in particular from a fostering program to our residential to currently our semi-independent living program. So when this young person was initially placed with us in our fostering program - and this, I guess, part isn't in my statement, but he was placed with a foster carer, I think, when he was 11 and a half for respite periods and then he came to be at our residential when he was around 12 and a half. When he first came to the residential, we experienced him to be physically aggressive so he would assault staff. He damaged a lot of property. I guess he didn't display his emotions overly well. He couldn't identify his emotions so we were probably having with him one to two critical incidents per day. So critical incidents are when we experience young people having property damage, staff assaults, that type of thing.

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He had been an abused child. What was his problem to start with?---He was significantly harmed by his biological father to the point that he has an acquired brain injury from his abuse which is, on my understanding, the reason that he is a subject child. So our staff worked with him for around three and a half years and I guess in the back of our minds he - so we officially started his transition to semi-independent living around 14 when he was

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identifying to us that that's where he wanted to go. He'd seen a previous young person transition from the resi into the SIL program and he was identifying to us that that's where he wanted to go and that's what he wanted to do. So we started working with him around some living skills. We did a living skills assessment to establish where he was at, could he cook, could he clean, blah, blah, blah, and workers actively did some activity-based stuff with him and that was over an extended period of time. In October last year he transitioned to one of our semi-independent living units so he's - he turned 16 in January and he - so through his entire placement with us he maintained school attendance and he does that with some additional supports around his brain injury.

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So he's maintaining school attendance in the semi-independent living?---Absolutely, yes.

That's a win?---A massive win, particularly for this young person. He has a very positive relationship with staff from our service and so he has regular youth-worker support and they do cooking skill programs and Centrelink appointments and I guess our staff work with him around teaching him, I guess, some of the things that are taken for granted for kids or even sometimes that are overlooked, so reading street directories, all of the things that I guess my parents taught me. He is doing some of that really basic stuff and has been for an extended period of time.

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So what grade is he in now at school?---11, and he's doing extremely well. He still has a relationship with his foster carer who provided some respite over the time that he was at the resi and has definitely an improved relationship with his sister. That was, I guess, pretty dysfunctional initially but he sees her regularly and travels to where she is.

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That's a great success?---Yes.

Are there other ones?---So another young person - so the young person I was talking about that was observed by the other young person to transition from the resi. So he was at our resi probably for about 12 months. I'm not completely sure of the circumstances around what led to him being in care, I guess I'm aware that there was definitely some significant domestic violence issues between his parents. When he was placed with us, he drank alcohol quite heavily, had a number of issues with the police and for a period of time had a number of mental health concerns around his suicidal ideation. That young person did transition from the resi into the SIL program where he stayed until he was 18 and three months where he then obtained a private rental property and did obtain an Xstrata apprenticeship. I spoke to him a couple of weeks ago and he's very settled and still maintaining that house.

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That's great. Could I ask you this - and it's a matter that the commissioner has shown some interest in: what happens to these kids who go through residential care? Do they go on or does anyone do anyone work on the subject of what happens to them in their later life? Do they end up - you have told us two success stories. I'm not going to ask you about the failures because I'm sure there are some, but do we keep any statistics on what happens to them in the five years after they have left residential care?---I believe that the Commission for Children and Young People have been doing some research around that. I can't speak to particulars.

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Your organisation doesn't do it, it sounds like?---Not that I'm aware of.

All right, thank you very much?---Thanks.

COMMISSIONER: Yes, Ms Ekanayake?

MS EKANAYAKE: Thank you.

COMMISSIONER: Welcome back?

MS EKANAYAKE: Thank you.

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Jennifer Ekanayake of the Aboriginal and Torres Strait Islander Legal Service. At paragraphs 15 and 16 you have highlighted that your service actively recruits Aboriginal and Torres Strait Islander staff and network with elders. Is it fair to say that as a mainstream service you actively seek to meet your contractual cultural competency requirements through your staffing structure?---Sorry, I'm not sure that I understand that.

Yes, you have a contract with the department so your contractual obligations would be to maintain some levels of staffing. So is it fair to say that as a mainstream service that you actively seek to meet your contractual cultural competency requirements through your staffing structure? Are you aware of what cultural competency is? ---Yes.

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Is that a requirement in your contractual agreement with the department?---I can't say that I'm aware that it's specific, but it quite possibly is in our service agreement. So I don't know that it's specifically spelt out.

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Do you understand the context of cultural competency in staffing and how staff operate?---I believe I possibly have an understanding, but maybe if you could outline for me - - -

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If I could just read to you what cultural competency is, cultural competency is prescribed simply as having the means and skills to understand, emphasise, communicate or interact effectively with people from different cultures? ---Absolutely. I believe that we aim to do that and probably - yes, I do believe we do that.

Thank you.

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COMMISSIONER: It includes an understanding of the past policies and practices that have affected indigenous children as well. 1

MS EKANAYAKE: That's correct. What do you see as an appropriate Aboriginal and Torres Strait Islander recruitment and retention target given that - - -?---Sorry, I'm - - -

Given that your residence, say, for instance, or your care facility, has 100 per cent indigenous children and given that Mount Isa has a large number of indigenous children in care, what would you see as an appropriate Aboriginal and Torres Strait Islander recruitment and retention target? For example, say 6 per cent, 30 per cent, 50 per cent?---I think, ideally speaking, 100 per cent, but I'm obviously aware of the difficulties around that. I guess a goal that I would have is having more indigenous staff than non-indigenous staff. 10

What are your thoughts on the concept that due to the significant - the 40 per cent of overrepresentation is indigenous children in care - currently 40 per cent of children in care, that staffing structures in government and mainstream service providers should reflect the service providers - when I say service - sorry, in service users. When I say service users I mean those children, the 40 per cent children, Aboriginal and Torres Strait Islander children in care. So what are your thoughts on that?---I absolutely support that it does represent that percentage. I do support that and that we should actively - because I think the result would be a reduction in that overrepresentation - - - 20

I'm also referring to the numbers of staff in government departments and - - -?---Yes, absolutely. That's definitely what I mean, that I support the recruitment and that the staffing is representative of that. 30

So would you agree that as part of the 10-year road map in child protection a beneficial staffing structure would see a significant increase in Aboriginal and Torres Strait Islander professionals in the system, in child protection and residential care?---Yes, I do agree.

Going to para 66 of your statement, you would agree - or would you agree that it was a highly professional step for your service to acknowledge it requires elders and Aboriginal community members to meet the children's wholistic identity needs?---Absolutely, I do agree. 40

What assistance have you received from the department in relation to cultural support plans and guidance to ensure the identity development of the children?---I've seen

department support our initiatives and what we're doing, but in terms of cultural planning and active participation from the department, I haven't seen - - -

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Have you seen case plans for the children?---Yes, we have seen them.

You haven't seen a component in the case plan that sets out cultural support plans for the children?---I guess we see a pretty typical cultural support plan across - because a young person is indigenous they should attend certain events in the community and I guess I've seen a lack of how we actually do that. So attending NAIDOC is a little bit - there's a lot more than just attending NAIDOC activities.

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Typically what would - is there any reference to connection with culture or developing the child's identity?---There's definitely discussion about it. I guess - - -

But in the documents?---I haven't seen the - there's definitely in the document discussion about that, but I guess we don't see the implementation of those strategies.

In relation to the placement agreement, what level of guidance do you receive from the department in relation again to a child's identity development?---I would say we receive very little.

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The department's obligation in relation to cultural support plans, now, there is in the legislation, the Child Protection Act, say, the department has an obligation to maintain the child's ethnic and cultural identity. In relation to that does the placement agreement assist you to meet the requirements, the department's obligations, to support the children's identity requirements?---I would say no, but part of that is that we've driven our current processes, so I don't know that we're seeing an active role being taken by the department because we're actively driving those things with elders and our relationships with them, and that's not being incorporated in placement agreements or care.

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At paragraph 69 - - -?---Sorry, paragraph

Paragraph 69 of your statement. As referred to by counsel assisting, you said, "At the initial stages kids were very resistant. I think some of the resistance was around the unknown." You also say that children's experience within family may be one of public intoxication and violence. With this context in mind I'd like to highlight also the statement at paragraphs 74 through to 80 where you talk of positive role models and understanding - and having a positive understanding of being Aboriginal. How important is that regardless of a child's experience to build positive Aboriginal identity and a network of - - -?---I'd

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say it's paramount to who young people are. I guess I've seen how much the particular kids that we've worked with that have worked with the elders, how much they've developed and how much they've grown and how much pride they have around their culture and their identity. So I would say it's paramount to working with our kids and, you know, it's a right that they have.

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Thank you. In your view, has a child's connection with culture created an environment of wholistic wellbeing within a child protection setting?---Absolutely. I think it has, and I think that's evidenced in the reduction in behaviours that we've seen with our kids and definitely the positive relationships that they have with the elders and definitely our staff.

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In relation to the young person placed within your service from Doomadgee we're interested in how the department meets the department's obligations in relation to contact. Now, there is an obligation upon the department to make arrangements for contact, or to ensure when placing a child with somebody that contact arrangements are made. Now, if I can read to you from section 88, the section applies if a child is an Aboriginal and Torres Strait Islander child, and then going on to say the chief executive must provide opportunity for contact as often as is appropriate in the circumstances between the child and appropriate members of the child's community or language group. Now, how would you say that is happening or that is allowed to happen or is facilitated?---For this particular young person we've initiated a number of visits for him to Doomadgee so he can have contact with his extended family and he also seeks out - he has family regularly visiting Mount Isa so he seeks that out himself. I guess there has been some visits to Doomadgee that have been initiated by the department, but I guess we're actively seeking those for him. I guess we know when - for this particular young person, he does get really sad around not being connected to - or not being able to visit his community. So when we're noticing those signs we are responding pretty quickly to get a worker to take him to Doomadgee. I guess how the department - I would say for this young person - pretty poorly. He's the young person I talk about in my statement that was denied the visit to his - to Doomadgee to attend the passing of a relative because previously he'd been naughty - where the department, despite requests and a number of challenges by us as an agency, he was denied attending that funeral; and obviously grieving for him is very important.

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Are there other children from other areas?---All of our other - the other three young people are from Mount Isa.

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Mount Isa?---Yes.

Is it fair to suggest that given your location, cultural competency is a necessity?---Isn't necessary, or - - -

Necessity?---Absolutely. Not just our location, but our kids are 100 per cent indigenous.

100 per cent. Is it fair to suggest that your service should be viewed as a possible guide to mainstream providers in terms of effective cultural competency? ---Absolutely, it could be, yes. We don't - I guess we haven't got it perfect yet, but certainly we've worked really hard at what we're achieving, and that's my staff and the elders that we - - -

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How do you work further towards reaching - - - ?---So I guess our plan for this year is to have - so we conduct supervision for staff, so debriefing and performance management processes. I guess our next step is having - so that happens on a monthly basis with team leaders or certainly myself, but having staff having supervision, I guess, in our language, with the elders that we work with so all of our staff can develop culturally appropriate and informed practise, particularly around the group - like, our kids' needs and their particular family's histories. So we're all, I guess, working in a very consistent approach and have that knowledge of our kids and where they've come from, where their families are, and definitely just an understanding of how Aboriginal kin differs to how we want to see it. Because I think we try and mesh it together, and they're completely different.

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Okay. At paragraphs 108 to 117 you have highlight transition arrangements or transition to adulthood. How are young adults or young people prepared with protective behaviours, considering many may return to family or community where a risk might still exist?---Yes. So I guess we - it's something that we work with all of our kids, because particularly in Mount Isa they visit their family, and that can be in any family home. So we work with young people and rely on our relationships and talk to them about good choices, bad choices, and, you know, the use of safety plans, so when they're feeling unsafe or uncomfortable, that they've got an exit card, I guess. And I think a lot of that relies on our relationship with kids, but I also see that our work with the elders that we're doing also is pretty pivotal because they're able to talk to our young people around, you know, particular family. And because we can tell them that, you know, public intoxication and fighting and all of that stuff isn't what them being Aboriginal is about, but when it's coming from

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Aboriginal people and they can role model appropriate behaviours and different behaviours to what they've seen, like, it's much more effective.

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How confident - you're speaking of transitioning children into - or the children leaving or young adults leaving the facility. How confident are you that young adults have the support to maintain this transitional progress after they turn 18?---So the - one of the - he was one of the young people I was talking about earlier, he still has contact with us and he'll ring every now and again just to let us know that he's okay. So that speaks volumes. We can't ever guarantee that kids are going to be okay when they exit from care, but it's, I guess, a product of hopefully lots of hard work and consistency and investment in a young person.

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As for these young people and their dreams and aspirations and how they're supported, is it determined by the young person or by the avenues available to provide that support?---I guess we action what young people tell us. If they want something, that's what we work on, yes.

How does your service complement formal therapeutic supports in your interactions with your young people in your care?---So we often have initiated contact with those services, but also facilitated access to; so whether it be transport. Because of Mount Isa and its location often some of those services need to be sought outside of the area, so transporting a young person to Townsville or Brisbane to seek out some services. And I guess that's where we are able to link with other Churches of Christ Care services. We have one in Townsville and multiple in Brisbane or the greater Brisbane region. So it makes that a little bit easier, using things like cars and all of that kind of stuff. So generally speaking we would facilitate access to - so if it's in Mount Isa we initiate referrals and discussion with the department around identifying what a particular young person needs, but if we can't get anything in Mount Isa we'll access it elsewhere and assist that young person getting it.

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At paragraphs 137 to 143 of your statement you've provided commentary on secure care. Do you accept there are currently responses available through disabilities for restrictive practices, mental health and substance misuse? ---Am I aware of - - -

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Yes, are you aware, and would it be important to explore those options before seeking a secure care arrangement for a child?---I guess I don't know a great deal about secure care models, but if there's alternative options I believe, from what I know around secure care, I think everything should be exhausted.

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So when you say you don't know a great deal about - I've got a couple of questions on that. I'll put it to you, but if you don't have sufficient answers we'll move on from there?---Sure.

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Can you provide us with an insight into the types of concerns which would warrant secure care?---I guess based on what I view secure care is basically a more therapeutic than - so I guess young people don't - in our resi they, as was described before, can come and go as they please - they don't have that option, so they can't leave a facility without some kind of staff participation in them leaving that. My concern would be the comparison for young people to make it to - the comparison being made to detention and whether young people have the ability to understand that they're not in secure care because they've necessarily committed an offence. Other concerns I would have or another concern is: are we over - are we institutionalising young people in another way?

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Their liberties and their needs?---Yes.

How do you balance that?---I don't know that I've got the answer to that.

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Do you see a problem with such an arrangement being misused?---Absolutely, and certainly from our organisation's point of view it's one of the reasons why we don't use things like restraint, because I guess we're aware that any incidents - everyone, young people, adult staff that - you know, we become heightened and the risk of harm to children and physical harm by a staff member - I think the risk is too great.

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So would you be advocating more restrictive practices within residential care rather than secure care?---As long as it's very, very well thought out and planned and staff involved in those restricted practices are very, very well trained.

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At paragraph 162 of your statement you have said that you haven't received much support over a four and a half year period from the local recognised entities. Do you want to add to that?---I guess our experience is that they - so through discussions with the department they indicate that they have had some consultation with the RE. We haven't been aware of those - sorry, we haven't been a part of those discussions but we are advise by the department that they've happened around placement offers, that kind of stuff. We request that CSO's invite the RE representatives to events like case-planning meetings. My understanding is that they do attend family group meetings when they happen for our kids and they have been involved in a number of ceremonies that we've had at the resi with elders and certainly provided some feedback around those activities, but in terms of our relationship with the RE I would say that we haven't had a great deal of support.

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Would you support calls for a renewed service delivery standard in the Aboriginal and Torres Strait Islander child protection sector, enhancements that could make the recognised entity more responsive to children's needs? ---Absolutely more responsive, but also I think more resources as well.

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When the Mount Isa public hearings were taking place at the commission, members of the community approached ATSIILS' staff and highlighted the violence that was at unacceptable levels. Would you support societal violence that was at unacceptable levels? Would you support a targeted violence prevention approach in Mount Isa?---Yes.

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Do you want to expand on that?---I guess part of - and I've talked about it a bit today. Our kids have the impression or had a belief that being Aboriginal was about violence and domestic violence and public intoxication and in that they had - and through a lack of other things like positive role models and that culture being shared with them they didn't have a great identity. That's what they believed, you know, them being Aboriginal was about. One particular young person told us that he was Aboriginal and he carried a spear and he hurt people. That was what he believed him being Aboriginal was about and that comes from young people being exposed to levels of violence. So anything to address that, to decrease young people being exposed to that, you know, is a no brainer.

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Thank you?---No worries.

No further questions, commissioner.

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SHERRY, M. XXN

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COMMISSIONER: Mr Capper? 1

MR CAPPER: No questions, thank you.

COMMISSIONER: Mr Capper, one thing you might be able to clear up is: does the commission do any longitudinal lifelong research into the quality-of-life outcomes for children in care?

MR CAPPER: Not at this stage, no.

COMMISSIONER: Any plans? 10

MR CAPPER: Difficult to answer.

MR HANGER: Wasn't there some evidence that Griffith University were doing something on that? I have got a vague memory that that was mentioned.

MR CAPPER: Certainly the academics expressed an interest in doing so and having access to the data to do so.

COMMISSIONER: Yes. It's pretty hard to do longitudinal studies. There is a longitudinal study under way into Juvenile Justice outcomes - sorry, outcomes for children in a Juvenile Justice context but, of course, that would be most of the same constituency too. Yes, I just wanted to check that. I didn't think you did. Thanks. Yes, Mr Haddrick? 20

MR HADDRICK: Might the witness be excused, Mr Commissioner, and also I propose to call, subject to your thoughts, the next witness after the lunchbreak rather than break that evidence in two.

COMMISSIONER: All right. 30

Thanks for much for coming. We really appreciate the time you spent?---Thanks.

You have been here a long time. You are formally excused from your summons requirements and we will adjourn until 2 o'clock.

WITNESS WITHDREW

THE COMMISSION ADJOURNED AT 12.37 PM UNTIL 2 PM 40

COMMISSION RESUMED AT 2.01 PM

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COMMISSIONER: Good afternoon. Mr Haddrick?

MR HADDRICK: Good afternoon, commissioner. I call Ms Michelle Bellamy.

BELLAMY, MICHELLE affirmed:

ASSOCIATE: For recording purposes, please state your full name and your occupation?--Michelle Bellamy, and manager of residential services with Youth Lifestyle Options; also the director.

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Please be seated.

COMMISSIONER: Good afternoon, Ms Bellamy?---Thank you.

MR HADDRICK: You will need to talk up a little bit there? ---Yes, okay.

There's a microphone there but just try and make sure your voice projects across it. Just in a second I'll get you to have a look at this document, if you could, please? ---Thank you.

20

Do you recognise that document?---Yes, I do.

What is that document?---It's my statement of witness.

Did you write that document?---Yes.

Whose signature appears at the bottom of each page of that document?---My signature.

30

By signing that document are you indicating that the contents of the document are true and correct?---Yes.

The opinions expressed in that document, are those opinions held by you?---Yes.

I tender that statement, Mr Commissioner, and I ask that it be published in full. It does not identify the location of the house.

COMMISSIONER: Ms Bellamy's statement will be exhibit 164 and it will be published in full.

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ADMITTED AND MARKED: "EXHIBIT 164"

MR HADDRICK: Thank you very much for coming along today - now, it's Ms Bellamy?---Yes.

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BELLAMY, M. XN

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As in like the football coach?---Yes. No relation. 1

What I propose to do today is ask you various questions about the house that we know as house F?---Yes.

In this commission throughout this week we've heard about a number of houses and we've looked at those houses and looked at photos and discussed the operation of those houses and I propose to ask you a number of questions more generally about the nature of your organisation. In paragraph 1 of your statement you identify that together with a Ms Vanessa Howse, H-o-w-s-e, you are the manager and proprietor of Youth Lifestyle Options. What is that organisation?---It's an organisation that undertakes service with the department for young people in care. We provide grants funded residentials and TP placements. 10

So that's residential homes?---Yes.

Transitional placement - - -?---Transitional placements and grants funded placements.

And grants funded, so there's a third type of - - -? ---There's two placements. There's the grants funded placement which is - and then the TP placements. 20

How many residential places does your organisation run? ---We have nine TP placements and eight grants funded.

The two of you, Ms Howse and yourself, you're the managers and proprietors. By proprietors I understand you to be the proprietors of a company?---Yes.

What is that company called?---Youth Lifestyle Options Pty Ltd. 30

That's a company - a proprietary limited company?---Yes.

Who are the shareholders of that company?---There's no shareholders. It's just Vanessa and myself.

So there's only two members of the company?---Yes.

You're also directors of the company?---Yes.

What's the capital value of your membership of that company? Just hold on a second. What is the shareholder value in that company? Is it a \$2 shelf company or is it something you established some years ago?---Well, we - yes, five years ago it was established. 40

It's just the two of you who have been the only directors of the company?---Yes.

How do you know Ms Howse?---We worked prior in another non-profit organisation. She was the psychologist for the residential placements and I was the manager of the residential placements in that organisation.

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Yes, and the two of you decided to get together and open up this operation?---Yes.

Was it always a largish operation or did it grow bit by bit?---Yes, it's grown over time.

So when you first started out what did you start out with? ---One residential and we were doing some in-home support to carers.

10

You're a for-profit supplier of services, aren't you? ---Yes.

What am I to understand from that expression "for-profit supplier"?---For profit, for us the understanding is that that was the only way that we could go at that time to develop the company because we didn't have a board. So that was our only option, to go under - as a company proprietary limited.

20

So who receives those profits, if there are profits made by the company?---The business - well, myself and Vanessa.

So the directors on occasions as and when declare a dividend for themselves and receive what profits they decide to take from the business?---Yes. We get a wage, yes.

You said it's grown to 18 or 20 or so different facilities. I think you said eight or nine residential care houses? ---Yes.

30

House F that we know is one of those residential care houses, isn't it?---Yes.

Without telling me - and throughout your evidence I ask you not to mention the correct name of any child or former child subject to a protection order or the street address of any particular locality?---Yes.

But you can tell me what suburb house F is in. What suburb is house F in?---Victoria Point.

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Victoria Point, so on the south side of Brisbane, effectively?---Bayside, yes.

Down towards Cleveland?---Yes.

Now, I've got a series of photos here. If I could take you through those photos. What is this that we're looking at here?---That is the lounge room.

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BELLAMY, M. XN

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Of house F?---Yes.

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Is that the only TV in the house?---No, there's another TV in the games room or chill-out room, as sometimes - or toy room, as sometimes it's called.

So there's two TVs in the house?---Yes.

How many residents are there in the house in terms of children?---There's two young people.

Two, currently?---Yes.

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What are their ages?---13 and 14.

How many carers are there?---There is one carer on - we call them residential care workers. We have a team of three residential care workers and they work in a seven-day a week roster.

So there's three all-up?---Yes, so one on shift at any time.

We've heard evidence so far from previous witnesses that the other types of residential care houses have a larger number of staff than three. We've heard evidence of somewhere between eight, nine, 10 staff for those residential care houses. How is it that your organisation is able to run a house with three staff whereas those other organisations are able to run it with seven, eight, nine, 10 staff?---Because we come under as like a therapeutic model which we believe is achievable (1) having a psychologist employed with YLO, also having a small number team so that the young people and children can develop a relationship and have that consistency and to get that therapeutic model working. Having a smaller number it's easier to give that consistency, have that routine, have everybody understanding what the goals are and what we're working towards with the young people and children.

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But I would have thought that if you have two, three, four kids in the one house that you need to have a rotation of shifts so that someone is doing an eight-hour period here and then there's sort of an eight-hour period through the night and then another eight-hour period?---No - well, yes, we do 24-hour shifts, our residential care workers. So they'll do - and we only do two-bed residential. We do have a four-bed which is called [REDACTED] which is for the transient youth. That's just a shelter, overnight accommodation. So that's the only facility that we have that we do more than two young people at a time.

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So someone does a 24-hour shift. They arrive at 9 o'clock on Monday morning and they leave at 9 o'clock on a Tuesday morning?---Yes.

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BELLAMY, M. XN

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Then they get 48 hours off before they're back on again?
---Yes, typically, or if a young person is at school that
worker will finish at 9 o'clock and the next worker will
come at 3.00.

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Is there a problem in that, or could there be a problem in
that, in that a workers is required to be at work and
working for a 24-hour period which might require much
longer periods of work than someone in another professional
job? For instance, are they doing effectively 16, 17, 18
hours at work at a time?---Is there a - do I perceive that
that's a problem?

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Yes?---We haven't encountered - we have - in our belief it's a more consistent approach, rather than having an eight-hour - and due to the young people and children having a lot of people involved in their life, just to have that consistency and that stability in their home, we've found is more conducive to having the workers doing the 24-hour shifts and actually having the young person go to bed and having that same worker the next morning when they wake up, rather than having an eight-hour shift and having it finish at 3.00, another one finishes at 10, and then another one comes on at 9.00. So it's just - - -

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Wouldn't you also achieve consistency if you had the same worker there for the same sort of period of the day; so rather than a 24-hour cycle and then you don't see - the young person doesn't see that person for 24 or maybe 48 hours?---Mm.

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Wouldn't greater consistency in the life of the child be achieved by: this is the person who's there in the evenings, this is the person who's there in the mornings; to give them that degree of regularity?---Yes, and I think that sometimes possibly can't happen based on rostering. And I also think that it's that small number that we find our young people settle more, they form those relationships better, and with that stability we can start doing some therapeutic work around them.

20

What if you have a staff member who's sick and can't turn up for their 24-hour shift?---Yes, we do have floaters which - and those floaters are allocated to some of our residential. So one floater might go to a couple of residential, so that means the young person will know that person when they come on. If a person is sick we'll call those workers and get them to come in.

30

How many staff does your company have all up?---I think currently about 55.

So you and Ms Howes - the entire workforce of your company is about 55 people?---We have - with residential care workers, then we have coordinators, which - a coordinator will look after four of our residential; and we have a psychologist that look after four of our residential.

So how many of them would be residential care workers if - - - ?---Yes, that would be the 50-odd.

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50?---Yes.

And then you have a few other people - - - ?---We have the office staff, yes.

How many of them are full-time employees of the company? ---All our residential care workers are casual and our

psychologists and our coordinators and team leaders are full-time staff. 1

So you might have, what, three, four, five full-time employees?---We have one team leader for residential and one team leader for the psychologist, and we have five - currently, I think, five coordinators and five psychs, which we're going to be going up to six, yes.

So you've got about 10 or 11 full-time staff?---Yes, and then we have an education resource officer which is based in the office as well, which her role is to help us get our children and young people back into school or provide appropriate school work; and we have human resource officer, our coordinator who looks after the resi care workers with the rostering system; and we have our finance and admin. 10

And all those people are full-time employees of the company?---Yes.

So that's, what, about 15 or 16 there?---Yes.

So there's about, what, 35 or so - no, maybe 40 or so who are casual residential care workers who are paid casual wages?---Yes. 20

What do they receive? What's their average wage? What's the going rate for a residential care worker?---Can I just say that I have a couple of our young people in the courtroom, so is it all right for them to hear all this information?

I don't see any reason why not?---Because one of them is going to be after myself. 30

Sorry?---Because one of them is going to be after myself, so I was just wondering with the more financial stuff.

Sorry, I don't think I understand your concern?---Just with the financial stuff and - - -

Okay. My question was how much the going hourly rate for a worker is. I imagine all your workers - or the vast bulk of them - would be relatively on the same?---Yes.

So you can perhaps tell me the range which the going rate per hour is for a residential care worker?---Yes, it's around the \$30 an hour. 40

Okay. And so you would only have one residential care worker at the house at any one time?---Yes.

For two children?---Yes.

Now, you mentioned before there are some floaters who go around to different houses. I suppose I should start by asking you, we know house F is in Victoria Point. What's the geographic spread of your operations?---We have a residential in Toowoomba, and then we go down to Ipswich, the west area, we do south-east, which ranges down to the Gold Coast, down to Vicky Point to Brisbane, and we've got a couple of houses in Brisbane.

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So if someone calls in sick from one of those homes there are one or two people floating around somewhere in south-east Queensland who can be contacted - - - ?---South-east - we don't do Queensland, yes, we're restricted - - -

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The greater Brisbane - - -?---The greater Brisbane area.

- - - area up to Toowoomba?---Yes.

There are a handful of people who can zip off there and do that shift as and when required?---Yes. They send an email on a Monday of their availability throughout the week, so we're very - usually we'll know who's available to call when needed.

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What is the roster rotation in terms - so someone does a 24-hour shift, then how much time do they usually get down after that?---It usually works out to - without holidays - the resi care workers will take holidays - ideally we attempt to do, like, the resi care worker 1, 2, 3, and then the 1 comes back; so two days off at a time, so they work no more than five shifts a fortnight.

Now, you identified where the residential care facilities are?---Yes.

Where are the transitional placements?---That's in Brisbane, Ipswich, Gold Coast.

30

Now, describe for me the transitional placements that your company runs?---Yes, so that's based where we will have ideally two young people; sometimes initially we'll have one young person placed there and the goal for that child is to co-tenant that child as we like to - don't feel it's ideal to have one-on-one. And it runs exactly like our grants-funded placements.

What do you mean, co-tenant? Co-tenant in what?---To have another young person in that placement. So rather than having one young person in a placement, which is not ideal, we do work towards getting another young person in.

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What's their accommodation like?---All our properties except for the [REDACTED], which is the overnight accommodation, is four bedrooms, two bathrooms.

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BELLAMY, M. XN

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So where does your company come across these properties?
---Rentals. 1

So you identify rental property?---Yes, we've established good relationships with a couple of real estates in the area, so when we require a property they know what we need so they'll send us through some of the properties that are coming up or available for us to have.

What is the longevity of any particular transitional placement - placement house, I mean?---The houses don't change, it's the young people inside the houses that - - - 10

But if there's a demand - as you say, you've established good relationships with a real estate agent?---Yes.

You go to the real estate agent and say, "We need a house - - -"?---Within three weeks we've got one set up.

And what is the longevity of that house? So for instance, once you set one up - have you ever shut one down?---We've moved based on if the owner is selling, but basically we stay in there for a number of years. Most of our houses, we've stayed in there over the year. And we've got houses from - we started five years ago - still leasing. 20

Did you ever have problems with the neighbours at all? We've heard evidence that other homes have problems with neighbours occasionally?---Yes, occasionally we'll have trouble with the neighbours. With [REDACTED], which is the overnight accommodation, we've had some difficulties in the past. That's been ironed out and sorted out, so.

Where is the locality of the [REDACTED] house?---It's in the Gold Coast at [REDACTED]. 30

Okay. And how many young people live in the [REDACTED] house at the moment?---Four young people can access that property. So it's a bed for the night. So it's young people that are transient, don't have placement, are under an order from the department, and really just don't have anywhere to go and need a bed for the night.

How many staff are there running that particular establishment?---Two staff on. There's one during the day - we have a day program between 9.30 and 4 o'clock - a day program which is based around identifying what the youth are doing at the moment, where they need help from, because a lot of them are older young people, like 15, 16, which are looking at transitioning from care; so that's the day program. And then at night from 4.30 we have two workers. 40

Okay. How do the young people come to your attention? They require accommodation, either resi care or in a

transitional place?---Yes. We will receive a phone call, usually from the PSU - placement service unit - which will follow up with a referral.

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And what does that referral tell you?---That referral will give information around - majority of the time it's historical information and usually where the child is currently placed at the moment or - and who the service centre is and the reason why that child needs a placement.

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So the department contacts you, and we have heard about things like PSU in the past?---Yes. 1

And they contact you and say, "We've got a child that needs emergency accommodation." What do you do?---Yes, we will look at - we will have a chat to the PSU around what vacancies we do have in our residentials and we'll through the referral to see whether this child needs an emergency placement or whether it's looking at that - it looks like the service provider that has this child is saying - the carer is saying that, "We can't provide support for this child any more. We need them out by the week." So we look at what the - emergency or whether it is just waiting around, then we'll look at - - - 10

Just hold it there. You said "We look at that" which to me implies your organisation?---Yes, YLO will look at that in conjunction with the PSU we'll be talking those - - -

That's all I wanted to ascertain?---Yes.

Who is the entity or person - - -?---Yes, so initially it's PSU and YLO will have those initial conversations. If we have a vacancy, then YLO will contact the service centre and get some more information around the child's current presentation, inform that service centre of - if it's a co-tenancy situation, we will talk about the child that we have in and whether we identify any risks that might be there or whether we think it's a good match. So we'll get all that information, then we'll have a chat about that within YLO to see whether or not we feel that it might be a good match and then we'll talk to the PSU about accepting or refusing - - - 20

Does the department ever ring you up at, say, 4.30 in the afternoon and say, "Look, we've got an emergency case. There's child X. They've got to leave that home" or "There's a major problem and they're subject to a protection order that's just been granted today. Can you find us a place"?---That usually will come through the PSU. 30

So the department?---Yes.

So how often does that occur?---What, in a month, in a week?

Well, tell me. You choose?---Well, in a month twice, three times. That will be that emergency at 5 o'clock on a Friday afternoon and the carer has taken the child to the Child Safety centre. 40

And then what do you do with that child as soon as you have the care of the child?---If we a vacancy and we decide - it's then determining - a lot of cases - if it's come from

a carer situation where we have a breakdown with the carer, it might - if it's, say, a Friday afternoon, it might be just that we need to provide accommodation for this young person until Monday when the department can reconvene again and try to look for a family based placement for this child. 1

Okay. If you're looking after the child just for the weekend as an emergency care, where would you put the child up?---It would be looking at where our vacancies are as to whether or not that child - there would be no risk to that child over the weekend with the current co-tenant. 10

So you provide that service to the department as effectively bridging accommodation?---Yes.

And the department provides you with - pays you for that service?---Well, yes, it's - yes, a nightly fee.

What's that nightly fee worth?---\$97 a night around.

To put the child up?---Yes.

How is that fee determined?---That fee is based on - based around the carer's rate - of a respite carer rate. 20

Did you sort of put in a bid for that sort of government function or tender for it - - -?---No.

- - - or say to the department, "We'll do it for this amount. We'll beat anybody else"?---No.

So why does the department give you that amount? Why don't they give you double that amount per night?---Well, they might - they probably would if we actually asked for it. It's about looking at there's a need to be met. It's not about the money side of things. It's about that we have a vacancy. We have a bed for the weekend. You don't want a young person sitting - a child sitting in the department for six hours, nowhere to go and at 5 o'clock the child's still sitting there. It's not about money. 30

Naturally in one sense it's not about money, but in another sense it's entirely about money because it's public resources being used to provide care and protection for children?---Yes.

You would appreciate that public resources need to be used in an efficient and in accountable fashion?---Definitely; yes, definitely. 40

So how do we get to the point that the taxpayer pays your private company \$97 a night to look after a child at the drop of a hat? How is that figure worked out?---Yes, it's

probably based on the fact that it's \$44 child-related cost per day and then with the cost of the resi care workers and - - - 1

So the \$97 figure - is that calculated for - is that just the standard rate for emergency care or is that your unit cost right across the board? So, for instance, if I was a child that came into your care and I was moving into house F and you knew I was going to be there for months, every night that I'm there, am I worth 97 bucks a night?---No, it's calculated. With a TP placement it's calculated quarterly and that's looked at the resi care workers' cost and whether the child's at school; having the psychologist's costs; having the coordinator costs; having the admin costs; that sort of stuff. 10

But how does the department find out about that figure and say, "Yes, that's what we'll cut a cheque for"?---Well, they will say, "We have this child that needs a placement. Can you submit a budget?" So we'll submit a budget and - - -

So a budget is what, a letter that says, "We'll have the child for X number of nights at X dollars"?---Yes. 20

And then it's up to the department to say yea or nay to that?---Yes.

Who are your competitors?---Other service providers, do you want?

Yes. Who else might be saying, "Look, we can take that child for \$87 a night"?---Well, there would be other service providers. I don't know who. It's more about who's got a vacancy for that time." I don't think the department's looking at going, "Who's got the cheaper rate?" It's about - at that stage if it's an emergency placement, it's, "Who has a bed where we can have this child accommodated?" 30

Yes, but that's just like any other business, isn't it? It's, "Who's got a product to sell?" and then you talk about the price. You have got a product to sell?---Yes.

So who else might be providing the same services as you? ---Well, probably - - -

Who can provide that emergency care, say, from a Friday to a Monday?---Probably Safe Places would be one. I'm not sure who does it. I'm not sure who does TP placements. 40

How long has the going rate been about \$97 a night?---A couple of years.

What was it prior to that?---I'm not sure. I'd have to go back and have a look.

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BELLAMY, M. XN

How long have you been running this operation for? 1
---Five years in March.

Now, jump back over to residential care houses. How do you set up one of these homes?---We lease a property. We have a look at the young person who is coming in so we will look at the resi care workers to - we'll look at the need of that child, whether or not it's come from a family based placement that's broken down or whether they're coming straight from care, and then we will set the house up making sure that there is - each young person's got a bed, own bedroom; that the carers - resi care workers have their own bedroom and own bathroom. 10

How do you determine there's a need to set the house up in the first place?---Well, either we've got the house already there and it's been vacant and the department will say, you know, "You've got this house vacant. We've got this got this referral," and we do the referral process or there might be a case where they say, "We've got this young person coming through. There's just nowhere for them to go. Do you have the capacity to set up a house?" and we'll say yea or nay. 20

Now, that's their first question, "Do you have the capacity to set up a house?" and then the next series of questions of the service agreement that arises between your organisation and the state government?---Yes.

So there's a separate service agreement, we understand, for each house, isn't there?---Yes.

And each of those separate service agreements requires the state to pay the service provider with a sum of money that's worked out under that service agreement?---Yes. 30

How much does house F receive from the department?---That's a grants-funded house.

Explain what you mean by that?---It's a three-year agreement with Child Safety.

A three-year what, sorry?---Agreement with Child Safety and we get - we acquit quarterly so every quarter we will submit what our costs have been and then we will then look at - if we've gone under, then the department will take - well, the next quarter we won't receive that funding. 40

But under what?---Sorry?

Under what? You say if you go under in the quarter?---So if it's 300,000 for the year, so every quarter we will get - we have to acquit so every quarter there's an amount that you're entitled to.

Yes?---So we'll acquit that of what we've spent and then whatever we haven't spent will go back to the department and then the next quarter we'll get for that quarter the top up.

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The remaining amount, minus whatever you don't spend?
---Yes.

Now, how much is it a quarter for house F, roughly speaking? You mentioned a figure there of some 300 or so thousand?---I think it's averaged around 300, 400.

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For the house?---For a year for a house.

So a quarter would be a quarter of 3 or 4 hundred so 75 to 100 thousand dollars per quarter to run the house?---Mm.

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What do you spend that money on?---The majority of those cost go to residential care workers and then the rest of the cost is around admin fees, the employees.

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Now, I think you said before that you rented some homes. Do you rent all of the homes?---Yes.

So there are no homes that belong to - - -?---No.

- - - belong to anybody else. Sorry, belong to your organisation?---No.

10

And they're not public housing homes at all, are they? ---That house that we were talking about is, so basically when we receive grants funding in the bayside area the Cleveland Service Centre had access to a house, this house that we are looking at, and the young person in that was going to be moving to our service so they offered us to take on the lease of that house.

You told us there's about 16, 17 or 18 homes of the two varieties, residential care and grants funded places? ---Yes.

20

How much, typically, is a house worth in terms of the agreement? How much is the agreement for? Putting aside house F - - -?---Yes

- - - the other houses that you're operating, how much is a service agreement - - -?---There are all the same price except for [REDACTED], which is the [REDACTED], which is funded for four young people.

So there are all somewhere between three and \$400,000 to run these homes. What do you provide as part of that package - as part of the service agreement? What services do you provide?---Yes. We provide therapeutic model, so we have psychologists because we do not - we believe that the child - like, just going out weekly to counselling outside, external, is probably not significant for that child to work on what's why they're in care, so we have a psychologist that goes out and visits the young person once a week; they talked daily with the resi workers; they will do all the training around if there's a certain need that the young person is required or if the child has had a number of placement breakdowns the psychologist will look at that and formulate a plan around how do we get the young person or child out of our service and back into family-based or reunification or out of care.

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How many psychologists or psychiatrists do you have?---So we have psychologists, there is one to every - they do for houses.

And basically rotate around those - - -?---They have the same houses for the duration of that young person or child in placement.

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How often do you find a child moving from one house to the next?---We don't move our young people, very rarely.

So when a young person is rarely moved, what other reasons for moving a child from house X to house Y?---It might be because the child has been emergency placed and we have a house vacant in Marsden but this child is from the Gold Coast, and then a vacancy has come up on the Gold Coast so the child will move over to their to keep them in the community.

10

I'll just keep going through the photos, got slightly distracted there. What are we looking at there?---The dining table in the kitchen.

For house F. Is house F usually that neat?---Yes.

That's typical of house F?---Yes.

Are the walls always that sort of - usually cream?---Yes.

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Do you ever have damage in the houses?---Yes, we do.

What sort of damage?---We will have property damage.

How does that arise?---If a child is upset or not getting what they want sometimes we'll have a child kick a hole in the wall, punch a hole in the wall, break and furniture.

We've heard some evidence from previous witnesses of some quite horrendous damage being done to property. Can you tell us what sort of volume of property damage does your organisation sustain. So for instance is a wall punched in once a week or once a month?---Maybe once a month. We have recently had a property that was completely destroyed by a young person.

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In what sense was a completely destroyed?---All the walls were smashed in, all the furniture broken, house flooded.

What sort of cost did that - - -?---\$15,000.

- - - impact did it have on your company?---The cost for the repairs for that was \$15,000. We had - - -

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\$15,000?---Yes. We had an agreement with the department because this young person was being placed, we knew that potentially this could occur so they agreed to cover those costs if they were extensive.

So that was an agreement before the incident occurred? ---Yes.

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You were sort of preparing for a rainy day that you knew was coming?---Yes.

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And so the department placed the child in the house effectively knowing that they'd be coughing up money the damage?---There was a potential.

A potential that turned into reality?---Yes.

What happened to that child afterwards? I mean, obviously he does a lot of damage. Is that child still living in the fixed up home?---Yes.

10

And has there been further damage to that home?---Just one flooding of the house.

A subsequent flooding?---Mm'hm.

What sort of time frame between damage incident 1 and the subsequent flooding?---Probably a month.

How long ago would have this occurred?---About a month ago - probably - this happens probably a couple of weeks ago.

20

What was the catalyst for the initial rampage, if I can put it that way?---This child is only nine years old.

So a nine-year-old destroyed what in the house?---Every wall in the house.

Every wall and - - -?---Every piece of furniture.

Every piece of furniture and flooded the house?---And flooded - 150 litres of water in the house.

Wasn't there a staff member there?---Yes, there was.

30

Pardon me for putting it this way, did the staff member turned the tap off at any stage?---Yes, they did.

How did the single staff member who was there at the time to respond?---Again was turned the mains off and also the coordinator arrived as well, was trying to talk the young person down and to stop to do that behaviour, but - - -

If you had to members of staff there wouldn't that make it easier to restrain the child?---We don't restrain young people or children.

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So a nine-year-old child can rip a house to shreds - - -? ---Yes.

- - - and nobody will restrain that child?---No.

And it goes without saying that ripping a house to shreds doesn't take a few minutes, it takes a little while, I would have thought?---Mm'hm. 1

Did anyone called the police?---Yes, the police were constantly over at the house for that period of time.

How long did it take the police to arrive?---Probably half an hour.

And in the meantime in that half an hour since the police were called the damage was done?---Well, this was over a period of a couple of days and the police were continually coming back and calling back. 10

So the nine-year-old was doing a little bit of damage, the issue would not escalate as much, and then they go back and his subsequent damage?---Well, she'd have a little break or have a little drink of water and - - -

So she would have drink of water - - -?---She'd have a break and have a rest and then go back to doing it again.

I suppose it's tiring work ripping a house to bits? ---Exactly, yes. 20

Surely you would have sought to remove a child from the house if the child was progressively carving the house up? ---Yes, child was admitted into the Mater hospital.

What, after the two days of damage?---She was taken up to the hospital on a number of occasions over that period of time to be assessed to whether she had any - whether she required an admittance into Mater.

And then she was discharged by, one presumes, the mental health unit at the Mater?---Yes, because of behaviour. 30

And then she would return home only to shred your place? ---And do it again. And then she'd go off again and then come back, yes.

How many times did that occur?---Probably about five times.

Would it have been cheaper for the taxpayer just get the child in the ward?---It would be, except that the hospital does not admit children with behavioural. They will only with the child if they have mental health issues. 40

Obviously I don't want you to say the child's name, but does this child have mental health issues, to your knowledge?---I'm not a - I don't have the - it's behavioural. The majority of it would be behavioural. There is significant trauma attached to this child and, you know, extensive history of abuse.

And the child is nine years old?---Mm'hm.

1

How long has the child being in care for?---She's been in care November last year.

And that child is still in your care?---Yes.

How long has your organisation in total had that child for?
---Since she - she was admitted to the Mater, her mother decided that she did not have the capacity to look after her so she was left in the Mater, then she left the Mater straight to us.

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Had that child been - so that child's first period of care was when that child was in your care?---Yes. 1

Prior to being in your care the child was for a brief period of time in the Mater and prior to that with the child's natural mother?---With a number of family members.

That child has settled down now?---Significantly settled.

Have you added any extra resources just in case there is not a second but a third repeat of that offence - or that event?---We have identified peak times for this child. So we have put two - another worker on for those peak times and we're slowly reducing that when - so it's looking at the peak times, it's looking at, with this young person - with this child, about her feeling safe, because that was the big concern with her, was due to her history, the safety aspects. So for us it was about having those consistent workers establishing some sort of rapport. While she was in hospital we every day were eight to 10 hours up there, up at the hospital, taking her out, getting to know her, those workers getting to know her, so when she came back to placement - - - 10

Yes. Right at the end of my questioning you I was going to turn to the topic of what is variously described as secure care?---Yes. 20

I think you've made reference to it in your statement in a couple of points there?---Yes.

Having heard what you've just told me about this nine-year-old, perhaps now is a good time to ask you your views as someone who runs a rather large organisation that provides care in a number of formats. Would that girl benefit from what might be described as secure care?---Yes, temporarily, and I think that secure care - we have probably two young people that I can identify that would have benefitted - - - 30

Sorry, I didn't catch that?---Two young people that - two children that would benefit from the secure care model, and that would have to be a house that's purposefully built that you can contain a child within a placement and having - - -

That would require a lot more staff than just one or two staff at any one time, wouldn't it?---You would go with two staff. 40

For secure - or what do you understand by "secure care"? ---Secure care is something that's purposely built to contain a young person, to be able to have the workers - there will be times where restraint is required and to be able to seclude the child if required just until those

behaviours have settled and then once the behaviour has settled you can start working on the emotional stability of the child and move them out of that. So it wouldn't be a long term - and for the risk, because we have some of our - like, the nine-year-old, you know, running away from the placement and not concerned about road safety. So again, when in a heightened state and running down the road you can't have a resi care worker following her. It puts her more at risk. So that sort of facility to contain for that period of time until you can work on those behaviours and settle - - -

1

This nine-year-old who had these couple of incidents, the house that they were living in, a residential care house, was there a second or third child living in the house? ---She originally was placed with a young person, another 10-year-old and because those behaviours that she was demonstrating were not clear because the department - because she just came into the department's eye, so it wasn't - a lot of that - a lot of historical stuff wasn't known around behaviours and it wasn't until, kind of like, talked to mum and got some more information and then when that significant property damage was beginning we removed that child and placed her in another placement.

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So there was one house being run for this one nine-year-old child?---Yes.

With one carer on at all times?---Yes.

In that dynamic, for one reason or another, the child decided to trash the place?---Yes.

Now, I just want to pick up what you said about the information that you had or did not have available to you from the department. Just looking at page 4 of your statement at paragraph 21 - do you have a copy of your statement there?---I do.

30

The opening sentence of that, "Inaccuracy in referral information. Probably 80 per cent of referrals we are given have information that has not been updated with current information and presentation"?---Yes.

What do you mean by that?---So most of the referrals that we receive will not have the current presentation of the child or the current situation or updated - if a referral is done in 2011 there might be a couple of updated information but there's a lot of gaps in those referrals.

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So in the referral, being the formal advice you're given from the department about, "Please take this child and here's who they are," there are lots of gaps in the information?---Yes, and that's why we ring the service centre that has the child to get more information before we make the decision.

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What are the consequences of - I suppose I've half answered it already. What are the consequences of not having all that information?---It's very hard to match a child or place a child, and I think it's even more difficult if you're trying to - for carers, if you're trying to have a child placed with a carer if you've not got current information, if you've got historical, because a lot of the historical stuff is quite horrific and quite - you know, they're - and it needs to be balanced on the referral of what changes have happened, what has worked, what hasn't worked, where the child is currently presented, even with schooling, how - like, all that information needs to be provided. 10

But you'd accept that there's some things that the department can't and shouldn't give you in terms of that child's background, so history that might in some way be subject to confidentiality requirements. You'd accept there's some things you just can't and shouldn't have access to, would you?---I think the more information we have, the better informed we are, the more work that we can do with the young person or child of getting a good understanding of the background. I know that we go into the department and read files. We get permission to do that. Because we've got psychologists on board it's beneficial for them to have as much information, so we do that joint sharing of information so that everybody has a clear understanding of where this child is, what's the current presentation, what's happened in the past. So I'm not sure what information you wouldn't share. 20

Well, particulars about the family that child came from. So if that family had a - if one of their parents had a particularly horrific history or something like that, that might be protected information under some arrangement? ---Yes, if it's protected you'd get - whatever information you can get - information is crucial to be able to put forward - you know, to get an idea of the young person or child in placement. 30

Tell me about the qualifications of your residential care workers?---Yes, so that will range from, like, the cert III in youth working right through to tertiary qualifications.

Does everybody have a certificate III or above?---Yes.

Can they actually get a job without a certificate III?---If they've got extensive residential care history and that we support them in doing the cert III while they're with us. 40

How many of your staff would have bachelors or above qualifications?---Probably a third of them.

I just want to turn to one of the opinions you express on page 4, paragraph 18. I'll read it out for the purposes of

the hearing: "Difficulty in recruiting foster carers. I think that foster carers need to be paid as professionals. They need a salary rather than an allowance. There is a need to financially subsidise the foster carers if you're expecting one of them to stay at home and help a child reach their milestones. Foster carers also need to be provided with more psychological support and upskilling. Foster carers should possibly be rewarded with bonuses. Example: if the child stays in school all year the foster carer could receive a bonus at the end of the year like a holiday." Now, I appreciate that you don't run a foster care system?---No.

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But your service complements foster care?---Yes, and we get the majority of our - well, it goes in cycles, but the majority of our children will be under the age of 12 which should be either back at home or in a family based placement.

So the majority of your clients are under the age of 12?
---Are under 12, yes.

What sort of numbers are we talking about here, 30 or so?
---Well, we've got I think about 26 children or young people. Probably half of them - more than half of them at the moment.

20

So you've currently got 26 children and more than half of them are under the age of 12?---Yes.

COMMISSIONER: I thought the policy of the department was not to place children under 12 in residential?

MR HADDRICK: I recall that too?---It's exceptional circumstances, if there's no placement - if there's nowhere for them to go then they do put in - it goes up to the RD and we get an email to confirm that the RD has given approval.

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COMMISSIONER: So in your residential half of them are placed with you because there's nowhere else to put them?
---Basically there's - yes, the majority of our children will come because they've had multiple placement breakdowns with family based placements with carers and there is just no carers to accommodate them so they'll come to us. We'll do some therapeutic work with them around the placement breakdowns, working with the child around their behaviours and then getting them back to family based so - - -

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So you're a step down?---Yes.

MR HADDRICK: What's the youngest age of a child that you have in care at the moment?---At the moment is eight, I think - nine. 1

Is that sort of the bottom of the range that you would normally have?---Yes, it's around the eight to 12. We have had younger in the past.

COMMISSIONER: What's the longest period of time that you have had someone in your residence?---We currently have one young person that's been with us for about a year and a half and that - the majority of our under 12's at the moment can be moved to family based placements and that's our continual conversations with the department, about finding a foster family for them. They're with us because of capacity. 10

What you're hired to do by the department is to provide a step-down service which by definition is get the children into a position where they can be given a stable foster placement?---Yes.

And you have got a relatively short period to do that, say, up to two years?---We like to have them for probably six months to a year if there has been multiple placement breakdowns. 20

But you have got one now that you have had for 18 months? ---Based on the fact that the department cannot find a foster family for this child.

So your preference is to be able to - - -?---Get them in and get them out.

- - - do your job within less than 12 months?---Mm'hm. 30

Not just to be an alternative placement for a hard-to-place child?---No.

But to actually get a child into a position where they can be placed in a foster - - -?---Yes, as soon as we have the child in our placement, we're looking at how do we get them out.

And you like to get them out within 12 months, but on this occasion - on one occasion at least the department has basically said, "Well, look, you'll have to keep this fellow because there's no-one else to put him"?---At this stage, yes. So for us we just - we take on like a parent model so what we will do is we will look at having the resi care workers implement that as it would - kind of replicate that as would be with a carer environment, so not setting up the child - like, not doing a lot of, you know, going to movies every the week; going to Dreamworld; doing all that 40

sort of stuff. It's looking at what capacity does the carer have to look after the child when the child leaves us so for us it's about modelling that parent model; you know, putting in outcomes; you know, like - - -

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So try and normalise?---Yes, like grounding, that sort of stuff.

All right. So how it works in the real world as much as you can?---Yes, as much as we can in a - - -

In this unreal environment?---Yes, and for us ideally it's not - you know, residential is not a place that we think these young people and children should be so for us it's about getting them out as quick as possibly, getting them stable, getting that work done and then doing - we do do support for the carers. If there's a carer that's been identified, our psychologist who's been working within that placement will go and do some work with the carer to try to get that placement - - -

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All right. How many children have you had rotated through your residential?---Back into family based placement?

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Yes?---Over the five years probably 15 to 20.

That's not many?---Considering that we've only got 26 - we've grown over the past so - - -

Right?---Yes, and we've probably got, like, about eight at the moment that could go to family based. There's just no placement for them.

What, they're all ready willing and able to go?---Yes, because when we get them, they're usually classed as complex, high complex and then with doing that work with them through the therapeutic model we can get them down to moderate to high so once that occurs, we will update the department weekly around, you know, the improvements and what we've seen with the young person.

30

Do you have any bounce back?---We have had one come back and that was based where the carer that was identified - we strongly advocated that probably wasn't the best placement for that child.

Right. So do you do carer screening?---No, we don't have - we just get informed by the department when they have identified a carer. We will send weekly updates to the placement service unit so that they can see how the child's going and what's going on. So they can continually update the referral so that - - -

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So who do you deal with?---PSU.

PSU?---Yes.

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Do they ask your advice about what characteristics a suitable carer would have?---Yes, and that's weekly, weekly updates, and also I usually will have daily phone calls with the PSU around - - -

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The family placement that the children, young people, go to - is that normally intensive fostering?---No, not necessarily. We have had young people that have - children that have been in the intensive care and we've been able to have them go back to just general carers.

Now, obviously all children are unique - - -?---Yes.

10

- - - and their problems will differ, but if you were asked to identify what the most common trait of young people who have come through your facility is, what would you say it was? What's the most common need?---Common reason why a family based placement will break down?

What do you have to work with? What do you have to - - -? ---Usually it's children that have extreme behaviours where they will do the property damage. They will do the hitting, spitting, abuse.

20

So it's behavioural?---It's more behavioural and with that behavioural - once that's worked on, you can get down to the underlying emotional and - - -

What's the behavioural symptom of generally?---Usually it's based on - it's coming from the trauma and the history of the child and they've been in placements.

What, a harm impact?---Yes; yes.

It's not innate in the sense that it's not from a disability or impairment or - - -?---No; no, it's children that have come through that have lots of gaps in their milestones and have - obviously they've been removed from the parents because of neglect, abuse, all that sort of stuff and then they usually will go straight to foster, family based placement, and - - -

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When they shouldn't or ideally they should have you first? ---Well, with those extreme behaviours they should, yes, because otherwise you're going to have the foster carer - it break down and that's why you've got - - -

It seems circular to me because they come to you because of the placement breakdown?---Yes.

40

And the placement breaks down because of their extreme behaviour?---Yes.

What you do is you correct extreme behaviour?---Yes; yes, our ideal model is that - would be to have the residentials

as we have now, in between have house parents so that they can - and then have the family based or reunified back home so just have that consistent model - - -

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So speaking in child-protection language, what need of these children do you meet that enables you to put them back into the family-placement situation?---What do we do?

What need to you meet?---What need do we meet?

Yes. Everyone talks about meeting children's needs?---Yes.

10

Okay. What need do they have that you meet that enables you to put them back into a family-placement situation? ---Yes, it's giving - it's looking at them from a therapy side of things with the psychologist having a look at their emotional wellbeing, where they've come from, talking them through what's going on with them, what's happened in the past, looking at what we can do for the future, giving them strategies - - -

So it's resolving the past experiences, is it?---Yes, and making them - you know, looking at not being - you know, "What's happened has happened and it's not been your fault," then explain things. We tend to be quite open and honest with our young people and children.

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So it's bringing them to terms with their history?---Yes, and working through that and giving them strategies for their coping mechanisms and to be able to, you know, adapt their behaviour, looking at the normal, what's normal, you know, and giving them boundaries and giving them structure, giving them routine; those normal things like, you know, sitting at a table as a whole and eating and, you know, normal bedtimes - - -

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So if I just want to put it into a couple of words, it would be you're building their coping capacities?---Yes.

Their self-protective abilities?---Yes.

And their resilience?---Resilience, yes.

Is that it?---Yes.

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MR HADDRICK: Can I just return to the way you interact or your organisation interacts with the department?---Yes. 1

Now, I asked you some questions about funding before in relation to transitional placement?---Yes.

How does the service agreement and the payment that your organisation proceeds from the department for residential care places get worked out? So you want to open a home up for young people, either you identify the need or the department has identified the need and all parties are agreeable to open the house up. How does that service agreement - the figure arrived at that you will charge and the department will pay for the provision of that house? ---That's within our TP, because with the grants funded there is an amount that's already set that you've got to come under. Like, the department has already established that an extreme house will cost between this much and this much; a moderate house will cost - so with grants funding you put in an application to submit - like a tender - to take on that. 10

So that quantum - the figure is already predetermined? ---Through grants funding, yes. 20

And you are asked for - - -?---A breakdown of how that money will be spent.

And ask for effectively an allocation of that funds to implement a service agreement?---Yes.

And what happens if you come under budget? Say instance the house costs \$400,000 a year to run, all quarters added together?---Yes.

And you come in at \$350,000 because you've made efficiencies here, there and everywhere and you've worked out the correct models to deliver all the services ad it comes in at 350K and you've got 400K, what happens to that other 50K?---That money gets given back to the department. 30

Okay. When was the last time you gave some money back to the department?---Well, probably this quarter. We've just submitted our quarterlies so we were underspent in some of our residential.

What sort of underspends do you record, ballpark? ---10 per cent. 40

So if a house costs 400,000 you're giving back 40 grand to the taxpayer?---Yes. It depends on whether or not a house has had property damage or whether or not another young person has come in. Yes, it's dependent each time at the quarter. And we have - - -

Now, what - other than residential care and transitional places, just tell us what are the other services your organisation provides?---Yes, we do - so we do the grants funded and the TP, plus we do an intensive placement support, which is our psychologist going into a carer's home or a family home and doing some work with the carer or the parents around up-skilling them, teaching them how to manage the child or young person.

1

I'm really struggling to understand the difference between TP and grants funding?---There's no difference with us, it's just that grants funding is the money that we have been given based on that we were chosen to perform that service, where TP - our TPs and grants funded run exactly the same except with the TP you've got to, every three months, submit a budget.

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Okay. I just want to sharpen up what the difference between those two ideas is?---Yes.

So you have bunch of transitional places - - -?---Yes.

- - - which are just for transitional places, and you have a budget and there's a service agreement with the state for the provision of those transitional places. Grants funded places are - what, how are they different to what I've just described?---The grants funded is that you're funded for three years.

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So it's simply the longevity of the envelope of money. There's no other difference at all?---TP should not be long term. TP is seen as a transitional placement, which is a short term, where residential can be seen as a longer term option for the child or young person.

But I understood that to be a third type of care option provided; there's residential care, transitional places and grants funded?---No, residential care is just a generic name of what we call all our placements.

30

Okay. So residential care, transitional care?---Yes.

Grants funded is the way the department describes - - -? ---Describes the TP or grants funded, yes.

- - - is the methodology in which the payment is made for the provision of the service?---TP is quarterly - TP, you submit a quarter - a three-monthly budget; with grants funding you acquit and receive funds every quarter.

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Now, at the top of your organisation is yourself and your other director and the management staff or the central staff that supply services to all the different homes. Who pays for all that?---That comes out of the budget - the money that we receive from child safety.

So there is a portion of the funding for each location - - -?---Yes. 1

- - - which is budgeted back or effectively sent back to headquarters to pay for the central functions?---Yes, every house has a different budget - a budget attributed to that house.

What sort of contribution - say for instance house F - of the total funding envelope, the amount of money that the state gives your organisation to run house F, what portion of that do you take out of that funding envelope to run the central operations of your organisation?---That would be 10 per cent, I'm assuming. Like, it's usually 80 per cent of resi care workers, that money comes out and then - maybe 20 per cent, yes. 10

So perhaps 20 per cent of the budget for house F goes to central functions?---Would go to the coordinator, paying the coordinator's wages, the psychologist's wage, admin costs, yes.

So when you say the coordinator's wage, so the coordinator is budgeted in the central cost, not in the cost associated with that house?---That - yes, because every budget is budgeted into having a psych and a coordinator, so it might be 0.5, 0.25, depending on the need of that house. 20

Now, what happens if you have an empty bed in a house? Say, for instance, you've got a four-person house, two people leave relatively quickly because of whatever reasons?---Yes.

Hopefully good reasons?---Yes.

What happens to the house? Does it still run on two kids? ---If its grant funded that is a set amount of money and you get that quarterly, like I said. So at the end of a quarter we'd acquit to who we had, whether we needed, you know, a youth worker, to youth workers or whatever. So that would be acquitted. With the TP placements we had two young people in a placement, the budget is usually made up of either a split budget, so the two young people would split the budget; or you'll have one young person having a full budget and then you'll have a secondary young person. 30

So there is a separate bucket of money for each child in the transitional placements?---Yes. 40

You just need to say, "Yes" or, "No"?---Yes.

So if somebody leaves the transition placement, that bucket of money associated with them disappears?---Yes.

Now, one presumes that you can sort of get economies of scale, if you have two children in transitional placement you can spread the costs amongst the buckets of money for those two children, as opposed to if it all had to come out of the one child. Do you follow what I'm saying?---No.

1

What I'm suggesting is that if I was a carer employed to provide care for two kids in a transitional place and one child departed, then instead of being able to pay my salary out of the amounts of money that you get for each of those kids, you'd have to pay my salary out of the one kid who's left, wouldn't you?---Yes. With two children the budget is the same.

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Now, there's a bit of evidence you gave earlier that sort of jumped out at me. You said the average age of the kids that you have in - and correct me if I'm wrong - transitional places was somewhere between eight and 12. Is that correct?---Yes.

That's quite different to some of the evidence we've received in previous days where as the Commissioner identified, we understood it to be at least a loose rule that you have to be 12 and above to be in residential care. And I know that is something different to transitional places but it's a form of care. Would it be fair to say that the bulk of your operations are designed to respond to much younger children, much younger than the other kids in care around Queensland?---Is that - - -

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I'm not saying there's anything wrong with that, I'm just saying you're responding to a different need?---Yes, in - like, south-east we're the preferred agency for the under 12's because we can get them out of residential care quicker.

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Now, another piece of evidence that we've received in the past, we've sort of heard what the global cost of running a residential home is from a variety of different homes. We've gone through about four or five of them and they're all roughly the same, between 800 and 1.1 million per home for a four person place. Now, your evidence to us today is that your residential homes are between 350, 400 per year to run a residential home?---Yes, that's based on - we don't do four-bed residentials, we only do the two-bed residentials.

So you're providing a service for two children. So on a unit cost - as in per child - it's about roughly the same? ---The same, yes, because we believe that more intensive work can be done with two young people rather than four young people in a residential if they're four complex young people.

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much more expensive things that we need to pay for than younger kids might not necessarily need." Now, you will probably tell me that there are - - -?---Well, our cost for our older ones is exactly the same. We have - yes, like, it's - our TP and grants funded, it is no different in cost.

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But I just want to sharpen up this point. We've been told from other residential that quite often they lose a person in the home, so they go down from four to three, and on occasions we've heard about two person homes for kids between the ages of 12 and 18, where the homes have been costing 800 to 1.2 million. It's not a criticism of you? ---No.

10

Perhaps it's a criticism of them that they seem to be running a home that costs twice as much as you do?---Well, I'd be - - -

Why are you able to do such a good job when they can't? ---Well, I'd probably be questioning as to why - if they're funded for four spots and they've only got two young people in there why they don't have those two beds filled, because that's where the money - so that money is obviously being - - -

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Well, their response to effectively that question is that their costs are by and large fixed costs. So the loss of one - I'm not saying I agree with it, I'm just putting that they're putting as a compare contrast to you how they operate theirs as opposed to yours. They're saying if they lose one or lose two that doesn't result in much cost savings for the provision of that house. They still have the house to pay for, the cars that are provided there, the staffing composition. Now, they've told us that they have a much larger staffing composition?---Yes.

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Why would they have more staff than you would per house? ---Probably the ratio of children is - their ratio is more - probably, I'm assuming, one youth worker to two young people than two - three or four.

COMMISSIONER: But that's the same ratio you use?---Yes. We will go - we will do - yes, one youth worker or residential care worker to two young people, depending - - -

What's being put to you, though, is that they're not at full capacity, so therefore they're not caring for four as they're funded for, they're caring for the same number as you are?---Yes.

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So you're being asked to give your opinion about the difference in how much it costs you to do the same work, apparently. Why are your costs different to theirs if

you're using the same staff ratio, caring for the same number of children and essentially doing the same sort of work? Can you think of anything from your experience that might explain why you're cheaper than - - -

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MR HADDRICK: Cheaper by about a quarter of a million dollars per child?---Well, I don't know. I think we realistically looked at what we do need. When we looked at the budgets around what we realistically need I think - - -

COMMISSIONER: Well, you don't under-charge the department, do you?---Well, we don't charge - even with our TP, if we've got a full budget on the TP - - -

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You're for profit, aren't you?---Yes.

So not only do you - comparing yourself with a not for profit, a charitable organisation, not only do you provide the services to the same number of people in the same sort of way but you make a profit out of it as well based on - - -?---Well, based on - - -

- - - how much you're paid for by the department?---Well, based on - yes, because it's a for profit organisation.

20

Yes, that's right. So you can make a profit as well as providing the services?---Yes, but I can put on record that we don't make a profit with it. I think - I just think that realistically we look at what is required. If the TP - if on a TP budget we have submitted our 24/7 budget to the department, we work towards getting that young person to school and that child starts school - between 3 o'clock, we do not - when we invoice the department we do not invoice for that period in our costings.

MR HADDRICK: But, I mean, that might be part of the answer, but if you're running a house for the same number of children, two children, as another residential home that could be running for two children, yet they're costing all of us, Queensland taxpayers, 800 to 1.2 million per house, and you're costing us a lot less, on a per head basis about a quarter of a million dollars less per child, for the running of the same house, where are the cuts? How are you able to do that much, much cheaper than these not for profit community based organisations?---Whether we not we don't have the overheads or the top heavy - in the, you know, organisation. We put on who we need and what we need. Like, that - - -

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Well, I might be able to help you with one part of the answer?---Yes.

You've identified in your statement, I think you said there before that you have minimal staff costs during school hours. So you're not - someone is not clocked on, being

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paid, effectively, by the taxpayer, to sit there while a child should be at school?---Yes. Realistically, we can charge that if we wanted to. No-one would know any different. That's the thing, so I think it's about looking at realistically the costings and where people are - like, do you need two residential care workers 24/7, do you need to have, you know, them being paid activities every second day? It's looking at in general where all the costs are, .

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COMMISSIONER: In the one that you're obviously thinking about, Mr Haddrick, the only reason they need staff on during the day is because - well, the person who needs to be looked after, chooses not to work or to go to school? ---Yes, and I think - yes, and if we have a child or young person that refuses to go to school then you have to have a youth worker there present. Between the hours of 9.00 and 3.00 we do school work with our children and young people.

10

Even though the law requires every child to go to school? ---Well, yes, and that's why we choose not to do anything - any other activity other than a school based activity at home.

MR HADDRICK: You refer to that in paragraph 17 of your statement, if I could just take you there, where you say, "So with the aid of an educational resource officer a curriculum will be formed for the child and during the day between 9.00 and 3.00 the carer will take the child through school work." That's where the child is not attending school, refuses to attend school, you put them through their own home school during that period of time if you can get them to agree to it?---Yes. Well, if they don't agree to it they sit and do nothing else for the day.

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COMMISSIONER: Well, see, that's the point. 1

MR HADDRICK: And then you go on to say, "So during those hours we will not engage with the child in any activity other than schoolwork. This gives the child an incentive to actually go to school"?---It's quite boring.

COMMISSIONER: The state already provides schools for them to go to.

MR HADDRICK: That is correct?---Yes, and some young people choose not to go to school or there's multiple suspensions or we're doing a gradual entry so for us it's about modelling that. It is compulsory to be at school between 9.00 and 3.00. How do we get there? That's what the education resource officer is helpful in doing. 10

COMMISSIONER: So what the state does is provide a school for them to go to, but when they choose not to go to it, it also pays for a resource officer to work out what's the best way to try to get them to go?---Well, that's in - well, it's not only the resource officer. It's the coordinator. It's the CSO. 20

It takes a number of people to try and work out?---Yes, the stakeholders to try to work out what to do with this child who won't - - -

And what's usually the solution that you come up with after all this?---Well, usually it's back - from my experience within Youth Lifestyle Options the majority of our children are at school now. So sometimes they will come to us with multiple suspensions, multiple - you know, gradual entries, no schooling and for us it's about earning or learning. So with our younger ones it's about getting them back into school which we have got a high success rate or it's that learning for our older ones who are transitioning out. 30

Mr Haddrick, do you know one way of finding out where the savings are? That's to compare the books.

MR HADDRICK: I would have thought so.

COMMISSIONER: Why don't we do that?

MR HADDRICK: Here's perhaps another saving, if I could take you to paragraph 32. I'm not suggesting this is wrong. In a sense it could be a criticism of the other homes that aren't being run as efficiently as your homes on one interpretation. Paragraph 32, "If it is the older young people who are frequent absconders and think that we are their taxi service and at 2 o'clock in the morning want to be picked up, we will not pick them up"?---That's correct.. 40

Now, that's admirable in one sense because it imparts a sense of some responsibility on the young person. We have heard evidence from other homes that they have a number of vehicles and staff that will go to wherever that child is and, quite frankly, on some of the evidence we have heard they will actually follow that child to make sure that child doesn't get up to mischief. How many cars per house do you provide?--We don't provide. The residential care workers provide their own car.

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So there are no vehicles at the house?---No.

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So if an emergency occurred or - - -?---No, their own car is. The residential worker who is on shift has their car there.

So the cost of transport, if there needs to be some transport, is effectively outsourced as a management model to the residential care worker?---Well, they'll be paid a kilometre fee.

Yes, exactly, outsourced to perform that function?---Yes.

So there's no purchasing of a station wagon and an SUV or something like that per house?---No.

20

That's a sensible cost saving from your perspective?---Yes.

You just need to say, "Yes" or, "No"?---Yes.

Do you provide taxi chips, I think they used to be called, to young people should they need to get to something?---No; no - to get something?

To get to something that they need to attend to?---Yes, they will have go cards to get to - or we will transport - like, if there's an activity on that they need to go to, we drive them there. What that statement is talking about is those frequent absconders who every night at 2 o'clock will ring up and say, "I want a lift home"; come home; sleep; get up at 9 o'clock in the morning; take off again till 2 o'clock. So that's - and that's usually based on those older young people that - - -

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Yes, but that aspect slightly troubles me in this sense: your evidence to us so far is the majority - not all but the majority of your children in your care are in that eight to 12-year category. That's correct, isn't it? ---Yeah, that's a different scenario with picking up and transporting - - -

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Hang on; let me just explore this out a bit more. Now, if a child between eight to 12 absconded for whatever reason - - -?---Yes.

Usually their own crazy thoughts to do that?---Yes.

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And they ring up at, say, 11 pm, "I'm in the next suburb. I'm in the commercial precinct of the next suburb"?---Yes.

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How does that eight to 11-year-old get home?---We go and pick them up.

So you do provide the transport for the child?---For the younger ones.

What age do they become responsible for their own transports?---Well, it's depending on individual cases so it's - and it's usually the older ones, the 15 and 16-year-olds, who are quite capable of getting themselves on a bus or getting on a train or getting to different suburbs, then they can get themselves back if they choose to leave the placement without being authorised.

10

When you say they choose to leave, what pressure or authority do your employees apply to children to make sure they remain in the premises that they are allocated to, if at all?---If at all. Well, they're encouraged to stay in placement. They're very clear on what the plan of the day is and what's expected of them for the day. If they choose, we can't lock them in a house so the doors are unlocked. If they choose to walk out at 10 o'clock in the morning and go, there's not much other than trying to redirect them; trying to talk to them about what the plan for the day is; try to talk to them about why they're wanting to go; is it their - throwing out some ideas; some strategies.

20

Say, for instance, I was a 12-year-old who was in your care and I decided at 6 pm on a Friday night I was just going to wander off to see my mates. At what point in time does your carer raise the alarm?---Well, they will follow them to encourage them to return back. If the child runs off and we don't - are you saying where we know they are?

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Well, give me the two scenarios?---Yes, if they run off out of sight of the resi care worker, then the resi care worker will up-line to either the coordinator or our on-call service and let us know that the child has left the place and don't know where they are.

Decamped?---"He was talking earlier about going down to the shopping centre," and then usually what will happen is the resi care worker will be directed just to go around for a drive around; have a look and see if they can find the child. If not, come back to placement and notify the police, depending on age as well.

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After how many hours or no contact and no knowledge of where the child is does someone hit the alarm button? ---Depending on age and depending on risk, it could be immediately. It could be up to two hours.

So at the end of two hours you don't know where the child is. The alarm button will always be sounded. There will always be a missing person's report lodged?---Well, the police will not do a missing person's report until after 24 hours so you can do a flag and let them know that this child has - depending on the age and with the risk as well too and sometimes if it's a situation where a child is, like, eight years old and you're calling 15 minutes, 10 minutes after you can't find the child, then the police will usually request you to come down and at the station do a report so that the identification is done from there.

1

And your staff do that?---Yes.

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Now, you said you can ring and do a flag, I think were your words?---Yes.

So the clock starts to tick from the point the phone call is made?---Yes.

And 24 hours after the flag is raise, then it becomes a real issue?---You can do a missing - yes, missing person's.

Now, are young people allowed to have friends come over to the place?---Not to the placement.

20

So they live in the home with their one carer?---And usually a co-tenant. It's for the privacy and just having the residential as a safe place for them to be so that they can come to the house and be safe and outside we encourage - we get - they do visits for friends at school. They do - some young people have overnight contact with friends so that's all encouraged.

So you do facilitate contact with friends outside school, just not - - -?---Not in the placement due to the fact that usually there's a co-tenant there and it's sometimes very awkward to have one young person's friends come over and this one - - -

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And the other one has no friends?---Yes, so it's a balance. So that's your safe environment. That's your safe place.

Now, in terms of entertainment, what do you provide for young people?---With entertainment?

Do they all have big flat-screen TV's in their room?---No, no TV's in bedrooms.

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In none of the houses?---No.

Why not?---Because we encourage that TV time should be restricted around - because we're more about the talking and communicating and how a family runs. So for us it is TV is in the lounge room and we will have usually a TV - a

small TV in the chill-out room with the Wii or the PlayStation so that that doesn't interfere. TV time is restricted till usually after dinner and chores because we encourage between after school - between that and dinnertime to be out in the community or getting some exercise or, you know, engaging with whoever's in the house as a household.

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Keep working through the photos. What have we got there once it comes on?---There's the chill-out room or the toy room. It's probably called the chill-out room because it's for older young people.

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So there's obviously something around this corner, isn't there? What might be around that corner there?---There's a TV and an entertainment PlayStation.

Who uses that room, just the two residents?---The two, yes.

What's through there? That's just a cupboard, is it? ---That's just a cupboard, yes.

Now, the carer's bedroom - where is that located vis-à-vis the children's rooms?---Where you saw the lounge room and the kitchen there's a hallway. The carer's room's on the - if you look here where the hallway is - - -

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Just here?---Yes, the young people's rooms are down to your right and the carer's room's on your left in the hallway.

Obviously that's self-explanatory, but just for the record that's the laundry?---That's the laundry, yes.

Who does the laundry?---The laundry is done usually by the young people with the help of the carers if they can't do it. It's about teaching them those skills so - and the carers will do their own washing.

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So take, for instance, the eight-year-olds, the 12-year-old cohort. They will generally do their own washing, will they?---They will help; like, they'll carry the basket. They'll put the clothes in. So you're teaching them those general skills. It's not, "You go put your washing on." It's about teaching them those skills to be able to do it so - - -

What if they don't?---Their washing just stays there for a little while.

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Say, if I was a little naughty boy and I didn't do my washing, what happens to my washing?---Well, you'd be talking to that child to try to talk about the benefit of doing the washing and all that. If it all fails, then you'd be doing it.

So the carers are required to do the washing - - -?---Well, 1
the child needs to have clean clothes, yes.

- - - if their positive reinforcement doesn't work?---Yeah,
but you would think that you would be able - majority of
times be able to work through that. That's a pretty simple
case.

What about for the older children, say, 13, 14, 15, 16 - do
they do their own washing?---Yes.

And by that age, particularly the latter years, children 10
start to know how all the rules work and they are able to
play the system. Do you ever find young people know, "At
the end of the day I don't have to do my washing"?---And
with those older ones of 15, 16, 17-year-olds - well,
that's a choice that they make.

So they either wash the clothes or they rewear the clothes?
---Well, from my experience they end up washing the
clothes. That's usually a test to see whether you'll go
and do the washing for them.

COMMISSIONER: So it's to have - - -?---Because they need 20
to have those - because you're looking at - you're talking
about age of young people that are transitioning out of
care. They need to have those skills. They need to know
that if you - you need to be able to wash your clothes and
go outside with clean clothes. If you don't, people are
going to comment on it.

MR HADDRICK: So you have sort of a tough-love policy?
---Well, it's a life skill.

Nicely put?---Yes, that we all need. 30

COMMISSIONER: I think I can a lot of that - - -

MR HADDRICK: Sorry?

COMMISSIONER: I think I can take a lot of that for
granted.

MR HADDRICK: That is obviously the bathroom?---Yes.

Is it the only bathroom in the house?---No, there's another
bathroom and toilet in the en suite of the residential care
workers room. 40

And that's just for the residential care worker?---Yes.

Now, is there any form of safety for the residential care
worker in the house?---Yes, all our houses have a key
system which the residential care workers have. Their
bedroom is locked just for privacy and for safety reasons

and then within that carer's room we have the walk-in wardrobe which has the same lock on it with the key and that has an office. It's set up as an office and that's locked and then we have a filing cabinet within that office which has the confidential - all the confidential materials, all the sharps, all that's locked into, so we have triple security.

1

Now, you mentioned "sharps". What sort of first aid training do all the staff go through?---It's mandatory for all the residential care workers have first aid training.

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Can they get a job there if they haven't received first aid training?---They would have to show us proof that they were doing that; like, beginning - - -

That they were currently engaged in it?---Yes.

And after some period of time they would have to confirm they had completed it?---Yes.

If they don't get through that, then, "Thanks for coming"? ---Yes, exactly.

20

Now, what's that?---That's the backyard.

Get used much?---Yes, they kick the ball. I'm sure they'll be able to tell you. Yes, kick a ball outside.

And this photo here - what's this of?---That's an extra room so that room's used for just sitting and reading so that's a - because this house has a number of bedrooms so that's just an open room.

So it's a surplus room that's in the house?---Yes, so another sitting area.

30

Now, have you ever had to shut down a house at all?---No.

So you have just been constantly growing your operations? ---Yes.

Opening a new house, populating the house and then moving onto the next house?---Well, yes, but we don't move on to the next house until we know that all our houses are running properly and the quality is there; like, it's not about quantity. It's about the quality. So for us if we don't open another house this year, that's fine, as long as we can say that all our houses are running.

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I want to turn to that quality issue, if I could, please, and I just want to take you to a line in your statement on page 2, please. In particular 7 you say in the last two sentences, "Temporary placements should be licensed.

Temporary placements are uncheckable and not monitored." 1
What do you mean by that?---Well, that's talking about TP
placements because with - with grants funded it is licensed
so you have to have your licence to enable you to get
grants funded. With TP it's you open a house; place a
child there. There's not the same amount of monitoring as
there is with grants funding so - - -

What sort of monitoring is there?---It's just the CSO
visiting when they visit.

This is no reflection on you. Perhaps it's a reflection on 10
the department. The department permits you to open up a
house?---Mm'hm.

You get temporary placement money for that house?---Yes.

And then the department applies a certain regime of quality
assurance to the house. That's yes or no?---Does the
department place - - -

What quality assurance does the department require of you
as a provider of a temporary placement?---To provide the
needs of the child that's been placed with us. 20

Yes, just like school inspector goes and - used to in
certainly days gone by would go around and check schools
and make sure schools were doing the right job 20 or
30 years ago?---Yes.

What does the department do to your organisation and to
other organisations to go around and check the temporary
placements are in some sense up to scratch?---In the TP
model?

Yes?---Probably zero. 30

Sorry?---Probably nothing.

So the Queensland department, in your words, does nothing
to make sure that organisations like you and other
organisations who are temporary placements are delivering
that service at a standard that the department and
therefore the people of Queensland would expect.

MR HANGER: Well, that's very good evidence given by my
learned friend. This was dealt with yesterday, as I
recall, by Mr Selfridge with another witness and there 40
was no dispute about the answers that were given.

COMMISSIONER: Yes.

MR HADDRICK: I will go in more particular then,
Mr Commissioner, in terms of what the statement says.

Can I just take you to page 2 of your statement, please, and in particular I take you to paragraph 10 - sorry, not paragraph 10, page 3, paragraph 11, if I have got the right page. Bear with me, Commissioner. Sorry, page 1, paragraph 3 and paragraph 4 and I will read that out for the purposes and then invite you to comment upon it. Paragraph 3, quality assurance:

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I am concerned that there is not enough auditing or quality assurance within a temporary placement. The CSO visits the house at least once a fortnight. However, because of the workload of the CSO this does not usually happen. Therefore the communication is usually through email or phone to address any issues or concerns that have arisen.

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Paragraph 4 goes on to say:

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The coordinator will ring the CSO or email them to attempt to get the CSOs out to visit the placement on a regular occurrence. Some CSOs will come to the placement once a month on average for maybe under half of our placements and the other CSOs, every couple of months unless an issue that needs to be addressed arises. If I placement is settled it is down on the list of priorities for the CSO to come out and visit the residential. I think the CSOs are really only capable of responding from a budgetary point of view to cases where a child has made some sort of comment, allegation, there is a change in the order, or there is an issue with the placement?

10

---Yes.

I invite you to elaborate on what you meant by there?---I think that due to the workload of CSOs and their probably lack of understanding of residential care, there is that gap in them coming to visit the placements on a regular occurrence. And in that not visiting then TP placements are left to run house you want to run because the CSOs would be getting their information from stakeholder groups, from the coordinators.

20

But that's the quality assurance mechanism, it's these CSO visiting the temporary placement, isn't it?---Well, that is - - -

The primary quality assurance mechanism?---That would be the primary one of at least them having a visual look of the house to make sure that that child is being cared for or their needs met appropriately.

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COMMISSIONER: Mr Haddrick, just checking the time. Will you finish your other witness today?

MR HADDRICK: No, I won't. And I've already passed a message back in respect of that, Mr Commissioner, in respect of next Tuesday.

COMMISSIONER: Righto. So will finish at 4.30?

MR HADDRICK: With this witness, we will, Mr Commissioner. Now, I simply - just excuse me for a second, Mr Commissioner. Sorry about that.

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Now, just focusing on what you say in paragraph 4, "Some child safety officers visit every couple of months," was your expression. And then you go on to say that on occasions this only occurs where there is some comment, allegation, or there is some issue with the placement. It would be fair to say that the squeaky wheel gets the oil, doesn't it?---Yes.

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I know if there is no sound of a problem then on occasion the CSO just doesn't visit?---Yes, and I think that's based on the workload of the CSOs and of - - -

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Yes, no criticism of the CSOs individually - - -? --- - - - and the time pressure.

- - - it's simply - - -?---It's just not - yes.

- - - the mechanics of it?---Yes, there is other things happening that might be more priority than visiting a placement that is running fine.

10

So how do we as Queensland taxpayers know that you and your employees are providing in temporary placements the quality of care that we would expect of a child who was placed in the custody of the government?---And that's where I think it needs to be grants funded because the grants funded process is very clear; it is audited in all aspects of it. So for me - - -

But why does it need to be grants funded? Doesn't it just need the CSO to visit more regularly or the CSO's superior? Why does there need to be a change in the funding model? ---Because I think that looks at the whole aspect of it; it's the financial side of things, it's the placement, it's who gets placed there, so as it would with the grants funded, which is very clear on what sort of service you're providing, how you're providing that, what you've got to spend and all that, to a TP, which is basically: this is how much money, I'll take your child.

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But playing devil's advocate, your company - if one of your employees is running one of the temporary placement houses, other than satisfying you that they're doing what you require, if they're not getting a CSO visit or any other form of quality assurance they could be neglecting their duties in running the house, couldn't they?---We have the coordinators going out to the house once a week, we have the psychologists going out once a week, we have the team leader doing spot checks - and the team leader psychologist and the team leader residentials to spot checks of the houses randomly without any knowledge.

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But they're all employees of yours, aren't they?---Yes.

So they're satisfying - and quite rightly so, they're satisfying you and your company - - -?---Yes, for us internally we - - -

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But you're doing a job?---We're doing our job, yes. Externally that's not - that doesn't occur within TP.

And if someone doesn't visit for a couple of months - as you suggest in paragraph 4 of your statement - from the government, then the only person who's watching the quality

of the house and what services are being delivered and whether any issues are arising in the provision of care of a child eight, nine, 10 years old is your company officials?---Yes. But it's not - as the placement - sorry, the department would be getting their information from stakeholder groups, from emails from CSOs. So again it is telling them.

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How many kids do you have in temporary placements versus residential care?---We've got - what did I say before? Did I say nine? Nine TP place, eight TP placements all of them except for three is co-tenanted, so two, four, six - 11 children.

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And what, about 26 or so I think was the figure you used before for residential care places?---Yes.

What's your staff turnover? How long do you keep a staff member for?---A residential care worker?

Well, give me both?---Residential care worker, the longest we've had, we've got a number of them that have been with us for five years, since we started, and our turnover rate, maybe one every three or four months. We're recruiting continually, so not high turnover with our staff.

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What about temporary placement?---Of staff?

Yes?---The same. It doesn't make any difference because those workers will just go elsewhere to work.

What is the likelihood that a worker could leave house X and go to work house Y and then be working in house Z? ---They only work in one house, that is the placement that they've been assigned. They would maybe temporarily go over to a house if there's someone sick and we don't have anyone, or if we suddenly have a young person coming that's got specific needs that we need to address and that we know that that resi care worker has had experience in that, so we'll look at taking that youth worker off and putting them over to that house.

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How do you try and achieve continuity in a young person's life - and eight, nine, 10 year-old - when your roster cycle occurs with one day on, two days off, it cycles? So over a six-day period they might see the one person twice? ---Twice, three times a week.

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How do you achieve the mentor, mother/father type figure in what is hoped to be a family home provided by government if there is such a rotation of staff rather than set times of the day that that individual staff member is there? ---Because I think you've got that longer period of time, that 24 hours where you've got that long period of time with the child or young person. That is more settling for the child and they know when that worker is coming on.

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But can I give you an example: say for example I was one of your workers?---Yes.

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And I was particularly good little Johnny because he and I got along really well and he did his homework only when I was around but I'm only there once every 72 hours?---Well, that would we would be working on in the house as to why he only does it for you and not for the other workers, and that's where the psychologist and the workers would get - the team would get together to work out why is Johnny doing that for you but not for everyone else when it's - so that's the work we do, it's not about that isolating of one resi care worker the favourite or is the main worker, it's about them being able to normalise and be able to work in all areas.

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Do you think that there should be a cap on the length of time a child should be able to be put in a transitional placement?

---I don't know whether you can put a cap on it, but I think you need to look at the milestone of what's being asked for. Like, if a child is being placed in a transitional placement because basically there's no family-based placement, then that is a priority for the department to look at of: how do you get this child straight out of TP into a family-based? If it's possible placement breakdowns, you've got a 12-year-old at 25 placement breakdowns with carers, that child is going to need a bit more work, so I don't know whether you can cap it.

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But is it really be - not easy way out, but the easiest way out for the department to say, "Well, this kid stuffs up here, doesn't work out there, let's put the kid in transitional placements and keep the treadmill going round and round and round." How do we break that cycle?---I think you need to start looking - I don't see how you can get rid of TP placements when you need to look at the recruitment of carers and how that's going to look and having carers doing that early intervention stuff, having it flagged that, you know, a placement might possibly break down like a month before it actually does and then run on - crisis at 5 o'clock on a Friday saying, "We need a placement." So there's work to be done back here before it even needed to get to TP. Once it's with TP, if it's an easy option - - -

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But it is in one respect an easy option, isn't it, for both the department and your organisation?---Well, I don't believe that the department sets up a TP just for the sake of setting up a TP. I think they exhaust all their options first and I believe that they do that and they look at all the service providers and what there is - they always look at grants funded spots first because that's where the money is already allocated. TP is last resort.

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Now, in the provision of TPs is there a qualitative difference between the service provider, through your organisation or other organisations that you're aware of, in terms of what's provided for the child on a day-by-day basis? So, for instance, in a residential care or established house or established relationships, more structured extracurricular activities, everything is - because it's much more ongoing, everything is running more smoothly - - -

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MR HANGER: My friend is giving the evidence again, with respect. He's got to ask a question rather than tell the answer and then say, "Agree with me."

MR HADDRICK: The question, Mr Commissioner, is conversely, in a house that doesn't have those features is the quality different?---Are you saying what - is the quality different between TP and a grants funded?

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Yes?---Well, they shouldn't be - - -

Well, sorry, residential care and TP?---No, there's no difference, from my experience.

Would a child notice the difference?---No.

Can I just explore paragraph 13 with you, please, on page 3 of your statement, children's rights:

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It is important that children understand what their rights are and that they know if something is not happening that should. The children that have been in the system for many years know their rights very well and can abuse that. It doesn't help that they tend to go to the department and get what they want.

What do you mean by that?---Yes, I think that's based on the older young people who have been in the system for a number of years. They know their standard rights and they know what they're entitled to. They will look at that and use it in a different way, and from YLO's experience is that it's just the lack of understanding from some CSOs around how a residential runs. You will find that the young people who have been in care and know the system and have been around for a long time will go to the person that they think they can get what they want from.

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So you find that the older kids tend to manipulate a bit?
---Yes, that have been in the system fro a number of years
and have gone from - jumped from placement to placement.

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When you say jumped from placement to placement, how does
that come about?---That's usually either they will
self-place and the placement ends or they will - the
placement is closed.

Do you ever find the older kids sabotaging their
placements?---Yes.

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How often does that occur?---With the older ones I think
it's more that rather than probably sabotage - you'll get
the occasional sabotage. It's more of that self-placing if
they're getting to an age where they don't want to - they
just don't fit residential and they prefer to be out with
friends or back with family.

What do they do to effectively terminate the arrangement?
---They might do severe property damage, might assault the
workers, not come back to a placement for a couple of
weeks.

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Is it your experience that they're conscious that when
they're doing those activities - - -?---The placement
will - - -

- - - that's the outcome of those activities?---Yes, for
the older ones; yes.

Are they then moved on to another house if another one is
free?---Usually the service centre will request - the
department will request a placement for them, and that's
the benefit of having [REDACTED] and - [REDACTED] and
[REDACTED] now, is that you've got the accommodation for the
young people who just do not fit in a residential. They
don't want to be in a residential, they just want to do
what they want to do and then have a bed for the night if
they have nowhere else to stay.

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In paragraph 12 on page 3 - I've asked you about the
training and qualifications of residential care workers but
I also want to ask you about their age and life
experience?---Yes.

What do you - what's the average age, or roughly the
average age range, of a residential care worker?---Early
30s, or between probably 28 and 35.

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Do you see any value in the residential care workers having
more years under their belt?---Not necessarily. We usually
will look at a balance. Usually our - unless it's a
specific case, we'll usually have two females and a male
on a house, and that could range from, you know, an older

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female to a younger female and a middle-aged man or a younger man and - so it doesn't - I think - - - 1

So you do some gender balancing?---Yes.

But not necessarily age balancing, in choosing your staff?
---No.

Yes, that's the evidence of the witness, Mr Commissioner.

COMMISSIONER: Thanks, Mr Haddrick. Mr Hanger? 10

MR HANGER: I've got no questions.

MR HADDRICK: I'll tender the photographs, if I could.

COMMISSIONER: Yes, sure.

MR HADDRICK: I tender the photos of house F. All photos can be published.

COMMISSIONER: The photographs will be exhibit 165 and I direct they be published. 20

ADMITTED AND MARKED: "EXHIBIT 165"

COMMISSIONER: Ms Ekanayake, do you have any questions?

MS EKANAYAKE: I have questions, thank you.

Jennifer Ekanayake here, Aboriginal and Torres Strait Islander Legal Service?---Yes.

I refer to paragraph 24 of your statement where you say - you talk about one - you make reference to an indigenous boy in your residential care facility?---Yes. 30

Do you have a number of indigenous children or - - -?
---Currently we have, I think, four.

I have a few questions in relation to Aboriginal and Torres Strait Islander children, the first one being what assistance have you received from the department in relation to cultural support plans and guidance to ensure identity development of these children?---Cultural support plans are very difficult to do. I know that in stakeholder meetings the recognised entity is always invited to the stakeholder meetings to try to develop those cultural plans. That doesn't happen very often. So cultural plans are very difficult to develop with not having the recognised entity or someone that has been appointed for that child. So then it is left up to the department around that cultural - - - 40

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In relation to the placement agreements, what level of guidance do you receive from the department in relation to the child's identity - the guidance that you get from the department?---Are we getting information - do we get information from the department around the child's identity? Yes, from my experience we do get - like, if the young person is indigenous then we will get the information that they've got around that. We will look into if we have to align them with their - if it's from the Dreaming or whether it's (indistinct) where that child is in the community is where we have to engage with them. Yes, I think the department - that is a priority with the department that they do look at.

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The departmental obligation in the cultural support, in getting the cultural support plan organised, the placement agreement, with the two of them does this assist you to meet the requirements that the legislation provides at section 83(7) which I'll just briefly tell you. It says before placing a child in the care of a family member or other person who is not Aboriginal or Torres Strait Islander the chief executive must give proper consideration to whether that person is committed to facilitating contact between the child and the child's parents, family members, subject to any limitations, helping the child to maintain contact with the child's community or language group, helping the child to maintain a connection with the child's Aboriginal and Torres Strait Islander culture, preserving and enhancing the child's sense of Aboriginal and Torres Strait Islander identity?---Yes.

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Now, how does that work?---Yes, and I think from (indistinct) experiences, that I think the department does what they - with the information they've got. We've always been provided with that and we've always been provided - if there are family member involved - those contacts, so that we can, you know, have contact with them, do supervised contact, that sort of stuff. It's very difficult, again, to do a case plan or our planning documents without a representative from the community to have that input, so you're basically looking at what you've got on paper to write up the plans with.

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What about children actually having contact or seeing family members or any kind of communication?---Yes, and from our experience with your young people that are in our placement that are indigenous or have been in our placement, we've found the department quite supportive in trying to get the contact, trying to find kinship carers, really exploring those options.

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What is your input in relation to that contact?---Yes. We will, where we can, supervise contact, and we do the - you know, we will talk with our psychologists or the coordinator will talk with the family members and do that, kind of like just form a relationship with them to see that they're - we always will have an indigenous residential care worker on the house with an indigenous person. But, yes, so it's what - we will connect them to whatever community, so if it's (indistinct) any sort of activities that are going on around the culture, we will have the young person or child involved, or usually we'll have the household involved in that.

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Thank you. How are young people prepared with protective behaviours, considering they may - many of them - return to their family or community where risk is still evidenced? ---Yes. And that's where the work that we do within placement with the psychologists and with the resi care workers day to day to look at what risk has posed in the past, what risk possibly could happen if they go home. And again, it's working with all the stakeholders around, you know, working with the young person to, you know, establish those - the child being able to cope and the child being able to have those skills to - if they're in a situation, what do you do? And so it's working with the stakeholders around all that to make sure that if they are placing a child back in that environment, what work is being done with the parents, to what work is being done with the child (indistinct)

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How confident are you that young persons have the support to maintain this transitional progress after they reach 18?---How - what was - - -

Confident are you that they're able to maintain this after they turn 18 and they move out?---The young people?

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Yes?---That's a difficult one to answer.

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You don't have any feedback from children or young persons who have left your care?---Yes, we've got - there's been a couple of young people that have left our care that we still keep in contact with that we found that have gone back to family and that's not lasted very long and they've come back. So probably from our point of view we know that our young people are going to go back home, more than likely, and so it is about doing that work prior to them turning 17, 18, and doing that work around that family with that knowledge that they're going to go home, what work can we do around, you know, giving them those skills and strategies to be able to cope and have those relationships when they're post-18.

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At paragraphs 19 and 20 of your statement you have provide some commentary on secure care. Do you accept that there are current responses available through disabilities, restrictive practices, mental health and substance misuse responses that can address some of these issues; and would it be important to explore these options before seeking secure care?---Definitely, yes. I think that would be the last - secure care would be the last option for a child or young person. You don't want to have anyone in a secure model at all. So it is, it's looking at addressing, you know, is this child just - you know, something's happened and, you know, you know that there's going to be a spike in their behaviour for the next four to six weeks, so, you know, you put that work in there; or has this child got some mental health issues that need to be addressed? So you'd look at all those options first to address. Because like I said, the majority of our children when they first come - placed with us within, you know, the first couple of weeks, first month is pretty much, you know, spiked continually.

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So if a child were to go into secure care and whilst delivering secure care services, what about the balance between the child's needs and the child's liberties?---Yes. And I think that's where it becomes a very fine line of - I think it wouldn't be a case of having just to set up a secure model and going, "Here it is." I think it would be many discussions around that fine line of how do you balance that, where you've got the child's needs that you want (indistinct) but you've also got this extreme child that cannot - they're a risk to themselves and a risk to the community, so how do you balance that? So I think that could only come through a lot of conversations with all stakeholders and parties involved in that.

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Do you see any problems with secure care being misused? ---Well there's always within residentials - within this industry there's always that, you know, potential that someone's going misuse or abuse the system, and that's

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where I think with the secure model you'd have to have a lot of conversations and a grievance written up and signed off on.

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Would you seek restrictive practise within residential care rather than secure care if there was an option?---Probably not because again that risk - it's such a fine line to put your hand on a child or to contain a child. I just think if you introduce it into the residentials - I think it's more controllable in a secure environment.

At paragraph 14 of your statement you have referred to a 24-hour therapeutic model?---Yes.

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Could you elaborate on that?---Yes. And I think that's the idea of where we're coming from, that - you know, that model of where the psychological, emotional and social needs of a child is being met, so - and that's where the training of our resi care workers. So we look at our resi - we say to our resi care workers, you know, "Every moment is a learning opportunity. These children have come to us with great gaps, milestones not met, someone has to step in and help these, you know, children and young people, you know, move forwards. So for us it's about looking at every opportunity throughout the day of how can we learn? How can we teach this child some - you know, something new?

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My final question: at paragraph 34 you stated police aren't used for behaviour management strategy. What's the balance? How can a residential facility respond as a holder of parent-type responsibilities?---Yes. And I think we implement - because we do come from - like you were saying before, that parent model where it's the same sort of - within a family home or a family-based placement, what would they put in place? So things like going to your room to have some thinking time, grounding; you know, if you're being - if you're swearing or being aggressive and whatever then, you know, you might not go out to this or you might lose this, or if you don't - you know, if you've got pocket money, if you're getting your chores through pocket money - if you're getting your pocket money through your chores, if you're not doing your chores then, you know, you might not get all your pocket money. So it's putting in those places which resemble that normal household outcomes would happen if you do something. If you're, you know, mucking around before school and you're late for school then we take you up to the office and you explain to the office why you're late. You know, having those outcomes, and it's about those choices and responsibilities. So for us it's about making sure that the child is very aware of the choices of outcomes. So: if you choose this way, this is what's going to happen; if you choose that way this is - and you're responsible for your choices and why those choices have been made.

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Thank you. Thank you, Commissioner.

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COMMISSIONER: Yes, Mr Capper?

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MR CAPPER: No questions, thank you.

MR HADDRICK: No further questions for the witness. Might this witness be excused, Mr Commissioner?

COMMISSIONER: Sure.

MR HADDRICK: This completes today's hearings or the witnesses for today. That's the fourth of five days in respect of residential care and transitional care options. The commission returns to this broad topic on Tuesday morning at 10 am, Mr Commissioner, but there are other hearings related to other terms of reference in and around that.

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COMMISSIONER: Thank you. Thanks very much for attending today and giving us the benefit of your evidence?---That's all right.

Much appreciated. And you're formally excused from the obligations of your summons, with thanks?---Thank you.

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WITNESS WITHDREW

COMMISSIONER: I'll adjourn to 10 am Monday.

THE COMMISSION ADJOURNED AT 4.11 PM UNTIL
MONDAY, 11 FEBRUARY 2013

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