Queensland Child Protection Commission of Inquiry

Non-government workforce survey report

June 2013

Contents

Executive summary

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

To inform its deliberations the Commission undertook a survey of non-government child protection workers between 21 February 2013 and 15 March 2013. The survey was open to all staff of non-government organisations working in frontline child protection roles. A frontline role was defined as a role which involved a person working directly with children, families or carers in Queensland's child protection system.

The survey sought the views of frontline staff about qualifications, training, supervision and other professional development including cultural competencies, being valued and supported, information technology for client case management, organisational programs and procedures, workload management, professional relationships, and access to services.

A total of 444 responses were received, with most respondents working in foster and kinship care services, residential care, and family support and intervention services. Overall, 91 per cent of respondents had some form of tertiary qualification, with 62 per cent holding a bachelor level qualification or higher. This report provides an overview of the quantitative and qualitative responses to the survey along with key findings.

Training, supervision and professional development

- Of the 444 respondents, 89 per cent had completed some form of induction training with their organisation and 58 per cent felt that this training was helpful in performing their role. Many, however, commented that induction could be improved by concentrating more on the development of practice knowledge and skills rather than on policies and procedures.

- Most of the respondents (90%) reported having opportunities for ongoing training and professional development other than induction. About three quarters felt that the training they had received in their organisation has been adequate for them to perform their role (76%). Many commented that cost and time pressures often prohibited participation in external workshops and conferences.

- About three quarters of respondents (77%) reported that they were receiving formal scheduled supervision as part of their role. However, 40 per cent felt that their supervision was mainly administrative in nature. Many commented that supervision should be more 'practice-based' and include opportunities for professional development and personal reflection.

- Overall, 63 per cent of respondents agreed with the proposition that their organisation was one that invests in the professional development of its staff. There was a view that 'continuous upskilling' of staff should be an ongoing priority. It was widely suggested that funding assistance be made available to support external training and professional development for the non-government child protection workforce.

Working with children and families

- About three quarters of respondents (77%) agreed that their workloads had increased over time, although 71 per cent also felt their workloads remained manageable and 65 per cent indicated that they had an appropriate balance between administrative tasks and frontline service delivery. On average, respondents estimated that about 50 per cent of their time was spent on administration.

- Even so, 70 per cent reported having enough time to form productive relationships with children, families and carers. Responses indicated that the amount of time dedicated to frontline service delivery could be further increased by streamlining reporting and record-keeping and avoiding the duplication of paperwork and databases.

- Respondents reported being least confident when working with children and families with disabilities, people who misuse drugs and alcohol, and people with mental health problems. Further, 80 per cent of respondents in mainstream organisations felt they had the skills needed to work effectively with Aboriginal and Torres Strait Islander families but just over half of their colleagues who identified as Aboriginal and Torres Strait Islander agreed with this statement.

- About two thirds of respondents (63%) reported that they had completed cultural competency training in the previous two years. There was a view that this training could be improved by having a greater focus on practical skills to help staff communicate and work with children and families. Many respondents also felt that non-government organisations should be more proactive in developing networks and contacts with Aboriginal and Torres Strait Islander communities and organisations.

Program and procedure guidelines and information technology

- Most respondents (74%) agreed that their organisation's program and practice guidelines provided a useful resource, while 76 per cent indicated that it set an achievable standard of practice and 78 per cent said it outlined a clear process for interacting with child safety. Although most (75%) felt the level of detail in these guidelines were 'about right' many also suggested that they could be improved by making them more practice orientated and 'user friendly'.

- Just over three quarters of respondents (76%) reported that their organisation has an information technology (IT) system to manage client cases, with most feeling their system includes all the information they need to perform their role (69%). Suggestions for improving IT systems included updating the systems, removing unnecessary administrative steps in documentation, avoiding duplication of material, and allowing remote access and access to external databases, such as Child Safety's Integrated Client Management System.

Professional relationships and access to services

- Most respondents reported having productive relationships with local non-government organisations (86%), government organisations (80%) and, to a slightly lesser extent, Child Safety Services (72%). Respondents suggested an important strategy for improving relationships between agencies was to provide more opportunities for inter-agency networking. Respondents also suggested that formal partnerships would streamline the referral process between agencies.

- Although most respondents reported that there were family support, drug and alcohol, mental health, housing, family violence and youth justice services available in their area, many felt these services could be difficult for their clients to access. Mental health and housing services were considered among the most difficult to access.

Being valued and supported

- A majority of respondents felt that the work they do is valued within their team (86%), their organisations (69%), and the wider community (72%), but less so by government (52%) and other non-government agencies (58%). A majority also felt their workplace was largely supportive of its staff (81%), and that their colleagues and managers support their decisions (82%). To a slightly lesser extent, respondents felt listened to when raising issues and concerns (65%) and felt that their workplaces supported innovative practice (70%).

- Respondents put forward a range of suggestions about how to improve support for staff. It was considered most important for managers to possess strong communication and interpersonal skills and in particular, to address the emotional impact of the work carried out by staff in the organisation. Other suggestions included the need for more training, support for 'self-care' and for management to be more available to staff when critical incidents occur.

Comparison to Child Safety workforce

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

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

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

Although both Child Safety and non-government employees felt that their work was valued within their immediate work teams (83% compared to 86%), Child Safety employees were less likely to feel their work was valued within their larger organisation (42% compared to 69%) or the wider

community (39% compared to 72%). Both groups highlighted the quality of management as a key factor in helping frontline staff feel valued and supported. Both felt that it was particularly important for managers to have strong communication skills, be proactive in helping employees deal with the emotional strain of child protection work and be available when critical incidents occur.

Methodology

Procedure

The survey was conducted through a self-administered online questionnaire. It was distributed to non-government employees and organisations affiliated with either PeakCare or the Queensland Aboriginal and Torres Strait Islander Child Protection Peak. To be eligible, staff needed to work in a frontline child protection role in Queensland, which was defined as:

> …any person working directly with children, families or carers in the child protection system. This includes foster care support workers and coordinators and family support workers. It also includes staff up to manager and team leader positions.

Individuals and organisations on the distribution lists of both peak bodies were sent emails containing an introductory email from the peak body's Chief Executive Officer and a link to the survey.

The survey was available to staff for completion between 21 February 2013 and 15 March 2013. Participation was voluntary and participants were informed that their individual responses would be confidential and not accessible to their organisations.

Survey instrument

The questionnaire comprised 62 sets of fixed response questions, rating scales and open-ended questions. Appendix A provides a summary of the survey instrument. Questions 1 to 18 collected demographic information about the participant's location, current position and experience in child protection. It also collected information about their organisations, including services provided, demographic details of their clientele and contact with the Child Safety department. The survey then asked respondents to answer a further 44 sets of questions divided into the following topics:

- qualifications

- training, supervision and other professional development

- cultural competencies

- being valued and supported

- information technology for client case management

- organisational programs and procedures

- workload management

- professional relationships

- access to services

- recommendations for reform of the child protection system.

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

- strongly disagree

- disagree

- undecided

- agree

- strongly agree

An additional response, 'not applicable', was added to some questions where it was determined that the question may not apply to some frontline roles. The survey included 11 open-ended questions and invited respondents to provide comments or recommendations relating to each major topic.

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

Respondent characteristics

A total of 444 employees of non-government organisations responded to the survey. They were asked to identify what type of service provider they were employed by and were able to indentify as more than one option. The responses indicate the largest group was employed by foster and kinship care services (31.1%), followed by residential care (20%), family support services (14%) and counselling and intervention services (13.3%) (Table 1). Those who identified as working for 'other' types of services from the options provided in the question include individuals working in independent living programs, education and employment support, young parents programs, migrant and refugee support, and mental health programs.

Table 1: Number of respondents employed by Service type

Service type	Response Percent	Response Count
Referral for Active Intervention	7.2%	32
Family Support Service	14.0%	62
Aboriginal and Torres Strait Islander Family Support Service	6.1%	27
Helping Out Families	5.0%	22
Family Intervention Service	10.4%	46
Counselling and Intervention Service	13.3%	59
Recognised Entity	8.3%	37
Residential Care	20.0%	89
Therapeutic Residential Care	7.7%	34
Foster and Kinship Care Service	31.1%	138
Family violence service	2.7%	12
Drug and/or alcohol service	1.6%	7
Homelessness service	2.5%	11
Other (please specify)	10.1%	45

Note: Some respondents identified as being employed in more than one service type. This has resulted in the total percentage response as being 140 per cent.

Twenty per cent of the respondents identified as Aboriginal and/or Torres Strait Islander and 17 per cent were employed by an Aboriginal or Torres Strait Islander-controlled agency.

When asked about referral source for services provided, 92 per cent of respondents indicated they worked for organisations that took referrals directly from the Child Safety arm of the Department of Communities, Child Safety and Disability Services (the department). Respondents indicated their organisations also took referrals from non-government organisations (24%), Education Queensland (21%) and/or Queensland Health (20%) (Table 2).

Table 2: Referral Source for Services

Referral Source	Response Percent	Response Count
Child Safety	91.6%	406
Queensland Health	20.3%	90
Education Queensland	20.5%	91
Queensland Police/Support Link	14.4%	64
Recognised Entities	12.2%	54
Referral for Active Intervention Services	8.1%	36
Other government agencies	21.4%	95
Other non-government agencies	23.7%	105
Don't know/not applicable	2.3%	10

Over half of the sample (59%) reported that the majority of their clients (children, families or carers) live in a major town or city, 39 per cent reported that the majority of their clients live in regional or rural locations and only 1 per cent reported that the majority of their clients live in remote or very remote locations. On average, respondents reported that less than 10 per cent of their clients were from culturally and linguistically diverse backgrounds and approximately 20 per cent of their clients were Aboriginal or Torres Strait Islanders[1].

Respondents worked in a variety of roles that supported children and families, including child and family support workers, case managers, counsellors, management and administrative support roles, and specialist advisory roles such as the provision of cultural advice to Child Safety. The length of respondents' employment with their current employer ranged from less than three months to over 20 years, and just under half of all respondents (45%) had been with their current employer for at least two years (Table 3). Approximately one quarter of the respondents (26%) had been previous employees of the department or its predecessors.

Table 3: Length of employment with current employer

Length of employment	Response Percent	Response Count
Less than 3 months	5.0%	22
3 to 5 months	5.2%	23
6 to 12 months	12.8%	57
1 year+	14.9%	66
2 years+	16.9%	75
3 years+	7.4%	33
4 years+	9.0%	40
5 years+	7.2%	32
6 years+	6.3%	28
7 years+	3.4%	15
8 years+	3.2%	14
9 years+	2.5%	11
10-15 years	3.8%	17
15 -20 years	1.4%	6
More than 20 years	1.1%	5

---

[1] Median proportion of clients

Table 4 shows the highest level qualification held by respondents according to the type of service their employer provides. Of the total sample, 91 per cent reported having some form of tertiary qualification ranging from certificate to doctoral level, with 61.7 per cent holding a bachelor level qualification or higher (Table 4). Overall, 29.8 per cent reported their highest level of qualification to be a certificate III or IV or diploma, 41 per cent a bachelor degree, 12.6 per cent an honours degree or graduate diploma, and 8.1 per cent a masters or doctoral degree.

Table 4: Highest qualification by service type[2]

Discipline	Foster and Kinship Care Services	Residential Care	Family Support Services	Intensive Family Intervention	Other service types	Total sample
No qualification	8.7%	12.7%	11.5%	9.5%	5.6%	8.6%
Certificate III	2.2%	4.5%	6.7%	0.0%	0.7%	3.2%
Certificate IV	5.8%	18.2%	4.8%	1.6%	9.9%	8.6%
Diploma	22.5%	14.5%	25.0%	14.3%	19.0%	18.0%
Bachelor	40.6%	34.5%	38.5%	47.6%	38.0%	41.0%
Honours/Grad. Dip.	13.8%	8.2%	6.7%	15.9%	14.8%	12.6%
Masters/PhD	6.5%	7.3%	6.7%	11.1%	12.0%	8.1%
Total	100%	100%	100%	100%	100%	100%

Table 5 shows the most common disciplines of study for respondents in each service type. Social work, community welfare, psychology, social science and human services were the most common disciplines of study across the various service types. There was also a sizable proportion of respondents who reported having studied 'other' disciplines to those listed, particularly among respondents working in residential care. These most common included studies in business and public administration, counselling and mental health, youth work, family interventions, and child protection. For those with multiple disciplines, at least one of those qualifications was normally human services related qualification such as social work, behavioural science, community welfare or human services.

---

[2] Note: Respondents could be associated with more than one service type. For the purpose of this comparison the following services have been combined as follows: Foster and Kinship Care Services (Foster and Kinship Care Services; n=114); Residential Care (Residential Care and Therapeutic Residential Care; n=110); Family Support (Referral for Active Intervention, Family Support Service and Aboriginal and Torres Strait Islander Family Support Service; n=104); Intensive Family Intervention (Helping Out Families and Family Intervention Service; n=63); Other services types (Counselling and intervention service, Recognized Entity Service, family violence service, drug and/or alcohol service, homeless service and other service; n=142).

**Table 5: Discipline of respondent's highest level qualification by service type2**

Discipline	Foster and Kinship Care Services	Residential Care	Family Support	Intensive Family Intervention	Other service types	Total sample
No qualification	8.7%	12.7%	11.5%	9.5%	5.6%	8.6%
Arts	8.0%	3.6%	1.0%	0.0%	4.2%	4.7%
Behavioural science	2.9%	0.0%	4.8%	6.3%	4.2%	2.7%
Community welfare	13.8%	9.1%	17.3%	7.9%	9.2%	10.1%
Criminology	1.4%	1.8%	1.0%	1.6%	0.7%	1.1%
Education	5.8%	2.7%	7.7%	4.8%	7.0%	5.2%
Human services	7.2%	5.5%	11.5%	12.7%	4.9%	7.7%
Justice	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Law	0.0%	0.0%	1.0%	1.6%	0.0%	0.5%
Nursing	0.7%	0.0%	2.9%	0.0%	1.4%	1.1%
Psychology	7.2%	6.4%	1.9%	9.5%	12.0%	9.2%
Social science	8.0%	7.3%	6.7%	11.1%	9.2%	8.8%
Social work	11.6%	13.6%	11.5%	12.7%	13.4%	13.5%
Other	14.5%	22.7%	8.7%	6.3%	16.9%	14.6%
Multiple disciplines	10.1%	14.5%	12.5%	15.9%	11.3%	12.2%
Total	100%	100%	100%	100%	100%	100%

Results

Induction training

In total, 87 per cent of respondents reported undertaking some form of induction training on commencing employment with their organisation. Of those who had undertaken induction training, 59 per cent agreed or strongly agreed that the training helped them to develop the skills and knowledge they needed to perform their roles (Figure 1). Eighteen per cent of respondents disagreed, 15 per cent were undecided and 9 per cent strongly disagreed.

Figure 1: Agreement that induction training helps to develop skills and knowledge to perform role
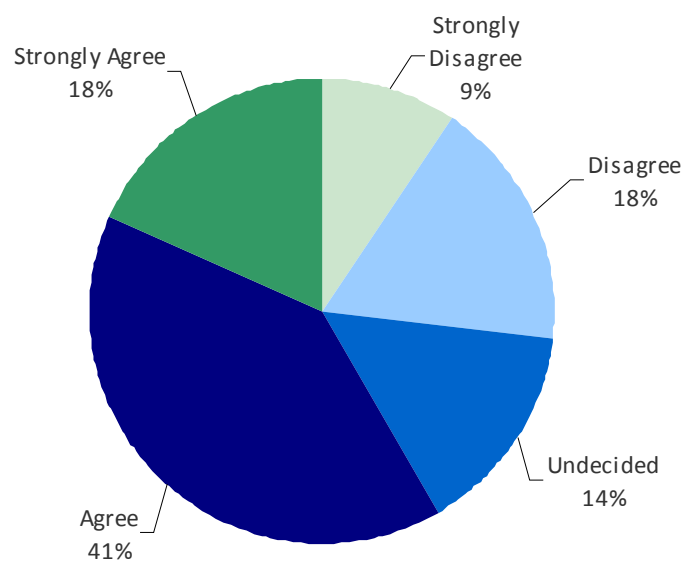
Just over one third of all respondents (n=158) provided suggestions for improving their organisation's induction training. Many respondents suggested that induction training should focus more on the specific requirements needed to effectively fulfil individual roles in the organisation. One respondent noted that induction training focused largely on 'knowing the organisation's policies, procedures and expectations and little about developing skills'. Most respondents agreed that induction training could be improved by concentrating on the development of practice knowledge and skills and 'be more role focused, rather than organisation focused'. Some respondents suggested that 'shadowing' an experienced practitioner on the job or having a mentoring or 'buddy' system was a better alternative to induction training. One respondent commented that the 'induction process needs to be a little more hands on with additional shadowing and learning on the job'.

Supervision

In total, 77 per cent of respondents agreed that they received scheduled, formal supervision (Table 6). Regular informal and unscheduled supervision was reported by 75 per cent of all respondents. In total, 11 per cent of respondents reported receiving neither formal nor informal supervision. Seventy-two per cent of respondents agreed or strongly agreed that they were being supervised by an appropriately experienced practitioner. Less than half (40%) considered their supervision to be

largely administrative in nature, such as the allocation of work and tasks, and 67 per cent reported that there was a good balance between professional and administrative supervision.

Just over one third of all respondents (n=164) provided suggestions for improving supervision in their organisation. Most respondents agreed that supervision should be more 'practice-based' and include opportunities for professional development and personal reflection. For example, one respondent commented that, 'there appeared to be a lack of supervision provided that supported the ongoing development of reflective practice [and] the application of theoretical knowledge (including training, qualifications etc) into practice'. About half of the respondents suggested that their organisation should assist with funding to access external supervision for staff and one respondent suggested that, 'access to professional supervision outside the agency would be beneficial both professionally and personally'.

Table 6: Supervision arrangements

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I get a good balance between professional and administrative supervision.	4.5%	16.2%	12.6%	52.7%	14.0%
I receive regular formal scheduled supervision.	3.8%	13.7%	5.2%	49.6%	27.7%
I receive regular informal, unscheduled supervision.	3.4%	15.8%	5.8%	52.9%	22.1%
I receive regular direct supervision (in the field).	6.5%	25.9%	15.8%	41.7%	10.1%
I receive regular support that is self-funded.	15.0%	36.0%	19.1%	25.2%	4.7%
I receive regular group supervision.	12.0%	30.6%	10.8%	36%	10.6%
I receive regular external supervision funded by my organisation.	30.2%	33.3%	10.8%	17.6%	8.1%
The supervision I have access to assists me to fulfil my role.	4.1%	11.3%	12.8%	47.3%	24.5%
The supervision I receive is mainly administrative in nature, i.e. allocation of work and tasks.	7.5%	40.3%	12.6%	31.3%	8.3%
I am supervised by an appropriately experienced practitioner.	6.1%	9.5%	12.6%	41.0%	30.8%

Ongoing professional development

Ninety per cent (90%) of respondents reported having opportunities for professional development other than induction training while employed by their organisation. Most respondents (78%) agreed that the training they received covered topics that were important to their role with children and families, and just over three quarters (76%) believed that their training had been adequate for them to perform their role (

Table 7). About two thirds (63%) felt that their employer was an organisation that invested in the professional development of its workforce.

Table 7: Support for training and professional development

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
The training I have been provided with in my organisation has been adequate for me to undertake my role.	2.8%	9.0%	12.0%	50.7%	25.5%
My organisation offers sufficient professional development sessions by senior staff.	6.4%	22.6%	12.7%	42.0%	16.3%
The detail provided in professional training sessions is sufficient to meet my needs.	2.8%	12.3%	18.2%	52.8%	13.9%
The training I am provided with by my organisation covers topics important to my work.	2.1%	7.1%	12.7%	55.0%	23.1%
I am encouraged to undertake further education and/or professional development external to my organisation, for instance, tertiary study.	4.0%	14.6%	18.9%	44.8%	17.7%
My organisation offers incentives for me to undertake professional development.	11.8%	25.2%	25.0%	29.0%	9.0%
I am given opportunities to attend workshops and conferences.	4.3%	5.7%	9.2%	50.9%	29.9%
My organisation invests in my professional development.	5.0%	12.7%	19.3%	41.0%	22.0%

Approximately one-quarter of respondents (n=115) provided suggestions for improving training and professional development for staff in their organisation. At least half suggested that funding assistance should be available to access external training and professional development courses. Many highlighted the training costs and time constraints around workloads as factors that prevent staff from accessing regular training. One respondent stated that 'current allocations of money and time are insufficient to even attend one valuable training per year', and this comment was supported by another respondent who stated 'there are very limited opportunities to participate in workshops, conferences and specialist training because of high costs…as well as the impact on the agency when staff are away'. A number of respondents suggested that organisations should place greater focus on 'continuous upskilling' of staff.

Opportunities to work in different roles

Approximately two thirds of all respondents (60%) reported having opportunities to work in different roles in their organisations. The survey asked a series of questions about the support that workers received while working in different roles. Almost half (44%) reported that they received training prior to working in different roles (

Table 8) with a similar number (48%) feeling that the training was adequate. Only 36 per cent reported that their usual role was filled by someone else while they were undertaking other roles.

Table 8: Opportunities to work in different roles

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I have been provided with training prior to working in different roles.	7.5%	24.0%	24.1%	33.5%	10.9%
I feel that the level of training has been adequate to enable me to undertake these different roles.	5.3%	19.2%	27.3%	35.8%	12.4%
I am supported while undertaking different roles.	4.5%	13.2%	24.1%	37.5%	20.7%
My work commitments in my usual role are fulfilled by someone else while I am undertaking a different role.	12.0%	24.3%	27.5%	29.8%	6.4%

A small number of respondents (n=64) provided suggestions for improving opportunities to work in different roles in their organisation. The respondents suggested that acting positions should be advertised internally and training provided to staff who accepted acting positions. One respondent commented that there should be 'more emphasis on developing skills through succession plans before entering a different role.' Most respondents agreed that staff in acting positions required additional support (such as backfilling) to manage new and existing workloads because 'there is very limited opportunity for other workers to assist with your caseload whilst away'. Many felt there should be more opportunities for staff to act in different roles in their organisations, noting that changing roles allowed staff to acquire new skills and knowledge.

Confidence in skills

A large majority of respondents felt confident that they had the skills to work effectively across a diverse range of clients and cases (

Table 9). Relative to other clients and cases, respondents were least confident working with people with disabilities, people who misuse drugs and alcohol, and people with mental health problems.

Table 9: Confidence when working with clients and cases

I feel confident that I have the skills I need to work effectively with:	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
Parents	0.7%	3.4%	7.1%	51.7%	37.1%
Children	0.7%	2.0%	3.7%	47.6%	46.0%
Young people (teenagers)	0.5%	2.0%	4.8%	49.0%	43.7%
Foster carers	1.6%	4.1%	15.1%	45.6%	33.6%
Kinship carers	1.6%	3.6%	16.0%	45.6%	33.2%
People with disabilities	3.0%	15.1%	23.3%	44.0%	14.6%
People with mental health problems	0.5%	12.3%	18.1%	51.7%	17.4%
People who misuse drugs and alcohol	0.7%	13.3%	18.1%	51.0%	16.9%
Cases involving family violence	0.5%	6.6%	12.6%	55.8%	24.5%
Cases involving sexual abuse	0.5%	11.4%	13.7%	51.5%	22.9%
Cases involving physical abuse	0.5%	6.2%	9.6%	58.3%	25.4%
Cases involving neglect	0.5%	4.1%	8.9%	57.4%	29.1%
Cases involving emotional/psychological abuse	0.5%	5.5%	10.1%	54.4%	29.5%

Cultural competencies

About two thirds of respondents (63%) reported undertaking cultural competency training within the last two years and 18 per cent reported that they had never undertaken such training (Figure 2). Of those who had undertaken cultural competency training, 60 per cent reported that their training had lasted five hours or longer (Figure 3). Twenty-eight per cent (28%) reported that they were not required to demonstrate culturally competent practice as part of their work performance reviews (such as preparing or working with a cultural support plan) and a further 17 per cent indicated that they were unsure.

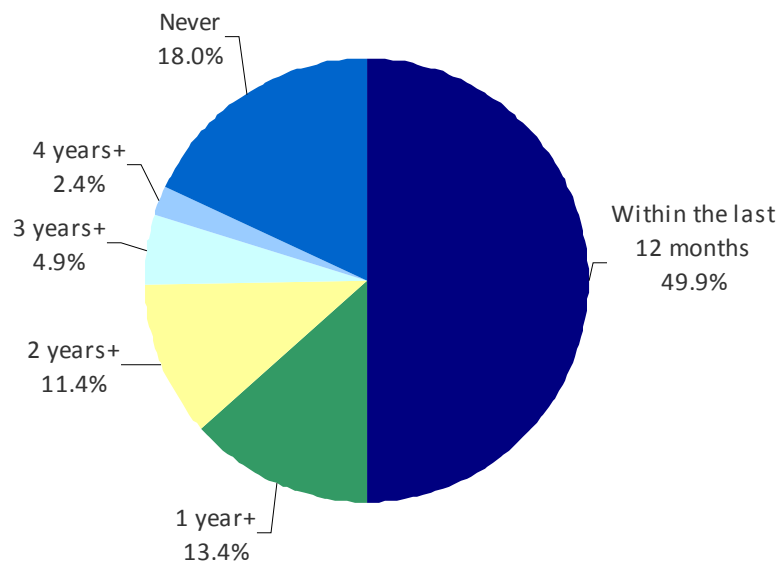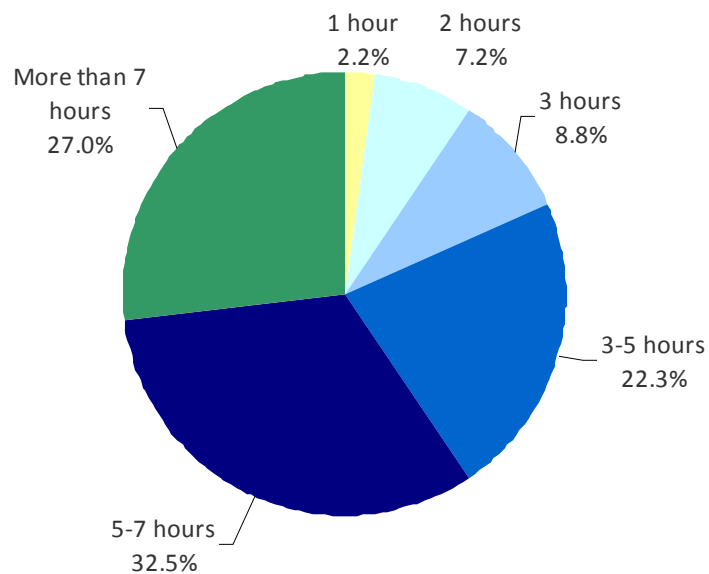**Figure 2: Time since last cultural competency training**

Figure 3: Length of last cultural competency training

More than half of the respondents agreed or strongly agreed that their training had prepared them well to work with Aboriginal and Torres Strait Islander families (70%) and culturally and linguistically diverse families (60%) (Table 10). Almost three quarters of the sample (73%) agreed or strongly agreed that they could seek cultural advice from someone when working with Aboriginal and Torres Strait Islander children and families. Eighty per cent of respondents felt confident working with Aboriginal and Torres Strait Islander children and families, whereas 69 per cent of respondents felt confident working with children and families from other culturally and linguistically diverse backgrounds.

Table 10: Self-rated cultural competencies

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I have someone to seek cultural advice from when working with Aboriginal and Torres Strait Islander children and families.	4.7%	13.4%	9.0%	42.8%	30.1%
My training has prepared me well to work with Aboriginal and Torres Strait Islander children and families.	2.8%	13.6%	14.0%	47.4%	22.2%
I feel confident working with Aboriginal and Torres Strait Islander children and families.	1.2%	6.0%	13.0%	48.0%	31.8%
My training has prepared me well to work with children and families from Culturally and Linguistically Diverse (CALD) backgrounds.	2.3%	16.5%	20.8%	39.7%	20.7%
I feel confident working with children and families from Culturally and Linguistically Diverse (CALD) backgrounds.	1.5%	9.9%	20.0%	42.8%	25.8%

The data below represents the views of 21 respondents who identified as Aboriginal or Torres Strait Islander and worked in an organisation that was not an Aboriginal or Torres Strait Islander-controlled organisation. These respondents were also asked about their perspectives on the cultural competencies of their colleagues and the extent to which their organisation is committed to promoting a culturally competent workforce.

Aboriginal and Torres Strait Islander respondents were less confident than others about the cultural competencies of the staff employed by non-government organisations. While 70 per cent of all respondents believed their training had prepared them well to work with Aboriginal and Torres Strait Islander children and families (see Table 10), only 48 per cent of Aboriginal and Torres Strait Islander respondents agreed (Table 11). Similarly, while 80 per cent of all respondents reported having the skills to work effectively with Aboriginal and Torres Strait Islander children and families (see Table 10), just over half (52%) of Aboriginal and Torres Strait Islander respondents agreed (Table 11).

Just over half (58%) of Aboriginal and Torres Strait Islander respondents felt that their colleagues valued their advice when working with Aboriginal and Torres Strait Islander children and families, and about the same proportion (57%) felt their organisation was committed to creating a culturally competent workforce. Just over half (52%) felt they had sufficient opportunity to network with other Aboriginal and Torres Strait Islander staff in their organisation.

Just under one quarter of all respondents (n=97) provided suggestions for improving the cultural competency of staff in their organisation. The majority of respondents suggested that all staff should undergo cultural competency training led by an Indigenous elder or an appropriate organisation. One respondent believed that 'cultural competency and awareness training should be mandatory to maintain ongoing qualifications for employment positions'. Respondents often stated

that training should focus on practical skills that will assist staff in communicating and working with Aboriginal and Torres Strait Islander families and other culturally diverse groups. For example, one respondent felt it was important to have 'more competency-based cultural training i.e. providing skills for communicating/working with Indigenous children and families'.

Respondents also agreed that an organisation should be proactive in developing networks and building contacts with members of Aboriginal and Torres Strait Islander communities. Some respondents commented that organisations should recruit more staff from Aboriginal and Torres Strait Islander or other culturally and linguistically diverse backgrounds. One respondent stated that, 'talking with my staff from Aboriginal or [culturally and linguistically diverse] backgrounds has been much more beneficial than any formal training I have done'. Those respondents felt that having staff with culturally diverse backgrounds as part of the organisation provided a helpful 'starting point' for access to culturally appropriate advice.

Table 11: Views of Aboriginal and Torres Strait Islander staff about cultural competencies in mainstream non-government organisations

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
The training received by my colleagues is preparing them well to work with Aboriginal and Torres Strait Islander children and families.	9.5%	4.8%	38.1%	33.3%	14.3%
My colleagues are competent at working with Aboriginal and Torres Strait Islander children and families.	9.5%	14.3%	23.8%	38.1%	14.3%
My colleagues value my advice about working with Aboriginal and Torres Strait Islander children and families.	0.0%	9.5%	33.3%	38.1%	19.0%
I have enough opportunities to network with other Aboriginal and Torres Strait Islander staff in my organisation.	14.3%	19.0%	14.3%	28.6%	23.8%
I believe my organisation is committed to creating a culturally competent workforce.	0.0%	14.3%	28.6%	28.6%	28.6%

Feeling valued and supported

Respondents were asked about the extent to which they feel their work as a child protection professional is valued. The majority of respondents (86%) felt that the work they do is valued within their team and just over two thirds (69%) felt their work is valued within their organisation, and their respective communities (72%) (Table 12Table 12). Respondents were, however, less optimistic that their work was valued by government agencies (52%) or other non-government agencies (52%).

Table 12: Perceived value of child protection work

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I feel that the work I do is valued in my team.	0.2%	5.7%	8.4%	50.5%	35.2%
I feel that the work I do is valued by managers (CEO and board).	3.0%	11.1%	17.1%	43.1%	25.7%
I feel that the work I do is valued in my organisation.	2.0%	8.7%	15.8%	47.5%	26.0%
I feel that the work I do is valued by government agencies.	6.0%	15.6%	26.5%	39.8%	12.1%
I feel that the work I do is valued by other non-government organisations (eg. RAI and HOF services).	3.5%	5.7%	32.9%	42.8%	15.1%
I feel that the work I do is valued by the community.	2.5%	6.9%	18.3%	53.0%	19.3%

Respondents were also asked their views about the support they receive from their organisation to undertake their work. A majority of respondents agreed or strongly agreed that their workplace was supportive of its staff (81%), that their colleagues and managers supported their decisions (82%) and that they have access to professional debriefing following critical incidents (80%) (Table 13). Almost three quarters (71%) felt listened to when raising issues or concerns and two thirds (65%) felt they were provided with sufficient information about the outcome of complaints. A large number felt their organisation supported innovation (70%).

Table 13: Perceived workplace support

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
My workplace is supportive of its staff.	1.7%	9.1%	8.2%	34.6%	46.4%
There are staff to take care of my work while I am on leave.	6.1%	18.1%	12.9%	38.4%	24.5%
My colleagues and managers support my decisions.	1.7%	4.7%	11.6%	45.5%	36.5%
I am appropriately supported to fulfil my role in my organisation.	1.2%	8.4%	9.0%	45.9%	35.5%
I have access to professional debriefing following critical incidents.	3.2%	8.9%	8.2%	41.3%	38.4%
I am provided with sufficient information about the outcome of complaints about me or my organisation.	3.9%	11.3%	19.4%	36.7%	28.6%
I feel listened to when I raise issues or concerns.	4.0%	10.2%	14.4%	40.4%	31.0%
I feel that innovative practice is supported in my organisation.	3.7%	9.5%	16.5%	37.5%	32.8%

A small number of respondents (n=66) made suggestions for improving the support provided to staff in their organisation. These respondents provided a wide range of ideas. Some suggested that their organisations needed to employ more appropriately qualified managerial staff, have an understanding of the roles and challenges faced by staff they supervise and possess stronger communication and interpersonal skills. These respondents felt that recruitment of managerial staff with appropriate skills and attitude would ensure better support is provided to all staff in the organisation.

Others focused on addressing the emotional impact of the work carried out by staff, suggesting better training and support in 'self care'. For example, one respondent commented that, 'there needs to be more emphasis on self-care due to the crisis nature of our work, staff turnover is high which puts more pressure on individual workers'. In particular, some respondents identified the need for debriefing after critical incidents and that management should make time to be available for staff when critical incidents occur. Some respondents considered open and transparent communication between staff and management as most important for building a supportive working environment.

Information technology

Respondents were asked if their organisation had an information technology (IT) system to manage client cases, to which 76 per cent of respondents said they did. Approximately three quarters of respondents agreed or strongly agreed that the system supported their practice (74%), made it easy to access the information they required for their role (73%), could have information entered into it quickly (70%) and included all the information needed about clients (69%) (Table 14). Fewer respondents agreed or strongly agreed that the IT system generated all the reports needed (59%).

Table 14: Information Technology for Client Case Management

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
The IT system in my organisation supports my practice.	3.5%	7.4%	14.7%	60.4%	14.0%
Information can be quickly entered onto the IT system.	2.8%	16.1%	10.6%	56.1%	14.4%
The IT system makes it easy to access the information I need to perform my role.	4.2%	9.8%	13.0%	58.0%	15.0%
The IT system includes all the information I need about my clients.	3.9%	14.0%	13.0%	56.5%	12.6%
The IT system generates all of the reports I need to perform my role.	7.1%	17.2%	16.8%	47.0%	11.9%
The IT system is a reliable information database.	3.9%	10.9%	19.3%	53.3%	12.6%

Respondents were also asked to rate the level of detail in their IT system using a three point scale comprising 'too detailed', 'about right', and 'not detailed enough'. The majority of respondents (69%) reported that they found the level of information contained in the system 'about right' with one quarter (24.6%) reporting that the information was not detailed enough (Figure 4). Less than one in ten respondents (6.6%) reported the information in the database was too detailed.

Figure 4: Level of detail in information technology system for client case management
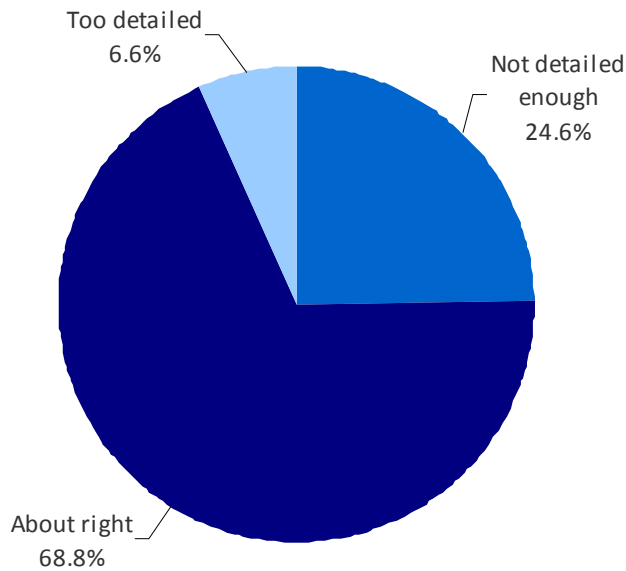
A small number of respondents (n=65) provided suggestions for improving their organisation's IT system. Most respondents' suggestions involved updating IT systems, removing unnecessary administrative steps in documentation, avoiding duplication of material and gaining remote or external access to databases. Some respondents suggested updating their current IT system to improve the speed and efficiency of document production, data input and the generation of reports. One respondent suggested the need to 'utilise available technology, update systems used and go paperless'. The respondents felt that a system upgrade was necessary to cope with the increasing volume of paperwork involved in the performance of their duties.

Most respondents had issues with administrative tasks that were considered excessive and resulted in the duplication of material. One respondent commented, 'The focus on reporting…should not be so intensive and detailed as if concentrating on that aspect, staff are given less time to focus on actually working with children'. The respondents suggested that IT systems need to be streamlined to reduce the duplication of paperwork and the administrative tasks carried out by staff.

A small number of respondents suggested that external or remote access to their organisation's database would be useful, particularly for staff working in regional or remote areas. Some respondents suggested that their organisation's database should be linked with the Integrated Client Management System used by Child Safety or alternatively, have a shared database with Child Safety.

Organisational programs and procedures

Respondents were asked to provide their views about their organisation's programs and procedures guidelines. In total, 89 per cent of respondents reported that their organisation had written procedures to guide the performance of their roles. More than three quarters of the sample (78%) agreed that they had clear guidelines for working with Child Safety (Table 15). The majority of respondents (74%) agreed that their organisation's program and procedure guidelines are a useful resource. Most also agreed that their organisation's program and procedure guidelines were easy to use (75%) and achievable (76%), while two thirds felt they were well structured (66%).

Table 15: Organisational programs and procedures

How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
We have clear local guidelines for working with Child Safety and other partners.	1.0%	10.0%	11.0%	56.0%	22.0%
I find my organisation's program and procedures guidelines easy to use.	1.8%	9.5%	13.7%	58.0%	17.0%
The program and procedures guidelines guide my practice.	0.8%	7.3%	13.5%	60.3%	18.3%
The standards set out in the program and procedures guidelines are achievable.	1.2%	6.0%	17.0%	59.3%	16.5%
The program and procedures guidelines are flexible enough to allow me to be innovative in my practice.	2.3%	7.7%	18.7%	57.0%	14.3%
The program and procedures guidelines provide practice guidance that works in the field.	2.0%	8.0%	18.8%	58.2%	13.0%
The program and procedures guidelines provide advice that can be implemented in urban and in rural and remote areas.	2.3%	8.2%	34.5%	45.0%	10.0%
The program and procedures guidelines are a useful resource.	1.2%	7.0%	17.8%	60.5%	13.5%
The program and procedures guidelines provide sufficient detail.	1.5%	8.5%	21.7%	55.3%	13.0%
The program and procedures guidelines are well structured.	1.2%	11.5%	21.5%	53.3%	12.5%

Respondents were also asked to rate their perceptions about the level of detail in their organisation's program and procedures guidelines using a three point scale comprising 'too detailed', 'about right', and 'not detailed enough'. Three quarters (75.1%) reported that the level of detail in their guidelines was 'about right'. For the remainder of the sample, 16 per cent felt their organisation's guidelines were 'not detailed enough' and just 9 per cent felt they were 'too detailed' (Figure 5).

Just under one fifth of respondents (n=83) provided suggestions for improving their organisation's program and procedures guidelines. Most of these respondents suggested that program and procedures guidelines should be more accessible and 'user friendly' for staff. Some also commented that their organisation's procedures and guidelines were overly 'bureaucratic' and at times, did not consider '…what it takes on the ground to perform the role of case management'. These respondents recommended that guidelines should be 'more practice oriented' and 'relevant to the role instead of broad organisational procedures'. One respondent stated, '…An organisation's programs and procedures are 'guidelines' – it is how the practitioner/professional 'wraps' their practice around the procedures that allows for innovation, strategy and creativity'.

Figure 5: Level of detail in organisation's program and procedures guidelines
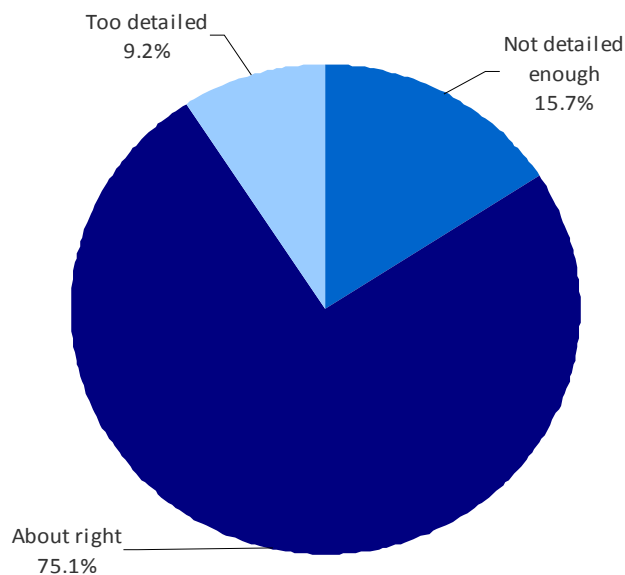
Workload management

A majority of respondents agreed that there is an appropriate balance between administrative tasks and frontline service delivery, with 70 per cent believing that they had enough time to spend with children, families and carers to form productive relationships (Table 16

Table 16).

While 77 per cent agreed that their workloads have increased over time, 71 per cent also felt that their current workloads were manageable. Exactly half of the respondents agreed that their work is reassigned when they are on leave and 60 per cent agreed that their organisation is usually fully staffed.

About a third of respondents (35%) agreed that pressure to meet their organisations' performance targets made it difficult to prioritise work with children, families and carers. Just under half felt that reporting requirements from funding bodies made it difficult to prioritise work with children, families and carers.

Table 16: Workload management

| How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
There is an appropriate balance in my role between administrative tasks and frontline service delivery to children, families and carers.	6.8%	21.0%	8.2%	49.5%	14.5%
I am able to spend sufficient time with the children, families and carers I work with to form productive relationships.	5.9%	16.1%	8.1%	53.8%	16.1%
My current workload is manageable.	5.0%	12.3%	11.7%	57.7%	13.3%
Workloads have increased over time.	1.3%	9.4%	9.9%	42.6%	35.0%
My work is reassigned when I am on leave.	7.1%	28.3%	14.4%	40.0%	10.2%
My organisation is usually fully staffed.	6.4%	23.3%	10.0%	46.5%	13.8%
The pressure to meet my organisation's performance targets makes it difficult to prioritise work with children, families and carers.	6.1%	35.9%	22.9%	23.4%	11.7%
The pressure of reporting requirements for funding bodies makes it difficult to prioritise work with children and families.	3.2%	30.5%	19.0%	28.3%	19.0%
Additional records and administrative support would free me up for case work.	0.8%	15.8%	18.2%	36.5%	28.7%

Respondents were asked to estimate how much of their time was spent on administrative tasks, excluding case planning and direct work with children, families and carers. The median amount of time estimated to be spent doing administrative tasks was 50 per cent (Figure 6

Figure 6).

Less than a quarter of respondents (n=89) provided suggestions for improving the management of workloads in their organisations. Most of these respondents agreed that reducing administrative work and recruiting more administrative staff would help in the management of workloads. One respondent held the view that 'there needs to be a balance between maintaining records, meeting reporting requirements and engaging in practice with children, families and carers', another respondent suggested organisations should consider having 'more administrative staff, less documenting requirements or better IT to assist with reporting requirements and record keeping'. In this respect, respondents commented that organisations should streamline their reporting and record-keeping requirements to avoid the duplication of material across paperwork and databases.

Some respondents identified funding issues which may impact on workload management and service delivery. A number of respondents reported that some staff members managed very high caseloads to meet funding requirements for their organisation. One respondent commented that, 'Funding requirements force us to work with too many families…a high caseload with complex clients also restricts staff from putting the appropriate steps in place with the family to achieve the best possible outcomes for the long term'. These respondents recommended that increased recruitment of staff would improve the management of workloads and assist in meeting the demand placed on organisations for timely service delivery.

Figure 6: Proportion of work time spent completing administrative tasks
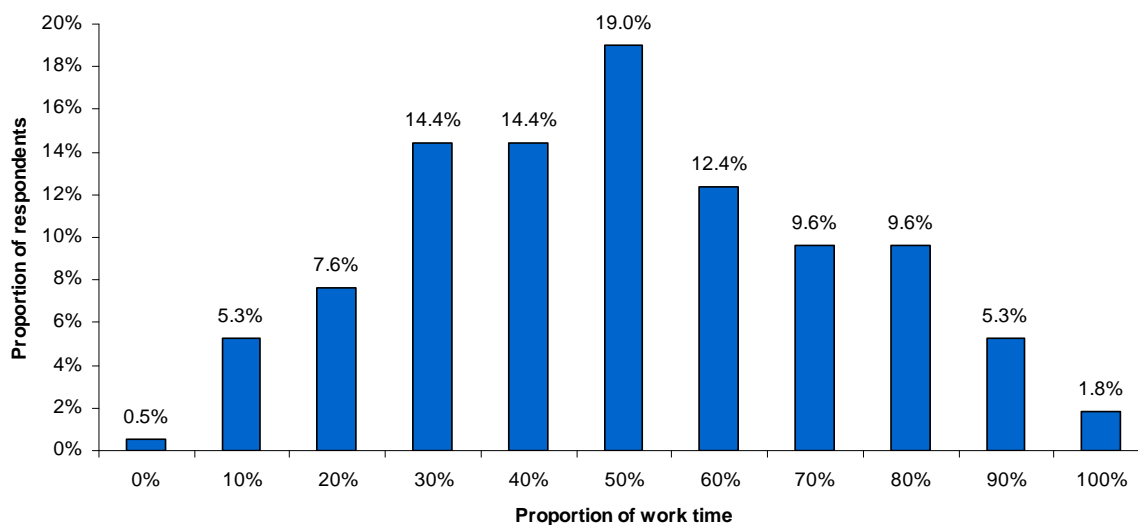
Professional relationships

Respondents were asked to rate the quality of their relationships with Child Safety along with other government and non-government organisations (Table 17). Respondents mainly reported having productive relationships with Child Safety (72%), other government organisations (80%) and non-government organisations (86%). When asked to rate their confidence about other non-government organisations, 66 per cent agreed that the other non-government organisations in their area are able to effectively deliver their services.

Table 17: Professional relationships

| How much would you agree or disagree with the following statements?	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
I have a productive relationship with Child Safety Services.	2.8%	9.6%	15.8%	51.3%	20.5%
I have a productive relationship with other government departments.	1.3%	3.7%	14.7%	65.0%	15.3%
I have a productive relationship with other non-government organisations in my area.	0.0%	4.4%	9.6%	65.9%	20.1%
I am confident that other non-government organisations in my area are able to effectively deliver their services.	1.3%	9.8%	22.8%	53.4%	12.7%

A small number of respondents (n=75) provided suggestions for improving relationships with professionals outside of their organisation. Most respondents suggested that organisations should create opportunities for inter-agency networking and community forums. For example, one respondent suggested having a 'community information session where all stakeholders are available to inform of their services to each other'. The respondents felt it was important to gain an understanding of the services and resources provided by each agency to improve service delivery to clients. One respondent suggested the need for 'interagency networking and being proactive in referring clients to agencies that best meet client needs'. Some respondents suggested that the development of formal partnerships and collaboration between agencies were useful ways to assist in streamlining the referral process for clients.

Access to services

Respondents were asked to rate their clients' access to a number of specialist services in their local area including family support, drug and alcohol support, mental health, housing, family violence support, and youth justice support services (Figure 7). Only a very small proportion of respondents reported that these services did not exist in their area – 5 per cent or less for any of the service types. However, many reported that these services were difficult for their clients to access.

Housing and mental health services were highlighted as the most difficult services to access. Only 36 per cent of respondents felt that there were easily accessible housing services for clients in their areas and 43 per cent felt that there were easily accessible mental health services. Youth justice services were considered the easiest to access, with 62 per cent of respondents saying their clients had easy access to these services, followed by family violence (54%), family support (51%) and drug and alcohol services (51%).

Figure 7: Clients' access to specialist services
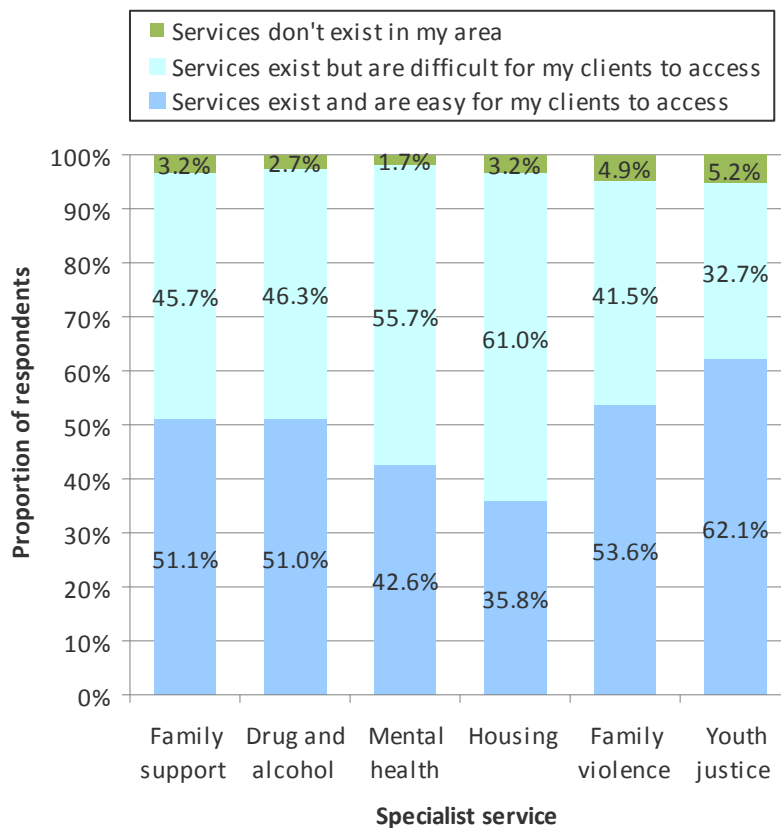
Appendix A

Survey instrument

Q1. Do you work in Queensland in a frontline child protection related role?
[Yes; No]

Q2. How long have you worked in human services?
[Less than 3 months; 3 to 5 months; 6 to 12 months; 1 year+; 2 years+; 3 years+; 4 years+; 5 years+; 6 years+; 7 years+; 8 years+; 9 years+; 10-15 years; 15 -20 years; More than 20 years]

Q3. How long have you worked in child protection related services (eg. family support services, early intervention, out-of-home care)?
[Less than 3 months; 3 to 5 months; 6 to 12 months; 1 year+; 2 years+; 3 years+; 4 years+; 5 years+; 6 years+; 7 years+; 8 years+; 9 years+; 10-15 years; 15 -20 years; More than 20 years; Not Applicable]

Q4. Have you ever worked for Child Safety or its predecessors?
[Yes; No]

Q5. How long have you worked for your current employer?
[Less than 3 months; 3 to 5 months; 6 to 12 months; 1 year+; 2 years+; 3 years+; 4 years+; 5 years+; 6 years+; 7 years+; 8 years+; 9 years+; 10-15 years; 15 -20 years; More than 20 years]

Q6. What is the postcode of your current workplace?
[Comment]

Q7. Is your organisation an Aboriginal or Torres Strait Islander controlled organisation?
[Yes; No]

Q8. What is the best description of the service in which you are employed?
Referral for Active Intervention
Family Support Service
Aboriginal and Torres Strait Islander Family Support Service
Helping Out Families
Family Intervention Service
Counselling and Intervention Service
Recognised Entity
Residential Care
Therapeutic Residential Care
Foster and Kinship Care Service
Family Violence Service
Drug and/or Alcohol Service
Homelessness Service
Other

Q9. What is your position title?
[Comment]

Q10. Briefly describe what the main purpose of your role is?
[Comment]

Q11. Are the majority of the clients you work with:
Children
Families
Both children and families
Carers
Not Applicable

Q12. Where do referrals to your service come from?
Child Safety
Queensland Health
Education Queensland
Queensland Police/Support Link
Recognised Entities
Referral for Active Intervention Services
Other government agencies
Other non-government agencies
Don't know/not applicable

Q13. How many days do you work on average per week?
[1; 2; 3; 4; 5]

Q14. The majority of the children, families or carers I work with live in:
[A major town or city; Regional or rural locations; Remote or very remote locations;
Not Applicable/Undecided]

Q15. Do you have regular contact with Child Safety Services clients as part of your role?
[Yes; No; Don't know]

Q16. Do any of your clients have a designated Child Safety Officer?
[Yes; No]

Q17. Does your organisation provide financial support for you to undertake tertiary studies?
[Yes; No; Don't know]

Q18. Do you hold any formal tertiary qualifications (certificate, bachelor etc)?
[Yes; No]

Q19. What types and levels of qualifications do you hold?
Arts
Behavioural Science
Community Welfare
Criminology
Education
Human Services
Justice
Law
Nursing
Psychology
Social Science
Social Work
Other
[Certificate III; Certificate IV; Diploma; Bachelor; Honours/Grad. Diploma; Masters; Doctorate/PhD]
Other
[Comment]

Q20. Are the majority of your qualifications directly relevant to your job?
[Yes; No]

Q21. Are you studying for any of the following qualifications? (If no, click Next)
Arts
Behavioural Science
Community Welfare
Criminology
Education
Human Services
Justice
Law
Nursing
Psychology
Social Science
Social Work
Other
[Certificate III; Certificate IV; Diploma; Bachelor; Honours/Grad. Diploma; Masters; Doctorate/PhD]
Other
[Comment]

Q22. How much do you agree or disagree with the following statements?
I get a good balance between professional and administrative supervision
I receive regular formal scheduled supervision.
I receive regular informal, unscheduled supervision.
I receive regular direct supervision (in the field).
I receive regular support that is self-funded.
I receive regular group supervision.
I receive regular external supervision funded by my organisation.
The supervision I have access to assists me to fulfil my role.
The supervision I receive is mainly administrative in nature, ie allocation of work and tasks.
I am supervised by an appropriately experienced practitioner.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q23. Do you have any suggestions for improving supervision in your organisation?
[Comment]

Q24. I feel confident that I have the skills I need to work effectively with:
Parents
Children
Young people (teenagers)
Foster carers
Kinship carers
People with disabilities
People with mental health problems
People who misuse drugs and alcohol
Cases involving domestic violence
Cases involving sexual abuse
Cases involving physical abuse
Cases involving neglect
Cases involving emotional/psychological abuse
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q25. Have you commenced/completed any form of induction training for your role?
[Yes; No].

Q26. How much do you agree or disagree with the following statement?
My induction training helped me develop the skills and knowledge I need to perform my role.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q27. Do you have any suggestions for improving your organisation's induction training?
[Comment]

Q28. Have you had any other training or professional development opportunities while employed by your organisation?
[Yes; No]

Q29. How much would you agree or disagree with the following statements?
The training I have been provided with in my organisation has been adequate for me to undertake my role.
My organisation offers sufficient professional development sessions run by senior staff.
The detail provided in professional training sessions is sufficient to meet my needs.
The training I am provided with by my organisation covers topics important to my work.
I am encouraged to undertake further education and/or professional development external to my organisation, for instance, tertiary study.
My organisation offers incentives for me to undertake professional development.
I am given opportunities to attend workshops and conferences.
My organisation invests in my professional development.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q30. Do you have any suggestions for improving training and professional development for staff in your organisation?
[Comment]

Q31. Have you been given opportunities to work in different roles in your organisation?
[Yes; No]

Q32. How much do you agree or disagree with the following statements?
I have been provided with training prior to working in different roles.
I feel that the level of training has been adequate to enable me to undertake these different roles.
I am supported while undertaking different roles.
My work commitments in my usual role are fulfilled by someone else while I am undertaking a different role.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q33. Do you have any suggestions for improving opportunities to work in different roles in your organisation?
[Comment]

Q34. Does your organisation provide training in cultural competencies?
[Yes; No]

Q35. Have you ever undertaken training in cultural competence while employed by your organisation?
[Yes; No]

Q36. When was the last time you undertook cultural competency training in your organisation?
[Within the last 12 months; 1 year+; 2 years+; 3 years+; 4 years+; Never]

Q37. How long did your last cultural competency training go for?
[1 hour; 2 hours; 3 hours; 3 – 5 hours; 5-7 hours; More than 7 hours]

Q38. Are you required to demonstrate culturally competent practice as part of your work performance reviews? (eg. preparing or working with a cultural support plan)
[Yes; No; Unsure]

Q39. How much do you agree or disagree with the following statements?
I have someone to seek cultural advice from when working with Aboriginal and Torres Strait Islander children and families.
My training has prepared me well to work with Aboriginal and Torres Strait Islander children and families.
I feel confident working with Aboriginal and Torres Strait Islander children and families.
My training has prepared me well to work with children and families from Culturally and Linguistically Diverse (CALD) backgrounds
I feel confident working with children and families from Culturally and Linguistically Diverse (CALD) backgrounds.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q40. Approximately what proportion of the clients you work with are Aboriginal and Torres Strait Islander?
[None; Less than 10%; 10%; 20%; 30%; 40%; 50%; 60%; 70%; 80%; 90%; 100%;Not Applicable]

Q41. Approximately what proportion of the clients you work with come from Culturally and Linguistically Diverse (CALD) backgrounds?
[None; Less than 10%; 10%; 20%; 30%; 40%; 50%; 60%; 70%; 80%; 90%; 100%;Not Applicable]

Q42. Do you have any suggestions for improving the cultural competency of staff in your organisation?
[Comment]

Q43. Do you identify as Aboriginal or Torres Strait Islander?
[Yes; No]

Q44. How much do you agree or disagree with the following statements?
The training received by my colleagues is preparing them well to work with Aboriginal and Torres Strait Islander children and families
My colleagues are competent at working with Aboriginal and Torres Strait Islander children and families
My colleagues value my advice about working with Aboriginal and Torres Strait Islander children and families
I have enough opportunities to network with other Aboriginal and Torres Strait Islander staff in my organisation
I believe my organisation is committed to creating a culturally competent workforce
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q45. How much do you agree or disagree with the following statements?
My workplace is supportive of its staff.
There are staff to take care of my work while I am on leave.
My colleagues and managers support my decisions.
I am appropriately supported to fulfil my role in my organisation.
I have access to professional debriefing following critical incidents.
I am provided with sufficient information about the outcome of formal complaints, reviews and investigations.
I feel listened to when I raise issues or concerns.
I feel that innovative practice is supported in my organisation.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q46. Do you have any suggestions for improving the support provided to staff in your organisation?
[Comment]

Q47. How much do you agree or disagree with the following statements?
I feel that the work I do is valued in my team.
I feel that the work I do is valued by managers (CEO and board).
I feel that the work I do is valued in my organisation.
I feel that the work I do is valued by government agencies.
I feel that the work I do is valued by other non-government organisations (eg. RAI and HOF services).
I feel that the work I do is valued by the community.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q48. Does your organisation have an Information Technology (IT) system for client case management?
[Yes; No; Not applicable to my role]

Q49. How much do you agree or disagree with the following statements?
The IT system in my organisation supports my practice.
Information can be quickly entered onto the IT system.
The IT system makes it easy to access the information I need to perform my role.
The IT system includes all the information I need about my clients.
The IT system generates all of the reports I need to perform my role.
The IT system is a reliable information database.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q50. The level of information collected in the IT system is:
[Not detailed enough; About right; Too detailed; Undecided/NA]

Q51. Do you have any suggestions for improving your organisation's IT system?
[Comment]

Q52. Does your organisation have written programs and procedures guidelines that outline how you are to perform your role?
[Yes; No]

Q53. How much do you agree or disagree with the following statements?
We have clear local guidelines for working with Child Safety and other partners.
I find my organisation's program and procedures guidelines easy to use.
The program and procedures guidelines guide my practice.
The standards set out in the program and procedures guidelines are achievable.
The program and procedures guidelines are flexible enough to allow me to be innovative in my practice.
The program and procedures guidelines provide practice guidance that works in the field.
The program and procedures guidelines provide advice that can be implemented in urban and in rural and remote areas.
The program and procedures guidelines are a useful resource.
The program and procedures guidelines provide sufficient detail.
The program and procedures guidelines are well structured.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree]

Q54. My organisation's program and procedures guidelines are:
[Not detailed enough; About right; Too detailed; Undecided/NA]

Q55. Do you have any suggestions for improving your organisation's program and procedures guidelines?
[Comment]

Q56. How much do you agree or disagree with the following statements?
There is an appropriate balance in my role between administrative tasks and frontline service delivery to children, families and carers.
I am able to spend sufficient time with the children, families and carers I work with to form productive relationships.
My current workload is manageable.
Workloads have increased over time.
My work is reassigned when I am on leave.
My organisation is usually fully staffed.
The pressure to meet my organisation's performance targets makes it difficult to prioritise work with children, families and carers.
The pressure of reporting requirements for funding bodies makes it difficult to prioritise work with children, families and carers.
Additional records and administrative support would free me up for case work.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q57. Approximately what proportion of your work time is spent doing administrative tasks (excluding case planning and direct work with children, families and carers)?
[0%; 10%; 10%; 20%; 30%; 40%; 50%; 60%; 70%; 80%; 90%; 100%]

Q58. Do you have any suggestions for improving the way workloads are managed in your organisation?
 [Comment]

Q59. How much do you agree or disagree with the following statements?
I have a productive relationship with Child Safety Services.
I have a productive relationship with other government departments.
I have productive relationships with other non-government organisations in my area.
I am confident that other non-government organisations in my area are able to effectively deliver their services.
I have productive relationships with Centrelink.
[Strongly Disagree; Disagree; Undecided; Agree; Strongly Agree; Not Applicable]

Q60. How would you rate your client's access to each of the following specialist services in your local area?
Family support services.
Drug and alcohol services.
Mental health services.
Housing services.
Family violence services.
Youth justice services.
[Services exist and are easy for my clients to access; Services exist but are difficult for my clients to access; Services don't exist in my area; Don't know]

Q61. Do you have any suggestions for improving relationships with professionals outside your organisation?
[Comment]

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