

TRANSCRIPT OF PROCEEDINGS

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THE HONOURABLE TIMOTHY FRANCIS CARMODY SC, Commissioner

MS K McMILLAN SC, Counsel Assisting MR M COPLEY SC, Counsel Assisting

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

BRISBANE

..DATE 30/08/2012

Continued from 29/08/2012

..DAY 13

<u>WARNING</u>: 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 9.59 AM

COMMISSIONER: Good morning.

HAYWARD, WILLIAM JOHN called:

COMMISSIONER: Mr Hayward, welcome back?---Good morning.

Where were we with Mr Hayward? Ms Ekanayake, thank you.

MS EKANAYAKE: Thank you, Commissioner.

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Mr Hayward, before we adjourned for lunch yesterday you spoke of the REs and the limitations of their role. further questions for you on the operation of the RE in Queensland, but before I get to that I'd like to ask you, you made a statement yesterday to the Commissioner to the effect that the stolen generation influences the high numbers of children in care. Is there any aspect of that statement that you would like to clarify further?---Yes, I would like to clarify that statement. First and foremost I'd like to agree with Brad Swan, the DDG, that the media often sensationalises child protection and influence then public perception, including decision-makers' perception. That can be both positive and negative. I do want to make it very clear that yes, the inter-generational cycles that can be linked to history, including the stolen generation, definitely have an impact in current child protection over-representation and that must be taken into account. There should be strategies to address that grief and loss and transfer of that trauma into future generations; but it must also be balanced with child protection responses to the immediate harm and risk indicators, including neglect, domestic violence, drug and alcohol misuse and parenting capacity. So I just wanted to make that clear to the commission of inquiry today.

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Thank you. A housekeeping issue: you were asked yesterday by counsel assisting whether ATSILS had consulted community in relation to the availability of carers. Do you have that information? --- Yes, I do have that information. ATSILS has delivered a range of consultations. Bill Oversen, my predecessor, ran a series of state-wide Rights of the child protection consultations, which I have that final report here to provide to the commission, which does outline some constraints and issues that need to be overcome, including issues around recruiting and retaining Aboriginal and Torres Strait Islander foster carers and kinship carers. In addition to that I've run community legal education sessions and there has been a continual interest in the challenges that are faced in becoming a carer by the community, so I would like to clearly state that I don't believe that it is a lack of capacity, considering there's only 4000 children in care, when there's 70,000 Aboriginal and Torres Strait Islander children across the state. I believe through those consultations and practical experience that it is, in fact,

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the engagement processes that are used during the I and A stage and also the follow-up reviews which the Commissioner has already highlighted as a positive. I also have a - -

COMMISSIONER: Just before you go on with that, Mr Hayward, I'll take that final report and make it an exhibit. Exhibit 46, it will be.

ADMITTED AND MARKED: "EXHIBIT 46"

COMMISSIONER: Just before you do go on, what do you say to the proposition that - taking your point on board about 10 the engagement practices and the deterrent effect of those because of their formality and things like that, what do you say to the proposition that part of the reason is that maybe some of the kinship carers who would otherwise be suitable, might be dealing with the same problems and challenges that the immediate parents of the child concerned are grappling with? That is they come from the same family, they've been exposed to the same difficulties themselves, and they're coping with their own families and perhaps their own problems makes it difficult for them to take one of their kin's children in and care for them as well?---It's a valid concern and I certainly believe there 20 would be a percentage of possible carer applicants that would fit that category. I would encourage a new way of thinking around placing Aboriginal and Torres Strait Islander children with kin where clearly they may not be drawn to the attention of the department at a child concern report level - notification level - but may struggle to actually meet the requirements of a foster and kinship care assessment and blue card assessment. I think that in those cases perhaps a more therapeutic strength-based approach where there was a type of family support delivered to possible Aboriginal and Torres Strait Islander carers to 30 maintain the standards of care in 122 of the act would be highly beneficial and would reduce costs that are actually within the statutory system, whilst maintaining a level of acceptable safety and protection for children.

So support the carers, whether it's the parent or kin? --- Absolutely.

What do you think about relaxing the standards in 122 in indigenous communities as a way of having the child adequately cared for even if it's not going to be the optimal standard?——I think it's a valid argument that if we look at section 10, harm and risk occurring and a parent willing and able, it's a valid argument where extended family members may not reach the threshold of harm and risk and meet the threshold of being willing and able. I think it's a valid approach to take a strength-based therapeutic model, but maintain the standards of care in 122 and actually support people to meet that standard of care. I think an erosion of the standards of care would be an injustice to all children, including Aboriginal and Torres Strait Islander children. It's about being innovative and actually supporting and building that

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capacity to meet that standard.

It's helping them clear the bar, not by lowering it?---Not by lowering it, but by offering that assistance; assistance that should, through a case management model, have an exit strategy and a step-down approach where they can actually take on that responsibility themselves, not placing an extra burden over time on the system.

So you'd see the standards at 122 as minimum, not maximum standards?---I believe that they're maximum standards, but I think that if we are to approach the realistic challenges that we face, that a therapeutic strength-based model to support people to adhere to those standards would be beneficial and would actually increase the amount of carers available.

Likewise, do you see any role for relaxing standards in remote communities to - you know, like, if you can't get the best, at least get adequate or least worst who's available, who's there; rather than aspiring for the ideal and not having anybody? Just for an example, people who might adequately be able to fulfil the role of a JP in a remote community from within the community might not satisfy all the requirements if they were living in Brisbane. Do you know what I mean?---Yes, I do. I think there's a few layers to the question. I think first and foremost we have to understand the low socioeconomic conditions within those communities and the structural challenges that people face that are outside of their control and influence.

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So when approaching those assessments that should be taken into account, about what parents and other care providers can influence and control in terms of their children's wellbeing and protection - certainly shouldn't be penalised because of issues such as housing and access to services, you know, within a child protection setting, because that's outside of their control. However, I think that the act actually offers us in section 61 and 113 where certain families could attend court and present their position in terms of meeting the care and protection needs of the child. I think the act actually provides us with current pathways to achieve that. What would need to happen within the system is the therapeutic strength based approach to actually support those mechanisms in the legislation under section 61.

What about the blue card? Should the conditions for being issued one of them be relaxed, without creating unacceptable risk to a child or anyone else?---Blue cards are a significant issue given the over-representation within child protection and the criminal justice system so it's often a challenge for Aboriginal and Torres Strait Islander carer applicants. I actually think that it's more to do with the very legalistic process, however I accept 20 that the blue card maintains an appropriate level of safety and monitoring of blue card holders that protects children. I think what's needed is approaches where applicants are actually supported and walked through that process so that if they do have child protection and criminal history that the context of when that occurred is described, what steps have been taken to address that behaviour and where that carer applicant family is at now in terms of their ability to care and protect children, particularly their own kin. So I see it as rather than a relaxing of those standards that protect children, I see it more as a process issue 30 where people need to be supported and we need the mechanisms in place to actually support people to achieve blue card status. Anecdotally, I feel that a lot of our community members drop out of that process or don't engage in that process because of the very formal, legalistic approach to achieving that. I would also acknowledge that there are times where people achieve blue card status but don't meet the requirements of the fostering and kinship carer application at a departmental level. So I think also that process of engagement may need to be explored and looked at. In the articles that I've attached I've spoken about the WINAGAI kinship carer assessment. Those sorts of 40 approaches are much more acceptable to Aboriginal people and if a process was delivered within Queensland to align those culturally appropriate methods of assessment we may actually have a more beneficial result in the number of carers that are being approved. I think it will take a cultural shift to a therapeutic and supportive model to increase the number of carers within Queensland.

Thank you. Yes, Ms Ekanayake?

MS EKANAYAKE: Going back to the subject of recognised

entities - - -

COMMISSIONER: Sorry, that exhibit 46, it's marked "Confidential". I just wonder - - -?---Yes. I have permission from the CEO of Aboriginal and Torres Strait Islander Legal Services to release it to the commission. must state, though, that that is an overview of the community engagement that we carried out and is a reflection of community views rather than an ATSILS position.

Okay, thank you. We'll publish it. We'll publish it without alteration. Thank you.

MS EKANAYAKE: Thank you. You refer to the restrictions or limitations placed on the recognised entities. Is this statutory or by other means?——First and foremost the recognised entities do a brilliant job in ensuring culturally appropriate decisions within the current setting, so this is solution focused and more forward thinking around how section 6 could actually be utilised more effectively. When looking at section 6, it's clear that the limitations around the recognised entity often relate to the participation and consultation in decision—making and it is actually minimising the level of impact and assistance that they can provide in the statutory system.

So are you saying that - or from your experience are you saying recognised entities are consulted as required in the legislation or that's not happening?---I think there's significant challenges post reform with the reduction of recognised entities to 11 services and a larger catchment area to deliver recognised entity services. So there is that aspect that impacted significant decision-making. also feel that within the act quite often it is far too easy for the department to skip one in two of the acts and move straight to section 6(3), however if compliance with subsections (1) and (2) is not practical because the recognised entity for the child is not available or urgent action is required to protect the child, then chief executive or an authorised officer must consult with the recognised entity for the child as soon as practical after the decision has been made. In my experience, that's a constant challenge for the recognised entity professionals. In this day and age where we have mobile phones and email there's very few circumstances that the recognised entity could not be available for a significant decision. However, in my experience, the feedback is that we would always support and promote urgent action to protect children and if the recognised entity is unavailable, at that stage we would, you know, not see any problems with that. It's the conscious effort to actually adhere sections 1 and 2 before those stages that are under constant pressure. Also, within the service agreement section 4 clearly outlines - section 6(4) clearly outlines the role of the recognised entity at a court stage. My interpretation of section 6(4) is quite clearly that the

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recognised entity has a role at court, however what we see in policy procedures practice and also in service agreements is a minimisation of the recognised entity court role and pressure put on the recognised entity in terms of their independence and their view. There will always be a requirement to work constructively with the department according to subsections (1), (2) and (3) to have input into significant decision-making, however there is some tension around providing the recognised entity's input as part of the child safety affidavit or having your advice and recommendations reported to the court from a third 10 party or the department. So there are tensions in terms of the application of section 6(4) as a limitation. Also, section 5 clearly speaks about cultural competency and cultural engagement in terms of the meetings, negotiations and family group meetings. Recognised entities have an instrumental role in making those meetings more culturally appropriate, but again I would highlight the onus of family group meetings and meetings often is about meeting the statutory obligation of the department and there needs to be a shift towards a more - absolutely a child focused position, but a more family inclusive approach and for the recognised entity to be limited to participation and 20 consultation.

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It does make it difficult for the sector to actually promote section 6(5). I also would highlight section 6(6). The definition of significant decision-making within the service agreement of the recognised entities, quite rightly so, that is more defined into intake, investigation and assessment, SCAN, case planning, court, matters of concern and the service agreement actually looks at further defining significant decision-making and the way that the act actually reads is that it's far more broader than that. I think there is some use in exploring section 6; how could that actually be strengthened and how the recognised entity could have more than an instrumental role at those stages 10 rather than being restricted to participation and consultation. Perhaps it would be a much more feasible investment and have more inroads to addressing over-representation if we explored the learnings that we have from the Victorian model. I wouldn't propose that we create a new statutory system or another program stream. would propose that we strengthen the recognised entities' role and if I can just refer to the Victorian model, the Aboriginal family decision-making where Aboriginal and Torres Strait Islander professionals have a fundamental role in the FGM process and facilitate family responses to harm and risk and also meet the cultural needs of children 20 and also the cultural attention programs that exist there where cultural officers actually develop, implement and support families, carers and children around their specific and unique needs of Aboriginal and Torres Strait Islanders. That also exists in New South Wales quite positively. there's an intensive level of cultural support to actually adhere to those requirements in the act. I feel also that the recognised entity could be more instrumental in transition from care or mentoring Aboriginal and Torres Strait Islander youth through their time in statutory care, helping them to negotiate and build a foundation of strength from both a cultural, but also importantly a 30 community and family perspective. I very much so that the recognised entity could be far more instrumental than what's currently in section 6 and it's fundamental that a statutory non-government Aboriginal and Torres Strait Islander service is provided to Aboriginal and Torres Strait Islander children in their best interests and to meet their unique needs.

Going back to your comment, you mentioned service agreements. Are you making reference to a service agreement between the recognised entity and the Department of Child Safety or Child Safety Services?---Yes, I am referencing the service agreement.

Are you saying that service agreement prohibits the RE from providing information to the court of their own accord? ---The service agreement does limit and place some pressure on the independence of the recognised entity and in my opinion it further clarifies and to an extend minimises section 6 of the act. I think it is important that there is an independent Aboriginal and Torres Strait Islander voice at court on behalf of the unique needs of children

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and young people. Within the service agreement there is a great deal of emphasis put on the fact that recognised entities can only attend court with informing Child Safety Service centre staff. Often that's difficult. In the challenges that we face within practice, affidavits are often served the day before court and sometimes there's new and additional information that the recognised entity must look through. Any additional information may change their original position that they've actually had input in the significant decision-making process and then subsequently that being included in the affidavit of Child Safety. there is some tension around those service agreement obligations and I would say under pressure put on the recognised entity and their independence at court. actually promote capacity building of that role and mechanisms where cultural reports can actually be put into the court and the recognised entity can value add rather than minimising and controlling that role. It is a very important role and it's important that the authority of the court, the magistrate, is well informed around the best interests and the approaches to take for a child, both in child protection intervention as well as cultural retention and preservation.

COMMISSIONER: Are they standard agreements?---Yes, they are standard agreements with slight variation for each service.

The one you've been referencing, is it a representative, subject to some situational variations or - - - ?---My experience is that the recognised entity model and the service agreement template is fairly standard across the state and only offers slight variation around organisational models and service delivery.

Okay?---So the requirement does similar and the same for all REs.

Have you got a copy you want to give me or do you want me to get that off the department?---I think it would be more appropriate that the department provides that.

Okay?---It also limits the level of engagement with families and I think that that's probably a very valid point. On one hand in section 6, we expect the recognised entity to participate and consult in significant decision-making and to value add in those decisions. The recognised entity must be able to gather that information and engage with families and within those service agreements, it also states that visiting or contacting families without Child Safety Service centre consultation or without Child Safety Service centre staff present is not allowed. I would suggest there needs to be some mutual respect for the recognised entity that they are child protection professionals working within a significant decision-making framework and to value add in the current structure those limitations are unacceptable and actually hinder the level of information that can be provided in

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significant decision-making.

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MS EKANAYAKE: Thank you. Moving on, you made reference to the Victorian child care agency role. Did you want to expand on that subject or speak to that subject further or - - -?---I think it's important to speak about some of the benefits of the Aboriginal and Torres Strait Islander family decision-making and how that may be useful in a Queensland setting. Within Victoria, the program convenes Aboriginal and Torres Strait Islander family group meetings and it's an opportunity for the immediate extended and community members and elders to participate and have ownership of decision-making processes during the case planning process and family group meetings.

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And so in determining actions to address care and protection needs identified and assessed by the Department of Human Services, the program actually is much more aligned with the original New Zealand family group meeting model where it's a more inclusive process and more culturally appropriate. I think that that would value-add in a statutory role within Queensland and produce strong results.

COMMISSIONER: I think he's finished.

Thank you. Going to paragraph 60 of your 10 MS EKANAYAKE: statement, you speak of cultural support planning, integrating cultural support planning with legislation. Would you like to comment on that further?---Again, the intent of section 6 is - if you look at the intention of section 6 it is about more resourcing of the department to make more culturally appropriate and meaningful decisions, both at a family level and a child level. So when you reflect on Victoria and New Zealand, perhaps what is needed is the recognised entity to have more of a fundamental role to integrate the processes so that the requirements of the Aboriginal and Torres Strait Islander child placement principle and cultural support planning are better met. At 20 this stage I believe the system lacks those processes and an innovative approach and rethink around significant decision-making may actually release those limitations that we currently face in process and in program design rather than a deficiency of the recognised entity service. So I would highlight that those limitations could be overcome if greater responsibility was given to statutory - outlined in section 6, the recognised entity service. So at this stage there's minimal engagement with families, it's difficult to gather that information in time to have a meaningful impact in significant decision-making. They're pressures that are 30 faced across the continuum of child protection, both for internal staff and recognised entity staff. But a rethink around the role that recognised entities could have in engaging families earlier and more meaningfully at the earlier stages and at key points such as family group meetings, convening as well as transition from care, could have a meaningful impact on the adherence to the Aboriginal and Torres Strait Islander child placement principle in section 83 and also requirements under 51B, and the further enhancement of that in the cultural support plans and ICMS. I actually see that we have a brilliant resource, both internal with Aboriginal staff and external with the recognised entity, and in the future I think that a 40 meaningful and results-driven approach to getting the most out of those professionals could actually integrate legislation and practise and meet those requirements much more successfully and at a higher standard across the state.

Finally at paragraph 61 you say in your view the future child protection system must reflect the unique needs of Aboriginal and Torres Strait Islander children and young people. Any further final comments you'd like to make?

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I guess it goes to cultural competency. Within Queensland I do think we actually have some framework of cultural competency. Within the department we have - at a head office level there are indigenous Aboriginal coordinators at a policy and practise level who inform the directors and executive directors and also the deputy director-general; important roles in terms of reflecting Aboriginal and Torres Strait Islander people in strategic decision-making. Those roles are fundamental within the department. Also at a regional level there are Aboriginal and Torres Strait Islander people engaged in a contract management role. Those roles are fundamental and could 10 also be utilised more effectively to strengthen Aboriginal and Torres Strait Islander responses. And then at a service centre level we have the identified position in the child safety support officer's roles. That's also a fundamental role in terms of reflecting the needs of our clients, which is 60 per cent Aboriginal and Torres Strait Islander, and also reflecting our children and young people within the service delivery structure of the department. So I would argue that the future system would also need to strongly reflect Aboriginal and Torres Strait Islander children within the department. I would make the point, though, that it needs to be far more strategic and far more 20 organised in terms of a head office level and rather than have Aboriginal and Torres Strait Islander practise as an add-on to child protection practise, that it is ingrained throughout strategic direction as well as policies, procedures, and a frontline service delivery model. there needs to be key drivers within the department to ensure that at every level within the community-controlled sector there's also the recognised entity and support and foster and kinship care; important elements to reflect Aboriginal and Torres Strait Islander children in the non-government sector, given the rates of over-representation. Recently there were amendments to 30 service agreements for mainstream organisations to reflect cultural competency. So those service agreement obligations should also flow in similar to mainstream organisations reflecting the clients that we serve.

Thank you, Mr Hayward.

COMMISSIONER: Mr Copley.

MR COPLEY: I have no questions for the witness.

COMMISSIONER: Mr Selfridge.

MR SELFRIDGE: Yes, thank you, Commissioner.

First of all, Mr Hayward, yesterday there were a series of questions put to you by my learned friend Mr Copley in relation to comparative data in relation to Aboriginal and Torres Strait Islander children placement in New South Wales, Queensland and Western Australia. Do you recall that?---Yes, I do.

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I understand the questions that were put to you - of the data that was put to you there were preferred placements in New South Wales in the region of 82 per cent non-preferred, 17 point - whatever it might have been; Queensland, 52 per cent preferred as opposed to 47.5 non-preferred; and Western Australia, 71 preferred as opposed to 28.8 non-preferred, statistic (indistinct) you recall that? ---Yes, I do.

Yes, great. And you were asked a series of questions as to why you may perceive that to be or offer up any explanation. Have you considered this one, Mr Hayward: that perhaps there may be some reason in relation to the obstacles that Aboriginal and Torres Strait Islander persons - significant obstacles they have to overcome in applying for or being issued with positive notices, as in blue cards and the like - a consideration, perhaps (indistinct)?---Yes, I have considered that and as I stated before, I believe it is the mechanisms of engagement with families and the level of support that's provided to families and possible carer applicants to work through that process. ATSILS along with other stakeholders such as the Queensland Aboriginal and Torres Strait Islander child protection people, have sat on a blue card advisory body with the commission.

I suppose that's where I want to go with you, Mr Hayward. I might talk to you about the specifics of that, about (a) the obstacles, and (b) about how ATSILS, the department, and the Commissioner for Children and Young People tried to address those issues.

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If I could just break it down into parts. Is that okay?
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As I understand it, and on my instructions, first of all there's a perception, commonly held perception, of ineligibility, as such, among Aboriginal and Torres Strait Islander people in relation to the issuing of positive notices. Is that one of the factors that you understand it to be?---Yes, one of the challenges that the commission and stakeholders face is that because of the level of child protection history, often linked to eras of high removals, including the forcible removals, that there will be a record of contact with previous child protection providers historically and both recently as well as the over-representation in the criminal justice system.

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Sure?---So when applying for a blue card the initial forms are quite standard and easier to use, but on the event that those issues come up a letter will be sent to the applicant and the letter will be requiring a submission to provide context around the offences, what's been done to address them and where that carer applicant is at now.

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That's where it gets difficult, isn't it?---It does get very difficult at that stage, because there is a lot of confusion at that point as to whether they're eligible or ineligible, and there's a range of factors there, numeracy and literacy, also the process is quite legalistic. So there's often at that point, without the necessary support from an agency to walk through that process to respond to that request, people are withdrawing at that point anecdotally, they're withdrawing. You, yourself, through your work with ATSILS and the department and Commissioner for Children and Young People, have formed a partnership, as such, to try and address those issues, haven't you? --- That's correct. We've developed a number of strategies. The commission is running community consultations promoting the process of blue cards and engaging the community to take on that carer role and increase the pool of blue card holders. ATSILS as part of that have provided civil law assistants as well as developed a fact sheet that's available to the community as an inroad to respond to the process both at the initial stages when completing the initial form, but more importantly where a response may be required to historical child protection and criminal justice history. Often those offences are summary offences or offences that would not disqualify a person outright

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or offences that would not disqualify a person outright from a blue card.

That's the reality, isn't it, yes?---But the submission process, getting through that is a key challenge because of

the level of support that may be needed for those carer

applicants.

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Certainly, and perhaps other issues or other barriers might include language and the like in the more remote areas where English is a second language?---Absolutely. I think that across the Gulf, the Cape and the Torres Strait

Islands, that in all child protection practice we should be mindful that people are third and fourth English language speakers, and although people may be able to speak some level of English, the conceptual understanding and the clear communications can be a very direct barrier. I would highlight and be interested in to what extent we should interpreters in those areas in child protection practice generally, but in this case definitely in those areas there is required a level of local assistance to overcome the language barrier as well as hands on assistance throughout the quite legal and bureaucratic process. I understand that it's required to protect children, but they are challenges within the system.

Well, it's onerous, isn't it? I mean, it's an onerous process, as such, and it might of itself deter people applying for blue cards?---The answer to that is yes, and what is needed is strategies to actually assist people.

Yes?---There is an authority to liaise form that allows a third party to engage on people's behalf. That's a positive approach.

Yes?---The awareness around that form needs to be built and there needs to be assistance, hands on assistance, provided to people who are going through the carer applicant process.

As I understand it as well, even this year alone there has been a whole series of places or communities that have been visited by those that you've identified as formed part of a consultation partnership, and that includes Townsville, Palm Island, Yarrabah, Rockhampton, Woorabinda and Cairns, but that really needs to be extended further, doesn't it?——Absolutely. I would encourage a state—wide roll out around community awareness and education around the blue card process, as well as having the practical assistance available during those workshops to actually complete that—or initiate that process of blue card applicants. There would also need to be a commitment from a range of service providers, foster and kinship care services, ATSILS, Legal Aid, to be available to people for the more legalistic——

Assist - - -?--- - - submission process.

Yes, because the reality is it's a cyclical thing, because what we're seeing is we're identifying a major issue or flaw in the current system, in that there's not enough carers being identified for indigenous children, but the reality is that for all those factors that we've just discussed and a whole series of others, notwithstanding remote locations, et cetera, that we do need to address that first and foremost. That's the substance of the issue, isn't it, or one of the primary focal points?---One of the key challenges to achieving an increase in Aboriginal and Torres Strait Islander carers is overcoming the challenges in process both within the blue card process

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and also the formal assessment process.

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Well, this education and/or assistance, legal or otherwise, and maybe even - or some of these - is a strategy that has been adopted, then it's certainly something that needs to be expanded upon. That's what you're saying, isn't it? ---Absolutely, and I think it also highlights the limitation on the recognised entity in terms of being restricted to participation and consultation. They are the sorts of activities in the earlier stages of INA that could actually be expanded on to engage kin and extended family at the earlier stages both through the blue card process and the foster and kinship care process. Although there's some structure in place and policies in place that would suggest that that should occur, the level of strain and workload on the front end investigation and assessment, it's rare that that's done constructively and intensively in terms of engagement. I would highlight that one recognised entity introduced a family decision-making process at the INA stage for that purpose, but it found that difficult to implement due to the restrictions around the model.

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Can you expand on that further? Can we get the genesis of what you're saying? What obstacles did that include in that process?——I guess it's the workload issues around the fact that the investigation is a limited time. It's quite an emotionally charged setting. So ideally there would be a follow—up meeting following that initial meeting to actually sit with family and engage more strongly around the steps that would need to be taken to meet the child placement principle requirements, and that could be a dual meeting with the recognised entity and the foster and kinship care service and then the actions that come from that could actually flow on to a number of carer applicants being provided to the department.

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Okay. Mr Hayward, in your opening comments to the commission this morning, as I took it, you submitted that a valid approach perhaps to this inquiry was to offer up a balanced perspective in relation to the current dedicated workers within the child protection system within Queensland but - - - ?---Yes.

- - identifying shortcomings and particularly you outline in your statement, notably at paragraph 24, about the indigenous over-representation and these things and how they could address it. If I could just turn to that for a minute and first of all focus on the current indigenous workers and roles of the current indigenous workers within the child protection system and you then go on to say how you consider it could be expanded upon. So you've touched on REs. You've touched on recognised entities. In fact, yesterday Prof Healy gave evidence. At page 9 of her statement, she identified what she perceived to be as a failure of child protection authorities to utilise recognised entities in any meaningful way. You've read that and you understand that was part of her evidence? ---Yes, I'm aware of that.

Of course, that's in ambiguous in terms of its interpretation as to where the blame should be apportioned, but first of all as far as REs current role is concerned, I know you've made it clear that you consider it could be better utilised as such. In terms of working in a meaningful way presently, are they working in a meaningful way?---Yes, absolutely. The recognised entity services are a dedicated sector that provide essential services throughout the continuum of child protection to ensure culturally appropriate and safe decisions are made for children and young people.

COMMISSIONER: Mr Selfridge, could I just interrupt? 30

MR SELFRIDGE: Yes, commissioner.

COMMISSIONER: You talk about indigenous over-representation. Of the cohort of 4000 indigenous within the out-of-home care system, can you break it down further into Aboriginal as opposed to Torres Strait Islander children?---No. I would suggest that we need to seek that information from the department and that unique data breakdown should be a feature of the future child protection system.

Because?---Because within the Aboriginal and Torres Strait Islander community, although we belong to the first nation's peoples of this country, Torres Strait Islander people have a unique culture and unique autonomy and it's important to respect that uniqueness and independence from Aboriginal Australia and I think that both groups, Aboriginal and Torres Strait Islander peoples would agree that there should be some separation in terms of viewing the challenges that people would face in the Torres Strait Islands. Obviously, those strategies and those approaches

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can be similar, but there is a uniqueness in culture and there's a uniqueness in child rearing practices. One of the challenges that Torres Strait Islander people fact is cultural adoption and how that's incorporated into the act. So there is uniqueness and I certainly believe that Torres Strait Islander people would be supportive of unique approaches that meet their needs.

But ATSI agencies blend the differences, do they? I mean, you're a representative organisation of both cultures, how do you achieve that? How do you recognise the differences and yet represent both cultures within the term "indigenous"?---Yes. So there's a few layers to that. Within ATSILS we have regional offices, similar to the Aboriginal and Torres Strait Islander sector, so there is a child protection service that's located in Port Kennedy on Thursday Island and so that employs Torres Strait Islander people and is predominantly - their practice would be much more Torres Strait Islander focus than Aboriginal focus. The challenge is on the mainland that the majority of Torres Strait Islander people live within mainland Australia and so the approach on the mainland is to actually have a blended staffing mix of Aboriginal and Torres Strait Islander peoples. I haven't seen that to be a barrier or a difficulty. Most services have a nice and appropriate blend of both Aboriginal and Torres Strait Islander people. When delivering services to families, it's about matching the right worker with the right family, so ideally often a Torres Strait Islander person will be matched with a Torres Strait Islander family to engage in work with them in a culturally appropriate manner. So it's incorporated within the framework and, if you like, it's our cultural competency within first nation's people. also point out that even within Aboriginal Australia there are different nations and different clan groups and a similar approach is taken by recognised entities, family support and foster and kinship care services in attempting to match workers with those particular areas. Again, it's family choice. The family may be more comfortable with another person in terms of the child protection intervention, but the approach is incorporated into the organisations on the mainland and Torres Strait Islands has a unique representation in regional offices.

Including recognised entities?---Yes.

Okay?---I believe it's recognised entity and foster - sorry, recognised entity and Family Support Service hubs on thursday Island. I am unaware whether they have a foster and kinship care service.

Is that one of the 11?---Yes.

Okay. Thank you. Yes, sorry.

MR SELFRIDGE: Mr Hayward, rather than approaching it from the bottom up, approaching it from the top, at paragraph 44 in your statement you talk about the Queensland Aboriginal

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and Torres Strait Islander Child Protection Peak, describing that agency as an essential agency in relation to those features identified in the bullet points at paragraph 44. It's probably a rhetorical question to some degree, but do you consider Peak as being the way forward in terms of coordinating and administering systems and strategies - indigenous systems and strategies to address those issues that you've identified in your report?---I think government as a purchaser of services expects value for money and so when you look at - from a business model in terms of strong governance, management, leadership and frontline service delivery - -

Yes?--- - - ideally, looking from a business model, the Queensland Aboriginal and Torres Strait Islander Child Protection Peak could be far more instrumental in driving statewide standards and improving and enhancing frontline service delivery. So, ideally, in the future the Queensland Aboriginal and Torres Strait Islander Child Protection Peak could be given more autonomy and be strengthened in terms of its capacity to drive those changes across a whole sector and program streams such as the recognised entity, family support, foster and kinship care services as well as the small number of family intervention services. I think that it makes strong logical sense that the services are supported by a Peak body.

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Can you just describe to the commission who Peak consists of in terms of its structure and set-up?---The Peak consists of - - -

Sorry. You worked there, didn't you? You worked for Peak for some time?---Yes, I did work for the Peak body for three and a bit years.

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Yes?---Yes.

Okay?---So the Peak body consists of a board of directors. It's currently made up of members within the sector, but my knowledge in accordance with their progression plan in that there is moves to actually broaden that board out to include expertise so that Peak can be more functional in specialist areas such as finance and areas that relate to our frontline service delivery.

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It then consists of a CEO, one senior policy officer, and two member support officers. So it is a small organisation with a large mandate.

Yes. Can I just ask you a couple of questions in terms of the outsourcing, because that's as I understand what you're suggesting, perhaps Peak might be an agency that those other facilities could be outsourced to. In contracting to Peak is there a possibility there could be any conflict in relation to member-based organisations being provided support, would then possibly Peak might have to take action against, and only (indistinct) obligation and mandate?---I 10 would take a solution-focused approach in terms of the future of Aboriginal and Torres Strait Islander child protection, rather than framing the current setting. so if there are challenges to actually overcome any conflicts of interest or perceived conflicts of interest in moving forward in reform, that would create a more proficient Aboriginal and Torres Strait Islander sector through strong constitutional reform and strong service delivery design. Those obstacles can actually be overcome through a strong business model, strong governance, management and leadership, and flow into front-line service delivery. So although that conflict may exist now and 20 those functions around contract management and setting those state-wide standards are achieved through a membership and voluntary basis, when looking towards the future and solutions in strengthening Aboriginal and Torres Strait Islander child protection, I would see those issues as easily overcome.

I don't know about easily, but they could be overcome?
---When taking a logical approach in terms of a business model, constitution reform as well as the leadership that would need to overcome such a conflict of interest, I only see one way forward in terms of if those responsibilities and greater autonomy and authority was to be transferred to a Peak, accordingly those steps would need to be taken so that it is an appropriate business model.

Certainly in terms of providing support to perform obligations is certainly a role that Peak can undertake, but that corrective aspect to it, there would have to be some forethought put in place in relation to Peak undertaking that role, wouldn't there?---Yes. I would refer to my statement, paragraph 33. I was - sorry, not 33. If you just bear with me. I'll just speak to it. I can't actually find the paragraph promptly.

I'm just trying to assist you in finding - - - ?---In 2010 and 11 as part of preparation for the significant child protection community-controlled reform myself and EJ Garrett, who were then member support officers, actually travelled to Victoria and met with Muriel Bamblett, CEO of VACCA, the Victorian Aboriginal Child Care Agency, and we were also privileged to meet with the secretariat, or the equivalent of the DG for the Human Services Department. We spoke quite intensively around reform. That's a

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demonstration where a lead agency who delivers Peak-like functions or secretariat functions also has direct service-delivery responsibility as well as oversees consortium arrangements with other NGO providers. So there's evidence there that the structure can and does work and is a proficient model. If we are to move forward - - -

Can I just stop you for one second?---Yes.

Are you suggesting to the commission that we should have a look at this VACCA model in terms of adopting the same or similar type approach? Is that what you're saying?---I think we should resource ourselves with knowledge of those approaches.

Yes?---I think one of the challenges that Queensland has faced is setting strong service-delivery standards across the board for mainstream organisations as well as Aboriginal organisations. I guess the position that I would put forward is that the sector is innovative and is willing to embrace proactive reform, and that when you look at Victoria in terms of those arrangements, that that could actually inform strong business models in Aboriginal and Torres Strait Islander child protection. It would take some innovation but I strongly assert that it is that type of innovation that is required to create strong Aboriginal and Torres Strait Islander service delivery into the future as we move into a more balanced child protection system.

Sure. Moving away from Peak in terms of governance to those being governed by Peak, at this moment in time as I understand it current indigenous workers within the child protection system as it stands - we're talking of recognised entities, we're talking about kinship carers, family support services and assisting with the - some non-government organisations, as such. Is that a fair reflection?---Yes. The Aboriginal and Torres Strait Islander child protection sector exists of recognised entities as outlined in section 6.

Yes?---Of Aboriginal and Torres Strait Islander family support services, which can be linked to the chief executive functions, ie. 7(f).

Yes?---And the foster and kinship care services, which obviously have linkages to section 83, 88 - - -

Yes. And of others who are specifically employed by the department, like child safety support officers, indigenous child safety support officers, et cetera?——Absolutely. There's some key roles, internal child safety support officers, an identified position for Aboriginal and Torres Strait Islander professionals to provide that internal statutory assistance; there's also regional Aboriginal and Torres Strait Islander staff in contract management teams that act as a conduit in terms of supporting proficient service delivery; and there's also key roles in strategic roles at a head office level where Aboriginal and Torres

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Strait Islander policy advisers direct and support culturally competent decisions. I would argue that those roles need to be strongly valued and given more onus in terms of setting strategic direction for the future.

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Sure. Okay. I just want to talk to about, shortly, individually and independent of each other. We spoke at length - or you spoke at length about recognised entities and you made clear your views about how their role could be expanded upon and how they could be better utilised with an expansion of the legislation and the rule under section 6. Yes?---That's correct.

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Family support services - is there anything you'd like to expand upon in relation to what you say - how the family support services could be better utilised or expanded upon? --- Ideally there should be recognition that the family support services are doing an excellent job and there should be a focus on the qualitative measures and the positive work that they're actually achieving with families in terms of the entrenched concerns and the significant amount of time and intervention that's required to address those concerns. I would strongly suggest that a balanced view in terms of the fact that these services are two years into establishment and they are at a similar stage to RAI and there's evaluations that are available from the department to outline that progress, and where they positively sit. Rather than wait for those services to begin to close cases, because of - there should be an understanding of the dynamic and the challenges that we're facing with families and there should actually be an increase of resources so there's more case managers within those services to take on more families.

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Ideally it should be recognised that the case loads and the closures will be sporadic over time, as it was in RAI. So there shouldn't be undue pressure put on the family support services as being responsible for reducing over-representation. There should be a recognition that they're actually at this stage dealing with complex families and avoiding them to enter the statutory and also empowering and exiting those families out with other community and professional support networks. So whilst we have a focus on over-representation and that service is there, we should look at - rather than having an over focus on their capacity, that view must be taken in context with its establishment phase and perhaps it would be more beneficial to increase their resources to actually take on more families rather than do that as a capacity issue.

Do you agree that there's a need for Aboriginal and Torres Strait Islander family support services to work intensively with families to address the issues and why they've been reported to Child Safety Services and to prevent this reporting and children in care?---Absolutely. The family support model actually works from a strength based need approach, so it looks at the strengths and needs of families rather than looking through a lens of risk and protection, and so by building on those strengths and addressing those needs it's actually lifting the safety and wellbeing status of children. They're also quite skilled in terms of being at a para-professional level but also then having specialist training in the main harm and risk indicators, and then also delivering practical in-home support such as setting routines around the core times of preparing for school and - -

Practical aspects?---Practical aspects, and also, you know, when children return home from school - you know, high stress times for most families, and setting in practical routines and approaches to getting lunches ready, health and hygiene in cooking, budgeting, nutrition. All of those aspects are - - -

These are the aspects of why they've been reported - often been reported to Child Safety Services, isn't it? ---Absolutely.

That's what we're talking about?---Their responses are responding to the main harm and risk indicators that often the families are reported to child safety. The services actually do their own assessment and they identify other areas of concern and work with those families to address them.

Do you know in terms of numbers - do you have any idea in terms of numbers as to how many families are currently engaging with such services?---My understanding is that the majority of services have their annual targets within their caseload at this stage but their capacity is measured off how many cases they close, which is ill-informed because of the complex and entrenched issues that we're dealing with,

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with those families. Ideally, they shouldn't enter the statutory but should remain in the secondary and be supported to address those from a strength based and needs approach.

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That's the fundamental aim, isn't it, is to keep them away from the statutory system, as such?---Absolutely. It's far more cost effective, but I would highlight that it's far more child and family friendly to actually approach from an early intervention secondary support service.

Can I just ask, reading your statement about the non-stigmatisation of families in relation to obtaining services and such, how do we get that balance right in providing services but also ensuring that those that need to be reported are reported and engaging with the correct services and the statutory - well, it's a \$64 million question, isn't it?---It is. I think within the services there are circumstances where we must re-refer or re-notify the family because the entrenched issues are so great. think that in cases of extreme sexual and physical abuse that's quite clearly a statutory responsibility, however when we are looking at risk I think that there should be a willingness to manage risk in more appropriate partnerships with the secondary services and I think that that is what is occurring currently within Aboriginal and Torres Strait Islander family support services, that we're dealing with quite entrenched risk and issues and that it does take time for the secondary services to take effect in families' lives. Rather than measure those outcomes in hours and outputs, with such entrenched issues it needs to be a qualitative assessment around the progress that's being made with families. In my opinion, we will begin to see a large percentage of cases being closed in the next six months and I think that's a reflection within that sector, that we have been dealing with some quite entrenched issues.

COMMISSIONER: Could I just interrupt and ask - - -

MR SELFRIDGE: Yes, certainly.

COMMISSIONER: It's also to you, Mr Selfridge.

MR SELFRIDGE: Yes.

COMMISSIONER: Does the department or ATSILS or any other agency you know keep figures on how many of, in your case, the indigenous children in care are there because of actual or the risk of neglect as opposed to having suffered or are at an unacceptable risk of suffering abuse?——That would be available from the department from an ICMS report. There's a whole range of ICMS reports that are available to the department that report far more greater detail in terms of statistic and data information that's presented publicly on their performance indicators.

What's the report called?---There are actually a number of

reports that would be available that would inform the inquiry.

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MR SELFRIDGE: What reports - - -

COMMISSIONER: You can expect a summons, Mr Selfridge.

MR SELFRIDGE: Yes. I just want to identify those, if I may, with the witness at this moment in time.

You say there's a number of reports that can be made available?---Yes, it's the ICMS data system.

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I understand that?---So I would have to suggest that the inquiry actually approaches the ICMS area of the department and actually request that - - -

Are you talking in terms of numbers and identified risk and what types of risk and specific data in relation to that?
---Yes. Yes, that's all recorded and can be accessible.

COMMISSIONER: I think it's important for us to know who the 8300 are?---And have that - - -

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Why they're there, how they came to be there, where some of them are now. If we know their history and their circumstances then that will help us understand the way the system is related to them.

MR SELFRIDGE: Yes. I wouldn't cavil with that, commissioner, and I think it probably would be important for the commission to have that type of information before it. Yes, certainly.

COMMISSIONER: We also need to know who their carers are as well.

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MR SELFRIDGE: Specifically, too, as in foster carers, kinship carers, support - - -

COMMISSIONER: Who they are and how many of them have been the subject of complaints about the care they've provided and what the outcome has been, and all those sorts of things.

MR SELFRIDGE: Can we reasonably infer - can we expect a summons to issue in respect to that with specific questions to - - -

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COMMISSIONER: Yes. We might want to come and interrogate the data systems ourselves. We'll give you a long list of things when we - - -

MR SELFRIDGE: I'm sure you will, commissioner.

COMMISSIONER: Guarantee it.

MR SELFRIDGE: Now, just taking one step back, if I may,

you talked about recognised entities. As I understood recognised entities, they were engaged to try and assist in this over-representation of indigenous children in the Queensland child protection system. That was my understanding, having read about the history. That was part of their engagement, as such. Am I to infer, is the commissioner to infer, that a better way of helping reduce that over-representation is to better arm recognised entities by giving them more autonomy, as such, and/or those other indigenous workers within the industry?

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---Yes, ideally, the future systems should capitalise on Aboriginal and Torres Strait Islander professionals and place them in key, meaningful roles where they can have an instrumental impact in case work and case management and in my view changes to section 6 and enhancements the recognised entity model would actually serve the best interests of Aboriginal and Torres Strait Islander children in terms of culturally safe and competent decision-making and actions.

You might not have any knowledge of this, but can I ask, as I understand the Victorian - the VACCA that we just discussed about before, the Victorian system, is it funded to be the recognised entity in Victoria?---In Victoria they have a number of streams, so they have a statutory role which is very similar to the recognised entity and they also have additional programs which offer the family decision-making role or family group meeting convening role as well as the intensive cultural support.

You said family group convening role. Do you mean as in FGMs? Is that what you're talking about, the family group meeting?---That's right. It's called the Aboriginal Family Decision-Making Program.

Okay. Do you know what the program for the recognised entities, the services in Victoria - do you know what that's called?---Off the top of my head, I believe it's called Access, but I can actually provide that.

Sure, if you could. I understand the cultural advice is called - and I apologise for my mispronunciation - it's Lakidjeka; is that - - - ?---That's correct.

Does that ring a bell?---That's the program, yes.

Lakidjeka Aboriginal Child Specialist Support that provide cultural advice in Victoria?---That's the equivalent of the recognised entity model in Victoria.

Do you know what kind of budget they're operating on? --- They're actually operating - I think Brad mentioned the budget around three - - -

Three million, is it?---Three million.

Yes. That's my understanding?---But I would highlight that in Victoria there's a completely different population and demographic and also location. Within Queensland we face challenges of a larger population and also challenges of geographical location, so I don't believe that those rates are comparable to the recognised entity sector here.

Yes. A burning question: let's just say there's a limited pot, as such, in the budgetary constraints in all avenues, do you think the current money that's engaged within Queensland indigenous supports and organisations could be better utilised and, if so, how?---I guess from my

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viewpoint, and I would encourage the inquiry to seek other Aboriginal and Torres Strait Islander viewpoints, but from my viewpoint - - -

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Yes. It's only your viewpoint, Mr Hayward. Yes?---From my viewpoint, the statutory assistance that's provided within Queensland need not have a number of program streams, but perhaps it's more financially viable and sensible to look at section 6 and enhancing that to deliver those types of functions as their role rather than look at creating new programs. From a cost effective point of view, I think it's about enhancing the recognised entity rather than expanding out additional programs and ultimately additional costs. I think it would be far more meaningful and beneficial to children to have those roles incorporated into the recognised entity. Within current - -

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Can I just stop you just for one second so I have a clear understanding of where you're going with that? As I understand it, you said that that statutory assistance need not have a number of program streams. Specifically, what do you mean by that?——Well, in Victoria you have the recognised entity equivalent. You have the Aboriginal family decision—making. You have the cultural support officers who develop culture support plans and do an intensive implementation with the key stakeholders around and significant to that child. I personally believe that that would create an additional economic burden and also duplicate the recognised entity role to a degree and I think it's more about releasing the limitations and restrictions in section 6 and being innovative in practice to what I consider those programs and statutory assistance and actually consolidating that under the recognised entity model.

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So the recognised entities in general, as such. Is that what you mean by that?---I actually think they would be far more specialist in their input into the statutory system if we became innovative around the roles that they could play through some level of delegation using section 6.

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Just coming back to those indigenous child safety support officers, you mentioned at paragraphs 27 through to 29 - you make reference to them. Are you aware that there's one currently in every Child Safety centre in Queensland? Are you aware of that?---Pardon?

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Are you aware that there's an indigenous child safety support officer currently employed and engaged at every Child Safety centre in Queensland?——Actually, I was of the understanding that there's been a vacant position in the Fortitude Valley for over two years, actually, so I would agree with that position and in actual fact, quite often it's left vacant and unused to create surplus funds in service centres, from my understanding, over a number of years with the valley being an example of that. So I'm not aware of that statement being correct and I think that again I would highlight that that role should be highly

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valued and it should actually be in every Child Safety Service centre and that the PD should be strengthened so that there's a balance between child protection and the core responsibilities and the necessary cultural engagement, both with families and children.

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When you say "PDs", what do you mean by that?---Position description.

I would suggest that we need to increase Aboriginal and Torres Strait Islander child safety support officers to reflect the needs of the clients that will reach 60 per cent within Queensland with the higher rates of over-representation, so I certainly - - -

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I'm talking about indigenous child safety support officers? ---Absolutely; increase the level of Aboriginal and Torres Strait Islander people working within the department and assisting families, as well as that being reflected in the non-government sector.

As I understand, the indigenous child safety support officers are bracketed level AO4. Are you aware of that? ---Yes. It's given a significant status in terms of the unique aspect of the role and further to my point, that's why the intention of that role should be supported through corporate will and not left to chance at a service centre for manager discretion, rather set as a statewide standard to deliver a balance of core child protection responsibilities and the necessary internal cultural work that will benefit families and children and young people similar to what has been provided in my statement.

Sure.

COMMISSIONER: Mr Selfridge, I think we might have a break.

MR SELFRIDGE: Yes, thank you.

COMMISSIONER: 15 minutes.

THE COMMISSION ADJOURNED AT 11.28 AM

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THE COMMISSION RESUMED AT 11.42 AM

COMMISSIONER: Mr Selfridge.

child protection sector - - -

MR SELFRIDGE: Yes, Commissioner, I've only got one further question for this witness.

Mr Hayward, prior to the adjournment I asked you a series of questions in relation to how the Queensland Aboriginal and Torres Strait Islander child protection Peak could work as a - overseeing the application of child protection services within Queensland and I asked you about this conflict or apparent conflict of interest in terms of effective aspect and implementation. You said that it's workable with effective change. I've had a discussion with you during the course of the adjournment and my understanding is that it's your intention to put a submission before the commission on that very issue. that correct?---That's correct. And I'm also aware that the Queensland Aboriginal and Torres Strait Islander child protection Peak will also be putting in a submission to address and inform around appropriate business models and their benefits in the Aboriginal and Torres Strait Islander

Yes?--- - - - so that we can innovatively move forward and provide strong service delivery across the state.

So it will offer up a blueprint as to what that looks like on the ground, as such?---Absolutely.

Yes, thank you. I've no further questions for the witness.

COMMISSIONER: Thank you. Did you have anything?

MS No questions for the witness.

COMMISSIONER: No? Okay. Mr Hayward, your evidence is finished. Thank you very much for taking the time and putting in the effort to inform me of matters that I otherwise wouldn't have been aware of. I appreciate your time and your assistance. Thank you?---Thank you, Commissioner.

WITNESS WITHDREW

COMMISSIONER: Mr Copley, are you leaving us?

MR COPLEY: The next witness will be Ms Chenoweth.

Ms McMillan will call her.

COMMISSIONER: Yes, Ms McMillan.

MS McMILLAN: I appear with Mr Haddrick in relation to our next witness, which is Professor Chenoweth.

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CHENOWETH, LESLEY IRENE affirmed:

ASSOCIATE: For recording purposes please state your full name and your occupation and your business address?---My name is Lesley Irene Chenoweth. I'm a professor of social work and head of the Logan campus at Griffith University, University Drive, Meadowbrook.

COMMISSIONER: Good morning, professor, thank you for coming?---Good morning.

MS McMILLAN: Mr Commissioner, just before I start, Professor Chenoweth has an unavoidable commitment at 3 o'clock. Talking to the others at the bar table I don't think that that should cause any difficulties, but I just wanted to advise you of that.

COMMISSIONER: I'll keep my interventions to a minimum.

MS McMILLAN: I wasn't inferring anything by that - - -

COMMISSIONER: No? All right.

MS McMILLAN: --- I was just simply indicating. I don't think anyone would be too upset if we have an early mark this afternoon.

Professor, you've prepared a statement, have you not, in relation to the matters before the commission?---I have.

All right. Would you take a look at this document. Is that an original of your statement?---Yes, it is.

I tender that, Mr Commissioner. I can't imagine there's anything in it that can't be published by way of web site. Is that correct, professor?---Yes.

Thank you.

COMMISSIONER: That will be exhibit 47.

ADMITTED AND MARKED: "EXHIBIT 47"

MS McMILLAN: Thank you.

COMMISSIONER: And it will be published in full.

MS McMILLAN: Do you have a copy of your statement with you, professor?---I do.

Thank you. Professor, your current position is, as you've indicated, the head of campus at Griffith University, Logan. Your qualifications; you're the inaugural professor of social worker at Griffith University and that's been the case from March 2006?---That's right.

You're the co-director of Health People Healthy Places from 2009. You are the co-director of Griffith Abilities

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research program 2006-2009?---That's right.

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You are the co-convenor of Griffith Health Professoriate? ---No, I'm no longer that.

No longer? All right. What years were you the co-convenor?---That finished last year in 2011.

Thank you. All right. And you are on the Griffith University research committee or have been from the years - - -?---Have been.

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- - - 2009 to 2011?---11.

And you were the acting head of school, human services, social work, from various periods between 2006 and 2011? --- That's right.

And from 1990 to 2006 you held various lecturing and academic director positions at Queensland University of Technology, Griffith University and the University of Queensland. Correct?---That is correct.

All right, thank you. If I could just - I want to ask you some questions in relation to the two main areas of your statement, issues of child protection workers in rural and remote areas, and development of their skills; and the second area is obviously children with a disability and child protection. I say "obviously" because a great deal of your research over the years has been involved in disability issues, has it not?---That is correct.

All right, thank you, professor. You have just completed, have you not, a paper entitled Managing Tensions in Statutory Professional Practise, Living and Working in Rural and Remote Communities, which has been published in the Australian and International Journal of Rural Education. Correct?---That's correct.

All right. In that - perhaps putting an abstract in relation to it - it refers to the common theme of research of the challenge of recruiting and retaining social workers along with other workers with statutory responsibility such as police, mental health and education staff in remote communities?---That's right.

Would that be a fair nutshell of describing it?---It is. That paper is the first paper from this very large study which we haven't finished yet.

Right. It's a work in progress?---It is.

All right. Would you be open to providing that research to the commission as it - - -?---Unfolds?

Yes?---Absolutely.

Thank you. Professor, in this research you've conducted

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you've surveyed over 900 employees in statutory roles. Correct?---That's right.

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And as I've already indicated, including in areas of mental health, child protection, police and other statutory roles? ---Mm.

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By its title, Managing Tensions, one might think the clue is in the title. You've clearly identified that there are tensions for workers in those remote communities. Would you be able to expand upon what you think are the obvious tensions for these workers in remote communities? ---Certainly. The title actually is also the title of the whole research project, which has come out of our previous research in this area. Part of the tensions for all practitioners who live and work in rural and small communities is that often there is a tension between conducting your professional role and actually being a member of that community. So this raises issues of confidentiality; it raises issues of having dual responsibilities. We were particularly interested in this study to look at those workers where there was a statutory component to their role. This is about: what if you have to implement what is required by legislation at one instance, and then later on in the community you in fact have to socialise or your kids go to the same school as a child you may have had a role in removing? So there is a lot of that tension around fulfilling both of those obligations, and how do people actually resolve that?

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There are other tensions around getting supervision, around geographical distance in actually conducting the work, how do you get ongoing professional development, but the tension stuff is really around the living and working tension.

All right. In terms of - you've talked about people from those communities. I take it for those who work in those communities who are from outside that must, I imagine, cause tensions of a different sort of nature?---It can do. Yes. Would you like me to elaborate on that?

Yes please?---So for some people who come from outside, often small communities can be difficult to become a part of and be included. For some people who perhaps have come from an urban background, living in a small community has all sorts of challenges around access to resources, "Will my partner be able to get a job? What sort of schooling will be available for my children?" So they're the sorts of areas that can be challenges.

All right. In terms of - is it your understanding that the Department of Communities categories communities in Queensland by reference to their relative isolation into very remote, which are primarily remote Aboriginal and Torres Strait Islander communities. Correct?---Yes.

Secondly, remote locations such as small townships, some of which are primarily Aboriginal and Torres Strait Islander communities, outer regional, which are smaller towns, and inner regional, which are also smaller towns but are less distant from South-East Queensland. Is that your understanding of the different categories?---That is my understanding, but how we define this does change from time to time but, yes, that's pretty much - -

All right. Based on your research in relation to this project, what supports have you found have been successful in retaining child protection staff in regional and remote communities?——We've identified through the first study that we did that the provision of some incentives to recruit and retain staff, usually financial incentives; having an availability of opportunities for ongoing professional development is also very important and having good professional supervision in the work that you do, having that available to you. They're some of the things that people — —

All right.

COMMISSIONER: So would supervision include support?---In a professional capacity?

Yes?---Yes.

The professional development, do you see that as internal or external or a combination?---I think a combination.

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MS McMILLAN: In terms of what you understand is currently provided by the Department of Communities, which obviously includes Child Safety, do you understand what the current range of supports offered by the department is?——Again, as I understand — and this, of course — I'm not sure that this is still in place because we have a new department and a new government, but certainly when we were conducting our initial study, a lot of incentives were introduced. So there are waitings or loadings for being located in certain areas that are financial. For some workers there's air fares to a postal town or to the capital city and I understand, too, that there is provision for some additional support for professional development.

All right. Do you also understand there's supervision by team leaders or other staff such as senior practitioners? ---Yes.

Was there a peer support program?---Look, I'm not aware of that and I can't recall, so there may have been.

All right. Employee assistance program, is this the financial that you understood - - -?---I think so. Yes.

Human resources: is there a wellbeing team providing training and advice on HR matters? Are you aware?---Yes, it's my understanding.

Child safety practice forums which are opportunities to discuss practice with staff in similar positions in other offices?---I think that there certainly is that provision. To what extent it's been carried out, I really can't say.

Do you understand that there is support for study dependent on the relevancy obviously to that role?---Yes. Through the SIARA scheme.

What's that, sorry?---There is provision, as I understand, for all state government employees to have some support for study in a related area. I'm not sure of the status of that at this point in time.

Did you understand that there were some upgrading opportunities for PO2 staff to progress to PO3 once competencies were established and achieved?---No, I'm not across that. I'm sorry.

No. All right. That's fine. Thank you. In terms then of understanding, for instance, supervision, now it might be one thing to offer supervision, say, if you're working in Rockhampton or Bundaberg, but let's just say you have frontline staff, say, in Aurukun and Weipa and obviously very remote communities, how, practically speaking do you understand that that can actually work?---Well, I would draw on our experience at Griffith University in the programs that we teach in human services and in social work, some of which we offer by distance. I think that what's really needed is some really investigation and

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provision of some online capacity in this regard. The reality is that it's very expensive to have people fly in and fly out and while for some things that would be really desirable, I think that looking at some of that online technology, the use of pod casts, of online - we use an online classroom platform called Wimba where people log on and we can have a group discussion, a tutorial or a seminar in that way.

Can I just pause you there. The pod cast: what sort of material is offered in the pod cast?---Well, we've set up at Griffith a thing called Pod Socks, which is - it's really pod cast for social workers on the run, is the subtitle, and this is a way we are gathering interviews and short presentations from experienced practitioners from all around the world in a range of areas and these are freely available; anyone can log on now and listen and it just provides people in remote areas, particularly, or people who are busy, an opportunity to say - if you want to know, "What does the international expert on inter-country adoption have to say?" you can log on and listen to an educational pod cast in that way and this is a growing repository. We are really open to suggestions from the broader community out there and so far we have had people make requests and that's a very - I mean, that is a one way type educational opportunity. You can't ask questions, but it is a relatively accessible and very inexpensive way of making some of that material available.

Yes. I was going to say one of the advantages I suppose, particularly for the university, is that it's not an expensive endeavour for them, is it, and it's also - given that young people obviously are very savvy in terms of pod cast and electronic means, that's obviously very attractive to them, one would have thought?---Yes, it is; and not just young people, might I add.

No?---You know, lots of people love pod casts.

Yes. Some of us really enjoy pod casting and no longer probably qualifies young. Now, in terms of other supervision, you've already outlined the duality of the role is often difficult, particularly I imagine for people who are from that community, correct, or close by?---Well, it can be, yes.

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I suppose it's heightened for them, but in anyone living in the community I suppose that becomes quite difficult if they're undertaking an investigative role but also a role of trying to assist a family. Correct?---Yes.

Again, through your research do you have any feedback you can offer in terms of how to resolve that successfully for say child protection workers particularly?---In terms of having a statutory role?

Yes, who have got a statutory role. What do you say might be a way in which would assist that particular difficulty that they have if they're residing in that community, it's a fairly remote community, and how they can combine both the statutory role but also, as we know, part of the remit to assist families and to obviously work with families? ---Well, I think the way that the current system is, that's a really difficult ask of practitioners. I think - and that's more a reflection on where we've got to with child protection, which I can come back to. I think good professional supervision is really important for those practitioners and, I mean, our other study which we are still finishing off which is about child protection with indigenous families and children and communities, I think those issues are very heightened for indigenous practitioners. It's really a very difficult ask, if not impossible, to expect those practitioners to be involved in that tertiary forensic end of removal of children. So I think we really - some of this is not so much about the individual practitioners but it's about the system, and there may be all sorts of ways we could approach this in the future. We would look at a mid range strategy of really investing a lot more in that secondary intervention level, which I'm assuming other people, other witnesses, have talked about, primary, secondary, tertiary intervention, in this area.

COMMISSIONER: Slightly different definitions and concepts of all of those things?---Right.

MS McMILLAN: What would you mean by secondary? I think perhaps that might be - - -?--Okay.

To clarify that?---All right, that probably would clarify. So for secondary - so primary to me means whole communities. It's the whole of society and that sort of general stuff that we provide through health, through education. It might be through educating about parenting and child development, et cetera, that broad, universal level. Secondary intervention to me is for families and children or young people who are at risk, so vulnerable families who may be at risk of then slipping into an incidence of serious child maltreatment. So that really is, in this instance, as I understand it and as I would propose, about family support and it's about offering a whole range of family supports at that time.

COMMISSIONER: To the vulnerable?---To the vulnerable,

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yes, commissioner.

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MS McMILLAN: So they haven't reached that threshold, if you like - - -?---No.

- - - of a child being, as you say, maltreated, but they're identified as families at risk?---Yes.

Now, do you say that it is possible and in fact workable for the child protection worker to be able to operate at that secondary level?---In the current system - well, I think hypothetically a workforce in child protection should be able to do those things. I think that in the current system we unfortunately have a situation where a lot of vulnerable families would not really want to put their hand up and say, "Hey, I'm at risk."

Because of the punitive aspect of their role, yes?---Yes. However, in a whole system approach we should have the capacity to provide, I think, more of that secondary intervention to vulnerable families, and that may be by other workers in the system, it may be that we should look to strengthening the non-government sector to do this work, but what we have to do, in my view, with respect, is ensure that we have good collaborative relationships between whoever does this and the people that are needing to do the hard end stuff.

Now, you're aware, obviously, of research in New South Wales and Victoria. Is it your understanding that there's a much closer collaboration between the relative child protection department there in say Victoria with the non-government sector?---That is my observation.

Right, so that you say that in the current system it would be more probable that those sorts of services at the secondary level should be offered by the non-government sector?---Well, that would require significant strengthening of the non-government sector in this state, which as a broader issue is something that we don't have the capacity in our non-government sector that they have, for example, in Victoria.

COMMISSIONER: That's historical, isn't it?---That is historical, commissioner, yes.

MS McMILLAN: In the - - -

COMMISSIONER: Sorry, before we go on, did we get up to the tertiary level? You stopped at secondary?---Yes.

How would you define that third level?---Okay, so the tertiary level, in my view, and of course I've drawn on this from other research and scholars, is the families, children and young people where you have had maltreatment occur. So the purpose of this, of a tertiary intervention, is to really reduce long-term implications of maltreatment to prevent further maltreatment from occurring.

Just bringing it to the Queensland context, although our intervention under the Child Protection Act, what we might call a slight variation on your definition of tertiary, cuts in at unacceptable risk of harm. So it looks at before it's actually occurred, so you would still be in the secondary phase, but it has another limb. Before you have the tertiary intervention there has to be no parent willing and able - to protect, I mean. So that means there has to be no parent as defined in the act willing and able to protect the child from the risk or actual harm, the risk of harm or the act of harm they're suffering, and it's at that point that our tertiary intervention comes in, where the director or the chief executive would investigate, assess and then remove for safety and take care orders out. So there is some scope for a secondary role even under the principles of the act, but it doesn't seem to be geared that way?---No.

Theoretically there's space for it and theoretically the act says the preferred way of protecting children, that's keeping them safe and caring for them, is by supporting the family of origin. There doesn't seem to be any - there is at the moment Helping Families, I think, and a couple of other programs since 2010, but most commonly since 2004 it seems to be after the event?---Yes.

That is, purely reactive? --- Yes.

A search and rescue, fire fighting approach, rather than stopping it happen?---That's right. I would agree.

MS McMILLAN: So given that context, what would you see as a way to move that forward in terms particularly if you're looking at remote communities where obviously the range of services and the type of services available are much more limited than metropolitan. Could you give us some examples of how you see that might say in the short and medium term be addressed?---Well, there's a few ways you could look at this. I think whatever we do it's going to require some investment in how do we provide that kind of secondary or at risk support for vulnerable families. I think that you could look at what might be available in those communities, what non-government agencies, what other services might be operating.

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It may be also, though, while we kind of progress this whole system, that there may be some value in having a child safety officer or person from the department who is certainly more geared up about: well, how do we assess risk? To then maybe be placed and work with a non-government organisation to assist them in determining: when is the risk unacceptable? I think we've got to look at ways where we start to bring these sectors together to work together on some of these situations.

Let's just say some of the remote communities up on the Cape?---Yes.

If you've got non-government workers or government workers who don't have the same statutory roles obviously as child protection workers - and I mean by that health workers and others - how do you see that sort of system working where you're looking at either a child safety director or a worker who's effectively embedded, if you like, giving advice on whether the situation had escalated to something that the department needs to bring to bear - the tertiary, if you like - input, investigative, and go down that pathway?---Of course that's very difficult because this comes back to the issue of how do we recruit people to do and work in these communities, and once they get there how are they supported to be retained in those positions? It's a very expensive exercise.

COMMISSIONER: Because I suppose you pick them from a particular discipline for what they've studied or learned and the experience they've acquired on the one hand; but then when you put them into the context of a department that's responsible for protecting children, they then become captive of the culture?---That's right.

Of the organisation and policy culture. And they adapt what they've learned to what that culture expects of them? ---That's right.

And the uniformity - there needs to be some sort of standardisation, which means you might have to modify what you already know to fit in with what the organisation says you should know?---I think that's a good observation. What I'm trying to present here is like: if we had a perfect world, what would that like? And of course we don't have a perfect world. But I think if we go back to: what does the evidence tell us is about good child protection practise?

MS McMILLAN: Yes?---What is robust and rigorous and ethical practise in this field across all of those levels of intervention, and even taking into account that in Queensland we have a slightly expanded understanding. I think we can work with that; looking at what would that look like. Then if we had some very good departmental staff who had that capacity to advise and be available to people in the non-government sector working with vulnerable families. Then I think that would be just one way. I

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think we've just got to really start to think more creatively. Instead of having this incredible bifurcation of: this is what we do over here and that's what you do over there. We have vulnerable children in the middle. 1

COMMISSIONER: Just let's look at the concept of risk for a moment. What is it? I mean, it's made up of, no doubt, the likelihood that something will happen and the consequences for those affected by it if you don't prevent it. Is that what risk is?---Well, yes.

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The test is unacceptable risk, so a risk is, what, the likelihood it will happen and how it will affect me? So unacceptability of a risk must be a value judgment or a quantitative judgment or a qualitative one, or all three. So who works out what that is? Who teaches what that looks like?---Well - - -

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So we expect to find a definition in a book and then apply it, compare it with what we've got, and say, "Yes, that's unacceptable," or, "Yes, it's acceptable"?---Mm.

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When risks don't present like that?---They don't. They do not.

On the basis that weather forecasts are wrong 60 per cent of the time - - -?---That's right.

-- - you're better off working on the reverse of what they say when you're planning what to do?---Yes. I haven't seen the evidence on that, Commissioner, but ---

MS McMILLAN: So professor, if you're talking about then working with child protection officers and how best equip them: (1) to attract them and retain them - - - ?---Yes.

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-- but also skill them up, if you like, to be cognisant of the risks, I take it one of the issues is to understand differences in regional, remote and, say, metropolitan Queensland?---Mm'hm.

Because obviously to some extent there's going to be differentiations, isn't there?---There is.

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Understanding culturally, also the particular challenges that might face an area, lack of services, et cetera. So in terms of that, your statement refers to the process of recruitment of child protection workers to regional and remote communities. It's understood that the Department of Communities, Child Safety and Disability Services uses a centralised recruitment process in Brisbane to select staff for regional and remote communities. Is that your understanding?---I think that there are other informal recruitment practises that go on in regions.

Yes?---And I think that that's helpful.

All right. Do you have any views on ideally how recruitment can be most effective in getting the right match between child protection workers and regional and remote communities?---Certainly, on a few fronts. I think that universities training these professionals - so social work programs, human service degree programs - really need to include in that an understanding of what rural practise is about and how that might be different from urban-based practise.

All right. Speaking about your own university, in both the human services degree and also your social work degree, at an undergraduate level do you include any components that particularly relate to either remote communities and challenges for communities there, and/or indigenous and Torres Strait Islanders?---Yes, we do.

Can you just expand on that? --- So if I could speak to indigenous practise. We have a core course or subject in all of our human services and social work degrees that are taught by our indigenous academic staff that really highlight - so all students will have some knowledge and experience and engagement with: what are the issues for indigenous and Aboriginal and Torres Strait Islander people, families and communities? So that is core and everyone must do that course. Of course throughout other aspects, other courses, other subjects in the whole, all of the programs, there would be other material and other exposure to those sorts of issues. As far as the issue around culturally respectful practise; again this is mandated by the Australian Association of Social Workers, so to be accredited by them you must have content on indigenous Australians, you must have content on cultural awareness and cultural sensitive practise.

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So, again, that is also included in courses that we offer across a range of the subjects, but particularly, for example, in our course on ethics, particularly in a range of other courses that are part of the core curriculum for all of those students. With the rural part of that, that again - we don't have a particular unit on rural practice, but we do include that material in other courses and we've also, again, developed a web site for students about what rural practice is like and with the purpose of helping to prepare students who may want to do a rural prac. We offer a bachelor of social work and a masters of social work qualifying and that masters course is offered in distance mode and a lot of our students come from rural areas in that program.

All right. You were involved - and your statement refers to a collaboration with the research from Western Australia, Prof Daniela Stehlik. Is that how you pronounce it?---Stehlik.

Stehlik?---Yes.

On developing staff practices and working with Aboriginal and Torres Strait Islander children and families?---Yes.

What were your main findings from that research? --- So this research is still - we're still analysing all of the data from that, so I could talk about perhaps four areas that we've highlighted in that research. The Queensland component of that, we worked in two major sites and we interviewed practitioners, both indigenous and nonindigenous, both within the department and outside with a view to understanding how they saw their practice, what informed it, what guided it, et cetera. So some of the things that we found: (1) was that certainly a lot of those people felt that they really had not been prepared to work in culturally respectful ways or had had minimal training in that area. Some people had had some, you know - maybe a day, years previously, but nothing since. So that was a concern, especially because both of these sites were in areas where there was a high proportion of Aboriginal people, particularly, who were likely to come in contact with the department. So that was one main finding and I think what we know about this is that kind of training and ongoing professional supervision around that is not like having a vaccination for measles or whatever. You really need to revisit and that needs to be an ongoing process with practitioners. So that was one - - -

So compulsory development modules, if you like?---Yes and - - -

Continuing education?---That's right. I think some continuing opportunities for both some training and understanding around all of that for all practitioners and some opportunities for some good critical reflection on practice for those workers. So that was one key - this is one key theme that's coming out of that research. The

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other was that - and it comes back to this issue of the understanding of place and practice. So how does place impact on how we practice, how we conduct our work? There's a lot of research or work that's come out of Canada on this and there's a lot of similarities between remote Queensland and remote Canada. It's just that one is dry and hot and the other is remote and freezing and I visited Canada as part of my sabbatical and I was really struck with how similar the issues are for Inuit and first national Canadian families and children. So this is about operating in a context where things are different. People have a different identity in rural areas. People identify with place in a very strong way and this, of course, is very, very important in Aboriginal communities, but having an understanding of how place impacts on practice and this can be at a very practical level. So we met practitioners who, to go and do an assessment and investigation, might have to drive three hours to do that and then when you get there that - and it comes back to your point, commissioner, about, "What's the risk?" and knowing that if you remove a child and drive three hours back, you really haven't got any place for that child to go. So that whole issue of geography, of rural identity, identity with place and attachment. So I think these factors are starting to come out in this research.

It would also, perhaps inherent in what you're saying - there's also that balancing of the risk as opposed to the risk of removal. So, for instance, if you look at removing a child, your options, I imagine, for placement are going to be far more limited in rural and, indeed, remote areas than, say, metropolitan Brisbane or Toowoomba or any of those areas?---Yes.

So that, I take it, must come into the evaluation of the risk, mustn't it, for a child?---Yes; and - - -

COMMISSIONER: You think it should, but I don't know whether it does because if you have a look at the legislation - - -

MS McMILLAN: Perhaps if I ask it this way: does it?

COMMISSIONER: If you have a look at the legislation, what it says is you've got to assess the unacceptability of the risk of harm, which is defined, which can occur from abuse, neglect and there may be other causes, including sexual exploitation, and it doesn't say - and then whether you've got a willing and able parent. It doesn't say, "Compare that risk with the risks of removal before you decide to remove and weigh them against each other." Maybe it should say that, should it?

MS McMILLAN: Well, perhaps can I ask it this way: do you think on your survey and your research that that is the process that is undertaking, the balancing of risks or do you say that there's a risk there, therefore, we need to, say, remove?---So I think that practitioners would make

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that call, so an experienced practitioner who's been, you know, working in child protection may be in a better position to make that call at that point in time than a new graduate. Some practitioners would say, "Well, I've looked at the manual and that's the interpretation. I have to remove the child. I have no idea what I'm going to do when I get back to the office." So there would be different factors that would impact on how people make that call, but I can tell you now that the practitioners we interviewed, whatever the decision, they - on that driving back to the office - are filled with angst about, "What am I going to do or what is going to happen?"

Is it part of the question that they have to address - is that the risk may well be different and one has to understand that the risk may well be different in a remote community to, say, a regional one and, indeed, a metropolitan one?---Absolutely.

We understand that the department currently has a two-day foundation studies in culture and then staff are required to completely additional tasks online as part of their training, including ensuring they understand the legislation and policy related to consulting with recognised entities in the indigenous child placement principle. Now, is that sort of training going to be sufficient to equip these workers to undertake these sorts of tasks in these remote communities?---Well, I think as long as it's happening, it's a very good start, but I think, you know, it is about how do we develop the capacity so we do have, you know, highly experienced practitioners in an ongoing - like that requires that ongoing development of practice skills. I mean, I think it is a good start and can I also just say that when we did this study, these interviews were now 18 months - perhaps some of them two years ago - it may have changed since then.

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I think this is highly complex and it may have changed since then, but I think this is highly complex and very demanding work and we should be providing as much support for the practitioners doing that as we - and the best support that we can.

MS McMILLAN: And practically - - -

COMMISSIONER: Sorry, remoteness will affect the level of the risk of systems intervention but it won't affect the level of risk of harm from abuse or neglect, nor will it affect the ability and willingness of the parent to protect. That's not a geographical question, is it?---No. I guess the geographical question is that - and its relationship to risk, and that's an interesting point, you know, that if you are isolated does that mean the risk is higher?

That's right, of the things that you're supposed to be protected against. The act doesn't seem to say you need to be protected against the system?---No, it doesn't.

MS McMILLAN: In terms then of providing supervision and assistance to workers in that situation that are making complex calls, often, one would think, without much in the way of resources to back them up, how do you do that? I mean, practically speaking, do you have a hub and spoke, if you like, that you have a senior practitioner say based in Cairns who can assist, who might be able to fly up if there are particular issues? How practically do you do that? ---Well, certainly I think our research showed that having good senior practitioners was a really good thing for those offices. Having access to that practitioner did vary. I think certainly using online technology, using even Skype for supervision and consultation, is one way to go with I think having a senior prac available to come out to another office is also very - would be a very good way to go, but certainly we found that in those offices where there was really a good senior prac then it did improve the practitioners' confidence, their skill, their ongoing development.

Now, obviously it would be desirable, I imagine to have an increased number of Aboriginal and Torres Strait Islander people who were child protection officers. We understand that the target currently is 4.4 per cent. Now, do you have any, again, practical suggestions on how that number may in fact be increased?---Well, certainly I think looking 40 at how more indigenous students can come and study at university is really key.

So, for instance, some years back we know that there were grants or bursaries, for instance, for students studying medicine to go and work in rural and remote areas effectively tied, so - - -

MR RMSA grants.

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RMSA grants, I'm informed. Do you think MS McMILLAN: that that sort of idea is a good one where that obviously would encourage students who perhaps are financially disadvantaged or socially disadvantaged to come and study, but with the expectation they would at least return for some period of time to work in those communities?---Yes, or study where you're living and do that by distance. So, for example, in our social work program at Griffith we've had a big - and Griffith has been very committed to supporting indigenous students. So the last advice I had from our indigenous project officer in Griffith Health was social work at Griffith had 12 per cent of students were indigenous, and that's a statistic I think I'm really proud of, because we have a lot of potential, wonderful practitioners, available who are keen to obtain a qualification and offering all sorts of ways that we can support those students to get degrees and be in that workforce.

So practically how does that work? If you have say a student in far north Queensland, how do they study through Griffith? Say they're doing a social work degree?---Okay, so we have the bachelor of social work degree which is not available online, so those students come and study at either the Logan campus or the Gold Coast campus - hypothetically, if that's where they came from, or they might in fact go to James Cook. So we've offered particular scholarships, we have a support unit based at Logan about supporting indigenous students to do - - -

Do you offer practical support to them?---Absolutely, very practical support.

So what, housing and - what sort of assistance?---Well, it's largely around the academic side, so how to get your way around the library, how - but it's also those other sorts of practical things about, well, you know, "How are things going for you?" how you might be supported to get an extension on an assignment, or practical skills on how to write - do better academic work. It's across a range of things.

All right?---So for the bachelor students, they do come to class, and a lot of them are from south-east Queensland, northern New South Wales.

Yes?---The master students are for people that have got a related degree who then can study by distance, and quite a number of those students are indigenous students and they live all over Australia.

All right?---We have students in far - you know, up in the Kimberley and - - -

And what - - -?--- - - Alice Springs and everywhere.

Sorry, I didn't mean to interrupt you? --- Sorry.

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Are there particular supports offered to them to assist them in getting through the masters course?---Yes. They could access that support as well through our Gumurrii unit.

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Now, I understand that there's figures that - there's 13.7 per cent turnover of Aboriginal and Torres Strait Islander child protection employees compared with 10.3 per cent, so higher turnover. Does that accord with your understanding?---I don't have the figures exactly, but that sounds accurate.

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And that there are 50 per cent of Aboriginal and Torres Strait Islander employees classified A02 to A04 compared with 34 per cent of non-indigenous employees. Now, again, you may not be familiar with the figures, but does that accord with your understanding from your research? ---Absolutely.

There's inconsistent representation of Aboriginal and Torres Strait Islander employees across levels of staff within child safety, but again, the majority of them being employed at those sorts of levels?---Yes.

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So I take it that one of the important things is providing a pathway for that turnover to obviously reduce, but also to have more experienced practitioners coming up through the ranks?---Yes. I think that would be a really worthwhile strategy.

All right. So obviously supporting them with resources and also more experienced practitioners is going to be important, isn't it?---And offering them pathways to get degrees, if that's - if that's the barrier then we should be thinking very creatively about what kinds of pathways are there into tertiary study so that they can become qualified in that.

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So you mean, perhaps, widening or differentiating some of the pathways into the bachelor's degree?---Yes. Well, often a lot of these pathways are available, and if I could just speak from my position as head of Logan campus, a lot of the work we do at that campus is about expanding pathways for people from so-called disadvantaged backgrounds. It's part of the federal government's widening participation in higher education. So that can be through doing stuff at TAFE, it can be through having some supports to do preparation for tertiary programs and then coming in. It can be through a range of pathways and I think that's part of how that could be supported and maybe the department has a role in supporting that to happen. Some years ago we had a graduate certificate in child protection that the department provided through James Cook University and the University of Queensland. It was when I worked at the University of Queensland. I think that was a really good model that provided, like, four courses for people working in this area specifically around all of these issues that we are canvassing about what do you need,

what skills, knowledge and values do you need to do this mork?

So were these social workers who then did this ---?

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-- as a higher qualification or these were people with perhaps other tertiary qualifications -- -?---Yes.

- - - or no tertiary qualifications?---They were mainly people who had other tertiary qualifications, but at that time people with significant experience could actually do a graduate certificate which was four subjects across a range - like the core curriculum that was needed - and then that gives a person leverage to say, "Well, I've done this. Can I get credit for this and go on?"

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In terms of that, do you know whether that currently operates?---I don't think it does. No.

All right, thank you. I wanted to move on to disability issues. Is there anything else that you would like to comment on in relation to the employment and retention of staff, particularly in rural and remote areas?---Look, I don't think so. I'll probably think of things but I think that's been pretty comprehensive.

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All right, thank you?---Thank you.

Just in terms of issues of disability and I'm clearly not talking about just children who are rural and remote and/or indigenous issues - - -?---No.

--- because, as I say, you've done work particularly in the disability sector, haven't you?---Yes.

I understand that a survey conducted by the Australian Institute of Family Studies in Victoria found in 2005 that 20 per cent of children in out-of-home care had a disability and 14 per cent had an intellectual disability. Would that accord with your understanding as a percentage? ---Yes, it would.

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Is that fairly much static in your understanding?---I think so, but certainly we know that the incidents of disability of children in care is higher than it is in the general community.

All right. The Commission for Children and Young People and Child Guardian indicated that in 2009 through a survey that children in foster care, 18 per cent of young people, that is nine to 18-year-olds, had a disability; 17 per cent five to nine-year-olds had a disability and that children of - responses of carers for children between zero and five indicated that the rates were higher, some 22.6 per cent had a disability. Again, does that accord roughly with your understanding of the percentages?---Yes, it does.

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All right. In terms of your statement, you highlight a background in research related to children with disability and vulnerability. Do you have a view on what other

factors that result in children with a disability to be at additional risk of abuse and neglect?---Yes. This is a very complex set of circumstances and situations, but if we look at the models of abuse and disability, there are a range of factors that precipitate this high incidence. First, of course, some disability is caused by child maltreatment, so there are children who have head injuries and that's been an outcome of maltreatment. There is certainly evidence around higher levels of parental stress in caring for a child with a disability and this can, of course, be a predisposing factor to an increased risk of maltreatment of the child, but also - and this comes from the work of Eric Emerson where he's looked at disability, particularly disability where children have challenging behaviours and that is also related to other factors, like low socio-economic status, mental health issues, poverty, insecure housing, a whole lot of those other factors seem to be related as well.

In terms of strategies for those working in the area of Child Protection and Disability Services, what sort of strategies do you believe can be used, or are being used, to effectively support the needs of children who have disabilities, either inherently or from abuse and neglect? ——Do you mean children currently in the out-of-home care system or broadly?

Broadly?---Broadly? Again, we come back to that issue of vulnerable families. I think some of the provisions that have been made over the last couple of years certainly - we set up the Evolve Services that are available to children in care who have challenging behaviour.

Do you understand that that's in the last year been expanded to children who are still in their parents' care? ---Yes.

Yes?---I do understand that. Yes.

I take it that would be a very important step, would it? ---Very, very important for families to have access to that kind of therapeutic - and a multi-disciplinary team approach. I think that's really important.

Is it your understanding Evolve is obviously the Department of Child Safety and Disability Services. We know they're within the broader Department of Communities, but it also involves health employees, doesn't it?---I think so, yes. Yes, it's multi-disciplinary.

All right. Because a figure has been quoted that it's some \$20 million to provide care annually for children with very complex and extreme needs who are in out-of-home care. Is that your understanding?---Yes. It's a very high cost area.

I should say the department currently categories level of support into four levels - is your understanding. There's

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moderate, children in care as a result of trauma and neglect where they can be managed through limit setting and other interventions; high level, which includes children with serious emotional, medical or behavioural issues who require professional or specialist input - - - ?---Yes.

- - - complex, which includes the needs of children who have a daily impact on them characterised by health conditions, disability or challenging behaviours; and extreme, includes a pervasive impact on a child's daily functioning and can include multiple life threatening health and disability conditions or extremely challenging behaviours that necessitate constant supervision and care? ---Yes.

Now, is it your understanding that this very high end - this \$20 million figure - is devoted to children largely who have complex and extreme needs and they are the ones that are out of home and because of their behaviours or needs, often need to be in residential care by themselves with around the clock supervision?---Yes.

Is the aim, as you see it, obviously to intervene earlier to prevent, if at all possible, those children having to be removed from their homes?——Absolutely and it's another example of what we were discussing earlier; that we really need to be intervening earlier and we need to have a range of family support but also therapeutic interventions available to those families and children.

Because it's the case, isn't it, that currently Disability Services through the disability component, if you like, of the department can only offer respite up to 50 per cent of time. So if a parent is saying, "I'm willing, but I can't, I'm not able, to care for them. I need more than 50 per cent," they then have to go down the child protection pathway?---Yes.

Is that correct?---Yes, it is.

So you then commence down that statutory intervention pathway. Now, I take it some of the more obvious disadvantages of that, there's the stigma for the parents. Secondly, there's the issue that it immediately goes into, if you like, that adversarial atmosphere where there's the gathering of evidence. Correct?---Yes.

And that parents who would otherwise be willing and able are forced to relinquish because of their inability to care for these children. Now, is it also correct that this issue of 50 per cent is a fairly artificial one in that it can be - obviously it's not a static need, is it - - -?

-- because one month, for instance, parents may need more than 50 per cent, but if they get that extra respite then the child may not need 50 per cent next month or, indeed, the further month. Is that correct?---Yes. I

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think that the 50 per cent rule is really unworkable in these situations to be adhered to rigidly and, you know, there needs to be a lot more flexibility around that.

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And for some parents who still want to be a parent and have a role in their son or daughter's life, it may be that they can only do that 40 per cent. And I think certainly there are changes over time with that.

Obviously an initial one would be the child ageing, wouldn't it, because - - -?---Definitely.

--- obviously some needs might be higher in very young years, for respite?---Mm'hm.

They may drop, perhaps, after the child turns five, but increase as the child goes into adolescence - - -? ---Adolescence.

And indeed the particular challenges, aren't there, for children with disabilities are that the type of out-of-home placement if you look at foster care is going to be obviously more limited, isn't it, then for children who don't have disabilities?---That is an issue about recruiting foster carers who can provide that level of support.

And I take it then that there's more likely, too, to be changes in placement because there are more limited numbers and also because of the challenging nature of caring for children with disabilities?---Yes.

And I take it therefore that's probably more difficult also for the family or origin to keep contact with the child? --- That's right.

And I take it therefore it becomes more problematic for them to try to reunify with the family?---That's right. And I think it becomes - and it's highly emotionally difficult for those parents who have had to go down that path, and very painful, that whole process of: how do I stay involved in my child's life when all of that other stuff is going on? It's really difficult.

Is it correct that the particular risk factors exposing parents to a risk of relinquishment through your research include single parent families?---Yes.

Other children in the family being adversely impacted upon their siblings?---Mm'hm.

Parents themselves have a physical disability or mental 40 health issue?---Mm'hm.

Families isolated from other support networks?---Mm'hm.

And the actual extent of the challenging behaviours exhibited by the children?---Mm.

In your view from your research do you consider that child safety staff are adequately trained to understand the nature of both families at risk and also the assessment of

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risk for children with disabilities?---To be frank, no, I don't think so.

Would you think that that's obviously very important for them to be trained?---I think it would be very important for people in child safety to have much more awareness and knowledge of these kinds of issues and the situation for those children with disabilities.

Is it your understanding there's been a protocol developed between the child safety services and disability services to assist in responding to situations where parents have simply become exhausted by the care of their child with a disability and seek respite assistance for the child?
---Yes.

What do you understand that protocol - the subject matter of it and the extent of it?---I haven't looked at that for a very long time, I'm sorry, but basically looking at that whole arrangement of providing respite and supports for the family, and then coming to that point, which unfortunately is kind of dictated by the percentage.

Do you understand that it's nothing more than an arbitrary point?---Well, yes, I think it is an arbitrary point.

Right?---And I guess I'm troubled by that.

In terms of - you've spoken about the Evolve - the multi-disciplinary team?---Mm.

In terms of overseas, are you aware of Active Support which operates in the United Kingdom?---Mm.

What do you understand it offers and why do you see it as important?---There are a range of ways of thinking about: how do we best support and address issues for these children? And of course the earlier the better in that approach. There are three key aspects to supporting families and children in this kind of area. I'll talk about Active Support first, but it's really important that we think about the other aspects as well. So Active Support came from the United Kingdom. It's been developed and evaluated; there's a lot of research around it; and it is being used in New South Wales and Victoria and probably some other states, to my knowledge. So this came out of looking at: what are the working practises of those support staff who work with people with a disability young people with a disability; particularly people with an intellectual disability? And so Active Support looks at how can - in an ongoing way on a day-to-day basis - can those support workers provide opportunities for participation for people; maximise the sort of choices that they might make around what's happening for them in their And so providing those sorts of opportunities that then increase the amount of perhaps community engagement that people are able to do and able to participate in.

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Do you understand they're child protection offices, if you like, or frontline staff, or are they from the non-government sector?---They are largely from the non-government sector. I could provide you with a number of papers, if you'd like, about that.

Yes?---But it's largely training and support for that hands-on staff, so people working in, say, a group home or a small residential - or indeed providing in-home support for a young person in the family. But it is for that level of staff.

So it could be a child protection frontline staffer who could be doing that sort of work if they were appropriately trained?---I think that given that Active Support requires the day-to-day - - -

It's going to be more of the residential - - - ?---It will be. However, a child safety staff member who was aware of - you know, had a good understanding of the value of this might well be in a position to link - you know, to advocate that that training happen or to have a better understanding of what that might mean on a day-to-day basis with what's happening with a young person.

So access those supports for them as part of a case plan? ---Yes. Yes.

And the second issue, is it, that you consider very important is this psycho-pharmacological component?---Yes.

Can you expand a little bit on that? --- Yes. So the other important thing in understanding challenging behaviour in children with disabilities and young people is that this is a highly complex and specialised area. In my view we don't have enough psychiatrists actually who work in this area in Queensland, or indeed probably in Australia. So this is the complex way in which medication is given to young people, and these are across a range of classes of medication. So you can have a situation where a young person has been put on an anticonvulsant and then they're put on a sedative and then they're put on a dopamine antagonist or whatever. And so we have a very complex pharmacological, if you like, scenario happening. I don't think we have enough expertise or understanding - and we need those kinds of experts, and they do exist - who - for example, for some young people with disabilities how might have some rare syndrome or some genetic kind of situation, they may in fact respond at a different biochemical level to the medication that might be prescribed by someone who may not have that level of expertise at that highly specialist level. So we have this sort of situation of what has been termed chemical restraint. What that unfortunately does is limit the capacity for the child or the young person to actually progress and learn and have support in other arenas. When we reviewed the restricted practices in this state a little while ago - I think that was a very useful exercise that happened in disability

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services.

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We found one of the outcomes of that was there were thousands of people on medication - and I'm not just talking about children but adults, who were on all sorts of medications and had been for years and that had not ever been reviewed. So I think we need some very specialised understanding of how those drugs can be used and the best way to do that, because that is a concerning feature, especially as these kids progress into adulthood and nobody has reviewed that they've been on this drug since they were 15. So that's the other aspect of that. Shall I go on to the third - -

10 Yes, thank you? --- So then the third plank, if you like, of supporting kids with challenging behaviour and families is around that highly specialised behaviour support, and this is largely the domain of psychologists, specialist psychologists, but it's about how do we understand the precursors to the behaviour, how do we then - what is the best way of managing that, how do we look at what the consequences are, what are the possible triggers and how can that behaviour be managed. So I think really if we could work to a goal, I guess, where we had paid attention to all of those aspects, working in a person centred, family centred way, if we could start to do that earlier we 20 wouldn't have as many people who were, of course, the subject of the Carter inquiry as adults, requiring millions of dollars of support and leading isolated lives where, you know, they're totally isolated from people. Some of them have two workers on any one shift and it costs a lot of money and I wonder for what kind of outcome?

So you would obviously, therefore, applaud an initiative like Evolve which works, as you understand, therapeutically and intensively with families and children?---Yes.

All right. You would say that that therefore, in your model, if you like, or your understanding, is at the secondary level, where they're identified as at risk but haven't necessarily reached the statutory threshold for intervention by the child protection agency?---Yes.

Now, you did some research, didn't you, in - it was released in 2006, with Morrie O'Connor and Robyn Jackson, Journeys of Exclusion?---Yes.

You did an analysis of 43 young people who had lived in out of home care and followed them up after leaving care. What were some of your key outcomes that you identified?——So some of the outcomes for those young people — and this was young people leaving care who had perhaps a mild intellectual disability. So some of the outcomes for those young people were that they were highly vulnerable to homelessness, to contact with the criminal justice system, to becoming involved in prostitution, to becoming parents themselves, and that often those young people on leaving care were kind of cast adrift, really, with no ongoing support to negotiate, yes, their whole lives.

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Was it, for instance, that you found 17 of the 43 had become mothers and the average age was 20.8 years?---Yes.

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Over half of them had more than one child and of those one mother was deceased and 25 of the 26 women who had had children had had intervention by child protection?---Yes.

So it was almost all of those women had had intervention by the child protection agency?---That's right.

There was a child - so therefore it was about 96 per cent? ---Yes.

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71 per cent of these 43 young people had been a victim of crime. Is that what you found?---Yes.

And that 60 per cent had mental health issues and only 12 per cent had gained a grade 10 certificate and 12 per cent a senior certificate?---That's right.

All right, and only 25 per cent of them were employed? --- That's right.

So that being the case, you've talked about early intervention. What do you understand might be some of the significant outcomes that could inure from the NDIS that we understand the Commonwealth government will be rolling out?——Well, that's an interesting question. Basically, the principle of the NDIS is that people would be eligible for a package of support, that funding that was tied to them particularly, individualised funding, that they could then have managed for them or in some instances could manage themselves. So I guess for this particular population we have some very good examples of how those young people can be supported and actually have good outcomes, that an NDIS could make available more funding, really, for this population, and, I mean, all people with disabilities and families, but there would be then some flexibility and more choice around how supports could be tailored for the person.

So in other words, perhaps funded more in the disability sector rather than having to have access to the child protection sector, if you like?---Definitely. I think that is really a key part of this, is that if we had an adequately supported and funded disability system, a lot of these instances of children with disabilities having to come into the child protection system, we would reduce that.

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Mr Commissioner, I've just about finished. I've probably got about another five minutes.

COMMISSIONER: I think we'll just keep going until - - -

MS McMILLAN: Thank you.

COMMISSIONER: If that's okay with everyone, until we're

finished with the professor.

MS McMILLAN: Now, in terms of adults with a disability, you refer in your statement to Prof Gwynnyth Llewellyn, obviously of Welsh heritage, one presumes?---Yes.

Undertaking research in this area. Now, she proposed that assumptions are made about parenting capacities of dealing with an intellectual disability which results in the involvement of child protection professionals in assessing risk and the unwarranted removal of children. We've already touched upon that 96 per cent rate that you discovered. Do you think that holds sway here, that assumptions are made about the parenting capacities of women with intellectual disabilities?---I do hold that view, yes.

Are they warranted, in your view, on your research?---I think a lot of this is, of course, untested, because if we had adequate support then this might be a very different scenario. So I think if parents had proper support for parenting and other kinds of resources they may well be in a position to be a parent. I think Prof Llewellyn's work has certainly demonstrated that. There's just been a recent literature review on all of this research in this area and I have a copy of that paper; it was just published in March this year, which might be useful to the commission.

Are you happy to provide it then?---Absolutely. I'm very happy to provide that.

Thank you?---Because predictably, that review of the literature indicates that for some - you know, there are some parents that fare really well and others who don't, but I think we need to not just make a blanket assumption that every parent with a disability is not going to be able to parent this child so we have to remove it then and there.

Thank you.

COMMISSIONER: Thank you, professor. The literature review in the Journal of Intellectual and Developmental Disabilities, March 2012, by Collings and Llewellyn, will be exhibit 48.

ADMITTED AND MARKED: "EXHIBIT 48" 40

MS McMILLAN: Thank you?---Thank you.

COMMISSIONER: We'll provide copies to the other parties.

MS McMILLAN: Yes, we will. Thank you.

Now, in 2011 the Victorian Parenting Centre released a resource tailored to providing information to professionals about assessing and educating parents with a learned

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disability. Do you know of any services provided for, resources provided or used by organisations funded by the department here of communities, child safety and disability services, or indeed in Queensland Health, in Queensland, aimed at assisting parents who have a learning disability? ---Look, I'm not aware at the moment, bearing in mind that things have changed considerably. I am aware that there have been some programs in the non-government sector that provided that kind of support.

I can't recall exactly where and by whom, I'm sorry, but I 1 could find that out.

Yes. Would you be happy to provide that information? ---Yes, I would be happy to provide that.

Yes, all right. Mr Commissioner, thank you. I've got nothing further for this witness.

COMMISSIONER: Thank you, Ms McMillan. Mr Selfridge?

MR SELFRIDGE: Thank you, commissioner.

Good afternoon, Professor Chenoweth. My name is John Selfridge. I'm counsel acting on behalf of the state of Queensland. First of all, at paragraphs 14 through to 16 of your statement, you discuss the issues around culturally sensitive practice and the limitations of training for staff. Could you just define to the commission what you mean by culturally sensitive practice; what your definition of that would be?---Well, there's many definitions of culturally sensitive practice, but basically we conceptualise this on a continuum where culturally sensitive practice is a practice that takes into account the cultural norms, cultural practices of the person or the client and is respectful of those cultural practices in carrying out the work that's being done.

Okay. You see, just so I have an understanding of it and the commission has an understanding, there was a document handed up by the Aboriginal and Torres Strait Islander Legal Service to the commission, exhibit 37, three seven, it's entitled Culturally Competent Client Representation and that gives a definition of cultural competence as being described as simply, "As having the means and skills to understand, emphasise, communicate and interact effectively with people from different cultures," and that's expanded upon. Are we talking about the same - - ?---Yes, we are.

In terms of the cultural sensitivity of cultural competence, from a departmental perspective - and I'm talking about the Department of Communities here - how could that be improved? Do you have any suggestions as to how that could be improved?---Well, I think certainly it would be good to have some rigorous and robust training available for all staff in this area and certainly not just about indigenous culture either because, you know, we're a very multi-cultural society. So I think having some training available for all current staff so that people can actually have a refresher on this and certainly all new staff coming in - - -

It's offered up as part of the degree - the social work degree, though, isn't it?---It is part of the social work degree, yes, but that's assuming that you only have social workers working in the department and that's not the case so - - -

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Not any more from 2007 - - - ?---No.

- - - and 2008?---No. No.

Yes, I understand?---No. So it's even, I think, very important for all staff. I think there's no - it's certainly useful for that training to be particularly geared to the context of child protection practice because in that context we need to understand, "What are different families approaches to child rearing? What do families understand the role of the child? What's the cultural position of the child?" So I think it would be good to have some aspects of that that are particularly about families and children.

You talk about multi-cultural society?---Yes.

And as I understand it, and I recall the evidence from the Queensland Police Service that in Logan alone that it's some 148, I believe, different identified cultures?---Yes. There is.

Yes?---Well, some people say 180 and some people say more than 140.

Okay?---There's a lot.

Turning then to those questions that my learned friend Ms McMillan put to you about how they could improve on Aboriginal and Torres Strait Islander type - in the numbers of workers in far North Queensland and more remote rural areas and you were asked specifically, practically, how could we do that and you discussed a whole series of learning strategies, you know, students from far North Queensland. In fact, at paragraph 46, page 6 of your statement - - ?---Of my statement?

Yes; you talk about a degree being offered in child and family studies, which is more about workers wanting to work in preventive family support - - - ?---Yes.

Do you see that?---Yes.

Has Griffith ever - and I'm being particular about Griffith because that's obviously your place of employment?---That's right.

Has it ever offered distance learning for undergraduates? 40 --- This degree in child and family studies is for undergraduates. Yes.

Yes. But in terms of distance learning as such?---In distance? No, we haven't done that to date. However, we have just developed for people in the child - that early intervention and child care area - some modules that are available in distance because there have been some - the state government has offered some scholarships for people working in that area, so we do have now some of that

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available in distance. Yes, we do.

Okay. Are those modules you're talking about - you're talking about child protection type industry model ledgers? --- They are - I'm not involved in that degree, but they are modules are children and families, violence in families.

Is this more geared towards this preventive type of - - - ? ---Yes, it is.

Yes?---It is more geared towards that end. Yes.

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At paragraph 23, two three, of your statement - and Ms McMillan, again, put some questions to you in relation to that?---Yes.

I'm talking there about support or supporting those officers that don't have a social work degree to get formal qualifications as such and the discussion - and what you state at paragraph 23 is you didn't have an understanding as to whether or not those was - that which was formally offered was evaluated?---Yes.

You're obviously not aware, but I can inform you in my instructions, at least, that in October 2010 the department convened a review panel which include representations from the following: Workforce Council Queensland, PeakCare Queensland, Australian Association of Social Workers, Queensland Aboriginal and Torres Strait Islander Child Protection Peak, Child Protection Working Action Group and the Australian Centre of Child Protection - - ?---Yes.

- - and there was also representatives, as I understand, both from QUT and Griffith present and the Commission for Children and Young People Child Guardian, the essence of it being this and I'll - -?---Yes.
- - just put a few things to you and then ask you a couple of questions on it. As a result of that review panel in the meeting, they determined that child safety support officers to child safety officer pathway was a potentially appropriate acceptable strategy to address the issues of retention, attraction and the like?---Sorry. Could you just repeat that?

Yes, absolutely?---Was a poor strategy?

No, no. Sorry, I do appreciate I've got something of an accent and it sometimes difficult to understand?---I'm sorry. I just - - -

That's okay. That's Okay?---And it's an important part of what you're saying.

Of course it is. What I'm saying is this that that review panel meeting - it was determined there that that pathway between child safety support officer to child safety officer was appropriate - it was an appropriate and

acceptable strategy as such engaged and particularly focusing on issues surrounding the attraction of personnel and retention of personnel and that a research evaluation project was then developed with Griffith to formally assess that child safety support officer pathway and there was a pilot process engaged as such. I think it's important to state the results were that it was a potentially appropriate career pathway and that those officers who engaged in that process met or exceeded the minimum standards of performance and so that's how this - the evaluation process - and at the end of the program - the CSSOs don't automatically graduate - - -?---No.

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--- as such to CSO. There's a recognition that they're eligible to apply and they certainly meet the minimum qualification standards as such. That all said, I'm sure you would agree as a professional and advising the commission it is worthwhile continue to support such a project?---Well, I haven't read that evaluation, but on the face of it, yes.

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Bearing that in mind, in terms of recent graduates, as such, is there any means from a university perspective that could be utilised to assess those constraints in the child protection system, as such? Because we've already identified there's a whole series of issues that face such people?---Yes. So you mean in terms of graduates and assisting them to - - -

Yes, just graduates in general?---In general, absolutely. In our first ARC study one of the things that I didn't mention was we did a survey of about-to-graduate students.

Yes?---I've got that paper here too if you'd like it.

Yes, we'd like that?---But one of the key things about that, when we asked - it was about 170 students, I think, from seven universities.

Yes?---A significant percentage of them, their preferred area of work, child protection, family welfare and young people.

So that's of those graduates in a social work degree? --- There was a few that were psychologists.

Okay?---However, I could give you that paper as well if you'd like it.

Yes, please?---As soon as I find it here in all of my papers here. I have so many papers.

So what I'm getting at really, effectively is - - -? --Certainly the motivation. I mean, I suppose if I could summarise it - and I'll find the paper in a minute.

Sure?---They were certainly motivated. Bearing in mind this was done around 2004 and so at that time there was not the openness to recruit social workers in the department.

Sure?---But certainly the motivation to do that work and it certainly also revealed some of the things that would work as incentives for them to go and work in rural communities.

Okay. Taking that into account, within the child protection system as such, recent graduates, how best could they be utilised in your estimation?---Recent new graduates?

Yes?---I think ideally - so new graduates. Now, bearing in mind that the new graduate isn't necessarily a young person in their early 20s.

I understand, yes?---Because about half of our students are non-school leavers. But perhaps - - -

Sorry to interrupt. Do half of your students come in from other disciplines and having - graduates in other disciplines?---The people who come and do the masters of

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social work qualifying, all of them, yes.

Okay?---The bachelor of social work, we have people who've done TAFE diplomas, we have people who've not got a degree but have been working in a non-government organisation or in - so they have some experience in a general human service sector, definitely.

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Sure?---So I think when we're looking at the new graduate I don't think we can just assume there's a template and all new graduates are like this. I think we need to look at: what other experience has the person had? What other knowledge and experience do they bring? But having said that, I think it's important for all new graduates coming into complex work like this, that they have good professional supervision, that they have opportunities for ongoing professional development, and that - I mean, one of the models I like is this whole idea of a kind of internship model which medicine has done for centuries. But we should look at: what are the learning opportunities for that worker in the first 12 months? Because then I think we would really build the capacity of that workforce in a very productive way.

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COMMISSIONER: Do you know what proportion of the 50 per cent of new graduates who are non-school leavers - - -? ---Yes.

-- - the department currently employs?---I'm sorry, I don't know that. I don't. I don't have that information.

What about intake into universities, into human services-related courses of study? Is that on the increase; the decrease; or is it stable? --- Into social work and human services degrees?

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Yes?---I think it is on the increase. I think certainly the number of universities offering social work degrees has really expanded in the last five years in this country. think we have about 27 universities now. Has that meant that people are just getting a smaller bit of the pie? Not really. The growth has been in the masters of social work qualifying, but equally the bachelor of social work - I think overall if we look at nationally there are more graduates now.

Do most graduates become practitioners?---Yes, most graduates do.

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But we just don't know how many are going into child protection?---Well, no, I don't know that. That information may well be available, but - and there may be also a way of finding that out from the graduate destination survey that is conducted for the whole higher education sector. That might be - yes.

Have you found that paper yet?---No. I'm rustling around here. I'm hoping I haven't left it in the car, but I will

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look and see if I have it. I'm sorry. I've got so much stuff here. I haven't found it yet. I'm sorry, Commissioner.

That's all right. We'll put it aside?---I can give you the reference.

That will do. That way we can - - - ?---Just a moment. Here it is. There we are.

We'll make that an exhibit. Exhibit 49 will be McAuliffe, D; Chenoweth, L; and Stehlik D, Rural Practitioners of the Future, which is Rural Social Work and Community Practice, volume 12, issue 1, 2007.

ADMITTED AND MARKED: "EXHIBIT 49"

MR SELFRIDGE: Sorry, what year did you say?

COMMISSIONER: 2007. It was my accent, was it?

MS McMILLAN: We'll translate for Mr Selfridge.

MR SELFRIDGE: No comment.

Professor Chenoweth, I hear what you're saying, and we've made mention of that a few times in relation to that supervisory aspect, and you made comment earlier to Ms McMillan about senior practitioners that you've come across yourself in the course of your study whose influence at regional child safety service centres is very noticeable and admirable. What if we don't have, these - through an inability to retain or have the numbers, as such, in the immediacy of the moment - what if we don't have these senior practitioners or other experienced staff available at every office? How do we provide guidance to inexperienced staff in your estimation?---I think the department should be recruiting people to do that. I'm assuming you've got the positions but they're vacant, you can't recruit to them. Is that scenario?

My understanding is that that's not always the case, obviously, but in some situations it's very difficult to engage and retain experienced staff at particular remote or rural areas. That's my understanding of my instructions, as such?---Yes. So I guess I'd go back to what we were discussing earlier, that we need to look at ways in which we can provide some of that through teleconferencing, online strategies from someone who may well be located in another office and isn't prepared to go and live in Aurukun or Mapoon or wherever, that we should look at really state of the art ways to do that, that perhaps we look at - one of the other models that might be useful here, and I'm thinking - I'm just sort of thinking now of another example in a very different field - is looking at where do we have those senior practitioners. I use a model which I call archipelagos of support. So do we have someone in Kingaroy but no-one in Roma; or is there some way we look - and it

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is, I suppose, a variation on the hub and spoke kind of idea. $\ensuremath{\text{1}}$

I understand, yes?---Yes, that could we - and I say "we", I mean - - -

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We, society members?---That's right, because as I - this is a very important principle for me, is that child protection is everybody's business. It's not just about the government, it's about all of us. So we could look at where have you got those sorts of practitioners, how close are they related to other areas that perhaps don't have a senior prac person.

How best could they be utilised?---Yes, and also I think we should be looking at do we have practitioners with potential to move into those roles in some of these other offices.

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Well, that's about training those practitioners with the potential to move into those roles?---Absolutely.

That lead me nicely into the next question. You might have heard some of the questions I put to Mr Hayward who was the witness who was on previous to yourself in relation to training indigenous personnel to working - of themselves, and training them to an adequate level where they can be taking on the responsibilities themselves and those more senior positions, as such?---Yes.

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Of course, being rhetorical, you would be supportive of that, I'm sure?---Absolutely.

Just one last thing I'd like to ask you some questions on, and it really relates to these children with high and complex needs, as we would call them?---Yes.

High support needs, I think is the terminology that you state?---Yes.

Now, accepting what you told the commission earlier in your evidence about - when you told Ms McMillan in relation to intervening earlier to prevent the situation, and intervening in family - through family and therapeutic support and highly specialised personnel that can manage behaviours. In the necessity and immediacy of the moment you obviously have an extremely high financial cost and burden to society at this moment in time?---Yes.

So that training, one would consider, may take some time. Is there anything - I know you don't offer opinion about alternative care models as such and you expressly state that. Is there anything you could assist the commission with in terms of suggestions, advice, as to how we deal with those situations in the immediacy of the moment? ---Look, this is such a vexed issue and it is about how as a society we concentrate everything at that pointy crisis end. We've done it in health, we've done it in corrections. When will we ever learn, I guess?

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I suppose that's what we're here today about?---Yes, exactly.

To try and learn and try - - -?---Exactly, and I wish I

could, you know, provide a very simple, very inexpensive solution.

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Yes?---I think to some extent there is no way of avoiding investing in two things at once, because, you know, I think we're busily creating the restricted challenging behaviour problems of the future now. So I think that we do need to look at what can we do in terms of schools, in terms of general education to those parents and family support.

That's a kind of Evolve type model, that multi-disciplinary type approach which is successful as - - -?---Yes. Yes, but perhaps even earlier. You know, I wonder about even looking at some earlier than - when, you know, there's a young man who is now 13 or 14 and is kind of creating havoc in the family - - -

Going back - can I just pick you up on that point? --- Yes.

Going back to the evidence, I think it was of Ms Corelle Davies from the health department, and I think again Ms Lyn McKenzie from education gave some evidence and so did Mr Swan, about this Evolve Services and how it's been expanded into children that are in the care of their family and indeed to younger personnel - younger children, as such?---Yes, good.

So we're talking about three, four-year-olds?---Good.

Is this what you're talking about? Is that what you - - -? ---Absolutely.

Yes?---Absolutely, and I think it's helping all of us understand more about the nature of these children. Are there environmental factors that are bringing about a kind of escalation of this behaviour or are there other factors that we really need to be aware of earlier? I mean, I'm very heartened - - -

Aware of and addressed earlier?---Yes, and addressed; yes.

Yes?---I'm very heartened that the Evolve model and the Evolve Services have expanded now and I think we - I don't know, have we got about 19 across the state?

As I understood it, more than that?---There's more than that now.

I'm not sure. I wouldn't want to be misquoted?---But I think looking at that model but also how could we build the capacity even in the non-government sector to provide that kind of support. You know, maybe we need to be looking at how do we skill up - recruit people to work in other family support contexts, like Salvation Army or the Smith Family

or a range of those non-government agencies to provide that level - - -

Type of service?---Mm.

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Coming back to the question - sorry, commissioner.

COMMISSIONER: Yes, thanks. Having regard to the prevailing Liberal political philosophy of minimum coercive intervention by the state into family affairs, how would secondary intervention work? Would it be purely voluntary, self-initiated, or could it be coerced?---This is a very good question, and certainly that comes to the heart of a whole lot of these issues about, well, how would people know? How would people know? I mean, if we look like 50 plus years ago, the priest might come around and have a word to you, or it may be through the school or whatever. I think - - -

So the question is how do dysfunctional people know? ---Exactly, and that, I think, has to be made available through the kinds of services that they might interact with or have contact with.

That's voluntary contact or forced contact?---No, voluntary contact, or universal or incidental contact. So do they have contact through the health services for maternal and child health, do they have contact with GPs or through the GP clinics, do they have contact through the school or preschool, et cetera?

So they would have contact either voluntarily or even - they could be an accidental beneficiary of it?---Yes, absolutely.

Right, and then how do we move from there into actually targeted intensive support or help that they either don't know they need or don't want?---So some of that is just what is universally available at that primary level, but if there's something in it for the parent - so some of the programs that are offered in Logan that I am familiar with provide - they might run a program on parenting skills or how to get your child to eat vegetables or how to - and maybe it's linked to some occasional child care for the family so that there is - -

An incentive?---An incentive, yes.

Right, so, "To make sure you give your children vegetables we'll give you something" - something - - - ?---Well, yes, that's the example, having struggled with that in my own parenting life.

So a lump of sugar on a stick. Is that right?---Yes.

Will that work?---Yes, a current - - -

Will it work enough to justify the cost of providing it? ---I mean, I think, yes, certainly some carrots, not all stick approach.

Not all stick, some stick?---Not all stick, no.

Well, who do you use the stick on?---Well, I mean, as a society we're really wielding the stick in terms of welfare reform and - this is also, you know, that, "You will only get your parent benefit if your child attends school." You have to comply with a whole range of requirements. I have great difficulty with those mechanisms.

But isn't that more like incentive, in the sense that - I mean, leaving aside the very poor who need it to survive, if you see it as a supplement to what you get, like, say child allowance or stuff like that, isn't the government saying, "Look, you can have this if you do that. If you don't want this enough, you don't have to do that, but that's your choice," which is obviously part of - that's the social contract, isn't it?---Yes.

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We choose to be part of the society and take advantage of what it offers by choice?---Yes, but that's assuming, of course, parents have - it's an informed choice. For example, I mean I've only witnessed that purely as a stick thing that, "Unless your kids go to school, we're going to cut your parent benefit," or whatever.

It's not a very big stick?---Well, it is. It is. It - - -

It might be to some people, depending on the level of income?---Absolutely. I think it is a very big stick for some families and part of the issue then comes back to how is that interpreted. So I provided advice to a mobile sexual assault service in the Northern Territory for a number of years around indigenous communities and sexual abuse of children and in some of that work, which meant I visited the territory on a number of occasions, some of the playing out of that around school attendance was, I think, really problematic. We had an instance of in an Aboriginal community a mother had really, really worked hard to get her kids to school and that school attendance had increased, let's say for argument's sake, from 20 per cent of the time to 45 per cent of the time, but the rules said they had to be at school 80 per cent of the time, so there was no reward for all of that effort and positive outcome and so that, you know - - -

That's just redesign, isn't it?---Yes. It does need redesign, but it's often a real tricky job to get that redesign happening. So we should be looking at the strengths of people not just totally deficits because I know that mum - she worked really hard and it was a really good outcome for that family, but it didn't pay off.

I guess at some point we're going to have to grapple with the idea of: if the government goes to the tribunal of providing money and resources to make available a service that isn't coercive based on a breach by the parents of a social contract and therefore justifying intrusion into the home for the protection of the children, short of that how do you make those who need it, who don't know it, take advantage of what you've provided for?---Well, you have to use a whole range of means to make that happen and if I could perhaps give you an example of the Pacifica community in Logan, would that - -

That might help?---Okay. We have a big strategy at the Logan campus about engagement with the Pacifica community, a community that has quite a lot of issues and we are trying to build aspiration in Pacifica young people to finish year 12 and come to university.

Are these from the islands, are they?---These are Samoan, Tongan, some Maori. They're not Pacifica, but the people who've come - and largely have settled in the Logan community and Gold Coast. So one of our strategies with that has been about bringing the whole community onto the campus, so we have grandmas. We have little kids. We have

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the elders and community leaders and out of that some of the things that we've learned and some of the things we know from other government reports - for example, children from Pacific island background are totally - do not score as well on the educational level for going into prep. Some of them have never had a book in their house. So suddenly this community is coming together and we're talking about a whole range of things and then in partnership with other organisations in the community, so there's now more impetus and working around, "Well, okay, how can we provide some like kindergarten type experiences for these children?" because they will go into prep and they will be behind the eight ball from day one because they won't have reached whatever the level that the average is for the state. How then can those - and there's a lot of impetus and work in that community about, "Well, how do we actually do more for our young people? How do we encourage our young people to finish year 12 and - - -

So it's a guided democracy, sort of thing, or a guidance? ---Yes.

Okay?---But it's providing the opportunity and I think this is - what is very interesting to me is how partnerships between, in this instance, Griffith University, the voice of Samoan people, a number of the churches, a number of people in the community, the Logan City Council, actually really working together on guidance.

So it's based on the social assumption that if you provide it, they will come?---Yes, I guess it is.

Okay. Thank you.

MR SELFRIDGE: Just one last thing if I may, Professor Chenoweth?---Yes.

Just picking up on that discussion that you had just now with the commissioner and providing the opportunity and attracting the community to services and I think it's inferred in your answer, anyway, but you would be obviously trying to offer these services to the community in a non-stigmatised way?---Yes.

Because that invariably will, in my humble interpretation of that, attract more of the community to that service?
---Yes. Absolutely and I think that's really the key - that it isn't stigmatised. It's a positive and universal kind of access, yes.

Okay. Thank you very much for your time?---Thank you.

I have no further questions.

COMMISSIONER: Thank you. Ms Ekanayake?

MS EKANAYAKE: Professor, my name is Jennifer Ekanayake. I represent the Aboriginal and Torres Strait Islander Legal

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Service?---Yes.

Just a couple of questions for you. At the commencement of your evidence you mentioned a research project, child protection with indigenous families and children. Would you know when that project is going to be completed or results are going to be available?——Okay. The data is finalised for that study and we are in the process of preparing papers from that. One of the outcomes that we had agreed to in our — because this was partnered with the Department of Child Safety, initially, is that we really want to offer symposium and workshops for everyone around the findings of that. So we should have some papers in the next couple of months, really, from that.

That should be very useful?---Yes.

Thank you. Also, you were discussing bachelor of social science and masters degree studies - master studies in social work?---Yes.

Are you aware of - and you mentioned scholarships for students?---Yes.

Are you aware of the number of scholarships that are available and the numbers that might be available specifically to indigenous or Aboriginal and Torres Strait Islander students?——I can't give you those numbers, but certainly one of the things that's — and I can speak from Griffith's point of view. We have been investing a lot into scholarships for indigenous students. All of the details of those scholarships are on the Griffith web site and I have been encouraging prospective students to apply for those. We have a number that are specifically for Aboriginal and Torres Strait Islander students, yes, but equally other scholarships that all students are welcome to apply for, but we have been working to increase that number. I'm sorry, I can't tell you exactly how many.

Thank you, professor. I have no further questions?---Thank you.

COMMISSIONER: Thanks, Ms Ekanayake. Yes, Ms Wood, do you have any questions?

MS WOOD: No questions.

COMMISSIONER: Mr Capper? 40

MR CAPPER: We have no questions. Thank you.

COMMISSIONER: Ms McMillan?

MS McMILLAN: No, I have nothing further. Might this

witness be excused?

COMMISSIONER: She might.

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Thank you very much, professor. I appreciate your time and 1 the evidence that you've provided and I'm sure it will assist?---Thank you very much. I hope so.

WITNESS WITHDREW

MS McMILLAN: That concludes the batting order for today, Mr Commissioner.

COMMISSIONER: For today? Excellent. All right. We will adjourn to Aurukun on Monday at 10 am.

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MS McMILLAN: Yes, thank you.

COMMISSIONER: Yes.

MS McMILLAN: Tuesday, I think we are - - -

COMMISSIONER: All right. We will adjourn the sittings until Tuesday at 10 am.

MS McMILLAN: Yes, thank you.

THE COMMISSION ADJOURNED AT 1.52 PM
UNTIL TUESDAY, 4 SEPTEMBER 2012

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