



Children in Care  
Collective

# Children in Care Collective



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## The goals of the Children in Care Collective

The Children in Care Collective was formed in 2016 by a group of out-of-home care service providers and leading experts in working with children with complex needs from across Australia. The aim of the Collective is to share information and work collaboratively and proactively on issues concerning these children. The voice of the young person is paramount to the work of the Collective.

The goals of the Collective are to:

- Build our practice capabilities
- Partner with others to improve outcomes in the out-of-home care service system
- Let others know about what helps children and young people in care with complex needs.



The members of the Collective provide expertise and valuable practitioner knowledge in the field of out-of-home care, adding value to the system through dialogue and problem solving.

Over the last two years the Collective has been looking at solutions to some of the difficult systemic practice issues faced by the sector. The Collective has done this by using evidence based practice, drawing on the lessons learnt by each agency and engaging with relevant academics. The Collective meets every two months and has identified practice topics to be discussed at each of these meetings in 2018. The Collective has agreed to target issues that will genuinely lift agency capability beyond anything that could be achieved as a sole agency. The issues identified are systemic practice issues, difficult issues that could benefit from the Collective's reflection.

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## Measures of success for the Children in Care Collective

The goals of the Children in Care Collective set out its overall aim and purpose. Identifying specific outcomes for each of these goals will help the Collective demonstrate that what they are doing is working.

The Children in Care Collective has developed a framework that links its goals with outcomes that can be achieved through planned actions and activities. The outcomes are specific and measurable and will enable the Collective to assess what has worked in creating positive change and, if necessary, to change the things that may not be succeeding.

Assessing the impact of the Collective's work is not just about identifying and counting its activities. It is important that Collective identifies measures that strongly suggest a change has happened or will happen. Measuring influence or social change is always difficult and as a start the Collective will use feedback from



participants in its forums, users of its website and surveys of member agencies to obtain information about what has worked to increase their knowledge, skills or understanding, and the extent to which the Collective is achieving its goals.

The following table sets out how the Collective will measure its impact and success.

| <b>Goal</b> | <b>Build our practice capabilities</b>  |
|-------------|---|
| Actions     | <ul style="list-style-type: none"> <li>Identify practice priorities that will genuinely lift the capabilities of member agencies in the Collective</li> <li>Utilise all Collective activities to discuss, share and deliberate practice priorities and lessons</li> <li>Share the practice lessons from Collective meetings with staff in member agencies</li> </ul>                |
| Activities  | <ul style="list-style-type: none"> <li>Collective meetings include discussion of practice priorities and ways to make improvements</li> <li>Bulletins and staff forums raise and deliberate on practice priorities</li> </ul>   |
| Outcomes    | <ul style="list-style-type: none"> <li>Collective activities and shared learning increase the capability of member agencies to deliver quality services in out-of-home care</li> </ul>  |
| Measures    | <ul style="list-style-type: none"> <li>Practice priorities and ways to make improvements are identified</li> <li>High level of satisfaction is expressed by participants in forums</li> <li>Bulletins are used by staff to increase understanding of practice issues</li> <li>Member agencies view the work of the Collective as useful in improving agency capabilities</li> </ul> |

| <b>Goal</b> | <b>Partner with others to improve outcomes in the out-of-home care service system</b>  |
|-------------|--|
| Actions     | <ul style="list-style-type: none"> <li>Identify policy priorities to improve outcomes for children and young people with complex needs</li> <li>Work with partners to: <ul style="list-style-type: none"> <li>Identify support needs and services that support permanent placements</li> <li>Identify strategies to increase the number of Aboriginal children placed with Aboriginal community-controlled organisations</li> <li>Improve support for children in out-of-home care with harmful sexual behaviours</li> <li>Establish a professional paid out-of-home care workforce</li> </ul> </li> </ul> |
| Activities  | <ul style="list-style-type: none"> <li>Identify and engage with academics and practitioners with expertise in the identified policy priority areas</li> <li>Maintain communication with funding bodies and regulators to ensure the visibility of the Collective</li> <li>Identify steps to achieve the Collective's policy priorities</li> <li>Respond to invitations from funding bodies and regulators for advice and policy/practice input</li> </ul>  |
| Outcomes    | <ul style="list-style-type: none"> <li>The Collective is a 'go-to' group for funding and oversight agencies for advice in policy and practice (initially for NSW and then other jurisdictions and nationally)</li> <li>The Collective website is developed and used to communicate with partners</li> </ul>  |
| Measures    | <ul style="list-style-type: none"> <li>Identification of the Collective's policy priorities</li> <li>For each policy priority: the achievement of identified steps in a schedule of work</li> <li>Invitations from funding bodies and regulators to provide expert advice on policy and practice in the out-of-home care sector</li> </ul>   |

| Goal       | Let others know what helps children and young people in care with complex needs  |
|------------|--|
| Actions    | <ul style="list-style-type: none"> <li>• Develop and maintain mechanisms/strategies for children and young people in out-of-home care to communicate with member agencies and to receive feedback</li> <li>• Develop a communication strategy to identify opportunities to provide 'real' messaging about children and young people in care with complex needs</li> </ul>  |
| Activities | <ul style="list-style-type: none"> <li>• Hold regular meetings with children and young people in care</li> <li>• Develop key messages from the Collective that include the voice of children and young people in care</li> <li>• Identify and utilise relevant communication channels to advocate as a Collective</li> </ul>   |
| Outcomes   | <ul style="list-style-type: none"> <li>• Children and young people with complex needs can participate in and feel socially connected to their communities</li> <li>• Children and young people have had their voices heard and feel listened to by member agencies</li> <li>• The Collective has a positive voice as an advocate for children and young people with complex needs in out-of-home care</li> </ul> |
| Measures   | <ul style="list-style-type: none"> <li>• Member agencies establish/maintain regular communication with children in their care</li> <li>• The voices of children and young people in care inform the Collective's key messages</li> <li>• Member agencies view the Collective as a strong advocate with a positive and authentic voice</li> </ul>   |

## Children in Care Collective response to the Royal Commission

With its focus on working with children with complex needs, the Collective has a particular interest in those recommendations the Royal Commission made about improving information sharing across the sector, identifying, assessing and supporting children with harmful sexual behaviours, residential care and supporting care-leavers. These recommendations, and the basis for them, are set out in volumes 8 (Recordkeeping and information sharing) and

12 (Contemporary out-of-home care) of the Final Report.

The Australian Government as well as each state and territory has now published its initial response to the Royal Commission's recommendations. The six specific recommendations identified by the Collective have been accepted completely or in principle by every jurisdiction. The 'in principle' acceptance indicates that imple-

mentation will require significant cooperation. For example, governments will seek to build on existing arrangements within and across jurisdictions to develop an agreed information sharing scheme. This will involve improving the consistency of procedures between agencies within a state or territory as well as harmonising laws across the country.

The Collective has received acknowledgement from each jurisdiction of its offer to explore

ways to assist in the implementation of the specified Royal Commission recommendations. The response from the NSW Attorney-General's Department advises that the Implementation Taskforce has not yet begun consultations with non-government organisations but that this process should begin soon. The Collective will continue to connect with each government to promote this work and have these children and young people included in the discussions.

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## The Mockingbird Family Model

At its June meeting, the Collective had a presentation about the Mockingbird Family Model from Degale Cooper, Director of Family Programs and Hickory Gateless, Deputy Director of the Mockingbird Society.

The Mockingbird Family Model is a foster care model that creates an extended family community designed to support, develop and retain quality foster families able to meet the challenging and complex needs of children and youth in care. It is an innovative way to structure the support and supervision provided to foster and kinship carers.

The model, which was first developed in 2004 in Washington State in the USA, has been designed to increase the sense of connection and the social and emotional well-being of children and young people in care and their carers. A micro community is created by establishing a Constellation of 6 – 10 foster and/or kinship carer homes supported by an experienced foster carer in the role of Hub Home Provider.

The Hub Home provides planned and



emergency respite, coordinates monthly constellation meetings and provides a range of practical and emotional supports to the Constellation carers, children and young people. The Hub Home Provider is paid for the work and support they provide that is outside the established caring role.

The aim is to provide children and young people with all the positive qualities and resources found in naturally thriving extended families. The building of relationships within the Constellation provides continuity for children, for example, enabling them to have respite with carers who are part of the known community.

Based on evaluations of the use of this model in both the USA and UK, the model is proving promising in decreasing placement disruptions and improving the attraction and retention of carers.

Degale and Hickory were in Australia to attend

the launch of the first Mockingbird Family Constellation in Australia, a Life Without Barriers initiative. Life Without Barriers staff attended immersion training in Seattle in 2017 following which they developed the LWB Mockingbird Protocol. The Constellation is in Forest Lakes, Brisbane and consists of a Hub Home Provider, four carer households and nine children and

young people. There are plans for this constellation to grow and for the expansion of the Mockingbird Family Model across the country.

More information about the Mockingbird Family Model be found at <https://mockingbirdsociety.org/mockingbird-family>

**ALLAMBI CARE**



**EVERYDAY**

CareSouth



**WE  
LIFE WITHOUT BARRIERS  
VE**



## Members of the Collective

- Allambi Care
- Anglicare NSW South, NSW West and ACT
- Anglicare Sydney
- CareSouth
- Key Assets
- Life Without Barriers
- Mackillop Family Services
- Stretch a Family
- Settlement Services International
- Australian Catholic University; Institute of Child Protection Studies

