



Department of Families, Fairness and Housing

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Kate Bryant
Coroners Registrar
Coroners Court of Victoria
By email cpuresponses@coronerscourt.vic.gov.au

Dear Ms Bryant

Investigation into the passing of XY (COR 2021 3810)

In Coroner McGregor's *Finding into the passing of XY* on 19 June 2024, 16 recommendations were directed to the Department of Families, Fairness and Housing (the department) inclusive of four recommendations made jointly with the Department of Health (DH) and one recommendation jointly with the Attorney General.

In my letter dated 5 August 2024, I advised of the department's in-principle support of the XY recommendations, the significant consultation and collaborative process required for an informed response consistent with the intent of the 16 XY recommendations, and to give effect to this intent. I confirmed the department's commitment to provide a comprehensive response to the 16 XY recommendations by 19 December 2024.

As such, I write to advise the department has considered the recommendations and a response to the 16 XY recommendations is enclosed with this letter.

The department is committed to ongoing work to advancing and strengthening Aboriginal self-determination and self-management, recognising that this is critical to improving the life outcomes and future wellbeing of Aboriginal people. Further to the 16 XY recommendations, the Treaty and Yoorrook Justice Commission process will inform the broader structural, policy and practice reforms in strengthening Aboriginal leadership, self-determination and self-management.

Should you have any queries, please contact Kirstie-Lee Lomas, Chief Practitioner, Office of Professional Practice at [REDACTED]

Yours sincerely

Peta McCammon
Secretary
16 / 12 / 2024

Attachment 4

Response to the Coroner's Recommendations in Finding with Inquest into the passing of XY

The DFFH response need to contain sufficient detail to address all elements of the recommendation. The Coroners Court of Victoria's guidelines suggest including one of the following in response to each recommendation:

- (a) The Coroner's recommendation has OR will be implemented.
- (b) An alternative to the Coroner's recommendation has OR will be implemented (if the recommendation will be part-implemented, consider this an alternative to the Coroner's recommendation).
- (c) The Coroner's recommendation is under consideration.
- (d) There are unresolved issues with the Coroner's recommendation that needs to be addressed.
- (e) The Coroner's recommendation cannot be implemented.

Recommendation No: 1

That DFFH work towards transitioning all Aboriginal and Torres Strait Islander children and young people in the Victorian child protection system to the care of an ACCO, pending the transfer of decision-making power, authority, control and resources to First Peoples communities as recommended by Yoorrook.
That DFFH, in collaboration with ACCOs including BDAC, ensure that ACCOs are adequately funded and resourced to have the capability and resources to accept section 18 authorisations, including in cases involving Aboriginal and Torres Strait Islander children and young people with complex needs.

Response

An alternative to the Coroner's recommendation has been implemented

The department is supportive of recommendation one, noting budget considerations, which is a matter for Government decision, may be required to support full implementation.

The 2023-2024 Victorian State budget provided the largest ever single investment of \$140 million over four years to continue and expand the Aboriginal-led service system, including: expansion of Aboriginal Children in Aboriginal Care and Community Protecting Boorais, and funding to support ACCOs' infrastructure and workforce strategies. This included support for the ACCO workforce, training and recruitment, with a particular focus on the growing workforce requirements of ACAC and Community Protecting Boorais providers.

ACCO capacity and readiness to safely manage increasingly complex cases is a key driver to support implementation of this recommendation. The *Children and Health Legislation Amendment (Statement of Recognition, Aboriginal Self-Determination and Other Matters) Act 2023* (Statement of Recognition) came into effect 1 July 2024 and provides further legislated mechanisms for the transfer of decision making for Aboriginal children to the Community Protecting Boorais program. It also introduces a requirement for government to consider how it adequately funds ACCOs and transfers power and decision-making responsibilities.

The 2023-24 Victorian state budget initiative builds on previous government investment and will enable an additional 774 Aboriginal children on protection orders to be authorised to an ACCO by 2027. This provides capacity for more ACCOs to join the program.

The Community Protecting Boorais program, which enables ACCOs to investigate safety concerns for Aboriginal children and young people, has recently passed one year of service delivery. This is an exciting Australian first program which will work with up to 348 children per year by 2027. Early indicators from this program are that the two ACCOs operating the program are having strong relationships with families, where legal intervention is required, they are having non-adversarial and quick court outcomes and that they are working in a way that supports Aboriginal ways of knowing, seeing and doing. An external evaluation will be undertaken of this program.

Recommendation No:2

That DFFH, Anglicare and other organisations providing services to Aboriginal and Torres Strait Islander children and young persons in out-of-home care (other than ACCOs) review their current policies and practices and implement any changes that are needed to enhance their capacity to provide culturally connected care, including by:

- a. implementing aspects of culture (that can easily be accessed by non-Aboriginal people) such as displaying the Aboriginal and Torres Strait Islander flags, displaying Indigenous artwork, engaging with Aboriginal music and TV, learning about Aboriginal food/holidays/language etc;*
- b. recognising the deeper levels of culture that are not accessible by non-Aboriginal people and being guided by Aboriginal and Torres Strait Islander people about these – by taking on board advice from ACCOs, Aboriginal practitioners within your organisation and building relationships with the wider Aboriginal community;*
- c. employing Aboriginal cultural mentors and having them available to both staff and young people in their care (particularly in residential care);*
- d. developing a close relationship with, and being led by the child or young person about their own levels of cultural connection and how they would like to further connect to culture, and providing those opportunities;*
- e. having a presence at, and taking children and young people to, public events such as NAIDOC week and National Aboriginal and Torres Strait Islander Children's day; and*
- f. providing opportunities for Aboriginal children and young people to connect with community online (for example, via Facebook).*

Response

Recommendation 2a

The Coroner's recommendation will be implemented

The department has considered recommendation 2(a) and will ensure the requirements for care providers to be culturally competent be informed through the funded agency channel newsletters. This monthly newsletter provides information to support the work of the department and the agencies it funds. It is targeted at services providers (including their staff) and is open to public subscription. It currently has approximately 6000 subscribers. In addition, agency performance and system support managers will work with agencies to enhance their capacity to provide culturally connected care.

Recommendation 2b

The Coroner's recommendation has and will continue to be implemented

Training for child protection practitioners regarding culture and connection to Aboriginal family and community for Aboriginal children has and continues to be an integral part of child protection's learning and development curriculum.

The department has mandatory training requirements for all staff:

1. *Aboriginal cultural safety* e-learning course: compliance essential training for all new starters to the department (inclusive of child protection). This course equips staff with understanding of Aboriginal culture and history as well as to how to create a culturally safety workplace for Aboriginal staff, stakeholders and clients. It also outlines why Aboriginal self-determination is important.
2. *Aboriginal cultural safety and awareness* facilitator led training program, for staff or people managers. These courses equip all departmental staff and managers (inclusive of child protection) with an understanding of Aboriginal culture, history and identity and develop the capacity to be more understanding of and responsive to Aboriginal clients in a culturally safe way. The course is facilitated by the Koorie Heritage Trust.
3. The 'Asking the Question' eLearn has been developed for all child protection and housing staff and went live in August 2023. The eLearn is mandatory for the child protection workforce to complete. In this module staff explore 'why it's important to ask', 'when you should ask', and also provide guidance on 'how to ask the question' with scenarios that put these concepts into practice. This eLearn highlights the importance of accurately identifying Aboriginal and Torres Strait Islander children and families and aims to improve practitioners' confidence in asking the question. This practice is essential as Aboriginal children have the right to grow up strong and supported in their culture bringing focus to strengthening a child's cultural identity.

In May 2024 the department has replaced the previous child protection Beginning Practice mandatory induction program, launching the Practice Induction Program (PIP). Supporting Aboriginal self-determination, culture and connection is embedded throughout the new PIP, as informed by advice from Aboriginal staff in the department, ACCOs and First Peoples Organisations.

PIP provides a strengthened induction program for child protection practitioners featuring content on working with Aboriginal children and families and the importance of connection to culture and families regardless of where or with whom the child resides.

PIP modules that relate specifically to child protection practice with Aboriginal children and families are delivered by Aboriginal staff or Aboriginal guest presenters, including:

- Developing an understanding of Aboriginal and Torres Strait Islander families and communities.
- Practicing with an Aboriginal and Torres Strait Islander lens.
- Collaborating with Aboriginal and Torres Strait Islander families and communities.
- Cultural Support Plans for Aboriginal and Torres Strait Islander children.

The department delivers regular practice forums to child protection practitioners that provide the opportunity to maintain a focus on engaging with Aboriginal families and communities. In 2023, there were practice discussions on:

- May 2023 - Aboriginal Family Led Decision Making
- May 2023 - Asking the Question – Question element of the Aboriginal child placement principles and what it looks like in practice when engaging with Aboriginal children and families
- April 2023 - Engaging with Aboriginal children and Families and the five elements of the Aboriginal child Placement principles
- April 2023 – ACSASS consultation

- March 2023 – Cultural Planning

In 2024, the department delivered a five-part practice forum series, *Uplifting Our Practice*, focussed on implementing the Statement of Recognition in child protection practice.

Practice guidance for child protection practitioners with regard to culture and connection to Aboriginal families and community for Aboriginal children is available through the child protection manual. The child protection manual focuses on the legislative requirements and policy guidance to support best practice when working with children and families, inclusive of when working with Aboriginal children and their family.

In addition to the child protection manual the Child Protection Learning Hub provides resources, research and practice guides relevant to practice in child protection. A section of the Learning Hub, *Working with Aboriginal and Torres Strait Islander children, Families and Communities* has been designed on to support child protection practitioners in their work with Aboriginal and Torres Strait Islander children and families. Practitioners can find information on creating a culturally safe workforce, relevant training and access to practice resources and information.

As part of the response to Yoorrook recommendations, all child protection learning programs will be reviewed in the first half of 2025 to determine how well they equip child protection practitioners to uphold Aboriginal cultural rights. The procurement process is currently underway for a First Nations organisation to conduct the review, the scope of the project includes the review of programs created for the child protection workforce, recommendations for improvements and for the development of a review framework. The review is in response to Yoorrook Recommendation 5 which states: The Victorian Government must as soon as possible significantly upscale the capability, competence and support in relation to human rights, including Aboriginal cultural rights, of all persons appointed to work or working in: a) the child protection system. It is expected that the successful bidder will commence the project on 24 March 2025 and complete by 30 June 2025.

In order to improve understanding of Aboriginal culture and build relationships with local Aboriginal communities, there will be a series of **Aboriginal Engagement Forums** held in 2025. The department has allocated funding of \$60,000 per operational division and \$20,000 for a series of local Engagement Forums to be run in the first half of 2025. The funding allocation has been endorsed by COPL executive and child protection operational divisions must host engagement forums in collaboration with local Aboriginal communities and supported by Cultural Advisors within the department. Each engagement forum will provide a safe space for child protection practitioners and local Aboriginal people and services to come together with respect and curiosity to learn from each other, discuss practice, programs and services.

Recommendation 2(c)

An alternative to the Coroner's recommendation has been implemented

The department acknowledges and agrees with the importance of providing culturally connected care to children and young people in care. The recommendation states that this should be achieved by employing Aboriginal cultural mentors and have them available to both staff and young people. While organisations providing care to Aboriginal children and young people may elect to employ Aboriginal cultural mentors, the department does not consider this should be mandated, noting there are alternative mechanisms to support the delivery of culturally connected care.

The department believes that the existing legislative framework, policy, program requirements and training already provide for this in the following way:

- a. The legislative framework in the *Children, Youth and Families Act 2005* (CYFA) recognises the importance of cultural safety and cultural connection for Aboriginal children and young people engaged with child protection. A case plan for an Aboriginal child in out-of-home care must address the child's cultural support needs (section 176). The recognition principles (section 7E), Aboriginal

Child Placement Principle (section 13) and further principles for placement of Aboriginal child (section 14) in the CYFA must be considered when completing a cultural plan.

- b. The care team prepares, implements, and reviews the cultural plan. While the case practitioner (child protection or contracted agency) has the responsibility for the cultural plan being given to the child, the care team is expected to lead and ensure completion of the plan.
- c. ACCOs are funded by the department for the provision of cultural planning support care teams to develop cultural plans, check the plan for accuracy and appropriateness from a cultural perspective and sign the plan.
- d. ACCOs already employ senior advisors – Aboriginal cultural planning who determine if they need to be part of the care team developing the cultural plan, or if they will provide consultation as required. The senior advisor – Aboriginal cultural planning should be part of the care team if there is no other Aboriginal input into the care team. In addition, each area in divisions have a cultural advisors who support child protection to develop the cultural support plan and provide cultural advice.
- e. Consultation occurs with Aboriginal Child Specialist Advice and Support Service (ACSASS) – ACSASS may have an existing relationship with the child and their family, and/or additional information about the child and their family's Aboriginal heritage, culture and community. ACSASS may choose to be part of the care team, which may enable better engagement and outcomes.
- f. Aboriginal family-led decision making (AFLDM) may assist in developing a cultural plan although not the core purpose of an AFLDM. Each area has AFLDM convenors who also provide cultural advice to child protection.
- g. The KEYS model of residential care includes funding for a cultural support worker in residential care homes. These workers provide support for carers and young people through consultation on all significant decisions and actions concerning Aboriginal children and young people, including input into the cultural plan for an Aboriginal child in care and to assist with its implementation.
- h. The department's compliance and quality audit team undertakes regular performance audits of residential care services. These audits supplement the existing approach to agency monitoring and provide a more active monitoring of actual day to day practice within services. The performance audits are designed to improve practice, as well as compliance with legislative requirements, program requirements and contractual obligations. The audits include checking for evidence to support whether the cultural needs of young people in residential care are being met. Specifically, they look for evidence such as cultural symbols within the house, and if the young people are being engaged with their culture through referrals and attendance and cultural opportunities. The audits also check for compliance with training for staff including cultural training, this would be consistent with the Child Safe Standards requirements.

Recommendation 2 (d)

The Coroner's recommendation has and will continue to be implemented

The department has considered recommendation 2 (d). The implementation of this recommendation is outlined in the department's response to recommendation 17.

Recommendation 2 (e)

The Coroner's recommendation has and continue to be implemented

The department continues to utilise online platforms to promote knowledge of community events to ensure the department maintain a presence at local community events such as NAIDOC, and that First Nations children in Victoria are afforded the opportunity to remain engaged and connected. The continued funding of VACCA's Deadly Story portal and events calendar ensures that local ACCOs are able to promote their

events and young people are able to attend events which suit their age, stage interests in a safe and accessible way.

Recommendation 2 (f)

The Coroner's recommendation will not be implemented

The department has considered recommendation 2 (f) and advise that the recommendation will not be implemented.

The department is cognisant of the eSafety Commissioner's research indicating that Aboriginal children and young people are more vulnerable to exploitation and experiencing racism in the online space. The department will continue to explore ways to enable Aboriginal children and young people to connect with community, in addition to current mechanisms such as linkage to community events (NAIDOC) and local community celebrations.

Recommendation No:3

That ACSASS be sufficiently funded by the Victorian Government to:

- a. enable full compliance with sections 10, 11 and 18 of the CYFA, so that all decision makers at all critical points in time have full and frank access to Aboriginal specialist advice; and*
- b. ensure all service providers who have contact with Aboriginal children have free and reliable access to Aboriginal specialist advice, so that no Aboriginal child is placed in a position where they do not have cultural supports around them.*

Response

The Coroner's recommendation is under consideration.

- The department notes the *Children and Health Legislation Amendment (Statement of Recognition, Aboriginal Self-Determination and Other Matters) Act 2023* (Statement of Recognition) legislates Child Protection responsibility to give consideration to the views and opinions of Aboriginal children, families and Elders across all elements of decision making. This also legislates all elements of the Aboriginal Child Placement Principle as recommended by SNAICC. Victoria is the only state to adopt all elements to date.
- The Statement of Recognition also applies to community service organisations registered to provide Child, Youth and Family Services, as relevant to their role. Consultation by Child Protection with an Aboriginal agency is a legislated requirement outlined in section 12 of the *Children, Youth and Families Act 2005* (the CYFA). It requires Child Protection to consult ACSASS and have regard to the views of members of a child's First Peoples community in making significant decisions.
- ACSASS must be consulted in relation to new reports, protective investigations and other significant decisions and decision-making processes throughout each phase of child protection involvement.
- ACSASS is delivered by the Victorian Aboriginal Child and Community Agency (VACCA) across Victoria, with the exception of the Mallee, Loddon and, soon to be included, Goulburn areas, where local ACCOs provide the service. The department is monitoring the demand for ACSASS and other services offered by ACCOs as the Statement of Recognition is embedded.
- The department does not currently fund Community Service Organisations (CSOs) to directly consult with ACSASS.
- Where case management of an Aboriginal child has been contracted to a CSO, ACSASS will continue to provide consultation to child protection in relation to significant decisions (noting child

<p>protection retains responsibility for case planning decisions for all case contracted children). Where a contracted case-manager, employed by a CSO, wishes to consult with ACSASS on an aspect of the child's safety, wellbeing or care that the CSO has been delegated to provide, this consultation will be facilitated by child protection.</p> <ul style="list-style-type: none"> Recommendation 16 of the <i>Yoorrook for Justice</i> report similarly recommends an expansion of the ACSASS program. The department supports in-principle this recommendation but notes that further assessment work would be required, including to consider staffing, training and infrastructure implications. This will need to be done in partnership with ACCOs and for consideration in future budget cycles.
<p>Recommendation No:4</p> <p><i>That DFFH engage with its stakeholders to review their existing training programs so as to ensure that:</i></p> <p><i>a. all frontline and executive staff employed by agencies that provide child protection, case management and/or residential care services under DFFH's auspices, including but not limited to Anglicare, provide their staff with regular, mandatory cultural awareness and antiracism training covering issues including:</i></p> <p><i>i. the history of colonisation and in particular the impact of 'protection' and assimilation policies;</i></p> <p><i>ii. the continuing systemic racism and paternalism inherent in child protection work today that must be identified, acknowledged and resisted;</i></p> <p><i>iii. the value of First Peoples family and child rearing practice;</i></p> <p><i>iv. upholding human rights including Aboriginal cultural rights; and</i></p> <p><i>v. the strength of First Peoples families and culture and culturally appropriate practices; and</i></p> <p><i>b. such training includes mandatory refresher training; and</i></p> <p><i>c. such training is designed and delivered by a First Peoples business or consultant on a paid basis.</i></p>
<p>Response</p> <p><u>The Coroner's recommendation has been implemented</u></p> <p>The department considers that the intent of this recommendation is already met through existing requirements and programs, as outlined below.</p> <ul style="list-style-type: none"> Residential care workers are required to have completed or be working towards completing minimum qualification requirements. The minimum qualifications requirements policy includes several attribute and competency elements that reflect the importance of cultural connection and creating a culturally safe and welcoming environment. The policy also recognises the importance of promoting and supporting cultural awareness and inclusivity more broadly, by encouraging training providers to assist Aboriginal communities to realise their individual visions and broadening the skills base of the Aboriginal workforce to support self-determination. Further information is available: https://providers.dffh.vic.gov.au/sites/default/files/2019-03/Minimum-qualification-requirements-residential-care-workers-victoria-2019.docx Residential care agencies, like the department, must comply with the Child Safe Standards, which require organisations involving children to have policies, procedures and practices to keep them safe. Understanding cultural safety for Aboriginal children and young people forms part of Child Safe Standard 1, which requires organisations to establish a culturally safe environment in which the diverse and unique identities and experiences of Aboriginal children and young people are respected and valued.

- The department funds the Centre for Excellence in Child and Family Welfare (the centre) to provide a range of professional development opportunities to existing residential care workers. Through the Residential Care Learning and Development Strategy, the Centre provides training specific to care for Aboriginal children and young people which is delivered in conjunction with the Victorian Aboriginal Community Services Association Limited. This includes a specific 'Aboriginal cultural awareness' module. The centre also delivers training on Child Safe Standards, which encompass compliance with standard 1, as outlined above.
- The program requirements for care services include specific components on responding to the needs of Aboriginal children and young people. This includes reference to cultural planning, participation in decision making, embedding principles of self-determination and consultation with the Aboriginal community in decision making processes.

In addition, the Statement of Recognition amended the CYFA on 1 July 2024 to embed the Victorian Government's commitment to Aboriginal self-determination.

The Statement of Recognition (section 7A) is a formal acknowledgement from the Victorian Parliament that past and current child protection laws, policies and practices have contributed to the removal of Aboriginal children from their families, loss of Aboriginal culture, intergenerational trauma, disadvantage and marginalisation. It acknowledges the Victorian Treaty process underway and the aspiration of Aboriginal people to self-determine service design and delivery for Aboriginal children and families.

The purpose of the Statement of Recognition is to:

- Encourage all staff working in the child protection system to reflect on history and current practice.
- Reminds staff of their role to uphold children's human and cultural rights and support Aboriginal self-determination.
- The Statement of Recognition Principles (section 7E) are binding principles that the department, child protection and Community Service Organisation staff must have regard to when making decisions, working with, or planning services for, Aboriginal children and their families.

Service Agreement Requirements were updated ahead of 1 July 2024 to include the department's Statement of Recognition policy. This policy requires funded agencies to meet requirements for community service organisations in the CYFA. There has been engagement with ACCOs, CSOs and department staff in relation to these requirements.

Recommendation No:5

That DFFH:

- review and revise all relevant policies, procedures, guidelines and like documents; and*
- review and revise all relevant training courses and programs to improve its workforce's understanding of the importance of cultural plans and improve the quality, timeliness, implementation and monitoring of cultural plans for Aboriginal and Torres Strait Islander children in out-of-home care. In particular, DFFH should ensure that cultural plans:*
 - are individually tailored;*
 - involve the child or young person and their family in their creation and review;*
 - are updated regularly (at a minimum, annually or when placement or other significant circumstances change);*

- f. provide a plan to (re)establish or maintain cultural connections, such as contact arrangements with family members, plans for Return to Country with Elders and family members from the same mob group as the child or young person;*
- g. include SMART goals with clearly defined accountabilities, either as part of the cultural plan or an actions table supporting the child or young person's case plan; and*
- h. include a legible genogram.*

Response

There are unresolved issues with the Coroner's recommendation that need to be addressed.

The Aboriginal Children's Forum has developed during 2024 a refreshed Wungurilwil Gapgapduir Strategic Action Plan, that is the key agreement for ACCOs, CSOs and the department in the delivery of services for Aboriginal children and young people. Revision of the model for cultural plans to address barriers to quality completion, clarify roles and responsibilities and lift compliance rates is an agreed action with deliverables from January 2025 to September 2025.

The Cultural Plan frame work is currently under review, led by the Statewide Cultural Plan Coordinator funded by the department in VACCA. ACCOs and the department are working through the process of establishing a refreshed Cultural Plan for an Aboriginal child to improve timeliness and quality. This aligns to the Statement of Recognition legislation, acknowledging that Cultural plans are live documents that grow as the child learns more about their culture and mob, which will be enhanced through the remodelling work.

The department will await the outcomes of the ACF auspiced review of cultural planning before making further changes to cultural plan requirements.

Recommendation No:6

That the DFFH, in consultation with the Attorney General, explore the viability and utility of granting the Children's Court supervisory powers over Aboriginal young people's cultural plans.

Response

The Coroner's recommendation is under consideration.

This recommendation replicates Recommendation 22 of the Yoorrook Justice Commission. The Government responded to the Yoorrook Justice Commission in April 2024, advising this recommendation is under consideration. The department, DJCS and DPC will consider this in partnership with ACCOs to enable the intent of this recommendation to be implemented, including consideration of where cultural authority of cultural plans sits.

In addition, alternative means to increase cultural connection and efficacy of the cultural planning model is being developed through the Wungurilwil Gapgapduir refresh strategic action plan that has been endorsed by the Aboriginal Children's Forum.

Progress towards implementation of this recommendation will also be supported through implementation of the Statement of Recognition legislation as well as work within the department to support the prioritisation of transitioning Aboriginal children to Aboriginal care.

Recommendation No:7

That DFFH:

- a. in consultation with the Department of Health and Bendigo Health, develop and implement more focused Social and Emotional Wellbeing approaches to the treatment of Aboriginal and Torres Strait Islander young people requiring mental health diagnosis and treatment, and do so in consultation with Aboriginal*

Community Controlled Organisations such as BDAC, and that appropriate and ongoing training be provided to clinical and Child Protection staff to support these approaches;

b. in consultation with the Department of Health and Bendigo Health, develop and implement systems for the cultural support of Aboriginal and Torres Strait Islander young people admitted to hospital for acute and other mental health episodes, to ensure that Aboriginal health liaison officers are actively made available to the young person at the time of admission and that that cultural connection is available beyond crisis admissions;

c. in consultation with the Department of Health and Bendigo Health, take appropriate steps to ensure that its practice of offering contact with an Aboriginal Health Liaison Officer upon admission is effected on each occasion that a young Aboriginal or Torres Strait Islander person is admitted with mental health issues.

d. develop and implement systems to ensure that young Aboriginal and Torres Strait Islander people with acute and/or chronic mental health conditions are provided prompt and ongoing mental health assessment and treatment, and ensure that this is done in ongoing consultation with appropriate Aboriginal input, such as ACCOs like BDAC, and take all steps open to ensure these ACCOs are appropriately funded to enable that work to occur.

Response

There are unresolved issues with the Coroner's recommendation that need to be addressed.

The department has consulted with Department of Health (DH), and note DH will provide a more comprehensive response. Noting budget implications and alignment to Yoorrook Justice Commission recommendations, the department is committed to working with key stakeholders to ensure the reforms as outlined in DH response to recommendation 7 will be actioned.

Recommendation No:9

That:

a. DFFH, in consultation with the Department of Health, clarify respective roles, fund and ensure facilitation of early, intensive and culturally appropriate mental health intervention for young Aboriginal people in its care presenting with complex mental health problems and allegations of sexual assaults.

b. DFFH continue to fund and develop Aboriginal sexual assault healing services delivered by ACCOs.

c. DFFH implement practices for appropriately urgent action and follow up with the Department of Health, and/or its service providers, to ensure young Aboriginal people in its care presenting with allegations of sexual assault are receiving culturally appropriate mental health intervention.

d. DFFH develop and implement processes for appropriate support for out-of-home carers who are dealing with young people suffering the mental health effects of sexual assault.

e. Bendigo Health consider developing and implementing integrated Aboriginal and Torres Strait Islander worker and lived experience workers within the Bendigo health system itself.

Response

There are unresolved issues with the Coroner's recommendation that need to be addressed.

The department has consulted with DH, and note DH will provide more a comprehensive response. Noting budget implications and alignment to Yoorrook Justice Commission recommendations, the department is committed to working with key stakeholders to ensure the reforms as outlined in DH response to recommendation 9 will be actioned.

Recommendation No:10

That the Department of Health, DFFH and Bendigo Health coordinate culturally appropriate drug and alcohol support for young Aboriginal and Torres Strait Islander people who present with drug/alcohol misuse, including by adequately funding and liaising with appropriate ACCOs such as BDAC and/or suitable family/community supports.

Response

There are unresolved issues with the Coroner's recommendation that need to be addressed.

The department has consulted with DH, and note DH will provide more a comprehensive response . Noting budget implications and alignment to Yoorrook Justice Commission recommendations, the department is committed to working with key stakeholders to ensure the reforms as outlined in DH response to recommendation 10 will be actioned.

Recommendation No:11

That DFFH:

a. in association with its ACCO partners, the Department of Health and Bendigo Health, urgently consider how existing mental health services and new mental health service options could be developed to provide care that is accessible to and culturally appropriate for Aboriginal and Torres Strait Islander young people with complex mental health needs

b. offer funded mental health first aid training for all out-of-home carers, or, at minimum, for out-of-home carers caring for children and young people with mental health concerns, and make such training available in accessible locations in regional Victoria.

Response

Recommendation11(a)

There are unresolved issues with the Coroner's recommendation that need to be addressed.

The department has consulted with DH, and note DH will provide a more comprehensive response . Noting budget implications and alignment to Yoorrook Justice Commission recommendations, the department is committed to working with key stakeholders to ensure the reforms as outlined in DH response to recommendation 11 (a) will be actioned.

In addition, as relevant to recommendation 11 (a), the Loddon area Principal Practitioner held a reflective practice session with the Bendigo Health Child and Adolescent Mental Health Service (CAMHS) Manager and senior Practitioners from Child Protection and CAMHS, reviewing the Coroner's findings and XYs experience of accessing CAMHS. A monthly engagement between Loddon area Child Protection and the Manager and clinical lead for the Bendigo Health CAMHS was established in January 2024. A local area plan is being developed to support first nations young people in care accessing mental health services through Bendigo Health.

The first action is the piloting of a locally developed 'Health Passport' for children in Out of Home Care. The passport is a document for carers, case workers and other professionals to support young people to document their views and wishes when accessing health services. It will outline advice on how the health professional and/or carer may support the young person in anxiety inducing situations such as emergency department presentations or other health care settings. The passport may outline challenging behaviours, anxieties, trauma responses and how best the professional might respond and provide a better care experience and outcomes for that young person.

The passport has been developed in consultation with the Department of Health, Department of Education, Child Protection, the department's Child Protection and Housing workers, Bendigo Health Services,

Bendigo Community Health Services, residential care providers, Bendigo and Districts Aboriginal Cooperative, Loddon primary Health Network and peer led consultations with children and young people in care services. There is a First Nations version of the passport developed in consultation with BDAC. The passport is currently being piloted in residential care homes in Loddon area.

Recommendation 11(b)

The Coroner's recommendation has been implemented.

The department considers that the intent of this recommendation is already met through existing services and policies, as set out below:

- Care Kafe is funded by the department to provide learning and development for foster, kinship and permanent carers. Carer Kafe deliver training based on regular surveys of carers to identify what they need. Training on mental health is offered regularly across a range of aspects including Introduction to Mental Health, Youth Mental Health First Aid, Youth Mental Health and Aboriginal young people and topics such as How to Thrive, Promoting Child Mental Fitness and Fostering Resilience.
- For residential care workers, training is delivered through the Residential Care Learning and Development Strategy. Training includes a Mental Health Toolkit for residential care workers, delivered by Orygen Specialist Program (formerly Youth Health) as well as specific training on issues including Drug and Alcohol and Suicide Prevention. The Toolkit training, which commenced in 2024 replaces the Mental Health First Aid training, previously delivered by Orygen.
- Mental Health training is also available to carers through HEALing Matters, an online training and knowledge exchange platform for care services. This program was co-designed by researchers at Monash University, young people with lived experience and other key stakeholders.

Recommendation No:12

That:

a. DFFH develop measures to improve coordination between stakeholders in the development and implementation of safety plans, with a particular cultural emphasis where safety plans concern Aboriginal and Torres Strait Islander young people; and

b. DFFH and service providers ensure that any 'line of sight monitoring' policies mandate consideration by carers of compelling surrounding circumstances, such as patterns of escalation in suicidality risk, risk of exposure to identified triggers of a self-harm event, and the young person's recent behaviour and affect.

Response

Recommendation 12 (a)

An alternative to the Coroner's recommendation has been implemented.

The department has considered recommendation 12a and advise as follows.

Through the 2023-24 State Budget, the Victorian Government is investing \$548.4 million over four years to improve outcomes for young people in residential care under the Therapeutic Uplift to Residential Care program. From January 2024, 75 per cent of base four-bed residential care targets will receive additional funding for therapeutic supports. The remaining 25 per cent of base four-bed residential care targets will receive the additional funding for therapeutic supports in 2025-26. This enables access to therapeutic supports for all young people in residential care by 2025-26 through dedicated Therapeutic Specialists, whose responsibility it is to develop therapeutic care and safety plans in collaboration with key stakeholders involved with the child. The purpose of the Therapeutic Specialist role is to ensure each young person receives care that meets their individual needs, promotes healing from trauma and supports their wellbeing.

The SAFER children (risk assessment) framework issues a bimonthly newsletter focusing on areas of practice related to risk assessment, with the intent to uplift workforce capacity. The following have gone to the entire child protection workforce:

- August 2023 – SAFER newsletter - Review risk assessment and information sharing
- February 2024 – SAFER newsletter - How does risk assessment inform safety planning and how to record a safety plan on CRIS
- July 2024 – SAFER Resources – Safer and the Statement of Recognition webinar and SAFER and the Statement of Recognition – Advice for each practice activity
- October 2024 – SAFER newsletter: Risk assessment and risk management in the context of neglect, disability and complex medical needs/Children with disability and complex medical needs

In October 2024, a cultural planning dashboard was released on the child protection database CRIS, to allow the cultural planning process to better align with case planning and risk assessment and improves visibility of the cultural planning process. It allows coordination between ACCO senior advisors, Aboriginal cultural support and awareness advisors and child protection practitioners to ensure the most up to date cultural information is visible on the child's file and can inform other planning in care teams.

Recommendation 12 (b)

The Coroner's recommendation has been implemented.

The department considers that the intent of this recommendation is already met through existing services and policies, as set out below:

- The SAFER children framework (SAFER) is the risk assessment approach for Victorian child protection practitioners. [SAFER children framework | Child Protection Manual | CP Manual Victoria](#) SAFER is an evidence informed framework, incorporating factors that have been identified in research as being relevant to risk, and indicators of potential adverse outcomes. SAFER supports child protection practitioners to gather and analyse relevant information about each case, to identify and assess the nature and level of risk, and determine the supports and other interventions required to respond to those risks, including assessment of young people who may be at increased and increasing vulnerability due to factors such as suicide or self-harm. SAFER complements the *best interests case practice model* which is a practice guide for the child and family services sector and includes a specialist practice resource on working with adolescents and their families and guidance on the assessment of suicide and self-harm.

[Best interests case practice summary guide | Child Protection Manual | CP Manual Victoria](#)
[Adolescents and their families | Child Protection Manual | CP Manual Victoria](#)

- When children/young people enter care, a care team is established to manage the day-to-day care and best interests of the child in accordance with the overall case plan to promote the child's safety and wellbeing. These functions ensure continuity of care is provided to the child or young person by the people who are responsible for the child/young person's care. This includes actively contributing to safety and behaviour support planning for young people with high-risk behaviours such as suicide and self-harm behaviours. [Care teams - advice | Child Protection Manual | CP Manual Victoria](#)
- Children, carers and parents have access to Take Two, which provides a therapeutic service to address the mental health impacts on children of the trauma they have experienced from abuse, neglect, family violence or adverse experience.
- The *Victorian Suicide Prevention and Response Strategy 2024-34* was released in September 2024 and responds to recommendation 26 from the Royal Commission into Victoria's Mental Health System. Amongst the Strategy's aims is to strengthen connections into and between social service

systems including child protection and care services. Implementation will be led by the Department of Health. The Strategy can be viewed online through the Department of Health website: <https://www.health.vic.gov.au/prevention-and-promotion/suicide-prevention-in-victoria>

- In addition, a working group has been established between the Department of Health and the department to consider opportunities to improve mental health outcomes for young people known to child protection, based on the findings of a Commission for Children and Young People Group Child Death Inquiry. The working group is co-led by the Office of Professional Practice and the Chief Psychiatrists Office.
- There is existing practice guide on behaviour planning to support children and young people in care which includes consideration their Looking After Children Care and Placement Plan and Cultural Support Plan and any necessary training required for carers, which the department and service provider must keep updated to reflect the roles and responsibilities of the care team, including their role in any actioning of safety plans. Any monitoring of a young person exhibiting behaviours of concern would form part of the behaviour support plan. Practice guide - behaviour planning to best support children and young people in out-of-home care (Word)

The department also refers to its response to recommendation 11b, which sets out current training for carers and residential care workers in relation to mental health.

The department notes that it does not have a policy on "line of sight monitoring".

Recommendation No:13

That DFFH ensure that kinship carers:

- have access to training, support, and services that are appropriate to their circumstances;*
- are aware of and receive assistance accessing financial supports; and*
- are aware of the existence of the Care Support Help desk and how to access it.*

Response

The Coroner's recommendation has been implemented.

The department considers that the intent of this recommendation is already met through existing services and policies, as set out below:

- New kinship care placements have access to the First Supports program, delivered by Community Service Organisations and ACCOs. First Supports includes the provision of up to 110 hours of family services support and flexible brokerage to purchase items or services to maintain and promote the stability of the placement. It also includes the completion of a comprehensive assessment of support requirements, where the placement is likely to last three months or longer.
- All statutory kinship carers have access to free learning and development programs through Carer Kafe. Training programs are delivered both online and in-person on topics including caring for Aboriginal and Torres Strait Islander children, youth mental health first aid, nutrition for wellbeing and understanding adolescence. Online resources, including podcasts, are also available through the Carer Kafe website: <https://carerkafe.org.au/>
- Kinship carers have access to a range of financial supports to assist with meeting the costs of providing care. This includes the care allowance, a fortnightly payment that contributes towards the day-to-day costs of care. Care allowance payment levels vary based on the age of the child or young person and an assessment of their needs, with higher payments available to those children and young people who require additional support. Client support funding is also available to provide additional financial assistance, to meet extraordinary expenses that exceed the day-to-day costs of

<p>providing care or would place an unreasonable financial burden on the carer. Further information on financial supports for home-based carers is available through the department's website: https://services.dffh.vic.gov.au/support-carers</p> <ul style="list-style-type: none"> • The Care Support Help Desk provides a range of supports to children and young people entering care, as well as their carers. This includes applying for vital documents, including Medicare cards and birth certificates, recording and updating health records (e.g. vaccination history), and assisting carers to obtain Commonwealth financial supports, such as child care subsidies. • Information about available financial and practical supports are provided to kinship carers at the time of placement establishment. This includes information about the support available via the Care Support Help Desk. The Help Desk will also pro-actively contact carers to provide support where it is identified that a child or young person entering care does not have a birth certificate or Medicare card. Information about the Help Desk, including operating hours and contact details, is also available through the department's website and via carer peak bodies, including Kinship Carers Victoria.
<p>Recommendation No:14</p>
<p><i>That:</i></p> <p><i>a. the KEYS or like model of residential care services continue to be rolled out in regional Victoria and that such services for young Aboriginal and Torres Strait Islander people be developed in consultation with ACCOs such as BDAC;</i></p> <p><i>b. ACCOs be prioritised as the preferred organisation to deliver residential care in the tender process for allocating funding, with quality of care and best practice outcomes given a higher priority than economic rationalisation in the tender process.</i></p>
<p>Response</p> <p><u>Recommendation 14 (a)</u></p> <p><u>The Coroner's recommendation has been implemented.</u></p> <p>The department accepts the principle of this recommendation, noting that expansion of Keep Embracing Your Success (KEYS) and other therapeutic residential care models are matters for Victorian Government consideration, as they would require additional investment to deliver.</p> <p>The Victorian Government has invested in new models of residential care, to deliver improved outcomes and enhanced supports for children and young people, including Aboriginal children and young people. In addition to KEYS, this includes 25 new two or three bed therapeutic homes, which provide more focused care and support for young people with higher needs. Three of these new homes are being delivered by ACCOs.</p> <p>The Victorian Government has also invested to ensure all children in residential care have access to a base level of therapeutic support in across all models. Since January 2024, approximately 85 per cent of all residential care placements have access to therapeutic supports for young people living in the home. Remaining homes will have access to therapeutic supports from July 2025.</p> <p>In August 2024, funding was provided through the Innovation and Learning Fund to VACCA and the Victorian Aboriginal Children and Young People's Alliance to scope an Aboriginal residential care model.</p> <p>Work builds on learning from current delivery of residential care through ACCOs, including 2 and 3-bed therapeutic care and the KEYS residential care model.</p>

Recommendation 14 (b)

The department considers the intent of this recommendation is already met.

As noted in response to recommendation 14(a), new or expanded models of residential care would require additional investment, which is a matter for the Victorian Government to consider. Should new or expanded care models be procured, the department will do so in line with relevant statutory and policy requirements. This includes the Victorian Government's and Department's ongoing commitment to self-determination, as reflected in commitments made under the *Wungurilwil Gapgapduir Aboriginal Children and Families Agreement* to resource and support Aboriginal organisations to care for their children, families and communities, and to address historical funding inequities.

The department notes that this commitment has been demonstrated through recent procurement of the following programs, where ACCOs received a proportional allocation of funding to deliver services supporting Aboriginal children and young people:

- Education support for children in care (which will deliver one-on-one tutoring support for children and young people disengaged from education) and
- Housing First (which will deliver dedicated housing and wrap-around supports for young people leaving care who would otherwise be at risk of homelessness).

Recommendation No:15

That DFFH extend AFLDM referral powers to organisations providing contracted case management services to DFFH and to ACCOs exercising delegated powers pursuant to section 18 of the CYFA.

Response

The Coroner's recommendation is under consideration.

AFLDM is a case planning activity involving the family, department and ACCO co-convenor. Contracted services can use similar family case conferencing mechanisms to work with families, noting they do not hold case planning responsibilities. ACCOs delivering section 18 services are using AFLDM as part of their suite of services to families.

Recommendation 16 of the *Yoorrook for Justice* report similarly recommends an expansion of the AFLDM program.

The department supports in-principle this recommendation but notes that further assessment work would be required, including to consider staffing, training and infrastructure implications. This will need to be done in partnership with ACCOs and for consideration in future budget cycles.

The Aboriginal Children's Forum (ACF) ACCO caucus has also proposed to develop a new family meeting model. The outputs of this work would also inform next steps for progressing this recommendation.

Recommendation No:16

Noting the Yoorrook Justice Commission's recommendation that the Victorian Government 'transfer decision making power, authority, control and resources to First Peoples, giving full effect to self-determination in the Victorian child protection system', I recommend that DFFH significantly upscale the capability, competence and support of all persons working within the child protection system to ensure that they are able to:

- a. comply with sections 10, 11, 12, 13 and 14 of the Children, Youth and Families Act 2005;

b. adopt a relational approach to child protection work which prioritises the practitioner's ability to relate to the child and their families over compliance-driven measures; and

c. engage in effective case management and case planning, including long-term planning and transition planning.

In particular for this purpose, DFFH should:

d. review and revise all relevant policies, procedures, guidelines and like documents;

e. review and revise all relevant training courses and programs; and

f. ensure, to the greatest extent possible, that it has appropriate staffing levels and is able to retain experienced child protection practitioners.

Response

The Coroners recommendation has and will continue to be implemented

The department has considered recommendation 16 and as outlined in response to recommendation 3, the SOR legislates Child Protection responsibilities to seeking the views and opinions of Aboriginal children, families and Elders across all elements of decision making. The department has implemented the following as related to recommendation 16.

Recommendation 16 (a- c inclusive of d and e)

Since 2023, the department has reviewed its mandatory induction program for new child protection practitioners, and from May 2024 is delivering the new Practice Induction Program (PIP). PIP has been developed with Aboriginal self-determination and cultural safety throughout the whole program, including through dedicated subjects in the program that focus on legislation responsibilities of s10 – 14 of the Children Youth and Families Act 2005. The program includes a session led by an Aboriginal Practice Adviser and representatives from ACCOs to discuss how practitioners should adopt a relational approach when working with Aboriginal children and their families, and support connection to Aboriginal services.

Since 2023, the department has addressed this recommendation via:

- (a) webinar (in the series of Statement of Recognition) by Director of CPLO speaking to the legislative requirements for practitioners to consider the referenced sections in the course of their work with Aboriginal children and families.
- (b) relational practice is a consistent theme through the revised PIP content, utilising and relying on core values of respect, compassion and inclusiveness in the work that is done by child protection practitioners, and underpinned by relevant framework such as the Human Rights Charter, UN Declaration on Rights of Indigenous People and the distinct rights of Children as detailed in the Convention on the rights of the child.
- (c) PIP modules related to case planning and working with professional care teams were reviewed in the refresh of the induction program to enhance the practice capability for practitioners to ensure planning is informed by risk assessment, including the importance of regular reviews of goals and actions throughout.

In June 2024, the department developed and delivered a five-part webinar series for child protection practitioners to discuss and demonstrate how to embed Aboriginal self-determination in practice, with reference to the Statement of Recognition in the CYFA, that came into effect on 1 July 2024. There were updates to 28 pages of the Child Protection Manual to strengthen advice in complying with s.13 and s.14 with the CYFA. A complete list of the manual updates is attached.

Further to this, the department is currently working with an Aboriginal agency to develop and deliver training to child protection on Aboriginal practice elements to strengthen culturally safe practice with

Aboriginal children and families and is procuring a First People's organisation to review all child protection training programs to enhance the capability of practitioners to uphold cultural rights of Aboriginal children and families

Recommendation 16 (f)

The refreshed Child Protection Operating Model aims to support improved staff supervision, case allocation, and retention of staff and robust case planning and risk assessment.

The department supports the child protection workforce through extensive professional development and tailored wellbeing services. In 2023-24, the department delivered:

- a new 5-week PIP to set up new practitioners with a stronger start to their child protection careers
- 2 new child protection career advancement programs for CPP3 and CPP4 staff that supported 90 practitioners to develop their skills and progress to the next level
- an enhanced statewide child protection mentoring program that enables 120 senior staff to support the development of less experienced staff
- a Child Protection Mental Health and Wellbeing Plan 2024-25 to promote wellbeing services to child protection staff and support activities to build safe workplace culture

New benefits were negotiated under the Victorian Public Service Enterprise Agreement 2024 to support the retention of the child protection workforce included:

- Retention allowance of \$15,000 paid over 3 years for eligible CPP3 – CPP6 child protection practitioners that substantively work and primarily live in the following regional locations: Outer Gippsland, Inner Gippsland, Mallee, Wimmera South West, Ovens Murray, and Goulburn.
- Annual clothing allowance of \$650 (pro-rata for part time employees).
- Provision of an additional 38 hours leave (pro-rata) for CPP2 staff s at the end of each calendar year to bring them into line with other CPP classifications.
- Provision of 38 hours of professional development leave (pro-rata per calendar year) for CPP2's to bring them in line with other CPP classifications.
- Payment of overtime to CPP6 employees at the appropriate rate, for up-to 4 hours per week.

Recommendation No:17

That DFFH review and revise its relevant training courses and programs with a focus on improving Child Protection Practitioners' skills in engaging with children and young people, so as to hear, acknowledge, understand and give weight to a child's experience and expressed views in their subsequent decisions and actions

Response

The Coroners recommendation has and continue to be implemented

The department has considered recommendation 17 and has implemented the relevant training resources and programs outlined below.

In July 2024, the department's Office of Professional Practice released resources to support practitioners apply the Aboriginal Child Placement Principles. This included support for practitioners in capturing the child's voice and engaging families in decision-making processes. The *Aboriginal Child Placement Principle Practice Guide* and reflection tool provides advice on building relationships with Aboriginal families, the use

My Views and VACCA's *Voice of the Child* with Aboriginal children and young people, how to represent a child's voice at care team meetings and how to make meetings with Aboriginal families more culturally safe.

The child protection Induction Program PIP includes content on engagement/working with children and gathering and incorporating children's views throughout the program, including:

- Week 1 - when we outline the frameworks that enshrine the rights of children.
- Week 2 - in content related to risk assessment and case management and court practice.
- Week 3 - where we teach engagement, and there is a presentation from the Client Safety Principal Practice Advisor, as well as care services content, and a presentation from CREATE foundation lead by young people with a care experience.
- Week 4 - in a reflective practice session focussed on working with children and families impacted by family violence and sexual harm.
- Week 5 - in content related to case practice and case planning, understanding court processes and practice and court report writing.

The department's Child Protection Learning Hub is an online learning portal that provides child protection practitioners with resources to develop their practice. The Hub includes a library of recorded webinars regarding engagement and working with children, young people and their families, that is regularly promoted to the child protection workforce and discussed via online Practice forums. Those relating to engagement include:

- Listening to Children & Young People's Voices
- Child's Voice – Practice Resources for engaging children and young people
- Engaging Children through play
- Engaging children and young people for risk assessment
- Engaging young people who engage in high-risk behaviours