

LEGISLATIVE ASSEMBLY OF THE NORTHERN TERRITORY**WRITTEN QUESTION**

Ms J Carney

to Minister for Family and Community Services

Child Protection

Minister on 26 March this year the *NT News* featured an article about a man who was found guilty of sexual intercourse with the 10 year old girl who was 'under the care of the Territory's Family and Community Services':

1. Minister what went wrong?
2. What is being done to prevent this recurring?

ANSWER

1. I am not prepared to provide any further detail about this child's circumstances, as there has been enough media attention, debate and politicisation.
2. Family and Children's Services (FACS) has taken a number of positive steps to establish a comprehensive 'Specialist Care' Program for the Northern Territory, which has included the establishment of a 'Residential Care' Program for the subject child. This work is also complemented by strategic development within the mainstream foster care system, including compliance with the National Foster Care Plan (2004 – 2006).

The salient features concerning 'Specialist Care' developments are outlined below:

Residential Care Program

FACS has developed a model of service delivery for the residential program. This aim is a model that will provide the care and treatment options necessary for severely traumatised children. This has been based on thorough analysis of international and interstate initiatives and research, and complemented by FACS engaging the consultancy services of a leading expert in Australia, Dr Howard Bath, Director of the Thomas Wright Institute in Canberra. Dr Bath has provided a number of training sessions to FACS and Anglicare staff. Sessions to date have focussed on a particular treatment intervention, known as 'Therapeutic Crisis Intervention'.

FACS has also made the decision to commence management of the residential care placement as of 1 November 2005, in acknowledgment of the high risks associated with any non government provider providing such services. Similar programs are most commonly run by Government's interstate and this move will enable FACS to properly monitor and establish a recurrent budget for the program. This move to Government provision has been achieved in collaboration with Anglicare NT and the care management team that monitors the subject child's case. FACS and Anglicare NT have also agreed to work collaboratively in relation to the necessary 'transitional arrangements'.

The above will be achieved by establishing a 'Transitional Care' Program (see details below) also to be run by FACS. To achieve this, FACS is currently in the process of recruiting to a number of carer and staff positions. This includes primary and respite carers, professional staff and youth worker positions.

FACS has been successful in securing the services of a residential care expert from Western Australia for a six month period to act as the Specialist Care Coordinator.

Transitional Care Program

This program will focus on the cohort of young people in care who have either experienced high levels of placement instability in the mainstream system and/or are assessed as requiring extra services and inputs that cannot be secured in mainstream care. The program will cater for young people ten years to 17 years and in the first instance ten placements will be arranged across the Northern Territory. The program will provide medium to long-term placements (ie. six-months to two years) and will have a particular focus on treatment and therapeutic interventions for young people, similar to the proposed model of service delivery for the residential program.

FACS will commence delivery of both programs on 1 November 2005, viewing it as one of the key reforms of the Child Protection Reform Agenda and has set an initial budget of \$1.5M.

Emergency and Stabilisation Units

In conjunction with the above, FACS is also working with an non government organisation to re-configure the existing services available at congregate care facilities both in Darwin and Alice Springs. These units will operate from two existing properties in Darwin and one in Alice Springs.

The focus of the units will be to provide emergency/reception care for young people (most commonly ten years to 16 years) and stabilisation care and associated services for those young people for three to six months. This service will be based on treatment interventions, behaviour management and life skill development to either stabilise young people so they can either return home or be placed in mainstream family based care, or in some cases transitioned into other specialist care options.

It is anticipated that the program will be established and implemented by the end of the year.

The specialist care developments as outlined above equate to a financial contribution by FACS of approximately \$3M.