LEGISLATIVE ASSEMBLY OF THE NORTHERN TERRITORY

No. 263

WRITTEN QUESTION

J Davis to the Minister for Child Protection, Hon Robyn Cahill OAM MLA:

Children in Care: Safety and Reunification

1. How many children experienced abuse while in care in 2025–26?

In 2025-26, 26 unique children in care had 28 section 84A (s84A) substantiated investigations of abuse in care. This figure is drawn from s84A investigation records in CARE.

a. How is the Department working to reduce this?

Of the 26 children in care who were the subject of a substantiated abuse-in-care investigation in 2025-26, 10 were the subject of at least one substantiation where the person responsible was a member of the household providing their out-of-home care (OOHC).

A key priority for the Department of Children and Families (DCF) is OOHC reform, which includes focus areas aimed at reducing the number of children in care experiencing abuse. This includes increasing support for family and foster carers to enable more long-term, sustainable care for children with increasingly complex needs, and seeking specialist care for children with high needs so they receive the level of trauma-informed care they require.

DCF also continues to partner with Foster and Kinship Care NT (FKCANT) to recruit, assess and support carers who meet the standards required to provide high-quality care to children.

DCF's Intensive Therapeutic Residential Care (ITRC) has been re-commissioned. Under the new contract, there is increased accountability for the level and standard of care and therapeutic responses required. These measures contribute to addressing patterns and themes identified through abuse-in-care investigations.

b. If the Department does not record a category of abuse occurring while a child is in care, please provide the number of substantiated notifications in 2025–26 in which the child was in the care of the Chief Executive Officer at the time of the incident, and state the record type from which that figure is drawn.

DCF records whether substantiated abuse occurred while a child was in care.

The 26 children referred to in response to Question 1 were the subject of 28 substantiations of abuse in care. Of the 26 children, 10 were the subject of a substantiation where the person responsible was a member of the household providing their OOHC.

Table 1: s84A substantiated investigations of abuse in care by primary type of abuse – 2025-26

Primary type of abuse	s84A substantiated investigation
Physical	12
Sexual	3
Emotional	7
Neglect	6
Total	**28**

Note: These figures are drawn from substantiated Child Protection Investigation (CPI) records in DCF's client information system, CARE, as compiled for the NT's 2025-26 submission to the Child Protection National Minimum Data Set (File 8: Safety in care). This national scope includes children on third-party parental responsibility orders, who are not in the care of the Chief Executive Officer.

2. How does the Department monitor how many families are failing to meet child protection requirements because of circumstances beyond their control — in general, and specifically:

a. through homelessness; and

b. through being on the public housing waiting list?

Data requested for Questions 2, 2.a. and 2.b. is not recorded or monitored by DCF.

c. If the Department does not monitor that, what record would show a family unable to meet a requirement for reasons beyond its control, and where is it held?

This data is not recorded by DCF. The administrative effort required to respond would be excessive and result in undue diversion of resources from service delivery.

3. How many families involved with the Department were awaiting access to other essential services, specifically:

a. rehabilitation;

b. disability;

c. mental health; and

d. other support services?

Data requested for Questions 3.a.to 3.d. is not recorded by DCF.

e. **If waiting for another service is not recorded against a family's child protection record, please state which agency holds each record, whether the two can be linked, and what would be required to link them.**

DCF is unable to advise what data is recorded by another government agency and the administrative effort required to respond would be excessive and result in undue diversion of resources from service delivery.

4. **What guidance is provided to staff on distinguishing child safety concerns from issues arising primarily from poverty, housing stress, disability or remoteness?**

DCF staff are provided guidance through application of legislation, policy, procedures and the Signs of Safety Practice Framework, and through supervision, consultation and internal practice training.

These supports assist staff in distinguishing child safety concerns from complicating factors that may increase vulnerability or complexity by requiring assessment of the child's lived experience and evidence of actual or likely harm.

Most recently, DCF frontline staff participated in face-to-face CPI refresher training, which included distinguishing between complicating factors, such as poverty, housing stress, disability and remoteness, and child protection concerns.

5. **What service gaps were identified in remote communities in 2025–26, and what action was taken to address them?**

DCF does not hold a central record of identified service gaps in remote communities and the amount of administrative effort required to respond to this question would be excessive and result in undue diversion of resources from service delivery.

Service gaps are regional specific and addressed via a range of mechanisms including Regional Co-ordination Groups, Community Well-being and Support Partnerships (CWASP) and Community led meetings.

a. **Please list by community, with the action taken.**

Please refer to the response to Question 5.a.

6. **What supports were available to families where housing stress, financial hardship or service access challenges affected child wellbeing?**

Families experiencing housing stress, financial hardship or barriers to accessing services can be referred to a range of supports, including Family Support Services, Strengthening Families, Family and Youth Support programs, and housing and homelessness services. These services provide practical assistance, case management and connections to health, education, financial and community supports.

Where families have multiple or complex needs, referrals may be coordinated through the CWASP framework, which brings together government and non-government organisations to develop a coordinated support plan focused on improving child safety and wellbeing.

7. What guidance, training materials or operational instructions are in place for caseworkers regarding placement decisions involving Aboriginal children?

DCF Child Protection Practitioners are guided by the *Care and Protection of Children Act 2007*, DCF policies, procedures, practice guidance and training.

These resources require staff to consider family and kinship options, stability, permanency and safety of the child when making placement decisions, and to consider an Aboriginal child's connection to family, community, culture, country and language.

Child Protection Practitioners have also recently participated in an NT-wide live Family Finding webinar to strengthen practice in identifying and engaging family and kinship networks for children.

8. How does the Department assess the consistency of its child protection policies and practices with Closing the Gap commitments on shared decision-making and Aboriginal participation?

DCF ensures consistency with Closing the Gap commitments through governance and policy processes that incorporate Aboriginal participation and shared decision-making.

This includes engagement through the Justice and Children and Families Policy Partnership, implementation of Safe and Supported reforms, the Children and Families Tripartite Forum, NTRAI working groups, the NT Executive Council on Aboriginal Affairs (NTECAA) and ongoing collaboration with ACCOs and sector partners.

DCF also has multiple internal working groups focusing on legislative reform, Aboriginal Cultural Leadership, sector strengthening, grant reviews and a dedicated team focusing on Transforming Aboriginal Outcomes. These mechanisms support Aboriginal input into policy development, system reform and service delivery, and contribute to progress towards Closing the Gap Target 12.

a. How many partnerships are strategic, and how many are decision-making?

The amount of administrative effort required to respond to this question would be excessive and result in undue diversion of resources from service delivery.

It is noted however that all partnerships would be considered to support Aboriginal input into both strategic and decision-making processes.

b. Where a figure for an individual region, service or category is too small to report, please provide the Territory-wide total.

Please refer to the response to Question 8.a.

9. How many children were reunified with their families in 2025–26?

In 2025-26, 45 children exited care following reunification with family. Further detail is provided in response to Question 12(b).

10. What are the most common barriers to successful reunification the Department has identified?

Successful reunification can be influenced by a range of factors, including the complexity of family circumstances, service availability, engagement with supports and the capacity of services to provide timely intervention.

11. What work was undertaken to address service access barriers that may affect reunification outcomes?

Addressing barriers in specific situations is part of the work undertaken with families and providers as part of case management. The amount of administrative effort required to respond to this question would be excessive and result in undue diversion of resources from service delivery

12. Budget Paper No. 3 for 2026–27 reports children entering out of home care at 159 for 2025–26 against a target of no more than 150, attributing the variation to "children entering care on provisional and temporary protection orders", and reports children exiting out of home care at 190 against a target of at least 180. Both targets are unchanged for 2026–27.

a. How many children entered care on a provisional or temporary protection order in each of the three years to 2025-26, and how many of those orders were subsequently confirmed, revoked or allowed to lapse?

In 2023-24, 138 children entered care under a Provisional (PPO) or Temporary Protection Order (TPO), followed by 137 in 2024-25 and 90 in 2025-26.

Information on whether these orders were subsequently confirmed, revoked or allowed to lapse is not historically reported. Children may be subject to multiple legal orders and changes in legal status over time depending on their individual circumstances, and the subsequent outcome of an initial PPO or TPO is not separately tracked at this time as a reportable measure.

The tables below provide a breakdown of the number of children on a PPO or TPO by legal status and financial year.

Table 2: Children on a PPO or TPO, by legal status and financial year

Legal Status	2023-24	2024-25	2025-26
Provisional Protection	31	41	33
Short Term Protection Order (O-SPR)	75	65	32
Temporary Protection Order (O-TPO)	28	30	24
Temporary Protection Order Extended (O-ETPO)	4	1	1
Total	**138**	**137**	**90**

b. Of the 190 children who exited care in 2025-26, how many exited to reunification with family, how many to permanent care orders, how many aged out, and how many exited to another arrangement?

The table below provides this data.

Table 3: Children exiting OOHC by reason for exit - 2025-26

Reason for exit	Number of children
Reunification goals achieved/commenced post-reunification support	45
Permanent care order granted	8
Commenced after care support	28
Authority expired	79
Child in other care arrangements	12
Departmental decision	6
Transfer of guardianship to a third party	4
Child living independently	2
Revocation of authority	1
Other	8
Total	**193***

**The 190 children reported as exiting care in 2025-26 was the financial year estimate; the final post-year calculation was 193 children.*

c. How many children who exited care in each of the three years to 2025–26 re-entered care within twelve months?

Data for 2025-26 exits from care is not yet available, as a full 12-month observation period following 30 June 2026 is required to measure re-entry to care.

While the observation period for 2024-25 exits from care has recently concluded, these results have not ready to be published and are expected to be reported in the 2027 Report on Government Services (RoGS).

The most recent data regarding exits from care was published in the 2026 RoGS for the 2023-24 period, reporting that 29 of 30 children aged 0-16 years who exited OOHC to a permanency arrangement in the NT during 2023-24 (97%) did not return to OOHC within 12 months. Accordingly, one child (3%) returned to care within 12 months.

d. Where a figure in any category is too small to report, please provide the Territory-wide total.

The figures provided above are Territory-wide totals.