Transitioning from out-of-home care to Independence: A Nationally Consistent Approach to Planning

A Priority under the National Framework for Protecting Australia’s Children

October 2011
Introduction

One of the biggest challenges for all young people is to develop the skills and means to achieve and maintain independent living. For young people leaving out-of-home care, emotional support and practical assistance throughout the transition process are essential to help them develop the necessary skills for reaching their full potential. Young people, carers, families and significant others, service providers, communities and governments all have a role to play.

A nationally consistent approach to planning, supporting an effective transition from out-of-home care to independence, is a specific action to support the implementation of the National Framework for Protecting Australia’s Children 2009-2020. The National Framework, endorsed by the Council of Australian Governments (COAG) in April 2009, provides an agenda for developing consistent, shared and long-term goals and responsibilities across governments and engages the non-government sector and the broader community at a national level.

Transitioning to independence is a key priority under the National Framework. The Australian Government, state and territory governments and non-government organisations, through the Coalition of Organisations Committed to the Safety and Well-being of Australia’s Children, have worked together to deliver a nationally consistent approach to planning informed by evidence supporting ‘best practice’.

This approach is an important step towards ensuring that young people who are transitioning from out-of-home care to independence are provided with consistent planning, no matter where they live.
How many young people leave out-of-home care in Australia each year?

In 2009-10, the AIHW reported that 2,695 young people aged 15–17 years were discharged from out-of-home care in Australia1.

At 30 June 2010, there were 35,895 children and young people in out-of-home care in Australia. 46.1% of children and young people in out-of-home care in Australia were in foster care, 45.5% were in relative or kinship care and 2.1% were in other home based care. 5.1% were in residential care. A very small proportion was living independently.

Aboriginal and Torres Strait Islander children are over-represented in all of these areas of the child protection system with the number of Indigenous children on care and protection orders nine times the rate of non Indigenous children.

Contextual Framework

As a signatory to the United Nations Convention on the Rights of the Child2, Australia has a responsibility to protect children and young people, provide the services necessary for them to develop and achieve positive outcomes and enable them to participate in the wider community. The National Framework for Protecting Australia’s Children is underpinned by a number of principles that align with Australia’s obligations as a signatory to the UN Convention:

> All children have a right to grow up in an environment free from neglect and abuse. Their best interests are paramount in all decisions affecting them.
> Children and their families have a right to participate in decisions affecting them.
> Improving the safety and wellbeing of children is a national priority.
> The safety and wellbeing of children is primarily the responsibility of their families, who should be supported by their communities and governments.
> Australian society values, supports and works in partnership with parents, families and others in fulfilling their caring responsibilities for children.
> Children’s rights are upheld by systems and institutions.
> Policies and interventions are evidence based.

Increasing support for young people transitioning from care to better establish their independence is a priority in the first three year action plan of the National Framework, 2009-2012. Community and Disability Services Ministers supported the development of a nationally consistent approach to planning as a key action under this priority.

A nationally consistent approach to planning has been developed to align with the National Standards for out-of-home care. While each of the Standards is relevant to the care provided to the child or young person while in care and therefore have relevance to those preparing to leave care, there are a number of standards that have relevance to a nationally consistent approach to planning. In particular, Standard 13 requires each young person to have a transition from care plan commencing at the age of 15 years that includes details of support to access relevant services and is reviewed regularly. A transition from care plan is to cover required supports, based on individual needs, in areas such as:

> housing
> education and training
> employment
> financial security
> social relationships and support networks
> health – physical, emotional (including self esteem and identity), mental and sexual
> life (and after care) skills

2  The United Nations Convention on the Rights of the Child establishes a specific international regime for the protection and promotion of the rights of children and young people. It is the most widely ratified international human rights instrument. Australia signed the Convention on 22 August 1990 and ratified it on 17 December 1990. As a signatory to the United Nations Convention on the Rights of the Child, Australia has a responsibility to protect children, provide the services necessary for them to develop and achieve positive outcomes, and enable them to participate in the wider community.
Consistent with the evidence supporting the National Standards for out-of-home care, the nationally consistent approach to planning recognises that better outcomes occur for those young people who are healthy, safe and secure, have strong cultural, spiritual and community ties, have a positive sense of identity, participate in learning and achieving, and have positive family and other relationships.

This approach realises the commitment from all parties to work together better in areas of shared responsibility. While children and young people in care remain the responsibility of state and territory governments, a nationally consistent approach to planning provides a framework to better link the many supports and services all governments and non-government organisations provide, coordinate planning and implementation, share information and innovation more effectively and support new efforts that build on and link with existing initiatives.

The contextual framework of a nationally consistent approach is summarised in Figure 1.


Figure 1 – contextual framework: Transitioning from out-of-home care to Independence: A Nationally Consistent Approach to Planning
The transition from out-of-home care to independence

Evidence shows that optimal outcomes for young people transitioning from out-of-home care to independence are more likely to be achieved when the process is a gradual and well supported one, based on strong preparation and planning, with access to tailored support to consolidate living skills and promote independence, and support after leaving care to foster resilience and stability. Maunders, Liddell, Liddell and Green (1999) in a report to the National Youth Affairs Research Scheme (NYARS) recommended that: ‘effective models of support must take account of the need to provide a continuum of care for children so that they can make a graduated transition from care to increasing independence as they mature and grow.’ The CREATE Foundation report ‘What’s the Answer?’ (2010) supports a gradual transition from care and recommends considerations to be made in each phase.

In this context, the transition from out-of-home care to independence may be represented as a process involving three overlapping phases (Maunders et al (1999)) occurring along a continuum, commencing no later than age 15 years and continuing up to age 25 where the young person needs and/or desires ongoing assistance. This depiction recognises that some young people will require planning to start earlier so as to address specific needs. The process is flexible and recognises the role all parts of the system have to play in supporting the young person; an emerging adult on the path to independence. The concept of phases guides the focus of this support.

Transition from out-of-home care to independence

Transitioning from care to independence and the concept of best practice

According to Mendes (2011), best practice planning aims to promote effective transitions for young people that lead to positive community engagement in areas such as housing, education and employment, health and social and family relationships and networks.

It is an ongoing and dynamic process based on the levels of maturity and skill development of young people, rather than simply their age. It is supported by flexible plans, monitoring of progress, and regular review to update planning in response to individual needs and changing circumstances.

It recognises the role relevant parties have to play in supporting the young person to transition from out-of-home care to independence – the young person; carers; workers; family of origin and significant others in the local community network; non-government organisations; state and territory governments; and the Commonwealth Government through universal and targeted services and income support.

Across Australia, there are many examples of practice that align with this nationally consistent approach to planning for young people transitioning from out-of-home care to independence and that demonstrate elements of good practice aimed at achieving improved outcomes for young people with a care experience. This approach provides an opportunity to share elements of good practice nationally.

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3 David Maunders, Max Liddell, Margaret Liddell and Sue Green (1999) Young People Leaving Care and Protection: A report to the National Youth Affairs Research Scheme, Australian Clearinghouse for Youth Studies, Hobart, Tas
4 CREATE Foundation (2010) What’s the Answer?
Why develop a nationally consistent approach to planning?

Each state and territory government has its own legislative and policy framework to support young people transitioning from out-of-home care to independence. All jurisdictions are investing to improve the effectiveness of the transition for these young people and provide opportunities for them to reach their potential. While there are common elements in the approaches to transition planning, there are also differences.

Increased consistency across jurisdictions will deliver equity in the planning process for young people, regardless of their location. The nationally consistent approach to planning guides practice through a focus on those elements that are essential during the transition process, ensuring they are considered for each young person and addressed where appropriate. Tailoring transition planning to meet the needs of the individual continues to be essential.

A nationally consistent approach to planning provides a framework to drive improvements in the effectiveness of the transition to independence for young people in out-of-home care, wherever they live in Australia. Through improved consistency across jurisdictions and information sharing about what works for these young people, the approach aims to maximise the potential for their social and economic participation into the future.

Including the voices of young people with a care experience

Young people with a care experience see the transition process as central to the quality of the overall out-of-home care experience. They also view their participation in the planning processes as critical to the effectiveness of their transition from care planning. In recent consultations at both the Commonwealth and state and territory levels, young people have emphasised the importance of adequate preparation and planning for transition to empower them to make informed decisions and facilitate access to appropriate supports, including post-care supports. In the CREATE Foundation report What’s the Answer? young people with a care experience have expressed their views about what works, what can be done better and what should change. Their contribution has provided valuable input into the development of this approach to planning.

Aboriginal and Torres Strait Islander young people

Aboriginal and Torres Strait Islander children are over-represented in all areas of the child protection system. Achieving better outcomes for these young people transitioning from care to independence requires a specific focus including careful consideration in establishing support systems. Family, community and cultural connections are vital for the social, emotional and spiritual wellbeing and development of Aboriginal and Torres Strait Islander young people.

The cultural sensitivity of child protection workers during what can be an intense, emotional and difficult process is important in ensuring a smooth transition for Aboriginal and Torres Strait Islander young people. There is a range of publications available that discuss cultural care for Aboriginal and Torres Strait Islander children. There are also examples of specialised services and supports available for those working with Aboriginal and Torres Strait Islander young people. Elements of good practice underpinning these services and supports that promote positive experiences for the individual young person, are reflected in this approach.
What does the nationally consistent approach to planning cover?

A nationally consistent approach to planning covers the core elements to be considered for each young person making the transition from out-of-home care to independence.

The core elements include:

- participants
- planning and support processes
- life domains

The life domains include those listed in the National Standards as relevant to a transition from care plan, outlined previously. Consultations with young people, service providers, carers, researchers and governments identified culture, legal matters and dental health as additional areas to be included in the nationally consistent approach.

The life domains included in the approach are:

- housing/accommodation
- health – physical, emotional (including self esteem), mental, sexual and dental
- education and training, employment or other suitable activity
- financial security
- social relationships and support networks
- life (and after care) skills
- identity and culture
- legal matters

This approach depicts the core elements of transition planning to be considered throughout the entire planning process. It also identifies the additional focus to be taken around these core elements, where relevant, in each phase.

It draws from the evidence supporting a ‘best practice’ approach to planning as outlined in the literature and referenced in the paper *Transitioning from out of home care to independence*. It also recognises and builds upon the significant work occurring across jurisdictions to improve the effectiveness of the transition from out-of-home care to independence for young people.

A nationally consistent approach to planning for young people transitioning from out-of-home care to independence is at Table 1.

While it is recognised that there are some gaps and challenges to be overcome, this approach, for the first time, provides a national response to a common goal - a platform on which state and territory government efforts can be coordinated with those of the non-government sector and Australian Government programs, policies and payments; an integrated response to the needs of these vulnerable young people.

It is a first step towards the vision described in the paper released by Community and Disability Services Ministers in December 2010, *Transitioning from out of home care to independence*:

All young people transitioning from out-of-home care to independence receive support from governments, non-government organisations, family members and/or carers, business and the community to experience an effective transition and reach their full potential for social and economic participation.
Table 1 Transitioning from out-of-home care to Independence: A Nationally Consistent Approach to Planning

<table>
<thead>
<tr>
<th>Core elements of planning included in all phases</th>
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<tbody>
<tr>
<td><strong>Participants</strong></td>
</tr>
<tr>
<td>□ young person</td>
</tr>
<tr>
<td>» is central</td>
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<tr>
<td>» is empowered to be an active and informed participant:</td>
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<tr>
<td>» has the opportunity to be involved in planning such as identifying those people they would like included; setting goals; identifying actions, responsibilities and timeframes; and giving input into how the planning and review processes could occur</td>
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<tr>
<td>» is guided by a user friendly transition from care plan that covers aspects such as goals, actions, responsibilities and time frames</td>
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<tr>
<td>» has access to practical and emotional support throughout the transition process</td>
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<td>» is supported to reconnect with/or establish effective relationships with family, where necessary and appropriate.</td>
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<tr>
<td>□ workers</td>
</tr>
<tr>
<td>» the young person has an allocated caseworker who facilitates the young person’s participation and engagement in the planning process and their access to supports during the transition</td>
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<tr>
<td>» a primary worker with whom the young person has a positive relationship is available to provide support.</td>
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<tr>
<td>□ carers</td>
</tr>
<tr>
<td>» are involved, where appropriate, and support the young person’s engagement and participation in the planning process</td>
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<tr>
<td>» are informed participants in the transition process</td>
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<td>» are supported, so that they can effectively support the young person</td>
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<tr>
<td>□ family members</td>
</tr>
<tr>
<td>» the young person’s family is supported to work towards safe and effective reconnections, and to be involved in transition planning, where possible, appropriate and desirable. Support is provided to maintain existing connections.</td>
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<tr>
<td>□ significant others and community</td>
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<tr>
<td>» are supported to be involved in the planning process, where appropriate and desirable</td>
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<tr>
<td>» relationships are supported and fostered to encourage broader support and social networks.</td>
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<tr>
<td>□ other agencies</td>
</tr>
<tr>
<td>» are made known to the young person who is assisted to constructively engage with specialist and/or mainstream services, appropriate to their identified needs</td>
</tr>
<tr>
<td>» all agencies work together in a coordinated way to support the young person to access an appropriate and integrated service response with the consent of the young person.</td>
</tr>
</tbody>
</table>

**Focus through Preparation phase**

**Holistic baseline assessment** identifies the young person’s strengths and areas requiring development, as well as possible ongoing needs. Develop clear and documented goals, actions, responsibilities and timeframes for identified needs and life domains. Young person participates in the planning process.

**Focus**

□ stability of care arrangements  
□ health care needs — including therapeutic support needs and parenting information and supports, where applicable  
□ engagement in education, training, employment or other suitable activity  
□ relationships  
» identify positive relationships in the young person’s family of origin and significant others  
» family members — reconnections are facilitated where appropriate and effective relationships are re-established  
» explore, develop or consolidate relationships with significant others. This may be through a variety of means such as face to face contact, telephone, email, or online social networking, with consideration given to the safety of the young person  
□ core life skills development including managing money, meal preparation, preparing for employment, transport, accessing health services, legal services and advocacy, social and relationship skills  
□ personal and other documents - for identification, independent living and citizenship (where relevant). Practical support is provided to understand the information and secure it in safe and accessible storage  
□ cultural needs and connections  
□ special needs — in relation to risks, vulnerabilities or disengagement are acknowledged and relevant agencies are engaged, for example, Disability Services, Mental Health and Alcohol and Other Drug providers.  
□ services — are identified, clear information is provided and engagement is facilitated

**Key actions**

— introduce the concept and idea of the young person beginning to plan for their life as an adult, including discussions about changing relationships  
— for young people with special needs, early referrals and discussions with specialist support services  
— clarify with the young person who is responsible, with them, for their preparation and planning. Consider strategies, for example, mentoring.
## Planning and support processes

**assessment**
- is comprehensive and based on individual needs
- considers needs against life domains
- incorporates young person’s views and perspectives

**planning**
- is tailored to individual needs
- is responsive to cultural backgrounds and needs
- is responsive to changing circumstances: flexible, provides a safety net and includes contingencies that are based on assessment of need
- directly involves the young person where possible
- supports regular review of the transition from care plan and updates of the plan as required.

**support processes**
- goals of the plan are monitored and reviewed by a key person/s
- roles and responsibilities are clearly identified to ensure that the planning includes all relevant participants and facilitates their involvement
- the young person is supported to increasingly take responsibility for progress towards goals

### Focus through Transition phase

**Review progress** with young person having greater responsibility for the planning process.

**Focus**
- securing safe, affordable and appropriate accommodation and living arrangements after the order expires
- health care needs that require ongoing attention into adulthood are attended to
- consolidate engagement in education, training, employment or other suitable activity
- financial support — facilitate access to income support and other financial entitlements such as: TILA, Youth Allowance, Rent Assistance, and Brokerage (where available)
- identity and culture — supporting the young person with their emerging independent identity
- relationships — continue and consolidate with significant others (includes mentoring where appropriate) and/or family members
- carers — support needs are addressed to enable them to assist the young person in their care through the transition
- independent community engagement and connections
- core life skills are further developed and consolidated
- personal and household items are obtained
- other agencies
  - disclosure of care leaver status is discussed and skills developed to support safe disclosure for those who choose
  - individual vulnerabilities are raised with relevant service providers and agencies (with the young person’s consent)
  - young person is aware of post care support and other services and how to contact them

**Key actions** — consolidate efforts from Phase 1 supported by ongoing assessment of needs. Confirm support of relevant services.

### Focus through After Care phase

**Review progress**

**Focus**
- accommodation — support to access or retain suitable accommodation
- relationships important to the young person are supported or mediated
- after care needs — assessed against relevant life domains. Relevant information is provided. Where required and desired by the young person; access to relevant services and/or supports is facilitated, including referrals
- other agencies — relevant services are engaged to continue support after the young person has left out-of-home care. Focus is on clear goals identified by the young person. Services may include:
  - specialist and/or mainstream including financial support services and payments
  - targeted, intensive, specialised support and/or counselling specific to pre- or in-care experiences

**Key actions** — maintain and build on progress from Phases 1 and 2 based on individual needs and desire for ongoing assistance. Empower the young person to achieve ongoing independence

### Life domains

- Housing/accommodation
- Health (physical, emotional (including self-esteem), mental, sexual and dental)
- Education and training, employment or other suitable activity
- Financial security
- Social relationships and support networks
- Life (and after care) skills
- Identity and culture
- Legal matters
List of terms

Core element
An essential, evidence based component of planning that supports the transition from out-of-home care to independence. The core elements to be considered are participants, planning and support processes and the life domains.

Out-of-home care (foster care, kinship care, therapeutic residential care): A nationally consistent approach to planning focuses on those children and young people with Children’s Court ordered care arrangements, where the parental responsibility for the child or young person has been transferred to the Minister/Chief Executive. This includes:

  Foster care: Where placement is in the home of a carer who is receiving a reimbursement from a state or territory for caring for a child.

  Relative or kinship care: Where the caregiver is a family member or a person with a pre-existing relationship to the child, and the state makes a financial payment/reimbursement or where a financial payment/reimbursement has been offered but has been declined by the carer.

  Therapeutic Residential Care: is intensive and time limited care for a young person in statutory care within a residential setting that responds to the complex impacts of abuse, neglect and separation from family. This is achieved through the creation of positive, safe, healing relationships and experiences informed by a sound understanding of trauma, damaged attachment, and developmental needs.

  Residential care: Where placement is in a residential building whose purpose is to provide placements for children and where there are paid staff. This category includes facilities where there are rostered staff and where staff are offsite.

  Independent living: Such as private boarding arrangements.

Transitioning from out-of-home care to independence
A gradual process commencing no later than age 15 years, guided by a transition from care plan.

Transition from care plan
A planned and phased approach to transitioning from care for young people that identifies the required supports, based on individual needs, in areas such as safe and sustainable housing, education, employment, financial security, social relationships and support networks, health – physical, emotional (including self-esteem and identity), mental and sexual, and life and after care skills.