Queensland Aboriginal and Torres Strait Islander
Child Protection Peak Limited

Practice Guide

ChildProtectionPeak

CONTENTS

5 FOREWORD

6 QATSICPP GUIDING PRINCIPLES

11 **PART A** INTRODUCTION

1 Background

1.1 Purpose

1.2 QATSICPP Practice Standards

1.3 Aboriginal and Torres Strait Islander Child Placement Principle

1.4 QATSICPP Assessment Toolkit

2 Who is this Practice Guide for?

3 How to use this practice guide?

13 **PART B** WORKING WITH ABORIGINAL AND TORRES STRAIT ISLANDER FAMILIES AND COMMUNITIES

4 Understanding Aboriginal and Torres Strait Islander history

5 Engagement

14 **PART C** IDENTIFYING THE STORYLINE

6 Assessing needs

7 Assessing strengths

8 Developing plans and setting goals

16 **PART D** WORKING TOWARDS GOALS

17 **PART E** FAMILIES ARE SAFE, STRONG AND CONNECTED

18 **PART F** WORKING WITH THE STATUTORY CHILD PROTECTION SYSTEM

20 **PART G** SELF-CARE, SUPERVISION AND PROFESSIONAL BOUNDARIES

21 **PART H** TRAUMA

22 **PART I** STRONG SPIRIT STRONG MIND

23 REFERENCE LIST

QATSICPP Vision

All Aboriginal and Torres Strait Islander children and young people are physically, emotionally and spiritually strong; live in safe, caring and nurturing environments within their own families and communities; and are afforded the same life opportunities available to other children and young people to achieve their full potential.

Foreword

The Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSICPP) is the State peak body for child protection within the Queensland Aboriginal Community Controlled Sector.

The principal purpose of QATSICPP is to, above all, promote and advocate the rights, safety and wellbeing of Aboriginal and Torres Strait Islander children, young people and their families through effective partnerships and strategic collaborations. QATSICPP provides leadership and advocacy and the development of policies, strategies and programs to resource, support and strengthen the capacity and capability of Aboriginal and Torres Strait Islander Community Controlled Child Protection agencies.

QATSICPP constantly strives for excellence in all aspects of the organisation, thus ensuring that Aboriginal and Torres Strait Islander families, children and young people in Queensland are respected, given and have access to culturally secure and superior service provision.

The Practice Guide will be a practical resource that all practitioners in the Queensland Aboriginal and Torres Strait Islander Community Controlled Child Protection agencies can utilise.

Furthermore, the Practice Guide will recognise the important roles that families have and ensure the needs of children and families are responded to and become empowered by utilising the QATSICPP Practice Standards and the Aboriginal and Torres Strait Islander Child Placement Principles

Natalie Lewis
Chief Executive Officer

QATSICPP **GUIDING PRINCIPLES**

QATSICPP's guiding principles underpin the organisation as a whole and, accordingly; all work produced. These guiding principles (outlined below) seek to promote culturally based equity, thus ensuring Aboriginal and Torres Strait Islander children and young people are afforded the same opportunities as other Australian children to grow up safe, strong and supported.

PRINCIPLE **ONE**

COMMUNITY CONTROL

ABORIGINAL AND TORRES STRAIT ISLANDER COMMUNITY CONTROL

QATSICPP supports the principles of community control outlined in the definition of community control endorsed by the National Aboriginal Community Controlled Health Organisation (NACCHO). QATSICPP believes that local Aboriginal and Torres Strait Islander communities have the right to self-determination, and community controlled processes facilitate community involvement in issues that will impact them. To the extent that is appropriate, QATSICPP will ensure mechanisms are in place to engage with local Aboriginal and Torres Strait Islander communities in its work with the Sector.

PRINCIPLE **TWO**

STRENGTHS BASED

STRENGTHS BASED

QATSICPP recognises and builds on the strengths of all Aboriginal and Torres Strait Islander Child Protection organisations, communities, families and children. Once identified, strengths will provide a foundation and the context for the strategies developed and implemented by QATSICPP.

PRINCIPLE **THREE**

RIGHTS BASED

RIGHTS BASED

QATSICPP acknowledges the rights of children established in the United Nations *Convention on the Rights of the Child*, and the rights of all Indigenous people established in the United Nations *Declaration on the rights of Indigenous Peoples*. QATSICPP will especially ensure it applies the principle of free, prior and informed consent in delivering services and interventions impacting on the Sector, and through them, Aboriginal and Torres Strait Islander communities.

HOLISTIC AND NEEDS BASED

QATSICPP will provide support to the Sector to ensure services are:

- responsive to the identified and articulated needs of communities;
- holistic and provide an integrated framework across the continuum; and
- accessible to most vulnerable Aboriginal and Torres Strait Islander children and families.

QATSICPP will provide support to the Sector to ensure their services take a child-first approach that prioritises family preservation, and allows children to remain safely in their communities. QATSICPP will also prioritise both the skill and capacity needs of the front-line professional workforce and the systemic enablers, to ensure that children who must be removed from the parents remain connected to kin, country and culture; and are able to achieve reunification.

HOLISTIC

PRINCIPLE **FOUR**

TRANSPARENCY AND ACCOUNTABILITY

QATSICPP supports transparent and accountable practices both as an organisation and a sector. Being accountable as a Peak Body means being open, honest and transparent in all dealings with the Sector, government and non-government organisations.

More importantly QATSCIPP is also committed to supporting organisations in the Sector being transparent and accountable in the communities in which they operate.

TRANSPARENCY AND ACCOUNTABILITY

PRINCIPLE **FIVE**

RESULTS-BASED LEADERSHIP

QATSICPP is driven to eliminate the over-representation of Aboriginal and Torres Strait Islander children in out-of-home care and stands by the impacts it has on the Sector and Aboriginal and Torres Strait Islander communities. As governments, the wider public and the not-for-profit sector more broadly move towards measuring success in terms of outcomes, QATSICPP embraces being measured by and funded for the outcomes it delivers for the Sector, and through them, the most vulnerable Aboriginal and Torres Strait Islander children and families.

RESULTS-BASED LEADERSHIP

PRINCIPLE **SIX**

PART A Introduction

PART B Working with Aboriginal and Torres Strait Islander Families and Communities

PART C Identifying the Storyline

PART D Working towards goals

PART E Families are safe, strong and connected

PART F Working with the Statutory Child Protection System

PART G Self-care, Supervision and Professional Boundaries

PART H Trauma

PART I Strong Spirit Strong Mind

PART A Introduction

1 BACKGROUND

1.1 PURPOSE

The focus of the Practice Development Team in QATSICPP is to improve the direct practice skills of frontline staff working in Aboriginal and Torres Strait Islander Community Controlled Organisations that deliver child protection services across Queensland. A key activity of the Practice Development Team is to develop a structural practice element that support excellence in practice. One key initiative is the development of a Practice Guide for Aboriginal Community Controlled Organisations.

Therefore, this Practice Guide will be a practical resource that all practitioners working across the Child Protection continuum in Aboriginal and Torres Strait Islander Community Controlled Organisations (ACCOs) can use for both practice and reflection.

The Practice Guide will be guided by the QATSICPP Practice Standards and the Aboriginal Child Practice Principles.

The Practice Guide is a living document that can be adopted to suit the individual and to allow for changes if Legislation or Policy change.

1.2 QATSICPP PRACTICE STANDARDS

The QATSICPP Practice Standards ('Standards') underpins QATSCIPP, Member Organisations and families' to which services are offered and received - as such,

"…the practice standards build on the Aboriginal and Torres Strait Islander Child Placement Principle (CPP) developed in the late 1970s by Aboriginal and Torres Strait Islander organisations. The CPP was established in the belief that Aboriginal and Torres Strait Islander children are best cared for within their own Aboriginal and Torres Strait Islander families and communities"[1].

This Practice Guide will be based upon the Standards thus ensuring that they are upheld and promoted when working with Aboriginal and Torres Strait Islander Children and Families in communities:

- STANDARD 1: Engaging the child and family
- STANDARD 2: Identifying the storyline
- STANDARD 3: Changing the storyline
- STANDARD 4: Establishing a new storyline[2]

STANDARD 1 will be explored in PART B - working with Aboriginal and Torres Strait Islander families and communities. This part has a focus on understanding the historical and intergenerational impacts on Aboriginal and Torres Strait Islander children, young people and their families; engagement and building effective working relationships.

STANDARD 2 will be explored in PART C - Identifying the storyline. This section focus on assessing underlying needs, identifying strengths, developing plans and setting clear goals.

STANDARD 3 will be explored in PART D - Working towards goals. This area focuses on providing support and resources to families to assist in working towards the goals that have been identified.

STANDARD 4 will be explored in PART E - Families are safe, strong and connected. A new storyline is established when the goals are achieved and the family are connected to support networks in the community.

1 QATSICPP (2014) Practice Standards, QATSCIPP: Brisbane, p.2
2 QATSICPP (2014) Practice Standards, QATSICPP p.6

1.3 ABORIGINAL AND TORRES STRAIT ISLANDER CHILD PLACEMENT PRINCIPLE

The purpose of the Aboriginal and Torres Strait Islander Child Placement Principle is to preserve and enhance Aboriginal and Torres Strait Islander children's sense of identity as Aboriginal and/or Torres Strait Islander through maintaining children with their own family, community and culture. It seeks to strengthen family life through recognises the value of extended family, kinship arrangements, culture and community in raising children.

The five key elements of the Child Placement Principle are:

1. Prevention - Each Aboriginal and Torres Strait Islander child has the right to be brought up within their own family and community;
2. Partnerships - The participation of Aboriginal and Torres Strait Islander community representatives is required in all child protection decision making;
3. Placement - if an Aboriginal and Torres Strait Islander child is placed in out of home care they are placed in accordance with the placement hierarchy;
4. Participation - Aboriginal and Torres Strait Islander children, parents and family members are entitled to participate in all child protection decisions affecting them regarding intervention, placement and care, including judicial decisions; and,
5. Connections - Aboriginal and Torres Strait Islander children in out of home care are supported to maintain connection to their family, community and culture, especially children who are placed with non-Indigenous carers. (Tilbury, 2013)

1.4 QATSICPP ASSESSMENT TOOLKIT

Throughout this Practice Guide you will find reference to the QATSICPP Assessment Toolkit. This toolkit was developed by a reference group in both North and South Queensland. The Toolkit is based upon the Practice Standards.

The purpose of the Toolkit is to be a practical resource that is effective in ensuring that the needs of families and children are responded to and they become strengthened as a result of being involved in the assessment process from beginning to end. The Toolkit is designed to be a source of critical reflection and for use in daily practice.

Each assessment tool has a prompt template as well as a blank template to use.

Appendix E highlights the different tools, questions and prompts that can be used to engage the families when using the assessment tools.

2 WHO IS THIS PRACTICE GUIDE FOR?

This resource is designed to be used by all practitioners across the Child Protection continuum of ACCOs to support their practice. It can be used for both practice and critical reflection.

The final two parts of the guide are to provide information for practitioners about the importance of understanding trauma and strong spirit strong mind model when working with Aboriginal and Torres Strait Islander peoples.

3 HOW TO USE THIS PRACTICE GUIDE?

This guide is designed to be a flexible, living document that can be adapted to suit your audience. It is not designed to be prescriptive rather to provide ideas, activities and links to tools and resources that have been identified by the sector.

Throughout the Practice Guide you will find reference to the QATSICPP Assessment Toolkit. This toolkit was developed in conjunction with frontline staff.

QATSICPP Senior Practice Leaders can also facilitate workshops for practitioners in using this practice guide.

PART B Working with Aboriginal and Torres Strait Islander Families and Communities

4 UNDERSTANDING ABORIGINAL AND TORRES STRAIT ISLANDER HISTORY

Aboriginal and Torres Strait Islander people have diverse enduring cultures and traditions. Children are connected to their family and community through culture and tradition and this provides them with a sense of belonging. The importance of culture and acknowledgement of cultural differences within Aboriginal and Torres Strait Islander communities is paramount.

However, to work effectively with Aboriginal and Torres Strait Islander families and communities, it is important to not only acknowledge but understand the impact of colonisation and the forced removal of children from their families have had on the lives of Aboriginal and Torres Strait Islander peoples. There has been, and continues to be, loss of culture, dislocation, forced child removal and entrenched poverty and inter-generational trauma as a result of these past practices and policies.

Therefore there is a critical role for healing when responding to the needs of children, families and communities. Having strong connections to culture and tradition is central to protecting culture and healthy children, families and communities. As workers in this field we need to continuously acknowledge the importance of not only working with the immediate issue but also working with the community to strengthen connection to culture. The impact of trans-generational trauma will be explored more in Part G.

SNAICC (2015) highlight a number of areas for gaining cultural awareness, understanding and connections that workers can utilise:

- Access resources for background knowledge and understanding; and,
- Build local relationships and develop knowledge of local cultures.

PRACTICE EXAMPLES:

- Engage with community to understand their history
- Listen to the family and their stories
- SNAICC Resources: Supporting carers; Working and Walking Together; Share our Pride; Building Respectful Relationships

5 ENGAGEMENT

"It's our job to build a relationship with our children, young people and families" Worker, Brisbane, 2016

Engagement is a critical part of any working relationship. As stated in QATSICPP Practice Standard 1 - "engagement is focussed on establishing trusting and respectful relationships so that children and families feel safe in telling their story" (p10).

SNAICC Stronger Safer Together (2015) highlights the following as effective engagement strategies:

- Persist and be patient to establish initial engagement
- Yarn to build trust and give the family a chance to tell their story
- Engage with purpose
- Adopt a non-judgmental genuine willingness to support families who are doing it tough
- Adopt a child-centred approach
- Assume families have the motivation and capacity to make change up until where there is clear evidence that this is not the case
- Support families to set and work towards meaningful and manageable goals for change
- Low Caseloads
- Timing of your work
- Your relationship with a particular family member
- Your acceptance as an appropriate support person.

All of these points were identified and discussed during the development of the QATSICPP Assessment Toolkit with a working party of Aboriginal and Torres Strait Islander Child Protection Practitioners from North and South Queensland. A number of practical skills highlighted can be found in the box below.

Tilbury (2013) also highlights engagements as one of the key areas to building partnerships with family members.

It is also important to acknowledge that successful engagement involves organisations and workers being involved in community from the outset so that respectful relationships with people, groups and services are established and children and families feel comfortable when they are referred to a service.

PRACTICE EXAMPLES:

- Send a letter to the family prior to first visit explaining the service
- Take the family to the service you are referring them to
- Attend significant events in community to build peoples awareness of your service
- Allow time to yarn and get to know the family
- It may take a number of visits - this is okay!
- Explain your role and the reason why you are there

PART C Identifying the Storyline

This section draws upon the **QATSICPP Practice Standard: Identifying the storyline.** This section is at the heart of assessment and planning. It will involve assessing underlying needs, assessing strengths and developing plans and setting clear goals.

6 ASSESSING NEEDS

When working with Aboriginal and Torres Strait Islander children and families it is important to place emphasis on the cultural needs of children. This involves working with the child and family to explore their connections with kin, community, country and culture.

Furthermore, understanding that the wellbeing of parents and carers also impacts on the capacity of parents and carers to care for children. Severe problems can result in difficulty meeting the child's basic needs. Quality emotional connection may also be impacted when there are less severe problems. As stated earlier these issues may be linked to intergenerational trauma that has resulted from colonisation.

The immediate and practical needs for children and families will relate to everyday practical issues. These in turn may impact on families engaging with other supports.

The ARACY Wellbeing Wheel (2013) is another tool that can be used for identifying needs. The tool provides a visual and holistic view of a child's or young person's life. It covers six broad domains of wellbeing.

7 ASSESSING STRENGTHS

Aboriginal and Torres Strait Islander children, families and communities have enormous strengths and it is important that we as workers acknowledge and work with these strengths to assist families in changing their storyline.

A number of families would not be aware of the parenting strengths that they have which can include but not limited to community caring, extended family support, and supporting autonomous learning for children.

It is important as workers that we consider the strengths of children and families and respond holistically taking into account all aspects of their lives (QATSICPP 2014)

SNAICC have developed a tool that can be used when talking about strengths with families. This is called the Talking Up Our Strengths guide which is available on the SNAICC website.

Winangay Resources have also been highlighted by the Child Protection Practitioners working in ACCO's as a beneficial tool when working with families to identify needs and strengths.

8 DEVELOPING PLANS AND SETTING GOALS

It is important as workers that we develop and document a plan to change the storyline that builds upon the strengths and addresses underlying needs for children and families and includes the following:

- goals
- actions required to achieve the goals
- who is responsible for carrying out the goals
- timeframes for carrying out the actions
- how to progress toward achieving the goals will be determined.

Plans and Goals should be practical and achievable and have an end result such as reunification with family and basic needs such as furniture/housing.

If there have been referrals from statutory agencies, than these goals are consistent with the goals that have been prescribed.

We work effectively with the child and family to identify the 'right people' including relevant kin, other community members and service providers who should be part of their support team and be involved in decision making. We assist in identifying and engaging children and families informal and formal helping systems to provide support.

It is important to remember that the end goal of the family being safe, strong and connected is defined by the family. As workers we should not be imposing our own personal views about what this may mean.

USING THE QATSICPP INITIAL ASSESSMENT FORM TO ASSESS NEEDS, STRENGTHS, PLANS AND SETTING GOALS

APPENDIX A

PRACTICE STANDARD 1: Engaging the child, family and community
PRACTICE STANDARD 2: Identifying the Storyline

As a worker throughout this form we are constantly striving to build an effective working relationship with the family to try to understand the families storyline to date.

The Tool can be varied to suit the audience and encourages the use of visuals when working with children and families.

The Initial Assessment includes looking at the reason for the referral and providing an overview of the family including strenghts, barriers, goals and actions. It looks at the family structure, cultural links and health and wellbeing. It also looks at the protective actions of the parent/s as well as the strengths and resources within the family.

The Initial Assessment allows the worker to look forward at the Changing the Storyline sections to commence the discussion around the current worries and goals.

The final part of the Initial Assessment Form, Establishing a new storyline, provides a section for the worker to write the Strenghts, Barriers, Goals and Actions so that all parties have an understanding of what can assist and hinder the family in moving forward.

Ensure goals are SMART:

- Specific
- Measurable
- Achievable
- Realistic
- Timely.

SNAICC (2014) have highlighted a number of ways workers can work with children and families which include:

- Practical support
- Therapeutic support
- Educational supports
- Advocacy supports

Another way in working with families to achieve their goals is by identifying other services or informal support networks that may be able to assist the family. This involves the worker advocating for the family to attend this service.

"Actions designed to ensure the safety and welling of children are more likely to be effective when services are provided flexibly, informal supports and networks are engaged, the effort of all stakeholders are coordinated and families are empowered to take responsibility for solutions"

PART D Working towards goals

This section looks at the **QATSICPP Practice Standard 3: Changing the storyline**. In this area we will look at practices that support the actions that have been prioritised with the child and family and resources and services are delivered to change their storyline.

Children, families and their support team identify what is working and what is not working or is missing.

USING THE QATSICPP ACTION PLAN TO WORK TOWARDS GOALS

APPENDIX B

PRACTICE STANDARD 3: Changing the Storyline

Drawing on the information obtained during the Initial Assessment, the Action Plan is developed with the family, child and/or young person to focus on changing the storyline. The Goals and the Picture of the Future are at the top of this assessment.

The actions are clear and concise as well as prioritised by the family. A support team is developed with the family as well as who will do this and follow-up to ensure the actions are completed. This is constantly monitored and modified as required.

Any barriers to change are highlighted by the family and a plan is put into place to overcome these barriers as well as any barriers that are highlighted as the family progress through the changing of the storyline.

The Tool can be varied to suit the audience and encourages the use of visuals when working with children and families.

The Changing the Storyline Action Plan will inform the QATSICPP Establishing a new storyline Review Form.

PRACTICE SUPPORT AREAS:

- provide resources and services to the child and family
- maintain and, where necessary, strengthen connection to kin, community and culture
- assist the family to access services
- engage and/or build children's and families informal and formal support systems to sustain assistance over time
- assist the child and family to implement the actions
- actively monitor and modify to match the child's and families's changing needs.

PART E Families are safe, strong and connected

The final section relates to the **QATSICPP Practice Standard 4: Establishing a new storyline**. This section as per the section above involves the regular review of progress towards achieving the agreed goals. There is acknowledgement of achievements and celebrated along the way.

A new child and family storyline is established when the goals are achieved and the child and family are safe, strong and connected, and they are able to access their support network and obtain assistance when needed.

It is important to remember that the end goal of the family being safe, strong and connected is defined by the family. As workers we should not be imposing our own personal views about what this may mean.

At closure, provide children and families with information about resources and services available and encourage them to recontact if they require any further assistance.

USING THE QATSICPP REVIEW FORM

APPENDIX C

PRACTICE STANDARD 4: Establishing a new storyline

As per the previous forms, it begins by highlighting the goals achieved to date. The form encourages the worker to work with the family in identifying any changes required and identifying the actions for these changes with the support team who can assist in the changes required. The form reminds the worker to think of any barriers that may have arisen for the family in achieving any future goals as well as again looking at the support team who can assist in overcoming these barriers to change.

During this time, everyone is actively included in the review i.e. children, families and other stakeholders.

Questions and prompts that were developed by the Reference Group and tools that can support the gathering of the information are also highlighted within the Form.

The Tool can be varied to suit the audience and encourages the use of visuals when working with children and families.

USING THE QATSICPP CLOSURE FORM

APPENDIX D

PRACTICE STANDARD 4: Establishing a new storyline

The Closure Form ensures that all support networks are in place to ensure that the family are able to continue on their new storyline. The form highlights and goals that have been achieved, big or small, and the supports available for the family.

Questions and prompts that were developed by the Reference Group and tools that can support the gathering of the information are also highlighted within the Form.

The Tool can be varied to suit the audience and encourages the use of visuals when working with children and families.

PRACTICE EXAMPLES:

- regular review of actions and goals
- celebrate all goals as they are achieved
- monitor connection to culture
- monitor the formal and informal support network.

PART F Working with the Statutory Child Protection System

It is important to be aware of the Child Protection Intervention Continuum as well as the processes utilised by the Department of Child Safety.

The child protection continuum refers to a broad system of service delivery that reflects a continuum of child protection needs. It is divided into three tiers:

PRIMARY OR UNIVERSAL SERVICES are prevention services that are offered to everyone. They include a range of services including antenatal services, maternal child health service, early education as well as various health clinics, self-help groups, parenting courses and other similar programs. The goal of primary services is to provide support and education for children and families before problems arise, helping to prevent abuse and neglect from occurring

SECONDARY SERVICES are programs that identify and reduce the personal and social stresses on parents that lead to family breakdown and harms to children. Secondary services support parents and families, assisting them to overcome significant problems and challenges, and include in-home family support, financial or family counselling, respite care as well as parenting programs, specialised services and similar programs.

TERTIARY (STATUTORY) SERVICES are intervention services where children who have been at risk of significant harm and intervention is required to ensure the ongoing safety of children. These services include statutory child protection services, Placement services for children who are unable to live at home as well as support programs designed for families where statutory interventions are required.
(COAG: 2009)

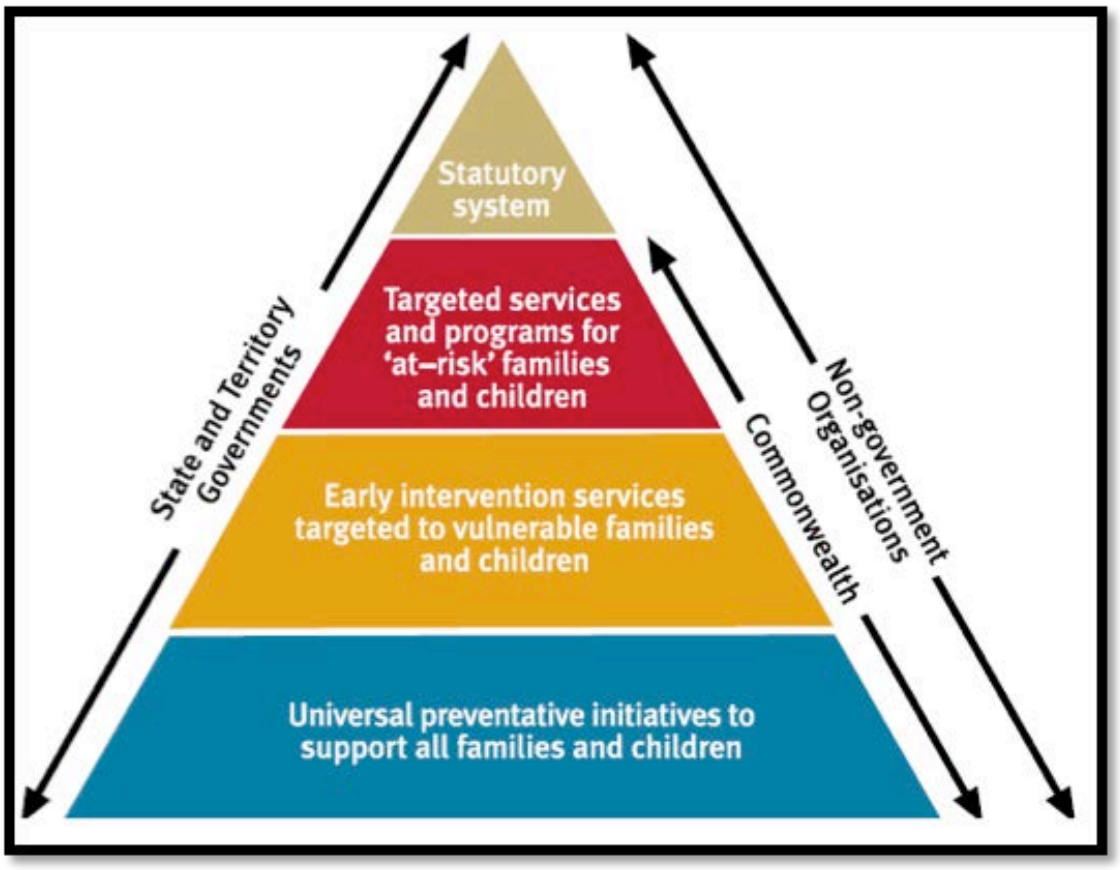
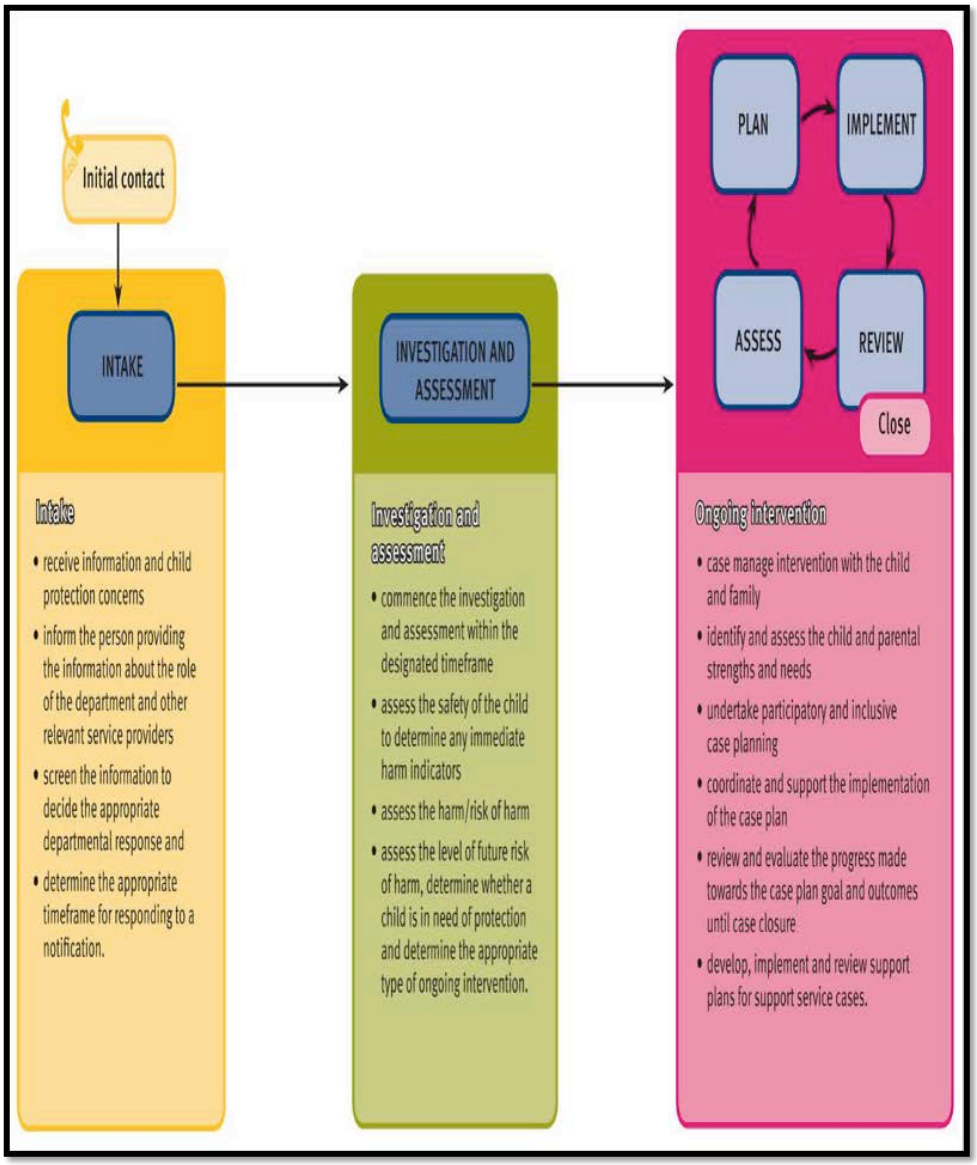


FIGURE 1: National framework for protection of Children
SOURCE: National framework for protection of Children (2009)



The current key child protection phases of the Department of Child Safety are as follows:

- Intake
- Investigation and Assessment
- Ongoing Intervention

The diagram above provides a visual representation of the phases.

Intake - involves the department receiving information about child protection concerns, providing a response to the information provided, providing information about the role of the department and information about child protection services.

Investigation and assessment - involves the following: determine safety of the child; investigate allegations of harm and significant risk of harm; a holistic assessment is undertaken with the child and family; determine if the child is in need of protection; decide whether there are supports that the department or other agencies can provide to the child and family.

Ongoing intervention - occurs after the completion of the investigation and assessment and it is determined that a child is in need of protection. Ongoing intervention can also be provided to a pregnant mother, a child not assessed as in need of protection but have high risk or for a young person who was currently in care following their eighteenth birthday. The purpose of ongoing intervention varies from meeting the child's protection and care needs, reducing the likelihood of future harm to the child or unborn child or providing support and assistance to a young person following their eighteenth birthday. (Department of Communities, Child Safety and Disability Services 2013)

SOURCE: Child Safety Practice Manual (2013)

PART G Self-care, Supervision and Professional Boundaries

As workers in this area it is imperative that we look after ourselves and colleagues. We are exposed to a number of potentially stressful, traumatic and dangerous working environments and therefore we need to ensure that we have self-care and supervision.

Self-care can include a number of different activities:

- Yarn with your colleagues
- Maintain limits with your clients
- Remember you don't have to be perfect
- Laugh
- Attend Professional development
- Exercise
- Catch up with families and friends

Another way that we can ensure that we are looking after ourselves is to engage in regular Supervision. It is important to ensure that there is a clear supervision and support procedure

The Australian Association of Social Workers (2014) define supervision as follows:

"a forum for reflection and learning...an interactive dialogue between at least two people, one of whom is a supervisor. This dialogue shapes a process of review, reflection, critique and replenishment for professional practitioners. Supervision is a professional activity in which practitioners are engaged throughout the duration of their careers regardless of experience or qualification. The participants are accountable to professional standards and defined competencies and to organisational policy and procedures". (p2)

In our busy roles it is easy to not make time for Supervision but it is essential for professional development and self-care. It requires a commitment from both manager and worker to ensure it happens.

Supervision can occur in a number of different formats:

- One to one professional supervisions
- Peer group supervision
- Group supervision.

QATSICPP are currently in the process of developing a supervision framework that will include the three main functions of supervision as well as ensuring a cultural lens is applied.

Having clear professional boundaries with the children and families that you work with is essential. A number of strategies from SNAICC (2015) include:

- Being upfront and clear about your role and purpose
- You are not best mates and need to stay focused on your purpose
- Always arrange times for visits and support based on times that you are available
- Have a clear idea for the purpose of each visit or support prior to communicating with the family.

This will assist you, the child and the family understanding each others role in the working relationship.

PART H Trauma

It is important that as workers in this field we have an understanding of trauma and how this impacts on Aboriginal and Torres Strait Islander peoples.

The Healing Foundation (2014) provides the following definition of trauma:

"Trauma affects a person's physical or emotional safety and is often caused by a psychologically stressful event or series of events. The person may respond to this event/s with feelings of intense fear, helplessness or horror. These traumas can occur at a personal level or at a collective level (war, natural disasters, or genocide). Trauma can affect a person for many decades and in many different ways. If people have not had the opportunity to heal then they may act out their pain in negative ways including physical or emotional violence, abuse or addiction".

Trans-generational trauma as defined by SNAICC (2015) "occurs when the grief and loss from one generation is passed to future generations". Through time, the layers of trauma experienced by people and community build up and this then has a negative impact on peoples and their communities. Colonisation, the Stolen Generation and racist policies and practices are examples of historical events that have caused trans-generational trauma.

"Intergenerational trauma is a form of historical trauma transmitted across generations" (Healing Foundation: 2014). This is experienced by children by observing or experiencing the pain of destructive behaviours within their family. (SNAICC 2015)

Therefore by understanding the impacts that trauma has on the lives of Aboriginal and Torres Strait Islander children and their families, it is timely that we look at Trauma Informed Practice. As defined by the Healing Foundation "Trauma informed practice is a strengths based approach to healing that:

- is based on an understanding of, and responsiveness to, the impact of trauma
- emphasises physical, psychological, and emotional safety for people seeking help and for the helpers
- creates opportunities for people affected by trauma to rebuild a sense of control and empowerment.

It recognises the prevalence of trauma and is sensitive to and informed by the impacts of trauma on the wellbeing of individuals and communities" (Healing Foundation: 2014).

PART I Strong Spirit Strong Mind

SOURCE: Working Together: Aboriginal and Torres Strait Islander mental health and wellbeing principles and practices. Page 450

The Strong Spirit Strong Mind model is a valuable tool for practitioners to work alongside as it is a highly regarded, culturally appropriate and holistic way of working to deal with emotional, spiritual and social problems.

It emphasises the importance of strengthening the Inner Spirit to allow for good decision making and support behavioural change across individual, family and communities levels.

SOURCE: Working Together: Aboriginal and Torres Strait Islander mental health and wellbeing principles and practices. Page 450

The Principles that underpin the Strong Spirit Strong Mind Model include

- Cultural Security
- Holistic Concept of Health and Wellbeing
- Impact of Alcohol use

The Model refers to the Inner Spirt Assessment Model. This looks at how alcohol and other drug use affects their inner spirit and connections to family, community and culture. (Casey: 2014)

Although the Strong Spirit Strong Mind model focuses on Alcohol and Other drugs this model can be used when working with Aboriginal and Torres Strait Islander children and families who may be experiencing similar issues. (Casey: 2014)

REFERENCE LIST

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