Families Supporting Families

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Shane Donnnelly Select Committee on Child Protection House of Assembly Parliament House Hobart, Tasmania 7000

Glenhaven Family Care is a community service organisation that has provided Out of Home Care (OOHC) services in the North and North-West of Tasmania over a long period. We are also partners in the Gateway / Integrated Family Support Service (IFSS) alliances in the North and North-West.

Glenhaven Family Care welcomes the reforms in child protection, and we have been an active participant in the consultations and the roll-out of Gateway / IFSS. This is a significant reform, and having completed one year we are still in the early stages of what we believe will be a 3-5 year process. This process of change has been proven to be successful in reducing child protection notifications and providing better services to vulnerable children and families in other jurisdictions such as Victoria.

Glenhaven Family Care has a long history of working with vulnerable at-risk children and families and since the inception of Gateway and IFSS we have seen:

- The introduction of an effective centralised intake and allocation process for families and children.
- Improved assessment and sharing of information.
- Improved identification of children at-risk.
- Services working together in a collaborative client focussed manner.
- Better outcomes for families and children.
- Fewer families falling "through the cracks"
- A reduction in child protection notifications in Tasmania.

The following is a true case study of one family.

The Story of family N-09-0001

In 2005 "Julie"* was referred to Glenhaven's Temcare respite program by Child Protection. Temcare had recently provided emergency respite care for Julie's 3 children when she was hospitalised. The family consisted of Julie, two young sons and one infant daughter. Two older children (one teen and one pre teen) were also living at home.

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^{*}Name has been changed to protect the family's identity.

Child protection had been recently investigating allegations of abuse from another family member not living in the home toward the younger children. They reported that the primary caregiver Julie, was a protective and caring parent, and had been supported by temporary periods of foster care to assist her to cope with physical and mental health issues, and that over recent years several other services had assisted in varying capacities.

A joint home visit between the Child Protection caseworker and Temcare support worker along with Julie was arranged as Child Protection prepared to close the case. What was to be originally a fairly straightforward referral and support process became so much more. Glenhaven coordinated a case conference soon after this, to try to respond to the complexity and intensity of the case. It was prior to the DCYFS family support reforms and little integration existed between services. It was in fact the first time all of the various services supporting Julie and her children had come together as one to try to get a coordinated case plan in place.

It worked well for a while, but ultimately was doomed to fail. The issues and crises within the family came at a rate faster than the individual services could respond or communicate with other services. On many occasions the nature of the support involved crisis response more than constructive casework. Opportunities to facilitate real change were few and far between. No one service was able to do enough for long enough, and the resources were unavailable.

Four long years passed as Glenhaven continued to support Julie. We had alleviated family breakdown, kept the family together and out of the statutory system, but felt the underlying issues remained unaddressed. Getting Julie to voluntarily attend much needed appointments isn't easily sustained when as a worker you cannot physically do practical support outside of a program's core business.

When the reforms began, and the Integrated Family Support Service (IFSS) was being developed, the name of Julie kept coming to mind. Could this be the silver bullet? Gateway and IFSS opened on August 2nd 2009. Julie was the very first family to be presented and allocated at the very first allocation meeting. The statistical code for the first family in IFSS reads N-09-0001. Glenhaven's IFSS worker then began supporting Julie, because of our history and good relationship with Julie and her children.

IFSS remains a primary support to the family, and this support has been in place for over 15 months. It has been a long and intensive intervention which was now possible under the new Gateway / IFSS system.

The difference it has made has been a series of baby steps. In light of Julie's story which involves intergenerational abuse, trauma, complex family relationships, separation and family violence issues, these steps can be described as leaps and bounds.

The children are now engaged in day care and school activities, and no longer need to go to overnight respite care. The children are also safe and more settled at home. Julie is no longer reliant on powerful prescription medications for pain, and she now attends appointments by herself. Child Protection Services don't get crisis calls late at night.

It has only been through the funding of the program, and the compassionate, dedicated efforts of our IFSS worker that Julie and her children are where they are now. Julie has given permission to share her story in gratitude for what the program has been able to do for her and her children. The human story is so much more than the piece of code N-09-0001 can ever tell.

In conclusion we believe that Gateway / IFSS is making a significant difference in the lives of Tasmanian children and families. We have experienced first hand the success of this program after only one year of operations, and we anticipate that this success can only grow as the reform process continues to unfold.