

# Child Safety Practice Manual

**Investigate and assess**

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# Investigate and assess

Use this procedure to investigate and assess allegations that a child has been significantly harmed or is at risk of significant harm (or that an unborn child will be at risk of significant harm after birth); to assess a child's need for protection and to record the outcome of the investigation and assessment. The procedure explains how to work with the child, their parents and community to identify supports that can be provided for the child and family.

## Overview

Use this procedure to investigate and assess allegations that a child has been significantly harmed or is at risk of significant harm (or that an unborn child will be at risk of significant harm after birth) and to assess a child's need for protection.

An investigation and assessment is the response provided by Child Safety to concerns received at intake and recorded as a notification. Investigation and assessment involves a process of investigating whether the child has experienced, is experiencing, or is at risk of experiencing significant harm, assessing whether the child is in need of protection and recording the response.

Significant harm used throughout this procedure, refers to the definition of harm in the *Child Protection Act 1999*, [section 9](#): 'Harm, to a child, is any detrimental effect of a significant nature on the child's physical, psychological or emotional wellbeing'.

## Purpose

Child Safety has a statutory obligation to:

- investigate allegations that:
  - a child has been significantly harmed or is at risk of significant harm or
  - an unborn child will be at risk of significant harm after birth
- assess a child's need for protection or take other actions considered appropriate.

The investigation and assessment may be Child Safety's first face-to-face contact with a child who has been abused or neglected and who may need intervention to ensure their safety and wellbeing.

The purpose of an investigation and assessment is to:

- decide if a child is safe

## Child Safety Practice Manual

: Investigate and assess

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- investigate allegations of significant harm and risk of significant harm
- assess the child and family in their usual home environment
- assess and decide if the child is in need of protection
- decide if an unborn child will need protection after birth
- decide if there are supports that Child Safety or other agencies can provide to the child and family.

## Policies

[Assessment and Service Connect \(636\)](#)

[Care agreements \(415\)](#)

[Children and young people with gender and sexual orientation diversity \(648\)](#)

[Decisions about Aboriginal and Torres Strait Islander children \(641\)](#)

[Disclosing notifier details to police \(649\)](#)

[Information sharing for service delivery coordination \(403\)](#)

[Investigation and assessment \(386\)](#)

[Managing access to My Health records using the Children in Care portal \(642\)](#)

[Records governance](#)

[Support for children in the care of long-term and permanent guardians \(607\)](#)

## Legislation

- [Child Protection Act 1999](#)
- [Child Protection \(Offender Reporting and Offender Prohibition Order\) Act 2004](#)
- [Domestic and Family Violence Protection Act 2012, section 55](#)
- [Evidence Act 1977, section 93A](#)
- [Family Responsibilities Commission Act 2008](#)
- [Human Rights Act 2019](#)
- [My Health Record Act 2012](#)

## Key steps

- [Undertake an investigation and assessment](#)
- [Plan the investigation and assessment](#)
- [Commence the investigation and assessment](#)
- [Carry out interviews](#)
- [Carry out a safety assessment](#)

- [Respond if a parent will not consent to actions required—temporary assessment order](#)
- [Respond if a parent will not consent to actions required—court assessment order](#)
- [Respond to urgent circumstances—temporary custody order](#)
- [Consider a medical examination](#)
- [Consider an assessment care agreement](#)
- [Consider a Suspected Child Abuse and Neglect team referral](#)
- [Consider the differential pathway](#)
- [Respond to specific matters](#)
- [Gather information from other sources](#)
- [Assess the information and decide the outcome](#)
- [Finalise the investigation and assessment](#)
- [Determine which Child Safety Service Centre will be responsible for case management](#)
- [Review an investigation and assessment outcome](#)

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## Child Safety Practice Manual

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# Undertake an investigation and assessment

## Content updates

This page was updated on 04 May 2023. To view changes, please see [page updates](#)

## Undertake an investigation and assessment

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Carry out the following actions for each investigation and assessment to assess whether a child is in need of protection:

- Plan the investigation and assessment. (Refer to [Plan the investigation and assessment](#).)
- Commence the investigation and assessment within the response priority timeframe. (Refer to [Commence the investigation and assessment](#).)
- Inform the parents about the allegation of harm. (Refer to [Inform the parents about the allegation of harm](#).)
- Sight and carry out interviews with each subject child—unless the contact with other professional differential pathway is used or an exception applies. (Refer to [Carry out interviews](#), [Consider the differential pathway](#) and [Exceptions to contact or interviews with the child](#).)
- Interview the parents, other adults and alleged persons responsible. (Refer to [Interview the parents, other adults and alleged persons responsible](#).)
- Carry out a safety assessment. (Refer to [Carry out a safety assessment](#).)
- Assess whether the child has suffered significant harm or is at risk of significant harm. (Refer to [Assess the information and decide the outcome](#).)
- Decide if a child is in need of protection. (Refer to [Decide if a child is in need of protection](#).)
- Record the investigation and assessment. (Refer to [Record the investigation and assessment](#).)
- Inform at least one of the child’s parents about the outcome of the investigation and assessment—unless using discretionary compliance under the *Child Protection Act 1999*, section 15. (Refer to [Inform the parents of the outcome](#).)

In addition, consult the senior team leader to determine which of the following actions are relevant to completing the assessment of the child’s need for protection:

- Respond if a parent will not consent to actions required. (Refer to [Respond if a parent will not consent to actions required—temporary assessment order](#) or [Respond if a parent will not consent to actions required—court assessment order](#).)
- Refer the family to the SCAN team. (Refer to [Consider a Suspected Child Abuse and Neglect team referral](#).)
- Arrange a medical examination. (Refer to [Consider a medical examination](#).)
- Consider family-led decision making for an Aboriginal or Torres Strait Islander child for the purpose of deciding if the child in need of protection decision. (Refer to [Consider family-led decision making](#).)
- Negotiate an assessment care agreement. (Refer to [Consider an assessment care agreement](#).)
- Use the contact with other professional differential pathway. (Refer to [Consider the differential pathway](#).)
- Respond to any relevant specific matters. (Refer to [Respond to specific matters](#).)
- Seek additional information from other sources where required to inform the assessment. (Refer to [Gather information from other sources](#).)
- Consider family-led decision making for an Aboriginal or Torres Strait Islander child for the purpose of deciding the child in need of protection decision. (Refer to [Decide the investigation and assessment outcome](#).)
- Consider the needs of an unaccompanied humanitarian minor. (Refer to [Consider the needs of an unaccompanied humanitarian minor](#).)

For other actions specific to an investigation and assessment relating to an unborn child, refer to [Unborn child](#).

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# Plan the investigation and assessment

## Content updates

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## Plan the investigation and assessment

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The first step in investigation and assessment is planning. This involves:

- identifying relevant activities
- involving key people and organisations
- coordinating interviews
- deciding roles and responsibilities
- considering sources of information.

To identify the relevant activities:

- Refer to the practice considerations outlined in the practice guide [Planning the investigation and assessment](#).
- Consider whether the information requires a Police referral to be completed. (Refer to [Refer the matter to the Queensland Police Service](#).)
- Consider if a joint response with the QPS may be required and if so, contact the Child Safety planning officer who will consult with the QPS. (Refer to [Consult with the Queensland Police Service to decide if there will be a joint response](#).)
- Consider staff safety and address any safety issues.
- Consult the senior team leader or senior practitioner for complex matters, if needed.
- Consider any cultural factors relevant to the investigation and assessment, and seek further cultural advice if needed. (Refer to [Plan contact with an Aboriginal or Torres Strait Islander child](#).)
- Ensure all key people are involved in the investigation and assessment and clarify their roles and responsibilities, including tasks to be carried out by another CSSC or another agency, if relevant.
- Consider if the matter meets the criteria for a SCAN team referral. (Refer to [Consider a Suspected Child Abuse and Neglect team referral](#).)
- Decide if an ASC co-response is appropriate. (Refer to [Consider an Assessment and Service Connect co-response](#).)

- For a child who has been assessed as unsafe by an intensive family support service, contact the service to coordinate roles and responsibilities.
- Consult the senior team leader and the OCFOS lawyer, especially if a TAO, CAO or TCO is likely to be needed.
- Contact the designated adoption officer, Adoption and Permanent Care Services before commencing the investigation and assessment for an unaccompanied humanitarian minor.

After the plan is completed:

- Seek verbal approval of the plan from the senior team leader.
- Record the investigation and assessment plan in ICMS, before commencing the investigation and assessment if needed.

#### Practice prompt

If the child has a long-term or permanent guardian and the concerns relate to the long-term guardian's care of the child:

consult the senior team leader  
seek legal advice from OCFOS if required.

#### Further reading

Practice guide Planning the investigation and assessment

Procedure 1 Information about a child who is an unaccompanied humanitarian minor

Procedure 5 Long-term guardianship order to a suitable person

Staff safety guide for mindful practice.

## Plan contact with an Aboriginal or Torres Strait Islander child

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*The Child Protection Act 1999* requires that, when making a decision about an Aboriginal or Torres Strait Islander child, Child Safety considers the long-term effect of the decision on the child's identity and connection with their family and community. The decision must also be made in a way that:

- allows the full participation of the child and the child’s family group
- is appropriate to Aboriginal tradition or Island custom
- ensures active efforts are made to apply the Aboriginal and Torres Strait Islander Child Placement Principle:
  - prevention—Aboriginal and Torres Strait Islander children have a right to be brought up within their own family and community
  - partnership—Aboriginal and Torres Strait Islander persons have the right to participate in significant decisions about Aboriginal and Torres Strait Islander children
  - placement—Aboriginal and Torres Strait Islander children (subject to a child protection care agreement or a child protection order that grants custody or guardianship to the chief executive) have a right to be placed with a member of their family group
  - participation—Aboriginal and Torres Strait Islander children and their parents and family members have a right to participate, and be enabled to participate, in administrative and judicial decision-making processes
  - connection—Aboriginal and Torres Strait Islander children have a right to be supported in developing and maintaining a connection with the child’s family, community, culture, traditions and language, particularly where a child is in the care of a person who is not an Aboriginal or Torres Strait Islander person.

Before contacting or interviewing an Aboriginal or Torres Strait Islander child and family:

- engage the Family Participation Program to determine whether, and at what stage of the investigation and assessment process, it plans to visit the family (refer to [Engage the Family Participation Program](#))
- consider consulting one or more of the following to discuss ways to engage the child and family, and if needed, strategies to identify a suitable care arrangement:
  - the cultural practice advisor
  - the regional Aboriginal or Torres Strait Islander practice leader
  - a local Aboriginal or Torres Strait Islander community representative (sharing non-identifying information).

#### Attention

Action to commence an investigation and assessment or action to ensure a child’s safety is not to be delayed for the purpose of engaging the Family Participation Program.

Therefore, do not engage the Family Participation Program about accompanying Child Safety to the initial home visit for a notification with a 24 hour response timeframe, unless:

'other action' has already been taken to commence the investigation and assessment (refer to Take action to commence an investigation and assessment within 24 hours) and the senior team leader considers it is in the child's best interest.

## Engage the Family Participation Program

### *Role of the Family Participation Program*

The Family Participation Program may accompany Child Safety to visit a family at any stage of an investigation and assessment, including:

- the initial home visit to the child and family
- subsequent home visits.

The Family Participation Program may also visit a family without Child Safety, after Child Safety has interviewed the child and family and the family has agreed to contact by the Family Participation Program. (Refer to the practice guide [Family Participation Program Referrals for Aboriginal and Torres Strait Islander family-led decision making.](#))

The purpose of the Family Participation Program being present at the initial home visit during an investigation and assessment is to:

- talk to the family about:
  - how the Family Participation Program may assist them to meaningfully participate in decision making and planning when child Safety is involved with their family
  - the roles that the Family Participation Program can undertake, including:
    - facilitating family-led decision making (Refer to [Consider family-led decision making](#))
    - family mapping
    - being the child and family's independent person, in certain circumstances, with their consent (Refer to Procedure 5 [Arrange for an independent person to facilitate the child's and family's participation.](#))
- seek the family's consent to work with the Family Participation Program and commence the referral process (The referral may be initiated by the family or by Child Safety.)

- assist the family to understand Child Safety processes.

In addition, if during the initial visit an immediate safety plan is needed, the Family Participation Program may facilitate the family's participation in the development of the plan—if the family agrees. (Refer to [Develop an immediate safety plan.](#))

Child Safety is responsible for all aspects of the investigation and assessment and 2 officers will conduct interviews. (Refer to [Requirement for two officers to conduct interviews.](#))

### Note

If the Family Participation Program accompanies Child Safety to the initial visit to a child and family, and the CSOs need to exercise powers delegated by the chief executive under the Child Protection Act 1999, the Family Participation Program does not have authority to participate in the use of powers even if they are at the home when the action is taken.

### ***Plan with the Family Participation Program***

Engage the Family Participation Program to jointly plan whether they will accompany Child Safety on the initial home visit during an investigation and assessment regarding an Aboriginal or Torres Strait Islander child or unborn child, unless:

- a joint response with the QPS is needed
- a CSO will use, or is likely to use, powers under the *Child Protection Act 1999*, to:
  - enter and search ([section 16](#))
  - have contact with children at school or a care service ([section 17](#))
  - take a child into custody ([section 18](#))
  - move a child to a safe place ([section 21](#))
- an ASC co-response is planned. (Refer to [Consider an Assessment and Service Connect co-response.](#))

For all investigation and assessments regarding an Aboriginal or Torres Strait Islander child (including those where the Family Participation Program has not been, or will not be, present at the initial visit, such as in the circumstances listed above) engage the Family Participation Program as soon as possible to determine whether, and at what stage of the investigation and assessment process, it plans to visit the family.

Use a partnered planning approach to develop local arrangements for engaging with the Family Participation Program. For example, a senior team leader responsible for

investigations and assessments and the Family Participation Program may establish regular meetings to discuss multiple investigation and assessments at a time.

When engaging with staff from the Family Participation Program, give them:

- the notified concerns (but do not disclose the notifier's details)
- a summary of the family's child protection history.

The Family Participation Program will:

- advise Child Safety in a timely way, whether and at what stage of the investigation and assessment it plans to have contact with the family (either at or after the initial visit by Child Safety) taking into account the response priority timeframe or
- advise the reason it does not intend having contact with the family during the investigation and assessment.

Child Safety will record the outcome of the engagement with the Family Participation Program in the investigation and assessment planning section of the investigation and assessment event in ICMS in a *case discussion/decision* case note with the description 'FPP engagement'.

To meet the necessary investigation and assessment response timeframes, at times Child Safety will need to interview the child and family and then engage the Family Participation Program. When this occurs and whenever the Family Participation Program does not accompany Child Safety on the initial home visit to a family:

- give the family the brochure [Family Participation Program – Working with you to help you lead decision making about your child](#) and the contact details of the family's local Family Participation Program
- talk with the family about whether they agree to the Family Participation Program contacting them to discuss their service and how they may support and assist the family during any future contact with Child Safety
- advise the Family Participation Program whether the family agreed to being contacted by their service.

#### Note

If the family does not want to be contacted by the Family Participation Program, then this will not occur.

## Refer the family to the Family Participation Program

After the Family Participation Program has spoken to a family and the family has given consent to work with the Family Participation Program, either:

- complete a Family Participation Program referral for family mapping or for family-led decision making using the [Queensland family support referral](#) portal or
- confirm that the family has self-referred and
- give (or confirm the Family Participation Program has already received) the following information to support the referral:
  - the notified concerns (excluding notifier details)
  - the child protection history
  - a summary of the current investigation and assessment
  - any other information known that will assist the Family Participation Program to undertake their role, such as details of family relationships, genogram or the completed [Collaborative assessment and planning framework](#) tool.

### Note

Before making contact with the family, some Family Participation Program services may require Child Safety to first:

speak to the family and gain consent for a referral to the Family Participation Program for a family-led decision making process for the decision about whether the child is in need of protection  
and  
make the referral using the Queensland family support referral portal.

Check local arrangements for referral to the Family Participation Program before talking to the family about a referral.

## Resolve issues about an investigation and assessment involving Child Safety and the Family Participation Program

The Family Participation Program and Child Safety will seek to resolve any issues that arise about an investigation and assessment involving Child Safety and the Family Participation Program at an operational level. If there are concerns about action taken during, or the



outcome of, an investigation and assessment involving Child Safety and the Family Participation Program:

- The senior team leader will liaise with an equivalent level staff member from the Family Participation Program.
- If the matter cannot be resolved at the senior team leader level, the CSSC manager will liaise with the Family Participation Program manager.

#### Note

The CSSC manager, in consultation with the senior team leader and senior practitioner, will make the final decision about matters relating to Child Safety's statutory responsibilities. Final responsibility for the decision about a child's need for protection remains with Child Safety.

Established local dispute resolution processes and governance structures are to be used to resolve disputes between Child Safety and the Family Participation Program. The Family Participation Program may also access Child Safety's Complaints process, if not satisfied with the local dispute resolution.

#### Further reading

Consider family-led decision making

Procedure 5 Enable participation of Aboriginal and Torres Strait Islander peoples in decision making

Practice guide Culturally capable behaviours

Tool Family Participation Program Involvement during an investigation and assessment

Practice guide Family Participation Program Referrals for Aboriginal and Torres Strait Islander family-led decision making

Fact sheet Family Participation Program

Practice kit Safe care and connection.

## Requirement for two officers to conduct interviews

When interviewing a child, parent and other family members, the CSO, as an authorised officer, will be accompanied by:

- another CSO
- a police officer, for a joint response,
- an ASC co-responder, for a co-response.

If another CSO is not available, and the matter is not suitable for a joint response or co-response, a senior team leader may decide that one of the following will accompany the CSO to conduct interviews:

- a cultural practice advisor
- a child safety support officer
- a student undertaking field education.

The decision must consider the nature and complexity of the investigation and assessment and whether the person's involvement in the investigation and assessment would impact any later work with the family.

This ensures another person is available to observe, assist with information gathering and witness the contact or interview.

### Attention

Only another CSO or a police officer can accompany the authorised officer when the investigation and assessment:

- is complex
- is likely to involve conflict
- may involve the commission of a criminal offence in relation to a child.

Only an authorised officer may use delegated powers under the *Child Protection Act 1999*, sections [16](#), [17](#) and [18](#).

If there are serious safety issues for staff, contact the QPS for support and assistance.

## Consider an Assessment and Service Connect co-response

Assessment and Service Connect (ASC) is a funded service that partners with Child Safety to carry out investigation and assessments. Refer to the [Assessment and Service Connect \(ASC\) Operational Policy Guidelines](#).

The role of the ASC provider is to:

- support Child Safety in engaging with the child and their family
- enable, support and inform a holistic response to the child and their family
- carry out a targeted assessment of a family's support needs
- assist the child and their family to access the support and services they need.

The CSO is responsible for all other aspects of the investigation and assessment.

Do not plan an ASC co-response if:

- a joint response with the QPS is needed
- a CSO will use, or is likely to use, powers under the *Child Protection Act 1999*, to:
  - enter and search ([section 16](#))
  - have contact with children at school or a care service ([section 17](#))
  - take a child into custody ([section 18](#))
  - move a child to a safe place ([section 21](#))
- the child is subject to ongoing intervention
- the investigation and assessment has commenced and the safety assessment indicates an immediate harm indicator or danger is present in the home and the child is unsafe.

Consider an ASC co-response for all other investigation and assessments including for:

- an unborn child
- notifications with a 24-hour response timeframe.

### Note

To meet the necessary investigation and assessment response timeframes, Child Safety may commence the investigation and assessment and then engage an ASC provider.

## Refer to an Assessment and Service Connect provider

Refer to an ASC provider at any time during an investigation and assessment. To do so:

- seek approval from the senior team leader
- give the ASC provider:
  - the notified concerns (but do not disclose the notifier's details)
  - a summary of the family's child protection history
- confirm that the ASC provider received the referral.

Once the ASC provider receives the referral, they will:

- advise Child Safety in a timely way, whether they accept the referral, taking into account the response priority timeframe
- advise the reason if they do not accept the referral.

The CSO will record the reason for a referral not being accepted in the investigation and assessment event in ICMS.

## Plan with the Assessment and Service Connect provider

Start planning with the ASC provider as soon as possible to decide:

- how to obtain the family's consent for the ASC co-response (for example, by telephone prior to, or on the first visit with the family)
- if the first visit will be pre-arranged and who will attend
- the time and location of the visit
- the roles and responsibilities of the CSO and ASC provider, including responsibility for note-taking
- how the ASC co-response will meet the investigation and assessment commencement and completion timeframes
- the plan for staff safety and wellbeing
- actions that will need to be taken if the family does not consent to the ASC co-response when both the CSO and ASC provider are at the family home.

### Further reading

Assessment and Service Connect (ASC) Operational Policy Guidelines

Staff safety guide for mindful practice

Practice guide Information sharing: Assessment and service connect.

## Obtain consent for an Assessment and Service Connect co-response

An ASC co-response can only proceed with the family's consent. If Child Safety initially contacts the family and obtains consent to the ASC co-response, the ASC provider can then visit the family without Child Safety. If consent is not given, the ASC provider will not be further involved in the investigation and assessment.

The first contact with the family must involve Child Safety. To seek consent from the family for the ASC co-response, Child Safety can:

- telephone the family
- visit the family
- visit the family together with the ASC provider.

### Practice prompt

When Child Safety has obtained consent from the family by telephone for an ASC provider to conduct the initial visit without Child Safety, request that the ASC provider tells the CSO when they intend to visit the family for the first time. The CSO can then be available at the CSSC at the time of the visit so they can attend if needed.

## Use delegated powers during an Assessment and Service Connect co-response

Staff from the ASC provider are not authorised officers. They cannot use powers delegated by the chief executive to an authorised officer under the *Child Protection Act 1999*.

If, during an ASC co-response, the use of powers is required, the CSO may either:

- take action or
- arrange for another CSO or police officer to attend before taking action.

The ASC provider must not be involved when powers are being used, even if the ASC cannot leave the location—for example because they are travelling in the same vehicle as the CSO—or cannot leave the area quickly.

## Resolve a dispute about an Assessment and Service Connect co-response

The ASC provider and Child Safety will seek to resolve disputes at an operational level. If there are concerns about action taken during an ASC co-response or the outcome of an ASC co-response:

- The senior team leader will liaise with an equivalent level staff member from the ASC provider.
- If the matter cannot be resolved at the senior team leader level, the CSSC manager will liaise with the ASC service manager.

### Note

The CSSC manager, in consultation with the senior team leader and senior practitioner, will make the final decision about matters relating to the role of the CSO. Final responsibility for the decision about a child's need for protection remains with Child Safety.

Established local dispute resolution processes and governance structures are to be used to resolve disputes between Child Safety and ASC providers.

## Refer the matter to the Queensland Police Service

Where Child Safety reasonably believes that harm to a child may involve the commission of a criminal offence relating to the child (*Child Protection Act 1999*, [section 14\(2\)](#)), it has a legislative responsibility to immediately notify the QPS. This applies whether or not Child Safety suspects the child is in need of protection (*Child Protection Act 1999*, [sections 14\(2\) and \(3\)](#)). Refer to the practice guide [Schedule of criminal offences](#).

### Attention

All adults in Queensland have a legal obligation under the Criminal Code Act 1899 to report sexual offending against a child by another adult to the QPS.

Referring a matter under the Child Protection Act 1999, section 14(2) satisfies this obligation.

If a Police referral is required and has not been completed, **immediately** notify the QPS. To do this:

- complete a [Police referral](#)
- provide a copy of the child concern report or notification, if relevant, without notifier details
- contact the QPS by phone to confirm receipt of the referral.

#### Note

The Child Safety and QPS planning officers will decide whether a joint response will occur. (Refer to Consult with the Queensland Police Service to decide if there will be a joint response.)

Information about a notifier's identity cannot be provided to the QPS when making a referral or during a joint response to an investigation and assessment, except to the extent allowed by the *Child Protection Act 1999*, sections [186A](#) and [186B](#).

There may be circumstances where it is necessary to provide the QPS with notifier information or information that may lead to the identification of a notifier, to perform a function under the *Child Protection Act 1999*. This information, may be disclosed to the QPS in accordance with *Child Protection Act 1999*, section [186A\(2\)](#).

#### Note

If the QPS, or a police officer from another jurisdiction request notifier information, refer to Respond to a request for notifier information from police.

## Consult with the Queensland Police Service to decide if there will be a joint response

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The Child Safety planning officer and the QPS planning officer consult about potential joint response matters. A joint response with the QPS will be carried out only if:

- there is an allegation of a criminal offence committed against a child that requires investigation by the QPS, and
- the concerns reach the threshold for recording a notification, regardless of whether they have a 24 hour, 5 or 10 day response priority timeframe, and

- Child Safety and the QPS have discussed the matter and agreed a joint response is appropriate.

A joint response allows each agency to meet their statutory responsibilities while addressing the protection needs of the child. Child Safety investigates and assesses a child's need for protection and the QPS investigates criminal matters. Refer to the [Child Protection Joint Response Team Policy Guidelines](#).

A joint response commences when planning officers verbally agree that a matter requires a joint response.

Child Safety will continue to meet its core business responsibilities regarding investigation and assessments. The ability to commence an investigation and assessment within the response priority timeframe is not to be impacted by the need for a joint response.

### Plan and coordinate the joint response

The Child Safety and QPS planning officers will identify and prioritise matters that meet the criteria for a joint response. Where possible, an investigation and assessment requiring a joint response will be allocated to a CSO who has completed ICARE training.

Once an investigation and assessment has been allocated, contact the QPS investigator to plan the joint response. Planning can occur face-to-face or over the phone. Joint planning includes:

- clarifying roles and responsibilities and the outcomes that both agencies plan to achieve
- identifying the issues and difficulties likely to be encountered
- determining whether to involve other specialist workers, for example, interpreters
- determining whether an urgent medical examination or medical attention will be required
- deciding who to interview
- deciding where and when the interviews will occur
- developing contingency plans for responding to disclosures, unexpected events or difficulties that may impact upon the investigation and assessment process
- agreeing to an end date for the joint response, to allow information sharing to continue between the two agencies for the period required for both agencies to undertake key actions. Refer to the [Child Protection Joint Response Team Policy Guidelines](#).

Before commencing a joint response:

- seek the senior team leader's verbal approval of the agreed plan
- consult the QPS before making any significant change to the agreed plan.



If the matter requires urgent attention and the QPS is unable to attend within the required response timeframe:

- notify the QPS of the decision to proceed and the reason for doing so
- keep the QPS informed and updated during the investigation and assessment.

The senior team leader is responsible for:

- approving the investigation and assessment proceeding without the QPS
- making sure the QPS has been notified of the decision to proceed in their absence
- making sure any action by Child Safety does not interfere with a QPS investigation into a criminal offence.

Where additional time is required to undertake key actions, negotiate a later end date for the joint response with the police investigator. Refer to the [Child Protection Joint Response Team Policy Guidelines](#).

#### Practice prompt

Regularly share information with the QPS throughout a joint response and, where applicable, after the investigation and assessment is completed (for example, regarding criminal court proceedings and outcomes).

## Interview the child and record evidence

Joint interviews enable both agencies to obtain the child's information firsthand and minimise the need for the child to repeat their story. If an interview with a child is to be conducted in line with the *Evidence Act 1977*, [section 93A](#):

- the QPS investigator will lead the interview to gather evidence for the prosecution of criminal offences
- the CSO will participate in the interview to assess the child's protective needs.

Before the interview, the CSO and the QPS will discuss all relevant material and the most appropriate and effective approach to conducting the interview.

If not interviewing with the QPS:

- Follow existing investigation and assessment procedures for record keeping.
- Do not use video or audio equipment to record the child's interview. (This includes ICARE-trained authorised officers).
- File any written records made during the interview on the child's paper file.
- Provide a copy of the interview notes to the QPS, if relevant.

If, during the interview, the child begins disclosing incidents of harm relating to a criminal offence, and stopping the interview is likely to hinder the disclosure of information or affect the safety of the child, continue the interview and contact the QPS immediately after the interview.

In this situation:

- make efforts to ensure that the child is supported and will feel safe to speak at a later time
- gather sufficient information to be able to assess the child's immediate safety and take any necessary action to ensure the child's safety, including use of the *Child Protection Act 1999*, [section 18](#), or a TAO
- provide all interview notes to the QPS.

The CSO may also be required to provide a statement to the QPS about the disclosures made by the child during the interview. The QPS is likely to lead, and record, subsequent interviews with the child. Document details of the interview in the *Record of interview* in ICMS.

## Interview the alleged offender

Following a child's disclosure of harm, the QPS policy requires police officers to conduct an interview with the possible offender. During a joint response, the QPS will decide who will interview the alleged offender and when the interview will occur.

If the alleged offender is a parent of the child, the QPS may, where appropriate, permit a CSO to observe the interview from a viewing room at a police station and take relevant notes. If the interview is to occur at the parents' residential address, the QPS may agree to the interview being conducted in the presence of the CSO.

If the QPS conducts an interview with a parent without a CSO present, or with the CSO only observing the interview, the CSO will interview both parents before finalising the investigation and assessment.

### Practice prompt

If the QPS is not able to attend an interview, Child Safety is still responsible for investigating and assessing the child's need for protection, but without addressing the criminal matters with the parents.

## Obtain information or evidence from the Queensland Police Service

If the CSO requires a copy of the taped interview or information obtained during an interview, the CSSC manager will forward a [Section 159N information request](#) form to the relevant QPS officer.

If the QPS agrees, it may be possible to view the video evidence at the police station.

### Attention

An audiotape provided to Child Safety remains the property of the QPS and must not be released to a third party (but may be subject to disclosure during Childrens Court proceedings). Refer any person seeking access to the audiotape who does not work for Child Safety to the QPS.

## Resolve differences of opinion

Due to the different roles and legislative responsibilities and priorities of CSOs and police officers, differences of opinion may be experienced at times. Resolve these differences as quickly as possible, with the safety of children as the key priority.

## Related forms, templates and resources

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### [Child Protection Joint Response Team Policy Guidelines](#)

Resource 10 June 2021

*This is a secure resource. Only authenticated users may access this content.*

### [Collaborative assessment and planning framework](#)

Resource 29 July 2019

*This is a secure resource. Only authenticated users may access this content.*

[Complete an online referral to the Family Participation Program](#)

Resource 18 March 2020

[Culturally capable behaviours](#)

Resource 16 September 2019

[Family Participation Program: Involvement during an investigation and assessment](#)

Resource 30 June 2020

[Family Participation Program Referrals for Aboriginal and Torres Strait Islander family-led decision making](#)

Resource 30 June 2020

[Family Participation Program – Working with you to help you lead decision making about your child](#)

Resource 5 February 2020

[Information sharing: assessment and service connect](#)

Resource 18 September 2019

[Planning the investigation and assessment](#)

Resource 17 September 2019

### [Police referral](#)

**Form** 29 July 2019

*This is a secure resource. Only authenticated users may access this content.*

### [SCAN team referral - SCAN team form 1](#)

**Form** 29 June 2020

### [Schedule of criminal offences](#)

**Resource** 17 September 2019

*This is a secure resource. Only authenticated users may access this content.*

### [Section 159N information request](#)

**Form** 29 July 2019

*This is a secure resource. Only authenticated users may access this content.*

### [Staff safety guide for mindful practice](#)

**Resource** 24 February 2020

*This is a secure resource. Only authenticated users may access this content.*

### [Suspected Child Abuse and Neglect \(SCAN\) Team System Manual](#)

**Resource** 15 August 2019

*This is a secure resource. Only authenticated users may access this content.*

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# Commence the investigation and assessment

## Commence within the response priority timeframe

For each notification a *response priority* is completed at intake. The response priority recommends a timeframe for Child Safety to commence an investigation and assessment. It takes into account multiple factors about the child's situation to assess the immediate risk of harm to the child and prioritise the response.

### Time sensitive

Commence the investigation within the response priority timeframe, which begins when the decision is made that the concerns meet the threshold for a notification.

Do not delay the commencement of the investigation and assessment based on whether the notification is approved in ICMS.

The response timeframe will be one of the following:

- 24 hours
- 5 days
- 10 days.

For an *unborn child* notification, the response timeframe will be either:

- 5 days—if the birth is likely to be within 5 business days of the decision to record a notification or
- 10 days—for all other matters.

### Note

A 5 or 10 day response refers to business days.

### Further reading

Procedure 1 Complete the response priority.

## Take action to commence an investigation and assessment within 24 hours


To commence an investigation and assessment within 24 hours, sight and interview the subject child (or one of the subject children) as age and developmentally appropriate. Refer to [Sight and interview the child](#).

In exceptional circumstances only, when unable to sight and interview a subject child, take one of the following *other actions* to commence the investigation and assessment within 24 hours:

1. Arrange for a police officer or health professional to have contact with a subject child and provide information to Child Safety about the child's safety.
2. Gather sufficient information to make an assessment of the child's immediate safety by:
  - interviewing a parent
  - contacting and receiving information from a government or non-government agency.
3. Take action in rural and remote areas when all other actions for commencement are not possible due to geographical distance or seasonal conditions preventing access to the area. As a matter of urgency:
  - seek information about the safety of the child from another service or professional who has regular contact, or has had recent contact with the child
  - take immediate action to enable the commencement of the investigation and assessment—this may include:
    - organising transport
    - arranging for the child to be sighted.

### Practice prompt

Record the date of the above actions as the commencement date of the investigation and assessment.

 Tip

Exceptional circumstances may include:

'sorry business' delaying access to an Indigenous community  
the CSAHSC being unable to commence the investigation and assessment due to distance  
weather conditions preventing access to a community  
lengthy travel time and distance in rural and remote areas.

## Take action to commence an investigation and assessment within 5 or 10 days

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To commence an investigation and assessment within 5 or 10 days, take one of the following actions:

- sight and interview the subject child (or one of the subject children) as age and developmentally appropriate. Refer to [Sight and interview the child](#)
- sight and interview the pregnant woman
- seek and receive new information that informs the assessment about the safety of the child or the safety of the unborn child after he or she is born:
  - from an external agency, including:
    - a government or non-government agency
    - a service provider, including National Disability Insurance Agency (NDIA) and National Disability Insurance Scheme (NDIS) providers
    - a health professional, such as a general practitioner.
  - through any of the following methods:
    - email exchange
    - phone or face-to-face discussion
    - receipt of a *Section 159N information request*
    - a SCAN team meeting (if the SCAN team referral criteria is met)
    - a locally convened panel process with relevant partners.

Advise the person from the external agency how the information will be used and disclosed. If the person who is contacted for information was the notifier, tell them the new information they provide:

- forms part of the investigation and assessment
- is not covered under the confidentiality of notifier provisions, under the *Child Protection Act 1999*, [section 186A](#).

Refer to the practice guide [Commencing an investigation and assessment within 5 or 10 days](#).

#### Attention

When actions other than sighting and interviewing a subject child or pregnant woman are undertaken to commence an investigation and assessment:

the information received cannot be used to downgrade the notification to a child concern report

all subject children are to be sighted, and where appropriate, interviewed by a CSO before completing the investigation and assessment—unless the contact with other professional differential pathway is used or an exception applies. Refer to Exceptions to contact or interviews with the child

record the date the action is taken as the date of commencement of the investigation and assessment.

The following actions **do not** constitute commencement:

- completing and sending a *Section 159N information request*
- engaging the Family Participation Program about whether and when they will visit a family during an investigation and assessment
- referring the matter to a SCAN team
- allocation of the investigation and assessment by the senior team leader
- an unsuccessful attempt to visit or contact the child or family
- any information received before the decision to record a notification
- information received and recorded as additional notified concerns.

#### Practice prompt

If there are serious concerns for staff safety, and the QPS is unavailable to accompany staff within the response timeframe, do not sight and interview the subject children until the QPS is available to assist.

Record the following in the investigation and assessment event in ICMS:

- 'other action' taken to commence the investigation and assessment (as already outlined)
- all attempts made to commence the investigation and assessment within the timeframe and why this was not possible—for example, geographical distance, lack of access or serious concerns for staff safety.

## Inform the parents about the allegation of harm

A CSO or police officer carrying out an investigation and assessment must:

- give details of the alleged harm or risk of harm to at least one of the child's parents (*Child Protection Act 1999*, [section 15](#))
- consider giving the information to both parents, especially if parents reside separately
- not disclose the notifier's details.

### Attention

When providing information to a parent regarding allegations of domestic and family violence, consider the safety of the victim when disclosing the allegations to an alleged perpetrator.

### Note

A parent is the child's mother, father or someone else (other than the chief executive) having or exercising parental responsibility for the child. This includes a person who, under Aboriginal tradition or Torres Strait Island custom, is regarded as the parent of the child or a long-term guardian or permanent guardian (*Child Protection Act 1999*, section 11).

If the concerns are about a long-term guardian's or permanent guardian's care of a child:

- give details, to at least one of the guardians, of the alleged harm or risk of harm
- contact at least one of the child's parents—unless this is not considered to be in the child's best interest—taking into account:

- the nature and extent of the child's connection with their parents
- the evidence supporting the allegation
- any other matter—for example, if a parent's knowledge of this allegation of harm will have a detrimental effect on the child and the stability of the living arrangements (*Child Protection Act 1999*, [section 15\(3\)](#)).

A CSO or police officer does not need to provide information to a parent (*Child Protection Act 1999*, [section 15\(3\)](#)) if:

- someone may be charged with a criminal offence for the harm to the child, and providing information to a parent may jeopardise an investigation into the offence
- providing information to a parent may expose the child to significant harm.

Before providing information to the parents, discuss with the QPS what information will be provided if:

- there is a criminal matter or an ongoing police investigation
- the provision of information may jeopardise the due process of the criminal matter.

The reason and decision to not give parents information about allegations must be:

- approved by a senior team leader
- recorded in ICMS.

#### Tip

Under the *Child Protection Act 1999*, section 186A, a person who receives a notification, or a person who becomes aware of the identity of the notifier, must not disclose the identity of the notifier, or information from which the identity of the notifier could be deduced, to another person.

## Consider privacy - general

Always make decisions about sharing information in favour of the wellbeing and best interests of a child. *The Child Protection Act 1999* overrides the Queensland Government's privacy principles about how personal information is collected, disclosed, used and stored.

If parents are estranged or no longer residing together:

- only provide information specific to the alleged harm to the child

- do not release information about one parent’s general circumstances to the otherparent—for example, their health or medical treatment, employment or finances, or issues in the extended family.

Consult with the senior team leader or senior practitioner if there are concerns about providing information to parents. If necessary, the senior team leader will seek advice from Legal Services.

#### Further reading

Information privacy principles and other obligations.

## Consider privacy - domestic and family violence


When working with individuals who have perpetrated violence and family members who have been affected by violence, consider:

- what information, if given to the perpetrator during the investigation and assessment, could compromise the safety of the victim or child—for example:
  - the location or address details of the victim or their extended family members
  - information that identifies the school the child attends
  - photographs that may identify the location or area in which a victim or child lives
- how interventions during the investigation and assessment may affect the safety of the victim and their children
- whether a *Significant DFV threat* alert should be recorded in ICMS. Refer to [Record an alert for significant domestic and family violence](#).

## Consider privacy - criminal matters

If Child Safety obtains information that an adult in the household has an alleged offence, charge or conviction that presents an unacceptable risk to the child’s safety:

- Tell the adult that the information has been obtained, and discuss the worries for the child’s safety.
- Encourage the person to share relevant information with the parents residing in the household.


 **Note**

Child Safety has a duty to inform the relevant parent or parents about these concerns.

CSOs do not have the authority to disclose that a person is a 'reportable offender' to another person. Information about criminal offences, charges or convictions of a person may be disclosed if in the best interests of a child. (Refer to Procedure 1 Information about a reportable offender.)

If the person refuses to disclose their criminal history to the parents:

- give the parent information about the person's criminal history, **if** releasing the information is considered to be in the child's best interests, including about:
  - offences, charges or convictions
  - charges or convictions under the [Child Protection \(Offender Reporting and Offender Prohibition Order\) Act 2004](#)
- assess the parent's ability and willingness to protect the child from the risk posed, based on their response to the concerns.

 **Tip**

To clarify what information can be shared with a parent, consult the senior team leader or senior practitioner. If needed, the senior team leader will seek advice from Legal Services.

## Related forms, templates and resources

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### [Commencing an investigation and assessment within 5 or 10 days](#)

**Resource** 6 March 2020

*This is a secure resource. Only authenticated users may access this content.*



## [Temporary custody orders - information for parents](#)

Resource 24 February 2020

## [When child safety officers visit your home](#)

Resource 24 February 2020

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# Carry out interviews

## Content updates

This page was updated on 19 May 2023. To view changes, please see [page updates](#)

## Contact with the subject child

### Practice prompt

Use good communication and engagement skills to carry out the investigation and assessment with the cooperation and agreement of parents if possible.

As soon as possible, sight, interview and assess:

- each subject child
- any other child in the household identified during the investigation and assessment as having been significantly harmed, or as likely to be at unacceptable risk of significant harm. Record them as a subject child in the investigation and assessment event in ICMS.

Consider interviewing any other child:

- in the household who may have information about the notified concerns
- not in the household but present at the time of the notified concerns.

### Tip

Interviewing other children is important, as they may also have been harmed or be at risk of harm, and they may have information about the notified concerns.

## Arrange contact with the child

To arrange contact with the child:

- seek the permission of the child’s parents or
- use powers under the *Child Protection Act 1999*, [section 17](#) or
- obtain the authority of an assessment order to have contact with the child—only if the parents refuse to allow contact, or will not agree to work with Child Safety.

Contact with a child may occur either:

- by an unannounced visit or arranged appointment at the family home
- at other locations such as:
  - a hospital
  - a police station
  - a CSSC
  - the child’s school, child care or day care centre—only if necessary
  - another location suitable to the child and family and appropriate to the circumstances of the investigation and assessment.

To decide how and where to have contact with the child, consider:

- the seriousness of the allegations
- relevant child protection history
- any serious staff safety concerns that require the assistance of the QPS
- any communication supports the child may need
- culturally appropriate support needs of the child and family
- an appropriate location for an Aboriginal or Torres Strait Islander child, having regard to Aboriginal tradition or Island custom.

If a joint response with the QPS is to occur, make decisions about sighting and interviewing the child in consultation with the QPS, including whether the interviews will be recorded in line with the Interviewing Children and Recording Evidence (ICARE) procedures.

#### Further reading

Consult with the Queensland Police Service to decide if there will be a joint response

Practice guide Planning the investigation and assessment

Staff safety guide for mindful practice.

## Sight and interview the child

### Attention

CSOs are not to use video, audio equipment or mobile devices to record interviews with children. Store written interview notes on the child's paper file, as they are subject to disclosure during Childrens Court proceedings. A copy of the notes may be provide to the QPS to assist with a joint response.

Contact with a child is crucial in deciding their immediate safety. It also helps the child to feel safe and able to communicate their fears or concerns.

To sight the child:

- Have direct contact with the child—speak with or interview them, taking into account their age, developmental level and ability to communicate.
- Observe the child's:
  - physical and cognitive developmental stage
  - behaviour
  - reactions, presentation and interaction with others, including the parent.

Before interviewing the child, consider:

- whether an interview should occur—taking into account their age, developmental level and ability to communicate
- your responsibility to help the child feel safe and supported during the interview, including weighing up whether:
  - the child wants a support person present
  - having a support person present is appropriate
  - having another person present may reduce the likelihood of the child disclosing abuse, especially if the person holds a position of authority over the child.

#### Practice prompt

If a support person is to be present in the interview, help the child choose an appropriate adult who is not their parent or the alleged person responsible. Talk to the support person about their role in the interview.

#### Further reading

Practice guide Physical and cognitive developmental milestones

Practice guide The role of a support person

Practice kit Child sexual abuse.

If, during the interview, it is evident that a child subject to a long-term guardianship order to a person (other than the chief executive) no longer resides in the direct care of the guardian, take specific actions outlined in Procedure 5 [Respond when the child is no longer in the long-term guardian's direct care](#).

### ***Exceptions to contact or interviews with the child***

In exceptional circumstances, it may be inappropriate or not possible to interview the child. Examples may include if the child:

- has a serious or terminal illness
- refuses to be sighted or interviewed after all reasonable attempts have been exhausted.

To seek approval to not interview or sight the child:

- consult with the senior team leader
- document the reasons in ICMS.

### **Note**

If the differential pathway contact with other professional is used, another professional may sight and interview one subject child. Refer to Consider the differential pathway. Record the use of the differential pathway in the Assessment and outcome form in ICMS.

### ***Sight a child's physical injuries***

If physical injuries to a child are suspected or alleged:

- Decide whether to sight the injury or injuries or arrange for a medical examination so a medical practitioner can sight the injury. This will depend on the nature and location of the injury and age of the child. (Refer to [Consider a medical examination](#).)

- Only sight an injury with a second officer or other professional present—do not sight the injury when alone with:
  - a child
  - a child and their parent.
- Consider the child's age, gender and comfort level when deciding where and when to sight the injury.
- Ask the parent, carer or the child to adjust or remove whatever clothing is necessary to see the alleged injury. Do not undress or adjust the child's clothing yourself.
- Document details of the injury, including the location, size and colour, as relevant.
- Consider whether the injury needs to be photographed (*Child Protection Act 1999*, [section 181](#)).

If parents do not consent to the alleged injury being sighted, and seeing the injury is important to the investigation and assessment:

- tell the parents that the injury needs to be seen and why
- negotiate with the parents about the most suitable way to do this
- consult the senior team leader and the OCFOS lawyer as soon as possible about further action, including the need for an assessment order to allow a medical examination to occur. (Refer to [Respond if a parent will not consent to actions required—temporary assessment order](#) or [Respond if a parent will not consent to actions required—court assessment order](#).)

## Contact with a child without parental consent - section 17

The *Child Protection Act 1999*, [section 17](#), gives a CSO or police officer the power to have contact with a child at a school, or place where child care is provided, to investigate allegations, without the parents' knowledge.

Only use powers under the *Child Protection Act 1999*, [section 17](#), if:

- the parents' prior knowledge of the interview will compromise the safety of the child or interfere with the investigation and assessment
- it is in the child's best interest for a CSO or police officer to have contact with the child before the parents are told about the investigation and assessment.

Examples include:

- a joint interview being conducted with the QPS requiring the preservation of the child's evidence
- the child being likely to be at greater risk if the parents are interviewed first
- concerns existing about sexual abuse by a parent when there is reason to believe that:

- a parent will influence the child to withhold information or retract information already given
- the child would not be supported by a parent and is likely to be harmed or adversely influenced during the investigation and assessment process
- the child having made a disclosure and more detailed information being needed before interviewing the parents
- the parents being unavailable and delaying commencement of the investigation and assessment would be inappropriate
- a child self-referring.

Before using section 17 powers:

- consult a senior team leader
- make a referral to the QPS if a joint interview is needed, depending on the nature of the concerns
- contact the principal, or person in charge of the school or place where the interview will be held, and:
  - notify them of the intention to exercise the power
  - seek permission for the contact to occur on their premises. Contact with the child must occur lawfully, with the permission of the person in charge of the education facility.

#### Note

If access is denied, the power cannot be used. Consider other options for contact with the child.

Tell the principal, or other person in of:

- the need to interview the child prior to the parents being made aware of the concerns
  - the general nature of the concerns
  - the rationale for the use of the power and information that will assist with an effective interview
  - of their obligation to maintain confidentiality under the *Child Protection Act 1999*, [section 188](#), including:
    - ensuring other personnel maintain confidentiality
    - not telling the parents about the child protection concerns or that an interview has or will take place without their consent



- the names and positions of interviewing officers.

Negotiate with the principal, or person in charge:

- an interview time that minimises interruption to the child's usual school routine and avoids or reduces feelings of embarrassment or distress the child may experience by being interviewed at school
- the conditions of the interview, including an appropriate venue and how the interview will be conducted
- whether a school staff member will be present during the interview. Advise the principal that the staff member may be called to give evidence in any resulting criminal proceeding.

#### Note

If a joint ICARE interview is being carried out with the QPS and the child initially disclosed harm to a school staff member, that staff member should not be present at the interview. The QPS may consider the person to be a witness for any subsequent criminal proceedings.

Before the interview, show your identity card to the principal or other person in charge. Talk with them about how to help the child feel safe and supported during the interview, including having a support person of their choice, from that location, if that would help the child.

#### Take action after using section 17

Immediately after the interview, tell the principal or person in charge:

- the actions that Child Safety will take
- any immediate support needs the child has
- that Child Safety will tell the parents about the contact with the child and the outcome.

As soon as practicable after the interview, tell at least one of the child's parents:

- your name, position and department and show your identity card
- that the *Child Protection Act 1999*, [section 17](#), was used to have contact with the child
- the reasons for the contact
- the concerns and
- interview the parents. (Refer to [Interview the parents, other adults and alleged persons responsible.](#))

- carry out a safety assessment. (Refer to [Carry out a safety assessment.](#))

Record details of the contact with the child at the first reasonable opportunity in the *Record of use of powers* in ICMS, regardless of whether an authorised officer or QPS officer exercised the power.

#### Practice prompt

Make every effort to inform the parents of the use of section 17 before the child sees their parents. It is Child Safety's responsibility to inform the parents. Do not ask anyone else to do it.

If the child has a long-term or permanent guardian, tell at least one of the child's guardians about the interview. There is no requirement to tell the parent.

## Take action when the child is at immediate risk of harm - use of section 16 or 18

When carrying out an investigation and assessment, an authorised officer or police officer has the power to:

- have contact with a child at immediate risk of significant harm (*Child Protection Act 1999*, [section 16](#)) or
- take a child who is at immediate risk of significant harm into custody (*Child Protection Act 1999*, [section 18](#)).

These powers may be exercised with help and the use of force deemed reasonable in the circumstances. Before taking action under section 16 or 18:

- make considerable effort to engage parents and negotiate an appropriate solution
- consider contacting the QPS for assistance
- consult and discuss the decision with a senior team leader
- consult and discuss the decision with an OCFOS lawyer.

If, due to the nature of the immediate risk to the child, the power is exercised before consulting the senior team leader or OCFOS lawyer, advise them as soon as possible after using the power. If an authorised officer is accompanied by the QPS, the QPS may use discretionary powers to enter and search, and to remain on the premises.

#### Note

Custody of a child under the Child Protection Act 1999, section 18, overrides any other child protection order that grants custody or guardianship to someone other than the chief executive.

### Practice prompt

If a CSO damages property while exercising this power, provide a written notice of particulars of the damage to the owner or leave this notice at the property and retain a copy of the notice (Child Protection Act 1999, section 154).

## Exercise powers under section 16

When exercising powers under section 16, tell the parents:

- your name, position and the name of the department
- the purpose of the visit, the child protection concerns and any intended actions
- your authority under the *Child Protection Act 1999*, [section 16](#), to enter, search and remain in the premises or residence.

In addition:

- Show the parents your identity card (*Child Protection Act 1999*, [section 153](#)).
- Give the parents another opportunity to consent to allowing contact with the child.
- Sight, and where appropriate, interview the child.
- Complete a safety assessment for the household with the parents, as soon as possible after the use of the power has been exercised, and include the actions taken under the use of powers.
- Take other action as required, as part of the investigation and assessment.
- Record the *Record of interview/use of powers* form in ICMS, regardless of whether an authorised officer or QPS officer exercised the power.

### Note

If, after initial contact is made with the child, the parents refuse to allow further contact with the child to complete the investigation and assessment, consult the senior team leader and the OCFOS lawyer about applying for an assessment order. (Refer to Respond if a parent will not consent to actions required—temporary assessment order or Respond if a parent will not consent to actions required—court assessment order.)

### Exercise powers under section 18

When exercising the use of powers under section 18, take reasonable steps to advise at least one parent of:

- your name, position and the name of the department
- the purpose of the visit and the concerns regarding the child
- the authority under this power to enter, search and remain in the place until the child is located
- the child having been taken into the chief executive's custody. It is not a requirement to tell the parents with whom the child has been placed (*Child Protection Act 1999*, [section 20](#))
- the rationale for taking the child into the chief executive's custody, unless this would jeopardise the child's safety or a criminal investigation
- the legal requirement for Child Safety to apply for a TAO or a TCO.

In addition:

- show the parents your identity card (*Child Protection Act 1999*, [section 153](#))
- sight and, if appropriate, interview the child
- complete the safety assessment—with the parents if possible
- tell the child about being taken into custody, including what this type of custody means, the reasons for the custody and the period of the custody (*Child Protection Act 1999*, [section 195](#))
- consult the senior team leader and the OCFOS lawyer, who can then apply or assist in applying to a magistrate for a TAO or TCO as soon as possible within 8 hours of taking the child into custody
- record the *Record of interview/use of powers* form in ICMS, regardless of whether an authorised officer or QPS officer exercised the power.

#### Note

With regards to the obligations under the Child Protection Act 1999, section 20, the definition of 'parent' includes long-term or permanent guardians. A child's guardian has the same rights and obligations as a parent.

After using section 18 powers:

- Discuss the use of section 18 with the senior team leader and the OCFOS lawyer.

- Apply for a TAO or TCO *as soon as practicable within 8 hours* after the power is exercised. Custody ends when the first of the following alternatives occurs. Either:
  - the TAO or TCO is decided or
  - 8 hours after the power was exercised. (Refer to [Respond if a parent will not consent to actions required—temporary assessment order.](#))
- Serve at least one of the parents or guardians with a copy of the TAO or TCO, explain the terms and effects of the order, and explain their right of appeal (*Child Protection Act 1999*, [sections 32](#) and [51AK](#)) Also give them with a copy of the brochure [Assessment orders—information for parents](#) or [Temporary custody orders—information for parents](#).
- Complete a subsequent safety assessment before making the decision to return the child home.

#### Practice prompt

If, before applying for the TAO, it is assessed that it is safe for the child to be returned to the custody of their parents, the TAO application must still proceed, even though custody is no longer required.

In addition, for a child who has a long-term or permanent guardian, make reasonable attempts to:

- tell at least one of the child's *parents* about the reasons for, and the effect of, the TAO or TCO and the right of appeal
- serve the parents with a copy of the order.

If unable to contact the parents (*Child Protection Act*, 1999, [sections 32](#) and [51AK](#)), record details of the attempts in the investigation and assessment event in ICMS.

When a child is taken into custody under [section 18](#), a medical examination or medical treatment may be arranged for them, if it is urgent or reasonable in the circumstances. If the need is not urgent, do not arrange the examination or treatment before a magistrate grants a TAO.

#### Further reading

Arrange an urgent medical examination.

## Interview the parents, other adults and alleged persons responsible

The purpose of interviewing parents, other adults and alleged persons responsible is to:

- gather relevant information about the concerns and the child's circumstances
- verify and clarify information received from other sources
- provide alleged persons responsible with a reasonable opportunity to respond to allegations, where this does not interfere with criminal proceedings
- help assess who is responsible for the harm
- assess the parents' ability and willingness to protect the child from significant harm.

### Practice prompt

If advice is needed to assist with interviewing an Aboriginal or Torres Strait Islander person, consult with:

a Child Safety practitioner able to give cultural advice  
the local Aboriginal or Torres Strait Islander community representative, sharing non-identifying information about the family.

Advice about the family's culture or community may include:

how best to engage the family  
relevant cultural protocols including gender or relationship protocols, such as women's business, that need to be considered when undertaking the assessment  
'sorry' business or current issues impacting the community, such as recent suicides  
relevant child rearing practices  
the cultural context for issues relating to adolescence and sexual or gender identity.

Arrange interviews with:

- each adult household member, including:
  - the child's parent or parents and any adult who cares for the child, even if the concerns do not specifically relate to them

- all persons alleged responsible for harm to the child—if this does not interfere with criminal proceedings
- any other adult living in the household, including a step-parent or partner of a parent living with the child, even if they are not the primary parent, if:
  - the concerns relate to them or
  - they may provide relevant information
- non-resident parent or parents
- any other adult or parental figure not living in the harm household who:
  - has reliable knowledge of the family and the concerns and
  - is likely to provide relevant information.

The senior team leader is responsible for approving a decision to not interview all relevant adults. If this occurs, record the decision and the rationale in ICMS.

#### Practice prompt

If a child is gender diverse or has a diverse sexual orientation, consider the impact of parental behaviours on the child in relation to the child's gender or sexual orientation as part of the assessment about whether they are a child in need of protection. For example, how is the parent's response to the child's gender or sexual orientation impacting on the child? Is the child feeling supported, rejected, safe? Consider what actions could be taken to support the child and their parents.

Refer to the practice guide Children with gender and sexual orientation diversity.

## Procedural fairness

Procedural fairness relates to the processes used to make a decision, and includes fairness, impartiality, objectivity and transparency. Upholding the principles of procedural fairness means that a parent, other adult and alleged person responsible who might be adversely affected by a decision is given the opportunity for a fair hearing before a decision is made, if this does not interfere with criminal proceedings.

Advise all parents and alleged persons responsible of the allegations of harm, and give them reasonable opportunity and time to respond to the allegations, worries identified, decisions and assessments. Listen to the views of the child's parents and other adults and take their views into account when completing the investigation and assessment.

#### Note

There are exceptions to the requirement to inform a parent and alleged persons responsible about the allegations of harm. (Refer to Inform the parents about the allegation of harm and consider if discretionary compliance is permitted.)

### Respond to a request for a support person

If a parent or other adult asks for a support person to be present during an interview, assist them to identify an appropriate person. Do not allow the alleged person responsible for harm to be the support person. The role of a support person is different to the role of an independent person for an Aboriginal or Torres Strait Islander child and family. (Refer to practice guide [The role of a support person](#) and Procedure 5 [Enable participation of Aboriginal and Torres Strait Islander peoples in decision making](#).)

### Respond to a request for a legal representative

Parents, other adults and alleged persons responsible are entitled to have a legal representative present during the interview. Make all reasonable attempts to accommodate such requests.

### Carry out interviews

To begin an interview with a parent or other adult:

- Give your full name, position and department and show your identity card, as required by the *Child Protection Act 1999*, [section 153](#).
- Explain your role and the purpose of the visit.
- Give the parents the brochure [When Child Safety officers visit your home](#), which outlines their rights
- For an Aboriginal or Torres Strait Islander person, give the person a copy of the handout [Know Your Rights](#).

Consider using the tool [Collaborative assessment and planning framework](#) during the first contact with the family and throughout the investigation and assessment.

#### Tip

The handout Know Your Rights can assist Aboriginal and Torres Strait Islander children and families to access assistance or further information from the Family Participation Program, an Aboriginal and Torres Strait Islander Family Wellbeing Service or legal providers. It also includes information about the right to have an independent person help facilitate participation in decision making.



### Practice prompt

Interview each adult individually, especially if domestic and family violence or a culture of silence or fear is suspected. The ability of a parent or other adult to speak openly may be affected by the perpetrator or another person being present.

Protect the notifier's identity and do not confirm or deny their identity in response to speculation.

Gather all relevant information including:

- the names and dates of birth of each subject child and all other children in the household
- the names, dates of birth and roles of:
  - adult members of the child's household
  - any relevant extended family members
- contextual information about the family and home environment
- cultural information about the family and their community
- the presence and impact of risk factors, such as domestic and family violence, problematic alcohol and drug use, mental illness and parental childhood abuse
- information needed to complete the safety assessment, and if required, an immediate safety plan
- any complicating factors affecting the family
- the types of support available to the family, including the names of people who make up the family's safety and support network
- the parents':
  - response to the specific concerns raised by the notifier and any additional concerns identified during the investigation and assessment, including any acknowledgement of the harm
  - perceptions and feelings about the child
  - parenting ability, including knowledge and skills
  - understanding of the child's physical and cognitive development
- the response of the alleged person responsible to the allegations and any additional concerns identified during the investigation and assessment.

If the child has an unknown visa status or needs assistance in gaining permanent residency in Australia, contact the intercountry liaison team at Court Services via the Court Services

mailbox [courtservices@cyjma.qld.gov.au](mailto:courtservices@cyjma.qld.gov.au) or by telephone on 3097 5400. Court Services staff can:

- find out the visa status of a child
- facilitate the process for seeking permanent residency for the child
- provide information about the path to citizenship for a child in care.

If information provided is believed to be untrue, misleading or contradicts other information gathered:

- Do not accept the information at face value.
- Respectfully challenge the person about their information.
- Seek independent verification from a reliable source. If the information is not supported, re-contact the adult to discuss the differing information and seek their response.

### Attention

In cases of domestic and family violence, give careful consideration before challenging a perpetrator in the presence of the victim, to ensure the safety of the victim.

If, during an interview, it becomes evident that a parent's immediate physical safety is at risk:

- Give that parent information about appropriate domestic and family violence services. or
- Assist in making a referral to a domestic and family violence crisis service, such as DVConnect or a women's shelter.

Once the immediate safety of the parent and child is achieved, consider if the information gathered indicates the need for a *Significant DFV threat* alert in ICMS. (Refer to [Record an alert.](#))

### Tip

DVConnect can be contacted 24 hours a day regarding women, children and young people—telephone 1800 811 811.

Mensline operates a 24-hour free telephone and online counselling service for men - telephone 1300 789 978.

If information is gathered that indicates a child or family member may have been a

victim of violence, provide information about Victim Assist Queensland—refer to Respond if a person may have been a victim of violence.

### Further reading

Collaborative assessment and planning framework booklet

Practice kit Domestic and family violence

Practice guide Domestic and family violence - Protecting identifying information in court processes

Practice guide Physical and cognitive developmental milestones

Consult with the Queensland Police Service and decide if there will be a joint response.

## Related forms, templates and resources

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### [Adult as a victim of alleged child sexual offence](#)

Form 1 July 2021

*This is a secure resource. Only authenticated users may access this content.*

### [Assessment orders—information for parents](#)

Resource 20 February 2020

### [Children with gender and sexual orientation diversity](#)

Resource 18 August 2021

### [Collaborative assessment and planning framework](#)

**Resource** 18 July 2019

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### [Collaborative assessment and planning framework](#)

**Resource** 29 July 2019

*This is a secure resource. Only authenticated users may access this content.*

### [Domestic and family violence – protecting identifying information in court processes](#)

**Resource** 16 September 2019

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### [Know Your Rights](#)

**Resource** 16 December 2021

### [Notifiers and mandatory reporting](#)

**Resource** 20 August 2019

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### [Physical and cognitive developmental milestones](#)

**Resource** 20 August 2019

## [Planning the investigation and assessment](#)

Resource 17 September 2019

## [Staff safety guide for mindful practice](#)

Resource 24 February 2020

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## [Temporary custody orders - information for parents](#)

Resource 24 February 2020

## [The role of a support person](#)

Resource 18 September 2019

## [When child safety officers visit your home](#)

Resource 24 February 2020

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**6 November 2019**

Page created

# Carry out a safety assessment

## Content updates

This page was updated on 19 May 2023. To view changes, please see [page updates](#)

## Carry out a safety assessment

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The safety assessment guides decision making about:

- the threat of immediate harm to the child in the household
- what interventions are needed to keep the child safe
- a safety decision for each child in the household
- whether an immediate safety plan can be developed to ensure the safety of any child who remains in the home, if immediate harm indicators have been identified.

An initial safety assessment is carried out as soon as possible at the start of an investigation and assessment, during the first face-to-face contact with a child and family. Subsequent safety assessments occur throughout intervention with a child and family.

Use the safety assessment tool to identify immediate harm indicators for the child and decide if the child:

- can stay at home safely or
- can stay at home with protective interventions or
- must be placed outside the home to keep them safe.

Before leaving the child in the home:

- gather enough information to complete the safety assessment
- ensure the child's immediate safety.

Do not complete a safety assessment for:

- a harm report
- the investigation and assessment of an unborn child.

Complete the safety assessment for the household where the harm or risk of harm is alleged to have occurred. If the parents do not live together and harm or risk is alleged in both households, complete two safety assessments.



### Practice prompt

If investigating and assessing an unborn child notification, and the child is born before the investigation and assessment outcome is approved, sight the child and complete a safety assessment.

For an ASC co-response, the CSO completes the safety assessment.

### Further reading

SDM Policy and procedures manual.

## Complete the initial safety assessment

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To complete the safety assessment:

- Gather and analyse information from observations and interviews with
  - the child and their family
  - other relevant people.
- Provide parents with information about the concerns, so they can participate fully in the process.
- Provide the child with information about the concerns, having regard to the child's age and ability to understand, so they have an opportunity to participate in the process if they want to.
- Ask the family about their Aboriginal tradition or Island custom, for an Aboriginal or Torres Strait Islander child.
- Apply the information to the safety assessment to determine if an immediate harm indicator is present. (Refer to the [SDM policy and procedures manual](#).)

If an immediate harm indicator is identified, refer to [Take action when an immediate harm indicator is identified](#).

If no immediate harm indicators are identified:

- Record the safety assessment in ICMS. The safety assessment outcome will appear in the *Assessment and outcome form* in ICMS.
- Submit the safety assessment to the senior team leader for approval within 72 hours of completing the safety assessment.

- Continue with the investigation and assessment.

#### Attention

Contact the designated adoption officer, Adoption and Permanent Care Services, about the outcome of the safety assessment for an unaccompanied humanitarian minor.

#### Practice prompt

If a Significant DFV threat alert is recorded in a person's profile in ICMS:

Consider the perpetrator's pattern of coercive and controlling behaviour and the direct and indirect impact this is having on the children, victim and family functioning. Partner with the non-offending parent and ask them about their own safety needs and the protective acts they have taken to keep their children safe.

Complete an assessment of risk for their current household and decide if a new alert is needed—if the existing alert refers to domestic and family violence perpetrated in a previous relationship.

Consider what information, if provided to the perpetrator during the investigation and assessment, may compromise the safety of the victim or child. (Refer to Consider privacy—domestic and family violence.)

Complete a subsequent safety assessment:

- if new information or a change in circumstances indicates a threat to the child's safety but the information does not reach the threshold for a notification—for example, a change in household membership, including a parent leaving, an adult or child moving in, or a newborn or a child discharged from hospital
- if any party to the immediate safety plan is not complying with the current safety plan
- before returning a child home:
  - after an *unsafe* safety decision
  - if the child is subject to a care agreement
  - if a parent removes a child from an approved care arrangement
- if a child returns home from an approved care arrangement, without Child Safety approval.

### Further reading

Procedure 1 Information about a child who is an unaccompanied humanitarian minor

Refer to the safety assessment section of the SDM Policy and procedures manual.

## Take action when an immediate harm indicator is identified

If one or more immediate harm indicators are identified, implement the most appropriate immediate safety intervention to ensure the child's immediate safety.

### Attention

Where a safety assessment has been completed for a household that consists of a sibling group or multiple children, implement the most appropriate immediate safety intervention that meets the needs of the most vulnerable child in the home.

An immediate safety intervention will be either:

- non-custody interventions developed and agreed to in an immediate safety plan to keep the child safe in the household or
- placement interventions (with an approved carer) if an immediate safety plan cannot be developed to keep the child safe.

If safe and practicable, discuss the immediate harm indicator/s with the child, if possible, and the family and decide in collaboration with them, and the safety and support network, what actions and interventions are needed to keep the child safe. Assess whether the agreed safety interventions are adequate to mitigate the safety concerns present in the household.

### Develop an immediate safety plan

The immediate safety plan is a written agreement collaboratively developed with the family, child and the family's network if an immediate harm indicator has been identified and at least one child will stay in the home.

The immediate safety plan must address the immediate harm in the present to short term future.

If there is a *Significant DFV threat* alert recorded in a person's profile in ICMS, consider all the previous information relating to the domestic and family violence.

#### Note

If the child is assessed as safe with an immediate safety plan, the conditions specified in the plan are to mitigate the risk of harm that would otherwise require the child to be out of the home. If non-custody interventions cannot ensure the child's safety, consult the senior team leader about an appropriate care arrangement (placement intervention).

Child Safety is responsible for collaboratively developing, implementing and monitoring the immediate safety plan, including when other agencies are responsible for actions within the plan.

#### Time sensitive

It is recommended that an immediate safety plan not be in place for more than 7 days without a new safety assessment being completed.

Before developing a safety plan for an Aboriginal or Torres Strait Islander child:

- Tell the child and the child's parents of their right to have an independent person help facilitate their participation in making decisions relating to developing the safety plan.
- Arrange for the independent person, if the child or family consent to the involvement of an independent person.
- Contact the senior team leader, who will decide suitability of the independent person, unless it is:
  - not practical or possible because the independent person is not available or because the safety plan must be developed urgently
  - likely to have a significant adverse effect on the safety or emotional wellbeing of the child or another person
  - not in the child's best interest.
- Make arrangements to ensure the child and the child's family group is able to meaningfully participate in developing the immediate safety plan.

If a Family Participation Program representative is also present and the family agrees, they may either:

- facilitate the child and family's participation in the development of the immediate safety plan or
- be the child and family's independent person (if the suitability of the Family Participation Program's representative has been determined).

An individual staff member from the Family Participation Program cannot carry out both roles.

To develop an immediate safety plan:

- Describe what Child Safety is worried about, addressing each identified immediate harm indicator, its impacts, and the individual safety needs of each child—especially those with increased vulnerability due to age or disability.
- Encourage the child and family to identify people or services they know and trust, who may agree to be safety and support network members in an immediate safety plan.
- Contact other parties, identified by the child and family as safety and support network members, to confirm their willingness, ability and suitability to participate in the immediate safety plan, and tell them about the identified harm indicators.
- Outline what the parents, safety and support network members and other people must do immediately to ensure the child's safety in the home—and assess their ability to complete all required actions.
- Seek agreement from all parties to the necessary intervention.
- Record how the plan will be monitored, by whom and how often.
- Record the family's and network members' agreement to the plan and make sure the plan is signed by all the people involved in its implementation.
- Record the immediate safety plan for each child who will stay in the home in culturally appropriate and family-centred language.
- Schedule a date for the review of the immediate safety plan (no more than 7 days from when the plan was developed).
- Give a copy of the completed and signed immediate safety plan to the parents, the child if appropriate, and any other person involved in its implementation.
- Tell the child and family that the plan will remain in place until:
  - the immediate danger is resolved
  - a new safety assessment is completed and, if needed, a new immediate safety plan is developed or
  - a case plan is developed that ensures the child's safety and addresses issues in the safety plan.
- Record the immediate safety plan or attach a hard copy of the plan in the *safety assessment* form in ICMS.
- Submit the safety assessment and the immediate safety plan to the senior team leader for approval within 72 hours of completing the safety assessment.

### Practice prompt

If during the investigation and assessment it is identified that a parent's access to the child's My Health Record poses a significant risk to the child's safety—for example, because it gives details of the child's whereabouts—support the other parent in contacting the My Health Record helpline on 1800 723 471 and requesting that a restriction be placed on the child's record.

### Further reading

Engage the Family Participation Program

Refer to the safety assessment section of the SDM Policy and procedures manual

Procedure 5 Enable participation of Aboriginal and Torres Strait Islander peoples in decision making.

## Consider a private arrangement

A private arrangement:

- is a non-custody arrangement
- is organised by the child's parents, not Child Safety
- is in place for a short time—up to 2 or 3 days
- gives parents time to take immediate actions needed to address safety concerns for the child.

Consider a private arrangement if:

- one or more immediate harm indicator has been identified
- the child needs to live outside the home due to the risks identified
- the parents agree for the child to stay with a family member or friend.

### Note

As the private arrangement is organised by the parent, not by Child Safety, the child will be cared for by a family member or friend, not an approved carer.

Before agreeing to the private arrangement as part of the immediate safety plan, make direct contact with the person nominated by the parents to care for the child, to:

- decide if they are suitable, including whether they are
  - able to care for the child for the agreed time
  - willing and have the capacity to co-operate and keep the child safe from the identified harm
  - willing to immediately advise the CSSC or CSAHSC if the child returns home
- provide them with the CSSC and the CSAHSC contact details
- advise them that a check of their child protection history will need to be carried out and considered before they can care for the child.

Finalise the safety assessment and immediate safety plan if:

- the person agrees to care for the child and
- the child protection history check raises no concern about them caring for the child.

If the person nominated by the parents to care for the child has a child protection history:

- Consult the senior team leader to decide if the private arrangement is suitable.
- Discuss (with the nominated person) their child protection history to clarify any issues, if necessary. Do not disclose the person's child protection history to the child's parents or any other third party.
- Record the decision and the arrangement made between the relevant parties.
- Review the immediate safety plan to make sure it meets the child's safety needs or to consider whether a care arrangement (placement intervention) is required.

### Further reading

SDM policy and procedures manual.

## Use a placement intervention

Always use a care arrangement (placement intervention) if:

- An immediate safety plan cannot be developed with the family **and** at least one network member to ensure the child's safety in the home.
- It is in the best interests of the child to be provided with a formal, legal care arrangement.
- It is assessed that

- the parent, or the person proposed to care for the child may not adhere to a private arrangement
  - the child is likely to return to the parent's care where the high-risk factors exist and
  - the parent is more likely to adhere to a formal arrangement.
- A private arrangement is not suitable or a parent cannot identify a person to care for the child in a private arrangement.

Before placing a child, obtain the necessary authority for the care arrangement. This could be:

- an assessment care agreement—if the parents agree to the child being placed in care
- an assessment order (TAO or CAO granting custody to the chief executive)—if further assessment is needed, and a parent does not agree to an assessment care agreement
- a TCO—if the child is already in need of protection, and a parent does not agree to the care agreement.

For an Aboriginal or Torres Strait Islander child:

- Tell the child and their parents about their right to have an independent person to help facilitate their participation in the decision about where and with whom the child will live.
- Arrange for the independent person, including deciding their suitability, unless it is
  - not practical because the person is not available or the decision is urgent
  - likely to have a significant adverse effect on the safety or emotional wellbeing of the child or another person
  - not in the child's best interest.
- Consider the views of the child and family in the decision about where and with whom the child will live.

Refer to Procedure 5 [Enable participation of Aboriginal and Torres Strait Islander peoples in decision making](#) for information about determining suitability to be an independent person.

### Practice prompt

Make active efforts (timely, thorough and purposeful efforts) to apply the Aboriginal and Torres Strait Islander Child Placement Principle when making a placement decision for an Aboriginal or Torres Strait Islander child. Refer to Procedure 5 [Enable participation of Aboriginal and Torres Strait Islander peoples in decision making](#)



End a care arrangement (placement intervention) as part of an immediate safety intervention if a subsequent safety assessment establishes that either:

- no immediate harm indicators are present and the child can return home safely
- the child is 'safe with an immediate safety plan' and can return home with the immediate safety plan in place.

### Immediate safety concerns for a newborn child

In exceptional circumstances, when a child is at immediate risk of harm at the time of birth and an alternative safety intervention cannot be implemented to ensure the immediate safety of the child, consult with the senior team leader and the OCFOS lawyer to decide the immediate action required to secure custody of the child.

To secure custody of the child, take one of following actions:

- negotiate with the parents for the child to be placed under a care agreement (Refer to [Consider an assessment care agreement](#) and Procedure 4 [Child protection care agreement](#).)
- use powers under the *Child Protection Act 1999*, [section 18](#)
- apply for a TAO or CAO, where further assessment is required
- apply for a TCO, if no further assessment is required.

Consult with hospital staff as soon as possible if a newborn child's immediate safety needs mean they cannot safely be left unsupervised with the mother after the child's birth.

Only ask hospital staff to assist in removing the baby from the mother's care if removal has been authorised by:

- the parents consenting to a care agreement
- the use of the *Child Protection Act 1999*, [section 18](#) or
- a TAO, CAO, TCO or child protection order.

Once authority has been obtained to remove the child from the parents' care, consult hospital staff about whether the newborn child will remain in the hospital nursery until ready for discharge. Locate an appropriate care arrangement for the child as soon as practicable, to minimise delays in the newborn child being discharged.

For an Aboriginal or Torres Strait Islander child, speak with the family to explore care arrangement options that comply with additional provisions for placing Aboriginal and Torres Strait Islander children in care under the *Child Protection Act*, [section 83](#).

### Practice prompt

Provide opportunities for the mother and newborn child to have safe and meaningful contact that supports bonding and attachment. Early attachment with a primary caregiver is extremely important to the overall emotional health and wellbeing of children, and to healthy adolescence and adulthood.

Explore with the mother possible options to support breastfeeding, if this is what she wants to do. (Refer to Procedure 5 Support the breastfeeding of a child in care.)

### Further reading

Procedure 5 Facilitate, monitor and review family contact

Procedure 5 Family contact decisions.

## Related forms, templates and resources

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### [SDM Policy and procedures manual](#)

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# Respond if a parent will not consent to actions required—temporary assessment order

## Content updates

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A TAO is an assessment order that authorises one or more of the following actions during investigation an assessment:

- to have contact with the child
- to take the child into, or keep the child in, the custody of the chief executive while the order is in force
- to authorise medical examination or treatment
- to direct a parent about contact with the child
- to enter a residence or premises and search for a child, and remain there as long as necessary
- to authorise the use of help and force considered reasonable in the circumstances.

Under the *Child Protection Act 1999*, [sections 24–36](#), a TAO can be applied for at any stage during an investigation and assessment, if:

- a parent will not consent to actions considered essential for the completion of an investigation and assessment and
- reasonable attempts have been made to obtain parental consent and
- the actions that the TAO will authorise can be carried out within 3 days.

The magistrate may decide the application for a TAO without notifying the child’s parents of the application or hearing them on the application.

## Practice prompt

For a TAO, the definition of ‘parent’ means each of the following persons:

the child’s mother or father  
a person in whose favour a parenting order operates

a person, other than the chief executive, having custody or guardianship of the child under another Act or a law of another State

a long-term guardian of the child

a permanent guardian of the child.

When considering a TAO for a child subject to a long-term guardianship order to a suitable person or a permanent care order, the guardian has the same rights and obligations as a parent.

## Seek legal advice from an OCFOS lawyer

If a TAO is considered necessary, consult with the senior team leader to seek their agreement to consult with the OCFOS lawyer about applying for a TAO.

If the senior team leader agrees that a TAO may be necessary, meet with the OCFOS lawyer to outline the current child protection concerns, the steps taken to date in the investigation and assessment process and the reasons a TAO is considered necessary.

The OCFOS lawyer will review the evidence and provide written legal advice about whether there is enough information to satisfy the legal requirements for seeking a TAO and each of the requested provisions.

### Note

OCFOS lawyers work on an instructional model. This involves Child Safety providing an OCFOS lawyer with information about a child, their circumstances and the order Child Safety has assessed is required. The OCFOS lawyer will then give legal advice about the proposed application and will act on instructions of a senior team leader or CSSC manager.

If the OCFOS lawyer provides legal advice recommending an application for a TAO be made, the senior team leader will:

- provide instructions to the OCFOS lawyer to proceed with an application for a TAO (Refer to [Apply for a temporary assessment order.](#))
- advise the OCFOS lawyer who will be the applicant.

If the OCFOS lawyer provides legal advice that does not recommend a TAO, the senior team leader will attempt to resolve the matter by discussing the issues with the OCFOS lawyer. If

the matter cannot be resolved, the senior team leader will escalate the matter to the CSSC manager.

If the senior team leader escalates a matter to the CSSC manager, the CSSC manager and OCFOS senior legal officer will either:

- discuss and resolve the issues or
- discuss next steps, if they cannot resolve the matter.

## Support an OCFOS lawyer to prepare an application

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To prepare an application for a TAO, the OCFOS lawyer will :

- complete a draft [Form 1—Application for a temporary assessment order](#)
- make sure the application includes details of
  - the nature of the child protection concerns that warrant immediate action
  - attempts made to gain the consent of at least one parent, to the actions required
  - the rationale for seeking the specified provisions, for example, a medical examination or custody
  - action to occur while the order is in place
  - actions taken in relation to the child during any period of custody under the *Child Protection Act 1999*, [section 18](#)
  - the care arrangement and family contact, if relevant
  - the active efforts made to apply the Aboriginal and Torres Strait Islander Child Placement Principle, particularly how the child’s connection to family and community will be maintained.

After receiving the draft TAO application from the OCFOS lawyer, the senior team leader and CSO (if they are the applicant) will:

- review the draft application to check for accuracy and to ensure the most up to date, relevant information is included
- email the OCFOS lawyer with any feedback or recommended changes.

To finalise the application for a TAO:

- the OCFOS lawyer will review and consider feedback from the senior team leader and CSO
- the OCFOS lawyer will send the final application by email to the applicant
- the applicant (either the senior team leader or CSO) will swear or affirm the application and return it to the OCFOS lawyer by email.

### Attention

In urgent circumstances, the application may be made before there is opportunity to have the written application sworn or affirmed.

## Apply for a temporary assessment order

After the application for a TAO has been finalised, the OCFOS lawyer will make a time to appear before the magistrate on behalf of Child Safety.

Before the OCFOS lawyer appears before the magistrate:

- advise the OCFOS lawyer if either parent has a legal representative and the details of the legal representative, if known
- consider serving the parents with a copy of the TAO application, unless it contains sensitive information.

### Note

The OCFOS lawyer will advise the parent's legal representative that Child Safety is making an application for a TAO

If the TAO is granted by the magistrate the OCFOS lawyer will:

- obtain a copy of the TAO (Form 3) from the magistrate and provide this to the senior team leader and the CSO
- upload a copy of the TAO to iDOCS
- complete the court outcome letter for the parents
- ensure the relevant forms are completed in the court event and close the event.

After receiving the TAO (Form 3) from the OCFOS lawyer:

- Give a copy of the order to at least one of the child's parents.
- Provide the child with information about the order, having regard to the child's age and ability to understand. (Refer to the tool [The Immediate Story](#).)
- Explain to the child and the parents the reasons for, and the effect of, the TAO.
- Inform the parents or guardian about the right of appeal. Also tell them that if they wish to appeal, they must take immediate action to lodge the appeal (because of the short duration of the order).

- Make sure that a child who has been placed in the custody of the chief executive understands the reasons why they have been removed from their parents' care and placed in care.

If the child has a long-term or permanent guardian, make reasonable attempts to:

- tell at least one of the parents about the reasons for and the effect of the TAO and about the right of appeal
- serve them with a copy of the order.

If unable to advise the parents, record all attempts made in the investigation and assessment event in ICMS (*Child Protection Act, 1999*, [section 32](#)).

## Apply for a temporary assessment order after hours

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If a CSSC is aware that a TAO application may be required after hours, the senior team leader will advise the OCFOS lawyer before 5pm. The OCFOS lawyer will contact the on-call magistrate for the application to be heard.

If the OCFOS lawyer is not advised before 5pm, the senior team leader will:

- draft the TAO application or assist the CSO to draft the TAO application
- contact the on-call OCFOS lawyer for advice
- call the on-call magistrate for the application to be heard.

If the TAO is granted, the senior team leader will:

- obtain a copy of the TAO (Form 3) from the magistrate
- upload a copy of the TAO to iDOCS
- complete the court outcome letter for the parents.

If the CSAHSC is responding to a matter that requires an application to the on-call magistrate, they may consult with the on-call OCFOS lawyer for legal advice.

## Effect on existing custody or guardianship orders

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If the child is already subject to an order granting custody or guardianship, that order remains in effect while the child is in the custody of the chief executive under the TAO. If the TAO contains any specific provisions that are inconsistent with the existing custody or guardianship order, then the provisions on the TAO must be complied with.



## Duration of a temporary assessment order

### Attention

A TAO cannot remain in effect for longer than 3 business days, excluding public holidays, from the day the order was made. For example, a TAO made on a Thursday will end at 11:59pm on the following Tuesday. The provisions of a TAO cannot be exercised once the order has ended.

When applying for the TAO:

- consider the timeframe needed
- the OCFOS lawyer will record the proposed timeframe in the draft order to be provided to the magistrate.

A TAO that is granted for a period of either one or two days can be extended for a maximum of either two or one days respectively (*Child Protection Act 1999*, [section 34\(5\)](#)) if a CAO or a child protection order is not being sought.

The magistrate can extend a TAO that is granted for a period of 3 business days—only once—to the end of the next business day, if satisfied that:

- Child Safety intends to apply for a CAO or
- the DCPL intends to apply for a child protection order.

This allows the application for another order to be lodged with the court during business hours. The application for another order must be lodged before the court closes on the day the TAO expires.

If an extension of a TAO is required, the senior team leader will consult the OCFOS lawyer to apply for an extension and will advise the OCFOS lawyer who the applicant is. The OCFOS lawyer will draft the TAO extension.

### Time sensitive

If assessed that a child protection order is needed, the OCFOS lawyer will complete a Form A referral to the DCPL at least 24 hours before the TAO expires. The CSO will provide the OCFOS lawyer with a draft affidavit. (Refer to Procedure 3 Prepare an affidavit.)

If an application for a CAO or a child protection order is filed before the TAO expires, the TAO will continue in force until the subsequent application is decided or the Childrens Court orders an earlier end to the order (*Child Protection Act 1999*, [section 99](#)).

## Assess safety before returning a child home—temporary assessment order

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Before returning a child to the care of their parents (after they have been subject to a TAO granting custody to the chief executive):

- complete a safety assessment with the child and family
- consider all available information.

If the child is assessed to be unsafe:

- In consultation with the senior team leader, decide the appropriate intervention that will ensure the child’s safety.
- Consult the OCFOS lawyer if a CAO or child protection order is required. Where applicable, the OCFOS lawyer will:
  - lodge the CSO’s application for a CAO **before** the TAO expires, or
  - refer the matter to the DCPL for an application for a child protection order to be made **before** the TAO expires.

## Related forms, templates and resources

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### [Form 1—application for a temporary assessment order](#)

Form 28 August 2020

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### [The Immediate Story](#)

Resource 18 July 2019

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# Respond if a parent will not consent to actions required—court assessment order

## Content updates

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Under the *Child Protection Act 1999*, [sections 38–51](#), a CAO may be sought at any stage during an investigation and assessment if:

- a parent will not consent to actions considered essential for the completion of the investigation and assessment after reasonable attempts have been made to gain consent or
- it is not practicable to obtain the parent’s consent and
- it has been decided that more than 3 business days are needed to complete the investigation and assessment.

This includes where initial contact with the child has occurred, but the parents do not consent to subsequent required actions.

## Seek legal advice from an OCFOS lawyer

If a CAO is considered necessary, consult with the senior team leader to seek their agreement to consult with the OCFOS lawyer about applying for a CAO.

If the senior team leader agrees that a CAO may be necessary, meet with the OCFOS lawyer to outline the current child protection concerns, the steps taken to date in the investigation and assessment process and the reasons a CAO is considered necessary.

The OCFOS lawyer will review the evidence and provide written legal advice about whether there is enough information to satisfy the legal requirements for seeking a CAO and each of the requested provisions.

## Note

OCFOS lawyers work on an instructional model. This involves Child Safety providing an OCFOS lawyer with information about a child, their circumstances and the order Child

Safety has assessed is required. The OCFOS lawyer will then give legal advice about the proposed application and will act on instructions of a senior team leader or CSSC manager.

If the OCFOS lawyer recommends an application for a CAO be made, the senior team leader will:

- provide instructions to the OCFOS lawyer to proceed with an application for a CAO (Refer to [Support an OCFOS lawyer to prepare an application.](#))
- advise the OCFOS lawyer who will be the applicant.

If the OCFOS lawyer provides legal advice that does not recommend a CAO, the senior team leader will attempt to resolve the matter by discussing the issues with the OCFOS lawyer. If the matter cannot be resolved, the senior team leader will escalate the matter to the CSSC manager.

If the senior team leader escalates a matter to the CSSC manager, the CSSC manager and OCFOS senior legal officer will either:

- discuss and resolve the issues or
- discuss next steps, if they cannot resolve the matter.

### Time sensitive

If the child is subject to a TAO with a custody provision, and custody needs to continue, apply for the CAO before the TAO expires. (Refer to Assess safety before returning a child home—temporary assessment order.)

### Tip

For a CAO, the definition of ‘parent’ means each of the following persons:

- the child’s mother or father
- a person in whose favour a parenting order operates
- a person, other than the chief executive, having custody or guardianship of the child under another Act or a law of another State
- a long-term guardian of the child
- a permanent guardian of the child.

When considering a CAO for a child subject to a long-term guardianship order to a suitable person or a permanent care order, the guardian has the same rights and obligations as a parent.

## Support an OCFOS lawyer to prepare an application

To prepare an application for a CAO, the OCFOS lawyer will:

- complete the draft [Form 5—Application for a court assessment order](#)
- make sure the application includes details of
  - the nature of the child protection concerns that warrant immediate action
  - attempts made to gain the consent of at least one parent to the actions required
  - the rationale for seeking the specified provisions—for example, a medical examination or custody
  - action to occur while the order is in place
  - arrangements for a care arrangement and family contact if relevant, including the active efforts made to apply the Aboriginal and Torres Strait Islander Child Placement Principle, particularly how the child’s connection to family and community will be maintained.

### Note

Seek legal advice from the OCFOS lawyer prior to OCFOS lawyer drafting the application, if the application is likely to contain sensitive information and there would be concerns about serving either parent with a copy.

After receiving a draft CAO application from the OCFOS lawyer, the senior team leader and CSO (if they are the applicant) will:

- review the draft application to check for accuracy and to ensure the most up to date relevant information is included
- email the OCFOS lawyer with any feedback or recommended changes.

To finalise the application for a CAO:

- the OCFOS lawyer will review and consider feedback from the senior team leader and CSO
- the OCFOS lawyer will email the final application to the applicant

- the applicant (either the CSO or senior team leader) will swear or affirm the application and return it to the OCFOS lawyer by email.

## File and serve the application

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After the application for a CAO has been finalised, the OCFOS lawyer will file the application with the court.

Once the application has been filed, make reasonable attempts to serve a copy of the application on the child's parents. If the child has a long-term or permanent guardian, make reasonable attempts to serve the guardian, each of the parents and their lawyers, if they are legally represented.

### Practice prompt

Advise the parent of their right to have a lawyer represent them at the CAO hearing and given them contact details for Legal Aid Queensland.

After a parent has been served with a copy of the application, provide an affidavit of service to the OCFOS lawyer. (Refer to Procedure 3 [Serve the application and affidavit.](#))

If a copy of the application has not been able to be served on a parent, advise the OCFOS lawyer of the attempts made and record the attempts in a case note in ICMS.

### Attention

If the child is at immediate risk of harm before the CAO application is decided, take action to ensure the child's immediate safety. If necessary, consult the senior team leader and OCFOS lawyer about an urgent TAO application. (Refer to Seek legal advice from an OCFOS lawyer.)

## Take action when a court assessment order is granted

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If the CAO is granted by the court the OCFOS lawyer will:

- obtain a copy of the CAO (Form 7) from the court and provide this to the senior team leader and CSO
- upload a copy of the CAO to iDOCS

- complete the *Form 5 – COF final order and Closure of CAO* form in ICMS
- prepare a court outcome letter to the parents advising them of the court outcome, how to appeal the decision, and include a copy of the order.

After receiving the CAO from the OCFOS lawyer:

- Provide the child with information about the order, including the reasons for, and the effect of, the CAO, having regard to the child's age and ability to understand.
- Give the court outcome letter and a copy of the order to at least one of the child's parents and explain to them the reasons for, and the effect of, taking the CAO. Also give them a copy of the brochure [Assessment orders—information for parents](#).
- Inform the parents or guardian about the right of appeal and how to appeal.
- Make sure that a child who has been placed in the custody of the chief executive understands the reasons why they have been removed from their parents' care and placed in care. Refer to the tool [The Immediate Story](#).

## Effect on existing custody or guardianship orders

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If the child is already subject to an order granting custody or guardianship, that order remains in effect while the child is in the custody of the chief executive under a CAO. If the CAO contains specific provisions that are inconsistent with the existing custody or guardianship order, then the provisions on the CAO must be complied with.

## Duration of a court assessment order

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### Attention

A CAO cannot remain in effect for more than 28 days, from midnight on the date the application for the CAO was first brought before the Childrens Court. The provisions of a CAO cannot be exercised once the order has ended.

When applying for the CAO:

- consider the timeframe needed
- the OCFOS lawyer will record the proposed timeframe in the draft order to be provided to the magistrate.

If the investigation and assessment cannot be completed in the 28-day period, the CAO can be extended:



- once only, to allow the investigation and assessment to be completed
- if the court is satisfied that it is in the child's best interests
- if the CAO has not ended
- for no more than 28 days.

## Consider an extension of a court assessment order

Before a decision is made to apply for an extension of a CAO:

- consult with the senior team leader and seek their agreement OCFOS lawyer and seek their agreement
- depending on the child's age and level of understanding, consult the child to obtain their views about arrangements for their care for the duration of the extension.

If the senior team leader agrees that an extension of a CAO may be required:

- consult with the OCFOS lawyer, at least 5 business days before the CAO expires providing a case work update and rationale for the extension
- seek the OCFOS lawyers' advice on seeking to extend the CAO.
- seek the views and wishes of the child.

If the OCFOS lawyer provides legal advice recommending the extension in line with the senior team leader's instructions, the OCFOS lawyer will draft the application to extend the CAO. Once the application is finalised the OCFOS lawyer will file the application at court at least 3 business days before the CAO expires.

### Note

If the application to extend the CAO is being filed in a regional court, consult the OCFOS lawyer to determine appropriate timeframes.

If the OCFOS lawyer provides legal advice that does not recommend an extension of the CAO, the senior team leader will attempt to resolve the matter by discussing the issues with the OCFOS lawyer. If the matter cannot be resolved the senior team leader will escalate the matter to the CSSC manager.

If the senior team leader escalates a matter to the CSSC manager, the CSSC manager and OCFOS senior legal officer will either:

- discuss and resolve the issues
- or
- discuss next steps, if they cannot resolve the matter.

After the application to extend a CAO has been filed with the court:

- serve the parents with the application and advise them of the court date
- complete an affidavit of service and provide it to the OCFOS lawyer.

### Time sensitive

To help ensure a parent's right to natural justice, make sure they receive the application for an extension of a CAO and are advised of the court date no less than 3 business days prior to the application being mentioned in court.

### Tip

If the DCPL apply for a child protection order for a child subject to a CAO, the application must be lodged before the CAO expires.

Custody under the CAO will continue in force until the child protection order application is decided, or the Childrens Court orders an earlier end to the order.

## Assess safety before returning a child home—court assessment order

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Before returning a child to the care of their parents (after they are subject to a CAO granting custody to the chief executive):

- consider all available information
- complete a safety assessment with the child and family.

If the child is assessed to be unsafe:

- Consult with the senior team leader to decide which ongoing intervention is likely to ensure the child's safety.
- Consult the OCFOS lawyer as soon as possible and at least 2 weeks before the CAO expires, if possible. This may require a referral to the DCPL. (Refer to Procedure 3 [Refer to Director of Child Protection Litigation to apply, extend, vary or revoke a child protection order.](#))
- Provide OCFOS with the draft affidavit no later than 5 days before the CAO expires, if a referral to the DCPL is needed.

### Practice prompt

Ensure sufficient time before the CAO expires for:

the OCFOS lawyer to review the affidavit and refer the matter to the DCPL  
the DCPL to decide about an application for a child protection order and take any  
action required.

## Related forms, templates and resources

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### [Assessment orders—information for parents](#)

Resource 20 February 2020

### [Form 5—Application for a court assessment order](#)

Form 28 August 2020

*This is a secure resource. Only authenticated users may access this content.*

### [The Immediate Story](#)

Resource 18 July 2019

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# Respond to urgent circumstances—temporary custody order

## Content updates

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A TCO is applied for when a child is assessed as being in need of protection and is at unacceptable risk of immediate harm (*Child Protection Act 1999*, [sections 51AB–51AM](#)).

## Time sensitive

Apply for a TCO for a child who has been taken into custody under the Child Protection Act 1999, section 18, no later than 8 hours after taking the child into custody.

If a TCO is considered necessary:

- consult and seek the agreement of the senior team leader
- seek legal advice from the OCFOS lawyer, including for matters that have been referred to the DCPL, but an application for a child protection order is yet to be decided and filed.

## Note

OCFOS lawyers work on an instructional model. This involves Child Safety providing an OCFOS lawyer with information about a child, their circumstances and the order Child Safety has assessed is required. The OCFOS lawyer will then give legal advice about the proposed application and will act on instructions of a senior team leader or CSSC manager.

If the OCFOS lawyer provides legal advice that does not recommend a TCO, the senior team leader will attempt to resolve the matter by discussing the issues with the OCFOS lawyer. If

the matter cannot be resolved, the senior team leader will escalate the matter to the CSSC manager

If the senior team leader escalates a matter to the CSSC manager, the CSSC manager and OCFOS senior legal officer will either:

- discuss and resolve the issues or
- discuss next steps, if they cannot resolve the matter.

If the OCFOS lawyer provides legal advice recommending a TCO, in line with instructions from the senior team leader to seek a TCO, the senior team leader will:

- provide instructions to the OCFOS lawyer to proceed with an application for a TCO
- advise the OCFOS lawyer as to who will be the applicant.

### Respond when there are current child protection proceedings

If a TCO is considered necessary for a child who is subject to child protection proceedings, the senior team leader will:

- advise the OCFOS lawyer the child has been assessed as being at immediate risk of harm and a consult will be arranged with the DCPL
- organise an urgent case consult with the DCPL to discuss whether the matter can be urgently listed for mention, for the court to consider the new information
- seek a legal consult with the OCFOS lawyer to discuss applying for a TCO, if the DCPL advise it is not possible or practicable to list the matter for urgent mention.

#### Note

Child Safety continue to have powers under the Child Protection Act 1999, section 18, regardless of whether the child is subject to child protection proceedings.

### Support an OCFOS lawyer to prepare an application

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To prepare an application for a TCO, the OCFOS lawyer will:

- complete a draft [Form 39—Application for a temporary custody order](#).
- make sure the application includes details of
  - the nature of the child protection concerns that warrant immediate action

- attempts made to gain the consent of at least one parent (preferably both) to the actions required
- the rationale for seeking the specified provisions (such as a medical examination or custody)
- action to occur while the order is in place
- actions taken in relation to the child during any period of custody under the *Child Protection Act 1999*, [section 18](#)
- the care arrangement and family contact, if relevant
- for an Aboriginal and Torres Strait Islander child, the active efforts made to apply the Aboriginal and Torres Strait Islander Child Placement Principle, particularly how the child's connection to family and community will be maintained.

After receiving the draft TCO application from the OCFOS lawyer the senior team leader and the CSO (if they are the applicant) will:

- review the draft application to check for accuracy and to ensure the most up to date, relevant information is included
- email the OCFOS lawyer with any feedback or recommended changes

To finalise the application for a TCO:

- the OCFOS lawyer will review and consider feedback from the senior team leader and CSO
- the OCFOS lawyer will email the final application to the applicant (either the senior team leader or CSO)
- the applicant will swear or affirm the application and return it to the OCFOS lawyer by email
- the OCFOS lawyer will file the application.

## Support an OCFOS lawyer to apply for a temporary custody order

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After an application for a TCO has been finalised, the OCFOS lawyer will make a time to appear before the magistrate on behalf of Child Safety.

Before the OCFOS lawyer appears before the magistrate:

- advise the OCFOS lawyer if either parent has a legal representative and the details of the legal representative, if known
- consider serving a copy of the TCO application, unless it contains sensitive information.



### Note

The OCFOS lawyer will advise the parent's legal representative that Child Safety are making an application for a TCO.

The magistrate may decide the application for a TCO without notifying the child's parents of the application or hearing them on the application.

### Practice prompt

For a TCO, the definition of 'parent' means each of the following persons:

- the child's mother or father
- a person in whose favour a parenting order operates
- a person, other than the chief executive, having custody or guardianship of the child under another Act or a law of another State
- a long-term guardian of the child
- a permanent guardian of the child.

When considering a TCO for a child subject to a long-term guardianship order to a suitable person or a permanent care order, the guardian has the same rights and obligations as a parent.

If the TCO is granted by the magistrate the OCFOS lawyer will:

- obtain a copy of the TCO (Form 40) from the magistrate and provide this to the senior team leader and the CSO
- upload a copy of the TCO to iDOCS
- complete the court outcome letter for the parents
- ensure the relevant forms are completed in the court event in ICMS and close the event.

After receiving the TCO (Form 40) from the OCFOS lawyer:

- provide a copy of the order to at least one of the child's parents
- provide the child with information about the order, having regard to the child's age and ability to understand

- explain to the child and the parents the reasons for, and the effect of, taking out the TCO. Also give them a copy of the brochure [Temporary custody orders–information for parents](#).
- inform the parents or guardian about the right of appeal. Let them know that because of the duration of the order, if they want to lodge an appeal, they must take immediate action to do so.

### Practice prompt

If the child is already subject to an order granting custody or guardianship to the chief executive or another suitable person, that order ceases to have effect while the child is in the custody of the chief executive under the TCO.

## Seek a temporary custody order after hours

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If a CSSC is aware that a TCO application may or will be required after hours, the senior team leader will advise the OCFOS lawyer before 5pm if possible. The OCFOS lawyer will contact the on-call magistrate for the application to be heard.

If the OCFOS lawyer is not advised before 5pm, the senior team leader will:

- draft the TCO application or assist the CSO to draft the TCO application
- contact the on-call OCFOS lawyer for legal advice, if required
- call the on-call magistrate for the application to be heard.

If the TCO is granted, the senior team leader will:

- obtain a copy of the TCO (Form 40) from the magistrate
- upload a copy of the TCO to iDocs
- complete the court outcome letter for the parents.

### Note

If the CSAHSC is responding to a matter that requires an application to the on-call magistrate, they may consult with the on-call OCFOS lawyer for legal advice.

## Duration of a temporary custody order

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### Time sensitive

A TCO cannot remain in effect for longer than 3 business days after the day the order is made. For example, if a TCO is granted on Thursday, it will end at 11:59pm on the following Tuesday.

The magistrate can extend a TCO, only once to the next business day:

- if the magistrate is satisfied the order has not ended or
- if the DCPL intends to apply for a child protection order during the period of extension. Written confirmation from the DCPL will be required.

This allows the DCPL to lodge the application for a child protection order with the court during business hours. The application for another order must be lodged before the court closes on the day the TCO expires. Under the *Child Protection Act 1999*, [section 99](#), a TCO will continue until the application for a child protection order is decided.

## Assess safety before returning a child home

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Before returning a child to the care of their parents and while the child is still subject to a TCO granting custody to the chief executive:

- Complete a safety assessment with the child and family. (Refer to Procedure 2 [Carry out a safety assessment](#).)
- Consider all available information.

If the child is assessed to be unsafe:

- in consultation with the senior team leader, decide the appropriate intervention that will ensure the child's safety
- consult the OCFOS lawyer if a child protection order is required
- if a child protection order is required, the senior team leader will instruct the OCFOS lawyer to make a referral to the DCPL for a child protection order.

During the TCO period, the senior team leader will provide the approved draft of the initiating affidavit to the OCFOS lawyer no later than 48 hours before the order expires. (Refer to [Prepare an affidavit.](#))

Where applicable, the OCFOS lawyer will:

- complete a Form A referral to the DCPL for a child protection order application 24 hours before the TCO expires
- provide the DCPL with a draft initial affidavit recommending the type of child protection order.

## Related forms, templates and resources

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### [Form 39—Application for a temporary custody order](#)

Template 15 August 2019

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### [Temporary custody orders - information for parents](#)

Resource 24 February 2020

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# Consider a medical examination

## Content updates

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A medical examination is a physical, psychiatric, psychological or dental examination, assessment or procedure. It includes forensic examination and an examination or assessment carried out by a health practitioner, as defined in the *Child Protection Act 1999*, [schedule 3](#).

During the investigation and assessment, a medical examination, or a specialist assessment by a health professional may be considered necessary to:

- ensure the child's immediate health and safety or
- inform the investigation and assessment outcome.

Wherever possible, before the medical examination or assessment, speak to the child about the incident or injury of concern, to allow opportunity for:

- the child to speak in a more relaxed environment before experiencing what may be an intrusive examination
- any disclosure made by the child to be shared with the medical practitioner and potentially corroborated by evidence obtained in the medical examination or assessment
- information to be provided to help prepare the child for the examination or assessment and to find out whether the child requires any support to assist them in the process.

Consider arranging a medical examination of the child in the following circumstances:

- the child is reluctant to show an injury
- the injury is in the genital area
- the child's condition or injury does not appear consistent with the explanation given by the parent
- the child's age or physical and intellectual development does not appear consistent with the parent's explanation of the injury or condition
- a medical practitioner's expertise is required to provide additional information, such as:
  - an assessment of the impact of long-term neglect on the child
  - a developmental assessment of the child
  - a diagnosis of a suspected disability.

## Arrange an urgent medical examination

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Arrange an immediate medical examination of any child who:

- appears ill, is in a poor physical condition or is dehydrated
- has an altered state of consciousness
- has obvious serious physical injuries
- is manifesting significant abnormalities of behaviour or ideation
- has allegedly been sexually abused
- is an infant who
  - displays a lack of response to stimuli, alterations in breathing or temperature, poor feeding, irritability or lethargy
  - is alleged to have suffered significant trauma or shaking—especially a child under 2 years of age
  - has bruises.

In most circumstances, it is preferable that a paediatrician with child protection experience carries out the medical examination.

Always seek parental consent to have the child medically examined. If the parents will not consent, the *Child Protection Act 1999*, [section 97](#) allows a medical practitioner to carry out an examination or treatment without consent of the parents if:

- a child at immediate risk has been taken into custody (*Child Protection Act 1999*, [section 18](#))
- a TAO, CAO or TCO authorises the examination or treatment.

In this situation, the medical practitioner must:

- not override the rights of the child in relation to the examination or treatment
- only carry out treatment that is reasonable in the circumstances
- provide a report about the examination or treatment to Child Safety, or to the QPS.

### Practice prompt

Consider discussing with the medical practitioner whether uploading details of the examination or treatment to the child's My Health Record, is appropriate, if a parent's or child's access to the information is likely to:

jeopardise a criminal investigation  
be distressing for the child to read (for example, details of injuries from physical or

sexual abuse). Consider the young person's right to access their own medical records versus concern about the impact of reading the report.

## Inform the child

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Consider the best way to inform the child and seek their views about the need for a medical examination. This may involve helping a parent to explain the need for the medical examination to the child or arranging other support the child may need to proceed with the examination.

A child should not be forced to have a medical examination. The decision to proceed will be made by the examining doctor, depending on the:

- child's age and Gillick competence
- need for immediate treatment.

## Determine the appropriate time for the examination

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For urgent matters, arrange an immediate medical examination. In all other circumstances, to ensure timely medical examination and treatment, arrange the medical examination as soon as possible after sighting or interviewing the child.

A medical examination after an alleged sexual assault must occur within 72 hours for the collection of evidence.

Ensure sufficient planning with medical professionals (and the QPS if relevant) to co-ordinate interviews and medical examinations. If the QPS is not involved, ensure the interview of the child and the medical examination occur in the most appropriate order in the circumstances.

## Arrange for a parent to attend the examination

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Make sure that a parent, or someone nominated by the parent, or nominated by the child depending on the child's age and ability to understand the examination, always accompanies the child to the medical examination. This is important, to ensure relevant medical history of the child and family is provided and the child has appropriate support. The person to accompany the child to the examination for this purpose cannot be:

- a CSO, even if nominated by the parent
- a parent or other person suspected of causing serious injury to a child.



If a child has been taken into custody under the *Child Protection Act 1999*, [section 18](#), or is subject to a TAO, CAO or TCO that authorises a medical examination or grants custody of the child to the chief executive, do not prevent a parent from attending the child's medical examination—unless it is decided that their attendance would jeopardise a criminal investigation or expose the child to harm or the child does not want them to attend.

If powers under the *Child Protection Act 1999* are used to authorise the medical examination or treatment, still make every effort to encourage and assist the parents to attend the medical examination—unless this would jeopardise a criminal investigation or expose the child to harm.

A CSO may transport and accompany the child and parent or nominated person to the appointment; however, they cannot transport the child unaccompanied by the parent or their nominated person unless the child is subject to a TAO, CAO or TCO.

## Record the outcome of the examination

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Record the details and results of the child's examination in ICMS. If a written report is also provided by the medical practitioner or specialist, place a hard copy on the child's paper file, and attach the report to the investigation and assessment event in ICMS.

The results of medical examinations that occur during the investigation and assessment are to be included in the subsequent health assessment. This will ensure the health assessment is adequately informed and avoids the duplication of medical examinations or treatment. (Refer to Procedure 5 [Develop a child health passport](#).)

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# Consider an assessment care agreement

## Content updates

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An assessment care agreement is an agreement between Child Safety and the child's parents that allows the child to be placed with an approved carer during the investigation and assessment. Child Safety must consider the child's views about the proposed agreement, having regard to the child's age and ability to understand, before it is agreed. It is signed by the parents and Child Safety.

If the parents agree to an assessment care agreement, they retain all custody and guardianship rights and responsibilities during the period of the agreement. However, by entering into an assessment care agreement, they:

- agree to have Child Safety place the child with an approved carer, licensed care service or another entity
- authorise Child Safety to act in all day-to-day matters including urgent medical attention
- agree to have contact with the child at such times and in such a manner as is mutually acceptable to them, the carer and Child Safety.

An assessment care agreement:

- can be for a maximum of 30 days
- cannot be extended
- is only to be used if it is assessed that there are no safety concerns about the parents retaining custody and guardianship rights
- can be entered into with one parent only if it is impractical to gain the consent of the other parent or reasonable attempts have been made to do so
- cannot be made with one parent if the other parent has refused to consent to the agreement.

A party can end an assessment care agreement at any time by giving at least 2 days notice to the other parties. A parent who was not a signatory to the agreement may also end the agreement by giving at least 2 days notice to the parties.

If an assessment care agreement is entered into with only one parent:

- make reasonable attempts to give a copy of the agreement to the other parent and obtain the other parent's consent, after the agreement has been entered into
- record all attempts to contact and obtain consent from the other parent.

#### Note

A child who has a long-term or permanent guardian cannot be placed under an assessment care agreement.

#### Further reading

Procedure 5 Decision making for a child.

To place a child using an assessment care agreement:

- Seek the parents' consent to the care agreement and complete a [Care agreement— Form](#), getting the parents to sign the form.
- Attach the form in ICMS.
- Obtain necessary information from the parent about the child, to provide to the carer, using the [Child information form](#), and commence the care arrangement in line with the Procedure 6 [Place a child in care](#).
- For an Aboriginal or Torres Strait Islander child, make active efforts to apply the Aboriginal and Torres Strait Islander Child Placement Principle to ensure safe, compatible care arrangement options within family and community are complied with. (Refer to the practice kit [Safe care and connection](#).)
- Make sure that appropriate decisions about the child's safety are made by the end of the agreement period, even if a decision has not yet made about whether the child is in need of protection.
- Use the agreement period to carry out key investigation and assessment tasks, such as completed the safety assessment, interviewing relevant parties, gathering information to inform the assessment of harm and risk of harm and arranging medical assessments, if applicable.

Given the voluntary nature of the assessment care agreement, it is not usually appropriate to supervise contact between the child and parents during the agreement period. However, there may be occasions where:

- it is assessed that the risk to the child during contact may be high and
- the parents have agreed to supervised contact during the agreement period, which prevents the need for an assessment order.

In these cases, contact will be supervised. Contact may provide an opportunity to observe the interactions between the child and parents and inform an assessment of the parents' ability to meet the child's protection and care needs.

If a child subject to an assessment care agreement is subsequently assessed as being in need of protection, a decision may be made to continue the care arrangement with the parents' agreement, as part of ongoing intervention.

In this circumstance, end the assessment care agreement and negotiate a child protection care agreement with the parents. (Refer to Procedure 4 [Use a child protection care agreement.](#))

### Note

Child Safety will not routinely seek to arrange an immunisation for a child who is placed in a care arrangement during an investigation and assessment. Seek the parent's consent to the child's immunisation if immunisation is relevant to the investigation and assessment or needed urgently. If consent cannot be obtained, consider whether to request that a medical practitioner administers the immunisation, under the Child Protection Act 1999, section 97. (Refer to the policy Immunisation of children in care and Procedure 5 Maintain the child's immunisation schedule.)

## Related forms, templates and resources

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### [Care agreement form](#)

Form 13 August 2019

### [Child information form](#)

Form 20 August 2019

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# Consider a Suspected Child Abuse and Neglect team referral

## Content updates

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## Note

The purpose of the SCAN team system is to enable a coordinated response to the protection needs of children. This is achieved by SCAN team members:

sharing information in line with the Child Protection Act 1999, Chapter 5A, part 4  
planning and coordinating actions to assess and respond to a child's protection needs,  
and  
providing a holistic and culturally responsive assessment of a child's protection needs.

Core members of the SCAN team system are Child Safety (lead agency), the Queensland Police Service, Queensland Health and the Department of Education.

Consider a referral to a SCAN team, if:

- coordination of multi-agency actions and/or expert advice from more than one core member representative is required to effectively assess and respond to the protection needs of the child, and
- one of the following criteria is met
  1. Notification - the matter has been assessed and screened in by Child Safety as a notification and the investigation and assessment has not been finalised.
  2. Ongoing intervention - Child Safety is responsible for ongoing intervention through a support service case, intervention with parental agreement or a child protection order.
  3. Missing child - a child in care has been reported as missing to the Police. Refer to [Appendix 4 SCAN Team Response Protocol – when a child in care is missing](#).
  4. Child concern report consult - a matter has been recorded as a child concern report by Child Safety and, following a discussion with the Child Safety senior team leader, a core member representative is seeking a multi-agency discussion.

Refer a matter to a SCAN team if it meets the referral criteria, as outlined in the [Suspected Child Abuse and Neglect \(SCAN\) Team System Manual](#).

### Note

If the family has is being actively supported by a service who is not core member agency, invite the support worker to all SCAN team meetings about the family in accordance with section 2.11 of the Suspected Child Abuse and Neglect (SCAN) Team System Manual.

Advise the SCAN team coordinator, using the SCAN team referral or information form, of the details of the relevant identified stakeholder to be invited.

To make a referral:

- complete the SCAN team referral in Unify, including whether an emergency meeting is required
- forward it to the senior team leader for approval.

### Time sensitive

Submit a referral at least three days before the SCAN team meeting to provide the core member representatives adequate time to prepare for the discussion.

Seek agreement from the SCAN team coordinator to refer a matter less than three days before a SCAN team meeting.

The senior team leader will either:

- approve the referral  
or
- return the referral for further work  
or
- close the referral, if it is no longer required.

The SCAN team coordinator will accept the referral in Unify, which will allow the SCAN team core representatives to view the referral.



The SCAN team coordinator will schedule the matter for discussion at a SCAN team meeting. If additional information is received after the matter has been accepted, notify the SCAN team coordinator that an emergency meeting may be required.

### Note

A referral to a SCAN team does not replace the requirement for Child Safety to immediately notify the QPS of a possible criminal offence under the Child Protection Act 1999, sections 14(2) and (3).

## Related forms, templates and resources

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### [SCAN team referral - SCAN team form 1](#)

Form 29 June 2020

### [Suspected Child Abuse and Neglect \(SCAN\) Team System Manual](#)

Resource 15 August 2019

*This is a secure resource. Only authenticated users may access this content.*

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# Consider the differential pathway

## Content updates

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The differential pathway *contact with other professional* is an alternative option for finalising an investigation and assessment, without completing an action that would ordinarily be carried out. The differential pathway enables the timely completion of an investigation and assessment:

- in a way that is tailored to a family's individual circumstances
- without compromising the safety of the child or an unborn child, after the child's birth
- while ensuring sufficient information is gathered and assessed to decide if a child is in need of protection or an unborn child will be in need of protection after the child is born.

## Note

The use of the contact with other professional differential pathway will only occur in exceptional circumstances. The decision is made during the assessment phase. The senior team leader is responsible for the decision.

The contact with other professional differential pathway relies on another professional assisting Child Safety by speaking to a subject child or the pregnant woman. This option may be used if:

- a comprehensive assessment of harm and risk has been made and
- sighting and interviewing one subject child remains an outstanding task or
- sighting and interviewing the pregnant woman remain an outstanding task.

Information obtained from the professional can be used to finalise the investigation and assessment within the procedural timeframe for:

- the subject child who would otherwise have a *no investigation and assessment outcome* recorded or
- an investigation and assessment relating to an unborn child kept open until the child's birth.

Consider using this option if it is assessed that:

- the risk factors identified do not necessitate a CSO sighting and interviewing the child or the pregnant woman
- it is appropriate to engage another professional to sight or speak to the subject child or the pregnant woman.

This option may be appropriate for a child in the following circumstances:

- if a child is admitted to hospital and it is appropriate for the hospital social worker to sight or speak to the child
- if the QPS has already interviewed the child without a CSO
- if the child moves to another area and has not been sighted and interviewed by the relevant CSSC
- if it is appropriate for a professional already engaged with the child, such as a guidance officer or Child and Youth Mental Health Service worker, to speak to the child.

This option may be appropriate for a pregnant woman in the following circumstances:

- if the pregnant woman is admitted to hospital and it is appropriate for the hospital social worker to sight and interview the pregnant woman
- if the pregnant woman moves to another area and has not been sighted and interviewed by the relevant CSSC
- if it is appropriate for a professional already engaged with the pregnant woman, such as a maternal health worker, to speak to the pregnant woman.

Before using the differential pathway:

- Identify a professional who, given the child or pregnant woman's individual circumstances, would be an appropriate person to approach and speak to the child or pregnant woman.
- Seek the parents' consent for the professional to speak to the child.
- Contact the professional and assess whether they are suitable for speaking to the child or pregnant woman and gathering information about the concerns.
- Explain to the professional that any information provided by them will assist in an assessment of the child's need for protection or the unborn child's need for protection after the child is born.
- Tell the professional
  - their confidentiality obligations under the *Child Protection Act 1999*
  - the concerns being assessed
  - that the parent has consented to their contact with the child
  - general information about how to gather relevant information from a child
  - that contact must occur in a lawful way (for example, if on school property, only with the school principal's permission).

#### Note

If the information gathered from the other professional increases the assessed level of harm or risk to the child, it may still be necessary for a CSO to interview the child.

#### Attention

If the information gathered from the other professional increases the assessed level of risk to the unborn child after the child's birth, keep the investigation and assessment open in ICMS and finalise the investigation and assessment when the child is born. Refer to Take action when a pregnant woman cannot be interviewed.

The differential pathway is not to be used for:

- the same child more than once within a 12-month period, or for 2 consecutive investigation and assessments
- allegations of sexual abuse or serious physical abuse
- children under school age or where there is only one subject child—except in exceptional circumstances when the senior practitioner has reviewed the matter and assessed that it is appropriate to use the option
- a harm report
- a child subject to a child protection order granting long-term guardianship to a suitable person or a permanent care order.

The differential pathway is not to be used for a pregnant woman in the following circumstances:

- the unborn child has already been subject to an investigation and assessment or additional notified concerns have been recorded that meet the threshold for recording a notification
- the unborn child has siblings who
  - have been assessed as children in need of protection at any time in the past or
  - are not in the primary care of the pregnant woman.

#### Note

Where the differential pathway is used to finalise an investigation and assessment relating to an unborn child and it is not considered necessary for a CSO to interview a pregnant woman, ensure the pregnant woman is provided the outcome of the investigation and assessment. Refer to Inform the parents of the outcome.

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# Respond to specific matters

## Content updates

This page was updated on 19 May 2023. To view changes, please see [page updates](#)

This section provides guidance on how to investigate and assess a range of specific matters that are not covered elsewhere in this procedure.

## Unborn child

The purpose of an investigation and assessment before the birth of a child is to assess concerns about the risk of significant harm that the unborn child may experience after he or she is born. If risk is identified, the pregnant woman will be offered help and support to increase the newborn baby's safety. The role of Child Safety is to:

- assess the likelihood that the unborn child will need protection after birth
- decide what help and support can be offered to the pregnant woman and, if relevant, her partner or the father of the unborn child.

Refer to the [Checklist for an Investigation and assessment relating to an unborn child](#) for an overview of the steps required to complete an investigation and assessment for an unborn child.

Any action taken by Child Safety to investigate and assess the safety of an unborn child after birth must not interfere with the rights and liberties of the pregnant woman.

### Before commencing the investigation and assessment

Before commencing an investigation and assessment for an unborn child:

- plan the investigation and assessment (Refer to [Plan the investigation and assessment.](#))
- consider whether there would be increased risk for the unborn child after the child's birth, if the pregnant woman were alerted to the concerns. (Refer to [Delay having contact with the pregnant woman.](#))

### Delay having contact with the pregnant woman

Before having contact with the pregnant woman, the senior team leader will decide if it is necessary to delay contact with the pregnant woman until after the child is born.

The decision to delay having contact with the pregnant woman until after the child's birth will only occur if there is a high probability that, if alerted to the concerns, the pregnant woman would relocate to avoid Child Safety intervention at the time of the birth, thus placing the newborn baby at increased risk of significant harm.

### Note

The assessment about the likelihood of the woman relocating and the level of risk of harm to the newborn if this occurred, may be informed by information:

outlined in the notification

or

gathered from an external agency when the investigation and assessment was commenced.

When the decision is made to delay contact with the pregnant woman:

- The senior team leader will record the rationale and date of the decision to delay contact with the pregnant woman in the investigation and assessment event in ICMS.
- Record an *unborn child* alert on the person records of the pregnant woman and the unborn child in ICMS.
- Complete an unborn child high risk alert. (Refer to [Complete an unborn child high risk alert.](#))
- Keep the investigation and assessment event open in ICMS until the child is born and the investigation and assessment is completed.
- Seek information during the pregnancy from external agencies to inform the investigation and assessment.

If, following a decision to delay having contact with the pregnant woman, a subsequent decision is made to have contact with the pregnant woman due to new information being received about the family, the senior team leader will record in the *Assessment and Outcome* form in ICMS:

- the rationale for the decision
- the date before the child's birth that the decision was made to proceed with the investigation and assessment.

If Child Safety is contacted about additional concerns for an unborn child, refer to [Respond to additional notified concerns.](#)



## Commence the investigation and assessment

An investigation and assessment for an unborn child is considered to have commenced when:

- a pregnant woman is first sighted and is interviewed or
- new information that informs the assessment about the unborn child's safety after they are born is sought and received from an external agency (only to be used for a 5 or 10 day response priority timeframe). (Refer to [Take action to commence an investigation and assessment within 5 or 10 days.](#))

### Note

Obtaining new information to commence the investigation and assessment does not require the consent of the pregnant woman. This information may be obtained under the authority of the Child Protection Act 1999, section 159MB(1)(c).

For further information, refer to the Information sharing guidelines.

Do not proceed with the investigation and assessment if, at the outset, the woman states that she:

- was never pregnant or is no longer pregnant, due to a miscarriage or termination and it has been confirmed with her medical practitioner (or reasonable attempts have been made to do so) and
- it appears from her physical presentation that she is not pregnant.

### Practice prompt

Information may be requested from the woman's health practitioner to verify that the woman is not pregnant, with or without her consent under the authority of the Child Protection Act 1999, section 159MB(1)(c).

For further information, refer to the Information sharing guidelines.

## Investigate and assess the concerns

Investigate and assess the likelihood that the unborn child will be in need of protection after the child's birth, including:

- the level and type of risk to the child after the birth
- the services that may assist the pregnant woman and, where relevant, her partner or the father of the unborn child, prior to the birth, to reduce the likelihood the child will be in need of protection.

#### Practice prompt

During the investigation and assessment, provide the pregnant woman with information about safe infant care to reduce the risk of sudden unexpected death in infancy (SUDI). Understanding safe sleeping practices is particularly important when there is problematic alcohol and other drug use. (Refer to the Queensland Government website and the Red Nose Australia website for information and resources.)

### Investigate and assess concerns about an Aboriginal or Torres Strait Islander unborn child

For an investigation and assessment in relation to an Aboriginal or Torres Strait Islander unborn child, advise the pregnant woman of her right to have an independent person help her participate in the investigation and assessment, including the decision about whether the unborn child will be in need of protection after he or she is born.

If the pregnant woman consents, arrange for an independent person to assist her to participate in the decision making. In addition, determine whether the pregnant woman agrees to:

- the family's participation in the investigation and assessment and
- the involvement of an independent person to assist the family to participate.

Record whether an independent person helped facilitate the participation of the pregnant woman and the unborn child's family in the investigation and assessment in the *Independent person* form in ICMS.

If the Family Participation Program has not accompanied Child Safety on the initial home visit during an investigation and assessment about an Aboriginal or Torres Strait Islander unborn child:

- give the pregnant woman the brochure [Family Participation Program – Working with you to help you lead decision making about your child](#) and the contact details of the local Family Participation Program
- seek the pregnant woman's agreement for the Family Participation Program to contact her to discuss their service and how it may support and assist her and the unborn child's family during any future contact with Child Safety.

Refer to [Engage the Family Participation Program](#).

### Practice prompt

The Child Protection Act 1999, section 5C(2)(d) recognises the right of Aboriginal and Torres Strait Islander peoples to participate in significant decisions about their children (the participation principle).

The Child Protection Act 1999, section 5F(2) requires Child Safety to make active efforts (purposeful, thorough and timely efforts) to ensure the pregnant woman and, where the pregnant woman agrees, the family of an Aboriginal or Torres Strait Islander unborn child have an opportunity to participate in significant decisions.

### Safety assessment

Do not complete a safety assessment for the investigation and assessment of an unborn child unless the child is born before the approval of the investigation and assessment.

Use the following to inform the assessment:

- the risk and protective factors relating to children, and in particular, those for high-risk infants. (Refer to the practice guide [Infants at high risk](#).)
- relevant information about cultural factors for Aboriginal and Torres Strait Islander children, gathered during the investigation and assessment.

### Further reading

Practice guide Assess harm and risk of harm.

### Investigate concerns about an unborn child and their siblings

If an unborn child and their siblings are listed as subject children in a notification, investigate and assess the concerns specific to the unborn child, in addition to those relating to the siblings.

If it becomes apparent, during an investigation and assessment for a child, that the mother is pregnant, decide whether the unborn child will be recorded as a 'subject child' or an 'other child' in ICMS. If it is decided that the unborn child is a subject child:

- Investigate and assess the child protection concerns in relation to

- the unborn child after the child's birth and
- the siblings.
- Edit the approved notification to record the category as 'unborn'.

## Take action when a pregnant woman cannot be interviewed

Where attempts to interview a pregnant woman have not been successful, other than when a pregnant woman cannot be located:

- Use the template [Engagement letter – Aboriginal or Torres Strait Islander unborn child](#) or [Engagement letter – non-indigenous unborn child](#) to provide written advice to the pregnant woman about
  - the investigation and assessment process, including Child Safety's obligation to assess whether the unborn child will be in need of protection after the child is born
  - the pregnant woman's rights
  - help and support the pregnant woman may access during pregnancy to decrease the likelihood the unborn child will be in need of protection after the child is born.
- Consider using the differential pathway contact with other professional. (Refer to [Consider the differential pathway.](#))

### Practice prompt

It may assist a pregnant woman to read and understand a letter from Child Safety, if a professional working with the pregnant woman can offer to discuss it with her.

If a pregnant woman cannot be interviewed because:

- she has exercised her right not to be interviewed after reasonable attempts have been made to engage her and
- the differential pathway cannot be used or
- the differential pathway was used, but the information provided by the other professional suggests increased risk to the unborn child after the child's birth

take the following action:

- Record an *unborn child* alert on the person records of the pregnant woman and the unborn child.

- Complete an unborn child high risk alert. (Refer to [Complete an unborn child high risk alert.](#))
- Keep the investigation and assessment event open in ICMS until the child is born and the investigation and assessment is completed.
- Seek information from external agencies during the pregnancy to inform the investigation and assessment.

### Take action when a pregnant woman cannot be located

If the pregnant woman cannot be located after reasonable attempts have been made to locate her:

- Seek information during the pregnancy from external agencies to inform the investigation and assessment, if possible.
- Record an *unborn child* alert on the person records of the pregnant woman and the unborn child in ICMS.
- Complete an unborn child high risk alert. (Refer to [Complete an unborn child high risk alert.](#))
- Keep the investigation and assessment event in ICMS open until either:
  - the child is born and the investigation and assessment is completed
  - 2 months have elapsed since the estimated date of delivery of the child and the woman has still not been located. In this circumstance:
    - complete a *Record of actions—mobile family* form in the investigation and assessment event in ICMS
    - record a *no investigation and assessment outcome*.

### Complete an unborn child high risk alert

Complete an unborn child high risk alert when:

- a decision has been made by a senior team leader to delay contact with a pregnant woman
- a pregnant woman cannot be located after reasonable attempts have been made to locate her
- the pregnant woman could not be interviewed by Child Safety or another professional using the differential pathway.

To complete an unborn child high risk alert:

- Complete and forward
  - an [HRA Form 1: Unborn child high risk alert](#) to the hospital/s where the pregnant woman is likely to give birth. (Refer to the Queensland Health [Unborn child high risk alert contact list.](#)) and/or

- a letter to the private or interstate hospital/s where the pregnant woman is likely to give birth. (Refer to the practice guide [Respond to an unborn child.](#))
- In exceptional circumstances only, where the pregnant woman is highly mobile and it is not possible to identify the hospitals where she is likely to give birth
  - complete an email with the title Statewide HRA (to ensure the email is activated), attach the HRA Form 1 and send the email to [Statewide\\_HRA@csyw.qld.gov.au](mailto:Statewide_HRA@csyw.qld.gov.au) (this will ensure that the email will be sent to public hospital child protection staff throughout Queensland, and to the Mater Hospital and
  - send a letter to the private or interstate hospital/s where the pregnant woman may be likely to give birth (see note below).
- Telephone the hospitals to confirm receipt of the HRA Form 1 or letter and attach the form and letter to the investigation and assessment event in ICMS.
- Provide the CSAHSC with a [Child Safety After Hours Service Centre: After hours referral](#) form and all relevant information, including the HRA Form 1 and letter.
- Refer the matter to a SCAN team, if a coordinated multi-agency response is required. (Refer to the [Consider a Suspected Child Abuse and Neglect team referral.](#))
- Record details of all actions taken in a case note in the investigation and assessment event.
- Record a *Member of a mobile family* alert on all relevant person records, where there is information to suggest the pregnant woman is highly mobile.
- Contact the pregnant woman's medical practitioner (if known) to
  - discuss the concerns identified
  - request that information be shared with relevant health professionals, such as the midwife or hospital social work services
  - ask that Child Safety be advised when the child is born.

#### Note

The Queensland hospital email addresses are monitored during business hours only. In the rare situation where all public hospitals need to be urgently alerted to the HRA Form 1 outside business hours:

be aware that hospitals will not receive the emailed information until the next business day

consider whether to telephone each hospital (including the Mater Mothers' Hospital and any private or interstate hospital) at which the pregnant woman may be likely to present. (For Queensland hospitals refer to the Queensland Health Unborn child high

risk alert contact list).

### Tip

If the pregnant woman presents for delivery at a hospital that has received the HRA Form 1, the hospital will send Child Safety the HRA Form 2 – unborn child high risk alert: notification that pregnant woman has presented for delivery.

### Further reading

Practice guide Respond to an unborn child.

## Record the investigation and assessment outcome

For an unborn child, one of the following outcomes may be recorded:

- substantiated—child in need of protection, for an unborn child who is at risk of significant harm after birth and neither parent will be able and willing to protect the child from the harm
- unsubstantiated—child not in need of protection, for an unborn child who will not be at risk of significant harm after birth
- substantiated—ongoing intervention continues, for an unborn child who is already subject to ongoing intervention and will be at unacceptable risk of significant harm after birth
- unsubstantiated—ongoing intervention continues, for an unborn child who is already subject to ongoing intervention and will not be at unacceptable risk of significant harm after birth
- no investigation and assessment outcome, where a pregnant woman
  - advises she is no longer, or has never been pregnant and it has been confirmed with her medical practitioner (or reasonable attempts have been made to do so)
  - has not been located and two months have passed since the estimated date of delivery.

If an ‘unsubstantiated – child not in need of protection’ outcome is recorded for an unborn child, take no further action unless there are identified needs and the pregnant woman consents to receive support. In this case, make a referral to one of the following:

- an intensive family support service. (Refer to Procedure 1 [Referral to another agency.](#))
- an Aboriginal and Torres Strait Islander Family Wellbeing Service, if the pregnant woman is an Aboriginal person or Torres Strait Islander (Refer to Procedure 4 [Refer a family to an Aboriginal and Torres Strait Islander Family Wellbeing Service.](#))
- another agency that can offer the pregnant woman help and support.

### Further reading

Assess the information and decide the outcome.

Where a decision is made to record the investigation and assessment outcome as 'substantiated – child in need of protection', consider whether to complete a [HRA Form 1: Unborn child high risk alert](#) based on:

- whether the pregnant woman has consented to a support service case (Refer to [Provide a support service case to a pregnant woman.](#))
- whether there are concerns for the immediate safety of the unborn child following their birth. (Refer to [Immediate safety concerns for a newborn child.](#))

If an Unborn child high risk alert is required to ensure Child Safety is immediately notified that a pregnant woman has presented to hospital for delivery, refer to [Complete an unborn child high risk alert.](#)

### Practice prompt

Before the child's birth, ensure the maternal health service has all relevant information about the unborn child's safety and wellbeing needs at birth, including whether there are any assessed risks to the child's safety, whether the pregnant woman is likely to have support needs while on the ward and the level of intervention or involvement (current or planned) by Child Safety.

Refer to the practice guide Respond to an unborn child.

## Take action after the child's birth

Take action following the birth of the child, depending on the case circumstances:



- Complete a safety assessment to determine whether the child is at immediate risk of harm. (Refer to [Carry out a safety assessment.](#))
- Proceed with other outstanding actions to complete the investigation and assessment where it was not finalised during pregnancy.
- If an investigation and assessment completed prior to the birth had an outcome of *substantiated—child in need of protection* and a support service case is not currently open, either
  - consult the senior team leader and the OCFOS lawyer and commence the most appropriate type of ongoing intervention
  - record a notification if it is decided that an up-to-date risk assessment is needed.
- If there is an open support service case, review the support plan and decide how ongoing intervention will continue (if this did not occur before birth), either as intervention with parental agreement or as an application for a child protection order.

#### Note

If time allows, engage the Family Participation Program before contacting the parents of an Aboriginal or Torres Strait Islander newborn baby if:

a notification before the child's birth was delayed until after the birth and is now to proceed before the birth, the Family Participation Program was supporting the pregnant woman in her contact with Child Safety.

Refer to Engage the Family Participation Program.

## Complete an HRA form 3 to cease an alert

Complete and forward an [HRA Form 3: Cessation of unborn child high risk alert](#) (HRA Form 3) to all relevant hospitals when either:

- an HRA Form 1 has previously been sent to multiple hospitals and, following the baby's birth, the remaining hospitals need to be notified that an alert is no longer required or
- Child Safety has been informed that the pregnant woman has had a miscarriage or termination and the relevant hospitals need to be notified that an alert is no longer required.

In circumstances where a statewide alert to Queensland Health's maternity hospitals was required before the baby's birth and the HRA Form 1 was sent to all public hospitals and the Mater Hospital, complete an HRA Form 3 and forward it to [Statewide\\_HRA@csyw.qld.gov.au](mailto:Statewide_HRA@csyw.qld.gov.au) when the alert is no longer required.

Also notify any private or interstate hospitals informed of the alert when the alert is no longer required.

## Transfer the investigation and assessment

The transfer of an investigation and assessment is to occur in a way that prioritises the safety of the child and provides continuous and planned service delivery to the child and family.

Transfer an investigation and assessment to the relevant CSSC if:

- child protection concerns have been received and recorded by a RIS, CSAHSC or a CSSC in a different geographical area to where the child and their family reside
- a child and their family relocate during the investigation and assessment, regardless of the reason.

If a child lives across two households, transfer the investigation and assessment to the CSSC in the geographical area of the household where the significant harm or risk of significant harm is alleged to have occurred. If concerns exist across both households:

- two investigation and assessments will be completed
- transfer the investigation and assessment event to the CSSC in the geographical area of each household.

### Practice prompt

If the harm households are in different geographical areas, the CSSCs will collaborate to complete the investigation and assessments and minimise the impact on the family.

If a notification has been received and recorded, transfer the open investigation and assessment to the pending allocation tray of the relevant CSSC within the following timeframes:

- immediately—for a notification with a 24-hour response timeframe and telephone the CSSC senior team leader to inform them
- within 3 days—for an investigation and assessment with a 5-day response
- within 5 days—for an investigation and assessment with a 10-day response.

### Further reading

Refer to Procedure 1 Complete the response priority.

When the investigation and assessment is received by the receiving CSSC, it will be:

- allocated to a CSO by the senior team leader
- commenced within the required timeframe
- completed within the specified timeframe.

If a family moves to another geographical area during an investigation and assessment without advising Child Safety, the transferring CSSC retains case responsibility until the transfer process is completed and will:

- try to locate the family
- decide if the investigation and assessment can be completed with the assistance of another CSSC.

If most of the investigation and assessment tasks are still to be completed, transfer the investigation and assessment, and:

- immediately contact the senior team leader of the receiving CSSC to advise of:
  - the pending transfer
  - the outstanding tasks needed to complete the investigation and assessment
- make sure all information gathered as part of the investigation and assessment is recorded in ICMS as soon as possible
- reassign the investigation and assessment event to the receiving CSSC, including outstanding event tasks, so that any partially completed forms are also transferred
- promptly transfer any paper files to the receiving CSSC.

The receiving CSSC must:

- accept responsibility for completing the investigation and assessment during the first point of contact by the transferring CSSC
- allocate the investigation and assessment immediately
- ensure the investigation and assessment is commenced within the response priority timeframe—or if the investigation and assessment has already commenced, ensure the subject children are sighted within one week
- complete a new safety assessment during the first contact with the family

- complete the investigation and assessment.

CSSC managers are responsible for resolving disagreements that arise during the investigation and assessment transfer.

If the investigation and assessment is for a child or family who has moved to another jurisdiction, refer to Procedure 1 [Information about a child in another jurisdiction](#).

## Record an alert

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An alert is recorded when significant information relevant to an alert type is identified during the investigation and assessment for a child, their family or carer family. The following alerts are available in ICMS:

- Carer application refused
- Carer certificate of authority cancelled/suspended
- CCYPCG—Blue card declined. (This alert refers to a decision to refuse a person’s Blue Card application. The decision was previously the responsibility of the CCYPCG and is now the responsibility of Blue Card Services. The name of the alert in ICMS has not yet been updated.)
- Child death—result of harm
- Child protection warrant
- Child seriously injured—result of harm
- Conflict based placement concern
- Deceased—other (for example, as a result of accidental death, disability or illness)
- Experienced detriment by department—Policy 634
- Harm report
- History of parents taking children without authority
- Member of a family—child death—result of harm (for example, a member of a family where a child has died as a result of abuse or neglect)
- Member of a family—child seriously injured—result of harm
- Member of a mobile family
- Missing child
- Risk to staff
- Self harm risk
- Serious health condition
- Significant DFV threat
- Suicide risk
- Unaccompanied humanitarian minor
- Unborn child.

### Practice prompt

If it is identified during the investigation and assessment that a subject child is at risk of self-harm or suicide, record the relevant alert. (Refer to Procedure 5 Record a suicide risk alert or Procedure 5 Record a self-harm alert in ICMS.)

### Further reading

Procedure 5 Immediate suicide risk management plan for children at intake or during an investigation and assessment

Procedure 5 Self-harm risk management plan for children at intake or during an investigation and assessment.

## Record an alert for significant domestic and family violence

Consider recording a ‘Significant DFV threat’ alert when one or more of the following domestic and family violence risk factors are identified within the family:

- a victim believes their life is in danger
- a perpetrator has caused serious injuries that require hospitalisation or assessment and treatment at a hospital emergency department
- strangulation, stabbing or choking has been perpetrated
- there has been an escalation of physical violence
- the perpetrator has a history of incarceration for breach of a domestic violence order, physical assault, grievous bodily harm, torture or deprivation of liberty
- the perpetrator has a history of breaches of domestic violence orders—failure to comply with a domestic violence order
- there are previous or current threats by the perpetrator to kill the victim, a child, other family member or pets
- the perpetrator has access to or possession of a firearm
- the perpetrator has a history of stalking or obsessive behaviour
- the perpetrator’s behaviour includes a pattern of coercion and control, for example, extreme isolation of the victim or the perpetrator accompanying the victim at all times when in public.

### Attention

Also consider recording a ‘Significant DFV threat’ alert if a referral about the family has been made to a High Risk Team.

To record a *Significant DFV threat* alert:

- Create an alert in the ICMS client profiles of the:
  - perpetrator
  - victim and
  - child.
- Record the name and client profile number of the victim and child in the rationale field of the perpetrator's alert.
- Record the name and client profile number of the perpetrator in the rationale field of the victim's and child's alerts.
- In each alert, also record either:
  - where to locate the assessment of the perpetrator's pattern of behaviour, for example, the event number or
  - if there is no assessment, a brief summary of the coercive and controlling behaviours and the specific worries for the safety of the victim and child.

Record a separate alert each time the person has perpetrated domestic and family violence and been assessed as posing a significant threat to more than one victim. This will enable the perpetrator's behaviour to be tracked over time and across multiple families.

### Further reading

Procedure 1 Information that requires an Integrated Client Management System alert

Practice guide High Risk Teams and Child Safety

Practice guide Information sharing for domestic and family violence

Practice guide Domestic and family violence—protecting identifying information in court processes

Respond if a person may have been a victim of violence.

## Take action if a child and family cannot be located

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### Practice prompt

Take all reasonable steps to locate a family subject to a notification within the response priority timeframe.

If a family cannot be located, consider undertaking the following in an attempt to find information to locate them:

- re-contact the notifier
- check SCAN team records
- contact any service providers known to be providing a service to the child or family
- search telephone directories
- contact the QPS for information and assistance
- search the electoral roll. (Refer to [Australian Electoral Commission Roll.](#))
- request assistance from schools or the Department of Education
- request assistance from Centrelink
- request assistance from Medicare Australia
- request assistance from the Child Support Agency.

### Note

The Information Sharing Protocol between the Commonwealth and Child Protection Agencies allows Australian Government agencies including Centrelink, Medicare Australia and the Child Support Agency to release a family's last known whereabouts to an authorised officer, in specific circumstances.

Requests must be made via Data Management Services only after all other attempts to locate a family have been exhausted. In most instances, Centrelink will have the most accurate up-to-date details, so contact Centrelink before Medicare Australia and the Child Support Agency.

Each agency has a separate disclosure requirement and request form.

Centrelink may disclose relevant information if it is necessary to prevent or lessen a threat to the life, health or welfare of a person. To request a family's whereabouts from Centrelink:

- complete the [Request by a Child Protection Agency for information from Centrelink \(SI041\)](#) form
- email the form to [DMS\\_Centrelink@communities.qld.gov.au](mailto:DMS_Centrelink@communities.qld.gov.au) with the subject heading, *Response Priority: Centrelink Request for (family name)*.

Medicare Australia may disclose relevant information where it is necessary to prevent or lessen a serious or imminent threat to the life or health of an individual. To request information from Medicare Australia:

- Complete the [Medicare Request Form](#).
- Email the form to [DMS\\_Medicare@communities.qld.gov.au](mailto:DMS_Medicare@communities.qld.gov.au) with the subject heading, *Response Priority: Medicare Request for (family name)*.

Before releasing information, the Child Support Agency needs to form a reasonable belief that:

- the information is necessary to prevent or reduce the threat to the life, health or welfare of a person or
- a reasonable belief that the threat may provide evidence that an offence has or may be committed against a person and the information will be used to prevent, investigate or prosecute the offence.

To request information from the Child Support Agency:

- complete the [Request by a Child Protection Agency for information from Child Support \(SI043\)](#) form
- email the form to [DMS\\_CSA@communities.qld.gov.au](mailto:DMS_CSA@communities.qld.gov.au) with the subject heading, *Response Priority: Child Support Agency Request for (family name)*.

For assistance with making a request, contact Data Management Services. For specific information on what each agency can disclose, refer to the [Information Sharing Protocol between the Commonwealth and Child Protection Agencies](#).

## Record the outcome if the family cannot be located

If it has not been possible to commence an investigation and assessment and the senior team leader is satisfied that all reasonable attempts have been made to locate the family—taking into account the seriousness of the concerns, the potential risk of harm and the age and vulnerability of the child:

- Record a *member of a mobile family* alert in ICMS on the person record of each relevant person, as soon as it is decided that the family are mobile, or will be difficult to locate.
- Document all action taken to locate the child and family, in the *Record of actions—mobile family* form in the investigation and assessment event in ICMS, including:
  - attempts made to locate the family and carry out the investigation and assessment
  - the results of all action taken
  - relevant information received about the family from other parties



- decisions made, and the rationale for decisions.
- Finalise the investigation and assessment within 2 months and record a *no investigation and assessment outcome* for each subject child.

If a subsequent notification is recorded and the family has been located:

- Do not reopen the original investigation and assessment event.
- Assess the previous concerns along with the current concerns, as part of the investigation and assessment.
- Record the previous concerns and the relevant outcomes in the current investigation and assessment event.

## Take action if the parents do not allow contact with a child

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If, during an investigation and assessment, a parent refuses entry to the home, or contact with the child:

- Make every attempt to gain the parents' consent to carry out the investigation and assessment.
- Explain the legal obligation of Child Safety to investigate and assess the concerns under the *Child Protection Act 1999*, [section 14](#).
- Emphasise the responsibility of Child Safety to sight the child and speak to the child and the parents—to assess the concerns.
- Explain that the investigation and assessment process provides an opportunity for the parents to respond to the concerns.
- Acknowledge the parents' reluctance and suggest options such as the use of a support person (Refer to the practice guide [The role of a support person](#).) or
- Before leaving the premises, arrange an appointment at another time—if no immediate danger is identified for the child, from:
  - information in the notification
  - observations made during contact with the parents.

If the parents continue to refuse contact, consult the senior team leader and the OCFOS lawyer about taking action under the *Child Protection Act 1999* to enable the investigation and assessment to proceed, either:

- using powers under sections 16 or 18—to access the child or secure their immediate safety, where there are concerns for the immediate safety of a child. (Refer to [Take action when the child is at immediate risk of harm—use of section 16 or 18](#).)
- applying for a TAO. (Refer to [Respond if a parent will not consent to actions required—temporary assessment order](#).)

- applying for a court assessment order. (Refer to [Respond if a parent will not consent to actions required—court assessment order.](#))

## Request assistance from another jurisdiction

### Investigation and assessment - address known

#### Note

Assistance from another jurisdiction to complete an investigation and assessment is considered to be case work assistance under the Interstate Child Protection Protocol (October 2021).

Request assistance from another state, territory or New Zealand to complete the investigation and assessment, if the:

- notification is for a child who currently resides in Queensland
- parent who is the alleged person responsible for harm to a child resides at a known address in another jurisdiction.

To request assistance in completing the investigation and assessment:

- contact the Interstate Liaison (IL) team to obtain the appropriate form to make the request of the other jurisdiction
- Attach the notification and any other relevant information gathered.
- Provide information about attempts already made to contact the parent or why this has not occurred.
- Specify the tasks requested of the other jurisdiction.
- Scan and email all relevant documentation to the IL team at [ILO@csyw.qld.gov.au](mailto:ILO@csyw.qld.gov.au).

The IL team will:

- forward the documentation to the IL team in the jurisdiction where the parent lives and request that the jurisdiction assists with interviewing the identified parties
- follow up with the IL team in the other jurisdiction, to find out whether they have decided to conduct the interviews, as requested.

If the other jurisdiction agrees to assist, the IL team will obtain from them a record of the interviews conducted. If the other jurisdiction does not agree to assist, the IL team will consult with the CSSC manager about whether to respond in line with the dispute resolution process.

If a family relocates to another jurisdiction before or during the investigation and assessment:

- Forward a [Request for interstate notification](#) to the interstate liaison team. (Refer to Procedure 1 [Information from another jurisdiction](#).)
- Take no further action—the other jurisdiction will respond to the concerns in line with their legislative requirements.
- Close the investigation and assessment event in ICMS, in line with usual investigation and assessment processes, noting that an interstate referral was made. (Refer to [Finalise the investigation and assessment](#).)

## Investigation and assessment - address unknown

If the whereabouts of the family in another jurisdiction is unknown, forward a request for an interstate alert to the IL team. (Refer to Procedure 1 [Information about a child in another jurisdiction](#).) If information is subsequently received about the family or the family's whereabouts, notify the IL team immediately.

## Respond to a request for assistance from another jurisdiction

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If another state, territory or New Zealand requests case work assistance from Queensland to complete an investigation and assessment being conducted by that jurisdiction, the IL team will:

- ensure the relevant documentation is received, including the current Queensland address, history checks and notification information from the other jurisdiction
- ensure that the other jurisdiction has specified the tasks to be completed
- forward all relevant documentation to the relevant CSSC for action.

The receiving CSSC will:

- allocate the matter
- seek clarification, as necessary, with the requesting office in the other jurisdiction
- complete the tasks as requested
- send a written report to the IL team for forwarding to the other jurisdiction.

## Concerns about a child's discharge from a hospital

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### Respond to a doctor's concerns about a child's immediate safety upon discharge from a hospital

If a child is subject to an open investigation and assessment and a Queensland Health doctor contacts the CSSC with concerns about the immediate safety of a child upon discharge:

- seek as much information as possible about the reasons for the doctor's concern

- collaborate with the doctor to decide what action is required to ensure the safe discharge of the child
- carry out a safety assessment for the child, or review the current safety assessment, if applicable.

#### Practice prompt

If the doctor provides new concerns that were previously unknown, record them as additional notified concerns. (Refer to Respond to additional notified concerns.)

If, after consultation with RIS or CSSC staff, the doctor remains concerned about Child Safety's response and the immediate safety of a child upon discharge, they may initiate the discharge escalation pathway for a child at risk.

Advise the CSSC manager immediately if the doctor indicates the discharge escalation pathway is likely to be initiated.

The discharge escalation pathway consists of two steps:

- an emergency case conference to enable a coordinated response to the immediate safety needs of the child upon discharge, and
- a formal escalation when the emergency case conference is unable to resolve the concerns.

For more information, refer to the practice guide [Queensland Health discharge escalation pathway](#).

#### Tip

Prior to initiating the discharge escalation pathway, the doctor must follow all existing Queensland Health legislative and procedural requirements and guidelines for assessing and responding to a child's protection needs.

#### Further reading

Discharge escalation pathway for a child at risk (Queensland Health).

## Respond when the discharge escalation pathway is initiated

To initiate the discharge escalation pathway, the doctor will contact the senior team leader and advise that there will be an emergency case conference to coordinate a response to the immediate safety needs of the child upon discharge.

The senior team leader will immediately advise the CSSC manager that the discharge escalation pathway has been initiated.

The emergency case conference may be either:

- an emergency SCAN team meeting, when the criteria for a SCAN referral is met, or
- an inter-agency meeting, when the criteria for a referral to the SCAN Team is not met, or an after hours response is required.

The emergency case conference will occur as soon as practicable and within 24 hours, to discuss:

- the doctor's concern for the child's immediate safety
- the Child Safety assessment and response to the child's immediate safety needs
- where the child will be going when they are discharged from hospital and what arrangements may have been made to ensure the child's immediate safety
- how long the child will be staying in hospital
- professional visiting arrangements and
- whether a further review is required.

### Attention

A doctor has 24 hours to convene the emergency case conference (emergency SCAN team meeting or inter-agency meeting). This 24 hour timeframe commences at the time the doctor initiates contact with Child Safety, either by a phone call or by leaving a message for a call back.

If the doctor does not receive a response from Child Safety within 24 hours, they will contact the CSSC manager for appropriate action.

In circumstances when the 24 hours has passed and the CSSC manager has not responded or actioned the request, the medical officer can commence a formal escalation of their concerns. (Refer to Respond to a formal escalation.)

### ***Request to attend an emergency SCAN team meeting***

A Queensland Health SCAN team core member representative may request an emergency SCAN team meeting for the purposes of initiating the discharge escalation pathway.

When this occurs, follow existing SCAN team processes. (Refer to the [Suspected Child Abuse and Neglect \(SCAN\) Team System Manual](#).)

The CSSC manager is required to attend this meeting, in addition to the nominated Child Safety SCAN team core member representative.

#### **Attention**

When a SCAN team meeting is convened for the purpose of initiating the discharge escalation pathway, and the SCAN team is unable to reach consensus on recommendations regarding the multi-agency actions required, the discharge escalation process for a child at risk will override the SCAN team system escalation process. The decision to initiate a formal escalation is made by a Queensland Health doctor.

### ***Request to attend an inter-agency meeting***

When the matter does not meet the criteria for a referral to the SCAN team, or an after-hours response is required, the Queensland Health doctor will contact the relevant senior team leader to invite the senior team leader and CSSC manager to attend an inter-agency meeting.

The senior team leader and CSSC manager must attend this meeting and may invite other Child Safety staff or service providers engaged with the child and family to contribute to the discussion.

When an inter-agency meeting is scheduled outside of business hours, the CSAHSC senior team leader will attend.

Queensland Health will invite stakeholders who are engaged with the child's care and discharge planning, such as the doctor, child protection liaison officer, child protection advisor and other relevant allied health staff.

The inter-agency meeting will be chaired by a Queensland Health representative and formal minutes will be recorded.

The CSSC manager will advise the regional director immediately if the doctor indicates a formal escalation is likely to be initiated.

## Respond to a formal escalation

A formal escalation may occur when a child is medically fit for discharge and either:

- an emergency case conference has occurred, and the doctor is still concerned about Child Safety's decision making and the immediate safety of a child upon discharge from a hospital

or

- the CSSC manager has not responded within the 24 hour timeframe to a request for an emergency case conference.

To initiate a formal escalation, the doctor's line manager (or a nominated escalation position within the relevant hospital and health service) will contact the Child Safety regional director to:

- discuss the immediate safety concerns for the child and the Child Safety response and
- consider further actions and make decisions as required.

If this occurs outside of business hours, Queensland Health will contact the CSAHSC senior team leader to formally escalate the concerns, consider further actions and make decisions as required. If they are unable to contact the senior team leader by phone, they will send an email to CSAHSC ([csahscintake@cyjma.qld.gov.au](mailto:csahscintake@cyjma.qld.gov.au)) requesting an urgent call back advising:

- a formal escalation has been initiated
- contact details for a return phone call, and
- a summary of the presenting issues.

The nominated escalation position and the regional director or CSAHSC senior team leader have the authority to consider further actions and make decisions as required.

## End the escalation process

If a child is discharged by the Queensland Health treating team or self-discharges at any point during the process, the discharge escalation pathway ceases.

If a child is discharged, the doctor must advise Child Safety of:

- the date and time the child was discharged
- the name and address of the person the child has been discharged to, if known
- the discharge summary, recommended follow up and risks relevant to the child's safety and wellbeing needs, and
- any other information relevant to the safety and best interests of the child.

When advised that a child has been discharged from hospital, take action to ensure the child's immediate safety.

## Respond if a person may have been a victim of violence

If information is gathered during the investigation and assessment that indicates a child or family member may have been injured as a result of an act of violence, give them one or more of the following, in line with Child Safety's responsibility under the [Victims of Crime Assistance Act 2009](#):

- the Victim Assist Queensland telephone number–1300 546 587 or email [victimassist@justice.qld.gov.au](mailto:victimassist@justice.qld.gov.au)
- the [Victim Assist Queensland](#) website details
- a copy of the Victim Assist Queensland [brochure](#).

After giving the information record the following in a 'victim of crime' case note in the investigation and assessment event in ICMS:

- that the child or family member has been identified as possibly being a victim of an act of violence
- that information about how to contact Victim Assist Queensland has been provided.

### Attention

A parent who has been identified as a person responsible for an act of violence against their child is unable to make an application to Victim Assist Queensland on behalf of the child.

If the perpetrator remains with the family, make sure that the process of sharing the information about Victim Assist Queensland is carried out sensitively and in a way that ensures the safety of the child or family member.

### Further reading

Procedure 5 Victims of Crime.



## Respond if a person has been a victim of sexual abuse

If a parent (over the age of 18), adult household member or another adult discloses being a victim of sexual abuse as a child during an interview, ask the adult if the information has been reported to the QPS or if they want the information reported to the QPS.

If the adult wants the information reported:

- complete the form [Adult as a victim of alleged sexual offence](#), including details of who the information was reported to and in what format
- save the completed form in the iDOCS location 'DCSYW>Region management>Shared DCSYW>01 CS Reporting' in the folder 'Form – Adult as a victim of alleged child sexual offence'.

If the adult advises that the information has already been reported to the QPS or they do not want the information reported:

- complete the form [Adult as a victim of alleged sexual offence](#)
- save the completed form in the iDOCS location 'DCSYW>Region management>Shared DCSYW>01 CS Reporting' in the folder 'Form – Adult as a victim of alleged child sexual offence'.

## Respond to a request for notifier information from police

The disclosure of notifier information can occur in limited circumstances, such as where it is necessary to ensure the safety, wellbeing or best interests of a child (*Child Protection Act 1999*, sections [186A](#) and [186B](#)).

### Note

Notifier information is the name of a person, or information that can lead to the identity of a person, who has reported to concerns about the safety or wellbeing of a child to Child Safety.

The QPS or a police officer from another jurisdiction may request notifier information to:

- enable them to carry out a function under the *Child Protection Act 1999*
- perform an enforcement action (prevent, detect, investigate, prosecute or punish) relating to a criminal offence against a child.

### Attention

Any disclosure of notifier information may have serious implications.

Notifier information may only be released in response to a request from police with the approval of a regional director, and only to the extent allowed by the Child Protection Act 1999, sections 186A and 186B.

## Respond to a request for information to perform a function under the *Child Protection Act 1999*

If the QPS or a police service in another jurisdiction request notifier information to enable them to perform a function under the *Child Protection Act 1999*, a CSSC manager, RIS manager or CSAHSC manager will:

- seek the regional director's approval to provide the information
- provide the regional director with information about
  - why notifier information may need to be provided to police, including the function the police need to perform
  - whether there is another way the police can perform the function without the notifier's information being disclosed
  - whether there is another way police can obtain the information they seek from the notifier (for example, the CSO recontacting the notifier to obtain information the QPS requires).

To decide whether to approve the release of the notifier information, the regional director will consider:

- if disclosing the notifier information is necessary for the police, to perform the relevant function under the *Child Protection Act 1999* and
- whether the disclosure would promote the safety, wellbeing and best interests of a child.

### Further reading

Refer to the policy Disclosing notifier details to police for information about the factors the regional director will consider when deciding whether the information is necessary to ensure the safety, wellbeing or best interests of a child.

The CSSC manager, RIS manager or CSAHSC manager will advise the police of the regional director's decision.

If the regional director approves the release of notifier information to the police, the CSSC manager, RIS manager or CSAHSC manager will:

- provide the information to the police, limiting the information to the extent it is necessary for the police to carry out their function under the *Child Protection Act 1999*
- record that the information has been provided in the intake event in ICMS.

### Respond to a request for information to perform an enforcement action

If the QPS or a police service in another jurisdiction request notifier information for the prevention, detection, investigation, prosecution, or punishment of a criminal offence against a child (an enforcement action), advise the police officer:

- the request must be provided in writing by a senior police officer (of at least the rank of sergeant)
- the request must specify that notifier information is being requested in accordance with the *Child Protection Act 1999*, section [186B](#) (for an enforcement action), including whether the request is time sensitive
- to send the written request to either
  - the office of the regional executive director in the relevant region, for requests during business hours
  - CSAHSC, where the request is urgent and outside of business hours.
- the regional director (or other authorised person, if applicable) will
  - consider whether the disclosure is necessary to ensure the safety, wellbeing or best interests of a child
  - respond to the request in writing, in a timely manner
  - advise the reason for the decision, if the regional director decides not to disclose the notifier information
- if notifier information is disclosed, the regional director or another person authorised under the *Child Protection Act 1999*, section [186B\(2\)](#) will inform the notifier of this as soon as practicable, unless
  - it is not possible or practical to inform the notifier (for example, the notifier's contact details are unknown or unable to be obtained) or
  - informing them may prejudice the enforcement action (Refer to [Inform a notifier their information has been disclosed](#)).

### Further reading

Refer to the policy Disclosing notifier details to police for information about the factors the regional director will consider when deciding whether the information is necessary to ensure the safety, wellbeing or best interests of a child.

Practice guide Notifiers and mandatory reporting.

### Inform a notifier their information has been disclosed

As soon as practicable and at the request of the regional director, an authorised person must inform a notifier their information has been disclosed to a senior police officer, (*Child Protection Act 1999*, section [186B\(2\)](#)), unless the regional director decides:

- it is not practicable to do so (for example, the notifier's contact details are unknown or unable to be obtained), or
- doing so would, or would be likely to, prejudice an enforcement action.

### Note

The following persons are authorised (authorised person) to inform the notifier their information has been disclosed to police:

a CSSC manager  
CSAHSC manager  
CSSC senior team leader  
CSAHSC senior team leader  
a senior practitioner  
(Child Protection Act 1999, section 186B(2)(b)).

After a notifier has been informed their information has been disclosed, an authorised person will:

- record that the information has been provided in the intake event in ICMS and
- advise the regional director the notifier has been informed.

## Young person in contact with the youth justice system

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When investigating and assessing concerns about a child who is also in contact with the youth justice system, contact the youth justice case worker to:

- gather information to inform the assessment
- verify information provided by the child and parents during interviews
- share relevant information, for the purpose of coordinating service delivery
- advise that the child has been placed in care, if applicable.

A youth justice case worker may act as a support person for the child during an interview or investigation and assessment process, if requested by the child or their family. If a request is made, contact the relevant Youth Justice Service Centre to advise them of the request and discuss whether it is appropriate for a youth justice officer to participate in the process.

Any involvement by youth justice in the implementation or monitoring of an immediate safety plan for a child is to be negotiated by Child Safety with the youth justice case worker or their line manager.

If a child in contact with the youth justice system is taken into the custody of the chief executive, contact the youth justice case worker and:

- tell them who has custody and guardianship rights and responsibilities for the child
- explain the implications for decision making about custody and guardianship matters. (Refer to Procedure 5 [Decision making for a child.](#))
- if a child is an Aboriginal or Torres Strait Islander child, tell the child they have the right to have an independent person to help facilitate their participation in significant decisions made by Child Safety, if relevant. If they consent, arrange for the independent person's involvement. (Refer to Procedure 5 [Enable participation of Aboriginal and Torres Strait Islander peoples in decision making.](#))
- coordinate service delivery for the period that the young person is in care.

If the matter is referred to the SCAN team, the youth justice case worker may be invited by the SCAN team to participate in the meeting as an invited stakeholder. Refer to the [Suspected Child Abuse and Neglect \(SCAN\) Team System Manual](#) for how to make a referral to a SCAN team and how to invite a stakeholder.

If youth justice remains involved with the child when the investigation and assessment is completed, contact the youth justice case worker and provide the following information:

- the outcome of the investigation and assessment
- whether the child is in the care of the parents
- the nature of any ongoing intervention by Child Safety.

## Fabricated or induced illness

### Tip

Fabricated or induced illness, previously known as Munchausen's Syndrome by Proxy, is a specific pattern of abuse where an individual fabricates or induces illness or injury in a person in their care. In child protection matters, illness or injury may be fabricated or induced in a child by a parent, or someone in a parental role.

If concerns about fabricated or induced illness are identified during the investigation and assessment:

- immediately give the information to the QPS (*Child Protection Act 1999*, [sections 14\(2\) and \(3\)](#)) and
- consult the QPS before taking further action to complete the investigation and assessment.

### Further reading

Procedure 1 Report information to the Queensland Police Service

Consult with the Queensland Police Service and decide if there will be a joint response.

## Adopted child

If it is identified that the child is adopted, at the completion of the investigation and assessment, consider referring the family to either Adoption and Permanent Care Services or Post Adoption Support Queensland (PASQ), if the child or their family may benefit from specialised counselling. (Refer to [Post Adoption Support Queensland](#) (PASQ).)

## Animal welfare issues

Discuss any animal welfare issues identified during the investigation and assessment with the family.

### Attention

The confidentiality provisions of the Child Protection Act 1999 significantly limit the information that can be shared with the Royal Society for the Prevention of Cruelty to Animals (RSPCA).

The [Memorandum of Understanding between The State of Queensland, through Department of Communities \(Child Safety\) and The Royal Society for the Prevention of Cruelty to Animals, Queensland 2012–2014](#) includes information about when Child Safety will:

- give families information about the RSPCA
- contact the RSPCA directly with the family's consent.

If it becomes apparent that an animal has harmed a child or presents a risk to the safety or wellbeing of a child:

- Advocate and promote the RSPCA to the parents.
- Encourage the family to:
  - use the RSPCA as a support service to reduce the risks that the animal poses to the child
  - consent to Child Safety contacting the RSPCA on behalf of the family
  - inform the RSPCA of the animal welfare concerns, but only if the family does not take steps to address animal welfare concerns that pose a safety risk to the child. If requested, the RSPCA will re-contact Child Safety and advise if they took action.

If referring the family to a support service, seek the parents' consent to include information about the animal welfare issues in the referral.

If animal welfare issues are identified that are not related to child protection concerns:

- give the family information about the RSPCA and encourage them to seek support
- do not give information to the RSPCA without the family's consent.

If a family is not able to provide care and accommodation for their animals:

- provide the family with information about the RSPCA
- encourage the family to use the RSPCA as a support service.

### Note

The RSPCA is committed to providing temporary emergency care and accommodation for the animals of families who are involved with Child Safety.

## Breaches of pool fencing requirements

If obvious or blatant breaches of pool fencing requirements are noticed during the investigation and assessment (for example, unfenced access points or a broken fence or gate):

- Discuss the safety risks and water safety strategies with the parents.
- Report the issue to the relevant local authority responsible for assessing pool fencing compliance, providing only:
  - the property address
  - the nature of the issue relating to the pool fence.

### Practice prompt

Do not provide the family's name or other identifying family details.

## Family subject to the Witness Protection Program

At times, families subject to a Witness Protection Program through any one of the state or territory police services may reside in Queensland and be the subject of a notification. These families have a heightened need for confidentiality, due to the importance of protecting their identity, whereabouts and personal safety.

Witness protection in Queensland is administered by the Crime and Corruption Commission, but is operationalised by the QPS Witness Protection Unit.

If it becomes known during an investigation and assessment that a family is subject to witness protection:

- Liaise with the QPS to ensure the best response to these complex and sensitive matters. Contact the Communications Room, QPS on telephone (07) 3360 6325 and ask to speak to either:
  - the Officer in Charge, QPS Witness Protection Unit
  - the Operations Coordinator, QPS Witness Protection Unit.



- Ensure Child Safety meets the legislative responsibility to investigate the child protection concerns.
- Consider whether sensitivity needs to be applied to the relevant person profiles or events in ICMS. (Refer to the [ICMS Manual sensitivity overview](#).)

## Respond when staff are video or audio recorded while performing work duties

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There might be times when a person working with Child Safety wishes to record a telephone or in person conversation with Child Safety staff, in order to be clear about what has been said or for possible use in future proceedings.

Any person has the legal right to record a conversation that they are a part of, with or without the consent or knowledge of the other person, however, they are not allowed to communicate or publish any part of the recording to any person (except in accordance with provisions in the *Child Protection Act 1999* or the [Invasion of Privacy Act 1971](#).)

### Practice prompt

People who have interactions with Child Safety can expect to be treated fairly, respectfully, professionally, courteously and without bias. (Refer to the brochure *Let's treat each other with respect*.)

If a Child Safety staff member becomes aware that they are being video or audio recorded while in the workplace (for example, a CSSC, RIS or other Child Safety office):

- have a discussion with the person about the reason for the recording to determine if there is anything that can be done to assist them with the information they require
- respectfully advise the person that while recording the conversation is legal
  - it is an offence to publish information that leads to the identification of a child known to Child Safety (*Child Protection Act 1999*, [section 189](#))
  - circulating or placing video or audio footage which identifies a child as being known to Child Safety, in an accessible public place or on the internet, is a breach of the confidentiality provisions of the *Child Protection Act 1999*
  - committing an offence under the *Child Protection Act 1999* could result in the person being liable for prosecution and punishment by way of fine or imprisonment

- seek assistance from a senior team leader, senior practitioner, or other staff member if there are any concerns about proceeding with the conversation
- if the person chooses to continue recording, ensure the discussion occurs in an appropriate setting, for example, an interview room in the CSSC
- continue the conversation. (Refer to the brochure [Let's treat each other with respect.](#))

If a Child Safety staff member becomes aware that they are being video or audio recorded while performing work duties outside of the workplace, for example, during a home visit:

- seek advice from a senior team leader, senior practitioner or other staff member where there are concerns about proceeding with the discussion or interview
- respectfully advise the client of the information about the confidentiality provisions under the *Child Protection Act 1999* (outlined above), prior to continuing with the discussion or interview
- continue the conversation. (Refer to the brochure [Let's treat each other with respect.](#))

When a Child Safety staff member is aware that an interview or discussion has been video or audio recorded, record the information in a case note in ICMS, including what information was provided regarding the confidentiality provisions under the *Child Protection Act 1999*.

## Respond to a video or audio recording being posted online

If a Child Safety staff member becomes aware that an online post or information that has been published may amount to a publication that breaches the *Child Protection Act 1999*, [section 189](#), brief Legal Services on the nature of the alleged breach so the appropriate course of action can be determined.

## Related forms, templates and resources

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### [Adult as a victim of alleged child sexual offence](#)

Form 1 July 2021

*This is a secure resource. Only authenticated users may access this content.*

### [Assess harm and risk of harm](#)

Resource 16 September 2019

### [Checklist for an investigation and assessment relating to an unborn child](#)

**Resource** 26 May 2022

*This is a secure resource. Only authenticated users may access this content.*

### [Child Safety After Hours Service Centre: After hours referral](#)

**Form** 13 August 2019

*This is a secure resource. Only authenticated users may access this content.*

### [Child Support Agency \(CSA\) Request Form](#)

**Form** 24 February 2020

*This is a secure resource. Only authenticated users may access this content.*

### [Consent for the NDIA to share your information](#)

**Form** 31 July 2020

### [Discharge escalation pathway for a child at risk \(Queensland Health\)](#)

**Resource** 26 August 2021

*This is a secure resource. Only authenticated users may access this content.*

### [Domestic and family violence – protecting identifying information in court processes](#)

**Resource** 16 September 2019

*This is a secure resource. Only authenticated users may access this content.*

### [Engagement letter – Aboriginal or Torres Strait Islander unborn child](#)

Template 16 December 2021

### [Engagement letter – non-indigenous unborn child](#)

Template 16 December 2021

### [Family Participation Program – Working with you to help you lead decision making about your child](#)

Resource 5 February 2020

### [High risk teams and Child Safety](#)

Resource 24 August 2020

Provides information about domestic and family violence high risk teams and Child Safety  
*This is a secure resource. Only authenticated users may access this content.*

### [HRA Form 1: Unborn child high risk alert](#)

Form 15 August 2019

*This is a secure resource. Only authenticated users may access this content.*

### [ICMS manual - sensitivity overview](#)

Resource 31 August 2020

*This is a secure resource. Only authenticated users may access this content.*

### [HRA Form 3: Cessation of unborn child high risk alert](#)

**Form** 15 August 2019

*This is a secure resource. Only authenticated users may access this content.*

### [Infants at high risk](#)

**Resource** 18 September 2019

*This is a secure resource. Only authenticated users may access this content.*

### [Information sharing for domestic and family violence](#)

**Resource** 24 August 2020

This practice guide outlines the obligations of Child Safety staff and other agencies for sharing information related to high risk domestic and family violence.

*This is a secure resource. Only authenticated users may access this content.*

### [Medicare Request Form](#)

**Form** 24 February 2020

*This is a secure resource. Only authenticated users may access this content.*

### [NDIS access request form](#)

**Form** 25 May 2020

*This is a secure resource. Only authenticated users may access this content.*

### [Notifiers and mandatory reporting](#)

**Resource** 20 August 2019

*This is a secure resource. Only authenticated users may access this content.*

### [Queensland Health discharge escalation pathway](#)

**Resource** 26 August 2021

*This is a secure resource. Only authenticated users may access this content.*

### [Respond to an unborn child](#)

**Resource** 17 December 2021

### [Request by a Child Protection Agency for information from Centrelink \(SI041\)](#)

**Form** 24 February 2020

*This is a secure resource. Only authenticated users may access this content.*

### [Suspected Child Abuse and Neglect \(SCAN\) Team System Manual](#)

**Resource** 15 August 2019

*This is a secure resource. Only authenticated users may access this content.*

### [The role of a support person](#)

**Resource** 18 September 2019

## [Victim Assist Queensland brochure](#)

**Resource** 21 September 2019

## [Unborn child high risk alert contact list](#)

**Resource** 20 January 2020

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## Child Safety Practice Manual

: Investigate and assess

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**20 December 2021**

Changes related to unborn children

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**17 September 2021**

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**15 June 2021**

Maintenance

**26 May 2021**

Maintenance

**17 May 2021**

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**14 December 2020**

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**2 December 2020**

Update title of resource

**1 October 2020**

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**14 May 2020**

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**8 May 2020**

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**7 May 2020**

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**5 May 2020**

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**30 April 2020**

Maintenance

**27 April 2020**

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# Gather information from other sources

## Content updates

This page was updated on 19 May 2023. To view changes, please see [page updates](#)

## Gather information from other sources

Other people identified during the investigation and assessment may be potential sources of information that will contribute to the assessment of the child's need for protection. Consider gathering information from them.

When requesting information from another source, seek information that is relevant to assessing the child protection concerns.

Examples of other sources of information that may not have been known during the investigation and assessment planning include:

- other family members or significant people
- people identified by a child or family as able to provide information or cultural advice
- school personnel
- the family doctor, a child health nurse, or Child and Youth Mental Health Service
- the National Disability Insurance Agency (NDIA) regarding a child's National Disability Insurance Scheme (NDIS) access status, plan or supports
- interstate child protection history, where there is reasonable belief that a child or relevant person may have interstate child protection history
- other professionals, or agency or support service staff who know the child or family.

The *Child Protection Act 1999* also provides authority for:

- agencies to give a relevant child's personal information to Child Safety during an investigation and assessment (section 159MB)
- Child Safety to request information from the Public Guardian, a prescribed entity, a licensee (an entity licensed to provide placement services to children in the custody or guardianship of the chief executive) or the person in charge of a student hostel. The request must be complied with (section 159N).

When requesting information under the *Child Protection Act 1999*, [section 159N](#), complete a [Section 159N information request](#) and forward it to the relevant agency. However, if information is to be requested from the NDIA or NDIS, obtain consent from the child's parent to speak to the NDIA using the [NDIS Consent for the NDIA to share your information](#) form. If the parent does not consent, seek information from the NDIA using the [Data Management NDIA Information Request Form](#).

### Practice prompt

Consider the type of information being requested from an agency. For example, a child may have attended schools across multiple Department of Education regions, or Queensland Health may have more than one file for a child or family.

Information gathered from other sources is part of the investigation and assessment. It cannot be used to decide that an investigation and assessment is no longer required and the notification downgraded to a child concern report. (Refer to Procedure 5 Information sharing.)

### Further reading

Information sharing guidelines.

## Request interstate child protection history

Request child protection history from another state, territory or New Zealand via Data Management Services when:

- there is information to suggest a child protection history is held by another jurisdiction relating to
  - a child
  - a person alleged to have caused harm or pose a risk of harm to a child
- the child protection history is necessary for informing an assessment about the safety and wellbeing of a child.

Prior to making a request to Data Management Services, check Connect for Safety to identify whether the child or person has a record in another Australian jurisdiction. Connect for Safety does not provide information from New Zealand.

When either:

- a person match is identified in Connect for Safety, or
- a person match is not identified in Connect for Safety, but there is a reasonable belief that another Australian jurisdiction or New Zealand may hold relevant child protection records

then:

- complete the [Child Protection History Request Form \(Interstate or New Zealand\)](#)
- email the completed request form to Data Management Services via the email address [DMS\\_RFI@csyw.qld.gov.au](mailto:DMS_RFI@csyw.qld.gov.au).

### Attention

Information obtained from Connect for Safety can not be used to complete the Child Protection History request form (Interstate or New Zealand), or update or change personal information in ICMS, unless the person match is verified with the other jurisdiction who holds the records.

## ***Record use of Connect for Safety***

Record the use of Connect for Safety in a case note in ICMS each time a search is completed.

### Note

Use the case note type 'Interstate information' and record the title 'Access Connect for Safety' in ICMS.

Record the following information in the case note:

- the initial reason for accessing Connect for Safety
- the date and details of each person searched
- whether the person who was searched provided their consent for the search, or reasons why consent was not sought or obtained
- whether a likely match was identified
- how the information accessed helps undertake a particular purpose, or function under the *Child Protection Act 1999*

- whether an information request was subsequently submitted to Data Management Services.

### Further reading

For further information about Connect for Safety, refer to the Connect for Safety: Queensland Operational Guidelines.

## Receive information under the *Domestic and Family Violence Protection Act 2012*

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During the investigation and assessment, relevant information may be received, as part of a request from a Queensland court, attached to a *Report to the Court pursuant to section 55 Part A—Request form*, under the [Domestic and Family Violence Protection Act 2012 section 55](#).

To respond to this information:

- Assess whether the information contains child protection concerns.
- Assess and record the information in line with usual intake processes. (Refer to Procedure 1 [Receive and respond at intake](#).)

### Further reading

Practice guide Court request for information—domestic violence orders (section 55)

## Receive information from the Integrated Justice Information Strategy

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During an investigation and assessment, information relevant to the assessment of the child's need for protection may be received from the Integrated Justice Information Strategy (IJIS).

Data Management Services will send an automated email alert to the relevant CSSC via the management team group email, containing either:

- an *IJIS notification (criminal court matter alert)*, notifying details of a subject child's first scheduled appearance in a criminal court proceeding

- an *IJIS Electronic transfer of court result (ETCR) alert*, advising of the need to run an IJIS ETCR report in ICMS to access details of a criminal or domestic violence court result involving a subject child.

#### Tip

The CSSC management team is responsible for making sure the group email account is up to date and regularly monitored.

## Receive an Integrated Justice Information Strategy notification (Criminal court matter alert)

If a child is identified as a subject child in an open investigation and assessment, the court matter alert email will be forwarded to the CSSC responsible for the investigation and assessment.

If an IJIS notification (criminal court matter alert) is received by a CSSC, the allocated CSO will:

- read and assess the information to decide the appropriate response, including deciding if the information reaches the threshold for a notification, if relevant
- record the information in the current ICMS event
- print the alert for the client file
- liaise with the young person's CSO about Child Safety attendance at court—if the young person is subject to ongoing intervention
- liaise with youth justice staff if required.

#### Note

Data Management Services will send the court matter alert email to the RIS rather than the CSSC, if:

a notification recorded on the subject child is awaiting approval in ICMS by the RIS senior team leader  
the notification has been approved, and the investigation and assessment has not been allocated to the pending allocation tray of the receiving CSSC.

(Refer to Procedure 1 Integrated Justice Information Strategy electronic transfer of court result information.)



## Receive Integrated Justice Information Strategy Electronic transfer of court result information

The IJIS electronic transfer of court results (ETCR) delivers court results from all Queensland criminal and civil jurisdictions to the CSSC with responsibility for a subject child. The subject child is identified as the primary person of interest. Information may also be received about secondary persons of interest, who may not have an existing person record in ICMS.

Data Management Services receives an ETCR if a child is matched in the court result as being subject to an open investigation and assessment.

Details about the court matter are accessed by running an 'IJIS Electronic Court Results report' in ICMS.

After receiving an ETCR report:

- Gather further information from relevant sources, such as the QPS or OCFOS, if required.
- Make sure the information is recorded in ICMS, including court dates, outcomes and persons named. If the information is already recorded, check it is accurate and update as needed. The ETCR report will remain accessible in the ICMS reports tab.
- Make sure each child or adult who has a significant relationship with the subject child has a person record in ICMS.
- If the information indicates new harm or risk of harm to the child, record the information in line with usual intake and investigation and assessment processes.
- Attach the ETCR report to the relevant event in ICMS.

## Respond to additional notified concerns

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Record additional notified concerns if all the following apply:

- New concerns are received that require screening to decide the intake response.
- The new concerns do not meet the exceptions to recording additional notified concerns outlined in Procedure 1 [Decide if additional notified concerns is the appropriate response](#).
- There is already a notification that has not yet been approved or an open investigation and assessment event in ICMS for the child or unborn child or family.

Do not record an *Additional notified concerns* form in an intake event where a child concern report is recorded. Any new concerns are to be recorded as a new intake event.

While there is no limit to the number of additional notified concerns that may be recorded as part of one notification and investigation and assessment process, the ongoing receipt of additional notified concerns may indicate cumulative harm or an escalating threat to safety. This should be considered when planning the commencement of the investigation and assessment.

If additional notified concerns are received:

- Check the child protection history.
- Conduct a pre-notification check (only if needed).
- Complete an *additional notified concerns* form in the investigation and assessment event in ICMS, which includes the screening criteria and if required, response priority.
- Submit the completed form to the senior team leader for approval.
- Consider whether a subsequent safety assessment is required, due to any change in circumstances for the family, and review any existing immediate safety plans to ensure the safety needs of the child are still being met.
- If the additional notified concerns meet the threshold for a notification, respond within the shortest response timeframe, which is either:
  - the response timeframe that already applies to the open investigation and assessment
  - the response timeframe relating to the new concerns.

The allocated CSO is responsible for investigating and assessing all information received about the family during the course of the investigation and assessment, until the investigation and assessment is finalised and approved in ICMS. This includes:

- all concerns received—the original concerns and any additional notified concerns with a notification response
- any new concerns that arise as part of the investigation and assessment process that do not need to be recorded as additional notified concerns and are to be assessed as part of the investigation and assessment.

If an investigation and assessment is commenced before a decision that additional notified concerns meet the threshold for a notification:

- Sight and interview the subject child, to meet the new response timeframe and assess the additional notified concerns.
- Advise at least one of the child's parents of the new concerns so a current assessment of their capacity and willingness to protect the child can be completed.

If the alleged person responsible for the new harm is someone other than a parent and they are likely to be recorded as a *person responsible* for harm to the child, give them the opportunity to respond to the allegations made against them.

### Note

If the additional notified concerns do not meet the threshold for a notification, there is no need to re-interview or re-sight the child; however, consider the information in the context of assessing and finalising the current investigation and assessment.

If additional notified concerns are recorded and the investigation and assessment is to be transferred to another CSSC, the senior team leader is responsible for approving the Additional notified concerns form in ICMS, before the transfer occurs.

### Further reading

Procedure 1 Receive and respond at intake.

## Respond to concerns that have already been received

If the information to be recorded as additional notified concerns duplicates concerns that have previously been recorded, record an *Additional notified concerns* form:

- with a child concern report response
- regardless of whether the concerns meet the threshold for a child concern report or notification.

(Refer to Procedure 1 [Record duplicate concerns.](#))

## Check criminal and domestic violence history

Consider asking the QPS for criminal and domestic violence history under the *Child Protection Act 1999*, [section 95\(3\)](#) or [Chapter 5A, part 4](#) if the information is relevant and required to complete the investigation and assessment. This includes information about:

- a parent or household member who:
  - refuses to disclose their criminal or domestic violence history, and the information cannot be gathered from other sources
  - is alleged to have a history of offences against children, but the full history is not available

- an allegation of harm or risk that has been made against another adult relevant to the investigation and assessment.

#### Note

Seek the CSSC manager's or senior team leader's approval for all requests made under the Child Protection Act 1999, section 95(3).

To obtain a person's Queensland criminal and/or domestic violence history as part of an investigation and assessment:

1. **Check** whether there is already a record of the person's criminal and/or domestic violence history recently provided by the QPS—only make a new request if new information is likely to be available.
2. **Confirm** with the senior team leader whether an urgent request or a request for interstate criminal and/or domestic violence history needs to be made via the CSU.
3. **Use the QPS Self Service of Document Retrieval (SSoDR) portal.**

The SSoDR portal allows staff with relevant delegations to search for the Queensland criminal and/or domestic violence history of an offender (not a victim) under the authority of the *Child Protection Act 1999*, section [95\(3\)](#) or [159N](#), if the information is required to complete an investigation and assessment. The SSoDR portal is only to be used to access information about a person 18 years or over.

A CSO will ask the CSSC manager or senior team leader to access the SSoDR portal. A CSAHSC CSO will access the portal themselves. Note: If there is insufficient identifying information to carry out a search in the SSoDR portal, such as not having the person's full name or date of birth, seek these details from the local Child Protection Investigation Unit (CPIU). The request for this information is made under the *Child Protection Act 1999*, [section 159MB](#).

Each time the SSoDR portal is accessed a case note type 'Info received from QPS' must be recorded in ICMS with the following details:

- the date and time the portal was accessed
- who accessed the portal
- what section of the *Child Protection Act 1999* the information is being sought under, including for the *Child Protection Act 1999*, [section 95\(3\)](#), the CSSC manager or senior team leader who approved the request
- that the portal was accessed for the purpose of making an assessment about whether a child is in need of protection

and

- what relevant information was retrieved. Note: if the retrieved information is not relevant to the investigation and assessment, do not record or print the information. In the case note record that 'no relevant criminal or domestic violence history was available'.

For further information about what to record, refer to the record keeping section of the [Self Service of Document Retrieval \(SSoDR\) Portal Operational Guidelines](#).

#### 4. Make a non-urgent request via the Central Screening Unit.

To complete a non-urgent criminal and domestic violence history check:

- seek the CSSC manager's or senior team leader's approval for the request
- complete the [QPS—Non-urgent criminal and domestic violence history check request spreadsheet](#) and make sure all mandatory fields are filled in
- forward the spreadsheet via email to the CSU group email address ([CSU.Section95@communities.qld.gov.au](mailto:CSU.Section95@communities.qld.gov.au)) and include *Section 95 request for history* in the email subject line.

#### Tip

The CSU cannot forward the request to the QPS if the mandatory fields are incomplete. Contact the local Child Protection and Investigation Unit (CPIU), to help find out any relevant information needed to complete the spreadsheet.

The CSU will email the QPS documents to the requesting CSSC manager or senior team leader.

#### 5. Make an urgent request via the Central Screening Unit.

Consider asking for an urgent criminal and domestic violence history check:

- to complete the initial safety assessment (*Child Protection Act 1999, [section 95\(3\)](#)*)
- if a written record of history is needed as evidence in an application for a CAO or TCO (*Child Protection Act 1999, [section 95\(2\)](#)*).

To make either an urgent request or a request for an urgent interstate criminal history:

- Seek approval from the CSSC manager or senior team leader.
- Complete a [QPS—Urgent S95 Request \(Business Hours\)](#) form, and
  - for an urgent request—explain the urgency is due to the need to make an assessment of whether a child is in need of protection

- fill in all mandatory fields on the form. If information such as a person's full name or aliases are not known, contact the local CPIU to obtain this information.
- Forward the form to the CSU. Note: the QPS will not process requests sent directly to them from a CSSC.

The CSU will:

- check that all mandatory fields are completed on the form before forwarding it to the QPS
- receive the results from the QPS and email them to the requesting CSO.

To record the results provided by the QPS, complete the following in ICMS an *Info received from QPS* case note and attach or reference the information received.

If the urgent request relates to the provisional assessment and approval of a carer applicant (and their adult household members), who is being considered for provisional approval so the child can be placed the same day—refer to Procedure 6, [Take urgent action for same day care arrangements](#).

There is no need in these circumstances to complete a QPS—Urgent S95 Request (Business Hours) or to complete the spreadsheet.

Instead make sure the carer application documents are properly made and are attached to the carer entity EOI in ICMS—refer to Procedure 6, [Record applicant details in ICMS](#). Then email the CSU group email address ([CSU.Section95@communities.qld.gov.au](mailto:CSU.Section95@communities.qld.gov.au)), and include in the email subject line the EOI number of the carer entity, and that the request is for an urgent provisional carer assessment.

The Police Information Centre will process an urgent criminal or domestic violence history check if the rationale for urgency is one of the following:

- The child is to be placed with a carer on the same day as the request (and the information is required for the provisional assessment and approval decision that day).
- The child is to be placed with a parent on the same day as the request.
- An application for a TCO will be made on the same day, and the information is needed to support the court application.
- Serious concerns of a criminal nature about a parent or household member are likely to require a response by Child Safety within 24 hours.

#### **6. Make an urgent after hours request via the CSAHSC.**

If an investigation and assessment continues after business hours and urgent criminal history is needed to inform the assessment, or to inform the urgent provisional assessment and

approval of a carer applicant, the CSAHSC can carry out checks between 5pm to 8am, Monday to Friday.

To complete an urgent after-hours QPS criminal and domestic violence history:

- Seek the CSSC manager's or senior team leader's approval for the request.
- Complete the [QPS—Urgent Request \(After Hours\)](#) form, filling in all mandatory fields. or
- Make sure the carer application documents are properly made and are attached to the carer entity EOI in ICMS.
- Email the form to the CSAHSC at [CSAHSCIntake@csyw.qld.gov.au](mailto:CSAHSCIntake@csyw.qld.gov.au).
- Phone to confirm receipt.

The CSAHSC will forward the request to the QPS and complete other tasks if agreed by negotiation with the CSSC.

7. **Contact the local CPIU** if, after obtaining information from the SSoDR portal, their advice is needed about whether further information about an individual or report is likely to be available and therefore, whether a [Section 159N information request](#) should be made. In particular this must occur when information from the SSoDR portal indicates:

- an open Domestic Violence Report is 'unfinalised' or
- a finalised Domestic Violence Report has no information listed and the information in the report may be relevant to the investigation and assessment outcome.

The request for advice from the QPS about whether to make a Section 159N information request is made under the *Child Protection Act 1999*, [section 159MB](#).

8. **Make a Section 159N information request—only if** after retrieving information from the SSoDR portal or from information provided by a CPIU, it is known or suspected that the QPS may have further information about a particular individual or report. To make a [Section 159N information request](#), seek the approval of the senior team leader or manager. In the request, record the date information was accessed from the SSoDR portal and the relevant QPS occurrence number. Refer to the [Section 159N request for information user guide](#).

### Further reading

Self Service of Document Retrieval (SSoDR) Portal Operational Guidelines

Procedure 1 Request criminal and domestic violence history.

If an investigation and assessment continues after business hours and urgent criminal and domestic violence history is needed to inform the assessment or a care arrangement of a child, the CSAHSC can carry out checks between 3:30pm and 8am, Monday to Friday.

To complete an urgent after-hours QPS criminal and domestic violence history check:

- Seek the CSSC manager's or senior team leader's approval for the request.
- Complete the [QPS—Urgent Request \(After Hours\)](#) form, filling in all mandatory fields.
- Email the form to the CSAHSC at [CSAHSCIntake@csyw.qld.gov.au](mailto:CSAHSCIntake@csyw.qld.gov.au).
- Phone to confirm receipt.

The CSAHSC will forward the request to the QPS and complete other tasks if agreed by negotiation with the CSSC.

## Request information from Medicare Australia

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Medicare Australia can share information with child protection agencies when the agency has reasonable grounds for believing that disclosure is necessary to prevent or lessen a threat to life, health or welfare of a child.

Medicare Australia can share information such as:

- records of any treating doctors and their location and history of visits to medical practitioners
- Pharmaceutical Benefits Scheme records to, for example, assess parental prescription drug abuse
- Medicare numbers
- a history of Medicare access to, for example, assess medical neglect cases.

To request information from Medicare Australia:

- Complete the [Medicare Request Form](#).
- Email the form to DMS ([DMS\\_Medicare@communities.qld.gov.au](mailto:DMS_Medicare@communities.qld.gov.au)) with a subject heading of *Response Priority: Medicare Request for (family name)*.

## Seek information about problematic alcohol and other drug use by a parent

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Seek information from an Alcohol and Other Drugs Services professional to inform or clarify an assessment of a parent's substance misuse or abuse, including:

- general advice or knowledge about drug or alcohol issues



- specific information about the potential impact of the drug misuse on the parent's ability to parent.

If substance testing of a parent is required as part of an investigation and assessment, refer to the process outlined in Procedure 4 [Undertake substance testing of a parent](#).

## Related forms, templates and resources

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### [Consent for the NDIA to share your information](#)

Form 31 July 2020

### [Court request for information - domestic violence orders \(section 55\)](#)

Resource 17 September 2019

*This is a secure resource. Only authenticated users may access this content.*

### [Medicare Request Form](#)

Form 24 February 2020

*This is a secure resource. Only authenticated users may access this content.*

### [NDIA information request form](#)

Form 26 February 2020

*This is a secure resource. Only authenticated users may access this content.*

### [QPS—non-urgent criminal and DV history check](#)

Form 15 August 2019

*This is a secure resource. Only authenticated users may access this content.*

## [QPS—urgent request \(after hours\)](#)

Form 15 August 2019

*This is a secure resource. Only authenticated users may access this content.*

## [Section 159N information request](#)

Form 29 July 2019

*This is a secure resource. Only authenticated users may access this content.*

## [Section 159N information request user guide](#)

Resource 24 September 2019

## [Self Service of Document Retrieval \(SSoDR\) Portal Operational Guidelines](#)

Resource 9 June 2021

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**15 June 2022**

Maintenance

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Maintenance

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**6 February 2020**

Changed content to support updated Family Participation Program Guidelines

**28 November 2019**

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Page created

# Assess the information and decide the outcome

## Content updates

This page was updated on 19 May 2023. To view changes, please see [page updates](#)

Assess the information gathered from the child, family and other sources to inform decisions about:

- whether the child is in need of protection (as defined in the *Child Protection Act 1999*, [section 10](#)) and
- whether ongoing intervention needs to occur.

The decision about whether a child is in need of protection is a significant decision. For an Aboriginal or Torres Strait Islander child, make active efforts to ensure the child, the child's parents and the child's family have the opportunity to participate meaningfully in the decision.

A child in need of protection will be subject to the appropriate ongoing intervention to ensure their safety, belonging and wellbeing.

## Consider family-led decision making

If it has not already occurred, consult the child and family and the Family Participation Program about a referral for the Family Participation Program to convene a family-led decision making process, to help decide if an Aboriginal and or Torres Strait Islander child is in need of protection. Do this if:

- the child is likely to be assessed as a child in need of protection
- it is practicable and in the child's best interests
- the family agrees to the process taking place.

## Note

If a family-led decision making process is convened by the Family Participation Program the facilitator is considered a 'private convenor'. The process is referred to as 'Aboriginal and Torres Strait Islander family-led decision making'.

If a family wants to participate in family-led decision making but does not want the Family Participation Program to facilitate the process, arrange for the family group meeting convenor to do so and advise the Family Participation Program of the family's decision.

The purpose of the family-led decision making process is to give the child's family group a culturally safe process to:

- consider the concerns
- develop a family plan to respond to the child's needs, including
  - any family resources and capabilities to support the child and parents—to sufficiently mitigate risk and prevent the need for ongoing intervention
  - family strategies to minimise the degree and length of any necessary ongoing intervention
  - alternatives to placing the child in care, or culturally appropriate care arrangement options in line with the Aboriginal and Torres Strait Islander Child Placement Principle, including a plan for how the child will keep connected with family, community and culture if they cannot remain safely at home.

Before a family-led decision making meeting:

- Advise the family and the child of their right to have an independent person to help facilitate their participation in this process. and
- If the child or family consent to the involvement of an independent person, arrange for the independent person, including determining suitability, unless it is
  - not practicable because an entity is not available
  - likely to have a significant adverse effect on the safety or emotional wellbeing of the child or another person
  - not in the child's best interest.

### Further reading

For information about determining suitability to be an independent person, refer to Procedure 5 Enable participation of Aboriginal and Torres Strait Islander peoples in decision making.

To decide, with the child's parents, the degree to which the child will be involved in the family-led decision making process, consider:

- their age and ability to understand
- if it is in their best interest, taking into account their emotional and psychological wellbeing
- how much information the child is already aware of and needs to know, especially as it has not yet been decided if the child
  - is in need of protection
  - will be subject to ongoing intervention.

While arranging the family-led decision making process, take action to ensure the child's safety including, if needed, a care arrangement using the authority of:

- an assessment care agreement or
- application for a temporary assessment order.

### **Facilitation by the family participation program**

As the delegated officer for approving the investigation and assessment outcome, the senior team leader will consider a family's plan developed during a family-led decision making process to help inform the investigation and assessment outcome.

The responsibility of the senior team leader to finalise the decision will be explained to the family in advance of the family-led decision making process. If the senior team leader is not able to attend the meeting, the family will be told in advance and be prepared that the decision about whether the child is in need of protection may not be able to be confirmed on the day of the meeting. In this situation, one of the following will occur:

- the senior team leader will be contactable during the meeting or arrange for another delegated officer to be contactable or
- participants will be contacted after the meeting to discuss the investigation and assessment outcome or
- participants will be advised that the family-led decision making process will need to continue at another mutually agreed time.

### **Facilitation by a family group meeting convenor**

At times a child and family may choose to participate in a family-led decision making process facilitated by the family group meeting convenor.

As it is not facilitated independently of Child Safety, it differs to the model of 'Aboriginal and Torres Strait Islander family-led decision making', which is undertaken exclusively by the Family Participation Program or other Aboriginal or Torres Strait Islander service.

### **Make a referral for family-led decision making**

To refer a family:

- discuss with the parents and child, depending on the child's age and ability to understand
  - the purpose of family-led decision making
  - that if they wish to participate in a family-led decision making process, that wherever possible it will be facilitated by the Family Participation Program or a similar process facilitated by a Child Safety family group meeting convenor
- complete the referral outlining
  - the child protection concerns
  - the purpose of the meeting
  - the child and parents' details
  - contact details of relevant family members, if known, and any relevant timeframes.

#### Practice prompt

If the parents choose to participate in an Aboriginal and Torres Strait Islander family-led decision making process, refer the family to the Family Participation Program using the online referral form in the Queensland family support referral portal.

If the parents choose to participate in a process facilitated by the family group meeting convenor, make a referral to the family group meeting convenor.

#### Further reading

Practice guide Family-led decision making - key concepts

Practice guide Culturally capable behaviours.

## Assess harm and risk of harm

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After gathering all the relevant information, assess the information to make a professional judgement about:

- whether the child has suffered significant harm
- whether the child is at unacceptable risk of suffering significant harm, without a parent able and willing to protect them.



### Note

The outcome of the investigation and assessment is determined on the balance of probability (whether something is more likely than not). It does not require the criminal standard of proof, that is beyond reasonable doubt.

### Further reading

Practice guide Assess harm and risk of harm.

## Assess whether the child has experienced significant harm

Harm is any detrimental effect of a significant nature on a child's physical, psychological or emotional wellbeing (*Child Protection Act 1999*, [section 9](#)).

To assess whether a child has experienced significant harm:

- identify the abuse type
- identify the impact on the child
- determine the person responsible.

### Identify the abuse type

Review the information gathered during the investigation and assessment, including the child protection history, to identify any actions, behaviour or patterns of behaviour that have negatively impacted the child.

The types of abuse that can cause harm to a child are:

- physical abuse
- emotional abuse, including psychological abuse
- neglect
- sexual abuse, including exploitation.

### Assess the impact on the child

The detrimental impact on the child resulting from the abuse is the harm. Harm may be:

- physical, relating to the child's body
- emotional, relating to the child's feelings and emotions

- psychological, relating to the child's cognitive processes.

#### Note

If a child is assessed to have experienced psychological harm, this will be recorded in the Assessment and outcome form in ICMS as emotional harm. Refer to Record the investigation and assessment.

Harm may be caused by a single act, omission or circumstance, or a series or combination of actions, omissions or circumstances (*Child Protection Act 1999*, [section 9\(4\)](#)). Harm caused by a series or pattern of harmful events or experiences over time is referred to as cumulative harm.

#### Attention

Ensure the assessment of harm considers the effect of cumulative harm on the child.

Previous reports to Child Safety may not have been recorded as a notification, or previous investigation and assessments may not have been substantiated for harm to the child, but the cumulative effect of experiencing the abusive action or inaction over time may have led to significant harm being suffered now.

Consider what is known about the child's current health, development and functioning to assess how and to what extent the abuse has impacted the child. To substantiate physical or emotional harm to a child, the impact on the child's physical or emotional wellbeing must be assessed as significant.

Most of the time significant harm will be visible or observable, however emotional or psychological harm may not always be observed. For example, a child's lack of affect may be a coping mechanism as a result of harm they have suffered.

#### Note

The substantiated harm may be different to the alleged harm in the notification.

For example, a notification may have been recorded due to a reasonable suspicion that a child had suffered physical harm, but the investigation and assessment found that the child had suffered emotional harm.

## Determine the person responsible

The person responsible for harm to a child is the person assessed as being responsible for the abuse, which includes acts of commission or omission, and failure to protect. (Refer to [Record the person responsible.](#))

The person responsible for harm may be:

- a parent
- another adult who lives in the home or has regular access to the child in the home
- another child aged 10 years or over who lives in the home and is assessed as having the developmental ability or capacity to understand the consequences of their actions. This is not common but may occur in some circumstances.

### Note

A child who has self-harmed cannot be the person responsible for that harm.

For further information about the context of children's mental health and mental illness, refer to the practice kit Mental health.

### Practice prompt

If any person has perpetrated domestic and family violence, including coercive control, the assessment about who is responsible for harm caused by domestic and family violence is informed by the perpetrators pattern of behaviour.

Do not record the adult victim (often the mother or father's partner) as the person responsible for harm by 'failure to protect' if they have experienced domestic and family violence and the harm suffered by the child is a result of the domestic and family violence.

For further information about the best practice approach for domestic and family violence and the Safe and Together model, refer to the overview of the practice kit Domestic and family violence.

## Make a professional judgement about risk of significant harm

To form a professional judgement about the risk of significant harm to a child:

- consider the information gathered across five categories (the child, the parents, the abuse/harm, the environment, the family and cultural context) about what has happened in the past and what is happening now, recognising risk and protective factors present within the family
- critically analyse the information, with a focus on assessing the likelihood and severity of the harm the child may suffer in the future, if nothing changes.

### Practice prompt

Severity refers to the degree to which the child will be impacted by the harm.

Likelihood refers to the probability the child will suffer significant harm in the future.

Refer to the practice guide Assess harm and risk of harm.

To assess the severity of the harm the child may suffer, consider:

- the vulnerability of the child
- the pattern of behaviour by the person responsible or alleged responsible for the risk of harm. Consider the type of abuse, and the frequency, chronicity and duration of the abuse
- the child's (cumulative) experience of harm they have suffered, now and in the past.

To assess the likelihood of the child suffering harm in the future, consider:

- the interaction of risk and protective factors identified as present within the family
- past patterns of abuse or neglect experienced by the child
- attitudes and beliefs of the parent
- parental ability and willingness to protect the child
- demonstrated acts of protection by a parent.

When determining parental ability and willingness to protect a child from harm, consider:

- the parents' capacity (not just intention) to act protectively
- the parents' demonstrated ability and motivation to protect the child
- if the child lives across more than one household, the ability and willingness of the parents across each household to protect the child.

If the child does not have at least one parent able and willing to protect them from the harm, they are a child in need of protection and ongoing intervention must occur to ensure their safety, belonging, and wellbeing. (Refer to [Decide if there will be ongoing intervention.](#))

Based on the analysis and assessment of the severity and likelihood of future harm to a child, form a professional judgement about whether:

- the severity of harm to a child is likely to be significant
- the likelihood of future harm to a child is probable
- the overall risk of significant harm to the child.

Use this professional judgement to inform the decision about the investigation and assessment outcome. (Refer to [Decide the investigation and assessment outcome.](#))

Record the analysis and professional judgement of risk of significant harm in the *Assessment and outcome* form in ICMS. (Refer to [Record the assessment of harm and risk of harm.](#))

### Further reading

Practice guide Assess harm and risk of harm  
Practice guide Infants at high risk.

## Decide the investigation and assessment outcome

Decide the investigation and assessment outcome based on the assessment of significant harm and the professional judgement formed about the risk of significant harm to the child.

### Attention

If the investigation and assessment is about a child who is an unaccompanied humanitarian minor, contact the designated adoption officer, Adoption and Permanent Care Services, before finalising the decision about the investigation and assessment outcome. Refer to Procedure 1 Information about a child who is an unaccompanied humanitarian minor.

The investigation and assessment outcome will be one of the following:

- **Substantiated—child in need of protection**—This outcome is appropriate if it is assessed that there is an unacceptable risk of significant harm to a child, as

defined by the *Child Protection Act 1999*, [section 9](#), and one of the following applies

- The child has experienced significant harm and there is an unacceptable risk of significant harm as the child does not have a parent able and willing to protect them. The substantiated harm may not necessarily have been included in the concerns received at intake.
  - No harm has occurred, but there is unacceptable risk of significant harm, as the child does not have a parent able and willing to protect them.
  - There is an unacceptable risk of significant harm to the unborn child after birth and neither parent will be able and willing to protect the child from the harm.
- **Substantiated—child not in need of protection**—This outcome is appropriate if it is assessed that the child has experienced significant harm, but there is no unacceptable risk of significant harm as the child has a parent able and willing to protect them.
  - **Unsubstantiated—child not in need of protection**—This outcome is appropriate if it is assessed that either
    - no significant harm has occurred and there is no unacceptable risk of significant harm, as the child has a parent able and willing to protect them or
    - an unborn child will not be at unacceptable risk of significant harm after being born.
  - **Unsubstantiated—ongoing intervention continues**—This outcome is recorded when the subject child is already subject to ongoing intervention and
    - no significant harm has occurred and no unacceptable risk of significant harm has been identified during the current investigation and assessment. or
    - an unborn child is not at unacceptable risk of significant harm after birth.
  - **Substantiated—ongoing intervention continues**—This outcome is recorded if the subject child is already subject to ongoing intervention and
    - has suffered significant harm, but no unacceptable risk of significant harm has been identified during the current investigation and assessment. or
    - has suffered significant harm and is at unacceptable risk of significant harm, without a parent able and willing to protect the child or
    - has not suffered harm, but is at unacceptable risk of significant harm, without a parent able and willing to protect the child or
    - an unborn child will be at unacceptable risk of significant harm after birth.

- **No investigation and assessment outcome**—This outcome is recorded on rare occasions only, if
  - The investigation and assessment has not commenced because the child and family could not be located, and actions taken to locate them have been unsuccessful.
  - The investigation and assessment has commenced, but cannot be completed, as there is insufficient information to decide on an outcome, and either
    - the family has moved following contact by Child Safety, and cannot be located
    - the parent has refused contact with the child and a TAO or CAO has been applied for, but the order was not granted by the magistrate or the court.
  - A subject child has died before the investigation and assessment was completed and there is insufficient information to decide on an outcome.
  - A pregnant woman advises she is no longer, or has never been, pregnant; her appearance supports this information; and it has been confirmed with her medical practitioner (or reasonable attempts have been made to do so).
  - The pregnant woman has not been located and 2 months have passed since the estimated date of delivery.

### Use of ‘no investigation and assessment outcome’

If *no investigation and assessment outcome* is recorded for one of the subject children in a family because the child is missing or is not able to be located or contacted:

- Document in the assessment that insufficient information has been gathered to record an outcome for the child, without the child being sighted or interviewed.
- Record the appropriate outcome for all other subject children.

Before approving a *no investigation and assessment outcome*, other than for an unborn child notification, the senior team leader must consult with the senior practitioner, and record a clear rationale for its use.

If this outcome is used complete the *Record of actions—mobile family* form (if applicable) in the investigation and assessment event in ICMS.

#### Attention

Do not record a no investigation and assessment outcome to:

manage a lack of resources or high workloads

finalise an outstanding investigation and assessment that is only partially completed.

### Further reading

Record the investigation and assessment.

## Decide if there will be ongoing intervention

Consider the following to decide if there will be ongoing intervention:

- Ongoing intervention is required for each child assessed to be in need of protection.
- A pregnant woman will be offered ongoing intervention if it is assessed that an unborn child will be in need of protection after birth.

To decide the type of ongoing intervention, consider what is needed to:

- meet the child's safety, belonging and wellbeing needs
- reduce the likelihood of future harm to the child.

Ongoing intervention for a child assessed to be in need of protection may occur by way of:

- a support service case for an unborn child, with the pregnant woman's consent (refer to Procedure 4 [Support service case with a pregnant woman](#))
- intervention with parental agreement (Refer to Procedure 4 [Intervention with parental agreement.](#))
- a child protection order. (Refer Procedure 3 [Decide the type of child protection order to recommend.](#))

Offer the family a referral to an appropriate agency or support service to reduce ongoing risk to a child not in need of protection, where the family would benefit from support. (Refer to [Offer support to a family.](#))

### Offer support to a family

Offer the parents a referral to one or more appropriate agencies or support services when a child is not in need of protection and:



- ongoing risk factors are present
- the family may benefit from support to address the ongoing risk
- the referral criteria are met.

#### Note

A referral to an agency or support service should only be discussed with the parents if:

the agency or support service has the capacity to offer a timely service to the family  
the agency or support service can help to address the particular risk factors and support needs of the child and parents.

A referral to Family and Child Connect is not appropriate following an investigation and assessment, given the family's needs have already been assessed.

Meet with the senior team leader and discuss:

- the assessment of the family's support needs
- the available support options to address the ongoing risk to the child.

If the senior team leader agrees that the family would benefit from support and the support options are appropriate for addressing the ongoing risk, meet with the child's parents to:

- discuss the patterns of behaviour and risk factors identified during the investigation and assessment, that may lead to the family becoming involved with Child Safety again, if support is not provided
- provide information about available agencies and support services that the parents may access, including how the service can help the family to reduce risk to the child. This may include
  - an intensive family support service
  - an Aboriginal and Torres Strait Islander Family Wellbeing Service, for an Aboriginal or Torres Strait Islander child
  - a community support service.

Following this, record the parents' response to the service offered and, if they agreed to receive support, take action to refer the family to the agency or service.

#### Further reading

Procedure 1 Referral to another agency  
Procedure 4 Refer a family to an Aboriginal and Torres Strait Islander Family Wellbeing Service  
Practice guide Offer support to a family.

For an Assessment and Service Connect co-response, work with the Assessment and Service Connect provider and the family to:

- decide the most suitable service for a child and their family and
- facilitate connections and links to ongoing support for the child and family.

### Practice prompt

Referral can be made to an intensive family support service or Aboriginal and Torres Strait Islander Family Wellbeing Service without the family's consent, however:

try to gain consent

document attempts to gain consent before finalising the investigation and assessment.

To make a referral to an Aboriginal and Torres Strait Islander Family Wellbeing Service, complete the online referral form in the Queensland family support referral portal.

To make a referral to an intensive family support service, ensure the referral criteria are met, as outlined in the Intensive Family Support – Service Model and Guidelines (3.3 Referral criteria and 3.4 Child safety referrals – additional criteria - page 21) and complete the online referral form in the Queensland family support referral portal.

## Related forms, templates and resources

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### [Assess harm and risk of harm](#)

Resource 16 September 2019

## [Complete an online referral to the Family Participation Program](#)

Resource 18 March 2020

## [Culturally capable behaviours](#)

Resource 16 September 2019

## [Family-led decision making - key concepts](#)

Resource 18 September 2019

## [Infants at high risk](#)

Resource 18 September 2019

*This is a secure resource. Only authenticated users may access this content.*

## [Offer support to a family](#)

Resource 2 August 2022

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# Finalise the investigation and assessment

## Content updates

This page was updated on 19 May 2023. To view changes, please see [page updates](#)

To finalise the investigation and assessment:

- record the investigation and assessment in ICMS (Refer to [Record the investigation and assessment](#).)
- advise agencies and services involved in the investigation and assessment process of the outcome and whether ongoing intervention will occur (Refer to [Advise agencies and services of the outcome](#).)
- advise at least one parent of the investigation and assessment outcome. (Refer to [Inform the parents of the outcome](#).)
- the senior team leader must approve the investigation and assessment outcome in ICMS.

## Time sensitive

The investigation and assessment must be completed and approved within 100 days of the date of the notification. The senior team leader is responsible for approving the investigation and assessment.

If the outcome is substantiated—child in need of protection and a referral has been made to a family group meeting convenor, the investigation and assessment must be approved within 7 days of the referral date.

## Record the investigation and assessment

Recording the investigation and assessment is a vital step in the assessment of a child's need for protection. The information recorded is critical for any ongoing or future contact with the child and family.

## Record key information

Record all key information in the investigation and assessment event in ICMS, including:

- the date, time and details of all contact with subject children, parents and other persons, including unsuccessful attempts
- the Indigenous status, ethnicity and language of all subject children and other relevant persons
- details of who conducted the interviews, including the names and positions of the CSO and second officer, police officer, Assessment and Service Connect (ASC) provider, or other person present during the interviews
- any powers used under the authority of the *Child Protection Act 1999*, sections [17](#) and [18](#)
- an ASC response form, if an ASC co-response occurred. Select only the known specialist services the ASC co-responder provided at the time of finalising the investigation and assessment
- any action taken to refer a matter to the QPS under the *Child Protection Act 1999*, [section 14\(2\) and \(3\)](#)
- a summary of the significant information gathered from interviews and other sources, including information gathered from a government or non-government agency to commence the investigation and assessment (refer to the practice guide [Commencing an investigation and assessment within 5 or 10 days](#))
- responses to the notified concerns, including any relevant disclosures, admissions or denials by the subject child, other children, the parents, family members or other adults
- information relevant to the assessment of the child's safety, belonging and wellbeing needs, including the immediate safety plan if one or more was developed
- relevant observations about the child (presentation, demeanour and developmental level), the parents (interaction with child and non-verbal cues) and the home environment
- any action taken to assist with the assessment, such as medical examinations or photographs
- the rationale for decisions made throughout the investigation and assessment, including whether there will be ongoing intervention with the family to meet the child's protection needs or reduce the likelihood of future harm to the child
- whether an independent person helped in decision making—complete an *independent person* form in ICMS for each of the following significant decisions made during an investigation and assessment for an Aboriginal and or Torres Strait Islander child:
  - safety planning decisions about how to keep a child safe
  - care arrangement decisions where a child protection care agreement or a child protection order grants custody to the chief executive, where applicable
  - a *child in need of protection* decision

- any other decision for which an independent person helped the child and family to participate
- the *Aboriginal and Torres Strait Islander Child placement* form outlining care arrangement options that comply with the placement element of the Aboriginal and Torres Strait Islander Child Placement Principle
- whether information was provided to the family about Victim Assist Queensland services. (Refer to [Respond if a person may have been a victim of violence.](#))
- an outcome and rationale recorded for:
  - each subject child recorded in the notification
  - each additional subject child identified as being harmed or at risk of harm during the investigation and assessment
- all relevant forms are completed in the *Investigation and assessment* event.

## Record the outcome

Once a decision about the child's need for protection is made, the investigation and assessment outcome can be finalised.

### Answer the outcome questions in ICMS

Answer the four questions in the *Assessment and outcome* form in ICMS, based on the assessment of harm and risk of harm, to generate the investigation and assessment outcome for each subject child.

Support the investigation and assessment outcome for each subject child with clear documentation of:

- the professional assessment of significant harm and risk of significant harm to the child and
- the reasons for the outcome recorded.

The four questions are:

#### 1. Was the investigation and assessment completed for the child?

Answer 'yes' to this question if:

- all actions for completing the investigation and assessment have been carried out and
- the next two questions can be answered accurately.

#### 2. Has the child been harmed?



Answer 'yes' if it is assessed that the child has suffered significant harm, taking into consideration:

- the impact of cumulative harm
- that psychological or emotional harm is not always observable.

### 3. Is the child at unacceptable risk of harm, with no parent able and willing to protect them from harm?

Answer 'yes' if the assessment identified the risk of significant harm to the child is probable and the child does not have a parent able and willing to protect them from the harm.

Answer 'no' to this question if at least one parent has been assessed as both able and willing to protect the child. Sometimes both parents will need to be assessed, irrespective of custody arrangements.

### 4. Is the child already subject to ongoing intervention?

Answer 'yes' if the child is currently subject to an open ongoing intervention case because it already been assessed through an earlier investigation and assessment that:

- the child is in need of protection
- the unborn child will be in need of protection following their birth

## Record the abuse and harm

The *Record abuse and harm* section includes:

- the abusive action
- the resulting significant harm to the child
- the person responsible for the abusive action.

If the outcome is unsubstantiated, do not select any abusive action, resulting harm or unacceptable risk types.

### Practice prompt

Select only one (most serious) harm or risk of harm type for each child.

If the child is assessed as having been significantly harmed, record the abuse and harm by selecting:

- each *abusive action* type experienced by the child— see [Figure 1. Record abuse and resulting harm](#) below
- each *resulting harm* type experienced by the child— see [Figure 1. Record abuse and resulting harm](#) below

Record the person responsible for each abusive action and the resulting harm type. More than one person can be responsible for the same harm type for a child.

Figure 1. Record abuse and resulting harm

The screenshot shows two main sections in the ICMS interface. The top section, titled "Record abuse and resulting harm", features a table with four columns: "Abusive action", "Resulting harm", "Person responsible", and "Most serious". Below the table, there are radio buttons for "Physical" and "Emotional", and a dropdown menu for "Person responsible" with the instruction "Please select the person responsible.". The bottom section, titled "Record resulting harm", also has a table with four columns: "Caused by", "Physical / Emotional harm", "Parent responsible", and "Most serious". Below this table, there are radio buttons for "Physical" and "Emotional", and a dropdown menu for "Parent responsible" with the instruction "Please select the parent responsible.". A dropdown menu on the left side of the bottom section lists options: "Physical", "Sexual", "Emotional", "Neglect", and "Failure to protect".

### Record the person responsible

Record the person responsible for each abusive action and the resulting harm type. More than one person can be responsible for the same harm type for a child.

If someone else was responsible for the abusive action, select one of the following *person responsible* options in ICMS:

- *not applicable—child under 10 years*, if the abusive act was committed by a child under 10 years of age
- *not applicable—other person*, if the abusive act was committed by:
  - a child aged 10 years or over who does not have the developmental ability or capacity to understand the consequences of their actions
  - any person who does not live in the child’s home or does not have regular access to the child in the home

- *not able to be identified*, if it is unclear who was responsible for the abusive action.

Do not record a subject child as a person responsible for abusive action towards another subject child in the same investigation and assessment event. If a child (aged 10 years or over) is recorded as a person responsible for abusive action towards another subject child and there are child protection concerns for that child, make sure:

- a separate notification is recorded for that child as the subject child
- a separate investigation and assessment is carried out regarding that child's need for protection.

### Record unacceptable risk of harm

In the *Record unacceptable risk of harm* section select:

- all relevant abuse types from the 'Unacceptable risk of harm caused by' field
- the parent responsible for any future risk to the child.

If the child is assessed as being at unacceptable risk of significant harm, with no parent able and willing to protect them from harm:

- select each *unacceptable risk of harm* identified for the child—see [Figure 2. Record unacceptable risk of harm](#) below
- select the parent responsible for each unacceptable risk of harm type recorded. More than one parent can be responsible for the same unacceptable risk of harm type for a child.

Figure 2. Record unacceptable risk of harm

Record unacceptable risk of harm

Unacceptable risk of harm caused by	Physical / Emotional harm	Parent responsible	Most serious Please select one.
<input type="text" value=""/>	<input checked="" type="radio"/> Physical <input type="radio"/> Emotional	<input type="text" value=""/>	<input type="text" value=""/>

...er the child is in need of protection.

### Image caption:

Figure 2

### Record the parent responsible

To complete the *Record unacceptable risk of harm* section in the *Assessment and outcome form* in ICMS, record:

- the details of any assessed unacceptable risk of significant harm if there is no parent able and willing to protect the child from significant harm
- the parent responsible for the future risk of significant harm.

Record a separate notification and carry out a separate investigation and assessment if, during the investigation and assessment, child protection concerns are identified for:

- a subject child's parent who is under 18 years of age or
- a child of a subject child.

A child and their parent cannot both be subject children in the existing investigation and assessment.

### Further reading

Refer to Procedure 1 Record subject child or other child for information about recording a separate notification in these circumstances.

### Record the assessment of harm and risk of harm

For each child, succinctly record the assessment that has informed the decision about the investigation and assessment outcome, using the following headings:

- assessment of harm
- assessment of risk of harm
- assessment of parents' ability and willingness.

The record of the assessment will:

- show how all relevant information gathered during the investigation and assessment has been considered
- reflect how cumulative harm has been considered
- for risk of harm

- include the analysis and synthesis of the identified risk and protective factors, in the context of the subject child's particular situation
- focus on what will happen in the future for the subject child, if nothing changes
- include what the parent has done to demonstrate their ability, capacity and motivation to protect the child, where the assessment is formed that a parent is able and willing to protect the child.

#### Practice prompt

It is critical the assessment can be read and understood by others. For further information about documenting an assessment and decision about harm and risk of harm to a child, refer to the practice guide Assess harm and risk of harm.

### Record the type of ongoing intervention planned

For each child in need of protection, record one of the following types of ongoing intervention:

- *intervention with parental agreement*
- *intervention with parental agreement with a directive child protection order, if the child is subject to both types of intervention*
- *child protection order.*

Record a *support service case* if: a pregnant woman consents to ongoing intervention prior to her baby's birth.

For all other subject children, record *no ongoing intervention planned*.

#### Tip

The ongoing intervention section in the Assessment and outcome form in ICMS documents the type of ongoing intervention planned when the investigation and assessment is completed.

#### Practice prompt

If the child will be subject to ongoing intervention and has an unknown visa status or needs assistance in gaining permanent residency, immediately contact the intercountry liaison team at Court Services via the Court Services mailbox [courtservices@cyjma.qld.gov.au](mailto:courtservices@cyjma.qld.gov.au) or by telephone on 3097 5400. Court Services staff can:

find out the visa status of a child

facilitate the process for seeking permanent residency for the child

provide information about the path to citizenship for a child in care.

### Approve the investigation and assessment

The investigation and assessment must be approved within 100 days of the date of the notification by the senior team leader or another senior team leader or CSSC manager if the approving senior team leader carries out any important steps in the investigation and assessment.

## Advise agencies and services of the outcome

Advise relevant agencies and services involved in the investigation and assessment process of the investigation and assessment outcome and whether there will be ongoing intervention.

This includes:

- The Assessment and Service Connect provider if the investigation and assessment was a co-response.
- The Family Participation Program if it has supported the family during the investigation and assessment.
- A SCAN team core member, where a referral has been made to a SCAN team, but Child Safety has subsequently completed the investigation and assessment and intends to close the case. The senior team leader must first discuss the outcome of the investigation and assessment with the referring agency core member representative, and the core member representative will determine if they wish to proceed with the referral to the SCAN team prior to Child Safety closing the case.
- A Centrelink employee who notified Child Safety of the concerns for the child in line with [The Youth Protocol: An agreement concerning referral, assessment, case management and support for homeless and unsupported young people](#). In this case

- telephone Centrelink within 48 hours of deciding the investigation and assessment outcome and advise them of the outcome and any proposed actions
- complete the *Advice to Centrelink* form that was attached to the original written advice from Centrelink
- send the form to the relevant Centrelink office. (Refer to Procedure 1 Information from Centrelink.)

#### Note

If the investigation and assessment has been finalised and the ASC provider raises new child protection concerns about the child, the information will be provided to the relevant RIS. The RIS CSO will consult with the CSSC CSO and the senior team leader responsible for the ASC co-response to decide the intake response.

The ASC provider is expected to finalise their involvement with the family within 60 days of receiving the request to participate in an ASC co-response. This excludes any period of 'active holding' by the ASC provider while waiting for another service to start working with the family. The active holding period should not extend beyond 60 days of the investigation and assessment being finalised.

## Inform the parents of the outcome

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The *Child Protection Act 1999*, [section 15\(2\)](#), requires that, as soon as practicable after completing the investigation and assessment, an authorised officer must:

- tell at least one of the child's parents about the outcome of the investigation and assessment
- if asked by the parent, provide the outcome of the investigation and assessment in writing.

Consider whether the information should be provided to both parents, especially when parents are residing separately.

To provide the information to the parent, either verbally or in writing:

- Give sufficient information about the main child protection concerns in the notification, to ensure they understand the reasons for the Child Safety intervention, without identifying the notifier.
- Tell them the investigation and assessment outcome and the rationale for the decisions made, including:

- an explanation of terminology used
  - a rationale for any substantiated significant harm or risk of significant harm and any safety, belonging and wellbeing needs identified.
- Outline the reasons and rationale for any decision to open an ongoing intervention case, to assist the parents to participate in further decision making, and strengthen their ability to meet the child's needs in the future.

#### Practice prompt

If providing the investigation and assessment outcome in writing, refer to the following examples of letters to parents—

Letter to parent – I&A outcome (substantiated - child in need of protection)

Letter to parent – I&A outcome (substantiated - child not in need of protection)

Letter to parent – I&A outcome (unsubstantiated - child not in need of protection).

## Discretionary compliance with section 15

Only provide information to the extent that is reasonable and appropriate in the circumstances, if:

- someone may be charged with a criminal offence for the harm to the child, and compliance may jeopardise an investigation into the offence
- compliance may expose the child to harm.

When considering the use of discretionary compliance:

- Decide what is reasonable and appropriate in each particular circumstance.
- Consult with the QPS if there is an ongoing criminal investigation before giving any information to the parents.
- Use professional judgement, the assessment of risk of significant harm to a child, and any relevant information about domestic and family violence issues to decide if providing information may expose the child to significant harm. (Refer to [Inform the parents about the allegation of harm.](#))
- Seek senior team leader approval for any decision not to provide the information.
- Record the decision, rationale and approval process in the *Information provision to parents* form in ICMS.



## Long-term guardianship to a suitable person

If the child has a long-term guardian, an authorised officer must:

- tell at least one of the long-term guardians about the outcome of the investigation and assessment and
- make reasonable efforts to contact at least one of the child’s parents unless this is not considered to be in the child’s best interest, taking into account:
  - the nature and extent of the child’s connection with their parents
  - the evidence supporting the allegation
  - any other matter, for example, if a parent’s knowledge of this investigation and assessment will have a detrimental effect on the child and the stability of the living arrangements (*Child Protection Act 1999*, [section 15\(3\)](#)).

Record details of advice to parents and all attempts to advise the child’s parents of the allegations and the investigation and assessment outcome, in the ‘Information provision to parents’ form in ICMS (*Child Protection Act 1999*, [section 15\(5\)](#)).

## Family Responsibilities Commission

### Note

The Family Responsibilities Commission is a statutory body that aims to reduce welfare dependency in the North Queensland communities of Aurukun, Coen, Hope Vale, Mossman Gorge and Doomadgee. Further information, including contact details, is available at the Family Responsibilities Commission website.

All Child Safety staff are responsible under the Family Responsibilities Commission Act 2008 to give notice to the Family Responsibilities Commission when they become aware of alleged harm or alleged risk of harm to a child whose family resides in a welfare reform community.

A [Notice About Child Safety and Welfare Matters](#) must be emailed to the Family Responsibilities Commission within 5 days of an investigation and assessment outcome being approved, if the family has lived in one of the welfare reform communities for at least 3 months since 2008.

Before providing the notice, contact the Family Responsibilities Commission to confirm if it has already received a notice about the family. Record details of when the notice was sent or confirmation that a notice has already been sent in a case note in ICMS.

## Related forms, templates and resources

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### [Commencing an investigation and assessment within 5 or 10 days](#)

**Resource** 6 March 2020

*This is a secure resource. Only authenticated users may access this content.*

### [Youth protocol: Referral, assessment and support for homeless and unsupported young people](#)

**Resource** 2 June 2020

*This is a secure resource. Only authenticated users may access this content.*

### [Assess harm and risk of harm](#)

**Resource** 16 September 2019

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# Determine which Child Safety Service Centre will be responsible for case management

After an investigation and assessment is completed with a *substantiated—child in need of protection* outcome, case management responsibility will be accepted by:

- the CSSC in the geographical area where the child and family normally reside or
- another CSSC determined by the senior team leader responsible for the investigation and assessment team. For example, if:
  - a child has siblings in care and the CSSC with case management responsibility for the siblings could reasonably provide case management for the child
  - a child is placed in a care arrangement in a different geographical location to the parents and it is assessed that reunification is probable within a short timeframe. The CSSC where the parents reside will be responsible for case management.

## Principles for accepting case management

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- The safety, belonging and wellbeing of children is the focus of Child Safety intervention and the best interests of children are at the centre of all decision-making.
- The care needs and safety of children in need of protection are a state-wide responsibility. Decisions about the handover of case management from an investigation and assessment team to an ongoing intervention team will be based on the need for effective service delivery to the child and family.
- Children, parents and families will receive the right service at the right time and a CSSC will accept case management responsibility within the specified timeframes to ensure continuous and planned service delivery to children and their families. (Refer to [Timeframes for accepting case management.](#))
- The primary focus of an investigation and assessment team is to assess and take action to ensure the immediate and ongoing safety of a child throughout the investigation and assessment—and for a child in need of protection, until case management is accepted by an ongoing intervention team.
- Ongoing intervention case work and case management tasks for a child and family sit best with an ongoing intervention team.
- Differences of opinion between senior team leaders regarding ongoing intervention will not delay acceptance of case management, and subsequently, ongoing intervention service delivery to a child and family.

## Request that a Child Safety Service Centre accepts case management

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To request that a CSSC accepts case management for ongoing intervention, the senior team leader responsible for the investigation and assessment will email the senior practitioner or the senior team leader of the relevant CSSC, and:

- ask the CSSC to accept case management responsibility
- provide the investigation and assessment ICMS event identification (ID).

### Note

Additional written documentation is not required to support a request for a CSSC senior team leader to accept case management responsibility for a child after the completion of an investigation and assessment.

## Timeframes for accepting case management

An ongoing intervention senior team leader will accept case management responsibility in writing within 5 business days of receiving the request to ensure continuous service delivery to the child.

If geographically possible, the CSO responsible for the investigation and assessment will facilitate a warm handover for the child and family with the CSO responsible for ongoing intervention. Case management will be accepted within 5 business days of the request regardless of whether the warm handover is able to occur in that time.

A request for an ongoing intervention team to accept case management for:

- an intervention with parental agreement case or
- a support service case for an unborn child assessed to be in need of protection after he or she is born

will be made by the investigation and assessment senior team leader as soon as:

- the investigation and assessment event is closed in ICMS and
- the investigation and assessment team has completed the work for which they are responsible.

A request for an ongoing intervention team to accept case management of a child (for whom a child protection order is being sought) will be made by the investigation and assessment senior team leader as soon as:

- the investigation and assessment event is closed in ICMS
- the DCPL has accepted the referral and indicated they will apply for a child protection order
- the investigation and assessment team has completed the work for which they are responsible. (Refer to [Responsibilities of the investigation and assessment team.](#))

## Responsibilities of the investigation and assessment team

The investigation and assessment team will:

- finalise the investigation and assessment
- advise one or both parents of the investigation and assessment outcome. (Refer to [Inform the parents of the outcome](#) and [Discretionary compliance with section 15](#))
- complete the *child strengths and needs assessment tool* and *parental strengths and needs assessment tool* for each child in need of protection
- approve all documents within the investigation and assessment event in ICMS
- request that the relevant CSSC accepts case management responsibility in line with the relevant timeframes. (Refer to [Timeframes for accepting case management.](#))

In addition, if an assessment has been made that a child protection order is the most appropriate intervention for the child, the investigation and assessment team will:

- complete the initiating affidavit
- provide the initiating affidavit to the OCFOS lawyer for the DCPL
- serve the respondents and complete an affidavit of service (for the initiating affidavit only)
- complete a referral for a family group meeting—unless a case plan was developed for an Aboriginal or Torres Strait Islander child at a family-led decision making process during the investigation and assessment. (Refer to [Consider family-led decision making.](#))

## Responsibilities of the receiving ongoing intervention team

The ongoing intervention senior team leader will:

- accept case management in writing, within 5 business days of the request being made
- update the case management tab in ICMS
- allocate case management responsibility to a CSO

- make sure:
  - the CSO contacts the child and family within 5 business days of accepting case management
  - a case plan is developed for the child.

In addition, the CSSC responsible for ongoing intervention will undertake all future case management tasks for the child—excluding those for which the investigation and assessment team is responsible. (Refer to [Responsibilities of the investigation and assessment team](#).)

The responsibilities of the ongoing intervention CSSC manager include deciding:

- all financial matters relating to the child’s ongoing intervention
- the approval of a kinship carer (if a kin member was provisionally approved to care for the child during the investigation and assessment).

## Resolve issues

The CSSC managers responsible for the investigation and assessment team and the ongoing intervention team will:

- resolve any issues regarding the handover of case management
- address any impediments to timely service delivery to a child and family

in line with the principles for accepting case management. (Refer to [Principles for accepting case management](#).)

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# Review an investigation and assessment outcome

The outcome of an investigation and assessment is a decision made at a point in time based on the assessment of information known by the investigating officer at that time and approved by a senior officer, usually a senior team leader.

If a review is conducted on a finalised investigation and assessment and the reviewer decides the outcome was incorrect, it is generally not appropriate to:

- delete the original outcome and
- record the outcome decided by the reviewer to be correct

even if the reviewer ensures the original outcome and subsequent decision making is documented.

It is appropriate to leave the outcome as originally recorded and ensure documentation is added to the file (and clearly linked to the original investigation and assessment outcome) that outlines the:

- name and position of the reviewer
- reason for the review
- review process, including whether it was a desk top review or included interviews with the original CSO and senior team leader
- revised investigation and assessment outcome that the reviewer decided was correct, including the rationale for the decision
- name and position of the person who approved or provided oversight to the review process and the revised investigation and assessment outcome.

In exceptional circumstances, the review process may recommend that information recorded in the investigation and assessment event be amended because it is factually incorrect. It may also recommend that the person responsible for the abusive action, or unacceptable risk of significant harm be changed.

Before any changes are made, the CSSC manager must record a case note in the relevant event, documenting their approval for the change, (see above for guidance on what to record). Examples of when this may be considered include when:

- a person profile is incorrectly linked to an investigation and assessment, recording the wrong person as the person responsible or parent responsible, and the investigation and assessment outcome would wrongly influence future assessments of risk and a parent's ability and willingness to protect

- a person recorded as the *person responsible* for abusive action to a child was not given the opportunity to respond to the alleged concerns and further review has determined that the assessment was incorrect.

## Inform the person seeking the review of the outcome

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From the outset, advise the person seeking the review that a review will not result in a change of outcome, but additional information will be included on the child's file.

Once the review is finalised, individuals should be advised that the review report has been completed and attached to the relevant part of the file so it can be read in context with the original investigation and assessment outcome.

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