

# Executive Summary of the Carer Council's Submission on care concerns reform *The Proposed Quality of Care Response Model*

## About the Carer Council

The Carer Council is a ministerial advisory council of twelve foster and kinship carers who are appointed by and report to The Hon. Katrine Hildyard, Minister for Child Protection. The Council aims to have proportionate representation of the active carer demographic in South Australia, and currently comprises of five foster carers, seven kinship carers, including five regional-based carers and four First Nations carers. The Council is administered by Connecting Foster and Kinship Carers SA – Inc, the peak body for foster and kinship carers in South Australia.

## Background

Following a request for the Carer Council to write a submission on the Department for Child Protection's (DCP) proposed *Quality of Care Response Model* (QCRM) in April 2025, which was approved by the Minister, the Carer Council submitted a detailed submission in May 2025. The submission reflects carers' perspectives on the QCRM's strengths, weaknesses, and areas for improvements, and provides 14 recommendations on improvements. This work compliments seven previous recommendations provided to the Minister by the Carer Council following its March 2024 meeting on progress occurring in the Care Concern Reform Project.

## Overview of the QCRM

The QCRM is part of DCP's Care Concern Reform Project, which has been underway since 2022. The QCRM aims to 'change core aspects of care concern management, such as:

- **screening** – how do we process and triage information?
- **determination** – how do we define urgency and risk?
- **response** – how best do we respond to the information?
- **review** – how do we maintain rigor through the process?'<sup>1</sup>

## Carer Council's feedback

The Carer Council's submission addresses the four key QCRM priority areas identified by DCP, as well as other feedback beyond these areas. Below is a summary of the contents of the submission.

### Key Priority 1: Strengthening assessment quality and consistency

- Support for an independent response unit to manage reports.

---

<sup>1</sup> As described in the introduction of the QCRM dated February 2025.

- Positive view of involving agencies in carer mapping.
- Problems with a lack of transparency in tools referenced (e.g. the Structured Decision Making tool) and practice guidance yet to be developed.
- Recommendations for:
  - Broader care team involvement.
  - Co-design of accompanying tools and practice guidance.

### Key Priority 2: Implementing more targeted response pathways

- Support for clear pathways and a separate stream for residential care, while noting clear, informative resources to carers are required upon rollout of the QCRM.
- Opportunities to utilise familiar agency staff to improve respectful communication with carers.
- Concerns about accountability and meaningful follow up on placement support plans, with a recommendation relating to expanding independent oversight of progress and implementation of these plans.

### Key Priority 3: Ensuring Procedural Fairness

- Strong concerns about the lack of mandatory communication with carers.
- Risks to carers due to the discretion to involve and communicate with them, and a lack of written records in all levels of reports.
- A need for clear timeframes and oversight of case management responses.
- Recommendations relating to:
  - Early and required involvement of carers.
  - Written notice
  - Fair handling of cumulative harm reports.
  - Independent oversight and timeliness in action and closure of reports.

### Key Priority 4: Improving data visibility to support timely responses to concerns raised

- Support for better data collection to identify systemic issues.
- Concerns about recordkeeping practices and visibility of low-level concerns.
- Recommendation relating to re-categorising inappropriately categorised reports.

### Other feedback

- Positive reception of language changes in the model.
- Criticism of limited carer consultation held on the model.
- Mixed views on letters to children and young people.
- Recommendations relating to:
  - Improved consultation opportunities on systemic reform.
  - embedding the *Statement of Commitment to Foster and Kinship Carers* in the model.
  - Preventing carer exhaustion which can lead to reports by providing proactive supports, including respite, therapeutic supports, mental health support, and peer support.

## Annexure 1: Carer Council SWOT Analysis of the QCRM

### SWOT ANALYSIS

STRENGTHS, WEAKNESSES, OPPORTUNITIES,  
THREATS FRAMEWORK  
CARER COUNCIL ASSESSMENT OF THE QCRM

