



Placement and Support:
CRISSP Business Practice Guidelines

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Authorised by Paul McDonald, Executive Director, Child, Youth and Family Services Division and Neville Caine, A/Director, Client Service Model Strategic Project.

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Purpose

This document is intended to provide Placement and Support workers with an overview of Client Relationship Information System for Service Providers (CRISSP) **including the core components of the system's functionality and the 'business practice rules' to support the processes** undertaken in relation to a Child Protection client.

It is however, important to understand that these 'guidelines' should not be considered as either a Training Manual or a System Guide in the use of CRISSP. It is essentially, a support resource for workers who are required to use the system in their day to day operations.

CRISSP makes available the electronic means to record client and case management information to support staff from Community Service Organisations (CSOs) in the recording of work with clients and their families. It also assists in and makes reporting to the department easier through the capacity to extract data readily available from within the system.

The term 'function' (as used in this document) refers to the technical response to your business requirements and indirectly, recognises some of the benefits of the new system.

Examples are:

- Caseworkers will have all their relevant client information in one place
- Your organisation will be able to replace its local database/s with an integrated, electronic client and case management system
- You will be able to record all clients in CRISSP, not just those associated with Child Protection for statutory reasons

The term 'Business Practice Rule' is used to define practice rules, either in relation to existing Placement and Support practice, or in relation to systems functionality.

Example is:

- When clients who have been referred to your organisation for specific aspects of service delivery, CRISSP will let you know who in the department to contact to support your work as well as how and who to share any relevant and necessary client information

Introduction

Client Relationship Information System for Service Providers (CRISSP) is an electronic and web-enabled client, caregiver and case management information system, available to Community Service Organisations (CSO) funded by DHS to provide services in Child Protection Placement and Support¹, Disability, Early Childhood Intervention, Post release Youth Justice and Family Services.

In Placement and Support, CRISSP will provide one system to record all work undertaken with clients, their families and/or caregivers. It incorporates all proformas and documents that are currently used within Placement and Support.

A significant amount of work was undertaken to develop design specifications to support Placement and Support practice within CSOs and included extensive consultation with agency staff through representatives involved in the CRISSP Community Care NGO Reference Group².

CRISSP roll out across CSOs state wide is now well underway and to keep **abreast about the impact this new way of working has on the sector, a 'User Group' has been convened with representatives from all business units using the system.** Those involved in this group's activities are frequent users of CRISSP and deemed to have a good understanding of the benefits of the system, as well as identifying the drawbacks, as it affects daily business. This group also provides the forum to express an opinion of CRISSP and to offer suggestions on how the system can be enhanced.

A further impetus for introducing CRISSP to CSOs is the Registration Standards for Community Service Organisations, which sets out the requirements for CSOs to have effective information management systems, to enable organisational decision-making, service monitoring and review, and accountability requirements.

CRISSP will assist the CSOs to demonstrate that they share and manage **information sensitively to support children and young people's best** interests; effectively protect their rights to privacy and confidentiality in a secure environment; and allow children, young people and their families including former clients, to appropriately access records regarding services provided to them.

Finally, it needs to be noted that CRISSP will continue to be updated, modified and enhanced to reflect ongoing business developments and in response to user capacity and confidence to better utilise the functionality available.

¹ Access to CRISSP is mandatory for all Placement and Support Services funded by DHS under the new legislation

² The CRISSP Community Care NGO Reference Group was the governance forum within the Client Service Model Strategic Project (CSMSP) in all matters related to Heads of Agreement, high level design of common processes etc

Getting Started

An organisation's access to the CRISSP application is through the Internet, via a web browser on a standard desktop or laptop computer. **The department 'hosts' the CRISSP application within the departmental business domain.**

The use of CRISSP in some cases, involves changes in the way you have worked in the past. Internet protocols and procedures within your organisation may need to be reviewed in order to accommodate and **maximise the system's capacities to reflect the requirements of the Heads of Agreement³ and the CRISSP Operation's Manual.**

All CRISSP users need to be registered (with username and password) for both DHS e-Business and CRISSP before they can access the application.

Each CSO has an appointed person (known as the 'Organisation Authority or AO) who is authorised by the organisation to validate the organisation's workers registering to use CRISSP.

How to register for CRISSP is explained in detail on the CRISSP web site , which can be located in www.dhs.vic.gov.au/crissp, CSOs have also been provided with a CRISSP User Guide May 2007 which sets out step by step **'Registering for access to CRISSP'.**

Within this document, all registered workers are referred to as 'CRISSP users'. A CRISSP user is a person who is authorised to access the department's eBusiness environment and the CRISSP Application.

Similarly, when a worker is leaving the organisation, a **'Remove User form'** must be submitted when a CRISSP **user's** access is to be removed. CSOs should incorporate these processes into their CSO practices regarding the commencement and leaving of staff. These forms also cater for changes to users accessing the CRIS application for Child Protection Contracted Case Management.

³ *The Heads of Agreement document defines the roles and responsibilities of the department and the organisation introducing CRISSP*

Definitions and Interpretations

CRISSP provides the CSOs with an electronic case management system, which will allow the user to record vital information about the clients receiving placement and support services. The concept of CRISSP is to have an electronic file per client to record the individual person details and within this file to record each episode of service provided to the client in a separate case.

A client is not limited to one file across CRISSP. Each CSO can create their own client file as required, allowing them to manage information throughout the period of their involvement (with the client).

Clients

CRISSP provides the capacity to record and maintain individual person details for each client. Once a client is created in the system a unique client identification number is assigned, reducing the likelihood of duplicate client entries in the system for each agency. The individual person details include **the client's name; alias if applicable; address; phone number and Indigenous status** (recorded in their demographics).

Note:

Client Details are stored against the person as opposed to stored within the current case. This allows the client details to display across cases and can be updated as required.

In circumstances where the client belongs to a sibling group the worker is **able to create a 'Family' Group with all the siblings as members of the group**. This functionality allows information to be saved to the group. Some examples include: case notes; accepting referrals for placement; placement; funding source; intake and relationships. This functionality has the benefit of saving worker time and increasing accuracy as information is entered once and saved to all appropriate clients.

Information in regard to Child Protection clients must be kept confidential under the Child Youth Family Act 2005 (CYFA). As the majority of the Placement & Support clients in CRISSP are also Child Protection clients the system has been built to automatically classify Placement & Support clients as **'Confidential Client'**.

Case

A client must have an active case to be able to record the service provided to them by the agency. A client may have multiple current cases as the CSO may be providing the client with services from more than one business unit at any given time. That is the client may have a current case with both Disability Services and Placement and Support (P&S).

It is possible to have more than one current case within a business unit. Within the P&S business unit the client may have a one case with a placement and another with a support service, therefore the client would

have two current cases within the P&S business unit. Each case has a unique identification number and it is important that information is recorded in the correct case.

Closed cases are accessible from the client's record and hold a history of past episodes of service provided to the client by the agency.

Provider Groups

Provider Groups have a variety of functions in CRIS and CRISSP, in the simplest terms Provider Groups are the new format to identify what used to be teams in your agency & Funded Agency Client Transaction System (FACTS). This is just a change in terminology to those previously known to CSOs.

The Provider Group names are a combination of information from FACTS and Service Agreement Management System (SAMS).

A Provider Group naming convention has been developed to ensure consistency across the service system.

The Provider Group Name as a minimum should reflect the CSO and Service or Placement type. Region should also be included in the Provider Group name if the CSO operates the same service or placement in more than one **region. An example would be 'Berry Street Southern HBC – General' and Berry Street Gippsland – HBC General.**

Provider Group Names for placement and support services need to be the same in CRISSP and CRIS as these are the common point of transfer for functions such as referrals for placement or CP related services. An example would be a client requires a foster-care placement, for the department to be able to submit a referral successfully the same provider group needs to be able to be selected in CRIS to submit the information to in CRISSP.

Workers are attached to Provider Groups and as such have access to information recorded on clients in that Provider Group. Workers can belong to more than one Provider Group.

Each Provider Group has a nominated target, which performance is monitored against. The targets in CRISSP are consistent with the targets in SAMS. It is important that the targets are updated in CRISSP when a new target is negotiated. Changes to Provider group name and/or target needs to be processed by the responsible Program and Service Advisor (PASA).

Funding Source

Identifying the Funding Source is a mandatory requirement in CRISSP. Whenever a case is added the funding source fields are required to be completed. The worker will continue to be prompted by the system until these details are entered and saved.

On acceptance of a referral from the department it is necessary to complete the Funding Source. This indicates that the agency is actively involved with the client and receiving DHS funding.

There is capacity for recording more than one funding source for those programs funded by a mixture of sources (i.e. Commonwealth and State funding).

Phases

There are two phases in CRISSP P&S, Intake and Closure.

Intake is mandatory and the worker will be prompted by the system until this has been entered and saved. Intake is where referrer details, client Indigenous status and eligibility for service information is recorded. Referrer details are important to capture, and there is capacity to record **either 'Self Referral' or to select the referrer from a look up to 'Relationships'**. **As the majority of referrals are made by the department the Child Protection Worker will need to be entered into 'Relationships' with the role of 'DHS Child Protection' prior to being selected as the referrer.**

Closure occurs when the service provided is no longer needed. The reason for closure is recorded and the case is closed. A case note can be added to a closed case.

Aboriginal/Torres Strait Islanders (ATSI)

Aboriginal children are significantly over represented in the Child Protection service system and as such, there are protocols and standards in place to attempt to address this situation. A greater understanding of and commitment to practice approaches which take into account Aboriginal culture, family relationships and parenting arrangements will better protect Aboriginal children and their best interests.

The Aboriginal Child Placement Principle is set out in section 13 of the Children, Youth and Families Act 2005 (CYFA). The Principle must be followed when an Aboriginal child is placed in out of home care.

To enable CSOs to respond to Aboriginal children the client's Indigenous status must be recorded in CRISSP at point of Intake and at creation of a placement.

If an Aboriginal child is placed, the worker is required to enter information about the Indigenous status of the caregiver providing the placement and the reason why if an Aboriginal child is not placed with an Indigenous caregiver.

A cultural support plan must be prepared for each Aboriginal child placed in out-of-home-care to **ensure the maintenance of the child or young person's connections to their family, community and culture.** It addresses:

- The continuation of effort to identify a suitable placement within the **child's extended family or Aboriginal community**
- **The involvement of the child or young person's family and extended family** in placement decision making
- The maintenance of contact between the child, young person and members of their family, extended family and community
- Establishing or maintaining links with Aboriginal services

- **Ensuring the child or young person's participation in cultural and community events.**

The Cultural Support Plan is a component of the Best Interests Plan and Looking After Children Framework.

Workflow

The new worker workflow message is sent to the new worker when they are allocated to the case advising them that the client is Indigenous.

The following are the Indigenous status codes used in the system:

- Aboriginal & TSI
- Aboriginal but not TSI origin
- Declined to answer
- Either TSI or Aboriginal origin
- Not Aboriginal or TSI origin
- Not stated
- Question not able to be asked
- TSI but not Aboriginal origin

Relationships

'Relationship' is the part of the system where the P&S Worker can record all the different people in the client's network.

Once the details of a member of the client's family or friends network is recorded in the system, an individual identification number is allocated to this member. Professionals working with the client also have their details and role recorded in the system and are allocated a corresponding person id number. These individual person records can be edited as needed.

Professionals once entered into the system can be linked to multiple clients; this reduces the data entry errors and multiple entries of the same person in the system. An example being a local doctor in an area has his or her details entered into the system once and assigned an individual person id. As this doctor is identified as the local GP for a client his or her details are recorded in the client's 'Relationship' with the role of 'Doctor - Private Practitioner'.

Case Recording

CRISSP users are required to meet the standards set out in **Protecting Victoria's Children Child Protection Practice Manual for case recording** in relation to their Placement and Support clients in CRISSP.

As for statutory child protection, case recording is an important aspect of CRISSP Placement and Support. Case recording has a number of important functions, including:

- To provide a record of all contacts and events related to a client, case management and best interests planning processes
- To ensure that important information can be retrieved and understood
- To fulfil the requirements for professional and legal accountability
- To provide an archival record of events in the life of a child that can be assessed by the child, family, new practitioners to the client and others when needed
- To enable critical historical information to form a key part of current risk assessment
- To assist in the identification of patterns in client behaviour and service response
- To identify the success or failure of past interventions for future decision makers
- To form the basis of formal reports
- To structure and clarify complex information and interpretation
- To articulate the assessment and rationale behind critical and key decisions

Departmental policy on recording and managing client information is underpinned by the following principles:

- When determining whether a decision or action is in the best interests of the child, the need to protect the child from harm to protect his or her rights and to promote his or her development (taking into account his or her age, gender and stage of development) must always be considered
- Case notes should be recorded in accordance with privacy and freedom of information guidelines
- Only relevant information should be recorded
- Clients and their families should be advised of the purpose of collecting information, and the purposes to which it may be put
- Clients and their families have a right to correct and update inaccurate factual information recorded about them
- Personal information should be stored securely

- Release of information should be determined on a need to know, rather than a want to know basis

An electronic Client File must be created for each Child Protection client. Therefore a file must also be created for the CRISSP Placement and Support client with a corresponding link to his or her siblings file.

One of the key objectives of introducing CRISSP was to provide the capacity to establish a primary file containing all relevant information related to a particular client.

A paper file may need to be created to store such things as hand written notes, court reports etc. If a paper record is created, any sibling who is a client should have his or her own separate paper file. A brief record should be entered on the CRISSP (or electronic) file for every record added to the paper file, such as the type of document, author and date received to quick reference can be made if required.

This should be in the form of a General case note and must always contain:

- The purpose and outcome of the event
- Key issues discussed or arising
- Changes to risk assessment or wellbeing
- Decisions made
- Action taken or required
- Reference to any other relevant information on either the electronic or the paper file

In CRISSP case notes, documents and significant decisions must be recorded as soon as practicable and **must identify the author's name and role**.

'As soon as practicable', is defined in the Child Protection Practice Manual as within seven working days.

The case note on the new CRISSP electronic file is structured to include:

- Worker name
- Provider group
- Case note heading
- Date and time
- Duration of contact
- Travel time
- A summary section
- Participants
- **A link to 'create new activity for this case note' (once the case note is saved)**

The other business units use the activities page as it captures information required for their reporting requirements. P&S business unit only need to

utilise the case note page although they have the option of using the activities page if they wish.

All hand written records must be retained on the paper file unless a contemporaneous record has been made on the electronic file. The record must include the subject, date, and location of the event and the author of the record. (Contemporaneous recording is defined in the Child Protection Practice Manual as soon as possible and within 24 hours or the next working day.)

Hand written notes may be added to, highlighted or elaborated upon to ensure that the record contains all relevant information. Any additions to handwritten notes must be distinguishable and dated and amendments to a record should be noted as an amendment. No worker may change a case note made by another worker that is, only the author of a case note can **amend that case note. The following must be held on the client's electronic or paper file (if held on paper file a note to that effect must be entered on electronic file):**

- Critical incident reports
- Complaints by child or parent in relation to the case
- Quality of care reviews (information relevant to the client on the client file and information relevant to the caregiver on the caregiver file)
- Investigation of abuse in out of home care (information relevant to the client on the client file and information relevant to the caregiver on the caregiver file)
- Any emails
- Medical, Assessment and DHS reports
- LAC records

Consideration for good practice in case recording

Accountability and accuracy

Practitioners should be able to explain and verify their case records and assessments to others and ensure that they can support everything written in a professional way. Case notes should not be overly descriptive and need to distinguish between fact and professional judgement.

Detailed recording

At times very detailed records of events or an interview are required, so to avoid inconsistencies, clarify accuracy with the interviewer when taking notes if needed.

Recording content and style

The structure and content of the case recording depends on the purpose, nature and details of the event. Case notes should be professional, concise, and not overly descriptive; the purpose of the record and relevance to case management should be clear and should be written in a manner that will stand scrutiny.

Use of previously recorded information

Auto populated information on the electronic file can save valuable worker time. However, the danger is that the information may not be accurate or current and therefore not a true representation of the facts. Ensure that all information on the electronic file is current and correct.

Managing information securely

Those who are privy to personal information about a child in out of home care **carry a significant responsibility to maintain that child's privacy. CSO's** have a particular responsibility to support out of home care staff and carers to manage the privacy of all personal and health information about the **children in their care. In addition, CSO's and the Department of Human Services** are required by privacy legislation to hold personal and health information in a secure manner.

Looking After Children (LAC) provides a consistent approach to the recording and sharing of information about children in out of home care. The LAC essential information record (EIR) will comprise the substantive **components of the CSO's client file for a child in care. As part of the collaborative process of LAC, CSO's will provide copies** of relevant LAC records to those who helped to complete them, including the **Child Protection practitioner, the child's home-based carer or key residential care worker, the child themselves and their parents, where appropriate.**

If a child moves to a placement managed by a different CSO, the CSO where the child was previously placed is expected to provide copies of relevant and current LAC records to the new CSO. It is expected that carers will provide a child with a secure place to store copies of their own LAC records⁴.

When a child leaves a placement, all those involved in that placement who **held copies of that child's records, other than the Child Protection practitioner, the child and their family**, are required to return these to the CSO for destruction.

Only the original records should be kept on the CSO client file. Similarly, when records are updated or amended, the out of date copies, apart from the originals, are to be returned and destroyed by the CSO who placed the child. These procedures comply with privacy legislation.

Appropriate indications should remain that enable the links to personal, health or sensitive information to be subsequently accessed when needed for future reference. For example, where it is necessary to protect a child or other party from harm by providing an undisclosed placement, the **placement address on most of the individual's client records would be the office address of the placement agency.**

⁴ A future CRISSP enhancement is planned, to provide the capacity for electronic transfer of child/client records

Referral

It is an accepted principle that it is a community responsibility to care for and protect children. Child Protection is one of a network of services responsible for protecting children and supporting families. Concerns may be identified through the course of Child Protection involvement with children and families that require the expertise of another agency or professional. Effective and timely referrals for a specific service can be instrumental in connecting a family or individual members to a relevant service and successful referrals can be central to any plan to reduce identified protective concerns. This can result in:

- **Strengthening the family's ability** to adequately manage care and protection issues
- Assisting the family to develop a support and resource network
- Empowering the family to actively seek supports and solutions to matters of concern

The referral process is supported by the referral function built in CRISSP & CRIS and it is divided into two main streams, - Referral for Placement and Referral for Service. The Referral page has the capacity for information to be entered by both CRIS and CRISSP users.

Referral for Placement

The decision to place a child or young person in out of home care is made as part of the Best Interests Planning process. Once the decision is made it is the responsibility of the department under the Child, Youth and Families Act, 2005 (CFYA, 2005) s179 (1)(2) to provide the carer with all information that is reasonably necessary to assist (the carer) to make an informed decision about whether or not to accept the care of the child. The department must provide the carer with any information regarding medical status of the child to enable the carer to provide appropriate care of the child.

s179. Responsibility of Secretary or out of home care service to provide information to carers

1. If the Secretary or an out of home care service intends to place a child in the care of a person other than the parent of the child, the Secretary or out of home care service must provide the carer with all information that is known to the Secretary or the service and that is reasonably necessary to assist the carer to make an informed decision as to whether or not to accept the care of the child.
2. If the Secretary or an out of home care service has placed a child in the care of a person other than the parent of the child, the Secretary or out of home care service must provide the carer with any information known to the Secretary or the service regarding the medical status of the child to enable the carer to provide appropriate care for the child.

This information is found in the specific 'Referral for Placement' document, which was developed to support the Looking After Children (LAC)

Framework. This document is a combination of the 'old' referral documents, LAC Essential Information Record 1 (EIR1), and LAC Placement Plan 1 (PP1). The 'Referral for Placement' (for Child Protection) document is used in all regions as part of LAC and has been incorporated into CRIS.

The referral for placement is required to be submitted from CRIS to CRISSP for all CP clients who require a placement.

You should expect that when a 'Referral for Placement' is submitted to the CSO in CRISSP that the Referral for Placement Document will be attached to the referral 'Notes and Documents'.

Procedures and business rules

- A referral via CP CRIS is required before a CRISSP agency creates a placement with the status of Court Ordered for Voluntary Placement with CP involvement. (The referral is essential as it initiates the link between the CRIS and CRISSP systems)
- A new referral is required to be submitted when a decision is made that a placement change is required either inter or intra agency for children and young people placed by the department
- A referral may be submitted to individual and multiple placement providers for the same placement type. Referrals for different placement types are submitted individually to placement providers
- **Only one referral per 'Placement Type' can be active at any one time**
- Once a referral is rejected by the placement provider or withdrawn by Placement and Coordination Unit (PSU) the referral document is no longer accessible to that placement provider
- Once a referral has been accepted, the placement should be created as soon as practicable thus ensuring link between CRIS and CRISSP
- A placement change will require a new referral, even if placement is within the same agency
- Once the placement provider has created the placement from the referral PCU will close the referral
- Once a referral is closed the Create Placement button is no longer available
- It is possible to have more than one placement open at any one time, i.e. A respite placement as well as an ongoing placement

Client and Referral List and Worklists

The CSO is in constant contact with the PCU worker discussing potential referrals for placement. CRISSP does not replace this discussion but provides both the CSO and the department with a means to transfer information electronically. Once a referral is submitted to a CSO the relevant Team Leader will receive a workflow message informing them that the referral for placement has been submitted.

The CRISSP Team Leader is then able to access the referral by the link on their worklist. After considering the information provided in the Referral Document the Team Leader completes their response. The Team Leader or

other staff members can also access the referral for placement by selecting the 'Client and Referral' icon located on the home page and conducting a search.

The CSO worker needs to be aware that completing a response on the referral will trigger a workflow to be returned to the worker who submits the referral, who in most instances will be the PCU worker. This workflow advises the CRIS worker of a change to the referral for placement. This does not negate the phone contact between the CSO worker and the department.

Referral for Service

The decision to refer a child or young person and where appropriate their family for a support service is made as part of the Best Interests Planning process. A referral for service to a CSO can be made at any point during Child Protection involvement. The Child Protection worker may assess and discuss issues or concerns with a family related to ongoing assessment of safety, stability, development or family functioning and dynamics that require the specialist skills or resources of a CSO or another professional. The Child Protection worker will submit referrals for support and other service types to the funded agencies (Adolescent Support, Families First etc), in line with the existing regional processes.

When a Referral for Service is submitted to the Service Provider in CRISSP, a Generic Referral Document and where applicable, the program specific **referral document should be attached to the referral 'Notes and Documents'**.

The optimum success for any referral is dependant upon:

- The family acknowledging the specific concern or issue
- A good match between the requirements of the referral and the services provided by the CSO
- The family agreeing to the referral
- The family demonstrating a willingness to work with the CSO to resolve the issue
- The family engaging with the CSO sufficiently for the work to occur
- The CSO actively engaging the family
- The CSO clearly understanding Child Protections role, the specific tasks or assessments required and any requirements for information exchange, reporting back or review of arrangements

Referral from CRISSP

The CRISSP user is able to submit general referrals for service to other CRISSP programs, within their own agency, to other CRISSP agencies and to CRIS for Early Childhood Intervention Services (ECIS) and Disability Services.

Note:

All referrals for placement for Child Protection clients **must** only be submitted by CRIS to CRISSP.

Placement

'Out of Home Care' is the term in Victoria that is used to describe when a child or young person is placed in care away from their parents. The majority of children and young people in out of home care are placed following involvement with Child Protection, with a small number placed on a voluntary basis.

Out of home care includes two main types of care:

- Residential Care staff are employed by each CSO, to care for children and young people in Residential Units
- Home Based Care is provided by people in their own homes and recruited by each CSO to care for children and young people

The recording of Placement in CRISSP is a significant change in work practice. Previously placements and referrals were recorded in FACTS⁵. It was required that this information be recorded and forwarded to the department on a monthly basis. With the launching of CRISSP, all P&S workers will record information and details about their clients directly into the system as the placement occurs. Placements referred by the department must be created from the referral to ensure the link between the CRIS file and the CRISSP file.

A placement created in CRISSP from a department referral is visible in the **client's CRIS file in a read only format. In order for this to occur the Placement 'function' is the same in CRISSP P&S and CP CRIS. Once the placement is created, placement details and other pertinent information (i.e. LAC information or any notes and documents) are accessible in CP CRIS. Similarly the 'DHS LAC' screens are accessible to the CRISSP user, via a link on the placement page.**

Within the placement module the following information is available:

- Placement History
- Placement Type
- Provider Group name providing the placement
- Primary Allocated Worker
- Component of Placement
- Residency Name
- Primary Caregiver name
- Placement Address
- Placement Telephone number
- Indigenous status of the client and caregiver as appropriate

⁵ *Funded Agency Client Transaction System (FACTS) was the stand-alone monitoring system with the information being entered by workers at each CSO location.*

- DHS contact, the allocated Child Protection worker name and phone number
- Post Placement Support

All placement providers may provide support for up to three months to **children and young people, who leave a placement.** The 'Post Placement' page provides the CSO with the capacity to record the details relating to this post placement support, recording who is providing support and the number of hours of support provided to the client. Thus, providing the CSO with an ability to monitor and provide the department with evidence of work completed in this area, which previously was unrecorded.

Placement recorded in CRISSP for children in out of home care comprise **three 'Placement Statuses':**

- Court Ordered
- Voluntary Placement with CP Involvement
- Voluntary Placement without CP Involvement

Court Ordered

'Placement Status' of court ordered is used in placements, where the Children's Court has placed the client on one of the following orders:

- Interim Accommodation Order
- Interim Protection Order
- Custody to Secretary Order
- Guardianship to Secretary Order
- Permanent Care Order

Voluntary placement with CP Involvement

'Placement Status' of voluntary placement with CP involvement is used when the parent agrees for a child or young person to be placed in care while protective issues are worked through. A Short Term Childcare agreement is completed between the parent/guardian and the CSO with the referral for placement being submitted to the CSO by the department.

Voluntary Placement without CP Involvement

'Placement Status' of voluntary placement without CP involvement is used when a CSO creates a community placement. Community placements occur when a family approach a CSO directly with their need for a placement for their child or young person, or when another agency recommends a placement would be beneficial for the family. These placements are only recorded in CRISSP and require a Voluntary Short or Long Term Child Care Agreement to be completed between the parent/guardian and the CSO.

Voluntary Short or Long Term Child Care Agreement

Under the new legislation (CYFA, 2005), there have been some changes to the management of childcare agreements, to better monitor the appropriate use of voluntary placements. The most significant is the requirement that **the 'Secretary of the Department of Human Services' must now review (as opposed to be consulted on) each Short Term Childcare Agreement after the first six months of the agreement, then annually after the first review.**

Further details regarding the commencing, reviewing and extending of Short Term Childcare Agreements and Long Term Childcare Agreements under the CYFA can be found in the Interim Practical Guide to Voluntary Childcare Agreements.

Note:

Under the transitional arrangements for the CYFA, 2005 the short and long term child care agreement review provisions detailed in sections 139 and 152 of the CYFA respectively do not come into force until 12 months post commencement of the CYFA, 2005 – i.e. until 23 April 2008⁶.

Practice rules

- Placements should be created in CRISSP on the day the placement occurs or the next working day
- **All active placements are displayed on the CRIS and CRISSP client's 360 degree view** providing a quick link to the placement page. This allows after hours workers to quickly know that the client is in an Out of Home Care placement
- **'Respite' placements will only appear on the 360 degree view when the component of placement does not have an end date entered**
- The primary address and phone number of the client is automatically updated to the primary address and phone number of the caregiver once a placement has occurred to ensure the correct contact details are available to workers
- **Placements with the 'Component of Placement' of 'Respite' do not trigger a change of primary address or phone number**
- **The caregiver is automatically created in 'Relationship' with the role of 'Carer – Primary Carer' once a placement has occurred. When the placement ends the system will end date this role**
- Other members of the carer household, additional caregivers or other **household members must be manually recorded in the 'Relationship' by the CSO worker as applicable and subsequently end dated at the end of the placement**

⁶ *Consistent with the policy two workflows have been built into the system to assist workers meet their obligation in requesting a review prior to an extension of the placement. These workflows are currently operational in the system although as noted the transitional arrangements indicate that the review provisions do not come into force until 23 April 2008. Subsequent workflows occur annually.*

Workflows

When a placement is created, amended or ended a workflow message is sent from CRISSP to CRIS to inform the allocated CRIS worker that a change has occurred. For example, if a carer household moved address taking the children (in care with them), when the new address is entered into the Residencies and Caregivers module, all current placements will automatically have their address details updated. The allocated Child Protection Worker will also receive a workflow message advising them that a change had occurred and for them to amend the appropriate records. This would occur simultaneously to all workers involved.

A workflow message will be sent four weeks prior to the expiration of six months as indicated by the review date, informing the Allocated Worker and the Team Leader that a request for review must be sent to the Secretary.

A workflow message is sent to the Allocated Worker and the Team Leader on the date the review is due, indicating that the review date needs to be updated.

Secure Welfare Placements

Secure Welfare staff, as part of their admissions and exiting process must enter placement details. This placement information will only be visible in CRIS.

The CRISSP placement remains active whilst the client remains in Secure Welfare. The CRISSP user will continue to have contact with the client and participate in planning and meetings. **The fact that the client is in Secure Welfare should be case noted in the Placement component of 'Notes and Documents' in CRISSP.**

As the placement is entered in CRIS not CRISSP, the primary address and phone will not automatically change for a young person placed in Secure Welfare. This will need to be updated manually, remembering to change the primary address and phone back to the CSO placement once the secure welfare placement ends.

This means in terms of recording, the child protection worker updates CRIS and the CRISSP placement and support worker updates CRISSP.

Residencies & Caregivers

The Residencies and Caregivers function allows the CSO the ability to record all the details about caregivers and their household that are providing care for clients. The decision as to what point of the recruitment process the CSO creates the Residency and Caregiver in CRISSP is a CSO decision.

All details taken at point of enquiry and any subsequent details or reports compiled as part of the accreditation process can be attached to the notes section, thus having all information in one system.

All CSO Residencies must be entered into 'Residencies and Caregivers' prior to any placements occurring.

- Home Based Care caregivers including Kinship Care caregivers (if applicable) and the CRISSP user, as part of the accreditation process will **enter carer households' information**
- Residential Care Units and Lead Tenant houses are entered into the departmental Integrated Client Application Management Centre (ICAMC⁷) on behalf of the agency in CRISSP

When a decision is made to place a client, the CRISSP user will create the placement either via the DHS CRIS referral, or as a Community Placement without referral (i.e. a placement with the status of Voluntary without CP involvement). **A "Residency" is mandatory, as the placement will not save** without this information. A lookup enables the CRISSP user to search for the required Residency. Once selected the relevant details, residency name, address and phone number along with the primary Caregiver name are pulled through into the placement page.

- **Naming convention for Residency is 'Caregiver Family Name' plus 'Household' (i.e. Smith Household)**
- **It is mandatory to record 'Operational' status, 'Placement Criteria', and 'Provider Group' when creating a residency in relation to CSO placements**
- **Each member of the carer household aged 18 years and over will be required to be entered as a 'Contact' in the Residency**
- **A police check must be conducted on carer(s) and other household members 18 years and over⁸**
- **Working with Children Check must be applied for by all caregivers, prior to a placement commencing. A new mandatory screening process has been introduced for people who work or volunteer directly with children. The Working with Children Act, 2005 introduces the Working with Children Check that establishes minimum screening standards across Victoria for all people who work or volunteer with children**

⁷ ICAMC is responsible for the ongoing management and technical support of both CRIS and CRISSP

⁸ 'The home-based care handbook' departmental policy requires caregivers and staff to have been subject to a police check. This includes all adults living in the caregiver household. These checks will take place as part of the 'caregiver approval process'.

- On creation of the placement the system will automatically update the Residency primary address and phone number as the primary address and phone number for the client
- On creation of the placement the system will automatically create a **'Role' of Carer**- Primary carer for the caregiver named on the placement page. If there is more than one caregiver in the household, the role of **the 'Carer- Other carer' is to be entered in Relationships for the other caregivers** by the CRISSP worker
- Out of home care arrangements must be reviewed consistent with LAC guidelines. This includes the completion of a care and placement plan within 14 days of the placement commencement date and then reviewed at one month, four months and subsequently every six months. The placement review date should be utilised to indicate when reviews are to be conducted
- Voluntary Placements without CP Involvement must be reviewed at six months and all subsequent twelve months. The placement review date is to be utilised to indicate when reviews are to be conducted

Looking After Children (LAC) Module⁹

The Looking After Children (LAC) framework has been implemented in Victoria for all children and young people in residential care and home based care (excluding kinship care and permanent care). One of the main benefits of LAC is that it provides a framework to facilitate the sharing of essential information about children and young people in out of home care amongst **the child or young person's 'care team'** – child protection staff, CSO staff, foster carers or key residential workers, parents and significant others.

The LAC module has been built into CRISSP and CRIS to support Care and Placement Planning and broader Best Interests Planning and service provision to CP clients. It comprises the seven LAC dimensions of Health; Emotional & Behavioral development; Education; Family & Social Relationships; Identity; Social Presentation and Self-Care Skills, the Care and Placement Plan: and, the Essential Information Record.

The essential information entered in the seven dimensions into CRISSP is maintained with the client record and accessible even when there is no active case, therefore when a new case is added the information previously entered in the seven dimensions is available.

The link between CRISSP and CRIS occurs when a referral is created from the department for placement. LAC information entered in CRISSP is **accessible in CP CRIS in a read only format via the 'View CSO LAC information' button located on the placement page. The same is applicable from CRISSP, a read only format via the 'View DHS LAC information' button on the placement page.**

With this link in place, a workflow message is sent to either the Child Protection worker or the CSO worker when new information is entered or updated in the CRISSP LAC dimensions. The recipient is dependant on who recorded the information. An example would be when a new school has been entered by the CSO worker in LAC Education, the following message **would be sent to the Child Protection worker's worklist: 'New Education Facility added for...'**

The Care and Placement Plan has been built into CRISSP as a series of screens that captures information required to produce the plan. The Care and Placement Plan identifies the child/young person's needs and describes how these needs will be met, while the child/young person is in out of home care. It considers the child/young person's strengths and aspirations as well as any problems and difficulties. Each of the LAC dimensions must be considered. Incorporated in this plan is the Cultural plan and Individual Education Plan that can be entered into CRISSP. Once the Care and Placement plan has been completed then the plan is reviewed in line with the timelines set out in the LAC Guidelines. The Review of Care and Placement Plan has also been built into CRISSP as a series of screens that captures the information required to review the Care and Placement Plan or the last review. Each review is numbered.

⁹ *LAC guidelines and further information regarding LAC can be accessed on the Department web site for Youth & Family Division*

The Care and Placement Plan document and the Review of Care and Placement document pulls the information recorded in the seven LAC dimensions.

The Essential Information Record (EIR) is created in CRISSP via 'Placement' notes and document. It contains both current and historical information. It records both current school details; previous schools attended; and, provides a place to keep the information that will always remain true about the child/young person. It will however, need to be added to over time, such as with the birth of a sibling or a period of hospitalisation. It also provides a place to note where some other important reference information is being kept (eg the child/young person's birth certificate). A new EIR will need to be created for each new case.

Assessment & Action Records (A&AR) has not yet been included in CRISSP. The A&AR should be completed in the format currently used by your CSO. A case note can be added in CRISSP to indicate an A&AR has been completed and where it is.

Case Contracting

'Case Contracting' is where the department contracts the case management and service delivery functions for specific statutory clients to a CSO. These clients are then considered to be shared clients, in that case management and service delivery is shared between the department and the CSO.

This includes clients who are on long-term orders where the CSO has the responsibility of full case management and clients who receive Intensive Case Management, where a CSO provides a high level of professional involvement regardless of where the child is placed.

The objective of case contracting is to provide the most appropriate and effective service to the child and family. This is achieved by utilising the expertise and specialised services of a CSO, minimising the number of **workers involved in a child or family's life or promoting the use of a CSO**, where the needs of a child can be adequately met by a CSO, but where a Protective Order and therefore departmental involvement is still needed.

Child Protection is able to contract a majority of case management functions to a CSO. This includes, but not exclusively, such things as *continuing* aspects of assessment and intervention; support and monitoring; supervising and organising access; providing a placement for the child; liaising with services and other roles and tasks as relating to the Best Interests Plan.

The department retains responsibility for Best Interests Planning and decision-making; significant changes to access arrangements; placement changes and legal action, including extensions or revocations of protective orders.

Certain shared responsibilities such as promoting the **child's safety**; wellbeing and stability; ensuring that communication is maintained between **all of the parties**; **collaboratively developing and implementing the child's** Best Interests and Care plans, remain consistent for all case management.

Contracting of case management will only be effective if the department and the CSO are willing to work in partnership to achieve a particular outcome for a child and family. Both the department and the contracted CSO must respect the negotiated contract and the respective roles described in the Best Interests plan and negotiated contract.

CRIS and CRISSP are the mechanisms by which service coordination between the department and the CSO providing contracted services for statutory departmental clients can be significantly enhanced. In CRIS there will be a shared client file, which is used as the primary client file by authorised caseworkers from both the department and the contracted CSO appointed to work with the shared client. There are jointly shared business rules governing how to manage the shared file.

Procedures

Once case management has been contracted to a CSO, the CSO must agree to undertake case management tasks and functions:

- Work in a manner which reflects the fact that the primary client of the agency or professional is the child to whom the Best Interests Plan or case functions relate
- **Work with the child's family to achieve** Best Interests Plan goals
- **Support the child's placement. Placement breakdown should be avoided** wherever possible, but if an alternative placement does need to be established, the question of whether case management or case management tasks and functions are to remain with the initial case manager or change, should be resolved by reference to the best interests of the child wherever possible
- Take responsibility for case management or case tasks, functions as defined in the Best Interests Plan
- Operate in a manner that is consistent with the legislation, principles, regulations and standards that govern Child Protection
- Refer to and involve other specialist agencies and services as required, such as specialist counselling, or in-patient units
- **Acknowledge and accept the department's statutory responsibilities**
- Provide supervision, staff training and accountability mechanisms to staff within the CSO
- Be party to a written agreement specifying goals, timeliness, monitoring and review requirements
- Act as a witness in court proceedings
- Report any barriers to effective contracting to the nominated Child Protection worker
- Provide monitoring reports to Child Protection
- Provide review reports (in the required format) as requested and at least annually
- Provide additional reports to the court if required (such as extensions of custody or guardianship orders)
- Assist in the process of Best Interests Planning

The roles and responsibilities for the decision-making undertaken by the CSO are:

- The CSO makes decisions within the parameters of the Best Interests Plan
- The CSO may recommend to the Child Protection Best Interests Planning chairperson that an unscheduled Best Interests Plan review is necessary to recommend critical changes to the Best Interests Plan

The CSO will be required to submit a case progress report. Reports are an essential element in the Best Interests Planning process. Reports summarise the events that have transpired in the case over the relevant period, make an assessment of risk, health and developmental needs, and review the progress on the Best Interests Plan. The frequency of reports will be determined by the Best Interests Planning chairperson in response to the characteristics of the case.

Process to gain access to CRIS

- Once the contract is signed the following occurs:
- The child protection team leader changes the case status in CRIS to **'contracted case management'**
- The child protection team leader then allocates the case to the CSO team leader who may allocate it to a staff member
- The CSO worker is then able to access components of the CRIS file, relative to their responsibilities as a primary contracted worker. These include:

Full access to:

- Case notes and most documents, that worker is (or will be) the author of, including the progress reports to the department
- Relationships components
- Client details component
- LAC
- Risk assessment
- Care and Placement plans
- Referrals
- Client allocation

View only access to:

- Phase summary screen
- Case allocation
- Best Interest Plans
- Court summary screen
- Placement

No access to:

- Intake Phase details
- New Allegation phase
- Case notes within Intake or New Allegation Phases
- Any notes or documents created prior to the agency accepting the case management.

Some agencies will have access to both CRIS and CRISSP, as their involvement with the client is across both program areas.

Client Expenditure

Clients receive grants for a variety of purposes. The client expenditure function has been developed to provide workers with the capacity to record the grants and the expenditure of these grants.

This is a simple way to record Placement Support Grant's (PSG), Flexi Packs, brokerage or other client expenditure that has been assigned to a client, including who approved the grant. The worker records the expenditure as it occurs which provides a running total indicating the balance available to spend.

CRISSP Privacy Statement ¹⁰

The Client Relationship Information System for Service Providers (CRISSP) provides a client and case management information system for Community Care and Disability Services non-government organisations (NGOs) funded by the Department of Human Services (DHS). CRISSP supports the provision of services and coordinated care to your DHS-funded clients and facilitates effective communication between NGOs and DHS about common clients.

CRISSP has been designed to support the dual objectives of protecting privacy and delivering coordinated care.

The Common Client Layer (CCL) enables the sharing of limited, common client information across CRISSP, CRIS (for DHS Child Protection, Juvenile Justice, Disability Services and Early Childhood Intervention Services) and **DHS' Office of Housing**. DHS' front-end receptionists also have limited access to client information via the CCL for the purposes of providing DHS-funded clients with integrated reception services and relevant information **about specific CSOs in response to a client's query**. This facilitates the coordination of services for your DHS-funded clients. Implementation of the CCL must be in accordance with the CRISSP Privacy Guidelines.

Many of the privacy requirements for the collection and handling of personal and health information within CRISSP **are covered by your organisation's** existing privacy policy. In broad terms privacy legislation requires that you:

- Only collect personal and health information that is necessary for a specified primary purpose;
- Ensure that the individual knows why it is collected and how it will be handled;
- Only use and disclose it for a primary purpose or a permitted secondary purpose (unless otherwise authorised by law);
- Store it securely and protect it from unauthorised access; and
- Provide the individual with access to his/her own information, and the right to seek its correction

Privacy requirements have been embedded within CRISSP when they can be automated, leaving the exercising of any discretions or decision-making to workers. CRISSP facilitates compliance with specific privacy requirements **and provides specific privacy "cues"** (eg. provision of the **CRISSP Privacy Notice**). You are responsible for dealing with all other privacy issues, in particular those that require your professional judgement to be exercised.

When using CRISSP, remember:

¹⁰ *This privacy statement has been prepared for placement on the CRISSP home page, accessible via the Privacy Statement tab.*

- **All CRISSP clients have a default status of 'confidential'. You may only change a client's status in accordance with defined privacy requirements**
- New DHS-funded clients must be provided with a CRISSP Privacy Notice. This notice provides clients with information about the purposes of CRISSP information collection, its proposed uses and disclosures and other relevant information, for example, the CCL. DHS-funded clients **may then have their status changed to 'unrestricted' in order to facilitate coordinated care**
- In order to provide coordinated care to your non-DHS clients or to those clients whose details have been transferred to CRISSP from earlier systems (eg IT or paper-based), you must provide them with a copy of the CCL Consent Form and obtain their consent to CCL visibility. You must record a consent circumstance in the CRISSP consent module prior **to changing the client's status**
- The CCL handles alerts across the entire system, including CRIS and FERIS as well as CRISSP. Alerts must be managed in accordance with their associated business rules and the CRISSP Privacy Guidelines
- Only authorised users may access CRISSP and authorised users may only access personal or health information on a need to know basis
- Use of CRISSP is subject to detailed audit trails. Monitoring to detect any unauthorised access attempts, multiple unsuccessful logons or unauthorised use will be undertaken

More detailed information may be found in the CRISSP Privacy Guidelines

If you have further questions in relation to this Statement see the CRISSP Privacy Guidelines or **contact your organisation's privacy adviser.**

Appendix 1

Person Details Explanation

There are a number of different ways a person can be attached to a client. Each person entered in the system has their own individual record, with a unique identification number, where their name, address, phone, demographics etc are recorded, and may be attached to many clients with many different roles or relationships.

Confidential Client

Confidential Client's identity is only visible to:

- The client's authorised worker(s)
- The worker's immediate supervisors/team leaders
- Other workers in the same CSO business unit (CRISSP Placement and Support)

Role

A person record can be attached to a client and can be assigned a role. i.e. **Person A is the DOCTOR for client 1. The Doctor's details are entered into the system once and can be accessed via the search functionality to be attached to each client with whom he has the role of doctor.**

Relationship

A person record can be attached to a client and can be assigned a relationship, ie. Person A is the Mother for client 2.

Worker

A worker is only linked to a case when they are allocated to them. There is no ongoing record of a worker being an associated person if they are no longer allocated the case. A worker cannot be searched on in the system and cannot be added as an associated person. If the worker is allocated to the case they will show in the relationships table.

Appendix 2

Placement & Support Provider Group Definitions

Residential Care – Case Management

Provide case management for children and young people residing in temporary, short term or long term accommodation.

Residential Care

Provide temporary or long-term accommodation and care to children and young people who are unable to be placed in Home Based Care.

Lead Tenant

Provide semi-independent accommodation for young people 15-18 years, who are in transition to independent accommodation.

Home Based Care – Permanent Care

Children placed who are unable to live with their birth family with approved caregivers on a permanent care order or on a permanent basis.

Home Based Care – Kinship Care

Provides a temporary, short term or long term out of home care service with approved relatives or members **of a child or young persons' social** network, who are unable to live at home with their parents due to issues of abuse or neglect.

Home Based Care – Intensive

Provides a temporary, short term and long term out of home care service for children and young people who are unable to live at home. Includes the following programs – Specialised Home based Care, Innovative Home based Care and Shared Family Care.

Home Based Care – General

Provides a temporary, short term and long term out of home care service, for children and young people unable to live at home.

Home Based Care- Complex

Provides temporary, short term and long term out of home care placements for adolescents who are, or have been, registered on the High Risk Adolescent Register of children and young people who have significant level

of complex requirements that include a range of challenging behaviours, high needs, and high demands.

Home Based Care – Adolescent Community Placement (General, Intensive and Complex)

Provides temporary, short or long-term accommodation and care to young people who requiring accommodation as a result of family breakdown or violence.

Home Based Care – Therapeutic Foster Care

Provides therapeutic temporary, short or long term out of home care to children and young people who are unable to live with their parents due to issues of abuse or neglect.

Adolescent Support

Provides support services to young people living at home or independently, who are clients of child protection and demonstrate challenging behaviours.

Intensive Case Management Service

Provides specialist case management and support services to children and young people living at home, in out of home care or independently, who are at risk of significant harm or abuse, or statutory clients in need of additional case support.

Families First

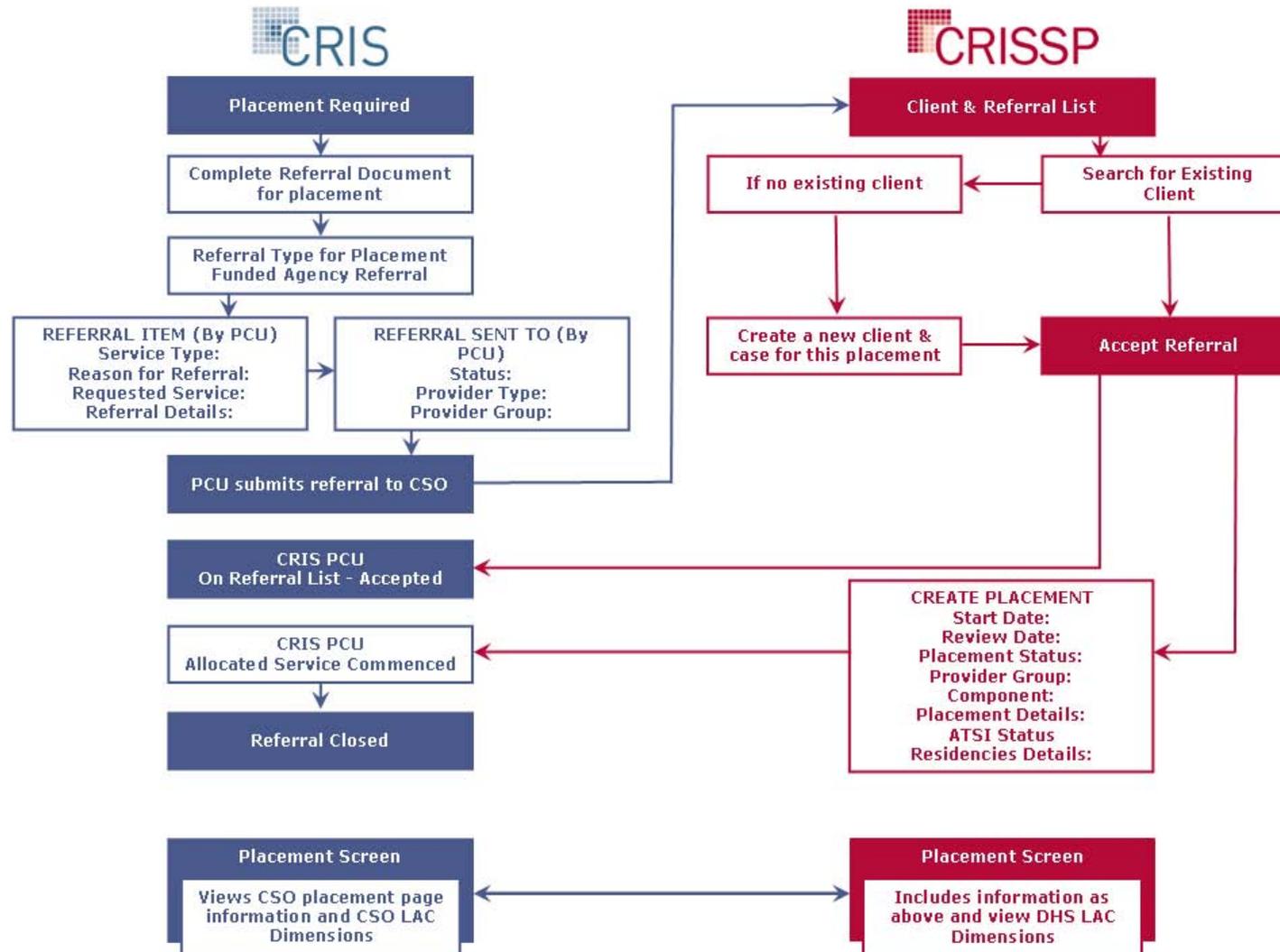
Provides an intensive, short term service aimed at strengthening the ability **of families to protect and care for their 'at risk' children, thereby avoiding** child removal and placement or undertake reunification of children who have been in out of home care with their families.

Finding Solutions

Provides a rapid response to young people and their families in order to prevent family breakdown and entry to the child protection placement system.

Appendix 3

CRIS & CRISSP Referral and Placement Interface



Appendix 4

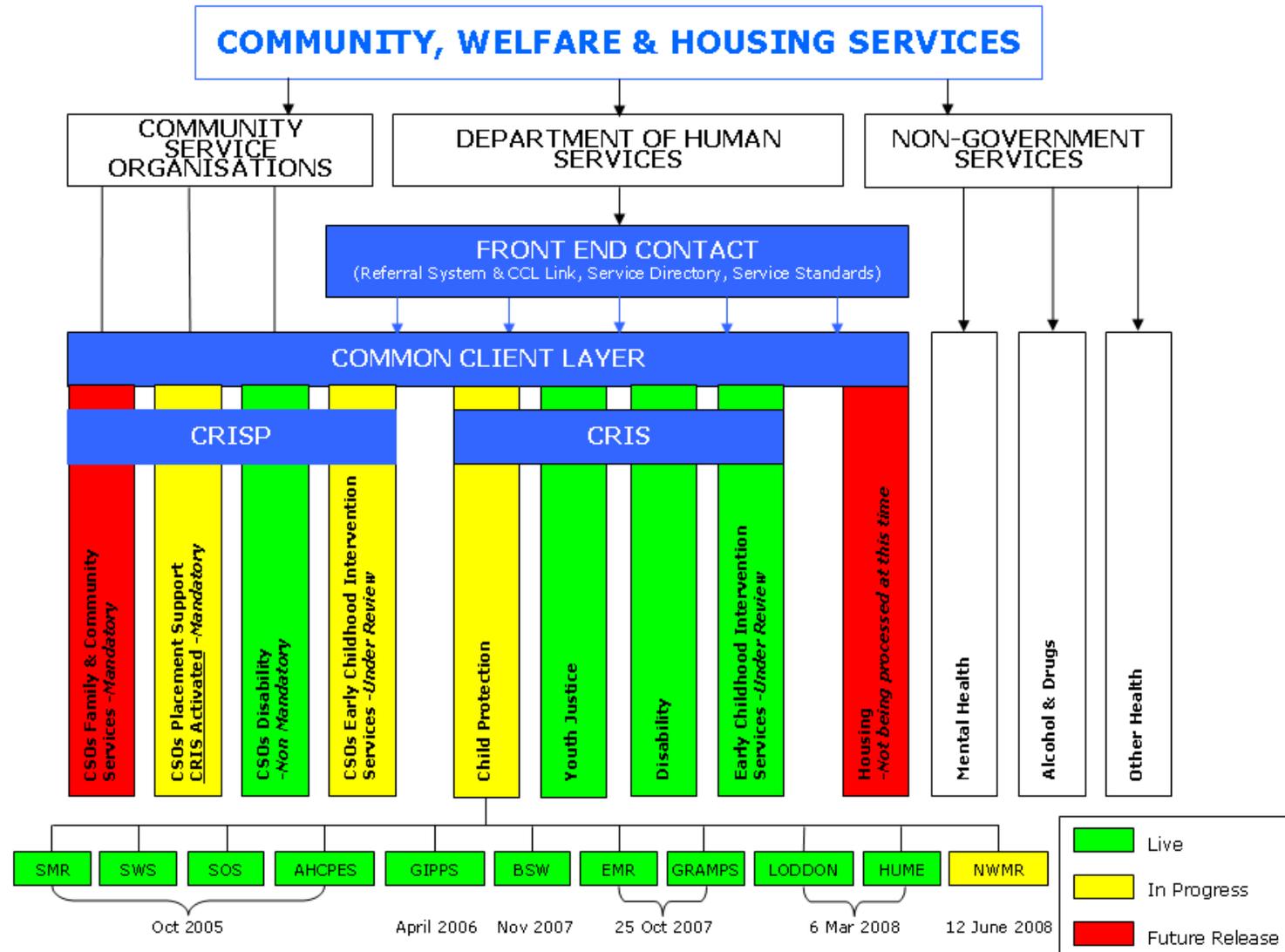
CRISSP System Map – 360 degree view

Case view

| CRISSP Components (Tabs) | | | |
|--------------------------|---|----------------------------------|--|
| Case | CRISSP has the ability to have multiple cases for a client. Child Protection cases are under the P&S business unit. | Service Provision | CRISSP has the ability to have multiple service provisions per case. |
| Funding Source | Indicates where funding for the program comes from, all P&S cases are funded by DHS Child Protection | Referral | Create/View/Update referrals for services both internal and external. |
| Phases | CRISSP has 2 phases Intake and Closure. | Placement | <ul style="list-style-type: none"> •Create Placement from Referrals from DHS •Create Placement – Voluntary with no CP involvement •View Placement Summary |
| Notes & Docs | Create & view case notes and documents. | Care & Placement Plan | Create/Update Care & Placement Plan and Review |
| Note Summary | Summary of Case Notes. | Client Expenditure | <ul style="list-style-type: none"> •Create/View client expenditure. •View summary of client expenditure. |
| Case Plan | Create Service & Support/Exit Plan. | Case Allocation | Summary of case allocation. |
| Relationships | Add/Update roles and relationships. | | |

Appendix 5

Scope of the Integrated Client and Case Management System



Appendix 6

Glossary of Terms¹¹

| | |
|-----------------------|--|
| Alerts | Alerts contain important information related to a client that may be accessed by other CRIS, CRISSP or FERIS users who have dealings with the same client. Alerts enable and enhance effective communication between caseworkers managing common clients. |
| Auto-Population | CRISSP will automatically transfer information that has already been recorded within the case to a document or file , eg. When preparing a report, the client's name and other known details will 'auto populate' into the chosen report template. |
| BIP | Best Interests Plan. |
| Best Interests Plan | A record of decisions made about the overall plan for the child or young person (statutory and non statutory). The summary shows in chronological order meetings scheduled, held and reviewed/appealed |
| Care & Placement Plan | Create/update care and placement plan for child |
| Case Contract | A case contract is a formal written agreement between the Department of Human Services and another agency regarding the management of an individual child protection case by that agency on behalf of child protection. |
| Case Contracting | Cases contracted to community services from Protection Order Phase onwards. |
| Case ID Number | With every report made to child protection (new Intake) a new ' Case ID ' is created. This is different to that of a ' Client Number '. |
| Client Number | Client identification number. This number remains with the child/young person throughout their protective involvement. |
| Case Workload Manager | Useful for Team Leaders and Managers, to sort lists of clients by region, team, worker etc. |
| Client Expenditure | Create/view summary of client expenditure. |

¹¹ *Glossary of Terms includes commonly used acronyms and abbreviations*

| | |
|---------------------------|---|
| Client Status | The client status determines what information is visible though to the Common Client Layer. A client can have a status of unrestricted, restricted or confidential. |
| Closed case | Program involvement ceased. |
| Closure | Closure is the final phase in CRISSP. |
| Common Client Layer (CCL) | The CCL improves the coordination of services for clients who receive more than one service delivered or funded by the Department of Human Services. The CCL enables workers to identify these 'common clients', with access to private and confidential information varying dependant on security levels. |
| Components | The area that is accessed via the tabs, such as phases component and relationships component. |
| Contract Details | Ability to view contract agency and reports. |
| Coordinated Care | Service providers working together to coordinate services for common clients to improve quality and outcomes and achieve increased efficiency. |
| CRIS | Client Relationship Information System. An electronic system to manage client information for Department of Human Services delivered services. |
| CRISSP | Client Relationship Information System for Service Providers. CRISSP is a version of CRIS for community service organisations. |
| CRISSP Connection Package | The CRISSP Connection Package contains the documents that CSO's will need to complete to connect to the CRISSP application. |
| CSO | Community Service Organisation. |
| CYFA, 2005 | Children, Youth and Families Act, 2005 |
| Default values | Default values are the contents of a field that are automatically selected by CRISSP, these can be either locked down or editable |
| Drop down fields | Some fields in CRISSP are not free text fields and require the user to select from a list of options that appear when the arrow on the right hand side of the field box is selected. |
| Dynamic Screen | A dynamic screen is a page that is used to input information that will be used to generate a document; this will then populate the document or report. |

| | |
|---|---|
| eBusiness Administrator | The eBusiness Administrator is a departmental person responsible for the high level management of the eBusiness environment, and one of the authorisations of CRISSP access. |
| Fields | Fields are a box, which are designed to contain values, free text or drop down values. |
| Finalised/Completed | Lock down of documents which once 'done' cannot be amended or further edited. |
| Flagged | Within some components, such as the Intake page within phases, the worker will be able to select a box resulting in a 'tick' appearing. |
| Free text fields | A free text field is a box, which allows the user to enter text as they wish of a certain length. |
| Functionality | Functionality is used to describe the way the CRIS performs an activity or task. |
| Funded Agency Client Transaction System (FACTS) | FACTS database was provided to funded agencies to record and report on the provision of out of home care and support services. This system has been replaced (and is now a legacy system) with the introduction of CRIS and CRISSP. |
| Heads of Agreement | The Heads of Agreement outlines the relationship between the Department and the organisation for the use of CRISSP. It details principles and commitments of the organisation that is entered into agreement surrounding ideas such as privacy, connecting to CRISSP and all data issues. |
| Hyperlink | Usually identified as blue underlined text. This text, upon selection, will take the user to another page within CRISSP. |
| Icons | An icon is a picture that also functions as a link to another component or page. |
| Integrated Client Application Management Centre (ICAMC) | ICAMC provides CRIS and CRISSP users with the technical support required to maintain or keep the application running effectively and is often described as the HelpDesk. |
| Integrated Client and Case Management Systems (ICCAMS) | ICCMS in the name if the 'suite' of case management applications that includes CRIS and CRISSP |
| Integrated Reporting Information System (IRIS) | IRIS is the current data reporting system for Family Services |

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| IT Security Policy | IT Security Policy outlines the security requirements in relation to the DHS eBusiness Domain for information accessible by the Organisation, in the form set out in Schedule 3 or, where the Organisation already has an existing policy that is no less onerous than the one detailed in Schedule 3. |
| Intake | Program involvement commences. |
| Looking After Children (LAC) | LAC is business practice and guidelines for children in out of home care. |
| LAC Dimensions | Ability to record and store information relating to the health and welfare dimensions of a client. |
| Launch Page | CRISSP homepage where the most commonly used icons are noted. |
| Legacy System | An existing information system used prior to the implementation of the new system, for example CASIS, JJCIS |
| Locked down | A locked down field is a field that will contain information that cannot be edited, for example after a page is saved. |
| Mandate | Refers to the legislated powers, and responsibilities conferred under the Children, Youth and Families Act, 2005 to the Secretary of the Department and who delegates these powers and responsibilities. |
| Messages | Similar to Lotus Notes, messages can be created and sent from within a client's file to other staff. A record of this message is then recorded on the client's case. |
| My Team's Clients | Shows all clients on a teams list |
| My System Profile | When going on leave, can use this to re-direct messages to another worker's work list. |
| Notes and Documents | Is where the worker can create and view case notes and documents |
| Note Summary | Summary of case notes entered on a client's file. |
| Organisation Authority (AO) | An AO is the person authorised by the organisation to validate the organisation's workers registering to use CRISSP. An organisation may have more than one AO. |
| Person Group | A function in CRISSP that allows a grouping of clients who are family or household members into one named group. A Person Group makes it possible to save specific information to all members of the group. |

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| Person Group Search | Create/search for person group. |
| Placement | If a client is to be placed in out of home care with a volunteer caregiver in a Community Service Organisation or kinship carer the worker has the capacity to create a DHS placement and view placement summary. |
| Populate | The transfer of information from one area of CRIS or CRISSP to another. |
| Privacy Policy | Information relating to the privacy practise and use of CRISSP and includes the act of complying with the requirements of privacy legislations such as the <i>Information Privacy Act, 2000</i> (Vic) and the <i>Health Records Act, 2001</i> (Vic). |
| Production | The active CRISSP (the system or 'environment') that is used to record client files. |
| Protocol | A written agreement between Department of Human Services and other government and non-government service providers in the wider child protection network which defines respective mandates, roles and responsibilities for the protection of children and young people. |
| Provider Group | Identifies the team responsible for managing the client's case including a team of workers in a common work area and/or located at one discrete location. A provider can be linked to one or many activity types. |
| Referral | Function is divided into two main streams: (1) Referral for placements, eg, LAC doc and (2) referrals for services. |
| Relationships | List of people (family, friends and professionals) associated to the client. |
| Risk and Needs | Create and update risk and needs assessment from the point of intake. Risk assessments are the core business process of child protection relating to the safety and wellbeing of a child or young person. |
| Role | An individual who has a professional relationship with the client, for example Doctor, primary carer. |
| Service Agreement Management System (SAMS) | SAMS contains all data related to CSO budgets including funded agency contact information and Service Agreement contracts. |

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| <p>Tabs</p> | <p>The tabs sit above the component screens to indicate other components available and which component is currently accessed. The tabs reflect the hyperlinks available along the bottom of the worker's CRIS screen.</p> |
| <p>User</p> | <p>User is the term used to identify a person authorised to access the DHS eBusiness environment and the CRISSP Application</p> |
| <p>User Productivity Kit (UPK)</p> | <p>Known as the Help and Support System within CRISSP. This help program is available by clicking on the 'help' hyperlink within CRISSP.</p> |
| <p>Worker Prompt</p> | <p>It is the grey box that 'prompts' business rules.</p> |
| <p>Workflow</p> | <p>A workflow is the term used to describe a message that has been generated by the system and sent to the user's work list. For example two weeks prior to a review of a case plan, a workflow is sent to the worker advising that the client's case plan needs to be reviewed in two weeks.</p> |
| <p>Worklist</p> | <p>Each user will have an individual work list of their allocated clients. They will receive client related messages that are either system generated or manually sent to other staff. These include messages regarding document approval requests.</p> |
| <p>360 degree view</p> | <p>360 search to find clients not on worker's own list.</p> |

Bibliography

Children, Youth and Families Act, 2005

Dept of Human Services, April 2007 Protecting Victoria's Children – Child Protection Manual

- Out of Home Care
- Core goals and principles for placement
- Placement roles and responsibilities
- Case Recording
- Information sharing in Child Protection practice
- Information sharing in out of home care
- Duty of care
- Making effective referrals
- Best interests planning for a child in out of home care
- Definition and purpose of out of home care
- Summary of placement actions and timelines
- Flowchart of placement in out of home care
- Supporting children who must change placement
- Intensive case management service
- Secure welfare service
- Responding to Aboriginal children
- Cultural support plans

Victorian Government Department of Human Services, 2002, Looking After Children Guidelines

An Interim Practical Guide to Voluntary Childcare Agreements – Draft document for consultation

Victorian Government Department of Human Services, November 2003, '*The home-based care handbook*', Community Care Division.

CRISSP Privacy Guidelines

CRISSP Web page – CRISSP user registration –
<http://www.dhs.vic.gov.au/crissp>

Other Notes and References:

CYFA, 2005 details the powers of the Secretary as guardian or custodian of **the child as having “the same rights, powers, duties, obligations and liabilities as a natural parent of the child would have”**. These responsibilities remain whilst a child is placed on a “Guardianship to the Secretary” or “Custody to the Secretary” although the Secretary may delegate the Service and care to another agency.

A Best Interests Plan (previously referred to as a Case Plan) is prepared within six weeks after the making of a Supervision Order, Supervised Custody Order, Guardianship Order or a Long-term Guardianship Order and **must include aspects of the child’s long term care, access, health, development, stability needs and so forth**. CYFA, 2005 s166 – s170.

The responsibilities for CSOs and DHS are discussed in detail in State Government Victoria, Australia, Department of Human Services. April 2007. **“Case contracting- service and procedures” *Protecting Victoria’s Children - Child Protection Practice Manual***.