



Practice Guidelines

Reducing Preventable Police Call-outs to Residential Care Services

Guide 1 – Residential Care Workers



PeakCare
Queensland Inc.

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- CREATE Foundation
- Queensland Aboriginal and Torres Strait Islander Child Protection Peak
- Queensland Family and Child Commission
- Queensland Police Service
- Office of the Public Guardian
- Non-government service providers

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Disclaimer

This document is a general guide to appropriate practice. The guidelines are designed to provide information to assist decision-making and are based on the best available evidence at the time of development of this publication.

This guide interfaces with multiple other resources, including:

- *Hope and Healing Framework for Working with Children and Young People Living in Residential Care in Queensland*. Department of Child Safety, Youth and Women 2018
- *Information Sharing Guidelines*. Department of Child Safety, Youth and Women 2018
- *Joint Agency Protocol to Reduce Preventable Police Call-outs to Residential Care Services*. Queensland Family & Child Commission 2018
- *Minimum Qualification Standard for all residential care workers working in Queensland*. Department of Child Safety, Youth and Women 2017
- *Police Powers and Responsibilities Act*, Queensland Government 2000
- *Positive Behaviour Support Policy*, Department of Child Safety, Youth and Women
- *Queensland Human Rights Act 2019*. Human Rights Commission 2019
- *Queensland Government Protocol for Joint Agency Response When a Child in Care is Missing*. Department of Child Safety, Youth and Women 2016
- *Reporting missing children: Guidelines for approved carers and care services*. Department of Child Safety, Youth and Women 2016
- *The Hope and Healing Framework for Working with Children and Young People Living in Residential Care*. PeakCare Queensland 2015
- *United Nations Convention on the Rights of the Child (UNCRC) 1989*, the *Child Protection Act 1999* and the principles in the *Youth Justice Act 1992*

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1. Definitions

Term	Definition
Absent child in care	An <i>absent child</i> is a child who is absent for a short period without permission, whose location is known or can be quickly established.
Criminal Justice System	The criminal justice system includes the Queensland Police Service, Department of Justice and Attorney-General (including the Office of the Director of Public Prosecutions), Queensland Courts, Department of Children, Youth Justice and Multicultural Affairs (Youth Justice Services) and Queensland Corrective Services. For children and young people under the age of 18 the experience of criminal justice will be through the youth justice system.
Child Safety Officers (CSO)	CSOs are employed by the Department of Children, Youth Justice and Multicultural Affairs (Child Safety Services) and responsible for delivering statutory child protection services including assessment, intervention, casework and case management.
Department of Children, Youth Justice and Multicultural Affairs (DCYJMA)	DCYJMA has a statutory obligation to respond to children in need of protection, and maintains responsibilities for the child's care, protection, support and wellbeing in that time.
Criminalisation	Criminalisation refers to the normalisation of responses from child protection and criminal justice systems resulting in a child being exposed unnecessarily to the criminal justice system. This includes stigmatising children, labelling their behaviours as criminal, and adopting a criminal response to actions that would not be criminalised in a family home.
Evolve Therapeutic Services (ETS)	ETS provides specialist intensive trauma-informed mental health services for children and young people aged 5-17 years (inclusive). The children and young people who come to ETS are on child protection orders and in care. They experience severe and/or complex psychological and behavioural support needs.
Harm	The <i>Child Protection Act 1999</i> defines harm as 'any detrimental effect of a significant nature on the child's physical, psychological or emotional wellbeing.'
Hope and Healing Framework	The <i>Hope and Healing Framework for Working with Children and Young People Living in Residential Care in Queensland</i> is the fundamental and mandatory practice framework for all residential care workers to work to.
Human Rights	The civil, political, economic, social and cultural rights as contained in the <i>Queensland Human Rights Act 2019</i> , Part 2, Divisions 2 and 3
Incident and episode	Within the guide, <ul style="list-style-type: none"> an incident is any unplanned or unintended event or circumstance that has occurred within a residential care setting or community which could have resulted or did result in harm to a young person, other young people, residential care workers or the community. an episode is used to describe a young person leaving the house without permission, which could have resulted or did result in harm to a young person.
Missing child in care	A <i>missing child</i> is any child whose location is unknown and for whom there are fears for their safety or concern for their welfare.

PeakCare Inc	PeakCare Queensland Inc is the state wide child protection peak body which provides support, advice and advocacy to government and service providers in order to ensure high standards of care to Queensland's children and their families.
Placement Support Units (PSU) Placement Support Services (PSS)	PSU/PSS provide the interface between Child Safety Service Centres and the non-government organisations funded to provide placement services. Child Safety Service Centres contact PSU/PSS when they have a placement need and the PSU/PSS attempts to meet this need through communication with the placement services.
Positive Behaviour Support	The DCSYW <i>Positive Behaviour Support Policy (604-3)</i> is the current policy guiding how to support children and young people who demonstrate challenging or at risk behaviour.
Preventable police call-outs	A preventable police call-out refers to when police are called by a residential care service to respond to an incident or situation for which other, non-police responses would be more appropriate.
Queensland Family and Child Commission	The Queensland Family and Child Commission's role is to promote the safety, wellbeing and best interests of children and young people; promote and advocate the responsibility of families and communities to protect and care for children and young people; and improve the child protection system.
Queensland Police Service (QPS)	QPS provides policing services, in collaboration with communities, government and nongovernment partners. Key objectives for the QPS include to stop crime, and make the community safer.
Residential care	Residential care is provided to a young person in residential premises (not a carer's or young person's own home) by paid or contracted workers and/or volunteers. Children living in residential care are primarily between the age of 12 and 18, however they can be of any age up to 18 years old.
Residential care provider	A residential care provider is responsible for the management of one or more residential care services, including training, finance, rostering, policy and procedures. A residential care provider is licensed and funded by the DCSYW and delivered through non-government service providers consistent with requirements in the Investment Specifications for Placement Services.
Residential care service	Residential care services provide placements for children and young people in houses where care is provided by a team of rostered employees. Children and young people are usually referred to residential care because foster care is not appropriate or available at the time. There are four service types that deliver residential based services: <ul style="list-style-type: none"> • Residential care • Supported Independent Living • Safe Houses • Therapeutic Residential Care
Residential care worker	Staff working in residential care services are responsible for creating and maintaining a safe, therapeutic, homelike, and caring environment for young people in care.
Safety and Support Network	A Safety and Support Network is made up of a range of people, and could include family members, professionals, carers, and community members. These network members will support children and young people to develop and maintain safety through case and safety planning.
Trauma	The experience of an event by a child that is emotionally painful or distressing, which often results in lasting mental and physical effects. Trauma is experienced where there is a lack of choice and control. The

	concept of trauma includes disrupted attachment, complicated grief and loss, and other negative developmental impacts.
Young Person	In the <i>Child Protection Act 1999</i> , the term 'child' is used for individuals under the age of 18. Within residential care services, while not officially agreed nor consistently used, individuals aged 11 and below are referred to as children, while individuals aged 12 and above are considered young people. As the majority of children living in residential care are primarily between the age of 12 and 18, the guide refers to individuals as young people.

2. Introduction

2.1 Objective

In August 2018, the Queensland Family and Child Commission released the *Joint Agency Protocol to Reduce Preventable Police Call-outs to Residential Care Services (Joint Agency Protocol)*.

The *Joint Agency Protocol* aims to improve responses to children and young people in residential care, referred to in the guide as young people, by:

- addressing the issues that result in unnecessary involvement of the police which contributes to a young person's risk of exposure to the criminal justice system; and
- providing strategies to prevent police involvement where other responses are more appropriate. (*Joint Agency Protocol*, p 11).

All agencies, residential care providers and residential care workers involved in providing care to young people living in residential care are responsible for implementing and monitoring the *Joint Agency Protocol*.

2.2 Background

Young people living in care are some of the most vulnerable and disadvantaged in our community. Many have been exposed to multiple traumas from a young age resulting from family violence, substance abuse, neglect or abandonment and/or sexual, physical, emotional and psychological abuse.¹ This exposure may manifest itself in behaviour that is of concern although the behaviour may have been useful when the young people needed to survive in unsafe environments.

'All children have a right to feel safe, protected and free from harm.'¹

Unfortunately, as numerous studies have demonstrated, too many of these young people are still becoming involved from a young age – often unnecessarily – in the criminal justice system.²

Some of these young people will have experienced difficult interactions between their families and police, resulting in them having negative views of the role of police.

Aboriginal and Torres Strait Islander young people may experience the additional impact of cumulative and intergenerational trauma, discrimination and disconnection from culture. The over-representation of Aboriginal and Torres Strait Islander young people in the child protection system requires that all people engaged with the care of these young people are mindful of these additional impacts.

In addition to the right to feel safe, protected and free from harm identified in the *Joint Agency Protocol*, young people also have the right to connection with community and culture that assists them to achieve increased safety and wellbeing.

The Hope and Healing Framework has been developed to provide all residential care workers in Queensland with a trauma-informed approach to working with children and young people living in residential care. It is essential to improving outcomes for young people that residential care workers apply to framework, the *Joint Agency Protocol* and this guide in conjunction in daily work.

All young people living in residential care have rights and liberties equal to their peers living in other community circumstances. In Queensland the *Human Rights Act 2019* took effect on 1 January

¹ [Joint Agency Protocol to Reduce Preventable Police Call-outs to Residential Care Services, QFCC QLD 2018](#)

² [Care-not-custody-report, Legal Aid Victoria VIC 2016](#)

2020 and becomes one of the suite of significant documents that must inform decision-making by adults caring for young people.

Sometimes circumstances require police to become involved with residential care services, especially if they involve harm or high risk of harm to the young people themselves, other young people, residential care workers or the community. It is the case, however, that sizable police time and resources are being spent dealing with issues that should not have been brought to their attention³.

Examples of common preventable police call-outs are:

- when a young person's behaviour appears to be escalating (however is not causing injury to themselves or others), the residential care worker doesn't feel confident to de-escalate and chooses to contact police immediately or retreat. Contacting police or retreating can be a trigger for a young person to commence acting out in an aggressive manner, sometimes resulting in injuring themselves or assaulting others
- when a young person's behaviour appears to be escalating and is using in-your-face and abusive/aggressive behaviour to ensure an emotional (and sometimes physical) distance, the residential care worker is not using proper techniques to remain safe during the escalation and therefore becomes injured resulting in police being contacted⁴
- when a young person is absent from placement i.e. has left without permission and residential care workers know where the young person is or know that the young person is not at risk of serious harm, yet still report the young person as missing
- when a young person has been located, however residential care workers are not able or willing to pick up and transport the young person due to staffing issues, lack of training and/or confidence, lack of safety planning and therefore transfer the responsibility of transporting the young person to police.

2.3 Aims

The *Practice Guidelines for Reducing Preventable Police Call-outs to Residential Care Services* consists of two parts:

1. Guide for residential care workers to prevent and respond to day-to-day incidents and episodes.
2. Guide for residential care providers to undertake planning and reviewing.

The Guides aim to:

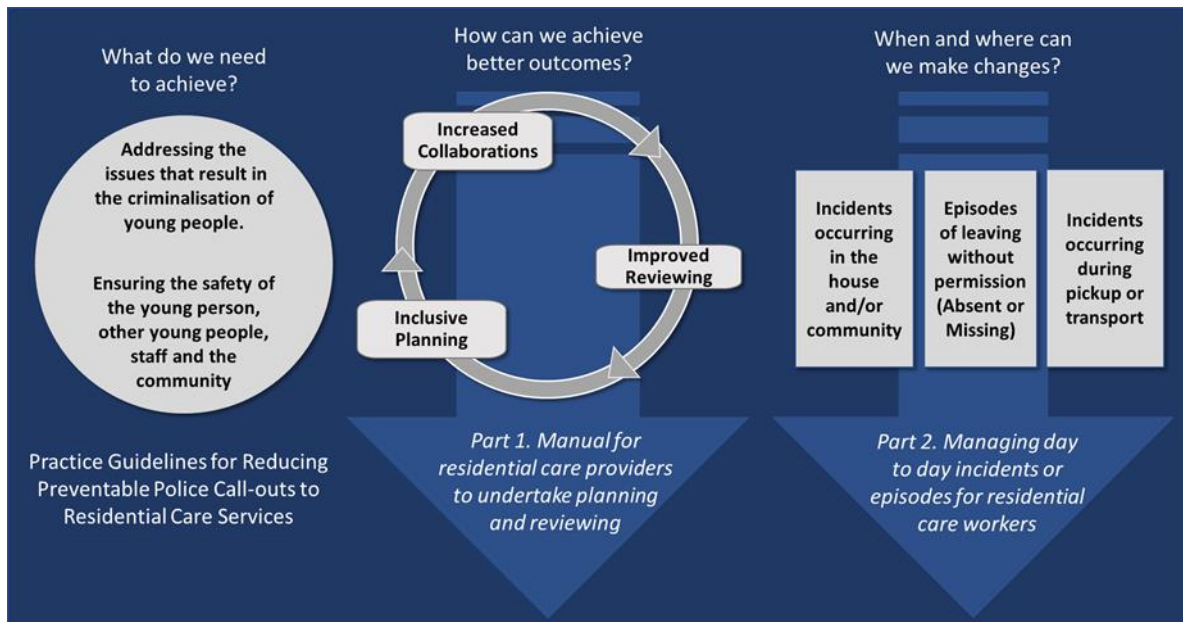
- give specific meaning to the strategies contained in the Joint Agency Protocol
- provide young people, residential care workers and residential care providers with practice guidelines on how to reduce preventable police call-outs
- provide information about how to build effective planning and cooperation between various stakeholders to ensure Missing Child Reports are appropriate
- provide ways of dealing with incidents in-house and the community that do not lead to unnecessary involvement of the police which contributes to a young person's risk of exposure to the criminal justice system, and
- enable a state-wide approach to working across residential care providers to develop consistency of responses.

Both guides address three key questions:

1. What do we need to achieve?
2. How can we achieve better outcomes?
3. When and where can we make changes?

³ [Care-not-custody-report, Legal Aid Victoria VIC 2016](#)

⁴ [Practice Paper - 'high-risk' young people \(12-17 years\), DOC QLD 2008](#)



The *Joint Agency Protocol* calls for all involved in the lives of young people living in residential care to be **courageous** in effecting change
(*Joint Agency Protocol*, p 10)

3. Planning with young people

The following section provides a brief overview of planning that residential care workers will need to be involved in. For more information, please refer to *Practice Guide for Reducing Preventable Police Call-outs to Residential Care Services – Guide for Residential Care Providers*.

A young person must be included in the development and review of **case plans, care plans, safety plans, individual crisis management plans, positive behaviour support plans and cultural plans**, all of which must be living documents that residential care workers refer to to guide their daily work. Plans need to clearly state actions to be taken in the event of behaviours that lead to risk.

Young people are in general clear about what they need for support and how to remain safe, however that does not always mean they will stay safe. Their views and requests should guide the behaviour and actions of residential care workers and other practitioners.

Planning and reviewing recommendations with a young person must be done in a developmentally appropriate manner, in a way that is meaningful to the individual young person and acknowledges the views, rights and responsibilities of young people.

In addition to experienced trauma, hormonal swings and growth spurts, young people are coping with the sometimes overwhelming developmental task of establishing an identity that aligns them with their peers and separates them from adults.

To thrive, young people need to feel safe, supported, cared-for, valued and understood. Young people need nurturing, particularly when they have experienced trauma. Open communication, respect and genuineness are critical to providing understanding and nurturing.

Here's how you can help a young person feel comfortable about sharing fears and worries:

- **listen carefully.** Everyone, especially a young person, likes to and has a right to feel heard. When a young person voices their opinions and views of the world, take time to listen respectfully to what they're saying.
- **define the problem before moving to solutions** through using active listening. Collaborative problem solving can occur after the young person feels they have been heard.
- **validate the young person.** Sometimes young people can take a long time to get to the point of a story. Try not to respond until you hear the end of the story and then validate this as their account.
- **compliment young people when they ask for help.** "I'm glad you told me that" is a good way to encourage the young person to continue sharing their fears and worries.
- **respect their worries and concerns** even if they are different from your own. Repeatedly teasing a young person about their fears is a sure way to stop them from telling you about the bully they are afraid of at school, for example.
- **give a sense of control over their own destiny.** Remember that trauma occurs in spaces where a person feels they have no choice or control over what happens to them
- **remind** a young person periodically that they should come to you if they are feeling uncomfortable or threatened by anyone else.
- **keep a young person posted** on the outcome of any actions you take. Remind them frequently that you care about them. Remember that hearing their fears and high-risk activities they undertake can be upsetting for you - talk with others, share stories and discuss how to approach difficult issues with a young person.

If a young person does come to you with safety fears, you will need to talk with them about how you suggest they could be addressed and ask if they agree. Alert the young person if you must or want to discuss this with other stakeholders. You will also need to keep them informed of the outcome. Anyone working with young people should see and speak to the young person; listen to what they

say; take their views seriously, understand their strengths and work with them when deciding how to support their needs.

4. Preventing and responding to incidents occurring in the house or community

4.1 Observe and assess before you respond

All young people have many times in their day where they are calm, peaceful and enjoying activities. However, if there is a change in the circumstances or the environment this may also change. Ensure you are alert to the signs of increasing agitation in order that you can prevent any further escalation. These signs may include:

- clenched fists
- fidgeting
- shaking
- 'eye-balling'
- head thrust forward
- clenched jaw
- speech becoming more rapid or high-pitched
- giggling⁵.

These signs should not be ignored and you should never turn your back on a young person who is exhibiting signs of increasing agitation in the hope that they will just calm down.

'Bating' or 'pacing' is a cycle of feeding off someone's emotions and escalating. If the young person can make you as angry as them, it gives them permission to become even angrier and the young person can justify their own hostility.

While working through what it is that you are going to do, keep in mind what you are **not going to do**. When the young person is struggling for control over their emotions, it is essential that the residential care worker role-models effective and appropriate control and direction over their own emotions.

4.2 Techniques to reduce agitation

De-escalation techniques go against our natural fight, flight or freeze reflexes. Techniques to remain calm in a challenging situation are essential components of the residential care worker's responses.

Reasoning with an angry young person may not be possible but may be our immediate response. Our aim instead should be to reduce the level of agitation so discussion then becomes an option and a better outcome is achieved.

Non-verbal techniques

Calm can be just as contagious as fear and must be communicated to the young person. Approximately 55% of what we communicate is through physiology (i.e. facial expressions and body posture), 38% is through the tone of our voice and just 7% is through the words that we use⁶. It is useful to remember this when you are trying to de-escalate a situation. Ensure you are modelling the behaviour you want the young person to emulate.

⁵ [Using de-escalation techniques effectively, Optimus Education UK 2016](#)

⁶ [Mehrabian, A. \(1981\). Silent Messages: Implicit Communication of Emotions and Attitudes. Wadsworth.](#)

Quick tips on techniques you can utilise include:

- **maintain calm and self-assurance.** Make sure you are not displaying the same signs of agitation that can be seen in the young person: unclench your fists, do not hold eye contact and avoid standing square to the young person.
- **maintain a neutral yet engaging facial expression.** Be in the moment for the young person listening carefully in a way that communicates to them that you are attending to their needs and not displaying emotions unwittingly. Non-verbal displays of stress could be a trigger for some young people to further escalate, such as a smirk or giggle.
- **allow space.** Entering a person's personal space can be useful to refocus on a task when the situation is calm, but when a young person is agitated this can indicate aggression and escalate the situation. Staying some distance away will also help keep you safe should the young person become physically aggressive.
- **use your breathing to remain and convey calm.** When we are stressed, angry or tense, our breathing becomes more shallow and rapid. If we take deeper, slower breaths, it will keep us calm⁷.

Verbal strategies

Quick tips on techniques you can utilise include:

Lower your voice and keep your tone even.

- It is hard to have an argument with someone who is not responding to heightened emotions.⁸

Distraction and diversion are extremely useful during lower to mid arousal levels (not violence).

- When a young person is aggressive, they are responding with their own fight-or-flight instincts and not thinking about their actions. Respond in a way that meets the young person's current needs
- Distract them and engage their thinking brain, perhaps by changing the subject or commenting on something that is happening outside the window
- Give choices, repeat these using the broken-record technique if necessary, and do not get drawn into secondary behaviours such as arguing back
- Acknowledge and use validation statements that show that you have listened to them leading to diffusing a situation; for example, "It must be really difficult for you ... thank you for letting me know".

⁷ [Using de-escalation techniques effectively, Optimus Education UK 2016](#)

⁸ [Using de-escalation techniques effectively, Optimus Education UK 2016](#)

The broken record technique

1. The Broken Record Technique is a form of assertive behaviour.
2. It is a verbal response that is firm and clear so that it conveys a message that you mean what you say.
3. It tends to work well in situations where people want to argue, don't want to listen, are non-compliant with instructions.
4. Your aim is not to upset or offend but rather to prevent further conflict, manage care more effectively or clarify information.
5. You acknowledge what the young person is saying or doing but repeat the same expectations in the same or similar words with a polite but firm tone.
"I know you're excited to play your new game. As soon as you finish cleaning up your bedroom you can play your game".
6. Initially the person may continue with the undesired behaviour but as you repeat your expectations your message is reinforced, and the young person is more likely to comply.
7. Once you have decided what you want from someone else don't change your mind or give in. This sends the message that you don't really mean what you say and can be confusing.
8. Provided that your manner is not aggressive, young people tend to get the message without feeling threatened.
9. When behaviours change, compliance is attained or the problem goes away remember to acknowledge the improvements, give praise where it is due or simply say "thanks".
10. Always let your colleagues know what you are doing so that they don't inadvertently sabotage your plans.⁷

Use words and phrases that de-escalate, such as:

- "I wonder if...", "let's try...", "it seems like...", "maybe we can..."
- talk with the young person about what you want them to do and why, rather than what not to do
- ask the young person what they need, e.g. "What can I do to help you?"
- give the young person take-up time following any direction and avoid backing them into a corner, either verbally or physically.⁹

These approaches promote development, calm and recovery while also teaching new skills.

Things to avoid:

- do not make threats
- do not be defensive or take it personally. What is being said may seem insulting and directed at you, but the behaviour is not really about you
- do not use humour unless you are sure it will help and you have a very good relationship with the young person
- do not use sarcasm or humiliate the young person
- do not expect immediate responses or actions – it may take some time for the young person to process and follow your lead.¹⁰

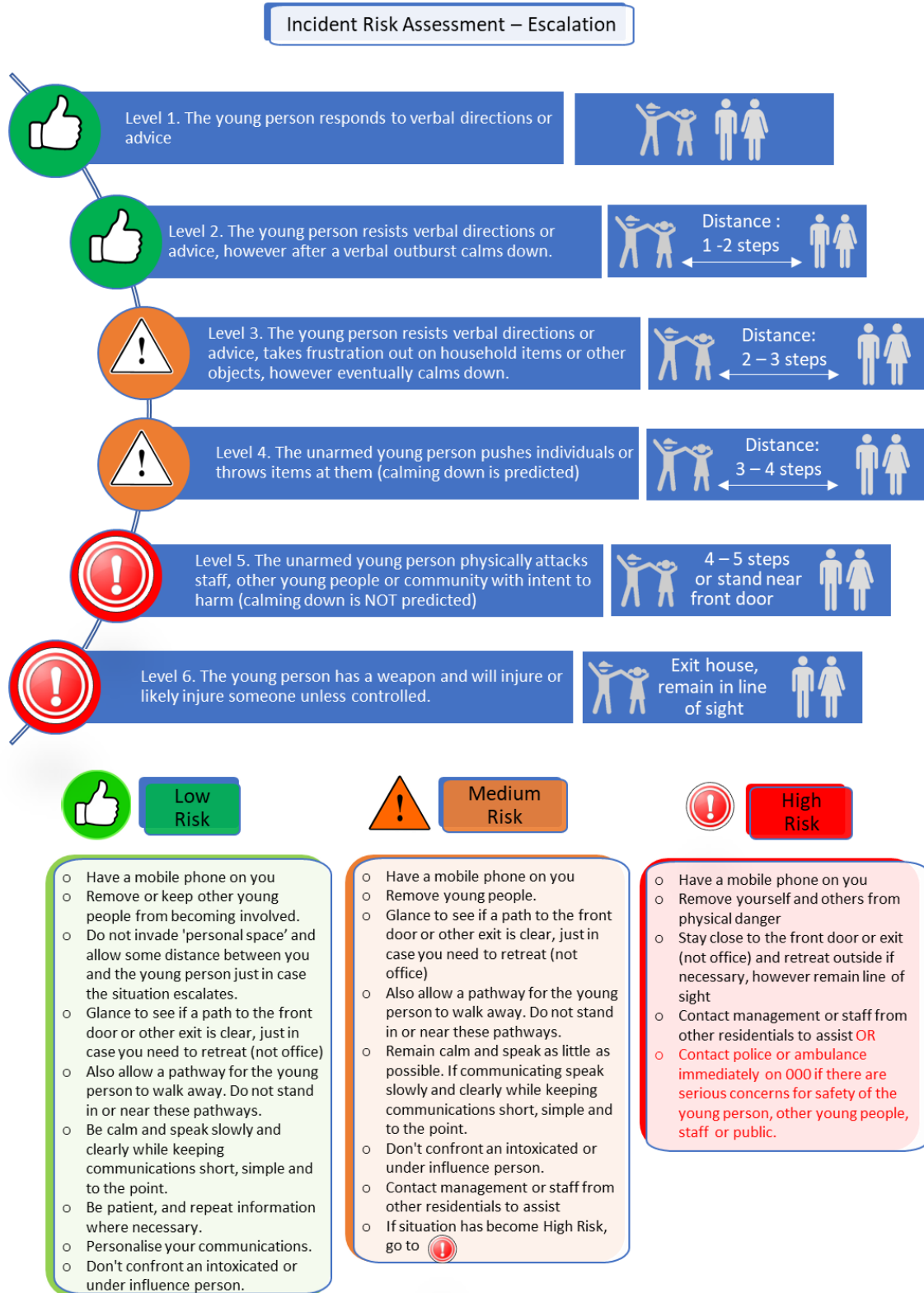
⁹ eSimulations, Nursing and Midwifery Office, NSW 2009

¹⁰ Using de-escalation techniques effectively, Optimus Education UK 2016

4.3 Crisis Point

Sometimes, no matter how carefully and skilfully you try to de-escalate a situation, it may still reach crisis point. Know your organisational systems for assistance and moving other young people to safety.

The following flowchart is a guide to responding to an escalating situation.



When taking a step backwards, don't make it obvious. Re-arrange items on a bench, pick something up from the floor, walk to another spot and in the process move one step further away.

Low Risk

The distance between you and the young person in level 2 should be at least one step away. If the young person throws a punch, at least you can quickly take another step backwards. Taking a step back will provide the young person with breathing space.

Example actions are:

- remove or keep other young people from becoming involved
- respect 'personal space' and allow some distance between you and the young person
- glance to see if a path to the front door or other exit is clear, just in case you need to retreat (not office)
- allow a pathway for the young person to walk away. Do not stand in or near these pathways
- be calm and speak slowly and clearly while keeping communications short, simple and to the point¹¹
- be patient, and repeat information where necessary
- personalise your communications
- choose words and actions so that you are not confronting, especially when a young person appears intoxicated or under the influence.

Practice tip

There will be times when you need to retreat from a situation in order to keep everyone safe, however, retreating to behind locked doors in an office, staff bedroom, bathroom etc is likely to further inflame the situation. It is much safer for everyone to stay in open areas where you maintain line of sight and ability to communicate verbally.

Medium Risk

The distance between you and the young person in level 4 should be at least four steps away, however if the young person is tall or strong you may want to extend to five or even six steps away. If the young person throws items that may cause harm to you, the recommended distance needs to be at least four steps away so you will see the young person picking up an item and throwing it in your direction. Being further away will give you time to duck or sidestep.

Example actions are:

- remove young people
- glance to see if a path to the front door or other exit is clear, just in case you need to retreat (not office)
- also allow a pathway for the young person to walk away
- remain calm and speak as little as possible. If communicating speak slowly and clearly while keeping communications short, simple and to the point
- don't confront an intoxicated or under the influence young person
- contact management or residential care workers from other houses to assist.

If situation has become High Risk, go to next section.

High Risk

The distance between you and the young person in level 5 and 6 should be at least 4 – 5 steps away, even further if the young person has a weapon. Standing near the front door could be necessary.

¹¹ [Managing aggressive and disruptive behaviours, DoH, ACT 2004](#)

Exit the house if you feel your safety is compromised, however continue to monitor the young person in the house as he/she could try to harm themselves or follow you outside. If the young person remains in the house, reduced proximity may calm the young person down. Wait and see what happens before contacting the police.

Contact police or ambulance immediately if there are serious concerns for safety of the young person, other young people, residential care workers or community. If the young person follows you outside keep the distance between you and the young person five to six steps and ring police.

Example actions are:

- remove yourself and others from physical danger
- stay close to the front door or exit (not office) and retreat outside if necessary, however retain line of sight
- contact management or residential care workers from other houses to assist
- contact police or ambulance immediately if there are serious concerns for the safety of the young person, other young people, residential care workers or community.

4.4 If requesting police assistance

It is recognised that, to maintain and provide a safe living environment for all young people, it may be necessary in certain situations to seek assistance from the police.

In considering this option residential care workers must always bear the following factors in mind:

- police involvement is on the basis of safety, not behaviour management
- senior members of staff need to satisfy themselves that all reasonable steps have been taken to divert/diffuse or manage the situation before engaging the police
- residential care workers need to be clear about why they are requesting a police response and the potential consequences of this action
- following an assessment, residential care workers need to recognise when a situation is beyond their capacity and requires the involvement of the police
- police response to an incident will be based on the circumstances presented to them at the time. In assessing the situation, the police officer will take into account all the facts including immediate safety of all present, young person's behaviour, concerns of residential care workers and the evidence available
- if there is sufficient evidence available, an investigation may be pursued by the police even when the residential care provider holds views to the contrary.

You may consider it important to request a specific gender police officer to respond, however this may not be able to be met.

If the situation permits, when police attend a residential house for an incident, a residential care worker or other member of staff will meet police outside the house to discuss the current situation and agree on a course of action on how best to resolve the situation.

After the incident, police and residential care workers may exchange details to enable a review of the incident if required.

‘The most effective interventions for young people displaying behaviours of concern are therapeutic; this includes when responding to incidents. An intervention, including police involvement, must never be used to punish, degrade, intimidate or coerce, nor should it be used to exert personal power and control.’ (Framework to Reduce Criminalisation of Young People in Residential Care, DHHS VIC 2020)

Responses to assault

If a residential care worker is assaulted by a young person, the staff member has the right to make a formal complaint. The residential care worker, residential care provider and Child Safety will need to consider their actions in the context of being trauma-informed and implications for ongoing relationships.

Where one young person harms another young person and the young person harmed expresses a desire to make a formal complaint to the police, residential care workers are required to support the young person to make a complaint. The young person who harmed and young person harmed will be offered the opportunity to discuss the situation with their CSO and senior staff of the residential care provider. Each incident requires a risk assessment to be conducted by the residential care workers to consider how best to manage the situation. In certain circumstances it may be necessary for PSU or PSS to review the current arrangement.

Residential care workers and police must provide young people with information about their rights. This must include supporting a young person to contact a legal service provider immediately or as soon as reasonable, unless the young person expresses otherwise. It is the responsibility of the services and agencies to make sure this has occurred or will occur.

Youth Legal Advice Hotline

1800 LAQ LAQ (1800 527 527)

Monday to Thursday 8am to 9pm, Friday 8am to Sunday 5pm

Aboriginal and Torres Strait Islander Legal Services

1300 650 143⁹

4.5 Reviewing Incidents

The following section provides a brief overview of the role of residential care workers reviewing incidents. The organisation you are working in will provide support to undertake reviews that feed into the planning cycle and assist residential care workers and young people to do things differently in the future to improve outcomes.

Successful reviews of incidents can be complex and demanding. Through the investigation of incidents, the residential care workers are able to review and learn about causes, which in turn can improve the control of incidents. The purpose of incident investigations is also to determine the triggers for an incident, so the needs of a young person can be met or an incident can be prevented in the future.

4.6 The Review Process

The review process contains 3 steps:

1. gather information
2. determine triggers and causes (direct and indirect)
3. corrective action(s).

You will be an important source of information in reviewing and this will be drawn upon by your organisation.

Providing information to managers

The organisation you work for has a responsibility to undertake debriefing with residential care workers and young people following incidents.

This is usually carried out within 24 to 72 hours of the episode, when residential care workers have had enough time to reflect on the experience. You are not being counselled. It is a structured voluntary discussion aimed at learning from an incident.

The debriefing process may be a helpful learning opportunity for you to identify what went well and what could have been done differently, thus feeding into the process of review and change of plans, particularly positive behaviour support and safety plans where necessary.

Gathering information from the young person(s)

If you have not been directly involved in the incident and you are deemed by your organisation to have sufficient experience and a strong relationship with the young person/s you may be asked to speak to the young people.

If it is deemed necessary to review immediately following an incident, give the young person time to transition. This could be a ten minute break with something to eat or listen to some music.

When talking, encourage open communication. Let the young person tell the whole story first, if he or she is willing to talk. Don't cut the young person off halfway through by saying, "Well, that's not what John said." The young person will stop talking as they will believe that you already made a decision and will punish them. The young person's account is their own and their perceptions may differ from other young people or residential care workers, but their communication to you is essential to their healing and to your understanding.

When a young person talks, always use statements such as, "Uh huh", "Tell me more", "I see." and "What happened next?" Those are active listening methods to encourage the young person to continue talking and be comfortable. Supporting the young person is the main goal.

The next part is to clarify what the triggers were for escalating. "Mary also said that you were upset as your mum cancelled her visit". "That must have been disappointing."

Determine triggers

Determining triggers is important to identify what happened, why it happened and preventing it happening again.

Triggers fall into two categories: **direct or indirect**. Direct triggers are usually easily identified. For example, a residential care worker asks a young person if he had a shower. Young person starts to

shout at the worker that he should not be bothered with silly questions. Direct trigger could be that the young person became annoyed with the question as he had wet hair, was holding a towel and a toiletry bag.

Indirect triggers however require more effort to bring to the surface. What if the young person had been told by another young person that they were smelly? Or perhaps residential care worker and young person were involved in an incident the previous day and the police had to be contacted. An indirect trigger could be that the relationship between the worker and young person has been compromised and the reason why the young person became annoyed.

Just as a young person's experience of trauma can lead to triggers for behaviour change, so can some medical conditions or disabilities:

For example:

- young people with attention deficit hyperactivity disorder (ADHD) may find it very hard to stay still or concentrate for long periods of time
- young people with an autism spectrum disorder (ASD) diagnosis may become unsettled by changes in routine, causing them to become upset or anxious. They can also react strongly to their environment, for example when other young people escalate, they may also escalate
- young people who have sensory impairments may be over or under stimulated by sounds, sights, smells and noise. This can significantly affect the way they respond to their environment
- young people with specific learning difficulties (e.g. reading or writing) or speech and language difficulties may find learning at school difficult and stressful without good support. If appropriate support is lacking, a young person's behaviour may change or become challenging
- some young people have a disability that impacts on their ability to speak and may need alternative ways to communicate their needs.¹²

Your ability to identify individual characteristics will greatly assist in determining what, why and next steps.

Corrective Actions

Managers will work with the whole team, the young person and potentially the Safety and Support Network to reset goals, plan needed actions and develop ways of working with the young person to prevent or reduce further occurrences.

¹² What is your child's Challenging Behaviour trying to tell you? Development Disability WA 2017

5. Episodes of leaving the house without permission

The purpose of this section is to inform residential care workers how to establish if a young person is absent or missing from their placement and the different responses required.

5.1 Introduction

Young people are clear that there are different categories of running – some to have fun and come back, some to go to stay in places they want to be or with people that they want to be with, but others, concerningly, to run away from a situation in their present house. Problems causing them to run away include challenging relationships, wanting to change houses, or wanting to escape from stress and take time out to think things through and calm down.

There are further multiple risks and vulnerabilities facing young people who are absent or go missing from care, which include the risk of drug and alcohol use, being a victim of crime, becoming involved in perpetrating crime and risk of child sexual exploitation.

In some circumstances, a young person may be absent from where they should be for a short period and then return. They may be testing the boundaries or have become sidetracked on their way home. In other circumstances, a young person may run away because they are being ‘pushed away’ following abuse or other factors, or ‘pulled away’ wanting to be near friends or because they are being exploited by adults.

Every absence or missing episode warrants professional attention, offering a consistent and clear response that safeguards young people and the community. Each episode should trigger a response to facilitate safe return and attention to what led to the young person leaving.

In this context, the following safeguarding principles have been adopted for this protocol:

- The safety and wellbeing of the young person is paramount.
- Locating and returning the young person to a safe environment is the key objective. This means responding quickly and appropriately, and making all reasonable attempts to find the young person.
- If significant concerns for the immediate safety of the young person or others (e.g. the young person is making credible threats of harm to self or others), contact emergency services.
- Young people who are missing, where their whereabouts cannot be quickly identified and where there are fears for their safety or concern for their welfare, must be reported to the police as missing and the ‘*Reporting missing children: Guidelines for approved carers and care services*’ and ‘*Queensland Government Protocol for Joint Agency Response – When a child in care is missing*’ procedures must be followed.

5.2 Definitions

It is important to understand the definitions and differences between absent and missing, in order to be clear about what responses are required when a young person leaves the house without permission, when the police should be involved and what steps to follow.

The ‘*Reporting missing children: Guidelines for approved carers and care services* (DCSYW 2016) contains the following definitions that are current for Queensland:

An **absent** child is a child who is absent for a short period without permission, and where the child’s location is known or can be quickly established.

A **missing** child is any child whose location is unknown, and there are fears for the safety or concern for the welfare of that child¹³.

The following section further refines these definitions.

Absent

Absent: a young person not at a place where they are expected or required to be.

Short Period: a time period should consider individual factors for each young person. Even short periods away can lead to increased risk of harm.

Determining the potential time period for a young person is based on individual factors, such as a young person's age, developmental level and vulnerability. Some young people may be particularly vulnerable due to their age, disability, suicide risk or medical needs, for example.

Location is known or can quickly be established: Sometimes residential care workers know where the young person is going or 'hanging out'. Sometimes they do not know the location, however they are able to confirm their location once the residential care worker has made all reasonable attempts to locate the child. This includes: phoning the young person on their mobile phone, checking their social media, searching the house/premises and surrounding area, contacting the young person's friends and school, asking friends or neighbours, checking places the child frequently attends and engaging with other members of the child's safety and support network.

Missing

Location is unknown: The whereabouts of a young person is unknown and all reasonable attempts to find the young person have failed; and

There are fears for the young person's safety or concern for their welfare. This may include:

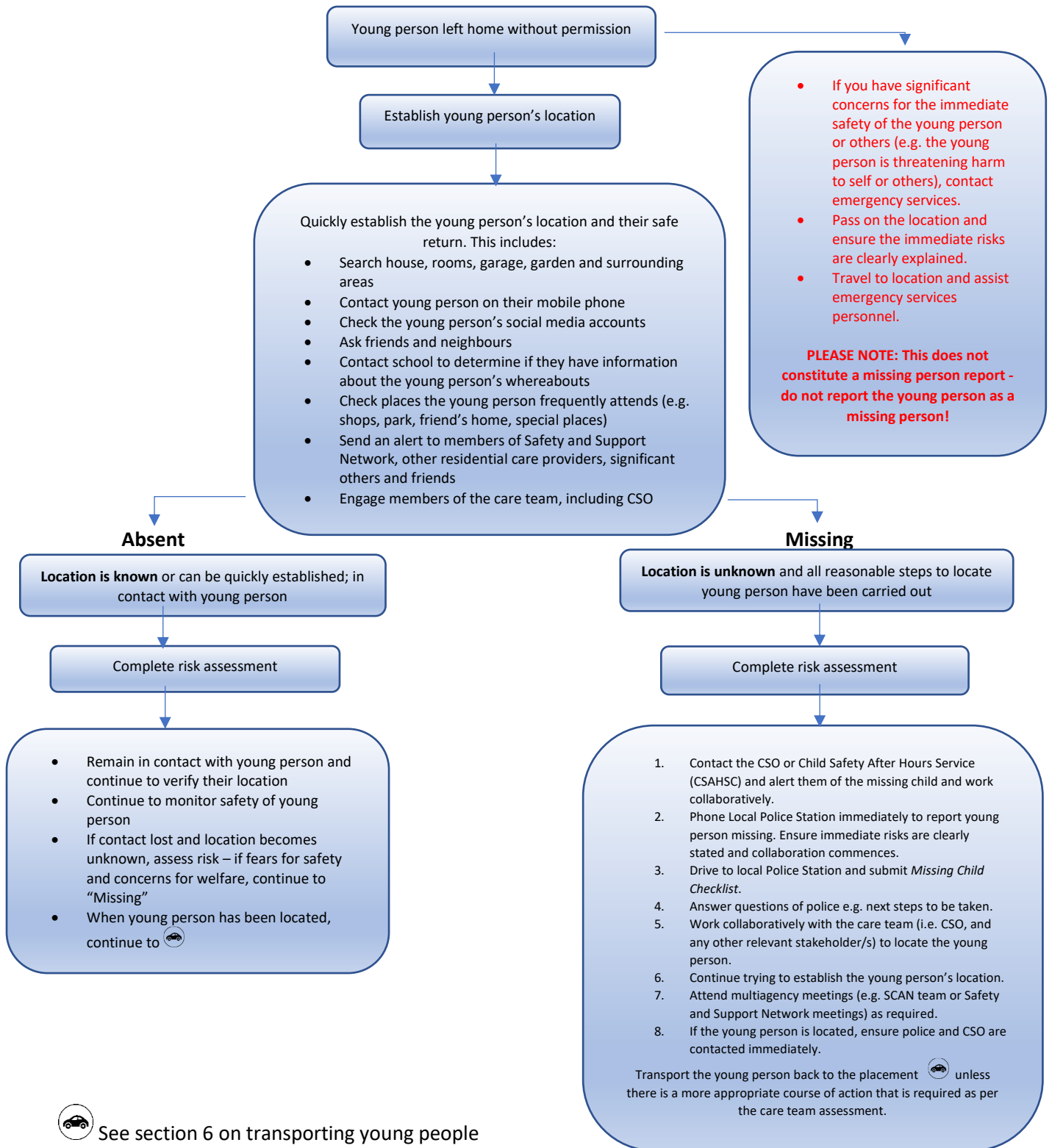
- the behaviour is out of character and there is no apparent explanation for their absence
- there are suspicious circumstances, i.e. the young person may have been the victim of a serious crime
- there is a significant risk the young person is dangerous and/or may harm another person
- risk-taking behaviours
- a consequence of responses to stress
- exposure to social and environmental risk factors including accidents and injuries, substance use and mental health problems
- the young person may have suffered harm
- the young person is thought to be at risk of significant harm during the absence, including self harm or risk of suicide.

¹³ [When a child in care is missing DCSYW QLD 2018](#)

5.3 Absent or Missing Flowchart

The following flowchart provides the steps to take in the case of absent or missing young people.

Absent or Missing flow chart



See section 6 on transporting young people

5.4 When to contact emergency services

In circumstances where you have significant concerns for the immediate safety of the young person or others (e.g. the young person is threatening harm to self or others), immediately contact emergency services and provide detailed information regarding your fears for their safety and welfare.

Some examples of circumstances where the appropriate course of action is to contact emergency services include:

- The circumstances that led the young person to leave the placement involved confrontation and/or violence and the young person left in a highly aroused state.
 - There are concerns about the young person's current mental state and their engagement with chroming and the risk of serious harm to the young person or the community is likely or highly likely.
- The young person left stating that he was going to throw himself off a local bridge.

5.5 Make all reasonable attempts to establish a young person's location

Residential care workers must take immediate action to **locate** a young person, as required by the *Reporting missing children: Guidelines for approved carers and care services*. It is vital that you respond quickly and appropriately and make all reasonable attempts to locate the young person.

This includes:

- calling and leaving messages on the young person's phone
- searching the house and premises, including the garage, grounds and surrounding area
- checking the young person's social media including facebook, Instagram, WhatsApp (time last seen)
- posting messages through social network sites used by the young person
- asking friends or neighbours if they have seen the young person
- alerting the young person's friends and networks that you are looking for him/her and asking for their help to find the young person (where this is appropriate)
- contacting the young person's school to find out if they have information about the young persons' whereabouts
- checking places where the young person frequently attends, such as shops, the park, friends' homes or other special places they may go
- engaging with other members of the young person's safety and support network
- contacting the young person's CSO.¹⁴

It may also be appropriate to contact the young person's parents or family members to ask if he or she is with them. Alternatively, it may be preferable for the CSO to talk with the young person's family.

5.6 Complete a risk assessment to determine the most appropriate actions

A risk assessment must be undertaken for every absent or missing episode, in order to decide the risks, actions and whether concerns indicate a formal missing child report to the police.

A risk assessment should be completed by the residential care workers for every young person who is absent or missing, after all reasonable attempts have been made to try to locate the young person.

¹⁴ [When a child in care is missing DCSYW QLD 2018](#)

The purpose of the risk assessment is to help determine the level of risk for the young person, and aid action, information sharing and recording to inform single and multi-agency decision-making and planning to locate an absent or missing child.

To assist with the risk assessment, it is recommended you complete the concerns/risk/vulnerability for the child section within the *Missing Child Checklist* (see appendix one - *Missing Child Checklist*) as a priority. This can be completed in conjunction with the CSO and/or other workers who know the young person well (e.g. a support worker, school teacher).

The risk assessment should take into consideration any factors which might have a bearing on the level of risk to the young person or to others, including:

- age
- trauma history and its known impact
- behaviours known to be commonly triggered that may compromise the young person's safety
- emotional needs e.g. whether there has been any variation in their mood or whether they have expressed any intention to harm themselves or others
- current mental state
- behaviour as influenced by peer groups or others
- whether they are perceived as running to/running from someone/something
- level of protective skills
- risk of offending; and
- risk that they are being targeted for exploitation.

Effective risk assessment should ensure that the response is proportionate and measured towards the individual. There is no 'one size fits all' when assessing risk. Nor should assessments only take place at the point where a young person is absent or missing. They should be a work in progress, involve risk planning for a young person who is likely to go missing and a review process when a young person returns. It is important to work closely with the young person's care team to share information, assess risk and explore options to prevent a young person from leaving the placement without permission and/or being absent or missing.

Although a young person may not tell residential care workers where they are, residential care workers can still make an assessment based on the conversation they have with the young person. Residential care workers can read the emotional tone of a young person's voice (e.g. positive versus negative, or excitement versus calm). Residential care workers may also be able to detect more fine nuances in the young person's voice, such as distinguish anger from fear and sadness. As well as the young person's voice, residential care workers can also listen to what is happening in the background (e.g. train announcements, other young people talking, shouting or heavy traffic).

A good understanding of the potential risks, vulnerabilities and resilience factors associated with the young person will shape investigative strategies for all stakeholders and enhance the chances of locating the young person safely. Effective assessment will also enable support services, police and other safeguarding agencies to proactively problem-solve repeat missing young people. The ultimate aim should be the prevention of further missing episodes by addressing the underlying causes for the behaviour¹⁵.

While most young people use their mobile phone for socialising, many young people feel that having a mobile phone with them provides a form of safety. They use phones to arrange help for a friend in trouble, get important information or ring residential care workers to be transported back to the residential house. Young people report having a greater sense of security when they are out because

¹⁵ [Missing Children – Risk Management – Safeguarding Hub UK 2018](#)

they know help is only the press of a button away. It can be a good idea to talk to a young person about setting up 'enable read receipts' in the message settings, which tells you whether a message has been read along with the time it was read.

The following steps are required:

1. Contact the CSO and inform them the young person is missing. This ensures they are able to inform the Suspected Child Abuse and Neglect (SCAN) team for an urgent meeting and support completion of the *Missing Child Checklist*.
2. Contact your local police station to report a young person missing and pass on relevant information, such as personal details, why the young person's safety and welfare is of concern and what attempts have been undertaken to contact and locate the young person.
3. Complete the *Missing Child Checklist* (this may be in conjunction with the CSO – discuss with them) and drive to the local police station to hand in the form in person and report the young person missing. This complete process is referred to as the *Missing Child Report*.
4. Provide a photo of the missing child to the police.
5. After making the missing child report to police, you are required to ask for and record the following details:
 - a. the date and time the missing person report was made
 - b. the name of the police officer who received the missing person report
 - c. the QPRIME number, obtained from the police officer taking the information.
6. As soon as practical provide the above details to the CSO and/or Child Safety Service Centre, and if after-hours, to the Child Safety After Hours Service Centre and your care service.
7. Child Safety will liaise with the police and contribute any other relevant information about the child that you may not have been aware of at the time of making the missing child report.

5.7 Establish if a young person is absent

Young people who are absent or missing can be thought of as being on a continuum, with little cause for concern at one end and significant cause for concern at the other. Young people who are a few minutes late home from school would not normally give rise to concerns; they have missed the bus, or they may be exhibiting normal adolescent testing-out of the boundaries or to show their disagreement with aspects of their living situation.

A risk assessment ensures that the level of risk and vulnerability is considered so that a clear plan of action is agreed and initiated between the residential care staff and other key stakeholders such as the CSO, school and support workers. Multiagency collaboration is critical when working with young people who are absent or missing.

An unauthorised absence does not mean the young person is missing. If the young person's whereabouts are known, or can be quickly established, it is in fact an absence that has not been authorised.

In some circumstances, a young person's absence will raise significant concerns for their safety and/or wellbeing including:

- there are concerns about the safety of the child
- there is no indication that the child is likely to return within a reasonable period of time; and
- there appears to be immediate risk to the child.

In these circumstances a young person is likely in need of urgent assistance from emergency services as a risk to themselves, others, or at risk from others. These young people will require an immediate and urgent response.

Children who are absent from placements, where their location is known or can be quickly established and there are no significant concerns for their safety or the safety of the community while they are absent, **should not be reported to the police.**

Scenario examples:

Each of the following case scenarios describe young people who are deemed absent from care. Each of these scenarios will require a different response due to the assessment of risk and vulnerability. The risk and vulnerability assessment is key to identifying the plan of action – what do I need to do, what do other agencies need to do to locate the young person and ensure their safety and welfare?

A young person’s location is known or can quickly be established and there appears to be no concerns for the young person’s safety or welfare, the residential care provider contacts Child Safety to agree on an appropriate plan of action. For example, a 14-year young person fails to return to the residential house where they live. The young person informs residential care workers that she is at her mother’s house and will return before nightfall. This is a known pattern of behaviour.

A young person’s location is known or can quickly be established. There are low level concerns for the young person’s safety or welfare, however these concerns are not sufficient to involve police or other emergency services. An example is when a 16 year old child is with his alcoholic father. The father speaks to residential care workers in a slurred voice. The residential care provider alerts Child Safety, the Safety and Support Network and other stakeholders on the current situation and agree on a plan if the situation is not safe. In this case scenario an aunt, a member of the Safety and Support Network, is asked to visit the house and check on the child as she is able to do so safely.

5.8 Establish if a young person is missing

A missing young person can be at risk of violence, victimisation, exploitation and involvement in crime, regardless of whether they are missing for the first time or do so frequently.

Some young people are described as frequently missing where they exhibit a pattern of regularly leaving their placement without permission or not providing details of where they are going and how they can be contacted. For some of these young people who are frequently missing, their location is regularly unknown and there are continuing fears for their safety and/or welfare.

If all reasonable efforts to locate the young person have failed and you have fears for the safety or concern for the welfare of the young person, you must follow the ‘child missing from care’ guidelines and contact the police straight away to report your concerns about the safety and wellbeing of the young person.

Each missing episode for any individual young person requires an assessment of risk and an appropriate response. See section 6.5 – risk assessment. All young people who are missing (not absent) should be reported to the police.

5.9 What are the police actions when a young person is missing?

When police are informed of a missing young person, the police have a duty to:

- record all relevant details of the missing young person
- complete a new *Missing Child Report* (even when the young person is known to police)
- conduct an initial investigation
- conduct a preliminary risk assessment that will determine the scope and reach of the police response.

Once you have made a report, what the police do will depend on the circumstances of the young person going missing and how much they consider the young person to be at risk, according to their own assessment of risk based on what you have provided and what they may know already. This is why it is important to provide all detailed and relevant information as per the *Missing Child Checklist* and risk assessment record.

From the onset of the investigation, police will conduct an ongoing review of the circumstances of the young person's disappearance and will consider the possibility that the missing young person has been the victim of crime.

It is important to give the police all the facts and circumstances related to the disappearance, including search efforts already made by you and others. Every piece of information matters, let the police decide what it means for the investigation.¹⁶ The information can be recorded on the *Missing Child Checklist*.

It is important to support the assigned police officer's efforts and to work together. Establish how often they will be in contact with you to provide updates and how you can contact them.

The first 24 hours following a young person's disappearance are the most crucial. This is because the sooner police are able to follow-up leads the more likely the young person can be found safe and well.

Police will use the information you have provided to consider all lines of enquiry, which are appropriate and necessary in the circumstances, to try to locate the missing young person.

The police will provide information, where possible, on what is being done. Typical lines of enquiry may include:

- checks with local hospitals
- checks with mobile phone providers, financial institutions, and social media accounts
- checks on mobile phone(s) and devices used by the missing child/young person, including internet search history
- checks with other State and Territory police, or the Missing Persons Unit, where applicable
- door knocks and house-to-house enquiries near where the missing young person was last seen, as well as their home address
- reviewing closed circuit television (CCTV) footage
- interviews with family and friends, acquaintances, colleagues
- coordinating media coverage to raise awareness or appeal for information.¹⁷

If the young person has been located, what happens next is dependent on the circumstances. For example, if the young person was planning to commit suicide, a mental health review would be organised in the hospital. If the young person was a victim of crime, police would commence an investigation.

However, it could also be that while police are investigating the young person contacts residential care workers to arrange a pickup. If this occurs, make sure that local police are notified immediately that the young person has been found and that transport to return to the residential care house is being provided by the residential care worker/s.

¹⁶ [The SOS Guide: Missing Persons AFP ACT 2020](#)

¹⁷ [Missing persons – The investigation process AFP ACT 2020](#)

Some organisations take a USB with a password protected *Missing Child Report* to the police station rather than hard copies. Check with your local station if this is acceptable.

Pre-filled missing child reports are not considered best practice as they contain sensitive information and circumstances may change but the forms are not updated. This could potentially lead to causing problems for police as they commence investigation based on these out of date forms.

Pre-filled missing from care risk assessment/child missing checklist forms are helpful. – not sure what is the difference between the missing child report and the missing child checklist?

5.10 Keep Records

It is important to keep a record of conversations, details about the missing young person and anything you can think of while it is fresh in your mind throughout the time the child is missing. This is likely to include contact with stakeholders, family, safety and support network members, neighbours; conversations with police; anything you find in the house that may assist finding the young person; things you remember.

Record all information in the same place so it is easily found and functions as a timeline or diary. It is generally best to keep them in the young person's existing records. Some records you should keep:

- the contact details of the officer who took your initial missing child's report including their name, rank, station, phone and email, and any subsequent officers you deal with during the investigation¹⁸
- the QPRIME number corresponding to the missing child's report and investigation
- information about everyone you speak to in relation to a missing young person, including dates and times, names and numbers, the information provided etc
- any action you need to take to preserve details for forensic collection, such as hairbrushes, toothbrushes for DNA collection.¹⁹

The best-case scenario is that residential care workers are alerted that the young person wants to be picked up or has been located by police or another member of the Safety and Support Network. Residential care workers, perhaps in consultation with their line manager and Child Safety must then arrange transportation to return the young person safely to the house.

If the residential care worker is picking up and transporting a young person, a few safety measures need to be considered to ensure the safety of the young person, residential care workers and the community.

5.11 When a young person continues to be missing

During the time a young person is missing it will be important the young person's care team/safety and support network continue to work together to regularly exchange information and provide new information to police regarding the actions being taken to locate the child.

¹⁸ [Missing persons – The investigation process AFP ACT 2020](#)

¹⁹ [The SOS Guide: Missing Persons AFP ACT 2020](#)

When a child is reported as missing then the relevant Department of Children, Youth Justice and Multicultural Affairs staff member, will immediately notify the SCAN team coordinator via telephone or email. If no SCAN team meeting is scheduled within two days of the child being reported missing to the Police, the coordinator will consult with all core member representatives to determine if an emergency SCAN team meeting is required.

An emergency SCAN team meeting will occur if at least one core member representative considers it necessary. It is likely the manager of a Residential Care facility will be invited to attend this SCAN meeting to share information and engage in a collaborative discussion to locate the young person and discuss recommended further actions to be taken.

Actions which Child Safety Services may be undertaking during this time include:

- Supporting the residential care facility and police to identify places where the child frequently attends.
- Contacting the child's family, friends and networks including previous carers to establish if the child has been located and/or identify other possible locations where the child may have gone.
- Taking other actions to locate the child, such as trying to make telephone contact, leaving messages on the child's phone and through other social networking sites used by the child.
- Cooperating with police regarding media coverage.
- Developing, as appropriate, a media strategy in consultation with police, the direct carer and where appropriate, the child's parents.

Actions which the Queensland Police Service may be undertaking during this time are contained in chapter 12 of the Queensland Police Operational Procedures Manual. A copy of this manual is publicly available at <https://www.police.qld.gov.au/corporatedocs/OperationalPolicies/opm.htm>

5.12 When the missing child is located

When a missing child is located or returns to where they live it is important the direct carer or child safety officer immediately advise the police and the CSO. This can be done by contacting Policelink on 131 444 and providing the Queensland Police reference number (QPRIME number) which was provided when the missing person report was initially made to police.

All members of the care team previously aware the child was missing must be contacted.

The CSO will meet with the child following their return to discuss the reasons why they went missing, explore whether the child experienced harm while missing, and to jointly identify any actions to support the child's ongoing safety and wellbeing and reduce the likelihood of the child going missing in the future. This meeting may be undertaken jointly with police. This will occur within 48 hours of the child being located.

The CSO will also arrange a meeting with the child's care team to discuss the reasons why the child went missing, and consider any actions to support the child's ongoing safety and wellbeing and reduce the likelihood of the child going missing in the future. You will be invited to participate and engage in this discussion, including contributing to reviewing the placement agreement, safety and support plan and/or the child's case plan.

If a child is frequently missing, the child's care team will identify strategies to reduce the likelihood of recurrence and the actions required when the child is missing. You should undertake a risk assessment record and partner with the CSO and other members of the child's care team to explore actions and make a plan to prevent future missing episodes.

Young people who regularly go missing from care may be at significant increased risk of:

- becoming involved in crime to survive, from stealing to criminal gang involvement
- sexual exploitation and abuse
- drug and alcohol misuse
- mental and sexual health issues
- exclusion from school and failure to meet educational milestones.

6 Transporting young people

The purpose of this section is to inform residential care workers about the precautions required to maintain safety when transporting young people in vehicles.

When the location is known, residential care workers must arrange transport to pick up the young person. This may be from where the young person was located, police station, hospital etc. However, picking up and transporting a young person from any location can involve risks and you will need to undertake a safety assessment.

A few safety measures need to be considered before the young person can be picked up to ensure the safety of the young person, residential care workers and the community.

6.1 General drive precautions

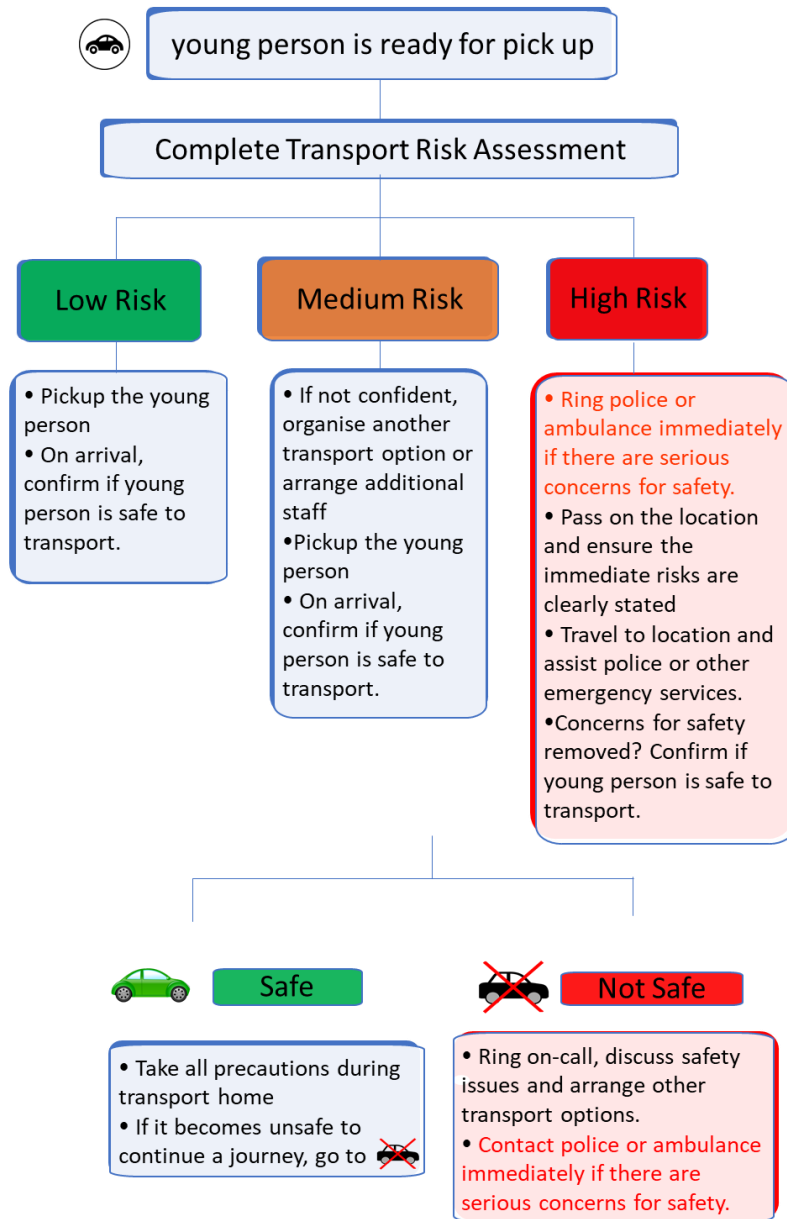
Examples are:

- residential care workers should familiarise themselves with the vehicle before embarking on a journey and ensure there is enough petrol in the car to complete the trip
- residential care workers are to drive within their capabilities and with due consideration of prevailing conditions, for example, heavy traffic, bad weather, unfamiliar surroundings
- residential care workers are to ensure that all passengers are wearing a correctly fitted restraint or seat belt²⁰
- residential care workers are not to use handheld mobile phones unless safely parked. It is both illegal and unsafe to do so
- residential care workers are not to drive with unsecured items in the car as these items can become projectiles if the vehicle is involved in an accident
- all personal belongings are to be stored in the boot. If the young person has a towel used during chroming, either discard it or seal it in a plastic bag as the smell is very strong and can trigger headaches or asthma
- discuss with the young person and residential care workers to determine the safest place for the young person to sit. Sometimes this could be in the front and sometimes behind the front passenger seat.

²⁰ [Transporting children and families – HHS VIC 2020](#)

6.2 Transport Flowchart

The following flow chart explains the process:



6.3 Transport Safety Assessment

The majority of young people who have been absent or missing want to be picked up immediately when they make contact. Being cold, tired, hungry or coming down from an illegal substance are all factors that will make the young person want to eat, sleep, have a shower and generally feel comfortable again.

There is always a need to assess risk for the young person, other young people in the car, residential care workers and community involved to pick up and transport a young person. The residential care worker therefore needs to quickly verify if it is safe to transport the young person and confirm the young person's location.

If a young person has been located by police or a member of the Safety and Support Network, ask for information on how the young person is behaving, responding to questions or requests or if there are safety concerns. This can assist with making an assessment to verify if it's safe to transport the young person or alternative transport needs to be arranged.

Low risk: The situation may be low risk if, for example, the young person sounds calm, seems able to manage their emotions, is not escalated or swearing and does not sound intoxicated.

If the risk is assessed as low and the young person is at a place residential care workers are familiar with, they can be picked up from their current location. Another option is for the residential care worker to arrange for the young person to walk to a nearby shop or fuel station and meet the residential care worker there. When the residential care worker meets the young person, conduct a second assessment to see if the young person is still low risk and can be safely transported.

Medium risk: The situation may be medium risk if, for example, the young person is escalated, swearing at residential care workers to be picked up quickly but calms down with reassurance. The young person may sound under the influence of alcohol or drugs (eg slurring speech), hesitant or confused. You may also hear adults or other young people in the background.

If the young person is assessed as medium risk, there are a few options to choose from:

- ask a more confident residential care worker to pick up the young person
- ask another residential care worker to accompany you
- contact on-call and see if an after-hours residential care worker can drive
- arrange a taxi or uber
- call on arrangements with other nearby residential houses to assist
- ask a member of the safety and support network to drive.

When picking up:

- schedule to meet at a nearby address or landmark (shop, fuel station, etc) and confirm time. Don't confirm an exact time unless you are sure you can be there on time
- park out of sight (e.g. around the corner) and walk to the street or landmark
- if young person is in a group, stop 20 metres away and wait until young person comes to you.

When the residential care worker meets the young person, conduct a second assessment to see if they are low or medium risk and can be safely transported.

Contact police or an ambulance immediately if there are serious concerns for safety of the young person, other young people, residential care workers or community.

High risk: The situation may be high risk if the young person is threatening residential care workers with violence, you can hear the young person escalating (eg punching objects) and does not calm down during the conversation. The young person may say they want to commit suicide and describes how and when, including reporting recent self harm or victimisation. You hear adults or other young people in the background verbally or physically abusing the young person or someone else.

If the situation is assessed as high risk, there are two options to choose from:

- contact police or the ambulance immediately if there are serious concerns for safety of the young person, other young people, residential care workers or community. Residential care workers will still need to travel to the pickup point to support emergency services
- if residential care workers are considering picking up the young person, pick them up with two or more residential care workers or other appropriate support people, eg house supervisor or other manager, safety and support network members, Child Safety personnel.

When picking up:

- travel to a nearby address or landmark (shop, fuel station, etc) with two or more residential care workers
- park out of sight (e.g. around the corner) and walk to the street or landmark
- if young person is in a group, stop 20-30 metres away and wait until the young person comes to you. If the group becomes hostile, walk away and stay at a safe distance, but retain line of sight
- when the residential care worker meets the young person, conduct a second assessment to see if he/she is Medium Risk and can be safely transported or still high risk.

6.4 Safe to be transported

To safely transport the young person the following should occur:

- ensure the young person is wearing his or her seatbelt and the seat is in the appropriate position
- ensure a young person is supervised while in the car
- during the drive be calm, speak slowly and clearly while keeping communications short, simple and to the point
- be patient, and repeat information where necessary
- carefully choose the way in which you communicate if a young person is intoxicated or under influence so that you are not confronting or lecturing
- if a young person does not want to talk, consider playing their favourite music
- take all precautions during transport home. These include staying in the left lane, keeping both hands on the steering wheel, placing your phone in the holder on right hand side of the driver or in a pocket
- in the event of a young person escalating, causing the driver to be distracted from safely driving, the vehicle must be pulled off the road as quickly as is safely possible - hand brake on - take keys – take mobile phone - exit the car. Follow your organisation's required framework for de-escalation and Individual Crisis Management Plan procedures
- continue the journey when it is safe to do so. If there are concerns that it is not safe to continue the journey, refer to 'Not safe to be transported'
- at any time, contact police or ambulance immediately if there are serious concerns for their safety, residential care workers' safety or community.

6.5 Not safe to be transported

When it's not safe to be transported:

- explain that it is unsafe for you to transport the young person due to the current circumstances e.g. current behaviour or level of intoxication/influence
- explain that you will be able to consider transport as soon as these concerning circumstances change and talk to the young person about how to achieve this
- the young person will most likely become escalated if you decline transport. Remain calm, speak slowly and clearly while keeping communications short, simple and to the point
- be patient and repeat information where necessary
- carefully choose the way in which you communicate if a young person is intoxicated or under influence so that you are not confronting or lecturing
- if the situation becomes unsafe, walk away and stay at a safe distance, but retain line of sight
- ring on-call, discuss safety issues and review other transport options
- follow the young person on foot from a safe distance if they walk away. If a second residential care worker is present, ask them to follow by car at a safe distance
- if the young person has calmed down, confirm if they are safe to transport. If so, go to 'Safe to be transported'
- at any time, contact police or ambulance immediately if there are serious concerns for their safety, residential care workers' safety or community.

6.6 Ambulance

In the case of serious injury or any other medical emergency where it may be unsuitable to transport a young person in a residential care service's vehicle, an ambulance may be called for them to assess medical needs and transport a young person to hospital.

Residential care workers should travel in the ambulance with or follow the young person and stay with them in hospital to provide support and help the young person understand information until his or her case manager can attend.

7. Reviewing leaving without permission episodes

When a young person is found or returns, they must be offered a return interview. Return interviews provide an opportunity to hear from young people about any reasons for leaving and what may have occurred while they were away. Concern for safety can be reinforced and the strengths that the young person used to remain safe and be able to return can be acknowledged and built upon. The interview may also uncover other information that can help protect young people from the risk of leaving again and from risks they may have been exposed to while away²¹.

Looking at the young person as an individual, having an insight into what type of personality they are, and knowing more about them, will be crucial steps in assessing risk. This is particularly important for young people who repeatedly leave without permission, who are often seen by some as a nuisance, rather than a vulnerable young person.

The interview should be carried out within 72 hours of the young person returning to their care setting and is best carried out by a person whom the young person trusts. The person needs to be trained to carry out these interviews and able to follow-up any actions that emerge.

The interview and actions that follow from it should:

- identify and address any harm the young person has suffered
- understand and try to address the reasons why the young person left
- help the young person feel safe and understand that they have options to prevent repeat instances of them leaving
- provide them with information on how to stay safe if they choose to leave again, including helpline numbers.

The assessment of whether a young person might leave without permission again should be based on information about:

- their individual circumstances, including family circumstances
- their motivation for leaving
- their potential destinations and associates
- their recent pattern of absences
- the circumstances in which the young person was found or returned, and
- their individual vulnerabilities and resilience.

Following the return interview, residential care providers, Child Safety, police and other stakeholders, including significant others, work together:

- to build up a comprehensive picture of why the young person left
- to understand what happened while they were away
- to understand who they were with and where they were found, and
- what support they require upon returning to the house.

The residential care provider management representatives will:

- determine required corrective action (e.g. residential care workers training)
- ensure short and long range plans are amended
- ensure the young person is involved and in agreement with changes going into plans
- ensure residential care workers are aware of and working to the changed plans, and
- recommend changes to organisational policy, procedure and/or practice arising from the matter.

²¹ [The value of return home interviews and follow up when young people go missing, Railway Children UK 2015](#)

8. Implementation

All people who have contact with and form part of a young person's safety and support network have a responsibility to work toward maintaining the safety of young people, uphold their rights and reduce their experience of contact with the criminal justice system.

This guide for residential care workers, to be effective, must be read as part of the suite of documents that support the residential care system in its goal of providing safe, supported and caring environments where young people who have experienced trauma are able to learn new skills and develop trusting relationships.

The *Joint Agency Protocol* notes 'What will be different' when the protocol is fully implemented through following the steps in this guide, this being:

'Children living in residential care will receive care that responds to trauma in ways that do not unnecessarily criminalise actions or behaviours resulting from past experiences of abuse or neglect.'