

Policy: Respite Care

Policy Purpose

To emphasise the importance and effectiveness of planned and emergency respite care in supporting the placement of a child in the care of the Chief Executive Officer (CEO).

The policy only applies to Authorised Foster Care and Authorised Kinship Care placements – Family Day Care and Individual Placement Arrangements are excluded.

Policy Statement

Respite care provides both short term and emergency placement arrangements for a child in the CEO's care while their usual Authorised Carer is relieved from day to day caring responsibilities. Respite care is provided by Authorised Carers who have agreed to be available for the provision of short term care.

Respite care plays an essential role in:

- Supporting the usual carer's ability to continue in their caring role;
- Sustaining the relationship between the child and their usual carer; and
- Supporting the child's wellbeing by maintaining a stable placement.

Regular planned respite care should be made available to a child's carer if it is needed to support the placement and reduce placement disruption. Regular respite care arrangements are to be planned and agreed at a Care Planning meeting and documented in the child's Care Plan. The respite care arrangement must be reviewed six monthly. The child's carer must be involved in making respite care arrangements and with any changes to these arrangements, through participation in the Care Planning meeting.

Respite care may also be provided in a genuine emergency, for example sudden illness of the carer, a crisis in the carer's family, or other unforeseen circumstances that require the child to be temporarily placed in a respite care arrangement.

Respite care placements and payments

Placements

All respite care placements must be approved by the regional delegates.

All respite care payments must be approved by an authorised financial delegate.

Refer to [Territory Families Financial Delegations](#).

Refer to the [Carer Community Website](#) for current payment rates. Direct link [here](#).

Respite care for a medically sensitive or a terminally ill child requires the Case Manager to consult with the child's treating medical practitioners to discuss the potential impacts and possible options available for the child before forwarding a request for respite care to the Placement Unit. (Refer to *Procedure: End of Life Planning for Children in care* for further information).

A request for respite care is actioned by the Placement Unit, and the placement matched to the child's identified behavioural issues, special needs (e.g. medical or developmental) and complexity level.

Meeting child's special needs

If the child's identified special needs (e.g. medical or developmental) requires intensive and complex care, it is essential that the matched respite Carer has the skills and capacity to meet the level of child's medical, physical and emotional needs.

When regular respite is planned every effort should be made to place the child with the same Respite Carer to maintain a sense of continuity and stability for the child. .

Refer to [Procedure: Sourcing a Placement](#).

Respite care placements for Aboriginal and Torres Strait Islander children must be consistent with the Aboriginal Child Placement Principle.

Refer to the [Aboriginal Child Placement Principle Practice Guide](#).

Respite Carer payments

The Authorised Carer, who is providing respite care for the child, receives payment at the respite daily payment rate calculated according to the age and complexity level of the child, for up to four consecutive nights for each placement event. No remote allowance applies.

If the child is in respite care for more than four consecutive nights the respite carer is paid at the standard age carer payment rate, calculated according to the age and complexity level of the child), for each additional night. The remote allowance applies to these payments.

Usual Carer payments

The Authorised Carer, who is the child's usual carer, continues to receive their carer payment when the child attends planned or emergency respite care for up to 4 consecutive nights. If the child is in continuous respite care for more than 4 consecutive nights the usual carer payment is suspended until the child returns to the usual placement.

In exceptional circumstances the usual carer's payment may be extended beyond 4 nights if it is determined that this is in the child's best interests. The extended period of respite care must be planned and agreed, with sound reasons provided for the extension. The extension must be shown to be necessary to preserve the placement, the placement must be considered stable, and the extended period an exception – not routinely required.

Respite Care is not intended as a long term solution to a placement that cannot be stabilised. In such situations consideration should be given to changing the child's placement arrangement to ensure stability.

Under these exceptional circumstances, the usual carer may continue to receive carer payments while the child is in respite care for a maximum of 10 consecutive nights in total (inclusive of the initial 4 nights). The Case Manager must provide a clear rationale as to why the extension of payment to the usual carer should be supported, including why it is necessary to preserve the child's placement continuity and stability.

The extension must be approved by the Manager (Child Protection/Long Term Care).

Refer to [Procedure: Foster and Kinship Carer Payments](#).

Informing Parents

Parents of the child are to be informed about the respite care arrangements in accordance with s81 of the [Care and Protection of Children Act 2007](#). The information provided must be appropriate to the circumstances, consider the child's wishes, and the safety of the child, the respite carer and their family.

Recording

All respite care must be recorded in the CCIS as a *Placement Interruption*. In the event that the child will not return to their usual carer following respite care, the usual placement must be terminated in CCIS and the child's new ongoing placement recorded.

Legislative Basis and Related Documents

[Care and Protection of Children Act 2007](#)

[Care and Protection of Children \(Placement Arrangement\) Regulations](#)

[Standards of Professional Practice](#) – 1, 5, 6

Authorised by:

Executive Leadership Group on:	29/11/2018	Active from:	3/12/2018
Version 1.0	To guide staff on the processes for making respite care arrangements and payments.		

Current Version V 1.1

Approver:	A/Deputy Chief Executive Officer	4/10/2019	Active from:	7/10/2019
Update:	Amended information – “All respite care placements must be approved by the Manager” to “All respite care placements must be approved by regional delegates”. Added information regarding consulting child’s treating medical practitioners before forwarding request for respite care to the Placement Unit. 61:F2019/13470			
Review due:	November 20	Maintenance:	Policy: tf.policy@nt.gov.au	