# Request for an Individualised ITCH or ITC-SD placement

## Purpose and Process

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| **Purpose** | There are occasions when DCJ or service providers may seek approval for an individualised placement (approving the second bed in the home to be an approved vacancy – a held bed). **ITCH and ITC-SD Home service provision is intended to provide support and placements for children in group settings**. Approval of individualised ITC placements is limited to **very specific circumstances** and will be for a limited period of time to enable the young person to be supported, stabilised and then grouped with another young person. |
| **Circumstances when an Individualised ITC placement may be required for a child or young person for a limited period of time** | * a professional/clinical assessment identifies risk of sexually harmful behaviour that cannot be mitigated by strategies such as line of sight supervision or matching/grouping with other children with less vulnerabilities;
* a recent incident identifies the need for a professional/clinical assessment of risk of sexually harmful behaviour and the young person may need to be in an individualised ITC placement until the professional/clinical assessment is undertaken to understand risk and mitigation strategies
* engages in behaviour/s that are severely distressing to others, for example severe self-harm, frequent faecal smearing;
* a history of indiscriminate and significant violence towards peers that put other residents at high risk;
* extreme drug use that has a significant impact on others in the home;
* is a victim of sexual exploitation and there is risk of harm/vulnerabilities to others in the home being linked/drawn into that exploitation;
* significantly high needs where the young person is pregnant, child protection is involved and there is a combination of risks to either the young person, the unborn child or others in the home;
* court ordered individualised placement.
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| **Conditions** | Requests for Individualised ITC placements can only be considered in 2-bed homes. The Executive Director, overseeing the Central Access Unit, is the only delegated DCJ representative able to approve requests for Individualised ITC placements and requests need to be made to the CAU. |
| **Timing or trigger** | The need to establish an individualised ITC placement may betriggered:* at the time of an initial placement commencing
* when required due to the child or young person’s circumstances meeting the limited circumstances outlined above
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| **Requests** | ITC Provider should list the matter for discuss at relevant District Panel, seeking an in principle agreement to request an Individualised Placement. Requests for Individualised ITC placements and holding the second bed vacant are made to the Central Access Unit, along with any supporting documentation.Service Provider to email the completed *ITC Individualised Placement Request Form* to:CAU-triageandemergencycarearrangements@dcj.nsw.gov.au Ensuring all required evidence is included. A response will be provided to the requesting service provider, Contract Manager, CFDU and the Child Story record will be updated by CAU.  |
| **Information required** | Documentation to evidence how the child or young person meets one or more of the specific circumstances for seeking an individualised ITC placement and how those risks cannot be mitigated will be required.Evidence to demonstrate that the child or young person is receiving appropriate support and interventions to address the behaviours of concern or the plan to provide the required support and interventions will also be requiredThe agency requesting the individualised ITC placement (DCJ or service provider) will need to provide the CAU with: * information about the child or young person’s circumstances
* current risk assessments
* diagnostic and developmental reports (current working diagnosis)
* case plan
* behaviour support plan (or equivalent)
* NDIS plan if applicable
* incident summary covering the last 4 weeks, which includes information about how the service provider has responded therapeutically to support the child and guide the care team
* any reports and letters from mental health services and details on current interventions
* if any complex needs approvals are in place or requested
* immediate action plan until step-down plan is developed (and the date by which the step down plan will be developed)
* an outline of how the care team have provided a therapeutic response in line with 10 essential elements of ITC. Include details of mitigation strategies in place or planned and timeframes, outline of risks remaining that cannot be mitigated in a shared setting, and why
* Court orders if applicable.

**Note**: *the action plan outlines what the ITC provider intends to do in the immediate period (up to 7 days) to support stabilisation and step down. This might include identifying what assessments and/or planning are required and what needs to occur to have a second child or young person reside in the home. The service provider may seek further information from the previous agency with case management responsibility for the child to develop this plan.*  |

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| **Review and monitoring**  | Approval for an Individualised ITC placement and holding a bed can be for up to 6 months at a time\*. CAU will notify the service provider and contract manager of the Executive Director’s decision.\* *Children and young people who are in approved individual placements should be reviewed regularly through district panels.* *If there is a change in the young persons’ circumstances or needs which enable them to be grouped with another young person before the end date of the approval period, approval for an Individualised ITC placement can be ceased at that time.*Service provider to notify CAU of the change in circumstances  |
| Extension of approved Individualised placement  | Service Providers seeking to have a further period of approved Individualised Placement are required to submit the request to the CAU via email, with updated supporting documentation. Requests should be submitted ***2 weeks*** prior to the end of the initial approval period.The review process will be strength focussed and consider:* whether the assessments, casework or step down actions set out in the previous approval have been implemented
* whether the above actions have stabilised or addressed the young person’s support needs
* additional assessments or measures required to be implemented/undertaken
* continued need for maintaining the young person in an individualised ITC placement
* recommendations for the agency with case responsibility to update the child’s case plan based on the outcomes of assessments and casework action.
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