**Greater Shepparton Best Start**

**ECEC Child and Family Vulnerability Guide Tool Kit**

**Vulnerability Guide Training Resources**

**Family Day Care Practice Scenarios**

**Practice Scenario 1: Family Day Care**

Joanne is a young mum with two children, Georgia (aged 6) and Ben (aged 2). Both children attend your Family Day Care service, with Georgia just using after school care. They moved to the town several months ago after she separated from her partner and she has concerns about Ben’s overall development. He displays difficult behaviours, a lack of speech, ongoing withdrawal and sometimes extreme distress, especially when left in care.

After referral, a diagnosis of global developmental delay is made and a case management plan developed. Joanne decides that she will move to part-time work and ask her former partner (the children’s dad) to help support her by trying to be there for appointments etc. He moves jobs to be nearby to help with the children.

Joanne’s sister cares for Georgia, when possible, to allow her to spend time with Ben and this seems to work quite well. With professional support, Ben is able to cope better with settling into care and begins to join in a limited number of activities but is still solitary with little social interaction. Then Ben and Georgia’s dad loses his job and has to move for employment…

* *What do you think could be some of the circumstances/issues that could be occurring for this child/family?*
* *Which Vulnerability category (or categories might be applicable to this child/family?*
* *What level of vulnerability do you think is most applicable in this situation?*
* *What protective factors can you identify for the child/family?*
* *How might an early childhood practitioner best support this family?*

**Practice Scenario 2: Family Day Care**

Patricia is a grandmother who is currently caring for her grandson, Harley, who is two years old. She is applying for longer term custody as Harley has been removed from the care of his mother due to an ongoing drug problem. His father has not been involved since shortly after Harley’s birth and lives in another state.

Harley has only been in your Family Day Care service for a few months and Patricia is balancing the care of Harley with her full-time job. She sometimes needs to extend hours of care to fit with work but that is fine with the educator as she can usually give reasonable notice. Harley has settled well and is engaging with the educator and other children in care.

However, his behavior suddenly starts to change and he displays aggression and withdrawal when in care. Patricia tells you that her daughter (Holly) has returned home but she is not sure how long she will stay. Holly is still on drugs regularly and alters Harley’s routines which both he and Patricia find difficult. Holly says that she also intends to contest the long term custody that Patricia is seeking…

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* *What level of vulnerability do you think is most applicable in this situation?*
* *What protective factors can you identify for the child/family?*
* *How might an early childhood practitioner best support this family?*

**Practice Scenario 3: Family Day Care**

Sharon is a mother of three closely spaced children, Stacey (2.9 years), Jackson (1.8 years) and Ashur (3 months).  Sharon’s current partner, Ammar, is a refugee from Syria who has been in Australia for three years and is the father of the baby, Ashur. He speaks some English and has no direct family in Australia.

Sharon used your Family Day Care service for respite with Stacey and Jackson and was a fairly good attender. She was referred by a local family support agency after Jackson was born and a Maternal & Child Health (MCH) home visit brought up concerns about the home environment. The house was very dirty and there were safety concerns. The children presented as extremely grubby, but reasonably well looked after, so there was no DHS involvement.

A support worker had been visiting and working with the family since the initial referral but the new partner did not want that to continue after Ashur’s birth. The two older children continue to attend your FDC service and Sharon wants to enrol the baby as well but her partner does not agree. The MCH Enhanced Home Visiting service has only been able to do one visit since Ashur’s birth and noted that the baby seemed settled and happy, and that the environment seemed to be reasonably clean and tidy. However, the nurse felt that the two older children might not being fed or cared for adequately.

Sharon has some family locally but does not work. Her partner has occasional, short periods of laboring work, but nothing ongoing.  To date, the family has failed to return calls from the support worker and MCH for 6 weeks…

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* *What level of vulnerability do you think is most applicable in this situation?*
* *What protective factors can you identify for the child/family?*
* *How might an early childhood practitioner best support this family?*