

---

# PROTECTING VICTORIA'S VULNERABLE CHILDREN INQUIRY

---

April 2011

VCOSS Submission



# ABOUT VCOSS

The Victorian Council of Social Service (VCOSS) is the peak body of the social and community sector in Victoria. VCOSS works to ensure that all Victorians have access to and a fair share of the community's resources and services, through advocating for the development of a sustainable, fair and equitable society. VCOSS members reflect a wide diversity, with members ranging from large charities, sector peak organisations, small community services, advocacy groups and individuals involved in social policy debates.

VCOSS is committed to living out the principles of equity and justice, and acknowledges we live in a society where people are interdependent of one another. VCOSS respects the land we live in and recognises the Aboriginal custodians of the country. VCOSS is committed to reconciling all injustices with Aboriginal Australians. The VCOSS vision is one where social well being is a national priority, and:

- ❑ ensures everyone has access to and a fair share of the community's resources and services;
- ❑ involves all people as equals, without discrimination; and
- ❑ values and encourages people's participation in decision making about their own lives and their community.

**Authorised by:**

Cath Smith, Chief Executive Officer

© Copyright 2011 Victorian Council of Social Service

**Victorian Council of Social Service**

Level 8, 128 Exhibition Street  
Melbourne, Victoria, 3000  
+61 3 9654 5050

**For inquiries:**

Carolyn Atkins  
Deputy Director  
E: carolyn.atkins@vcoss.org.au

Paula Grogan  
Policy Analyst  
E: paula.grogan@vcoss.org.au

# CONTENTS

About VCOSS .....	1
Priority areas for action .....	4
Introduction .....	6
Building on key strengths.....	6
VCOSS submission coverage and structure .....	7
VCOSS member submissions.....	7
Inquiry consultation process and timeframe .....	8
Key principles and directions .....	9
Best Interests as a guiding frame .....	9
Children and young people at the centre .....	9
Early intervention at every point .....	10
Therapeutic, trauma-informed responses across service systems .....	11
Whole of government response.....	11
Statewide Plan for Children and Young People .....	12
Outcomes Framework to drive improved wellbeing for children and young people .....	13
Systems change to support joined-up and localised responses .....	14
Aboriginal children and young people – specific responses and cultural competency and cultural safety of mainstream services.....	15
Children and young people.....	16
Commitment to resourcing the reforms .....	16
The voice of children and young people .....	17
The factors that increase the risk of abuse or neglect occurring & effective prevention strategies.....	18
Strengthening prevention and early intervention supports .....	18
Public Health Model of prevention .....	20
Promoting prevention .....	24
Social and physical planning .....	24
Victorian Aboriginal children, young people and communities .....	24
Regional Aboriginal Plans .....	26
Strengthened Capacity of ACCOs.....	26
Cultural competence and cultural safety of universal and mainstream community services .....	26
Partnership approach .....	27
Culturally and linguistically diverse communities .....	28
Rural, regional and outer urban communities.....	28
Outer urban communities .....	29
Strategies to enhance early identification of, and intervention targeted at, children and families at risk including the role of adult, universal and primary services.....	30

An integrated and multidisciplinary response .....	30
The role of adult services.....	31
Housing and Homelessness .....	31
Family Violence .....	32
The role of schools .....	33
Better integration of education and community supports .....	33
Partnerships between schools and local community sector organisations .....	34
Improving outcomes .....	35
Flexible learning environments .....	35
Therapeutic practice .....	38
Transition Plans.....	38
Generalist youth services .....	38
The quality, structure, role and functioning of family services, statutory child protection services and out-of-home care.....	40
Strengthening the capacity of the family services system .....	40
Workforce issues .....	41
Unit pricing.....	41
Out-of-home care .....	42
Aboriginal children and young people.....	44
Therapeutic responses .....	45
Leaving Care .....	46
The interaction of departments & agencies, the courts & service providers and how they can better work together to support at-risk families and children .....	48
The appropriate roles and responsibilities of government and non-government organisations in relation to Victoria's child protection policy and systems .....	51
Possible changes to the processes of the courts.....	53
The oversight and transparency of the child protection, care and support system.....	55
Outcomes framework to drive improved wellbeing of children and young people .....	55
Outcomes for children and young people leaving care .....	56
Children and Young Person's Commission.....	56
Community Visitor Scheme.....	58
References.....	59

# PRIORITY AREAS FOR ACTION

VCOSS has identified the following areas for action which we believe should be focused on as a matter of priority if Victoria is to reduce the incidence and negative impact of child neglect and abuse in Victoria and promote better outcomes for vulnerable children, young people and families. VCOSS recommends that the Victorian Government:

- ❑ Invest in the development of a public health model for child, youth and family services to enhance the availability of and accessibility to universal, preventative and early intervention services.
- ❑ Resource and support all services that work with families across the prevention – early intervention - tertiary intervention continuum to implement best interests of the child principles in their work to promote the wellbeing and safety of children and young people.
- ❑ Invest in therapeutic responses across the system, particularly tertiary services such as out of home care, to ensure services address the trauma associated with abuse and neglect and to promote healing and recovery.
- ❑ Develop more flexible funding models that respond to community need identified at the local level and Victoria's growing population.
- ❑ Develop a *Statewide Plan for Children and Young People* 0-21 years focused on improving outcomes for children and young people to drive reforms across the whole of government to promote integrated and multidisciplinary responses at the service level.
- ❑ Improve outcomes for Aboriginal children, young people and families by:
  - Strengthening the organisational capacity of Aboriginal Community Controlled Organisations to provide more prevention and early intervention services;
  - Enhancing the cultural competence and safety of Aboriginal and mainstream organisations across both the government and non government sectors;
  - Establishing a date and plan for the implementation of Section 18 of the *Children, Youth and Families Act 2005*.
- ❑ Support the learning of vulnerable children and young people through developing more flexible learning environments, linking schools with local community sector organisations, and strengthening linkages between DEECD and DHS.
- ❑ Invest in a locally-based, integrated and comprehensive youth service system that is structured along a prevention – early intervention – secondary – tertiary service continuum.
- ❑ Support a strong and sustainable service system and workforce by:
  - Developing and implementing a community sector workforce strategy;
  - Funding the outcomes of the Fair Work Australia equal remuneration case for community services;
  - Improving the unit price review process to ensure funding reflects current costs of service delivery.
- ❑ Invest in and support the development and sustainability of partnerships in the government and non government sectors, recognising that partnerships are not cost neutral.
- ❑ Develop additional models for providing out-of-home care and introduce an activity-based funding model to ensure services are individually tailored to the needs of children, young people and their families, particularly children and young people with complex needs such as Aboriginal children and young people, children and young

people that exhibit sexually abusive behaviours, young people who are parents and children and young people with a disability.

- ❑ Improve outcomes for young people leaving care by providing support after they leave care until at least the age of 25, including priority access to services such as housing, health and education services.
- ❑ Enhance inquisitorial decision making processes in courts that ensure that the best interests of the child is paramount in all decisions and that all parties, including the children, young people and families involved, are adequately supported to participate in court processes.
- ❑ Develop an outcomes framework as part of the *Statewide Plan for Children and Young People*, linked to the Victorian Child and Adolescent Monitoring System (VCAMS), to drive improved outcomes for vulnerable children and young people.
- ❑ Establish an independent Children and Young Person's Commission.

# INTRODUCTION

VCOSS welcomes the opportunity to respond to the *Protecting Victoria's Vulnerable Children Inquiry*. VCOSS congratulates the Government for initiating this Inquiry and the Panel for its efforts in undertaking consultations with a diverse range of community sector organisations and individuals.

Although a substantial amount of work was undertaken between 2003-05 during the development of the *Children, Youth and Families Act 2005* and the *Child Safety and Wellbeing Act 2005*, and significant progress made since the implementation of both Acts, VCOSS welcomes ongoing reforms which further promote the safety and wellbeing of children, young people and families. VCOSS believes it is important to continuously improve the way in which the Government and the community responds to the needs of vulnerable, children, young people and families and for the child protection system and broader service systems to evolve and adapt as community needs change.

While we support the intent of the Inquiry and the Panel's forward looking focus, we also note that the child protection system has been under significant scrutiny recently with a number of comprehensive reviews, investigations and evaluations undertaken in the last two years alone. It is important that critical issues arising from the reviews are acted upon as a priority. Key issues include greater investment in prevention and early intervention services, the state-wide and system-wide implementation of a more therapeutic response to children and young people in care, strategies to enhance workforce development and retention, and greater support for those exiting care.

VCOSS believes it is critical to maintain the momentum of this Inquiry process. Once the Panel concludes its work, VCOSS calls on the Victorian Government to outline an implementation plan which details the reforms it will implement in the short, medium and longer term to strengthen all parts of the system that support and promote the safety and wellbeing of children and young people, including child protection, family support services, youth services, early childhood services, schools, housing services, mental health services and drug and alcohol services.

VCOSS urges the panel to build on the knowledge developed over the past decade and the strengths of the Victorian system across legislation, policy, governance and service delivery. The Victorian system has strong foundations. As the Victorian Ombudsman noted in his investigation into the child protection system, 'it is apparent that Victoria is considered a leader in terms of its policy framework'. However, he went on to conclude that 'the system is struggling to meet its operational responsibilities'.<sup>1</sup> It is the implementation of policy which is now critical to ensure positive and sustainable outcomes for Victorian children, young people and their families.

## Building on key strengths

VCOSS believes the fundamental principles of the 2005 legislative reforms outlined in the policy White Paper, *Protecting Children: The Next Steps*, are sound and must be maintained and strengthened in any new reforms. These are:

- ❑ enshrining children and young people's best interests at the heart of all decision-making and service delivery across the service system;
- ❑ new arrangements to achieve stability for children and young people who cannot live safely at home, in a timely way, to assure their healthy development;

- ❑ boosting earlier intervention where families have problems;
- ❑ child, youth and family services forming an integrated service system so that families receive the mix of services they need in a coordinated way;
- ❑ targeting secondary services at the most vulnerable groups and communities in Victoria;
- ❑ strengthening the cultural responsiveness of services so that community services are inclusive of children and young people from Aboriginal and other cultural backgrounds; and
- ❑ keeping Aboriginal children and young people connected to their culture and community.<sup>2</sup>

## VCOSS submission coverage and structure

The VCOSS submission details the key principles and directions that need to underpin and drive the reforms. We also provide a response to each of the Terms of Reference of the Inquiry. The submission builds on previous work VCOSS has undertaken in this area and ongoing discussions with our members and other key stakeholders working in this area to identify good practice.

We acknowledge that there are a number of issues that require more thought and development. VCOSS will continue to consult with members as the Inquiry proceeds and will provide further responses to the Panel as appropriate.

This response does not consider every question posed in the Panel's paper, *Guide to making Submissions*, but rather focuses on overarching issues VCOSS believes should frame the reform process and identifies a number of key system levels reforms that are required to enhance outcomes for children and young people.

In addition, VCOSS has identified a series of areas for action which we believe the Panel needs to focus on as a matter of priority to promote the wellbeing of vulnerable children, young people and families in Victoria and to address the overriding aim of the Inquiry – to reduce the incidence and negative impact of child neglect and abuse in Victoria.

## VCOSS member submissions

VCOSS has encouraged its members to contribute to the *Protecting Victoria's Vulnerable Children Inquiry*. Many members have direct experience of the current family support and child protection system, and its strengths and weaknesses, as well as broader service systems.

VCOSS commends the responses of the following organisations to the Panel:

- ❑ Centre for Excellence in Child and Family Welfare;
- ❑ Youth Affairs Council of Victoria (YACVic);
- ❑ Joint submission of Anglicare Victoria, Berry Street, MacKillop Family Services and Victorian Aboriginal Child Care Agency (VACCA), Westcare, Centre for Excellence in Child and Family Welfare and the University of Melbourne; and the supplementary submissions of Berry Street, MacKillop Family Services and VACCA;
- ❑ Family Care – Shepparton;
- ❑ Mallee Family Care;
- ❑ Oz Child;



- ❑ St Luke's Anglicare; and
- ❑ Victorian Alcohol and Drug Association.

## Inquiry consultation process and timeframe

The Inquiry Terms of Reference and the detailed questions outlined in the *Guide to Making Submissions* are extensive and invite complex analysis and responses that have the potential to drive significant system reform to improve outcomes for vulnerable children and young people. VCOSS welcomed the Panel's decision to extend the closing date for written submissions to allow more time for considered responses.

VCOSS urges the Panel to continue to engage stakeholders as the Panel's thinking and recommendations evolve. Given the significant reform process that may flow from this work, it is vital that all key stakeholders continue to be actively engaged with the reform process to ensure reforms have the support and ownership of key stakeholders.

# KEY PRINCIPLES AND DIRECTIONS

VCOSS advocates that there are a number of key principles and directions that should underpin and drive recommendations for reform to better ensure that Victoria has an integrated system that best supports the wellbeing and safety of children, young people and their families in Victoria.

## Best Interests as a guiding frame

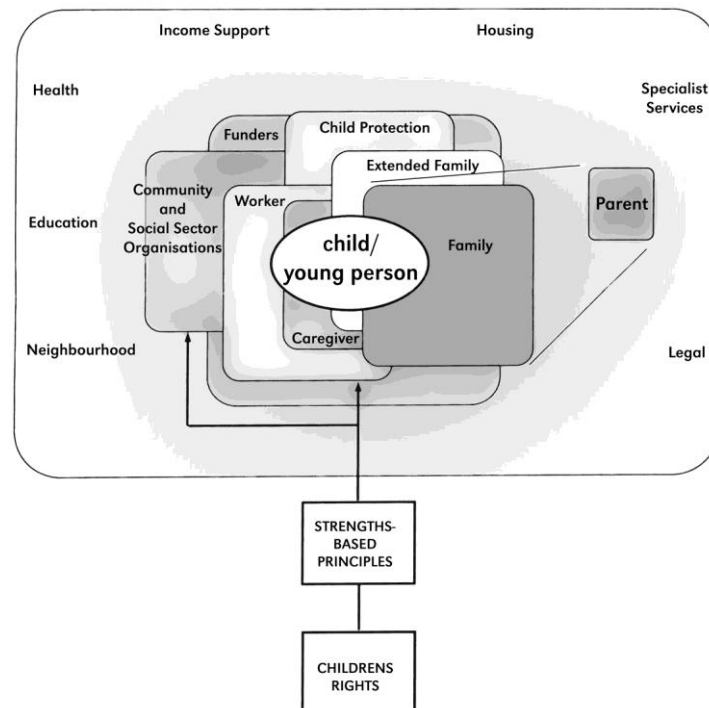
The *Children, Youth and Families Act 2005* provides that the best interests of the child must be the paramount consideration in all decisions relating to children and young people. This principle, which is enshrined in the United Nations *Convention on the Rights of the Child* (Article 3), must continue to be the touchstone for all actions undertaken by the Government, and the broader community, to protect and promote the rights, safety and wellbeing of all children and young people.

VCOSS directs the Panel to the significant work undertaken to define Best Interests in practice as part of the implementation of the *Children, Youth and Families Act 2005*. A series of guides was developed to explore the theoretical underpinnings and practice ramifications of the Best Interests principle.<sup>3</sup> This work should continue to be promoted as part of workforce development. Training was initially undertaken as part of the implementation of the *Children, Youth and Families Act 2005*. However, given the turnover of staff in child protection and broader community services, it is important to continue to promote this work to ensure all current and future staff understand how Best Interests relates to policy and practice. This work should also be expanded to include adult services which provide support to families. It is critical that these services also take into account the Best Interests of the child in planning and developing services for families. VCOSS highlights that a specific investment in workforce is required to achieve this in adult services.

VCOSS notes that this is also a recommendation arising from the KPMG evaluation of the child and family services reforms.<sup>4</sup>

## Children and young people at the centre

A child and young person centred model, based on children's rights, should provide the framework for policy and program development to strengthen the capacity of children, young people and their families.<sup>5</sup> In placing the child and young person at the centre, the focus must be on supporting the social and community infrastructure around the child, young person and their family, as outlined in the diagram below.<sup>6</sup>



Within the child and young person centred model, positive change is achieved when the people, structures and systems around the child or young person are strengthened and resourced. The emphasis is on universal and specialist services contributing to enhancing the capacity of children, young people and families through providing immediate and appropriate sustained therapeutic opportunities that build resilience and connection.

A child and young person centred model needs to occur across the service system – not only in family support and child protection, but also in universal services such as schools and specialist services such as mental health and homelessness. For example, in homelessness services, better outcomes can be achieved for vulnerable children, young people and their families if they are put at the centre of the response rather than the housing option being the centre of the response.

## Early intervention at every point

Intervening early at all levels of the service system is critical to supporting improved outcomes for vulnerable children, young people and their families.

There are two key aspects to intervening early:

1. Early intervention responses along the age continuum. The Munro review of child protection currently underway in the United Kingdom, notes that 'problems may arise at any time in children's lives and so services need to be responsive to emerging need at all ages'<sup>7</sup>; and
2. Early intervention responses along the service continuum, from universal and preventative services, such as early childhood education and care services and schools, to tertiary services, such as out of home care.

Early intervention does not just involve supporting children, young people and families to keep them out of the system but critically needs to also involve supporting those in the system to mitigate against longer term harm and further trauma. For example, improved

exit planning will better support children and young people to leave state care and be better prepared for the transition back to their families and/or communities so as to enable more positive and sustainable outcomes.

Interestingly, the UK Munro review prefers to term 'help' to 'intervention':

The review uses the term 'help' rather than the more commonly used term 'intervention' in describing professional services because 'help' carries a stronger connotation of working with families and supporting their aims and efforts to change...It is important, however, to stress that using the term 'help', does not take away from the fact that child protection work requires authoritative and, at times, coercive action to protect children and young people.<sup>8</sup>

It is useful to maintain a focus on helping and working with families to build on their strengths and to support them to achieve positive and sustainable outcomes. The timely availability, accessibility and quality of universal and specialist support services, along with improved linkages across these services, is critical to this equation.

## Therapeutic, trauma-informed responses across service systems

All children and young people removed from their family and placed in care will have experienced profound trauma and will require a therapeutic, trauma-informed care response. Therapeutic care aims to address the trauma associated with abuse and neglect and to promote healing and recovery. The underpinning principle of therapeutic care is that the relationships children and young people develop with carers, schools, professionals and the interrelationships between these stakeholders is key to promoting stability and positive and sustainable outcomes.

It is essential to extend the capacity of all services to provide therapeutic, trauma-informed responses to better support vulnerable children, young people and their families. Unless this occurs, Victoria will continue to re-traumatise children and young people due to a lack of responsiveness to their needs.

## Whole of government response

To achieve real and sustainable change that better supports the wellbeing of Victorian children, young people and families – particularly those who are vulnerable, it is essential for all government agencies to have the wellbeing of children and young people as a core responsibility. It is not sufficient that only those services within the Department of Human Services are concerned about the wellbeing of vulnerable children and young people. VCOSS recognises and commends the range of steps that have been taken by other departments, particularly the Department of Education and Early Childhood Development, to better meet the needs of vulnerable young people. Further work is required to ensure any initiatives are linked across government.

Improved whole of government action is urgently required – greater inter-divisional and inter-departmental integration and strengthened linkages across all government policy and service areas that support the wellbeing of children and young people must occur. The development and strengthening of collaborative approaches need to extend from early childhood education and care services, schools, family support, health, mental health, housing and homelessness, drug and alcohol, and domestic violence, to police and transport services, through to broader community strengthening infrastructure such as neighbourhood houses.

One of the aims of the original *every child, every chance* framework was for 'major system change in the Government's policy framework (to) better integrate these services so that they form a cohesive service system'.<sup>9</sup> VCOSS believes that there needs to be greater commitment to this system reform as this integration has not advanced far enough to date and has thereby undermined the achievement of improved outcomes. A whole of government framework could provide the driver to achieve improved collaborative approaches across government. Any whole of government framework requires commitment from the Premier and all Ministers to 'joined-up' legislation, policy, funding, governance and service provision. VCOSS believes that a *Statewide Plan for Children and Young People* would be a valuable step to achieve this.

## Statewide Plan for Children and Young People

A *Statewide Plan for Children and Young People* (the *Plan*) would provide a valuable cross-government framework that would help drive strengthened collaborative approaches across policy and programs, through articulating a clear vision of how children's and young people's wellbeing can be better enhanced through such approaches. The focus of the *Plan* would be on strategies to support improved outcomes for children and young people, particularly those who are vulnerable across key domains of health, learning, wellbeing and safety.

The *Plan* needs to be framed around achieving better outcomes for children and young people, particularly those who are vulnerable, and be linked to the highly valuable *Victorian Child and Adolescent Monitoring System* (VCAMS). VCAMS monitors how children are faring from birth to adulthood across 35 domains such as social and emotional development, physical healthy, language and cognitive development, behaviour and mental health.<sup>10</sup> VCAMS was established to support governments and communities to plan priorities and efficient allocation of resources and to evaluate whether programs and policies are making a difference. The VCAMS is valuable in that it provides strong evidence based data to drive planning and policy. It will be possible to build on the significant reports – *State of Victoria's Children*, *State of Victoria's Young People* and the recent *The State of Victoria's Children 2009: Aboriginal children and young people in Victoria*<sup>11</sup> – to inform improved approaches to supporting the wellbeing of vulnerable children and young people.

Critically, the *Plan* would incorporate a strong focus on Victorian Aboriginal children, young people and their families. This would help ensure that specific additional responses are provided for Aboriginal children, young people and their families; and would also further the need to achieve greater cultural competency and cultural safety in mainstream services.

A *Statewide Plan* should cover the ages 0 to 21 years, and incorporate explicit policy objectives and performance measures. The age needs to be extended to 21 years to capture the legislative responsibility in relation to young people leaving care.

The *Plan* needs to incorporate a strong evaluation component that is funded as part of ongoing policy and program development and resource the development of an evidence base regarding what is most effective drawing on Victoria's own academic and practice-learning.

A range of initiatives could flow from the *Plan* to contribute to improved outcomes across key domains of health, learning, wellbeing and safety. Within these, it is important to ensure that the factors underlying intergenerational disadvantage, including socioeconomic

disadvantage, be recognised and addressed. VCOSS supports the suggestions of initiatives to include in the *Plan* proposed by Berry Street in their response to the Inquiry:

- ❑ funding early learning and care services to provide outreach, family support and other child development programs that connect with vulnerable and isolated families;
- ❑ resourcing Aboriginal agencies to assist families raise children well, including two major trials to provide intensive long-term parenting support and assistance commencing pre-natal for Aboriginal mothers;
- ❑ establishment of a quality subsidy for excellence in social inclusion offered directly to children's services which demonstrate they are providing services to children in priority target groups;
- ❑ innovative in-home family support and family day care programs that provide quality in-home care for vulnerable children whilst modeling positive parent-child interactions. Such a model would focus on enhancing the in-home environment and parent-child relationships; and
- ❑ new investment in the Child FIRST platform of services for vulnerable families to connect with and access in-home and other forms of family support.

VCOSS believes it would be critical that key initiatives were also developed to improve the responsiveness of schools to vulnerable children and young people – such initiatives could build on the significant thinking undertaken by the Department of Education and Early Childhood Development as part of their *Flexible Learning Options* work over 2009 and 2010.<sup>12</sup>

A commitment to developing a *Statewide Plan for Children* was outlined in *Protecting Children: The next steps*,<sup>13</sup> and in the discussion paper, *Putting children first... planning for the future: Challenges in early childhood*.<sup>14</sup> A significant amount of work was undertaken in 2006 by the Statewide Outcomes for Children Branch, in the then Office for Children, in the Department of Human Services. Unfortunately, the Plan that was ultimately developed, *Victoria's Plan to Improve Outcomes in Early Childhood*,<sup>15</sup> had a much narrower focus than initially envisaged. VCOSS believes it is important to revisit and build on the early work undertaken to develop a broad statewide plan based on an outcomes framework.

This Plan should be developed in partnership with the community sector and communities, and be based on the promotion-prevention- protection continuum model.

There are a number of existing Government policy frameworks and programs which are relevant to the wellbeing and safety of children, young people and families. It is important that clear and deep linkages are made between these frameworks with the Statewide Plan to ensure improved outcomes for children and young people.<sup>16</sup>

## Outcomes Framework to drive improved wellbeing for children and young people

A focus on outcomes for children and young people is a central way to promote and protect the wellbeing and safety of children and young people. A more outcomes driven focus, where service effectiveness is judged on the outcomes achieved, that is evaluated and systematically monitored and used to highlight strengths and deficits in order to drive practice improvements, needs to be a key part of any reforms.

The need for a stronger focus on outcomes within Victoria has long been acknowledged – for example in the *Pathways to Partnership* report – 2003, the *Family and Placement Services Sector Development Plan* – 2006, the *Putting children first... planning for the future: Challenges in early childhood* paper – 2005, and more recently the *Blueprint for Education and Early Childhood Reform* – 2008.<sup>17</sup>

The *Child Wellbeing and Safety Act 2005* provides a legislative framework for an outcomes based approach to children and young people. The Act states that the goal of government is that “all children should be given the opportunity to reach their full potential and participate in society irrespective of family circumstances and background.”

As highlighted above in the *Statewide Plan for Children and Young People* section, an outcomes approach, linked to the Victorian Child and Adolescent Monitoring System (VCAMS) would prove invaluable in driving improved outcomes for vulnerable children and young people.

Linked to the need for a whole of government approach, the development of a Statewide Plan for Children and a focus on outcomes, is the need for systems change.

## Systems change to support joined-up and localised responses

There are no quick fixes, no magic bullet, just a long-term programme of hard work.<sup>18</sup>

Significant reform is required in the way Government and the community sector work together to respond to disadvantage and promote wellbeing. This is particularly true of policy responses to complex issues such as child abuse and neglect. As identified by Jake Chapman in his *System failure* publications:

The current model of public policy making, based on the reduction of complex problems into separate, rationally manageable components, is no longer appropriate to the challenges faced by governments and changes to the wider environment in which they operate.<sup>19</sup>

Systems theory resonates when considering the complexity of the service systems involved in promoting the wellbeing and safety of children and young people and the need to bring together diverse partners who may approach the issues from different perspectives. The number of different government and non-government organisations, communities and stakeholders involved in promoting the wellbeing of and protecting children and the complexity of the issues experienced by families has resulted in a system which has tended to compartmentalise issues. For example, services that respond to a parent's mental health issues may not consider the impact on the children in the family. The reforms instigated in 2005, alongside other reforms such as the *Because Mental Health Matters* and the *Blueprint for Early Education and Childhood*, have begun to break down some of these barriers and to promote greater linkages and more holistic responses but further work is required.

Systems thinking deals with complexity by looking at issues holistically, rather than seeking to divide the problem into manageable, but separate elements. This involves significant change from the traditional approach and processes employed by government in that:

- ❑ interventions should be based upon learning what works, on an ongoing basis, rather than specifying targets to be met;
- ❑ the priority should be to improve overall system performance, as judged by the end-users of the system not just by Ministers or public servants;



- ❑ the policy making process should focus on the processes of improvement, rather than the control of the agencies involved;
- ❑ engagement with agents and stakeholders should be based more upon listening and co-researching rather than on telling and instructing; and
- ❑ implementation would deliberately foster innovation and include evaluation and reflection as part of the overall design.<sup>20</sup>

Systems thinking can be applied further in this context through the development of a central government policy framework that clearly articulates a broad direction and which enables local flexibility and adaptability. A central policy framework should provide a broad direction with minimum specifications, and should:

- ❑ clearly establish the direction of change with defined broad outcome goals;
- ❑ establish targets and specify core evaluation requirements based around these broad outcome goals;
- ❑ explicitly allow for innovation and experimentation with cause and effect;
- ❑ set boundaries that cannot be crossed by any implementation strategy;
- ❑ allocate resources, but without specifying how they should be used – resource use to be determined at the local level;
- ❑ incorporate mechanisms to assist in the translation or up-scaling of the learnings from innovative practice - both in terms of what worked well and what did not – more broadly across the system.<sup>21</sup>

Funding models are a key example of how systems theory can be applied to support improved outcomes. Funding models need to be more flexible to better meet the individual needs of children and young people. VCOSS supports a centralised policy framework which allows for localised strategies. That is, government provides funding but that funding is distributed within a catchment area based on population, identified needs and emerging issues. An outcomes framework based on Best Interests would provide an accountability mechanism to ensure the funding is allocated appropriately.

Governments also need to acknowledge that effective service models take time to develop and require long-term and sustainable investment. Outcomes may not be evident for several years. A report commissioned by the Australian Research Alliance for Children and Youth (ARACY) and prepared by the Allen Consulting Group, notes:

‘behavioural change in parenting behaviour can be generational. Moreover, the broader societal issues associated with child abuse and neglect such as poverty and substance abuse are deeply entrenched and tertiary services will need resourcing for an undefined amount of time’.<sup>22</sup>

## Aboriginal children and young people – specific responses and cultural competency and cultural safety of mainstream services

The poorer outcomes of Victorian Aboriginal children and young people across a range of key measures remains of significant concern to VCOSS. For example Victorian Aboriginal children and young people continue to be over-represented within the Victorian child protection system. The recent and highly valuable report, *The State of Victoria's Children 2009: Aboriginal children and young people in Victoria*, provides a valuable overview of the key strengths and areas of concern for Victorian Aboriginal children, young people and their families.<sup>23</sup>



Strategies that support improved outcomes for Aboriginal children, young people and their families needs to be a key focus of inquiry for the Panel. It is critical that any recommended reforms are inclusive of Aboriginal cultural identity, values and perspectives.

Currently, many support services do not meet the specific needs of Aboriginal children, young people and their families. There is a lack of sufficient Aboriginal-specific family services, and too many universal and mainstream community services are not culturally responsive. Developing more culturally safe service responses will require significant investment in the capacity of Aboriginal and mainstream organisations. A key part of this, is strengthening the cultural competence and safety of the entire service system that responds to children, young people and families. The development of the Aboriginal Cultural Competence Framework and cultural competence training for community-based child and family services has been valuable. This training needs to be extended to all funded organisations that support Aboriginal children, young people and their families and to universal services, including early childhood education and care services and schools.

## Children and young people

It is important that reforms consider the needs of young people, as well as children due to their differing developmental needs. There is ongoing concern in the community sector that a lack of focus on the specific needs of young people results in young people being further marginalised with the system. VCOSS urges the Panel to consider the specific developmental needs of children and young people when developing recommendations for reform.

## Commitment to resourcing the reforms

Systemic reform must be backed by increased resourcing if reforms are to meaningfully address the challenges and issues that exist across the service system. VCOSS acknowledges that resource allocation is not within the Panel's ambit but wishes to emphasise the critical need to adequately resource any reform process. Without a sustained increased investment across the universal, secondary and tertiary levels of the service system, the final reforms will not achieve a reduction in the incidence and negative impact of child neglect and abuse in Victoria.

In the medium to long term, VCOSS anticipates a natural re-allocation of resources from the tertiary end of the system to primary and secondary services, as fewer families require tertiary intervention. However, in the short term, tertiary services require full funding to deal with current demand and to implement a more therapeutic approach to care.

New funding to resource any reforms is critical. The Panel's *Guide to Making Submissions* refers to 'cost effective strategies' to reduce there incidence of child abuse and neglect. While not all reforms will necessitate significant funding allocation, it is anticipated that the necessary systems and workforce reforms will require significant Government investment to ensure meaningful and sustained change.

It is essential that activity-based funding is introduced as part of any reforms to out of home care services. The current crisis at the tertiary end of the system will continue unless the funding model is refined. This issue is explored in further detail in the Berry Street submission and the joint submission of Anglicare Victoria, Berry Street, MacKillop Family Services etc.

One key way to reduce the incidence and impact of children abuse and neglect is to significantly improve the participation of children and young people in universal services

including early child hood and education. This involves both resources and improved ways of working but is highly cost effective.

VCOSS supports a greater focus on early intervention with a long-term aim to reduce the demand on child protection services. However such a decrease will take considerable time. The primary and secondary support end of the service system will require increased resources if a decrease in demand on child protection services is to be achieved. Chronic underfunding of these services provides significant challenges which must be addressed. For example, the Victorian Ombudsman has noted that while substance abuse is the most predominant parental characteristic of children in care, funding for drug treatment services has not been significantly increased for many years and services cannot meet current demand.<sup>24</sup>

## The voice of children and young people

Children and young people have a right to have their voices heard at all stages where the State and services intervene in their lives. Article 12 of the United Nations *Convention on the Rights of the Child* states that:

1. States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.
2. For this purpose, the child shall in particular be provided the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body, in a manner consistent with the procedural rules of national law.

This right is reflected in the *Children Youth and Families Act 2005* in Section 10 3(d) which states that:

In addition to subsections (1) and (2), in determining what decision to make or action to take in the best interests of the child, consideration must be given to the following, where they are relevant to the decision or action –  
(d) the child's view and wishes, if they can be reasonably ascertained, and they should be given such weight as is appropriate in the circumstances.

It is critical that children and young people, particularly those in care, have a voice and can participate in decisions about their lives and their futures. This will help to ensure the system meets their needs which will improve the outcomes for individuals and will enhance the system as a whole. VCOSS commends the Youth Affairs Council of Victoria submission which provides more detail about this key principle.

# THE FACTORS THAT INCREASE THE RISK OF ABUSE OR NEGLECT OCCURRING & EFFECTIVE PREVENTION STRATEGIES

To promote the wellbeing of children ... and families, it is critical that the supports they require are available. The wellbeing of young children – their safety, good care, a sense of security, confidence in relationships, opportunities for play and exploration, engagement with people culture and environment – is underpinned by the resources available to parents.<sup>25</sup>

## Strengthening prevention and early intervention supports

Stopping the abuse of children and young people before it happens is one of the most important challenges for the Victorian community. Providing all parents with the supports they need to do the best job they can, even in difficult circumstances, is the most effective way of protecting children. But it requires strong investment and an integrated response that places greater emphasis on strengthening the capacity of families and addressing the broader structural issues underlying family's experiences. The challenge for Government is finding a balance between adequately supporting the tertiary child protection system and the need for investment in integrated and early intervention family services that support families before they reach crisis point that may warrant statutory intervention, alongside ensuring universal services – early childhood education and care services and schools – are more inclusive of vulnerable children and young people.

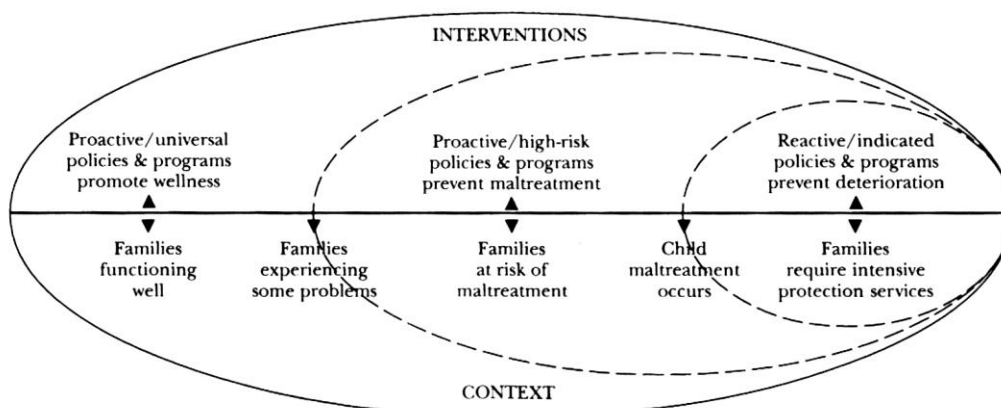
Families struggle for all sorts of reasons including poverty, mental and physical health issues, drug and alcohol problems, unemployment, disability, financial stress, family violence and homelessness. Many families experience a combination of these issues. Others may simply feel overwhelmed by the pressures of parenting or may lack the community supports that are needed to strengthen family life. Currently too many families only receive vital supports once they reach crisis, with many falling through the cracks because services are over-stretched and under-resourced and due to the increasing complexity of issues they face. For example, families needing counselling or parenting support are put on waiting lists, often for months, allowing problems to escalate to crisis point, often leading to child protection interventions.

Investing in prevention and early intervention support services for children, young people and their families is crucial in preventing, or reducing, the conditions that may lead to abuse and neglect. This will also help to achieve positive and sustainable outcomes for these families such as improved community connections, increased confidence and skills around parenting, and improved conflict resolution skills.

VCOSS advocates that a strong focus of reform must be at the prevention and early intervention end of the care continuum to truly strengthen the capacity of children, young people and their families. This includes improved responses in universal services, particularly maternal and child health, kindergarten and schools. The Enhanced Maternal and Child Health program is a good initiative of working with at risk families. It provides a more

intensive level of support, including short term case management for some families. Further reforms are required to ensure increased participation of vulnerable families and children in these key universal services. Improved responses at the secondary level in specialist services are also required with parents, children and young people receiving support when and where they need it. In addition, tertiary services must be supported to provide support to those families requiring greater intervention. This means investment in comprehensive, integrated, timely and sustained support for all Victorian families, particularly those who are vulnerable. The care continuum is represented in the diagram below.

**The Promotion-Prevention-Protection Continuum<sup>26</sup>**



A key aim of the *every child, every chance* framework, under the 2005 legislative reforms, was 'boosting earlier intervention where families have problems'. The KPMG evaluation of the reforms indicates that there is increased capacity for early intervention and a trend towards a greater focus on early intervention by family services since the 2005 reforms. However, there are still significant barriers to early intervention including workload and demand issues, a lack of access to services particularly in outer-urban and rural areas, and difficulty in engaging primary and secondary services which have their own capacity issues.<sup>27</sup> There is also an issue that secondary family services are managing more complex and long term cases and cannot devote as much time to preventative work.

VCOSS contends that to date, too few resources have been invested at the primary end of the service continuum. In a review of national and international child protection systems, the Allen Consulting Group concluded that in Victoria:

*The Integrated Family Services (IFS) framework is primarily focused on strengthening secondary services. While whole-of-government collaborative working processes support the IFS, the system is inherently flawed as it does not yet adequately engage with primary-level service providers — such as, but not limited to, schools, childcare services, GPs and maternal and child health services, although this remains on the future agenda. Engaging with these service providers may further enhance identification and early intervention with at-risk children and families, thus enabling children access to the best possible start in life.<sup>28</sup>*

VCOSS commends this report by the Allen Consulting Group to the Panel.

The critical importance of prevention and early intervention means new models of service delivery must be developed. For this reason, VCOSS supports the introduction of a Public

Health Model to provide a framework for the delivery of services to provide better outcomes for families.

## Public Health Model of prevention

Just as a health system is more than hospitals so a system for the protection of children is more than a statutory child protection service.<sup>29</sup>

The Public Health Model has been supported by practitioners and researchers both in Australia and internationally and was adopted by COAG in 2009.<sup>30</sup> A public health model emphasises the accessibility of universal supports for all families while tertiary interventions are a last resort. The overarching aim of this model is to support families early to prevent abuse and neglect occurring. The key elements of the model are:

- ❑ universal / Primary Interventions that are offered to all Victorians. They provide support and education before problems arise. They involve strategies that target whole communities in order to build public resources and attend to the social factors that contribute to child maltreatment. Examples of universal services that are critical to this discussion include early childhood education and care services such as maternal and child health, childcare, kindergarten, playgroups and schools;
- ❑ secondary interventions that are targeted at families in need. They provide additional support or help to alleviate identified problems or 'at risk' children and prevent escalation. Prevention programs may target the parent, the child or young person or the family unit. Examples of secondary services that are critical to this discussion include family support services, drug and alcohol, health, mental health, disability and housing; and
- ❑ tertiary interventions that are comprised of statutory care and protection services. They provide services where abuse and neglect has already occurred to help keep children safe and well.<sup>31</sup>

The model is often presented as a pyramid to illustrate how the interventions should be 'weighted' with the largest part of the pyramid (primary intervention) provided to all children and families while the tip (tertiary intervention) is only provided to those in need of intensive intervention.<sup>32</sup>

VCOSS notes that while the literature typically explores the three levels of intervention (i.e. primary, secondary and tertiary), the Munro Review of Child Protection in the UK, considers two additional levels, italicised below, and believes the Panel should consider these additional levels in developing recommendations:

- ❑ universal primary prevention – addressing the entire population and aiming to reduce the later incidence of problems e.g. the universal services of health and schools and early childhood services;
- ❑ *selective primary prevention* – focusing on groups which research has indicated are at higher than average risk of developing problems. e.g. offering additional support services to single, teenage mothers;
- ❑ secondary prevention – aiming to respond quickly when low level problems arise in order to prevent them getting worse;
- ❑ tertiary help/prevention – involving a response when the problem has become serious, e.g. child protection, hospital care, criminal justice; and
- ❑ *quarternary help/prevention* – providing therapy to victims so that they do not suffer long term harm, e.g. therapy for victims of sexual abuse or therapeutic help for looked after children.<sup>33</sup>

VCOSS particularly supports the Panel considering quaternary help/prevention as therapeutic support is vital for those children and young people already in the care system to prevent or mitigate ongoing trauma. The importance of therapeutic responses cannot be overemphasised. All children and young people removed from their family and placed in care will have experienced profound trauma and will require a therapeutic care response. Therapeutic care aims to address the trauma associated with abuse and neglect and to promote healing and recovery. This is discussed in more detail below in relation to out of home care.

VCOSS directs the Panel to a framework developed by Vichealth which utilises a public health model to guide strategies to prevent violence against women.<sup>34</sup> This framework is relevant given family violence is a significant issue linked to child wellbeing and protection.<sup>35</sup> Again, this framework outlines the primary, secondary and tertiary stages at which strategies to prevent violence against women can be implemented.

Examples of preventative measures that should be further strengthened include:

- ❑ home-visiting from early childhood staff to new parents, whether through maternal and child health nurses, or other early years professionals. This has the potential to provide focused support in a non-threatening and positive way. Home visiting can also assist in connecting families to a range of community supports, including parents' groups, activities in a neighbourhood house etc. Additional resources are required to enable such home-visiting to be incorporated as a core part of work of early years professionals;
- ❑ supported playgroups, particularly those that are working with vulnerable families – such as the Best Start playgroups, also play a valuable role in both parenting and child development outcomes;
- ❑ literacy programs to improve adult literacy leading to parents and children obtaining improved literacy outcomes;
- ❑ school nurse program – this program operates in Victorian Primary schools and most secondary schools. Nurses visit schools throughout the year to provide children with the opportunity to have a health assessment; provide information and advice about healthy behaviours and link children and families to community based health and wellbeing services; and
- ❑ Best Start – this is an early years program that aims to improve the health, development, learning and wellbeing of all Victorian children 0-8 years, with a particular focus on ensuring that vulnerable young children and their families who are not currently engaged with universal services, or prematurely disengaged, are able to participate in and benefit from the universal service platform. The evaluation of Best Start noted improved service cooperation and confirmed the value of continuing Best Start in existing Sites and extending it to other disadvantaged communities.<sup>36</sup>

There are a number of actions that need to be undertaken to better align Victoria's child protection responses within a public health framework. Most notably there needs to be significant investment and support at the primary end of the continuum. The spectrum of services that respond to infants, children, young people and parents also need to work closer together to ensure that vulnerable children do not fall through the net.

It is critical to make more explicit the connection between universal and targeted or specialist services. Universal services can provide the platform for the delivery of targeted or specialist services. For example, maternal and child health services, child care services, kindergartens and schools are often the only institution or service that families have contact with. Each of these can be better utilised as an effective platform to ensure that vulnerable children and families are linked in with the appropriate additional supports as and when



required. Schools are naturally focused primarily on the educational needs of children and young people. To address the social needs of children and young people, it is critical that schools are networked and integrated with a range of other community services and structures. Such new approaches are required to enable the improved integration of education and broader community organisations and structures. See the Bairnsdale Neighbourhood House Community Kindergarten practice example below.

This is not to undermine the skilled work of those workers in the specialist secondary and tertiary end of the system but rather acknowledges that all levels have a role to play in preventing and identifying abuse and neglect. The UK Munro report notes that:

Professionals in universal services cannot and should not replace the function of social work, but they do need to be able to understand, engage and think professionally about the children, young people and families they are working with. That necessarily entails trying to understand the presenting circumstances of families and children at the point they seek help, or when they are identified as needing help, whilst using a service (such as education services, urgent care settings such as accident and emergency departments, pre-and post-birth health visiting, police visits to investigate a violent incident, or drug and alcohol support). It also entails an understanding of what services social workers can be expected to provide.<sup>37</sup>

VCOSS also notes the need for significant reforms at the secondary level to promote and support greater integration across allied services such as domestic violence, mental health and drug and alcohol treatment services and for those services to promote the wellbeing of children and young people, not simply the adult client. This is discussed in more detail below.

Underpinning all of this is a need to focus on workforce issues across the prevention – early intervention – tertiary spectrum. This will involve the recruitment, retention and ongoing professional development of all workers. These issues are discussed below.

**Practice example:**

**The Bairnsdale Neighbourhood House Community Kindergarten<sup>38</sup>**

The Bairnsdale Neighbourhood House Community Kindergarten commenced operation in February 2008 after extensive consultation with local Aboriginal families. The Kindergarten is a partnership between UnitingCare Gippsland and Gippsland and East Gippsland Aboriginal Co-operative (GEGAC). The community and early childhood workers had identified that there was a need to increase attendance by Koorie children at kindergartens as a range of barriers were preventing local Aboriginal families accessing existing programs. These included Kindergarten fees, transport difficulties, perceived non-acceptance of Koorie culture by existing kindergartens and complex family issues impinging on the ability to support the attendance of children into kindergarten

In the first year of operation the kindergarten enrolled 24 children – this was a 71% increase in the number of Aboriginal children attending kindergarten.

The kindergarten has established a culturally safe environment by:

- ❑ Building relationships with parents and other community members.
- ❑ Employing Aboriginal staff through a trainee program and working with other Aboriginal workers.

- ❑ Developing strategies to respond to the needs of the local Aboriginal families.
- ❑ Providing transport to pick up the children in the morning to attend kindergarten
- ❑ Acknowledging Aboriginal culture by providing a cultural program that includes stories, art, music and other activities
- ❑ Developing a holistic approach to the early years by building up relationships with other service providers.
- ❑ Training staff in cultural awareness.
- ❑ Responding to the needs and wishes of the community.

For many of the children, attending the kindergarten has enabled workers to detect health issues. For example, in 2009, 70% of the children had some speech issues. Many of the children also present with possible hearing difficulties, emotional difficulties and learning disabilities.

As well as establishing a culturally safe environment, other critical factors that have contributed to the success of the kindergarten include:

- ❑ a holistic system of support that commences pre-birth and largely based on relationships between families and key workers;
- ❑ Qualified and experienced staff;
- ❑ Understanding and respect for Koorie culture amongst non-Aboriginal staff;
- ❑ A strong development phase that involved true consultation with the community and parents;
- ❑ Aboriginal trainees that provide links to the community and are generally known to both parents and children.
- ❑ Sufficient staff to enable children's needs to be met.
- ❑ Sufficient staff to prepare the four year olds for transition to school.
- ❑ Sufficient staff to prepare new children to adapt and successfully transition to a kindergarten program and environment.
- ❑ The development of a strong management structure
- ❑ Developing 'champions' from within the community who promote the benefits of early childhood education.
- ❑ Demonstrating good results with the children's development.
- ❑ Providing supported transition into kindergarten and then primary school.

When the first group of 4 year olds transitioned to primary school, reports from teachers and principals at the schools indicated a high level of school readiness amongst these children.

This kindergarten is providing a model of successful delivery of early childhood services to local Aboriginal families. However, key challenges are that workers have found it difficult to access timely and affordable health and therapy supports for children with health issues and the inadequacy of base funding levels. Funding does not cover the operational costs of the kindergarten which includes significant additional costs such as the transport provided for children.

The pilot ended in 2010 and this service now forms a part of Dala Yooro (Integrated Aboriginal Child and Family Service East Gippsland).



## Promoting prevention

Given the Public Health Model emphasises prevention, it is important to consider the different strategies that need to be developed to promote prevention. VCOSS draws the Panel's attention to the VicHealth Health Promotion framework, outlined in *People, Places and Processes* as a potentially useful framework for conceptualising prevention of child abuse and neglect.<sup>39</sup> The VicHealth framework considers the multifaceted approaches to health promotion including:

- ❑ place-based approaches (or area-based initiatives) which seek to improve the social, cultural, economic and/or physical environment within a defined boundary, in order to improve overall health and reduce the differences in health amongst the people living within that area;
- ❑ population-wide approaches which target the whole of the population through:
  - interventions (such as health information social marketing campaigns);
  - structural mechanisms and macroeconomic policies (such as the provision of public housing);
  - intervening to address the causes of ill health (such as provision of free education for all citizens);
- ❑ targeted sub-population interventions which focus on populations that face particular disadvantage; and
- ❑ life course approaches that recognise that certain stages of life give rise to health inequalities and are thus points for intervention to reduce health inequalities.

The VicHealth *People, Places, Processes* document outlines the strengths and limitations of each of these approaches. VicHealth notes that the groups that are being targeted need to be engaged in planning and implementation of primary prevention strategies to ensure strategies are owned by these communities and will be most effective.

## Social and physical planning

Shifting the focus to prevention and early intervention also involves social and physical planning. There are a number of planning interventions to help improve resilience in vulnerable communities.

Planning for physical and social infrastructure in these areas to ensure families have access to the resources and supports they need can help to build stronger and more resilient communities and address some of the systemic socio-economic issues which can contribute to abuse and neglect. For example, community development initiatives, such as free activities for families and the availability of playgroups, can help to reduce social isolation and provide families with the opportunity to connect with other members of their community. Other community facilities such as local parks, swimming pools, sporting clubs and libraries provide similar opportunities to children and young people. Places that are designed to be accessible without the use of a car can help to reduce the financial burden of car ownership (or second car ownership) and reduce social isolation in single car families. Local commercial spaces and activity centres also provide local employment opportunities, reducing barriers to employment.

## Victorian Aboriginal children, young people and communities

The poorer outcomes of Victorian Aboriginal children and young people across a range of key measures remains of significant concern to VCOSS. The recent and highly valuable report, *The State of Victoria's Children 2009: Aboriginal children and young people in*

Victoria, provides a valuable overview of the key strengths and areas of concern for Victorian Aboriginal children, young people and their families.<sup>40</sup>

It is critical that any recommended reforms are inclusive of Aboriginal cultural identity, values and perspectives. VCOSS advocates that at all times in the development and implementation of any reforms, that the Panel – in the first instance, and then the Government, continue to work closely with Victorian Aboriginal communities and organisations, in relation to the reforms to the full service system to support improved outcomes for Victorian Aboriginal children, young people and families.

The over-representation of Victorian Aboriginal children within the Victorian child protection system and the high rate of removal of Aboriginal children and young people from their families is not acceptable. Compared to non-Aboriginal children, Victorian Aboriginal children and young people are:

- ❑ ten times more likely to be the subject of child notification substantiation;
- ❑ around 14 times more likely to be Care and Protection Orders; and
- ❑ 14.3 times more likely to be in 'Out-of-Home Care'.<sup>41</sup>

There are particular challenges in responding to this over-representation and on maintaining a focus on prevention and early intervention in a system that is largely crisis driven. Strategies that address this over-representation should be a key area of inquiry for the Panel.

The Aboriginal child and family services system in Victoria is still primarily focused on the tertiary end of the spectrum. A key issue that needs to be addressed is that too many Aboriginal families receive little or no support until issues reach crisis point. For example, the Bairnsdale Neighbourhood House Community Kindergarten practice example above, indicates that in many communities, health issues are not detected until the child reaches kindergarten and school age as the families may not have engaged with universal services since the birth of their child.

Many of the services that are available often do not meet the specific needs of Aboriginal children and young people. There is a lack of sufficient Aboriginal-specific family services and culturally responsive generalist services available.

There are inadequate preventative services for Aboriginal children and their families as Aboriginal community controlled organisations have received limited funding for prevention and family support services. There is an urgent need for resources to enable Aboriginal organisations to develop service responses across the prevention, early intervention, tertiary continuum so Aboriginal families can access Aboriginal supports. There is also a need for more flexible funding models to allow for more proactive outreach services, programs that engage families through creative means such as art and therapeutic programs that address issues of multigenerational trauma.

The proposed Aboriginal family centre, Moondani, in Thornbury is a good example of a culturally secure, safe and inviting environment that promotes wellness and aboriginal culture.<sup>42</sup> Moondani is intended to provide a suite of universal and specialist services for Aboriginal families. Models such as Moondani need to be available across Victoria, with an initial priority for those areas with higher populations.

### **Practice example:**

#### **VACCA Playgroup program**

The VACCA playgroup program is an example of a good prevention and early intervention program. The playgroups provide activities which promote healthy development, strengthen identity and cultural awareness, strengthen inter-generational links, provide parenting advice and support and link children and families to universal services where required. The playgroups are supported by workers who can encourage families to connect with universal and secondary supports as required.

### **Regional Aboriginal Plans**

VCOSS suggests the Panel look at the effective approaches that have been utilised elsewhere across the Victorian government to drive improved system approaches to improve outcomes for Victorian Aboriginal children, young people, families, adults and communities.

As part of implementing the *Victorian Aboriginal Justice Agreement*, the Department of Justice with the Victorian Aboriginal community established the Regional Aboriginal Justice Committee Network, supporting the Justice regional model to improve government service delivery and accessibility to meet the needs of Victoria's diverse and growing community.<sup>43</sup>

Similarly, in implementing the Close the Gap initiative, the Department of Health in partnership with the Aboriginal community developed the *Victorian Implementation Plan - National Partnership Agreement on Closing the Gap in Indigenous Health Outcomes*, and has established Regional Closing the Gap Health Advisory Committees.<sup>44</sup>

### **Strengthened Capacity of ACCOs**

Strengthening the capacity of Aboriginal Community Controlled Organisations (ACCOs) is a key part of developing a system that can better support improved outcomes for Victorian Aboriginal children, young people and families. Strategies are required to strengthen organisational infrastructure and further develop the Aboriginal workforce. This will require the Government to work with Aboriginal Community Controlled Organisations (ACCOs) across the state.

A 10 year plan is required to support the capacity building of Aboriginal organisations. Within this plan, opportunities for partnership between mainstream and Aboriginal agencies should be explored to support the wellbeing of Aboriginal children, young people and families who receive services through mainstream agencies during this period. Regional plans could be developed under this to ensure appropriate service responses and identify the required capacity development – as has occurred in other areas, notably justice and health (see earlier discussion).

### **Cultural competence and cultural safety of universal and mainstream community services**

A key part to ensuring the accessibility and responses of services to Victorian Aboriginal children, young people and families is strengthening the cultural competence and safety of the entire service system that responds to children, young people and families. A culturally competent and safe service system is one which:

- ❑ focuses on the underlying socioeconomic issues that lead to child neglect;

- ❑ focuses on Aboriginal children's right to culture;
- ❑ views culture as a source of resilience;
- ❑ responds holistically to child abuse and neglect recognising that Aboriginal and Islander cultures view the whole child in the context of the whole family and the whole community;
- ❑ focuses on child well being and early childhood development, including cultural well being; and
- ❑ expands community based Early Childhood Service and Aboriginal and Torres Strait Islander Child and Family Welfare Agencies and Services.<sup>45</sup>

It is important to recognise that supporting improved outcomes for Victorian Aboriginal children, young people and families is not the sole responsibility of ACCOs and Aboriginal communities. It is essential that universal services and services provided by mainstream community sector organisations also recognise their responsibility and take action to ensure that their services are culturally competent and safe. VCOSS welcomed the development of the *Aboriginal Cultural Competence Framework* and cultural competence training for community-based child and family services.<sup>46</sup> VCOSS proposes the Victorian Government build on this successful strategy by extending the framework to all funded organisations, not only within DHS funded child and family services – it is critical that cultural competence and safety is part of family violence, mental health, drug and alcohol sectors, and health and education. Importantly, any cultural competency and safety requirements must also apply to government services and practices.

VCOSS welcomed the *Wannik Education Strategy* released in February 2008, which has the overarching principle to deliver the best possible education to Victorian Aboriginal children and young people.<sup>47</sup> Improving the cultural competence and safety of Victorian schools is critical to supporting improved outcomes for Victorian Aboriginal children and young people. The *Wannik Education Strategy* needs to form a key part of any cross-government steps.

Leaders of Aboriginal community-controlled organisations are also increasingly called on by Government to engage in policy input and research without being resourced. VCOSS proposes the Government provide additional resources to Aboriginal community-controlled organisations for cultural input into service delivery, including the production of culturally-based resources and more Koorie Child FIRST positions. This training and secondary consultations must be appropriately funded.

## Partnership approach

Central to cultural competence and safety is the commitment to building respectful partnerships between Aboriginal community-controlled and mainstream organisations. Partnerships need to be about supporting and complementing Aboriginal community controlled organisations, not about mainstreaming.

Resourcing effective partnerships between Aboriginal community-controlled and mainstream community sector organisations will also strengthen service delivery to the Aboriginal community, and share the responsibility to 'close the gap' across all services. Partnerships are not cost-neutral and currently there are no additional resources committed for partnership development between community sector organisations and Aboriginal community-controlled organisations. This places a burden on the leaders of Victoria's few Aboriginal organisations, as their partnership participation is sought by many mainstream organisations.

## Culturally and linguistically diverse communities

VCOSS believes specific strategies need to be developed to respond to the needs of children, young people and families from Culturally and Linguistically Diverse backgrounds (CALD). VCOSS notes that too often in previous processes, the specific needs of CALD communities have been ignored and we urge the Panel to consult more widely with representatives of these communities to ensure reform recommendations also seek to improve outcomes for these families.

The Australian population is one of the most culturally and linguistically diverse in the world. The Australian Early Development Index (AEDI) reports that 17.1 per cent of all Australian children (including Australian Aboriginal children) spoke languages other than English in the home, with 279 different languages spoken. In Victoria this number was slightly higher at just under 20 per cent which indicates that there is a clear need for specific and targeted service system responses.<sup>48</sup>

Many families arrive from countries where there are different expectations and values about child rearing practices. As such, there is a clear need for dedicated support to assist families to understand expectations in Australia. Information cannot simply be provided in written form as this will not target harder to reach communities.

While CALD families may attend initial maternal and child health appointments, VCOSS is aware that many of these families do not re-engage with universal services again until school which means that they may miss out on many early intervention and prevention supports. The service system is predominantly set up for families to attend services. More assertive outreach services are required for CALD communities to ensure services more effectively reach out to these families.

VCOSS also calls for resources to ensure ongoing cultural competence training for staff in universal services to ensure these services are better placed to work with these families.

VCOSS strongly supports the priority of developing and implementing a new and more comprehensive response to CALD communities, including assertive outreach and bilingual counsellors, bilingual community education workers, mentoring programs and family support. VCOSS directs the Government to the expertise of such organisations as the Ethnic Communities Council of Victoria (ECCV), FKA Children's Services Inc. and the Centre for Multicultural Youth Issues (CMYI).

## Rural, regional and outer urban communities

The specific needs of children, young people and families in different geographic areas need to also be recognised in any forms. There are key differences in the needs across metropolitan, outer urban and rural and regional communities. In particular, there are issues regarding primary and secondary service provision on the urban fringe and in rural Victoria that need to be addressed.

A key challenge for service providers in outer urban and rural and regional communities is the geographical spread of people. This increases demand for outreach support, which has implications for service delivery models and funding models. Often the additional costs of outreach, namely staff and travel time, are not reflected in funding models. Funding models need to adequately address population growth and therefore, increased demand

and the additional costs associated with service delivery in outer urban and rural communities. Funding models are discussed in more detail below.

## Outer urban communities

The Interface municipalities<sup>49</sup> 'lie at the Interface between metropolitan Melbourne and rural Victoria, sharing aspects of both urban and rural communities'.<sup>50</sup> Interface communities experience unique challenges regarding service provision and stressors for families. Communities at the interface also experience significant health and wellbeing issues. Compared with metropolitan and rural communities:

- ❑ infants at the Interface are significantly more likely to have a Low Birth Weight than infants born in metropolitan Melbourne, rural Victoria or Victoria in general (low birth weight can lead to longer term health complications which may lead to greater family stress);
- ❑ infants born at the Interface are less likely to be breast-fed than infants born in metropolitan Melbourne, rural Victoria or Victoria in general;
- ❑ new mothers in Interface communities have significantly higher rates of Post Natal Depression than do new mothers in metropolitan Melbourne, rural Victoria and Victoria in general; and
- ❑ children at the Interface have higher rates of Child Protection Notifications, substantiations and Care and Protection Orders than those in metropolitan Melbourne, though rates are lower than in rural Victoria and Victoria in general.

Reports commissioned by the eight Interface Councils have identified key gaps in human service delivery along the urban fringe, particularly in relation to the needs of families with children and young people aged 12-24. The focus of the research was on the needs of families with children and young people aged 12-24.<sup>51</sup>

A key issue is the high population growth in many outer urban areas. Four Victorian local government areas are amongst the ten largest growing municipalities in Australia for the year ended 30 June 2010. These were Wyndham (up 12,604 persons or 8.8%), Whittlesea (up 8,890 or 6.1%), Casey (up 8,148 or 3.3%) and Melton (up 7,088, or 7.1%). This compares to an overall Victorian growth rate of 1.8%.<sup>52</sup> This growth is not matched by corresponding infrastructure, including increases in funding for services:

At the inner border of each municipality, where the new suburbs are pushing out into the paddocks, the challenges are about keeping up with the expectations of an expanding population of young families. But this is being done without the bedrock of the social and physical infrastructure found in the older, inner city suburbs, and within constraints of models that often fund some services - such as Maternal and Child Health Services – on calculations of population that lag behind this rapid expansion.<sup>53</sup>

The Interface Council research also found significant financial stress at the interface, which continues to be reinforced by the experience of VCOSS members providing financial counselling services in these communities. Interface areas have a significantly higher incidence of mortgages than both Metropolitan Melbourne and Victoria in general and more limited rental opportunities.<sup>54</sup> This stress has been recently reported by community sector organisations working in these outer urban communities with reports of a rise in the number of families facing bankruptcy or seeking financial counselling, food vouchers or emergency housing.<sup>55</sup>



# STRATEGIES TO ENHANCE EARLY IDENTIFICATION OF, AND INTERVENTION TARGETED AT, CHILDREN AND FAMILIES AT RISK INCLUDING THE ROLE OF ADULT, UNIVERSAL AND PRIMARY SERVICES

All who come into contact with families have a part to play in identifying those children whose needs are not being adequately met.<sup>56</sup>

## An integrated and multidisciplinary response

To promote the wellbeing and safety of all children, young people and families, it is essential to develop a statewide, integrated system of universally accessible preventative and early intervention services that are linked to a range of specialist supports. Services and supports must be available to families when they need them. Supporting families early is the most effective way to support and protect children. For services to be universally accessible, they must be affordable, inclusive, located in reasonable proximity, timely and sustainable. Any integrated system needs to:

- ☐ be culturally responsive to both Aboriginal communities and communities from culturally and linguistically diverse backgrounds;
- ☐ include models that have the flexibility to respond effectively to local needs;
- ☐ include appropriate resourcing of a range of services across Government;
- ☐ build on existing structures;
- ☐ be sustainable;
- ☐ encourage partnerships;
- ☐ be universal;
- ☐ be multidisciplinary;
- ☐ be child and young person centred;
- ☐ be flexible;
- ☐ be evidence based;
- ☐ have a quality framework;
- ☐ be able to be evaluated;
- ☐ be able to be replicated;
- ☐ be informed by experience and policy;
- ☐ include integrated funding and administrative models, and
- ☐ be within a whole of government framework.<sup>57</sup>

A critical issue is the need for all services that work with families to have a commitment to improving the safety and wellbeing of children and young people. This requires a system that supports a multidisciplinary approach. The introduction of Child FIRST and Integrated Family Services has helped to strengthen partnerships between agencies and promote a more multidisciplinary approach to the safety and wellbeing of children and young people, although this can be strengthened further with multi-disciplinary practice approaches such as joint assessment, joint case planning, and joint visits /outreach.<sup>58</sup> VCOSS has identified adult services, schools and generalist youth services as areas that require specific attention to strengthen support for vulnerable children, young people and families.

## The role of adult services

Adult services do not 'see the child' when dealing with their client — the parent. These services need to reconceptualise (or conceptualise in the first place) their role in protecting children by seeing the adult client in the context of their family.<sup>59</sup>

The capacity of adult services, such as housing, homelessness, drug and alcohol, mental health and family violence, needs to be enhanced so as to be more responsive to the needs of children in their work with the parent or carer. VCOSS asserts that it is critical that these services are supported and resourced to implement the best interests of the child principles when planning and providing services to the adult. This does not mean that the adult service would have to provide the broader family support service, but they would have to consider the Best Interests of the child in program planning and link clients into the broader support system as appropriate.<sup>60</sup> This will require significant investment in workforce training and development to build the capacity of the workforce to provide this support.

VCOSS notes that prior to the 2010 election, the Coalition Government committed to 'reorient adult-focused mental health, drug and alcohol and family violence services to require them to be mindful of children of the adults for whom they have responsibility'.<sup>61</sup> Mental health and drug-treatment services have a duty of care to the children of their clients and there must be a family-centred response. This will require significant resource allocation given adult services are already significantly stretched. For example, drug and alcohol services have not had a Price Review for 13 years. The current unit cost does not adequately reflect the cost of service delivery, let alone cover additional work such as the capacity building required to train staff in the Best Interests of the child. As the Auditor General recently noted in his report, *Managing Drug and Alcohol Prevention and Treatment Services*, 'due to changes over time, unit prices have lost their relationship with the real costs of service delivery'.<sup>62</sup>

While adult services must be responsive to the needs of accompanying children, the capacity for adults to access services when they need them is critical. Drug and alcohol, counselling and family services all run extensive waiting lists to provide assistance. If assistance is not available when people first seek it, they can become discouraged and problems can worsen. Alternative funding models for adult services, similar to either case mix funding for hospital services or demand based funding for employment services should be investigated as options to increase the ability to provide services when they are first sought.

## Housing and Homelessness

Housing and homelessness services provide a critical component of stability for a family – the provision of stable and secure housing. There were 17,748 households with children and young people on the waiting list for public housing at 30 June 2009,<sup>63</sup> and waiting lists have



declined little since this time. In the private rental market, just eight per cent of all lettings in metropolitan Melbourne are affordable to households on a low income, with just 19 per cent being affordable across the State.<sup>64</sup>

The lack of affordable housing, both in the public housing and private rental sector, places enormous financial stress on households and impedes the ability of other human services to address more complex needs, such as mental health or drug and alcohol use. The State Government needs to set targets and develop a funding plan to increase public and community housing in Victoria over the next ten years.

The number of families experiencing homelessness has increased in recent years and existing housing responses do not adequately respond to the needs of accompanying children.<sup>65</sup> Until recently, the shortage of crisis accommodation options for families meant that housing services were often paying for them to live in private rooming houses, where children shared bathroom and other common areas with a number of other adults. While not appropriate accommodation for many adults, rooming houses are particularly poor accommodation for children, however housing services had few other options.

The *Accommodation Options for Families Program*, which was funded as part of the Government's response to the Rooming House Taskforce recommendations, provides additional funding and housing support to families experiencing homelessness to secure appropriate short term accommodation options whilst working with them to secure stable housing. The small funding allocation to this program will expire soon and should be refunded to ensure that children are not placed in unsafe accommodation.

While this is a crisis response, the ongoing needs of children are not prioritised within this service system, particularly in the allocation of public housing. The current allocations system provides clearly defined guidelines for eligibility and access to public housing. However, these often do not take into account the 'human factors' in assessing the appropriateness of an allocation, and in particular the needs of children. Allowing the conversion of transitional housing stock into public housing for families to enable them to remain in their community and introducing a program of Choice Based Letting to allow tenants to assess the appropriateness of a property for themselves would assist in this.

VCOSS alerts the Panel to a forum on 11 May 2011 that will consider issues concerning children and homelessness. The forum is presented by the Statewide Children's Resource Program, Council to Homeless Persons and DHS.

## Family Violence

Family Violence is the single biggest contributor to homelessness for women and children in Victoria and is present in over 50 per cent of child protection notifications.<sup>66</sup> Preventing violence against women and improving family violence responses for women and their children is critical in addressing child protection issues. While the current Integrated Family Violence response system in Victoria is working towards assisting victims of violence to remain in the home, when it is not safe to do so, interventions that provide secure crisis accommodation and transitions into stable ongoing housing are critical and do not currently receive adequate funding and support. A priority part of this needs to be ensuring children are able to maintain their connection to school.

The protocol developed by Police to notify both child protection and family violence services when they are called to a family violence incident are a good first step. However, the stretched resources of the child protection system mean that not all of these notifications are followed up, nor do they all meet the criteria for child protection

intervention. In these instances these notifications should be forwarded to ChildFirst partnerships which, if properly resourced, can provide support and intervention.

Children who have experienced family violence are more likely to become perpetrators or victims of family violence in the future.<sup>67</sup> The provision of counselling and support for children who have experienced or witnessed family violence is not only an important therapeutic but also preventative measure. Currently, there are not sufficient services and supports to ensure this provision – for example, in Broadmeadows there is one agency which provides this service, despite the northern region having higher rates of family violence than average.

## The role of schools

Schools have a critical role to play in the development and wellbeing of children and young people, and are therefore integral to any strategies to enhance the safety of children and young people. To improve outcomes for vulnerable children and young people, there is a need for significant systems change across all the systems and structures that support and promote the wellbeing, learning, health and development of children and young people. There is clear evidence that a child's or young person's learning does not occur in isolation from the other parts of their life, however traditional schools structures, models and approaches generally respond as if this is the case.

It is essential that improved linkages between schools and local community sector organisations are developed to better support vulnerable children and young people.

## Better integration of education and community supports

Schools, similarly to universal early childhood education and care services, are the ideal entry point for the provision of additional support and enabling linkages, as for many families, schools and services such as maternal and child health are the only formal institutions they engage with.<sup>68</sup> To better address the social needs of children and young people, it is critical that schools are networked and integrated with a range of other community services and structures.

Whole of government approaches that integrate and link education, health and community supports have been shown to maximise positive educational outcomes for children and young people that experience disadvantage.<sup>69</sup> Such approaches foster social inclusion and strengthen community involvement by building links and networks between schools and broader community supports.

Schools are naturally focused primarily on the educational needs of children and young people. To better support the learning of vulnerable children and young people, and help them remain engaged, schools need to take steps to develop cross-sector, collaborative networks, so that they are better able to put the required supports around vulnerable children, young people and families. Taking such steps can more effectively address the social factors that can negatively impact on a child's or young person's ability to learn. In some instances, linkages will be sufficient – in other areas, alternative settings will be required.

Two key steps are required to develop collaborative networks focused on better supporting the learning outcomes of all children and young people, particularly those who are vulnerable. Firstly, it is vital to draw together the full range of resources that affect the learning and development of children and young people. Such a step is critical as the

evidence highlights that the quality of a child's or young person's environment as a whole – at home, in care, at school, in the community, is central to supporting their learning and development. The second step is ensuring the management of school resources and learning models are more flexible and include the capacity to be locally-driven so as to more effectively respond to the diversity of need – as highlighted in the *systems thinking* discussion earlier.

## Partnerships between schools and local community sector organisations

In June 2010 the Department of Education and Early Childhood Development (DEECD) and VCOSS (on behalf of the community sector) signed the *Partnership Agreement between DEECD and the Victorian Community Sector 2010-2014*.<sup>70</sup> The Partnership Agreement establishes the parameters for the relationship between the community sector and DEECD and details the mechanisms for the parties to come together.

The Partnership Agreement is based upon a model of engagement emphasising cooperation, the recognition of the diversity of interests in both the community sector and DEECD and an underlying commitment to the following principles:

- ❑ a shared vision to achieve the best possible outcomes for all children and young people, particularly the vulnerable or disadvantaged;
- ❑ mutual respect for each partner's autonomy and responsibilities, while recognising that true partnership may require change, innovation and risk;
- ❑ collaboration and the fostering of opportunities to work together on issues of mutual benefit or concern;
- ❑ communication, consultation and engagement on decisions by one partner that will impact upon the other;
- ❑ transparency of financial relations between the Department, VCOSS and the sector, subject to relevant legislation and policies;
- ❑ a relationship that celebrates success, addresses challenges and acknowledges contributions to outcomes that are achieved; and
- ❑ joint leadership of the partnership, including joint agenda setting.

VCOSS believes the *Partnership Agreement between DEECD and the Victorian Community Sector 2010-2014* provides an opportunity for action to develop improved partnerships between schools and local community sector organisations. It is important to recognise that partnerships are not cost neutral and come at a significant cost to community sector organisations and schools. Therefore the community sector and schools need to be resourced to participate in partnerships to support improved learning and development outcomes.

Stemming from the Partnership Agreement, has been the development of the DEECD – *Victorian Community Sector Collaboration and Consultation Framework*, due to be launched in mid-2011. The Framework outlines how the signatories to the Partnership Agreement will better collaborate and consult, and the enabling processes that will realise this. The Framework will provide another mechanism to better improve service integration and for example, the way DEECD and community sector organisations may work together in improving responses to vulnerable children and young people. In the long-term both the Partnership Agreement and the Framework have the potential to also improve interactions between individual schools, early childhood services and service delivery organisations.

## Improving outcomes

Education is critical in enhancing outcomes for children and young people and may assist in breaking the nexus between experiences of abuse or neglect and later life outcomes. This is particularly true for vulnerable children and young people such as those in state care, those with mental health issues and young parents. Educational outcomes for children in care are substantially lower than those of the broader student population.<sup>71</sup> Structural and system-wide mechanisms are required to ensure that schools, as a universal service, better support the learning and development needs of vulnerable children and young people.

The Victorian Ombudsman notes that 'implementing effective programs to improve the educational outcomes for children in care has the potential to broaden the opportunities available to those children and significantly improve their prospects for the future'. The report also notes that DHS 'shares this responsibility with the Department of Education and Early Childhood Development'.<sup>72</sup>

Currently there are two protocols in place that reflect this shared responsibility. The first is the *Partnering Agreement – School Attendance and Engagement of Children and Young People in Out of Home Care*. This agreement is intended reinforce good practice and identify strategies to better respond to the educational needs of children and young people in out of home care. The second protocol is *Protecting the safety and wellbeing of children and young people: A joint protocol of the Department of Human Services Child Protection, Department of Education and Early Childhood Development and Victorian Schools*.

These protocols need to be further strengthened as part of the broader system changes required to better support the learning and development of vulnerable children and young people.

## Flexible learning environments

VCOSS has long advocated for an improved system response to better meet the learning and development needs of all Victorian children and young people, including through the improved provision of flexible learning environments. Currently in Victoria there is a lack of systemic, sustainable and funded strategies to support the ongoing engagement and re-engage vulnerable children and young people in learning.

Resourcing more flexible learning environments both within and outside mainstream schools to better support their education outcomes of vulnerable young people is a key way of supporting vulnerable young people to remain engaged, or re-engage, in their learning. It is important to recognise that flexible learning environments are more resource intensive than the standard funding allocation provides for. As such, a higher level of resourcing per student is required.

Victoria needs to develop a more diverse and flexible education system to better ensure vulnerable children and young people remain engaged in education and more effectively support their learning outcomes, rather than the current predominant approach of 'one-size fits all'. Alongside the development of collaborative networks, this will require the development of alternative curriculum and moving to more holistic approaches to supporting a child's and young person's learning and development (as discussed above). The provision of flexible learning environments provide children and young people with varied and specialised opportunities, both inside and outside mainstream schools, to support their ongoing engagement or to re-engage in their education.

Currently, opportunities are generally limited for marginalised and vulnerable children and young people to re-engage in education given the issues that they experience and their need for high level, intensive, and often specialised educational and social supports. More flexible models of education will influence school retention more broadly and will also positively impact upon the potential for these children and young people to access post-school pathways and ongoing education.

Significant work has been undertaken by the Department for Education and Early Childhood Development around the development of flexible learning options in 2009 and 2010, including commissioning KPMG to complete a report to inform the development of a consistent policy framework for flexible learning options.<sup>73</sup> The intent of this work was to develop a policy framework that is intended to commence a longer-term change process to move from the current system of flexible learning option provision to a strengthened, consistent and more coordinated approach to addressing student disengagement. Any further work and actions needs to build on this valuable work.

Victoria needs to develop a more diverse and flexible education system to better ensure vulnerable children and young people remain engaged in education and more effectively support their learning outcomes, rather than the current predominant approach of 'one-size fits all'. Alongside the development of collaborative networks, this will require the development of alternative curriculum and moving to more holistic approaches to supporting a child's and young person's learning and development (as discussed above). The provision of flexible learning environments provide children and young people with varied and specialised opportunities, both inside and outside mainstream schools, to support their ongoing engagement or to re-engage in their education.

Currently, opportunities are generally limited for marginalised and vulnerable children and young people to re-engage in education given the issues that they experience and their need for high level, intensive, and often specialised educational and social supports. More flexible models of education will influence school retention more broadly and will also positively impact upon the potential for these children and young people to access post-school pathways and ongoing education.

Significant work has been undertaken by the Department for Education and Early Childhood Development around the development of flexible learning options in 2009 and 2010, including commissioning KPMG to complete a report to inform the development of a consistent policy framework for flexible learning options.<sup>74</sup> The intent of this work was to develop a policy framework that is intended to commence a longer-term change process to move from the current system of flexible learning option provision to a strengthened, consistent and more coordinated approach to addressing student disengagement. Any further work and actions needs to build on this valuable work.

VCOSS supports the current Youth Partnerships program which aims to 'improve engagement in education and training, and to reduce the escalation of social, individual and behavioural problems for vulnerable young people'.<sup>75</sup> The program encourages schools, community organisations and police to work together at a local level to support young people. The program is currently being piloted in seven areas.<sup>76</sup> It will be critical for the learnings from these pilots to be acted on to ensure improved system-wide responses for vulnerable young people.

### Role of community sector organisations – flexible learning options

It is important to recognise the significant role that community sector organisations have to play in the provision of flexible learning options. The role of community sector organisations extends beyond working directly with schools – not only do they need to work more closely

with schools system-wide to more effectively support vulnerable children and young people and help them remain engaged in mainstream schools. Many community sector organisations are the sole provider of alternative and flexible learning environments. While the aim is generally always to work towards the child or young person re-engaging in a mainstream setting, this is not always possible, and many vulnerable children and young people will complete their education with a community sector organisation. For example, both Berry Street and MacKillop Family Services operate independent schools to support young people in out-of-home care who have had difficulty engaging in mainstream education. MacKillop Family Services has developed the St Augustine's Education and Training Unit to deliver specialist education and support to young people who have complex needs or who are experiencing severe difficulty with mainstream schooling. Part of this program includes a full-time withdrawal education service for children and young people who are having difficulty participating in mainstream schooling so that they are able to continue their learning in a safe and supportive environment. The key learnings from these and other models need to be drawn on in developing system-wide responses.

Another model is that of the Deemed Enrolment Program developed by St Luke's Anglicare, the regional office of the then Department of Education and Training and the four local secondary colleges in Bendigo. The deemed enrolment model focuses on supporting young people aged 12-15 who are at risk of or who have disengaged from the education system. The objective is to provide a bridge for children and young people to support them in re-engaging with school or other mainstream educational and vocational based programs. This is achieved through a number of steps including the development of an education plan, formation of a support team and the availability of the funding generated from the young person's enrolment to transferred to St Luke's to develop a range of educational programs to meet the young person's needs. Currently this program is not fully resourced by DEECD, nor recognised as an education program. A formal review of the outcomes from this model is currently being completed. Models such as this more flexible deemed enrolment model should be adequately resourced and developed so that they could be rolled out across Victoria so as to better support children and young people's learning and development.

Community sector organisations also operate and fund other education programs, such as breakfast clubs or learning support programs that operate outside school hours. These programs often rely on philanthropic funding to cover costs. It is important that Government supports small community-based educational settings, either within or outside mainstream schools, for children and young people at-risk of disengaging or already disengaged from education.

Schools also require additional resources to enable them to better support vulnerable children and young people. This could be through brokerage money so that schools can bring in community supports and by increasing school global budgets to encompass alternative pathways and supports for vulnerable young people.

### Children and young people not in education

There is a clear need to develop specific strategies to respond to those children and young people who are not engaged in any form of education. This group should not be put in the 'too hard basket' simply because they are not enrolled in a mainstream school, but rather be prioritised. An outreach component, in partnership with the community sector, could be one way that DEECD could identify and support these children and young people re-engage in their learning in a way that is flexible and tailored to meet their educational and support needs.



## Therapeutic practice

Schools are also an important site for therapeutic practice. The Office of the Child Safety Commissioner (OCSC) notes in their valuable *Calmer Classrooms* publication:

Schools can become—or continue as—an extremely important point of reference for children whose lives are marred by abuse and neglect. Wherever possible, when a child's placement changes, schools should try to keep the child with them. A strong attachment to their school can provide a child with stability in an otherwise unstable world: offering relationships, maintaining friendships, providing positive and enjoyable learning opportunities and ultimately building resilience and hope.<sup>77</sup>

The OCSC developed *Calmer Classrooms* to assist kindergarten, primary and secondary teachers, and other school personnel, in understanding and working with children and young people whose lives have been affected by trauma.<sup>78</sup> Teachers are encouraged to build relationships with children and young people and understand how the effects of trauma on children's education, to better assist them in their learning and in the healing process.

All schools should be supported to implement a 'calmer classroom' approach as part of strategies to strengthen the schooling system to better ensure it better meets the needs of vulnerable children and young people.

## Transition Plans

VCOSS has welcomed the development of transition plans for all children when they move from kindergarten to primary school. To more effectively support vulnerable children and young people, VCOSS believes transition plans should be developed for children moving from primary to secondary school.

## Generalist youth services

... cost effective investments to build the capabilities of our ... youth represent the best form of prevention.<sup>79</sup>

Adolescence is a period where the brain goes through key developmental stages, with 17 per cent of brain cell connections made during this time, particularly neural connections in the frontal lobe – a key area for decision making, judgement and impulse control.<sup>80</sup> It is vital that young people have access to supports to help address issues that may compromise this vital development process.

Youth specific services play a key role in supporting the health and wellbeing of young people, helping to keep them on track in their learning, employment and community participation. A locally-based, integrated and comprehensive youth service system that is structured along a prevention – early intervention – secondary – tertiary service continuum is urgently required to ensure better supports for young people.

An increased focus on generalist youth support services is one of the key elements to ensure a more timely and integrated approach to supporting and promoting the health and wellbeing of young people. Generalist youth services provide early intervention, general information, advice and counselling to young people, and link them to specialist programs where needed. Such services can deliver significant economic and social outcomes for young people and the broader community.

There are currently large gaps in the availability of generalist youth services across Victoria, particularly in outer metropolitan and rural and regional areas, resulting in many young people not being able to access services until they reach crisis point.<sup>81</sup>

More intensive supports are also required for young people who are particularly at risk, such as homeless young people, young people in and leaving State care, Aboriginal young people, young people in contact with the youth justice system, young people with a disability, young people experiencing socioeconomic disadvantage and young people from culturally and linguistically diverse backgrounds. The evidence demonstrates that a case management approach that is able to link young people to specialist supports, such as mental health or drug and alcohol services, achieves the best outcomes.



# THE QUALITY, STRUCTURE, ROLE AND FUNCTIONING OF FAMILY SERVICES, STATUTORY CHILD PROTECTION SERVICES AND OUT-OF-HOME CARE

A good child protection system should be concerned with the child's journey through the system from needing to receiving help, keeping a clear focus on children's best interests throughout.<sup>82</sup>

## Strengthening the capacity of the family services system

Family support services provide invaluable assistance to parents, helping to reduce parental stress, improving parenting skills and confidence, and strengthening parent-child relationships. A strong and well-funded family services sector needs to be at the core of this support system. Support for families cannot be undertaken in isolation – it is critical that it is provided in a seamless, integrated way along the prevention - early intervention – secondary - tertiary service continuum. Sustained investment in a system of universally available family support services that complement and collaborate with a range of other services or interventions is required.

VCOSS members providing family support services report that their services are under constant pressure. Their capacity to provide early intervention family support services is limited because of the significant demands from more complex families that they are required to prioritise due to the fact that the children are at a higher risk. Continued under-funding of family support services, particularly early intervention supports, remains one of the key factors undermining improved outcomes for vulnerable children, young people and families. Currently family services provide 'earlier intervention', not 'early intervention', with services unable to provide outreach and parenting support in many cases. In practice, families have to be approaching crisis for them to receive any support.

The ChildFIRST intake system plays a vital role along the service continuum but demand outstrips supply. This means that inappropriately high numbers of vulnerable families experiencing entrenched disadvantage with increasingly complex needs and requiring long-term support from a range of service providers are on waiting lists.

The system is currently unable to cope with demand, and funding is based on notification rates and socioeconomic disadvantage measures – aligning resource allocation to the needs of the tertiary system. Investment needs to be linked to population growth and the cost of service delivery in order for more families to be supported earlier and for longer.

## Workforce issues

An increasing emphasis on integrated and networked service delivery with a focus on primary prevention of child abuse and neglect will involve increased demand for skilled professionals in universal and specialist services.

An extensive child protection recruitment campaign has been underway since the implementation of the 2005 *every child every chance* reforms began. This campaign has been escalated in response to the Ombudsman's report. One of the challenges has been the common workforce between DHS child protection and the community sector.

This increased demand for skilled child protection professionals also comes at a time when there are extensive workforce shortages in the community sector in both the short and long term. Yet, despite the increasing demand and complexity in their work, community sector workers are among the lowest paid in Australia. This often results in a shift of community sector workers into government departments due to better wages and conditions.

There is a view that work with vulnerable children, young people and their families should be seen as part of a 'human services industry'. However, both components continue to compete for the same workforce. This is particularly problematic in rural and regional areas where the size of the skilled workforce pool is dramatically reduced.

The new Victorian Government, in the lead up to the 2010 Victorian Election, committed to develop and implement a community sector workforce strategy, along with committing to funding the outcomes of the Fair Work Australia equal remuneration case for community services (currently to the value of \$200 million over four years). It is vital that the findings of this Inquiry inform the development of this workforce strategy and lead to the development of a sustainable joint workforce that is fairly remunerated.

## Unit pricing

Funding for community sector organisations is provided by DHS in the form of set prices, or 'unit prices'. The DHS *Price Review Framework* details how reviews of unit prices will occur and sets out a series of guiding principles that reflect a collaborative approach with the sector.<sup>83</sup> DHS also report to the Human Services Partnership Implementation Committee (HSPIC) on the progress of the *Price Review Framework*.

HSPIC is a joint committee of peak bodies representing the community services, housing and community health, drugs and alcohol and mental health sectors and the Department of Human Services and Department of Health. HSPIC was established in 2004 to guide and implement the commitments of a partnership agreement between the then DHS and the community sector. There is currently a memorandum of understanding between the Departments of Health and Human Services and the community sector that commits to a shared vision and a strengthened industry relationship.

In 2008, the Department of Human Services reviewed the family services 'unit price' and recognised that current funding was inadequate. Although a full funding price was determined, this was not funded until the 2010-11 State Budgets and will be rolled out over four years – meaning that the unit price at the end of the four years will be six years out of date.

The Victorian Auditor-General's 2010 report, *Partnering with the Community Sector in Human Services and Health*, highlighted the significant role of the community sector in delivering services on behalf of government but highlighted the need for Government to

better partner with the sector, including the need improve the unit price review process to avoid situations such as the family services price review process and resulting funding gaps.<sup>84</sup>

VCOSS members report that continued partial funding of services is having a detrimental impact on clients, undermining better outcomes for them. Community sector organisations have a limited capacity to recruit and retain high quality staff, leading to longer waiting lists, a lack of multi-disciplinary teams, overstretched staff, inequitable industrial conditions and constraints on service innovation – all of which undermine their capacity to provide high quality services to support better outcomes for vulnerable Victorians. Opportunities have been missed to develop the flexible staffing structures needed to more effectively work with families.

The current rigid funding models also prevent family services providing on-going support to families who need longer-term interventions. Determining when cases open and close should be based on family needs, not funding methodologies and prescriptive timelines.

## Out-of-home care

The Ombudsman's investigation into the out-of-home care system provides a comprehensive analysis of the issues facing the children and young people in the system and the services which provide the care.<sup>85</sup> The Ombudsman's review of the deficiencies of the system echo the concerns of VCOSS member organisations which have raised concerns that they are participating in a system that further damages vulnerable children and young people.

An out-of-home care system with a broad range of evidence-based services that can be individually tailored to the needs of children, young people and their families needs to be developed. Many children and young people have specific issues that require tailored responses. These include: sibling groups, Aboriginal children and young people, children and young people that exhibit sexually abusive behaviours, young people who themselves are parents and children and young people with a disability. For example, services report that the needs of children and young people with a disability are not met by the out of home care system, particularly the standard four bed model in residential care. This was also noted by the Victorian Ombudsman.<sup>86</sup> Similarly, services also report that current models of care do not provide an adequate response for children and young people engaging in sexually abusive behaviours. See the MacKillop Family Services Practice Example below.

Systemic changes are required to improve out of home care, including better assessments, a better range of placement options (eg. vocational as well as residential, professional foster care), more therapeutic resources, an improved funding model, more multi-dimensional and intensive supports, systemic linkages across service systems, and a system that continues to 'be a good parent' to young people after they leave care.

It is essential that activity-based funding is introduced as part of any reforms to out of home care services. The current crisis at the tertiary end of the system will continue unless the funding model is refined. This issue is explored in further detail in the Berry Street submission and the joint submission of Anglicare Victoria, Berry Street, MacKillop Family Services etc.

**Practice Example:****MacKillop Family Services two bed long term specialist residential care model<sup>87</sup>**

The MacKillop Family Services Long Term Specialised Care service provides residential care for children and young people aged 9-17 years on statutory orders in six two-placement units in Melbourne's North-West Metropolitan Region. The residential units aim to create a stable, secure and therapeutic care environment for statutory clients with specialised needs. The two placement model also provides long term stability of carers and support staff to help develop the relationships that are critical for therapeutic care and to help provide greater structure, routine and predictability for young people.

The young people placed with the Long Term Specialised Care service have typically experienced significant trauma and present with multiple needs such as intellectual disability, mental health issues, and / or engaging in sexually abusive behaviours that prevents placement in less intensive care options such as home based care.

The young person's needs and levels of risk are assessed and addressed with appropriate casework and risk management strategies. Secondary consultation is provided to all staff regarding each young person with the aim of supporting a therapeutic approach to care. Program staff also liaise with other services as required particularly mental health, drug and alcohol services and the Male Adolescent Program for Positive Sexuality (MAPPS).

A review of the service in 2010 found the model has enhanced stability for clients and supported them in transition to ongoing services including lead tenant services, family, supported accommodation and adult disability accommodation.

The successful placement of children and young people in alternative care arrangements is heavily dependent upon the levels of support and assistance that the children, young people and carers receive during the placement. Multi-dimensional and intensive supports must incorporate the strengthening of links between service systems and the broader community to more effectively address the complex needs of many children and young people in care. See the St Luke's Anglicare practice example below.

**Practice example:****St Luke's Anglicare Family Coaching program<sup>88</sup>**

St Luke's Anglicare provides a range of individual, family and community support services, training and consultancy services across the Loddon Mallee and Riverina regions. St Luke's have developed a Placement Prevention and Reunification Pilot alongside Bendigo District Aboriginal Cooperative and Njernda Aboriginal Cooperative with the aim of increasing the health, wellbeing and safety of children and young people who are risk of entering the Out of Home Care system. This pilot program will work in conjunction with existing placement prevention programs and alongside Bendigo District Aboriginal Cooperative, Njernda and Child Protection.

Referrals come from DHS Child Protection for families where placement prevention is highlighted. The Intake Response Assessment and Review (IRAR) team, in conjunction with Child Protection, undertake a comprehensive assessment of the family situation and their capacities and needs using the Best Interest guidelines. Currently, most assessments focus on protective concerns and immediate safety

issues of children. Placement Prevention Programs give greater attention to the family's capacities and needs at the point of placement and/or when there is a high risk of placement.

This initial information informs the assessment team about potential pathways for the child and the needs of the family. At the conclusion of the assessment a Wraparound Plan is developed with the family and support services. This plan is used as the basis of all intervention and supports. A range of services and programs will be provided to families based on the assessment that focus on addressing protective concerns and building parenting capacity. These include:

- ❑ outreach support by Family Coaching workers;
- ❑ links to specialists services including Parenting Assessment and Skills Development Program, Aboriginal family support services and a therapeutic clinician;
- ❑ domestic Coaching;
- ❑ financial Coaching;
- ❑ education and vocational support for children, young people and families;
- ❑ respite options;
- ❑ adventure and recreational camps; and
- ❑ Early Years program.

The IRAR team work closely with St Luke's Out of Home Care services to monitor progress in preventing placement, to plan and monitor reunification plans, and to plan the exit from the placement prevention and Out of Home Care system into the most appropriate service response that is required to maintain stability for the family. The Pilot started in November 2010 and will run for two years. There are three other pilots in Victoria (North east metro, South East metro and Barwon) with slightly different models. The Pilot will be evaluated by DHS. Further information is provided in the St Luke's Anglicare submission to the Inquiry.

Foster carers play a critical role in the provision of care to support the wellbeing of children and young people who are vulnerable. The current situation of multiple placements reflects the diminishing number of foster carers, and the increasing complexity of need of many children and young people in care. A capacity building approach to foster carers is required, with an increased investment in training and support, and increased reimbursement rates for foster carers. Foster carers also require ongoing support such as linkages to social workers who can assist carers understand and deal with the complex issues the children and young people may present with.

## Aboriginal children and young people

For Victorian Aboriginal children and young people in out of home care, it is critical that the placement be based on a culturally competent assessment of need and that any placement is culturally safe. The promotion of Aboriginal culture needs to be a central part of all child-focused planning and intervention.

VCOSS supports the introduction of Cultural Plans for all Aboriginal children and young people in out of home care to better support their cultural connections. The establishment of Cultural Plans are particularly important where Aboriginal children and young people are placed with a non-Aboriginal carer. It is important to that the preparation of cultural plans

for Aboriginal children in out of-home care is mandatory and that there is a consistent approach to monitoring and developing these plans.

Kinship care is particularly important to maintain the connection of Aboriginal children and young people to their community. Any reforms must ensure that greater support is provided for kinship carers to meet the actual costs of care.

A critical issue that needs to be addressed by the Panel is the lack of implementation of Section 18 of the *Children, Youth and Families Act 2005*, which allows the Secretary of the Department of Human Services to authorise the principal officer of an Aboriginal Agency to exercise specified powers in relation to a protection order for a child. Since August 2007, DHS has been working with Aboriginal community controlled organisations to develop the policy to implement S.18, however it is yet to be fully implemented. VCOSS is concerned at the delay in implementing this important part of the 2005 legislative reform. An implementation date needs to be determined and ACCOs resourced to develop the capacity to assume these powers.

## Therapeutic responses

In developing models for providing out-of-home care, it is critical that the continuum of resourced placement options is strengthened. New therapeutic and intensive treatment service models for out-of-home care services need to be identified and implemented.

The underpinning principle of therapeutic care is that the relationships children and young people develop with carers, schools, professionals and the interrelationships between these stakeholders is key to promoting stability and positive and sustainable outcomes. Therapeutic care aims to address the trauma associated with abuse and neglect and to promote healing and recovery. Rather than providing basic care and managing behaviour therapeutic care emphasises relationships and considers and responds to the child's underlying needs.<sup>89</sup>

VCOSS welcome the Therapeutic Residential Care pilots, which operate in 12 sites across Victoria. The pilots are guided by a theoretical framework which provides that programs:

- ❑ address the therapeutic needs of each child/young person based on a specialised comprehensive and in-depth assessment;
- ❑ be responsive to the particular characteristics and needs of each child/young person in order that they can heal, develop and grow;
- ❑ develop an individualised therapeutic care program/personal treatment plan for each child/young person to guide implementation of individualised service delivery which is reviewed regularly and relatively frequently;
- ❑ seek to bring about directed and clinically significant change in the child/young person through goal directed, planned and integrated therapeutic interventions;
- ❑ recognise underlying and significant life events which result in trauma and disrupted attachment leading to complex, challenging and trauma related presentations;
- ❑ provide an approach to care which is sensitive, respectful and actively explores and seeks to understand each child's unique circumstances and experience arising from the impact of the child's and their family's culture, particularly Aboriginal children and those from culturally and linguistically diverse backgrounds;
- ❑ provide skilled and trustworthy professional adult figures who have been trained to work in this therapeutic environment;



- ❑ listen to and hear the voice of children/young people and ensure that young people have the opportunity and are supported to participate in decision making about their therapeutic program and placement;
- ❑ offer a specially designed and created multi-disciplinary care team;
- ❑ recognise that for Aboriginal children, the maintenance of connections or reconnection with their culture and identity through contact with their family and community, is a key factor to their health and well-being;
- ❑ utilise relevant service networks to facilitate engagement and the provision of specialist and ongoing supports to clients.<sup>90</sup>

These Therapeutic Residential Care pilots need to be expanded system-wide to support improved outcomes for vulnerable children and young people.

The Stargate program also provides some valuable learnings as to effective programs to support improved outcomes for vulnerable children and young people. This program provided critical early support for children and young people aged 0-17 as they enter care to identify mental health, social, cognitive and behavioural issues so as to link the them to appropriate supports at the stage that they are undergoing significant upheaval. It was an initiative of the Royal Children's Hospital CAMHS service, child protection services and out of home care agencies in the Western Metropolitan Region. The Stargate program was a good example of an effective collaborative and multi-disciplinary partnership between mental health, child protection services and community agencies. The Stargate program illustrated the need for, and benefits of, a comprehensive assessment for children in out of home care. Stargate provided the assessment service and then link children and young people into ongoing supports.<sup>91</sup>

Therapeutic models of care are particularly relevant for Aboriginal communities where workers may have to address multigenerational trauma. Aboriginal services should have as a core component of their service a skilled, culturally competent Therapeutic clinician to inform agencies practice with traumatised children and young people.

## Leaving Care

Leavers from state care are vulnerable young people who need the same ongoing support effective parents would give their children. For a child in the general population, leaving home is a process of transition; it takes time, with many false starts and recoveries, but with the continuing support of family and friends, a level of 'independence' can be achieved. Why would we expect it to be different for those transitioning from care, young people who, almost by definition, already have experienced disadvantage?<sup>92</sup>

As with the out of home care system, there is a significant amount of research which highlights the challenges faced by children and young people leaving the state care system.<sup>93</sup> Research continues to demonstrate that young people leaving care have significant poorer life outcomes than other young people, having lower education attainment and higher unemployment rates, unstable employment patterns, higher levels of homelessness, early parenthood and ongoing poverty.

Much more is required to ensure appropriate levels of support for young people leaving state care, despite the progress made since the 2005 reforms. There is an urgent need to provide support for young people after they leave care at least until the age of 25. In addition, care leavers should have priority access to housing, health, education services and other specialist services. See the MacKillop Family Services Practice example below.



**Practice Example:****MacKillop Family Services Cluster Model in the Southern Metropolitan region<sup>94</sup>**

The 'Cluster' demonstration model aims to address the needs of young people 16 to 18 years of age in out of home care who no longer need the highly structured models of residential care, or home based care, but who need support to live semi-independently as part of their transition to independence. The "step down" model allows young people to develop independent living skills with the level of support decreasing as they 'graduate' through the program.

This model has the capacity to provide accommodation and support for some young people post the expiry of their Custody to Secretary Order (CSO) or Guardianship to Secretary Orders (GSO).

The 'cluster units' are self-contained units with on site and outreach supports. It involves two key components;

1. An Enhanced Lead Tenant (ELT) Program: providing accommodation with a range of supports and services to four young people who are transitioning to independent living from the out of home care system.
2. Leaving Care Transitional Housing Management (THM) Support Program: providing accommodation and supports to two (2) young people assessed as needing a longer period of accommodation beyond the expiration of their CSO or GSO.

The ELT units are co-located at the same site as the Leaving Care THM Unit enabling young people to remain in the same location.

This model aims to better prepare young people in out of home care for living independently and provide time and support to find housing, through public housing or private rental.

# THE INTERACTION OF DEPARTMENTS & AGENCIES, THE COURTS & SERVICE PROVIDERS AND HOW THEY CAN BETTER WORK TOGETHER TO SUPPORT AT-RISK FAMILIES AND CHILDREN

VCOSS refers the Panel to our outline of the need for improved whole of government responses to support better outcomes for vulnerable children, young people and families, the need for a *Statewide Plan for Children and Young People*, the value of a system thinking approach (included in the *Key Principles and Directions* section); and the role of schools (included in the 'Strategies to enhance early identification of, and intervention targeted at, children and families at risk...') in relation to this section.

To improve outcomes for vulnerable children, young people and families, there is a need for significant system change across all the systems and structures that support and promote their wellbeing, learning, health and development.

Improved integration and strengthened linkages across all government policy and service areas that support the wellbeing of children and young people is required. The development and strengthening of collaborative approaches need to extend from early childhood education and care services, schools, family support, health, mental health, housing and homelessness, drug and alcohol and domestic violence services, to police, transport services, through to broader community strengthening infrastructure such as neighbourhood houses.

A *Statewide Plan for Children and Young People* would provide a valuable cross-government framework that would help drive strengthened collaborative approaches through articulating a shared vision of how children's and young people's wellbeing can be better enhanced through such approaches.

Systems thinking provides a valuable framework for developing improved responses to better support vulnerable children, young people and families, pointing to the need for a central framework that:

- ❑ clearly establishes the direction of change with defined broad outcome goals;
- ❑ establish targets and specify core evaluation requirements based around these broad outcome goals;
- ❑ explicitly allows for innovation and experimentation with cause and effect;
- ❑ sets boundaries that cannot be crossed by any implementation strategy;
- ❑ allocates resources, but without specifying how they should be used – resource use to be determined at the local level;

- ❑ incorporates mechanisms to assist in the translation or up-scaling of the learnings from innovative practice - both in terms of what worked well and what did not – more broadly across the system.<sup>95</sup>

## Partnership agreements

As noted, formal partnership agreements currently exist between government departments and the community sector. There is the *Partnership Agreement between DEECD and the Victorian Community Sector 2010-2014*, as well as the *Memorandum of understanding 2009-2012* between the independent health, housing and community sector and the Department of Human Services. VCOSS believes both of these agreements need to be identified by the Inquiry as an opportunity for action to develop improved partnerships and linkages at the local level, particularly between schools and local community sector organisations, so as to support improved outcomes for vulnerable children, young people and families.

It is also important to recognise that partnerships and collaborative processes are not cost neutral and participation, while vital, does come at a significant cost to the community sector. Current funding models do not intensively resource partnership development, participation and sustainability, despite partnership and collaboration being an important focus of key parts of the services system, such as the Child FIRST intake system. Although Child FIRST is an effective model, its benefits are compromised by the lack of specific partnership resourcing in current funding frameworks.

Time spent engaging in partnerships often comes at the expense of service delivery. Participation in partnerships and collaboration need to be factored into any recommendations the Inquiry makes around funding mechanisms, models and levels. The Primary Care Partnerships model, funded by the Department of Health, may provide useful insight into how partnerships can be effectively funded.

One of the strongest criticisms of the community sector, particularly those organisations that are working in direct service delivery, has been the perceived lack of communication and collaboration between DHS and DEECD, despite the presence of the two protocols for the interaction of these departments: the *Partnering Agreement – School Attendance and Engagement of Children and Young People in Out of Home Care* and the second protocol is *Protecting the safety and wellbeing of children and young people: A joint protocol of the Department of Human Services Child Protection, Department of Education and Early Childhood Development and Victorian Schools*. While work may be occurring between the two departments at a bureaucratic level, this has been rarely communicated or demonstrated to the sector. There has also been a lack of involvement by the Department of Health (DOH) in supporting vulnerable children and young people since the machinery of government changes that saw health separate from DHS.

The sector is also critical of their lack of inclusion in these processes, particularly given the crucial role the community sector plays in delivery services to vulnerable children, young people and their families on behalf of Government. To facilitate improved linkages and more collaborative approaches between DHS, DEECD and DOH, it would be helpful to review the structure and implementation of the DHS – DEECD Partnering Agreement and Joint Protocol to better reflect the role of the community sector and to also include the Department of Health.

It is also important to consider the need to include other Government departments, agencies and service providers when thinking about the development of partnership

structures and mechanisms. The Children's Services Coordination Board (CSCB) is one mechanism that could be utilised in more meaningful way to improve linkages. The CSCB is a statutory authority that brings together key decision makers across Departments to ensure coordination of activities impacting on children. The CSCB comprises of the Chief Commissioner for Police and the Secretaries of the Departments of Premier and Cabinet, Treasury and Finance, Education and Early Childhood Development, Human Services, Planning and Community Development and Justice. Improving interactions to better support at-risk families, children and young people must be at the core of the work of CSCB and should be transparently reported to the Victorian Parliament and the community.

# THE APPROPRIATE ROLES AND RESPONSIBILITIES OF GOVERNMENT AND NON-GOVERNMENT ORGANISATIONS IN RELATION TO VICTORIA'S CHILD PROTECTION POLICY AND SYSTEMS

VCOSS is aware that there are a range of proposals being developed and put forward to the Inquiry regarding the roles and responsibilities of DHS and non-government agencies to address concerns about the multiplicity of roles that DHS has including legal guardian, legislator, policy maker, funder, and regulator and the inherent conflict of interest between these roles.

VCOSS believes there are a range of options to address these concerns, and that further detailed consideration and discussion is required to identify the best options that will support improved outcomes for vulnerable children, young people and families. VCOSS strongly encourages the Panel to engage more deeply with key community sector organisations in developing their recommendations.

A key issue for the Panel will be to ensure that any reforms do not increase the regulatory burden on community sector organisations. VCOSS wishes to highlight to the Panel the significant work that is underway at both a State and National level regarding reducing the regulatory burden on the not-for-profit sector. This includes:

- ❑ work at a Commonwealth jurisdiction around the development of national regulator for the not-for-profit sector;
- ❑ the findings of the Productivity Commission Inquiry in to the Contribution of the Not-for-Profit Sector, particularly the recommendations around funding, contracting and regulation;
- ❑ the work of the Office of the Community Sector and the development of a Common Funding and Service Agreement;
- ❑ the work of the Victorian State Services Authority into reducing red tape;
- ❑ reform of the Associations Incorporated legislation; and,
- ❑ the current DHS process around the development of the One DHS standards.

In particular, VCOSS would like to draw the Panel's attention to the development of the *One DHS Standards*. This process has been undertaken in a partnership between the DHS and the community sector, to develop one set of standards so that funded organisations only have to be independently reviewed once every three years, regardless of how many DHS programs they are funded to provide from the various divisions. This process has taken a number of years to be completed and is a significant achievement that will have a significant impact on funded agencies and in turn on the quality of services that people

accessing services receive. For example, a child and family welfare agency may currently receive funding from the Children, Youth and Families division, the Office for Housing and the Disability Services division and as part of this funding they would be required to undergo three separate accreditation processes in a three year period in order to meet the requirements of one single department. Through the development of the *One DHS Standards*, this regulatory burden has been reduced and the delivery of quality and empowering services has come to the forefront, with a strong focus on client rights and involvement. This is just one example of the work that is being undertaken to reduce the regulatory burden on the sector, while concurrently improving client outcomes.

VCOSS encourages the Panel to consider any systems change reform in light of this current work – it is vital that any changes takes into consideration this broader work and not undermine what it is trying to achieve. Any systems change must reduce regulatory burden to improve service delivery and in turn outcomes for children. As we move towards a more integrated and cross-Departmental, agency and jurisdictional way of service delivery, it is vital that processes are put in place to ensure quality service delivery and accountability.

# POSSIBLE CHANGES TO THE PROCESSES OF THE COURTS

VCOSS supports reforms that seek to replace the adversarial nature of the decision making process of the courts with a more inquisitorial decision making process. This reform has long been recommended by many previous reviews of the Victorian child protection system.<sup>96</sup>

Any recommended reforms need to consider the following principles:

- ❑ the best interests of the child is paramount in all decision making processes.
- ❑ all parties in any hearing, including the children, young people and families involved, are adequately supported to participate in court processes. Families need to be provided with information regarding these processes and the implications of decisions. There also needs to be adequate safeguards, through the provision of legal representation and information.
- ❑ specific communities require additional supports and information to participate, particularly those people from Aboriginal communities and Culturally and Linguistically Diverse communities. The Cultural Competence Framework developed under the 2005 legislation should apply to any court processes, including Alternative Dispute Resolution processes. Families require someone present throughout the process that is culturally knowledgeable who can both translate and contextualise the process. Culturally appropriate dispute resolution processes, such as the current Aboriginal Family Decision Making process, need to be further strengthened and legal support provided to families throughout the process. Children, young people and their families also need to be provided with culturally appropriate legal assistance through relevant organisations.
- ❑ children and young people have a right to be adequately represented and have their voices heard during the court processes. In order to ensure that the best interests of the child are met by the Victorian Children's Court process it is critical that the process support children and young people to meaningfully participate and be heard in the court process and in their broader interaction with DHS. Currently DHS represent children under the age of seven in court processes. The lack of independent representation for these children is concerning and VCOSS calls for the introduction of independent advocates, with early childhood expertise, to work with these children to represent their views.
- ❑ that principles of procedural fairness are adhered to.

VCOSS is aware that there are a range of views and models being suggested, including consideration of a move towards an Expert Panel. VCOSS believes further exploration of such models is required before any reforms are recommended to ensure reforms promote the best interests of the child and maintain the procedural fairness of the court system.



# MEASURES TO ENHANCE THE GOVERNMENT'S ABILITY TO PLAN FOR FUTURE DEMAND FOR FAMILY SERVICES, STATUTORY CHILD PROTECTION SERVICES AND OUT-OF-HOME CARE

Victoria's significant and sustained population growth over the past six years, and the anticipated continued growth, demands strategic short and long-term responses. Different population growth patterns across the State mean different responses are required in different locations in order to support improved outcomes for vulnerable children, young people and families. For example, Victoria's overall population growth for the year ending June 2010 was 1.8 per cent. For metropolitan Melbourne, growth was at 2 per cent while for some urban fringe municipalities, growth was up to 8.8 per cent.<sup>97</sup>

With funding for services in these areas not keeping pace, disadvantage is becoming increasingly entrenched. Like many areas of service delivery in Victoria, supports for families and children have not kept up with population growth on the urban fringe and in fast growing regional cities. The result is pressured services which have to close their waiting lists and deny families access to critical early intervention.

At the tertiary end of the system, The Victorian Ombudsman notes that DHS is already struggling to meet the demand which is projected to continue growing at a substantial rate.<sup>98</sup> Interestingly, the increasing demand for out of home care in Victoria has not been caused by increasing numbers of children entering the system but 'created by a tendency for children to remain in out of home care for longer periods of time' due to the complexity of the issues experienced by their families including family violence, substance use, low income, mental health concerns and physical or intellectual disabilities.

Therefore, demand pressures are associated with both population growth and the complexity of families within the system. While a greater focus on prevention and early intervention will over time assist to divert families from secondary and tertiary services, the Victorian Government also needs to develop a population-based funding framework for child, youth and family services. The Victorian Government needs to utilise data to forecast growth and emerging needs. The critical issue is to establish funding models that respond to need rather than rationing output models. Funding models need to enable services to develop a locally determined service mix to respond to local need.

It is essential that activity-based funding is introduced as part of any reforms to out of home care services. The current crisis at the tertiary end of the system will continue unless the funding model is refined. This issue is explored in further detail in the Berry Street submission and the joint submission of Anglicare Victoria, Berry Street, MacKillop Family Services etc.

# THE OVERSIGHT AND TRANSPARENCY OF THE CHILD PROTECTION, CARE AND SUPPORT SYSTEM

VCOSS supports measures to improve the transparency and accountability of the child protection system to enhance outcomes for children, young people and families. The Victorian Ombudsman concluded that the current accountability framework 'lacks sufficient rigour and transparency or the proactive elements required to ensure the state's response to children meets community expectation'.<sup>99</sup>

Critical features of a more transparent and accountable system include independent oversight and open channels of communication. VCOSS supports the development of enhanced independent oversight for the system and a greater focus on the outcomes for individuals and families who are part of the system.

## Outcomes framework to drive improved wellbeing of children and young people

VCOSS urges the Panel to prioritise a focus on outcomes for children and young people as one of the central ways to promote and protect the wellbeing and safety of children and young people. A more outcomes driven focus, where service effectiveness is judged on the outcomes achieved, that is evaluated and systematically monitored and used to highlight strengths and deficits in order to drive practice improvements, needs to be a key part of any reforms.

The *Child Wellbeing and Safety Act 2005* provides a legislative framework for an outcomes based approach to children and young people. The Act states that the goal of government is that 'all children should be given the opportunity to reach their full potential and participate in society irrespective of family circumstances and background.'

As noted, the Department of Human Services and the Department of Education and Early Childhood Development have undertaken valuable work to develop the Victorian Child and Adolescent Monitoring System (VCAMS). VCAMS provides a valuable foundation on which to fully develop a cross-government framework to drive a stronger focus on wellbeing outcomes for children and young people. This framework can facilitate more integrated planning and service delivery across all services that impact on the wellbeing of children and young people. Critically, part of this framework will be the inclusion of both targets and measurement/evaluation mechanisms. Existing data collection mechanisms that support key reports such as the *State of Victoria's Children*, *State of Victoria's Young People*, and the *State of Victoria's Children: Aboriginal* can be utilised. It is important to note the work that has been undertaken over the past three years by the DHS to develop specific outcome indicators for vulnerable children involved with family services and child protection. This work needs to be incorporated into a comprehensive Statewide Outcomes Framework to better support the wellbeing of children and young people, particularly those who are vulnerable.

As highlighted in the *Statewide Plan for Children and Young People* section, an outcomes approach, linked to the Victorian Child and Adolescent Monitoring System (VCAMS) would prove invaluable in driving improved outcomes for vulnerable children and young people.

## Outcomes for children and young people leaving care

Improved tracking of the journeys of children and young people once they leave state care needs to be incorporated as part of a focus on outcomes. At present, there is too little knowledge of their pathways following leaving state care. The available evidence highlights that compared to the broader population, children and young people who have been in state care have poorer outcomes on measures across health, education, employment, wellbeing and development.<sup>100</sup> Many of those who have been in the child protection system move into the youth justice and adult correctional systems, homelessness system, and experience a range of mental health and drug and alcohol issues, and are often unprepared for an independent adult life.<sup>101</sup> Improved tracking of the journey of children and young people following them leaving care would not only provide greater transparency regarding their outcomes, it would also enable the State to remain linked in with the individuals and ensure ongoing support and referral as appropriate.

Victoria currently tracks the journeys of school leavers through the *On Track* program. *On Track Destinations of School Leavers* provides a comprehensive analysis of the destinations of Victorian students shortly after they leave school from years 10, 11 and 12. *On Track* ensures that Year 10-12 students are contacted after leaving school and assisted with further advice if they are not undertaking further education or training or in full time employment. *On Track* also includes a research component to provide a comprehensive picture of the experience of young people after they leave school. Young people who are not studying or in full time employment and request assistance when surveyed are referred to relevant local agencies which can provide the advice and services they require.<sup>102</sup> In 2009, around 36,500 school-leavers participated in a telephone survey about their activities since leaving school.<sup>103</sup> VCOSS contends that if this number of school leavers can be tracked, it is clearly possible, and indeed crucial, to track the outcomes for the less than 600 young people in Victoria aged 15-17 years who leave care each year.

## Children and Young Person's Commission

VCOSS welcomed the Government's pre-election commitment to establish an Independent Children and Young People's Commission and we keenly anticipate the development of a such a Commission in Victoria.<sup>104</sup> We particularly support the Government's commitment to an independent Commissioner that can investigate and make recommendations directly to the Parliament.

VCOSS has long advocated for the creation of an independent Children and Young People's Commission for Victoria. The rationale for a Victorian Children and Young People's Commission was outlined in the 2001 YACVic discussion paper, *Are you listening to us?*<sup>105</sup> At the time of the release of this discussion paper, a community coalition of over 50 organisations, including VCOSS, advocated collectively for the establishment of an Independent Commission for Children and Young People in Victoria.

Since then, Victoria has had the appointment of an Advocate for Children in Care in 2004, replaced in 2005 by the Office of the Child Safety Commissioner. Whilst VCOSS welcomed the appointment of both the Advocate for Children in Care and the Child Safety Commissioner, both models have fallen short of what is needed to affect systematic change to better protect and promote the rights, interests and wellbeing of all children and young people in Victoria.

VCOSS fully supports the work of the current Office of the Child Safety Commissioner, which has undertaken significant work to promote and enhance the wellbeing and safety of children and young people. The critical limitation, however, of this model is that the Commissioner reports directly to the Minister responsible for Child Protection services which limits the independence of the role. The Ombudsman's report into child protection highlighted shortcomings in the capacity of the Child Safety Commissioner to provide the level of meaningful oversight and scrutiny of DHS:

The key independent scrutineer of the child protection program is generally considered to be the Child Safety Commissioner. My investigation concluded that he does not have the ability to initiate investigations and has limited investigative powers. Also, the Child Safety Commissioner has no coercive powers to investigate matters and relies of the cooperation of the department and other agencies to perform its functions.<sup>106</sup>

VCOSS echoes these concerns, and for this reason continues to advocate for the establishment of an independent Commissioner for Children and Young People in Victoria.

An independent Commission would have a unique responsibility for protecting and promoting the rights and wellbeing of children and young people, particularly those who are vulnerable, and should also have a broad overview of the issues affecting children and young people in government, non-government and business sectors. Importantly, a Children and Young People's Commissioner would provide a voice for, and advocate on behalf of children and young people.

VCOSS refers the Panel to the model for a Commission outlined by the Youth Affairs Council of Victoria (YACVic) in *Are you Listening to Us? The case for a Victorian Children and Young People's Commission*.<sup>107</sup> As outlined in this model, the key principles that should underpin a Victorian Children and Young Person's Commission are its independence, its legislative basis, its focus on children and young people up to the age of 18, its board perspective, its accessibility to children and young people, and its level of resourcing.

It would be important that the Commission incorporate a strong focus on the wellbeing of Aboriginal children and young people. For this reason, VCOSS proposes that a Deputy Commissioner be appointed with a specific portfolio on Aboriginal children and young people. This is similar to the Human Rights and Equal Opportunity Commission model at a national level where there is a President and Human Rights Commissioner and five Commissioners with responsibility for various portfolio areas, including an Aboriginal and Torres Strait Islander Social Justice Commissioner.

An Independent Children's and Young Person's Commission could undertake the functions currently the mandate of the Office for the Child Safety Commissioner. It's broader mandate and independent statutory powers could demand a level of accountability of the Department of Human Services, and other departments that provide critical services that support the wellbeing of children and young people such as the Department of Education and Early Childhood Development, in maintaining a consistent focus on compliance with best practices service standards and a consistent prioritising and adequate resourcing of child protection services by Government.

## Community Visitor Scheme

In his investigation of out of home care, the Victorian Ombudsman noted that schemes adopted by other jurisdictions such as community visitor schemes, independent advocates and regular surveying of children in out of home care placements 'would provide a level of scrutiny not presently evident in the Victorian out of home care system'.<sup>108</sup> VCOSS supports further exploration of a Community Visitor type scheme for children and young people in state care in Victoria that can support improved outcomes.

In exploring the options to improve the scrutiny of the out of home care system in Victoria, a range of issues that need to be considered. The starting point needs to be how any scheme can support improved outcomes for children and young people in out of home care. Following this, in developing any model other key considerations include resourcing the recruitment, training and retention of appropriate volunteers, the implementation of a robust reporting mechanism with clear requirements for action to ensure any issues are addressed at individual and systemic levels so as to truly enhance outcomes for vulnerable children and young people.

# REFERENCES

- <sup>1</sup> Ombudsman Victoria, *Own motion investigation into the Department of Human Services Child Protection Program*, November 2009, Melbourne, p. 8.
- <sup>2</sup> Department of Human Services, *Protecting Children: The Next Steps*, July 2005, Victoria.
- <sup>3</sup> Department of Human Services, *The Best Interests Principles: a Conceptual Overview*, Best Interests series, 2007, Victoria.
- <sup>4</sup> KPMG, *Evaluation of the Child and Family Services Reforms - Interim Report*, September 2009, Department of Human Services, p.9.
- <sup>5</sup> Centre for Community Child Health, *Best Start Evidence Based Summary*, December 2001, Royal Children's Hospital, Melbourne.
- <sup>6</sup> Adapted by St Luke's Anglicare from D. O'Neil, *Shaping The Future Practice Framework, Partnership Against Domestic Violence*, 2003, Commonwealth Government – Office of the Status of Women.
- <sup>7</sup> E Munro, *The Munro Review of Child Protection Interim Report: the Child's Journey*, February 2011, London, p.27.
- <sup>8</sup> Ibid, p.21.
- <sup>9</sup> Department of Human Services, July 2005, op cit.
- <sup>10</sup> <http://www.eduweb.vic.gov.au/edulibrary/public/govrel/Policy/children/vcamsframework.pdf>.
- <sup>11</sup> Department of Education and Early Childhood Development, *The state of Victoria's children 2009: Aboriginal children and young people in Victoria*, 2010, Victoria, , see: <http://www.education.vic.gov.au/about/directions/children/annualreports.htm>
- <sup>12</sup> DEECD, *Pathways to re-engagement through flexible learning options: a policy direction for consultation*, A discussion paper for consultation, State of Victoria, 2010.
- <sup>13</sup> KPMG, *Re-engaging our kids – A framework for education provision to children and young people at risk of disengaging or disengaged from school*: Prepared for the DEECD, 2009.
- <sup>14</sup> Department of Human Services, July 2005, op cit, p.19.
- <sup>15</sup> Department of Human Services, *Putting children first...planning for the future: Challenges in early childhood*, November 2005, Victoria.
- <sup>16</sup> Department of Premier and Cabinet, *Victoria's Plan to Improve Outcomes in Early Childhood*, February 2007, Melbourne.
- <sup>17</sup> For example *The Blueprint for Education and Early Childhood Development* and any policy frameworks that may replace this, *Because Mental Health Matters - Victorian mental health reform strategy 2009-19*, *Victorian Homelessness Strategy* and specific initiatives to support vulnerable young people such as *Youth Partnerships*.
- <sup>18</sup> Department of Human Services, *Pathways to partnership: The final report of the Out of Home Care Partnership Case Study Review*, June 2003, Victoria; Department of Human Services, *Family and Placement Services Sector Development Plan*, August 2006, Victoria; Department of Human Services, November 2005, op cit; Department of Education and Early Childhood Development, *Blueprint for Education and Early Childhood Reform*, 2008, Victoria.
- <sup>19</sup> G Allen, *Early Intervention: The Next Steps*, January 2011, London, p.3.
- <sup>20</sup> J Chapman, *System failure: Why Governments must learn to think differently*, 2004, Demos, London, p.18.
- <sup>21</sup> Ibid, p.19.
- <sup>22</sup> C Atkins, in R Black, Ed., *New school ties: Networks for success*, Foundation for Young Australians, Melbourne, 2008.
- <sup>23</sup> Australian Research Alliance for Children and Youth, 2009, *Inverting the pyramid: enhancing systems for protecting children*, ACT, p47.
- <sup>24</sup> Department of Education and Early Childhood Development, *The state of Victoria's children 2009: Aboriginal children and young people in Victoria*, 2010, Victoria, , see: <http://www.education.vic.gov.au/about/directions/children/annualreports.htm>
- <sup>25</sup> Ombudsman Victoria, *Own motion investigation into Child Protection – out of home care*, May 2010, p.67.
- <sup>26</sup> Department of Human Services, *Establishing priorities for gain: the health, development, learning and wellbeing of Victoria's young children*, 2004, Melbourne.
- <sup>27</sup> I Prillentsky, G Nelson, & L Peirson, Eds., *Promoting family wellness and preventing child maltreatment: Fundamentals for thinking and action*, 2001, Toronto: University of Toronto Press Incorporated
- <sup>28</sup> Australian Research Alliance for Children and Youth, op cit, p.31.
- <sup>29</sup> Australian Research Alliance for Children and Youth, ibid, p.79.
- <sup>30</sup> Council of Australian Governments, *Protecting Children is Everyone's Business: National Framework for Protecting Australia's Children 2009–2020* 2009, Commonwealth of Australia. ACT, p. 7.
- <sup>31</sup> Ibid.
- <sup>32</sup> P Holzer, *Defining the Public Health Model for the child welfare services context*, 2007, The Australian Institute of Family Studies.
- <sup>33</sup> Australian Research Alliance for Children and Youth, op cit, p.4.
- <sup>34</sup> Munro, op cit, p.23.
- <sup>35</sup> Vichealth, *Preventing violence before it occurs: A framework and background paper to guide the primary prevention of violence against women in Victoria*, 2007, Melbourne.
- <sup>36</sup> Victorian Law Reform Commission, *Protection Applications in the Children's Court: Final Report 19*, 2010, Melbourne, p.35.
- <sup>37</sup> A Nolan, C Semple, D Dunt, M Kelaher & P Feldman, *Statewide evaluation of Best Start – Final report*, [http://www.eduweb.vic.gov.au/edulibrary/public/beststart/2007/bs\\_eval\\_report\\_Sept2006.pdf](http://www.eduweb.vic.gov.au/edulibrary/public/beststart/2007/bs_eval_report_Sept2006.pdf)
- <sup>38</sup> Munro, op cit, p.26.
- <sup>39</sup> This information taken from Kaleidoscope Projects and Research, *Bairnsdale Neighbourhood House Community Kindergarten Evaluation Report*, October 2009, unpublished.
- <sup>40</sup> VicHealth, *People, Places, Processes: Reducing health inequalities through balanced health promotion approaches*, 2008, Melbourne, p.6.
- <sup>41</sup> Department of Education and Early Childhood Development, *The state of Victoria's children 2009: Aboriginal children and young people in Victoria*, 2010, Victoria, , see: <http://www.education.vic.gov.au/about/directions/children/annualreports.htm>
- <sup>42</sup> Australian Institute of Health and Welfare, *Child protection Australia 2009–10*, Child welfare series no. 51. Cat. no. CWS 39, 2011, Canberra: AIHW.
- <sup>43</sup> See VACCA for further information



- <sup>43</sup> Further information: <http://www.justice.vic.gov.au/wps/wcm/connect/justlib/doj+internet/home/your+rights/indigenous+ Victorians/aboriginal+justice/justice+-+victorian+aboriginal+justice+agreement>
- <sup>44</sup> Further information: <http://www.health.vic.gov.au/aboriginalhealth/victoria/index.htm>
- <sup>45</sup> M Bamblett, *Protecting Culture and Protecting the Future for Our Children*, Keynote Address, Friday 21 September 2007, Ngadluko Ngartunnaiya – For Our Children, SNAICC National Conference, Adelaide.
- <sup>46</sup> Victorian Aboriginal Child Care Agency, *Aboriginal Cultural Competence Framework*, Department of Human Services, November 2008.
- Further information: <http://www.cyf.vic.gov.au/indigenous-initiatives/archive/practice-guides/aboriginal-cultural-competence-framework>
- <sup>47</sup> Department of Education and Early Childhood, Wannik - *Learning Together, Journey to Our Future: Education Strategy for Koorie Students in Victoria*, State of Victoria, February 2008.
- Further info: <http://www.education.vic.gov.au/about/directions/wannik/aboutwannik.htm>
- <sup>48</sup> Centre for Community Child Health and Telethon Institute for Child Health Research, *A Snapshot of Early Childhood Development in Australia – AEDI National Report 2009*, 2009, Australian Government, Canberra, p6.
- <sup>49</sup> The Interface councils are Wyndham City Council, Melton Shire Council, Hume City Council, the City of Whittlesea, Nillumbik Shire Council, the Shire of Yarra Ranges, Cardinia Shire Council; and Mornington Peninsula Shire Council.
- <sup>50</sup> G Marston, L Morgan & J Murphy, *Human Service Gaps at the Interface between urban and rural*, 2003, RMIT, p.1
- <sup>51</sup> *ibid*
- Access Economics, *Staying Connected: A Cost Benefit Analysis of Early Intervention – prepared for the Interface Councils*, Melbourne, December 2008.
- <sup>52</sup> Department of Planning and Community Development, *Victorian Population Bulletin 2011*, 2011, Melbourne.
- <sup>53</sup> G Marston et al. p.5.
- <sup>54</sup> *Ibid*, p.14
- <sup>55</sup> F Tomazin, 'Bleak houses: debt, welfare crisis in the suburbs', *The Age*, April 3, 2011.
- <sup>56</sup> Munro, op cit, p11.
- <sup>57</sup> Developed from Prof Frank Oberklaid, *The early years agenda: A policy imperative*, presented at VCOSS Congress 01, October 2001; City of Melbourne, *A great start: Strategy for children and their families 2003-2006*, Di O'Neil, St Lukes Anglicare; Free Kindergarten Association – Multicultural Resource Centre, VCOSS State Budget 2002-03 Submission.
- <sup>58</sup> KPMG, *Child FIRST and Integrated Family Services – Interim Report 1*, Prepared for DHS August – September 2009, p.7.
- <sup>59</sup> Australian Research Alliance for Children and Youth, op cit, p.35
- <sup>60</sup> Australian Research Alliance for Children and Youth, op cit, p.55.
- <sup>61</sup> Liberal Party Victoria, The Nationals for Regional Victoria, *The Victorian Liberal Nationals Coalition Plan For Community Services*, 2010, Melbourne, p.52.
- <sup>62</sup> Victorian Auditor General, *Managing Drug and Alcohol Prevention and Treatment Services*, March 2011, p.ix.
- <sup>63</sup> Department of Human Services, *Summary of Housing Assistance 08-09*, State Government of Victoria, 2010, p.16.
- <sup>64</sup> Department of Human Services, *Rent Report: December Quarter 2010*, State Government of Victoria, 2010.
- <sup>65</sup> D MacKenzie & C Chamberlain, *Counting the homeless 2006*, Australian Bureau of Statistics, 2008.
- <sup>66</sup> Department of Human Services, *Child Protection and family violence: Guidance for child protection practitioners*, 2005, Victoria.
- <sup>67</sup> G Margolin, 'Children's Exposure to Violence', *Journal of Interpersonal Violence*, Vol. 20, No. 1, 2005, pp.72-8.
- <sup>68</sup> D Edgar, *Revamp community resources for schools*, presentation at the National Summit on School Education, 28 September 2001.
- <sup>69</sup> For example: R Black, *New schools ties: Networks for success*, Foundation for Young Australians, Melbourne, 2008; D Hargreaves, *Education epidemic: Transforming secondary schools through innovation networks*, 2003, DEMOS.
- <sup>70</sup> DEECD & VCOSS, *Partnership Agreement Between the Department of Education and Early Childhood Development and the Victorian Community Sector*, Melbourne, June 2010.
- 2010–2014
- <sup>71</sup> Ombudsman Victoria, May 2010, op cit, p.17.
- <sup>72</sup> *Ibid*.
- <sup>73</sup> KPMG, *Re-engaging our kids – A framework for education provision to children and young people at risk of disengaging or disengaged from school*, DEECD, 2010.
- <sup>74</sup> KPMG, *Re-engaging our kids – A framework for education provision to children and young people at risk of disengaging or disengaged from school*, DEECD, 2010.
- <sup>75</sup> See <http://www.education.vic.gov.au/senscyyouth/youthpartnerships/default.htm>.
- <sup>76</sup> Pilot areas: Greater Geelong, Queenscliff and Surf Coast, Yarra Ranges, Maroondah and Knox, Frankston and Mornington Peninsula, Swan Hill, Gannawarra, Buloke and Mildura, Ballarat, Hepburn, Pyrenees, Moorabool, Golden Plains, Greater Bendigo, Central Goldfields, Mount Alexander, Campaspe, Macedon Ranges and Loddon and Wyndham and Hobsons Bay – further information: <http://www.education.vic.gov.au/senscyyouth/youthpartnerships/default.htm>
- <sup>77</sup> Office of the Child Safety Commissioner, *Calmer classrooms: A guide to working with traumatised children*, 2007, Child Safety Commissioner, Melbourne, p.28.
- <sup>78</sup> *Ibid*.
- <sup>79</sup> K Henry, *Prevention: How do we build tomorrow's capability today?*, Presentation to the ARACY Conference, 3 September 2009.
- <sup>80</sup> DHS, DEECD, DPCD, *Vulnerable youth framework: Development of a policy framework for Victoria's vulnerable young people*, DHS, 2008.
- <sup>81</sup> J Rose & C Atkins, *Who's carrying the can? A report into youth service gaps in Victoria*, VCOSS, 2006.
- <sup>82</sup> Munro, op cit, p13.
- <sup>83</sup> DHS, *Price Review Framework*, DHS, Melbourne, October, 2008 – see: <https://fac.dhs.vic.gov.au/publicfolder/publications/DHS/ServiceAgreementsFunding/Price-Review-Framework-Oct08-final-web-version.pdf>
- <sup>84</sup> Victorian Auditor General's Office, *Partnering with the Community Sector in Human Services and Health*, State of Victoria, Melbourne, May, 2010.
- <sup>85</sup> Ombudsman Victoria, May 2010, op cit.
- <sup>86</sup> *Ibid*, pp.82-83.
- <sup>87</sup> This information provided by MacKillop Family Services. See the MacKillop Family Services supplementary submission for more detail.
- <sup>88</sup> This information provided by St Luke's Anglicare.
- <sup>89</sup> Berry Street Victoria, *Therapeutic foster care: Integrating Mental Health and Child Welfare*



---

to provide care for traumatised children, 2007, Melbourne.

<sup>90</sup> Department of Human Services, *Essential Service Design Elements Therapeutic Residential Care*, 2010, See

[http://www.cyf.vic.gov.au/\\_data/assets/pdf\\_file/0007/475108/national-therapeutic-residential-care-essential-elements.pdf](http://www.cyf.vic.gov.au/_data/assets/pdf_file/0007/475108/national-therapeutic-residential-care-essential-elements.pdf).

<sup>91</sup> Royal Children's Hospital Mental Health Service, *Protected and respected: Addressing the needs of the children in out-of-home care, the Stargate early intervention program for children and young people in out-of-home care*, 2002, Melbourne.

<sup>92</sup> J McDowall, *Transitioning from Care Report*, 2008, CREATE Foundation, p.18.

<sup>93</sup> For example, P. Mendes, 'Graduating from the State Care System: A Comparison of the Australian and New Zealand leaving care debates', *New Zealand Social Work Review*, Autumn/Winter 2003; S Raman, B Inder, & C Forbes, *Investing for success: The economics of supporting young people leaving care*, 2005, Centre for Excellence in Child and Family Welfare, Melbourne; G Johnson, K Natalier, P Mendes, M Liddiard, S Thoresen, A Hollows, & N Bailey, *Pathways from out-of-home care*, 2010, Australian Housing and Urban Research Institute, Melbourne; P Mendes, 'Towards a Community Development Support model for young people transitioning from state out-of-home care: a case study of St Luke's Anglicare in Victoria, Australia', 2011, *Practice*, Vol.23, No.2, 2011.

<sup>94</sup> This information provided by MacKillop Family Services. See the MacKillop Family Services supplementary submission for more detail.

<sup>95</sup> C Atkins, in R Black, Ed., *New school ties: Networks for success*, Foundation for Young Australians, Melbourne, 2008.

<sup>96</sup> A Freiberg, P Kirby & L Ward, *The Report of the Panel to Oversee the Consultation on Protecting Children: The Child Protection Outcomes Project*, 2004, Department of Human Services; J Carter, *Report of the Community Care Review*, 2000, Melbourne; Justice Fogarty, *Protective Services for Children in Victoria: An Interim Report*, 1989, Melbourne.

<sup>97</sup> Department of Planning and Community Development, op cit.

<sup>98</sup> Ombudsman Victoria, May 2010, op cit.

<sup>99</sup> Ombudsman Victoria, November 2009, op cit.

<sup>100</sup> Ombudsman Victoria, May 2010, op cit, p16.

<sup>101</sup> Ombudsman Victoria, May 2010, op cit, p19.

S Raman, B Inder & C Forbes, *Investing for success: The economics of supporting young people leaving care– Monograph No. 5*, Centre for Excellence in Child and Family Welfare, Melbourne, 2005.

S Raman & C Forbes, *It's not too late to care: Report on the research into life outcomes for people brought up in institutional care in Victoria – Monograph No.17*, Centre for Excellence in Child and Family Welfare, Melbourne, 2008.

<sup>102</sup> <http://www.education.vic.gov.au/sensecyouth/ontrack/default.htm>

<sup>103</sup> <http://www.education.vic.gov.au/sensecyouth/ontrack/faq.htm>

<sup>104</sup> Liberal Party Victoria, The Nationals for Regional Victoria, op cit, p.19.

<sup>105</sup> Youth Affairs Council of Victoria, *Are you listening to us? – The case for a Victorian Children and Young People's Commission*, 2001, Melbourne, p. 4.

<sup>106</sup> Ombudsman Victoria, November 2009, op cit, p.15.

<sup>107</sup> Youth Affairs Council of Victoria, op cit, p4.

<sup>108</sup> Ombudsman Victoria, May 2010, op cit, p21.