

# Roadmap for Reform: strong families, safe children

The first steps



**VICTORIA**  
State  
Government

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## Minister's foreword



A good childhood sets a child up for life, leaving them more likely to be healthy, to form positive relationships, to learn and to be in employment in adulthood.

We know that parents across Victoria want the best for their children.

But the odds are still stacked against too many children and families.


Many young people and front-line practitioners have told us that our children and families' services are overstretched and we need to offer broader support for children at risk and families under pressure.

Late intervention and rigid, fragmented programs not only lead to a confusing bureaucratic maze for parents seeking help but, more importantly, to serious failings for children and young people.

As a society, we share the responsibility for protecting children and giving them the opportunity for healthy development. We need to take this responsibility seriously.

Despite the tremendous efforts made by front-line workers and service delivery organisations, there is no avoiding the hard fact that our current systems of support have failed generations of children at risk. Those failings – documented by the Royal Commission into Family Violence, the Victorian Auditor General and the Commissioner for Children and Young People – must not be allowed to continue.

For the 8,000 children and young people in state care following abuse or neglect, we must do better. For children and parents who are the victims of family violence, and for those families who are struggling to get the help they need, we must do more. For Aboriginal communities scarred by the stolen generations, we cannot stand by and allow more trauma to occur.



The Royal Commission into Family Violence painted a stark picture of the impact of family violence on children and young people and their family relationships.

It has highlighted the need for children and families to be able to access connected, easy to understand services that they can trust.

The Andrews Government has committed to implementing all of the Royal Commission's recommendations.

The immediate actions spelt out in the Roadmap for Reform are an important step in that commitment, and will form part of our longer-term response as we build a better future for Victorian children, young people and families.

The Roadmap for Reform reflects the best evidence of what is working well or showing promise in Victoria and around the world. Our commitment is to work tirelessly to build confidence, stability and functioning within families by:

- making support and advice available to families in every community;
- driving a family-centred approach – led by children and parents' needs and risks, and a stronger voice for families in decision-making processes;
- building positive opportunities and connections for vulnerable families within their communities;
- building on the recommendations of the Royal Commission into Family Violence to develop shared responsibility and bring together the full range of services and supports victims and other vulnerable families need;
- prioritising earlier preventative support to identify issues early, rather than responding to them once they have happened;
- recognising and supporting cultural identity as a strength and protective factor for children and families; and
- transforming our out of home care system by building the capacity of home-based and culturally appropriate models of care and trauma informed treatment for victims of child abuse and neglect.

These actions add up to a \$168 million boost for children and families' services, which builds on last year's record budget. They also complement other key Andrews Government reforms: Education State, *Victoria's 10-Year Mental Health Plan*, Health 2040 and Back to Work.

Over the coming months the Andrews Government will continue to listen and test ideas with young people, families and survivors of violence. We will work closely with experts, practitioners and the many community leaders and organisations committed to delivering the recommendations of the Royal Commission into Family Violence and advancing the Roadmap for Reform.

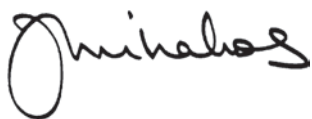
I would like to thank my Expert Advisory Group who, together with many young people and front-line practitioners, shared their knowledge and experience about how to deliver better support and achieve better outcomes.

Systemic reform is never simple. It takes time and resources to implement and the benefits can take years to come to fruition. But our Government is determined to take action because we know that governments, services and communities working together can make a difference.

We all share a collective responsibility to prevent the damage caused by child neglect, abuse and family violence and to support our children and young people to develop and reach their full potential.

Change must start now. The time has come to find new ways to secure a good life for our most vulnerable children and young people.

This is a challenge that belongs to the whole Victorian community.



**Jenny Mikakos MP**  
Minister for Families and Children

# The case for change

For most children and young people, Victoria is a great place to grow up.

Compared to other states, Victoria has the smallest population of developmentally vulnerable children in the first year of school (measured by the Australian Early Development Census). We also have the smallest proportion of children in Year 3 who are below the NAPLAN (National Assessment Program – Literacy and Numeracy) minimum standards in reading and numeracy.

Most children and families benefit from participating in high quality child and family services. For example, in 2015, 98.1 per cent of Victorian children attended kindergarten in the year before entering primary school. The number of Aboriginal children participating in early years services is also increasing.

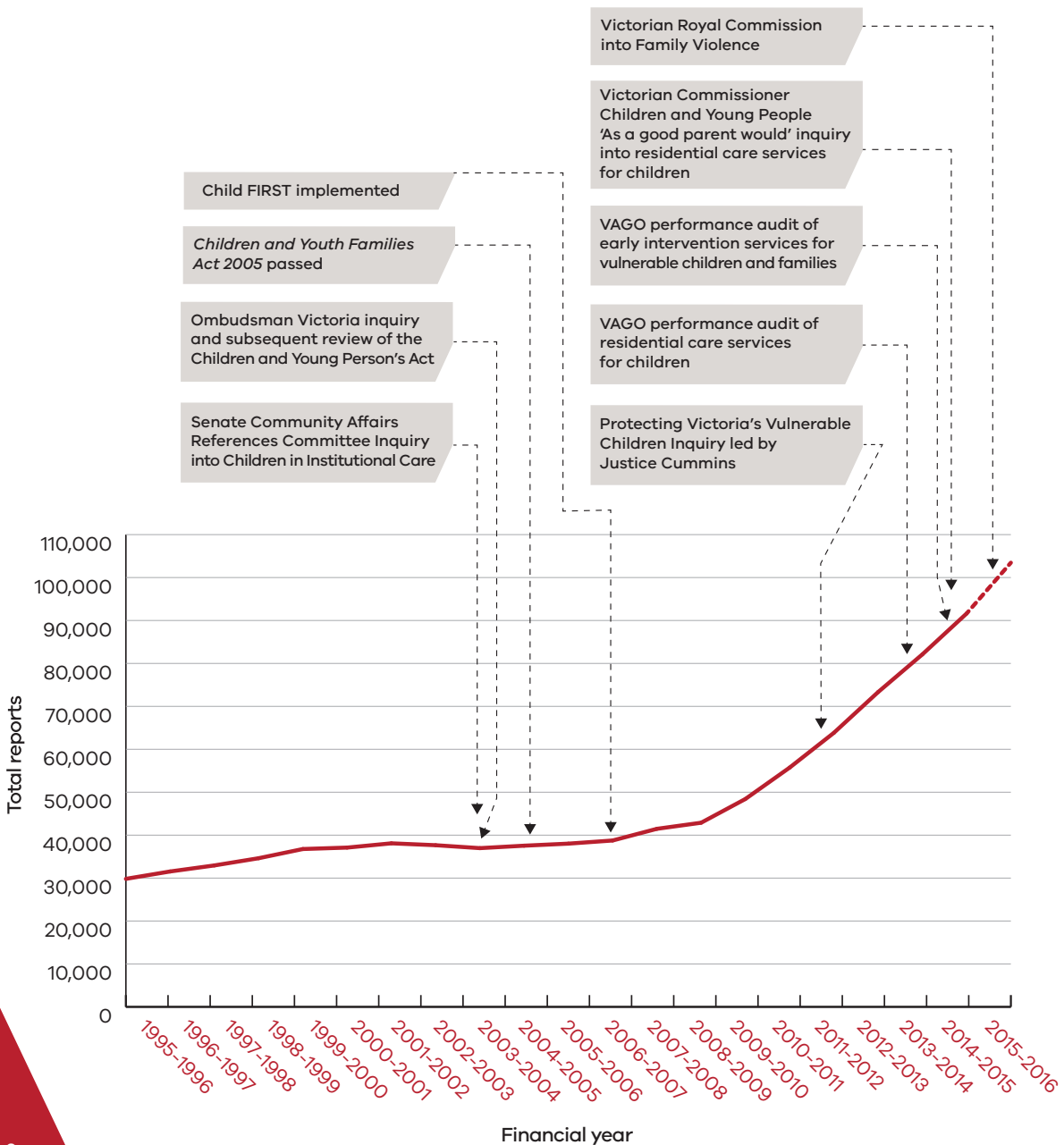
Victoria also has a proud tradition of service innovation and reform. We have many highly skilled and committed professionals dedicated to improving the lives of vulnerable children, young people and families. We have examples of leading practice across early years, family support, health, education, policing and social services.

However, the system is failing too many vulnerable children and young people.

For example:

- child protection reports have grown sharply in the last five years, from less than 50,000 in 2009–10 to more than 90,000 in 2014–15. Aboriginal children are overrepresented in these reports by a factor of six compared to the general child population
- only 15 per cent of eligible children known to child protection accessed the targeted kindergarten program available for three-year-olds experiencing vulnerability and disadvantage in 2014
- only 82.2 per cent of Aboriginal four- and five-year-olds are attending kindergarten compared to 98.1 per cent of non-Aboriginal children and only half of Aboriginal families attend the final 3.5 year visit to a maternity health centre with their child
- approximately one-in-eight children have behavioural issues when they start school
- more than 66 per cent of families referred to Child FIRST in 2013–14 presented with complex issues such as family violence, mental health problems, drug and alcohol misuse and disability, compared with 55 per cent in 2007–08
- adolescent risk-taking behaviour is becoming more dangerous, as reflected in increased youth crime and the number of recidivists
- young Victorians are facing more difficult transitions to employment, particularly in neighbourhoods experiencing economic transition and concentrated social disadvantage.

Figure 1: Total child protection reports from 1995 to 2016







## Drivers of risk and harm

We know that parents across Victoria want the best for their children.

However, too many families struggle to get the help they need to provide a safe and nurturing home environment. Forecasts suggest that in 2015-16, there will be around 103,000 reports to child protection.

Many of those reports to child protection will involve family violence, parental mental health and parental substance misuse. Other factors contributing to poor outcomes for children include poverty, low-quality housing, the education levels of parents and the parents' inability to engage in employment.

The facts are stark:

- according to Department of Health and Human Services data, family violence concerns are related to almost half of all placements of children in out-of-home care, almost half of child protection reports and 71 per cent of substantiations.
- in 2014–15, family violence was identified as an area of concern in more than 40 per cent of referrals to the entry point to family support services (Child FIRST) and is now the most common presenting area of concern for these services.
- Taskforce 1000, a collaborative project between the Department of Health and Human Services and the Commission for Children and Young people, has found that the majority of Aboriginal children in out-of-home care experienced family violence, substance abuse and mental health problems within their family.
- the proportion of reports to child protection involving drugs and alcohol has increased steadily over the past four years. Almost 30 per cent of reports reference mental health issues.

Research has consistently found that children exposed to family violence have higher levels of emotional and behavioural problems – compared to children who have not been exposed to family violence. Children who are in violent homes are also at a greater risk of physical abuse or neglect.

While many children and young people display great resilience in the face of family violence, these children and young people are at greater risk of:

- having difficulties controlling their emotions
- developing depression or antisocial behaviours, particularly as teenagers
- using violence later in life and having violence used against them (noting the majority grow up to be neither perpetrators nor victims in their adult relationships)
- developing poor relationships with both parents
- developing poor reading and language skills
- having difficulties making and maintaining friendships.

When family violence is combined with other problems, such as drug and alcohol abuse and mental health concerns, children are at even greater risk of developing emotional, behavioural, health, social and educational problems.


## **The need to focus on early intervention, prevention and sharing responsibility**

Parents and carers have a crucial role to play in the development and wellbeing of children and young people.

Some parents and caregivers have themselves experienced childhood adversity. As a consequence, their cognitive and emotional abilities may not have developed in healthy, positive ways. This can cause a parent or carer to react inappropriately with their own children. For example, they may struggle to stay calm and their home life may be unstable.

The 2016 Royal Commission into Family Violence report emphasised that the presence of a supportive adult (particularly mothers) or older sibling could mitigate the effects of family violence on children. Caregivers who have themselves been victims of violence may need support for their own recovery, to be able to effectively support their child's recovery.

The 2015 Victorian Auditor-General's report into Early Intervention Services for Vulnerable Children and Families found that the creation of Child FIRST has not delivered on the intent of creating a visible point in the community to intervene early and connect vulnerable families to the full range of services and supports they need.



Rather than offering a place where people feel comfortable and confident to go for help, entry to services is still largely through professionals reporting that a child is at risk of significant harm to child protection, or raising concerns about a child's wellbeing with Child FIRST. When cases are referred to Child FIRST or family services, those agencies may not have the capability to manage families unwilling to engage or where the family is feeling stressed or under pressure so families bounce without effective help between statutory and social services.

Young people, families, experts and front-line professionals have told us there are gaps in the existing range of services – making it difficult to find out what services are available and how they are accessed.

Services can be confusing. Restrictive opening hours and a lack of transport can create additional barriers to access. Negative perceptions toward services – including a perceived lack of empathy in previous interactions, fear of state intervention, and previous difficulties navigating the complex and disconnected range of social service providers – can also stop people accessing support.

Without a shared responsibility for strengthening families and keeping children safe, healthy and well, families are often pushed down-stream to child protection to assess safety risks.

**The Victorian Royal Commission into Family Violence noted' ...the increase in the number of referrals to child protection and difficulties with the differential response model in Victoria and the pressure placed on child protection... (and) concerns with the current family violence risk assessment within child protection.'**

**The Royal Commission identified the need for improvements to child protection's assessment of and response to family violence – as reflected in extensive commentary throughout the report and key recommendations, notably recommendation 27. Findings of the inquest into the death of Luke Batty also reinforced the need for robust child protection responses and better approaches to risk assessment within the child protection system.**

Child protection and family support services are not well connected to universal health and education services. Nor are they well connected to targeted adult services such as specialist family violence, mental health and drug and alcohol services. Poor communication between agencies delays active engagement of, and rapid responses to, families at risk – as detailed in evidence provided to the Royal Commission regarding the management of police reports of family violence. The Royal Commission into Family Violence noted that people from culturally and linguistically diverse communities are more likely than people of Anglo-Australian background to face barriers to obtaining help for family violence.

Disconnected services are exacerbated by gaps in services for affordable housing, mental health and drug and alcohol rehabilitation, and specialised parenting support for at-risk groups. The lack of a whole-of-community approach means that vulnerable children and families miss out on social and economic opportunities that are important to their health and wellbeing.

The quality and effectiveness of services also vary. Organisations do not always capture results for vulnerable children and the system does not routinely assess and share information. As a result:

- opportunities are missed to build a complete picture of unmet needs – including the impact of adult circumstances on children – and ensure a child and family accesses the right community, health and education services
- critical windows of opportunity are missed in child and adolescent brain development
- families are subject to statutory child protection assessment in order to receive voluntary family support services, which can discourage them from accessing services in the first place
- family support services report difficulties in sustaining engagement with families with more complex needs
- Child protection services are overwhelmed, with the high numbers of reports, caseloads and gaps in information sharing making it more difficult to monitor changing family circumstances and identify children who are most at risk
- too many families are bouncing between voluntary and statutory services without accessing the help they need.

**Over the past five years reports to child protection have grown at an average of 13 per cent per year.**

**More than 70 per cent of reports are assessed as not requiring a child protection response.**

**The number of children subject to multiple reports to child protection has grown markedly with 911 children subject to five or more reports in 2014–15 compared to 75 children in 2006–07.**

## **The need to transform out-of-home care**

Some families are, at times, unable to provide a safe and nurturing environment for children. Often, the problems in a family can be overcome through early intervention, making it possible for children to stay with their parents. Unfortunately, the failure to help families address problems before they become a crisis is driving more children into the care of the state.

By April 2015, approximately 8,000 children were living in out-of-home care. Of these children, 1,400 were Aboriginal – representing one-in-12 Aboriginal children (compared with one-in-200 of non-Aboriginal children in care). In some areas of Victoria more than 10 per cent of Aboriginal children are in state care. Victoria's Royal Commission into Family Violence heard from the Commission for Children and Young People that family violence is the number one factor for Aboriginal children being placed in out-of-home care.

Taskforce 1000 found that the majority of Aboriginal children in care: are not connected to their community and culture; do not know their heritage (particularly when their community is outside Victoria); have lost contact with their siblings; and lack cultural plans and cultural experiences. Those findings are a major concern.

One of the consequences of late intervention is that more children enter care with complex health, behavioural and developmental needs and spend longer in out-of-home care. Once in state care, too many children experience multiple placements – denying them the stable relationships that are fundamental to their social, emotional and cognitive development.

As a result of their experiences at home and in care, health and educational outcomes for children in care are lower than the general population, particularly among older cohorts.

Recent work by the Departments of Health and Human Services and Education and Training found that – compared with their peers – children in out-of-home care are more likely to:

- not complete Year 12 or equivalent
- attend numerous schools
- be suspended or expelled from school
- be disconnected from their peers
- have a diagnosed mental health problem, a physical and/or intellectual disability
- experience bullying
- exhibit risk-taking behaviour.

According to feedback from the child and family services sector, children with the most complex needs are often placed in households where resources are already stretched and the capacity of the caregiver to meet these needs can be constrained. This highlights the need to better support, educate and train caregivers.

Outcomes are poor for children who live in residential care. The 2014 Victorian Auditor-General's Report into *Residential Care Services for Children* found that 'children in residential care have generally been exposed to multiple traumas in the form of family violence, alcohol and drug abuse, or sexual, physical and emotional abuse since they were very young.' These findings were echoed by the Victorian Commissioner for Children and Young People in his 2015 report, "...as a good parent would...". The Commissioner found the current model of residential care was unsuited to the needs of the highly vulnerable and traumatised children who live in them.

The situation is no better for children when they leave care. Many young people leaving care report a sense of abandonment, anxiety and fear. They also experience high levels of instability and insecurity; are at risk of unsafe, unstable and poor quality housing; at risk of homelessness; and find it difficult to stay connected to education or employment.

## The need to transform how government works with services for families and children

The child and family service sector has developed strong partnerships and alliances, but according to feedback, current contracting arrangements are complicated, reinforce program silos, and encourage competitive behaviour over collaboration. Current arrangements also fail to incentivise providers to collaborate and work across sectors to improve outcomes for children, young people and families.

The child and family service sector emphasised that – to achieve the best outcomes for children, young people and families with complex needs – there is a need for the coordinated planning, funding and delivery of services. Service providers said funding was designed around individual problems and programs, rather than around people’s needs and risks and the context of the community they live in – contributing to disconnected service delivery and a lack of collaboration. Service providers also said that current funding approaches encourage service models designed around short-term crisis interventions, rather than long-term wellbeing.

Service providers want greater input and flexibility. For instance, service providers want policy settings to include agreed outcomes as well as the ability to – while maintaining the integrity of effective service interventions and models of care – adapt service models to suit the circumstances of local communities.

The Expert Advisory Group highlighted patchy evidence underpinning some interventions and inconsistent evaluation of existing programs. Barriers to effective information sharing were also raised as a concern.

The Expert Advisory Group and sector forums also highlighted the need to develop and maintain a workforce with skills in cultural competency, practical problem-solving techniques to respond to complex behaviours, the ability to identify the signs of family violence, and the training to work effectively with children, young people and parents with complex needs.

## In response – the development of the Roadmap for Reform and guiding principles

The Roadmap was developed under the leadership of an Expert Advisory Group (Appendix 1) with a significant amount of sector engagement, evidence gathering and analysis.

Development work included consultations with more than 300 people involved in the delivery of services; a review of studies and evaluative reports; seven regional consultations in Victoria; a two-day symposium; and a field trip to a number of government, non-government and research organisations in the United States.

The Roadmap complements other key reform initiatives across Victoria, including the Education State, the National Disability Insurance Scheme and *Victoria's 10-Year Mental Health Plan*.





## Guiding principles

Reflecting the findings of the Royal Commission into Family Violence and feedback from the Expert Advisory Group, the following principles underpin our immediate actions and will guide longer term reforms:

- 1 A focus on **prevention** and ensuring families are supported and enabled to provide children with a safe and permanent home and a good start to life.
- 2 **Intervening early** and providing the right assistance to reduce the risks of harm and costly interventions.
- 3 Improving the way services work together, provide **continuity of care** and integration around the individual needs of children, young people and families.
- 4 Supporting the **connection** of all children, young people and families **to their family, cultures and communities**.
- 5 Ensuring **Aboriginal self-determination** around decision-making and care for Aboriginal children and families.
- 6 Building **personal capacity to make choices** where appropriate and input to their care, guided by professional support.
- 7 Increasing the **effectiveness of services**, that are **evidence-based** and linked to the delivery of defined outcomes.
- 8 Providing **flexibility within and across service provision** to scale up / down and adapt interventions to meet the dynamic needs of all families over time.
- 9 Building on **localised services** for people in their communities or place to deliver enduring outcomes.
- 10 Encouraging **interaction** with the people who use and deliver the system, leveraging strong **local partnerships** and joint strengths-based leadership across all communities and sectors.

## **Victoria's new approach**

### **A vision for our children and families**

Our vision is that Victoria will be a state with strong families and children who are safe, healthy and well.

We want all Victorian children to have the opportunity to grow up in loving, caring and stable families so they can develop into healthy, capable and happy adults. For this to happen, vulnerable children and families need better access to the universal and targeted secondary services that build family functioning and support healthy child development.

For families, it means delivering timely support to deal with those things that can stop an adult from meeting their responsibilities as a parent or carer and fulfilling their own desire to meet the needs of their children. It also means linking parents with education and training; connecting them to formal and informal supports within their community; and helping them find employment, stable housing and all the other basic needs that make good parenting possible.

For children, it means ensuring all the things any parent wants for their own children – being safe and healthy; attending, enjoying and thriving at kindergarten or school; having friends and a peer group that promotes a positive approach to life; participating in sport or music or other community activities; and knowing they are safe and cared for and loved.

For adolescents, it means ensuring opportunities are available to develop executive function and self-regulation skills – skills that are crucial for enabling positive behaviour and healthy decision making.

For Aboriginal children and families, it can mean building deeper connections with their culture, heritage and community.

And for those children who cannot remain in the care of their parents, it means ensuring the service system – from carers to child protection workers to case managers – creates an environment that encourages each and every child's development.



## How will things begin to change?

In making its recommendations, the Victorian Royal Commission into Family Violence called for a focus on children and young people, early intervention with families, increased support and better engagement with children, young people and families.

In coming months we will engage closely with a wide range of stakeholders to lay the foundations of this reform.

Consistent with the Royal Commission's approach, the Roadmap provides an initial outline of how a new system will operate to better support Victoria's most vulnerable individuals, families and communities.

Central to this plan is defining the key features and early hallmarks of a new social services system that makes it easier for professionals to work together and for individuals and families to get the support they need, when and where they need it, while providing flexibility to adapt to local circumstances.

As recommended by the Royal Commission into Family Violence, key features will include:

- a greater focus on earlier intervention
- more visible and non-stigmatising entry points to services, making it easier for people to find help themselves
- pro-actively connecting people at risk to support through existing services (such as early childhood services, schools, general practitioners, financial counselling and community health services) and informal networks (such as a trusted community member).

Communities will also be more involved in the design, delivery and evaluation of services to harness local strengths and resources.

Child and family services will play a major role within this new integrated and place-based approach to the delivery of community and social services for vulnerable populations. Government and community sector agencies will bring expertise in using and building evidence of what works and embedding a holistic focus on risks to children's safety, a child's developmental status and family functioning in multi-agency assessment and planning.

Our upcoming process of co-design will develop a plan that better supports children, young people and families, including:

#### **An enhanced role for universal services**

Removing at-risk children and families from mainstream services can be stigmatising and counter-productive. That is why there is a need for high-quality universal services to provide intensive interventions for children and families at risk. A key priority is for universal services and supports to be better connected to targeted and statutory services and accessible to all members of the community – including children in out-of-home care. The services will also be better equipped to identify and respond to risk.

#### **A system that better supports Aboriginal children and families**

Aboriginal self-determination around decision-making and care for Aboriginal children, young people and families must become a reality. That is why the Victorian Government will work with the Aboriginal community to develop an Aboriginal children and families strategy. The goal of the strategy is to develop and implement earlier, more culturally competent and effective supports for Aboriginal families. The strategy will apply to services delivered both by the Department of Health and Human Services, by service providers and the wider community. It will also set out a plan for transferring responsibility over time for the care and support of Aboriginal children in out-of-home care to Aboriginal service providers and families.

#### **Wrap-around family supports**

Wrap-around service models have helped reduce child protection reports and strengthen family functioning in the United States. Victoria needs to learn from that experience. As recommended by the Royal Commission into Family Violence, family mentoring, trauma-informed care and proven models of behavioural intervention will be available combined with practical support to families, all of which will build the capacity of vulnerable parents to protect and care for their children.

(cont.)

### **New ways to access services and a new 'service navigation' function**

At-risk children and families often find Victoria's system complex, fragmented and difficult to navigate – increasing the likelihood they will not receive timely support and service. As recommended by the Royal Commission into Family Violence, we will work with the community to co-design new 'Safety and Support Hubs' in coming months and plan the rollout in each Department of Health and Human Services area. These Hubs will enable a greater coordination of responses to violence and other safety risks, as well as early interventions for vulnerable families. They will help to connect children, young people and families to a local network of services, including child and family, health, education and broader social services. Support to navigate services will also be an important feature of the reform to be co-designed with service providers and the community.

### **In-built capacity and capability to intervene earlier and more effectively**

Risk factors for child abuse and neglect need to be identified and acted on as soon as possible – otherwise there is a risk they will escalate. Hubs and local networked services will provide trusted places to go for help so that people don't have to spend time, energy and money going to different places to access a variety of services. The focus will be on earlier intervention and building on the strengths and capabilities of families to support them to address risk factors and build safe, supportive environments for their children. In designing how services will work together, the focus will be on how service navigation functions will work with services such as child and family, education, health and broader social services in the local network to offer 'turn around' support for at-risk families. A new system will make it easier to scale up or down services as needed – enabling at-risk families to re-engage with services quickly, rather than having to re-engage through formal intake processes.

### **Strong child and family engagement**

When systems give a family a voice in the decision-making process, that family has a better chance of success. Involving families early and at every decision-making point recognises families' rights and expertise and builds trust. Building on existing family decision-making models, young people, parents and extended families must be active participants in planning and decision-making processes.

(cont.)

### **Improving responses to adolescents, keeping them engaged in education, and supporting effective transitions to training and employment**

One way to improve the development – and therefore the potential – of an adolescent is to improve educational participation. More support needs to be given to all school-aged children and young people in out-of-home care, as well as those leaving care. There is an opportunity to build on initiatives through Jobs Victoria.

### **The transformation of child protection**

Child protection services will be strengthened by enabling specialist practitioners to focus their investigations on those children at greatest risk. This new approach will involve child protection sharing information and offering expert advice and support to community-based screening, assessment, planning and responses to vulnerable families. Where appropriate, child protection will work with child and family services and specialist family violence services to identify and manage risks.

### **Strengthening of home based care**

Grandparents, extended family, and foster carers and families need support to achieve the best possible outcomes for children who cannot live with their own parents. Government and non-government agencies will need to work more closely to deliver that support, including providing education and training to better manage complex behaviours and help children and young people overcome the traumatic impacts of abuse and neglect.

### **The transformation of residential care**

In a new system, residential care services will evolve into more personalised adolescent care and treatment services. We will work with experts, clinicians and the community sector to design sub-acute and intensive trauma-informed residential treatment programs for young people between 12- and 17-years-old who have highly complex or extreme symptoms and challenging behaviours caused by recent or past histories of sexual, physical, and/or emotional abuse and/or placement disruptions.

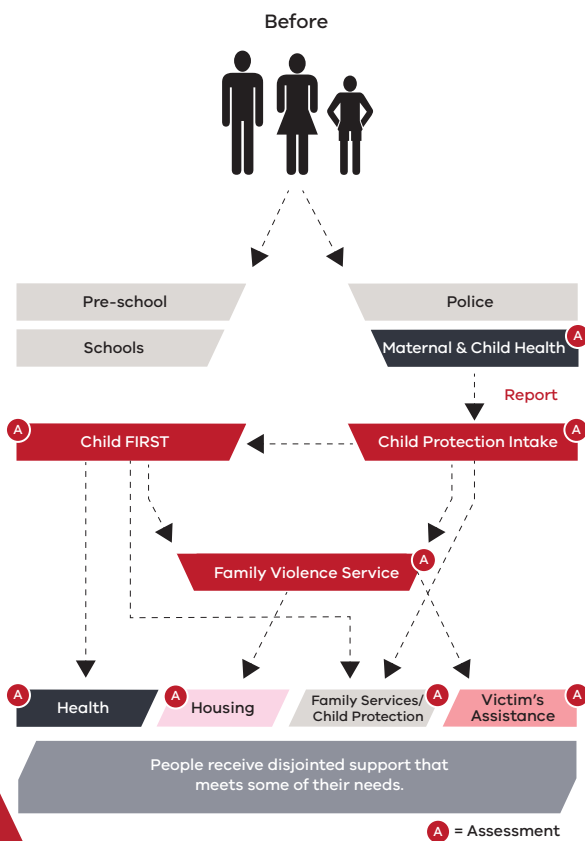
## A better experience for children, young people and families

Our goal is for Victorians to be better supported throughout their unique lifecycle of need and be able to access a range of services, including wellbeing and prevention through to other service interventions incorporating intake, assessment, planning and treatment.

Figure 2: The child and family experience

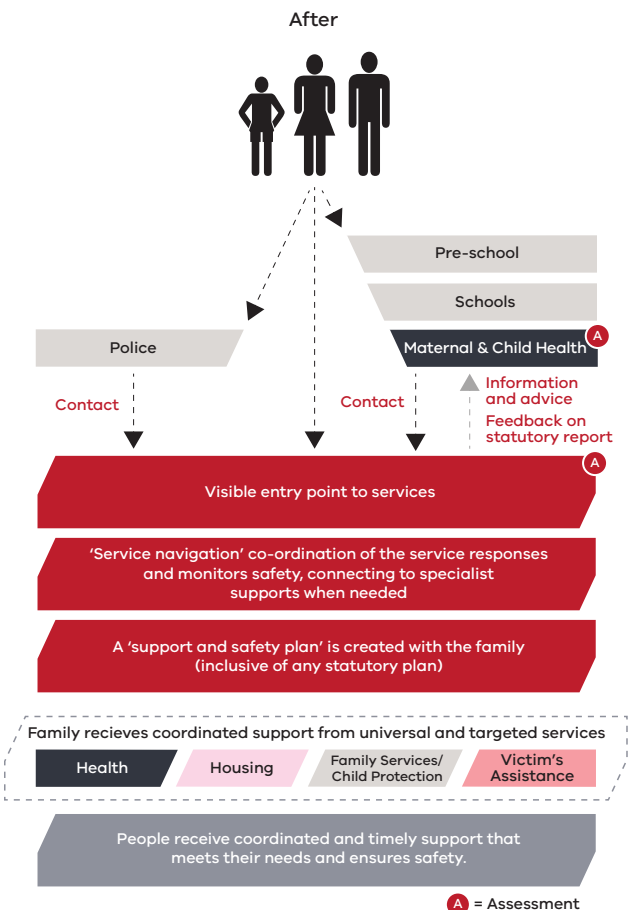
### Today

- It is difficult to know where to get help or advice
- Often people cannot get the support they need from places they trust
- People are passed between statutory, crisis and community-based services
- Statutory child protection is the gateway for many community services
- Multiple assessment and referrals
- Service fragmentation and waiting lists
- Limited change and poor outcomes



### Future

- A visible, accessible place to get support in local communities
- Greater capacity for universal health and education services to manage low-level risks
- Single pathway for statutory, crisis and/or support services
- Feedback and information sharing across services
- Access to more timely and co-ordinated responses
- Sustained change with better outcomes





In summary, for children, young people and families, this reformed system will provide:

<p><b>A 'whole-of-community' response</b></p>	<p>Parents, children, young people and families are connected to their communities, supporting each other to learn and thrive.</p> <p>Communities are supported to work together to solve problems.</p>
<p><b>Services that work together to meet needs and address risks</b></p>	<p>Children's services are delivered in context of the family – adult services are responsive to impacts on and needs of children.</p> <p>Health and education services have the knowledge and capacity to respond to early signs of trouble. Professionals have one clear point of contact for information, advice and referrals.</p> <p>People access support through a single, visible 'front door' that is based in their local communities and is free of stigma. Vulnerable families do not need to be in crisis before getting the help they need.</p> <p>People who have particular difficulty accessing supports, such as people with a disability, people from culturally and linguistically diverse backgrounds, those living in remote locations or Aboriginal communities, will feel connected and engaged via a network of community-based access and service points.</p>
<p><b>Comprehensive needs and risk assessment</b></p>	<p>The unique needs, risks, choices and aspirations of each child and family are all considered through comprehensive screening and needs identification.</p> <p>Children and their families feel supported by workers with strong capability to identify and respond to risks of violence and/or child abuse or neglect – within a safe and accessible community setting.</p> <p>Children and their families feel supported when their safety is threatened regardless of their service setting. All services, specialist and non-specialist, are sensitive to risk and able to support them, either directly or by referring them to specialist or crisis services.</p> <p>People at high or immediate risk of harm will experience far greater coordinated support. Specialist and crisis services and protective agencies will be engaged quickly, supported by better information sharing about risk and needs.</p>

**Coordinated responses**

Families experience coordinated service pathways that provide the mix, sequence and intensity of support they need, rather than being left to navigate a confusing system by themselves.

The causes of a child or family's vulnerability are addressed through a comprehensive plan, which helps make them safer and improve their wellbeing.

For people who need it, service 'navigation' works with them to coordinate and target the supports they need, and to bridge the current divides between universal, targeted and specialist services, adult and child services, short term crisis and longer term support, and the different professional disciplines and programs.

As people's needs and circumstances change, their support can 'flex' up and down, with the emphasis on reducing their need for support over time.

**Tailored and effective interventions**

Children and families are engaged and connected into services that can intervene earlier before problems become more serious and entrenched.

People benefit from more effective and evidence informed interventions that make a real difference and are tailored to their unique needs and circumstances.

As service users, children and their families are involved in the design of the service models and pathways that are intended to support them, along with providers and experts.

# Delivering on the vision – reform directions

To deliver this vision the Roadmap sets out initial actions to progress three reform directions.

## Building supportive and culturally strong communities and improving access to universal services

### Supportive and culturally strong communities

“ I want the State to acknowledge that culture is a primary resilience factor for our Koori children and prioritise resources for cultural strengthening for children and families. ”

(Andrew Jackomos, Commissioner for Aboriginal Children and Young People, 9 July 2015).

We want all children, young people and families to belong to supportive communities with positive social networks, connections to parents and young children, and easy access to family-friendly settings and services.

Belonging to a place and a people is important. It gives a child or young person solid ground on which to stand during tough times and people they can turn to for advice or help, as well as providing a child with the wellbeing they need to find their way as an adult. For young people, opportunities to participate in sport, recreation and cultural activities can be important protection against exploitation.

Parents and children need regular opportunities to interact with other parents and young children. These interactions could take place in settings – such as maternal and child health centres, playgroups, swimming pools, libraries and shopping centres – and technology could be used to overcome barriers to participation. For example, a young person with a disability could use video conferencing to be part of a community interaction. Social networks can also reduce the risk of mental illness by creating a sense of belonging and connectedness.

Evidence before the Royal Commission into Family Violence indicated that adolescents are less likely than other age groups to seek assistance when experiencing family violence. However, they are prone to 'invisibility' in the child protection and specialist family violence sectors. Technology platforms and youth services such as homework clubs and arts and recreation groups can create opportunities for young people to reach out for help.

The Aboriginal Children's Forum provides a vehicle for Aboriginal community-controlled organisations, the community sector and the Victorian Government to work together to safeguard Aboriginal children and young people in, or at risk of entering, out-of-home care.

### **Immediate actions**

- The Aboriginal Children's Forum is leading work on an Aboriginal children and families strategy to increase Aboriginal self-management and self-determination.
- The strategy will be designed by a collaborative working group of Aboriginal and non-Aboriginal service providers and relevant government departments – and overseen by the Aboriginal Children's Forum. It is through this strategy that the commitment to the Roadmap's principle of Aboriginal self-determination will be implemented.
- Firstly, universal and targeted secondary services will be made more accessible, culturally competent and effective for Aboriginal people. Secondly, tertiary services – child protection and out-of-home care – will also become more culturally competent and effective. As part of this we will explore how we overcome the barriers to attracting more Aboriginal people to work in child protection.
- A staged plan will be developed for the transition of placement and case management supports for Aboriginal children from the department and non-Aboriginal service providers to Aboriginal community-controlled organisations. To ensure the transition's success, the challenges Aboriginal community-controlled organisations and many other service providers face around workforce capacity must be dealt with. Part of the strategy will therefore involve capacity building, examining how Aboriginal community-controlled organisations can be equipped to successfully carry out this important role. Ultimately, Aboriginal communities must decide the extent to which they wish to engage in this process. The strategy will need to reflect the desires, aspirations and readiness of individual communities.



- We will work with the Aboriginal community to also develop Aboriginal children's panels around the state, to be co-chaired by senior child protection staff and a local Aboriginal community-controlled organisation. Distinct from Aboriginal Child Specialist Advice and Support Services, which are more operational in nature, these panels will provide greater oversight of how well the system is meeting the needs of Aboriginal children and families; support more collaborative service provision that intervenes earlier with vulnerable families; and support the provision of a more culturally competent wrap-around model of support.
- Our new Youth Policy and Engagement Strategy will give young people a say in the design and implementation of the government policies and programs that affect them.

## Access to universal services in early childhood

**Universal services support all children and families to support social interaction, build individual capability and skills, and create pathways into education, training and employment, and to strengthen community resilience against child maltreatment. These include antenatal and maternity services, maternal and child health, other health and dental services, parenting services, early childhood education and care services and schools.**

The early years of life matter because that is when the foundation of the brain's architecture is established. Without a solid developmental foundation, a child can run into problems in adolescence and adulthood.

Children need responsive interactions with supportive adults – otherwise known as the 'serve and return' process – to build brain architecture. The 'serve and return' process is interrupted when adults are continually unresponsive to a child. This is the definition of child neglect and emotional abuse: the chronic failure of adults to provide for children's emotional, physical, educational or medical needs.

That is why it is not enough to rescue children from bad situations. The community has a collective responsibility to prevent the toxic stress that impedes healthy child development. That means building social opportunities and services that support children and families.


Universal child, and family health and education services – such as maternal and child health services and kindergartens – provide important support for children’s health, development and learning. For example, kindergarten participation is known to improve later school achievement. These services can play a crucial role in identifying families that are struggling and supporting them. In instances where a child may be at risk of significant harm, these services are able to involve child protection and/or specialist family violence services where controlling behaviours or violence is evident. We know the impact of mental health in infancy is significant in relation to intellectual disability and learning disorders in later life.

Universal services must be better resourced to meet the specific needs of vulnerable children and their parents. That means creating more flexible and integrated services – from maternity and maternal and child health services to more intensive, targeted models that combine interventions for children and parents.

**The Royal Commission into Family Violence has called for ‘a greater focus on assisting universal services to identify children and young people experiencing family violence.’ The Commission reflected on emerging evidence that shows that the most effective interventions for children who have experienced or been exposed to family violence is to respond to both the child’s caregiver and the child themselves in order to rebuild the bond between them, which might have been compromised as a result of family violence.**

Providing outcome-focused services in familiar and safe environments will encourage families to seek the support they need, and give staff more opportunities to intervene early and help families before a problem becomes a crisis.

Many of our universal and targeted services are aimed at broad populations and are often inaccessible, or inadequate, for vulnerable children and their family.



A great deal of work – such as *Victoria's 10-Year Mental Health Plan* and the Education State initiative – has already been done to make universal services more accessible. Current work in this area includes:

- right@home – a trial program where nurses visit the homes of vulnerable families and help parents care for and respond to their children, and create a supportive home learning environment
- Cradle to Kinder – an intensive ante- and post-natal support service to provide intensive family and early parenting support for vulnerable young mothers from pregnancy until the child reaches four years of age
- the Koori Maternity Service program – an initiative developed by the Victorian Government and the Victorian Aboriginal Community Controlled Health Organisation that aims to improve access to culturally appropriate maternity care for women and their families
- securing enrolment spots in kindergartens for vulnerable or disadvantaged children so they do not miss out if they enrol late or relocate to a new area, through the Pre-purchased Places pilot program
- the Koori Kids Shine at Kindergarten campaign – widening outreach to Aboriginal families and pre-purchasing kindergarten places to lift the number of Aboriginal children enrolled in kindergarten
- additional support to children with a disability, with high support needs and/or with complex medical needs, through the Kindergarten Inclusion Support program and providing free or low cost kindergarten to families experiencing vulnerability or disadvantage
- launch of the Every Toddler Talking research trial to equip early childhood educators with new, evidence-based strategies for helping children under three build language and social skills, no matter their learning and communication styles and abilities.

## **Immediate actions**

There is an urgent need for action across the health and education sectors to make kindergartens, schools, maternal and child health centres and primary health care services more accessible and responsive to the needs of vulnerable children, young people and families.

Health systems need better records to track services and outcomes for children in out-of-home care. They also need to work with children's services to ensure health checks and good follow-up for children that currently fall through the cracks.

To improve access to universal services, we will provide:

- \$33.88 million over the next two years to:
  - establish a new intensive in-home early childhood support service for vulnerable families based on the right@home, Cradle to Kinder and Aboriginal Cradle to Kinder programs
  - work with Aboriginal communities to co-design and develop a tailored maternal child health service for Aboriginal families to encourage greater participation and improve outcomes by delivering more culturally responsive and high quality services
  - expand the Healthy Mothers, Healthy Babies program to support more vulnerable women during pregnancy.

We will also implement *health care that counts* – an action plan to improve preventative health services for vulnerable families and children by training general practitioners and maternal and child health nurses to identify and appropriately respond to families at risk.





## Supporting children, young people and families in need with integrated wraparound supports and targeted early interventions

Often an individual's presenting problem when they first ask for help is not the driving issue. That initial problem could be a symptom of deeper underlying issues that the individual or the family is unwilling or unable to disclose.

Taking a consolidated approach to services and supports – with an emphasis on early intervention – provides a window of opportunity during which they can develop a case plan that addresses all risks.

Victoria is well placed to deliver a place-based approach to bringing together the education, health and social services and supports a child and family needs.

Our maternal and child health, allied health, family support, community health and homelessness services are all well-positioned to support this approach.

Support and Safety Hubs will build on the learnings from past implementation of initiatives, including Child FIRST, family services alliances, Children and Youth Area Partnerships, Best Start partnerships, family violence partnerships and primary care partnerships to support multi-agency working.

Achieving shared responsibility for the outcomes of vulnerable children, young people and families requires different parts of the social services sector to develop a common language and understandings and bring together their different practice approaches. As emphasised by the Royal Commission into Family Violence, it requires health, education and social services to place an equal focus on children, young people and their caregivers. Work on a common outcomes framework and risk and needs assessment tools for child and family services is already underway – with a strong focus on the identification and assessment of family violence risks.

The Andrews Government has also developed *Victoria's 10-Year Mental Health Plan* to strengthen mental health treatment and support for vulnerable Victorians. The focus of the plan is to prevent disadvantaged people with a mental illness from falling into the gaps between primary and tertiary mental health services.

The Education State plan includes initiatives to keep young people engaged in education, and support effective transitions to training and employment, including through LOOKOUT Education Support Centres and Navigator, greater support for mental health assessments and referrals through the Doctors in Secondary Schools initiative and statewide expansion of specialist mental health services.

Child protection is collaborating with Victoria Police on joint operations to divert young people in care from criminal behaviour (especially motor vehicle offences) and stamp out sexual exploitation.


Child protection procedures have also been updated to better support victims of family violence and reduce the burden on protective parents. For example, in response to Judge Gray's findings in the Luke Batty inquest undertakings will not be sought from protective parents that could effectively require them to manage or supervise a perpetrator of family violence.

### **Immediate actions**

Research shows that the most effective approaches to supporting families with complex needs are strengths-based, family-centred, highly structured, long-term and intensive. Developing goals in partnership with the family, building trust and empowering family decision-making is essential (while directly challenging neglectful behaviour and other aspects of poor parenting). Interventions need to build strengths and capabilities in families. Children in families with complex needs enrolled in home visiting programs have been shown to have better cognitive, social and emotional outcomes than those who are not. For children and young people, it is important to preserve and strengthen protective factors that might mitigate the effects of childhood adversity.

The Royal Commission into Family Violence recommended that interventions and support for children and young people who have experienced family violence should focus on:

- keeping them safe
- supporting them in their recovery from the effects of family violence
- providing the right level and type of support when it is needed and for as long as it is needed. Not all children and young people will require an intensive therapeutic approach, but those that do should have timely access to this.



These findings are relevant to other causes of childhood adversity. For instance, effective responses to Aboriginal families require an understanding of the enduring impacts of colonisation and the Stolen Generations and the adoption of an empowerment approach.

More needs to be done to make it easier for young people and parents to navigate the range of services they need. That is why the Roadmap includes plans to redesign services for vulnerable children and families, including working with practitioners and experts to design a 'service navigation' function.

The aim of service navigation is to support people with multiple and complex needs who may require some form of longer-term support, or, in other instances, help a victim of family violence navigate the court and legal system. Navigation may be sourced from different specialist disciplines – such as family violence, family services, out-of-home care or disability services – depending on the needs and preferences of the child, young person or family.

**Wraparound models have shown promising results in Canada and the United States. This is an approach that 'wraps' targeted and holistic interventions around a family or family member. A team is formed and develops a plan with the family outlining goals and identifying strategies, supports and services to achieve those goals. Professional support is combined with natural supports from family members' networks of interpersonal and community relationships.**

The Royal Commission into Family Violence recommended that multi-agency working to support promising wrap-around and other service models be supported by improved data collection and cultural and practice change in the sharing of information. This will rely on an agile approach to information technology development and investment to deliver solutions necessary to facilitate information sharing and integrated client intake, assessment and planning.

More needs to be done to strengthen collaboration between services to support victims of family violence. The Royal Commission into Family Violence also identified important opportunities for child protection to work closely with Victoria Police, specialist family violence services and other services to: better assess perpetrators' behaviour patterns and risks to children and engage them safely; strengthen safety planning on closure of cases; and link protective parents to Support and Safety Hubs.

As part of its response, the Government recently announced \$17 million to deliver the Child Protection Flexible Response initiative, which will co-locate family violence workers in child protection offices to strengthen child protection practice. Early actions will focus on four areas:

- 1** Designing a new system architecture to support the implementation of the recommendations of the Royal Commission into Family Violence – including the role of Child FIRST in the operations of the new Support and Safety Hubs.

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- 2** Improving the ability to co-ordinate and deliver timely, effective, easy-to-navigate services to vulnerable families, including funding to establish specialist case workers / navigators.

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- 3** Building capacity and developing and implementing new early interventions across all sectors and services that are targeted, evidence-based and focused on improving the lives of vulnerable children, young people and families, including:
  - establishing a menu of interventions with proven success in strengthening families and supporting vulnerable children's healthy development
  - \$5.65 million in 2016–17 for family support services to deliver evidence based interventions that build the capacity and resilience of vulnerable parents to protect and care for their children
  - \$5.76 million in child protection enhancements including one year funding for the ongoing operation of the Child Protection Specialist Intervention unit
  - \$8.48 million to expand trauma-informed interventions for children and young people who are victims of child abuse, neglect and family violence, including age appropriate group work
  - funding to deliver trauma-informed interventions as well as flexible support services for victims of family violence

- brokerage funding that will assist women and children experiencing family violence (many of whom are also clients of the child protection system) to access the private rental market
- as part of *Victoria's 10-Year Mental Health plan* to strengthen mental health responses including additional treatment services for children with moderate or severe behavioural problems and their carers and families.

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**4** Working with the service sectors on implications of recommendations of the Royal Commission into Family Violence for Child FIRST, Integrated Family Services, family violence and child protection service delivery models. Priorities will include:

- working across government and with service providers to design and establish area-based triage, risk assessment and needs assessment models for family violence and broader child and family service responses to be operationalised through Support and Safety Hubs and service networks. This will include funding to support improved multi-agency risk assessment, information sharing and safeguarding
- resolving the most effective way for child protection to provide expert advice, consultation and support to multi-disciplinary teams operating from Support and Safety Hubs and family services more generally
- conducting an in-depth review of Victoria's Family Violence Risk Assessment and Risk Management Framework, also known as the Common Risk Assessment Framework – the system used by practitioners working in a wide range of fields to consistently understand, identify and manage risk factors associated with family violence
- stronger consultation with Aboriginal community-controlled organisations to identify children who are Aboriginal
- better information sharing and collaboration between child protection and specialist services to identify risks to children – including for subsequent children and for families with new partners with a history of family violence. This includes delivering on the child protection practice guidelines recommendations made by the Royal Commission into Family Violence
- stronger cross-agency work with specialist family violence services and Victoria Police to respond more quickly and effectively to women and children at significant risk of harm from family violence.

## **Strengthening home-based care and improving outcomes for children and young people in out-of-home care**

For children who cannot live safely at home the priority must be to have them safe and secure and living in home-based care with a family. When they cannot be reunified with their biological family, the goal must be a stable home that gives them the security and support that comes from enduring and committed relationships. For that to occur, foster carers and families and kinship carers need to be equipped with the training and support necessary to help children overcome traumas associated with abuse and neglect, as well as be culturally sensitive to the needs of the child and preserve, if not strengthen, that child's connection to their family, culture and country.

Residential care needs to be transformed from a placement of last resort to a program of intensive treatment and stabilisation for young people with complex behaviours, so that home-based care is sustainable. Any residential stay for children under 12 should be rare and short.

Reforms currently in progress include:

- a \$43 million initiative to move children and young people out of residential care and into supported home-based care using Targeted Care Packages
- Taskforce 1000 – a collaborative project between the Department of Health and Human Services and the Commission for Children and Young People that is reviewing the current circumstances of more than 1,000 Aboriginal children and young people in out-of-home care and identifying and addressing the issues they face
- increasing the capacity of the foster and kinship care system, with the aim being to reduce the system's reliance on residential programs
- rolling out a new out-of-home care outcomes framework that measures the outcomes for children and young people in out-of-home care and identifies areas most in need of improvement

- work has commenced through the Aboriginal Children's Forum, to build the capacity of Aboriginal organisations who wish to assume responsibility for contracted case management of Aboriginal children in out-of-home care or to assume custody or guardianship responsibilities under Section 18 of the *Children, Youth and Families Act 2005*.

**The process of moving children out of state care has already started, driven by the \$43 million investment in Targeted Care Packages. As at 29 Feb 2016, 109 young people, including 14 Aboriginal children, had been transitioned from residential care and are now with foster carers, extended family, their parents or supported to live independently.**

## Immediate actions

More must be done to prevent the need for out-of-home care placements and provide intensive home visiting and structured parental support to maximise opportunities for reunification.

There is also a need to enhance foster family and kinship carer recruitment, supports and capacity building. This includes new models of support and training for foster carers and families and kinship carers, testing and refining models of professional foster care so that foster carers and families are a valued part of the treatment team for children and young people overcoming the impact of trauma. These will go hand in hand with culturally sensitive training and a formal qualifications program for carers, and enhancing Aboriginal carer recruitment and supports.

It is vital for children under 12 to be kept out of residential care. To help achieve this, new targeted home-based support models will be developed to support children under 12 with complex behaviours to provide them with support at home or in home-based care. Further actions will also include support placements arrangements for larger sibling groups to keep them together in a home-based setting, including specific foster family recruitment strategies and potentially new care models.

The healthy transition of young people from out-of-home care to independence and adulthood needs to be planned and supported in advance. Young people must be supported once they leave care, to help them transition to stable housing, training or a job.

In all of these reforms, young people must be given a voice so that the system reflects their needs.

To improve the lives of children in our care, and progress these important reforms we will invest:

- \$16.19 million over the next two years to provide more support to children in home-based care and their carers in order to stabilise these placements and deliver positive life outcomes. This funding will connect children to universal services and provide a range of flexible supports to ensure children engage in education, receive treatment they may require and are given opportunities to engage in activities that promote development and wellbeing
- \$35.9 million over the next two years to begin to transform residential care from the current model to a clinical treatment model. While reform will take some time, we will take immediate action to improve levels of care for young people currently in residential care and commence a process of co-design with children and young people with experience of residential care, service providers and other experts in the area of child development, trauma and treatment. As this work progresses we will also fund the provision of vocational qualifications for those residential care staff without relevant qualifications, to improve their ability to work effectively with children and their families
- \$34.16 million over the next two years to sustain the out-of-home care system and meet unavoidable placement demand, including funding for additional kinship, foster and permanent care placements for children in out-of-home care
- \$9.4 million to construct, replace or refurbish residential care properties
- \$2.3 million on urgent and essential maintenance for residential care properties
- \$16.48 million over the next two years to improve outcomes of Aboriginal children in out-of-home care including through:
  - the development of a staged plan for the transition of placement and case management supports for Aboriginal children from the Department of Health and Human Services and mainstream service providers to Aboriginal community-controlled organisations
  - the expansion of the Aboriginal Child Specialist Advice and Support Service
  - a stronger focus on the recruitment of Aboriginal foster and kinship carers
  - additional resources to ensure cultural support plans for Aboriginal children in care.



# Delivering critical enablers

In addition to these reform directions, the enablers of reform are equally important.

The Royal Commission into Family Violence emphasised the importance of better use of data and evidence, more effective sharing of information, strong system governance and investment in the skills, knowledge and capacity of the workforces involved with children, young people, families and victims of violence.

## Building a learning system

There have been few longitudinal studies and rigorous evaluations of service and community interventions. A menu of evidence-based programs and practices will be delivered providing access to research, longitudinal studies and the evaluation of service interventions. The system will continually question, re-evaluate, refine and improve the performance of child and family services. Where interventions are proven to work they will be adopted, where they are proven to be ineffective, they will not be funded.

One of the current system's main failings is that data is not collected systematically – nor is information shared. Measures of demand or reporting behaviour (such as for child protection) are not backed up with data on underlying wellbeing or incidence of harm. As a consequence, it is difficult to find out how children and young people in care and vulnerable children and families more broadly are faring and connect people to the range of services and support that they need.

There is an urgent need for a strong, systematic engagement with children and young people in care – and the creation of a learning system so that outcomes are measured and services improved.

This engagement will help identify problems sooner; detail each child's education, health and social development; and create an established way to measure progress and improve the ways in which the system serves the needs of at-risk children and young people.

## **Immediate actions**

The Royal Commission into Family Violence has recommended the establishment of a new initiative to improve access to evidence about what works, and track the impact of new service interventions.

As this recommendation is progressed, the Department of Health and Human Services will work with the Centre for Excellence in Child and Family Welfare, other experts and community service organisations to:

- establish a panel for shared research and evaluation to build collaboration, promote innovation, share knowledge and oversee practice development and change
- publish a children and families research strategy
- strengthen data collection mechanisms to improve engagement activity with the community, children, young people and families
- provide funding to support sharing information to keep people safe
- improve broader data and information sharing, as well as knowledge management across the system
- develop a co-ordinated system analytics capability to improve decision-making.

## Enhancing governance and accountability mechanisms and evolving funding models

To achieve better outcomes for vulnerable children and young people on the ground there is a need to combine statewide governance mechanisms – building and sharing evidence of what works – with local governance to lead and support cross-organisational working.

The funding of social services is widely recognised as a contributing factor to many of the issues identified in the case for change.

The Royal Commission into Family Violence recommended governance structures across all levels of government to provide strong leadership and to support effective and coordinated strategies to address family violence. Governance to lead and oversee improved outcomes for vulnerable children and families will be built into the design of these new arrangements.

### Immediate actions

Ultimately, the best way to ensure the system improves – and keeps improving – is to continually measure the outcomes at all levels of delivery. To drive the right outcomes, the Victorian Government will work with community organisations and leaders to:

- establish a statewide Ministerial Advisory Group to guide and shape the early stages of reform implementation, monitor and advise on the system-level impact of Roadmap initiatives, track aggregated child and family results, share learnings on cultural and practice change and service innovations and advise on subsequent reform activity
- build on existing area partnerships and Best Start partnerships to involve community leaders and local agencies to set out clear roles and responsibilities, define how Support and Safety Hubs and local networks of services will communicate and interact and support local implementation efforts
- enhance place-based approaches including through the use of a collective impact framework to improve local decision-making, planning and accountability

- establish a comprehensive outcomes framework across all agencies for child and family services in Victoria, one which incorporates the measurement of improvement or 'gain' as lead indicators of improving outcomes
- develop and implement a strategic performance management framework that connects outcomes measurement with service performance and one which incorporates an increased focus on safety and quality through, for example, improved incident reporting
- develop funding models that use investment strategies that deliver best results and encourage collaborative approaches. This will involve greater 'broad banding' of program funding to enable greater flexibility to match services to child and family needs, and greater alignment of funding to proven interventions
- develop an industry transition plan to support the required evolution of provider organisations and their business models to best deliver within the future system environment, with a particular focus on workforce transition to ensure ongoing economic participation. This will include the future evolution of the Department of Health and Human Services.

## Building the capability and capacity of the workforce

Increasing the capacity and capability of current workers across the broader child and family and aligned sectors will be an important element of reform, with a particular strong focus on building capability in trauma-informed practice and multi-agency working.

The Royal Commission into Family Violence has emphasised the need for training in trauma-informed practice to give staff the skills to identify and address more complex risks faced by families experiencing family violence. Training and professional development needs to include early years and school staff.

The Department of Health and Human Services has been working in partnership with the Centre for Excellence in Child and Family Welfare to map the current and future capability needs of family services and residential care workforces. This work will underpin future workforce planning and development.

### Immediate actions

Achieving better results for vulnerable children, young people and families will require practice and cultural change for both client-facing and non-client-facing workforces.

As part of the first stage of transforming residential care, the Department of Health and Human Services will partner with the Department of Education and Training and organisations delivering residential care services to establish mandatory qualifications for residential care workers, and support upskilling of the existing workforce.

To build confidence and capability in new system models, joint assessment and planning processes and evidence-informed interventions, the Victorian Government will work with professional bodies, front-line workers and child and family services to develop:

- a long-term workforce strategy that identifies future workforce requirements and skills gaps, and supports the delivery of more child and parental evidenced-based interventions, trauma-informed care, multi-disciplinary working across universal, targeted and specialist workforces
- workforce learning and development strategies, plans and programs, including improving the qualifications provided to key areas of the workforce to build cultural competency and skills in the identification of family violence, communicating with families with complex needs and behavioural change
- key practice frameworks that create a consistent way of working with children, young people and families from a range of backgrounds in a range of circumstances.

## Implementing the Roadmap for Reform

Improving outcomes for vulnerable children, young people and families will require a shared commitment and leadership and new ways of working. The detailed design of new service models and interventions requires detailed input from all of those invested in its success:

- from young people and families to make sure there is a strong focus on what matters most to them
- from the professionals with front-line experience in delivering services to vulnerable children and families
- from researchers and experts who can synthesise past lessons and help build the evidence on what works.

It will require a strong investment in building new capabilities across all of the workforces that are important to children, young people and families, as well as a focus on the other building blocks for reform – information sharing, data and analytics, funding models and governance.

The actions spelt out in this Roadmap form part of the implementation of the recommendations of the Royal Commission into Family Violence, which have been accepted by the Victorian Government in full. This will include close collaboration with the recently established Victim Survivors' Advisory Council, chaired by former Australian of the Year, Rosie Batty and a family violence steering committee.

A phased approach to reform has been developed to enable effective co-design, deliver early success and set the foundation for longer-term sustainable change, including:

- commencing the first phase of the statewide roll out for new service delivery models in:
  - residential care, commencing with design from 1 July 2016
  - integrated social services as part of the roll out of Support and Safety Hubs and local service networks from 2017
- progressive roll out across the state of new models for placement prevention, residential treatment and integrated social services from 2018
- publication of an evidence-based and promising practice menu for child and family services by the middle of 2016, and a workforce strategy by 2017.



Implementation will adopt an adaptive approach, learning lessons during initial implementation phases and adjusting further implementation as appropriate.

Co-design will involve a shift in the focus of responsibility and control so that stakeholders in the system can – through working groups – become active partners in designing and shaping a future system, rather than being passive recipients of reform.

First steps will include establishing a governance structure for implementation of this first package of initiatives.

A Ministerial Advisory Group will be established, chaired by the Minister for Families and Children and supported by sector working groups. These working groups will include membership drawn from the community sector, academia and government and will provide leadership to specific areas of the Roadmap development and implementation.

These governance bodies will form part of the overall governance to advance implementation of the Royal Commission into Family Violence recommendations.

## Appendix 1: Expert Advisory Group

An Expert Advisory Group has provided specialist advice and information to the Minister for Families and Children and ensured that the strategic direction of the Roadmap is consistent with contemporary evidence and reform.

The Expert Advisory Group included experts from the children and families, early childhood, clinical practice, academic, public, and commercial advisory sectors.

Member	Position
<b>Hon. Jenny Mikakos</b>	Minister for Families and Children (Chair)
<b>Karen Batt</b>	Secretary, Community and Public Sector Union Victoria
<b>Professor Muriel Bamblett AM</b>	Chief Executive Officer, Victorian Aboriginal Child Care Agency.
<b>Dr Patti Chamberlain</b>	Science Director, Oregon Social Learning Centre
<b>Professor Marie Connolly</b>	Chair and Head, Social Work, Melbourne School of Health Sciences
<b>Micaela Cronin</b>	Chief Executive Officer, MacKillop Family Services President, Victorian Council of Social Services Deputy President, Australian Council of Social Service
<b>Lisa Darmanin</b>	Branch Executive President, Australian Services Union
<b>Captain Jason Davies-Kildea</b>	Manager, Social Programme and Policy Unit, Salvation Army Victoria
<b>Sandie de Wolf AM</b>	Chief Executive Officer, Berry Street
<b>Angela Forbes</b>	Chairperson, Centre for Excellence in Child and Family Services Chief Executive Officer, Connections UnitingCare



Member	Position
<b>Michaela Healey</b>	Group Executive, Governance and Reputation, National Australia Bank
<b>Karen Heap</b>	Chair, Victorian Aboriginal Children and Young People's Alliance Chief Executive Officer, Ballarat and District Aboriginal Co-operative
<b>Dr Anne Kennedy</b>	Early Childhood Education and Care Consultant Chairperson, Community Child Care VIC
<b>Professor Louise Newman AM</b>	Director, Centre for Women's Mental Health, Royal Women's Hospital Professor of Psychiatry, University of Melbourne
<b>Professor Frank Oberklaid OAM</b>	Foundation Director, Centre for Community Child Health at The Royal Children's Hospital Co-Research Group Leader (Policy, Equity and Translation), Murdoch Childrens Research Institute
<b>Dr Sylvia Rowlands</b>	Senior Vice President, New York Foundling
<b>Ms Helen Silver AO</b>	Chief General Manager, Workers' Compensation Division at Allianz Australia Former Secretary, Department of Premier and Cabinet, Victoria
<b>Steven Skala AO</b>	Vice Chairman, Australia and New Zealand, of Deutsche Bank AG
<b>Lisa Sturzenegger</b>	Chief Executive Officer, OzChild
<b>Deb Tsorbaris</b>	Chief Executive Officer, Centre for Excellence in Child and Family Welfare





