



**LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL
TERRITORY**

**STANDING COMMITTEE ON EDUCATION, TRAINING AND
YOUNG PEOPLE**

(Reference: Annual and financial reports 2006-2007)

Members:

**MS M PORTER (The Chair)
MR M GENTLEMAN (The Deputy Chair)
MR S PRATT**

TRANSCRIPT OF EVIDENCE

CANBERRA

WEDNESDAY, 27 FEBRUARY 2008

**Secretary to the committee:
Dr S Lilburn (Ph: 6205 0490)**

By authority of the Legislative Assembly for the Australian Capital Territory

Submissions, answers to questions on notice and other documents relevant to this inquiry that have been authorised for publication by the committee may be obtained from the committee office of the Legislative Assembly (Ph: 6205 0127).

APPEARANCES

Department of Disability, Housing and Community Services	57
Official Visitors	81

The committee met at 2.00 pm.

Appearances:

Gallagher, Ms Katy, Minister for Health, Minister for Children and Young People,
Minister for Disability and Community Services, Minister for Women

Department of Disability, Housing and Community Services

Lambert, Ms Sandra, Chief Executive

Mitchell, Ms Megan, Executive Director, Office for Children, Youth and Family
Support

Kitchin, Ms Jenny, Director, Office for Children, Youth and Family Support,
Service and Sector Development

Wyles, Mr Paul, Director, Office for Children, Youth and Family Support,
Youth Directorate

Harwood, Mr Neil, Director, Office for Children, Youth and Family Support,
Aboriginal and Torres Strait Islander Services

Pappas, Ms Helen, Senior Manager, Early Intervention and Prevention Services

Collett, Mr David, Director, Asset Management

Whitten, Ms Meredith, Senior Director, Government, Advocacy and
Community Policy

THE CHAIR: The other member of our committee, Mr Pratt, did say that he may be somewhat delayed; he would try to get here at 2 o'clock. I propose that we start. I know that the minister has other things on her mind. I welcome the minister and officials. Thank you very much for coming. We have a new way of doing the privileges statement, which is much shorter. I have to let you know that you have the privileges statement in front of you and ask you whether you have read it and whether you understand the content of it and the implications of the privileges statement.

Ms Gallagher: Yes.

THE CHAIR: I move:

That the contents of the privilege card be incorporated into the *Hansard* transcript.

That is accepted.

The statement read as follows:

Privilege statement

To be read at the commencement of a hearing and reiterated as necessary for new witnesses

The committee has authorised the recording, broadcasting and rebroadcasting of these proceedings in accordance with the rules contained in the Resolution agreed by the Assembly on 7 March 2002 concerning the broadcasting of Assembly and committee proceedings. Before the committee commences taking evidence, let me place on record that all witnesses are protected by parliamentary

privilege with respect to submissions made to the committee in evidence given before it.

Parliamentary privilege means special rights and immunities attach to parliament, its members and others, necessary to the discharge of functions of the Assembly without obstruction and without fear of prosecution.

While the committee prefers to hear all evidence in public, if the committee accedes to such a request, the committee will take evidence in camera and record that evidence. Should the committee take evidence in this manner, I remind the committee and those present that it is within the power of the committee at a later date to publish or present all or part of that evidence to the Assembly. I should add that any decision regarding publication of in camera evidence or confidential submissions will not be taken by the committee without prior reference to the person whose evidence the committee may consider publishing.

I also have a few housekeeping matters which I need everyone in the room to observe:

All mobile phones are to be switched off or put in silent mode;

Witnesses need to speak directly into the microphones for Hansard to be able to hear and transcribe them accurately

Only one person is to speak at a time

When witnesses come to the table they each need to state their name and the capacity in which they appear.

THE CHAIR: Would you like to make some opening remarks, minister?

Ms Gallagher: Only to say that I am here for as long as I can be this afternoon. I have to take my son for an urgent medical test. It was unknown to me before 12 o'clock today. I thank the committee for their indulgence. Officers are happy to remain and work through until the scheduled time. I guess I would say that, if there were going to be political questions, they should happen while I am here.

THE CHAIR: Yes. You would prefer that policy questions be asked while you are present.

Ms Gallagher: If there are political questions that are difficult for officers to answer, yes.

THE CHAIR: We could take those on notice.

Ms Gallagher: I am more than happy to appear at the committee's will on another day. It is just that this has occurred, as I said, only late this morning. I am waiting for a phone call.

THE CHAIR: Your office did notify me earlier that there may be some issues. I have checked with the other members of the committee. We are all aware of that. We will get started with the questions.

MR GENTLEMAN: I might kick off with a question about the child and family centres at both Gungahlin and Tuggeranong. Tuggeranong was established most

recently. Could you advise the committee what you found by way of services delivered and the responses to services in these two areas? Have you found any differences between the two child and family centres in those two areas?

Ms Gallagher: Thank you for the question. We will answer your question in detail. The child and family centres, which are a flagship commitment of the Canberra plan and the social plan and are really linked to the children's plan, have, I think, exceeded everybody's expectations not only in terms of the number of families using them but also the flow-on benefit they are having in terms of creating community connections, linking families into appropriate services and supporting those vulnerable families that we have in our community to access more mainstream services rather than specialised, traditional child protection-type services. I am very happy with how they are going.

I think the issue for the child and family centres in the future will be how we manage demand for services rather than advertising services or needing to promote the centres because they have done a really fantastic job over the last couple of years, both in outreach before the Tuggeranong centre was up and running and outreach in Gungahlin before that centre was up and running. The government is considering the possibility of a third child and family centre in the west Belconnen area.

Ms Lambert: I will add a couple of things in relation to your question. The difference between the two has really been determined by their locations, to a certain extent. Clearly, Gungahlin was part of an emerging community, and it has been built in that way. Tuggeranong, of course, is an established community. We had to work very carefully with services that were already established there.

What I am interested in in terms of what is happening at the moment is: I was at the Tuggeranong Child and Family Centre last week and was told that the programs that they have developed have now been picked up by the regional services as well. They are not running them. They have had a seeding effect. We hand those programs over to other community services to run as well.

While we are based in those two areas, there is actually a quite significant outreach that is not occurring necessarily by us but by other centres that are using some of our programs. That has been quite effective.

MR GENTLEMAN: That has become more of a focal point for families with family issues and they can learn from that, too. At the Tuggeranong centre—and the minister touched on demand in the future—how many staff do we have at the moment?

Ms Pappas: We have four clinical staff on the ground that are actually doing interventions with families. Then we have our team leader and the centre manager and administrative staff.

MR GENTLEMAN: That is meeting demand at this time?

Ms Pappas: We are able to keep up with the demand at Tuggeranong. As we have mentioned earlier, there are other services within the Tuggeranong region and it is about us working together and complementing the work that we do, rather than

duplicating. We have quite a good coordinated referral system where the services do come together and talk about which family and their needs and how they are going to be met within the service in Tuggeranong.

THE CHAIR: I know Dr Foskey has a supplementary, but I have a quick supplementary first. Minister, you mentioned the west Belconnen area and the plans to perhaps do something similar there. I guess the experience you have had at both these other locations would inform what you may or may not do in the Belconnen area. You would be aware that there are a number of organisations that have formed coalitions, I think, and got together to try to work in a more cohesive way there. I wonder how far the plans might have advanced in that area.

Ms Gallagher: It is a very complex issue. I went out and visited Uniting Care at Kippax, say, 18 months ago. They run a very comprehensive set of programs there which include targeting families that we would probably want to target as well as part of a childhood family centre. I have been very conscious of the fact that we need to, a bit more like Tuggeranong, work with what is existing there in terms of the model that we put forward.

There is no doubt in my mind that the statistics on the population of west Belconnen would support more services rather than fewer and, if those services are integrated, whether they would be offered by Uniting Care at Kippax or through government services. The types of interventions that might be appropriate for that family are irrelevant. We know that there is demand there.

Gungahlin, obviously, has a number of young families. Tuggeranong, again, we could see from our data, had a need. Based on the latest data you would have to put west Belconnen almost ahead of both of those existing services now. That is based on the indicators that we watch. We know it would be welcome, but we have got to do it in a way that, if the government approves, works with existing services and make sure we offer the services that are genuinely needed there. We looked at all of that in terms of how we move forward.

One of the key things the government needs to consider is: do we need to build a purpose-built child and family centre or could we support more of an outreach model there, within existing facilities? I would say that would be difficult. You would have been to Uniting Care at Kippax. They are a large provider, but they are already bursting at the seams. We would look at that as well.

There is also the issue of the early childhood schools and how our services might work with them. There is one, not for west Belconnen but, as you would know, for Scullin. It is just outside that area. There are a few balls in the air at the moment, but we are looking at all of it.

THE CHAIR: There is a quite substantive Indigenous population in the region. I know, from other parts of the report, you have been doing some work with Indigenous communities. How is that going? Whereabouts is that located? Is it happening in both regions where most of the Indigenous population is situated?

Ms Pappas: It is an initiative of the Gungahlin Child and Family Centre, along with

the department of education; in particular, the Koori preschools at Holt and Ngunnawal. It is within the Gungahlin geographic location but it also extends into west Belconnen. In fact, it works with all Indigenous families on the north side of Canberra. The project is going ahead in leaps and bounds. It has undertaken quite significant work with the community and is family led.

It commenced in June 2007. We actually employed an Indigenous community development worker. That worker has really been our funnel into that community. We had made some attempts in the past, but not very successfully, and that worker has actually opened up some doors for us. There was a process of consultation and building trust. We were showing ourselves to that community and saying to them, “You can trust us. We are here to listen to you and try to service your needs.”

The families identified what they felt their needs were. It was to do with school transition and wanting their kids to look like every other child that attended school—having bags and clothes and those sorts of things. They were particularly interested in first aid, nutrition and dental health. Then it was about social and emotional wellbeing. That was incorporated through dance, culture, counselling and parenting.

As a program, we went away and thought, “Now that these families have told us what they need, we are going to try to develop some programs.” A lot of the work that we had been doing in the Gungahlin region anyway could just be transplanted. We tweaked them about programs, to make sure that that was appropriate for an Indigenous population. We actually went out to the school and did these programs at the school. Sometimes we had three families, sometimes we had 15 families. It was not about numbers for us; it was about getting that engagement and building that trust and that confidence in that population that we service.

Along with that, we encouraged and supported that group of parents to develop an Indigenous parent association for the preschools. We understand, and families are telling us, that is a first for them in the ACT. That was quite significant. Again, that was led by the families. They felt they needed to take that action.

We supported the families to apply for Children’s Week grants. We actually ran a Children’s Week activity at the Gungahlin Child and Family Centre. We had about 50 people attend that. Subsequent to that, we also had a family Christmas barbeque, which was huge. We had police and fire brigade and Kenny Koala. All sorts of people turned up. We had 110 people attend that. The idea is to keep families coming into the centre and feeling confident about engaging with us and accessing the services.

At the moment we are looking at making some stronger health connections in terms of access to health services. Really it is just about responding to the needs of those families as they raise them with us. We had in June fewer than five families at the centre. Post this project, at this point, we have got 21 families each week that continue to be referred. It is that word-by-mouth referral. A lot of families are accessing on their own because they have heard about the project and have heard about the work.

DR FOSKEY: I am certainly very happy that these child and family centres will be unrolled across Canberra. I wonder how you are going in regard to staffing issues because I believe there is a bit of a skill shortage in the area. If not, please explain.

Ms Pappas: I do not think so.

Ms Gallagher: I do not think we have got one in the child and family centres; everyone wants to work there. We have to keep people out of there.

DR FOSKEY: That is with the appropriate skill?

Ms Gallagher: Yes. One of the things we are seeing in the organisation is that people are wanting maybe to have a break from other areas in the department but they want to stay within the department, and the child and family centre is one of the desirable locations to go to. For example, if a child protection worker is exhausted and needs a break, that would be a different type of work but would mean staying within the same area. Whilst staffing is an issue in other areas of the department, it is not an issue in child and family centres.

DR FOSKEY: Given that it is a respite situation for the child protection worker, and I am appreciative of the incredible stress of that work, is there a way that it can be staged into the employment, to try to avoid burnout and loss of staff in that area?

Ms Gallagher: It is difficult because it is about finding the right balance of continuity of service within an organisation in order to keep the programs running and allowing some rotation through the organisation. Sandra certainly works very hard at keeping our skilled professionals within the department and, if they do need a break, looking at ways that they can be moved within the department to offer them that respite, because they are too valuable to us. That is how employers are having to respond to the skills shortage. We are having to think of ways to retain staff, particularly in these areas, where the work is so difficult and so draining. In child protection—and I am sure we will get to that at some point—we have had vacant positions. We have been carrying them all year, and I imagine we will carry them for some time to come. It is a difficult job and there are shortages across the world. But we are very mindful of rotation opportunities, which I think is the key to your question.

THE CHAIR: Mr Pratt?

MR PRATT: I apologise for being late. I am not sure whether you are following a particular sequence.

THE CHAIR: Just starting from the beginning and going forward.

Ms Gallagher: Political questions first, though.

THE CHAIR: Yes. The minister might have to leave. The minister has explained that she has a child who is not well, so she may need to leave at some stage. We discussed this earlier. You need to bring forward any questions of a political nature.

MR PRATT: Firstly, my sympathies, minister.

Ms Gallagher: Thanks.

MR PRATT: Secondly, I don't have any political questions. They are all professional questions so it will not really matter. Good afternoon, minister and officials. I go to page 19—the Bimberi Youth Justice Centre. Minister, I apologise if you have already given a briefing on this.

Ms Gallagher: No, we have not discussed Bimberi.

MR PRATT: Will the project meet its target date of June 2008?

Ms Gallagher: I went on a tour of Bimberi about 10 days ago. Based on the weather at the time and the work that has been done, it is scheduled for handover at the end of June, with commissioning happening from that time into August. We are hoping to have it operational in August this year. If any committee members are interested, because this is the relevant committee, we would be more than happy to facilitate a tour. It is still largely a construction site at the moment. There are some finished units, and the health centre is almost finished. You can certainly see what the place will be like, but if the committee chooses to go after it is finished, before it is commissioned, that would be wise as well. It is looking fantastic. Hindmarsh have been doing an excellent job. It has been very closely managed by David Collett and his team. At the moment it is coming in on budget and on time. And it has a very large fence around it!

MR PRATT: So will those four young chappies be impressed with the new fence?

Ms Gallagher: We are pretty confident they will be quite impressed. More importantly, they will be on the correct side of it.

MR PRATT: So August is your commissioning date?

Ms Gallagher: Hindmarsh are due to hand over on about 30 June. At the moment they are trying to finish one building and then go in to look for defects and get them fixed, so that it is not left—

MR PRATT: Fit-out and stuff like that?

Ms Gallagher: Yes. That does not happen for the whole site on 30 June. We would like it to be operational as quickly as possible but it will be quite a complex piece of work to decommission Quamby and get Bimberi up and running as well.

MR PRATT: So you are within budget—the \$42.5 million? You are on target for that?

Ms Gallagher: That is right.

MR PRATT: It would seem to me that the cost per head for this project will be over \$1 million. Is that a fair assumption? If so, why would it be that expensive?

Ms Gallagher: The building cost is \$42.5 million, and it is to accommodate 40 young people, which I guess crudely equates to \$1 million per head, but we are talking about one-off infrastructure costs here. We are constructing a building that is human rights compliant. It does have a number of improvements over the current site at Quamby, in

the sense that it has playing fields and an indoor gymnasium, so that the young people have somewhere to go on a rainy day, which they do not have at the moment. It has a small pool, because we know from all the research that if young people are exercising, they do better in terms of focusing their minds on other opportunities within the centre.

It has a state-of-the-art school with a library. It has a very nice health centre, which has almost been completed. It has a town square type of feel to it, in terms of the layout. So the accommodation is at the back of the block, the main parts of the daytime facilities are in the middle of the block, and at the front of the block is the visitors area, where you first come in and where you can meet with young people if you are visiting them.

So we are paying for a very good building, and a building that will last. There is also the opportunity for it to be extended. Future governments will not be left with a Quamby. If they need to extend it and have another accommodation complex put on that site, they can do so. I guess we are trying to build a centre which focuses on rehabilitating young people but which will also be there for the long haul. It is not like Quamby, which we have at the moment, which was built in the early nineties and which has been a disaster since the minute—

MR PRATT: A camel with four humps.

Ms Gallagher: Exactly. The one-off infrastructure costs are there, but I don't think you can equate it to being \$1 million per head. A number of young people will come through there over the years. We are hoping it will last for more than one year.

MR PRATT: The state-of-the-art school: what sort of teacher-student ratio are you planning to have? What is the benchmark for that?

Ms Gallagher: It is a matter for the department of education. They run the school—the Hindmarsh Educational Centre. My understanding is that they usually have two teachers there on any day of the week. I am sure we can confirm this. Numbers at the school depend on the resident mix at the time, which does fluctuate day by day.

Ms Lambert: We have started a very significant dialogue with education around how we might use those facilities to the best effect. So we are working collegially with education, as the people who run the facility, around the best programs possible, now that we have these facilities. A meeting to be held this Friday will be attended by all three chief executives who are involved—myself, Michele Bruniges, and Colin Adrian from CIT. So we are working very closely on what will be the best mix of programs for these young people, particularly looking at the different types of young person we have in there. The act requires us to be child and young person centred, so we are looking at a program which enables us to wrap more services around the young people. So it is under very active consideration at the moment.

MR PRATT: What sort of arrangements do you have for drug-affected youth? Is there a rehabilitation program that is integral to the centre's overall programs? If so, can you describe whether there is a demarcation between those kids who might have that sort of problem and the other kids in the centre? Is there a mix or not?

Mr Wyles: We are also in dialogue with the drug and alcohol policy and purchasing section of ACT Health. Currently, the Ted Noffs people visit the centre. We have a very good service from the Ted Noffs people. Also, when people are discharged from Quamby, they may access that or a range of programs—a residential program in New South Wales, a Salvation Army program or even an ACT Health program in the city.

On entry to the facility, a nurse practitioner will make an assessment. They will then refer, if there are drug and alcohol issues for young people admitted to custody, and Ted Noffs will provide that support. In terms of separation, it is unusual for us to get young people with major drug issues. Occasionally it happens, but it is pretty unusual for us to get someone with an entrenched drug-taking pattern. The nurse and Ted Noffs provide the support that is required.

DR FOSKEY: In consulting the heads of education, are you also consulting the people who have been delivering the education programs at Quamby?

Ms Lambert: Yes. In fact, there has already been a meeting at that level, and we have got input from that meeting as well. So, yes, we are consulting with everybody.

Mr Wyles: It is probably important to consider that the young people are in an age range from about 12 to 18, so training is probably as important. There is often a cohort who are past school leaving age.

MR GENTLEMAN: While we are on the education program, on page 185, under the Hindmarsh Educational Centre, the official visitors noted continuing improvement there, but at the end of their statement they talk about broadband problems and that student access has been delayed due to complex IT problems. Has that been solved?

Ms Gallagher: It has not. This has been going for a little bit of time. The official visitors have written to me, and I have met them and talked about this. When I was education minister, we looked at this issue. The advice I had at the time, if I recall it correctly, was that the costs of installing broadband to the centre were very significant. As the government was building a new centre, with all this capability, the decision was taken to hold off on that work, just because of the costs. Quamby is set out by itself on the side of a hill, and it was going to involve quite major work to get broadband into the school. We did look at it very closely, but it was one of those things: do you spend that sort of money on doing that, for a very short return, by the time we finished the work, or do you focus that money on using it in Bimberi's education facility, which was the decision I ultimately took. Education and DHCS have significantly improved the Hindmarsh Educational Centre in recent years, having regard to staff, the programs they run and the way they manage individual young people. So it is unresolved, but it is consciously unresolved.

MR GENTLEMAN: Broadband is still an issue in the Gungahlin community.

Ms Gallagher: Yes.

MR GENTLEMAN: So there are still some technical issues.

Ms Gallagher: I think we are okay at Bimberi.

MR PRATT: I have a question but I have to leave in about two minutes; that is the problem.

THE CHAIR: How about you see if it can be quickly answered.

MR PRATT: My question is about page 6, Aboriginal and Torres Strait Islander people. If you have made an opening statement about this area, minister, and I ask a question that cuts across, I do apologise.

Ms Gallagher: It may be one for the Chief Minister anyway, depending on what it is. If it is about the Aboriginal and Torres Strait Islander unit within the Office for Children, Youth and Family Support, it is mine, but if it is around those areas that the Chief Minister has responsibility for as the minister for Aboriginal affairs—

MR PRATT: Okay. I am wondering whether perhaps this is therefore too broad. I was going to ask you about the budget that is being discussed but I presume you do not have much to say about the youth component of that budget, or do you?

Ms Gallagher: Which budget would that be?

MR PRATT: The overall budget, what kind of budget is being discussed. I am just trying to look at the—

Ms Gallagher: For the Aboriginal and Torres Strait Islander unit?

MR PRATT: Yes.

Ms Gallagher: If it is about the Aboriginal and Torres Strait Islander unit within the Office for Children, Youth and Family Support, then yes it is mine, and we are always looking at the budget would be my answer—only because I do not know what the specifics of your question are.

MR PRATT: I was going to ask you questions about the budget and what activities you were seeking to have budgeted—whether there is much difference at all between the year coming as against what you have budgeted in the past; whether you had any new initiatives that you were looking at.

Ms Gallagher: Within the Aboriginal and Torres Strait Islander unit?

MR PRATT: Within the unit itself.

Ms Gallagher: As you would know, we are currently going through the budget process.

MR PRATT: You do not want to talk about it here?

Ms Gallagher: Not really. I am not in a position to at the moment but of course—

MR PRATT: I suppose the question could therefore be: in the reporting year itself

did you have additional activities that you successfully budgeted and had costed versus previous years? Have you been able to develop the unit any further and what was the—

Ms Gallagher: I think the answer to that is yes.

MR PRATT: And what were those additional initiatives?

Ms Gallagher: It is more a continuation of the rollout of the services that the Aboriginal and Torres Strait Islander unit provides. It has been charged with quite a deal of work. I am sure we could get Neil Harwood to talk about it if you are interested. Did you say you have to go in two minutes?

MR PRATT: Could I park that question and you come back and brief me later?

THE CHAIR: When you come back, we will revisit that one.

MR GENTLEMAN: I might go on to the Youth Advisory Council. There is a note on that on page 27. It used to be the minister's youth council. The committee had a lot to do with the council with its inquiry into the voting age and whether we should lower it. I must admit we have not dealt with them much since that time. There is a note at the bottom of that column about specific issue forums that they will be hosting. Can you give us an insight into what forums there will be?

Ms Gallagher: Sure. We do have a new Youth Advisory Council. We went through quite a lengthy process of selecting new council members for that. I have met with them. It is co-chaired by Reece Colman, whom many members would know, and Kristy Cope. They are fantastic leaders. We have put some quite young people back on the council after taking really quite young people off in previous years, thinking they were not heard or did not participate as much. There are some 13 and 14-year-olds on the council now and they are being heard; that is for sure. I am really pleased with the appointments. It is a very strong council and the co-chairing arrangements I think will be of benefit.

The challenge for the Youth Advisory Council, and it has been this way for a number of years, is not to bite off too many things. It is a group of really motivated young people and they are all interested in their own particular areas of expertise and are trying to work out a reasonable work program forward because they already have a number of things that they are involved with. They are involved with youth week, they run the Youth InterACT Conference, they have launched a new website to try and engage more young people online, they sit on committees that look at the young Canberran of the year, they sit on committees looking at the Youth InterACT grants. So just their core business makes them quite a busy group of people and then they have other issues that they want to pursue as well. But they are holding specific issue forums.

Mr Wyles: Out of the Youth InterACT Conference last year one of the issues was around young people's relationship with the law. In November last year they held a forum called "Young people and the law" and the Attorney-General attended, as did the children's commissioner, the Australian Federal Police, a young person who had

been in Quamby and a lawyer. They all spoke and it was a very useful forum. We had very good feedback about that. As the minister suggested, as they have capacity and as those issues emerge I would see more of those things being held.

THE CHAIR: Minister, around that same page there is mention of two other forums, the Children's Services Forum and also the schools as communities initiative. Could we have an update on how they are going?

Ms Gallagher: I can certainly talk about the Children's Services Forum because I chair that forum and we have quarterly meetings. That is a forum I established as a way forward with some of the issues that were arising with childcare—accessibility of childcare, affordability of childcare, workforce issues, licensing and regulation issues. It was about trying to bring together a fairly tight group of experts in their own areas to meet with me to talk about what needs to happen. It is a very useful forum. As I said, it brings together a whole range of people in the sector—the for-profit providers as well as the not-for-profit; training organisations such as the CIT; regional community services—without being too big to be ridiculous. We have already kicked off and bitten off quite a bit of work.

ACTPLA are there as well because when we established the forum there was a lack of understanding about where childcare centres were going to be, how you managed to get a childcare centre up and running and who was eligible for it. So ACTPLA have been around the table and that has been a most beneficial relationship. They commenced some work around childcare needs assessment across the city, which is work that they are completing. That gives us a picture of where the demographics are going, where the centres are going and do they match up, and it also helps us in terms of looking at where we might put other community-based facilities.

The issues that we are still working on are around workforce—what we can do to train and retain workers. Our training is okay; they train but then they go off and do something else, not childcare. That still to me is the most pressing issue: how do we prepare and have a qualified workforce, because the young people just are not staying and the older people who have worked in childcare for a long time are getting ready to retire. That is the issue that we still need to focus on and I am not sure there is an easy answer to that, other than upping wages and paying what you pay for a preschool teacher in terms of salary. But the issue then again is that parents cannot afford to pay that salary. Childcare is already creeping up over \$300 a week full time; if you have two children that is \$600 a week or \$1,200 a fortnight. You can see that it is already out of some people's reach in terms of access to it. There is just not an easy solution but I am meeting again with them in the next couple of weeks. It is a very good forum.

Schools as communities is probably the one program I have never had a complaint about, ever, and I am sure Jenny or Helen can tell us more about what is happening there.

Ms Pappas: The schools as communities program continues to provide a school link to the school-based services. There are seven workers across 10 school sites across the ACT. They draw services into the school system and work with both government and community services to provide access to families and to try to work with families to resolve whatever the presenting issue is, both within the school system and in the

family home. The schools love them; they are in there doing community development work, doing individual case management, running evidence-based programs and continuing to achieve good outcomes for the families and the children in the school system and at home.

Ms Mitchell: I would just add that the schools as communities program is now integrated into the early intervention program of the department and that means that they are also located at the child and family centres as well as at the schools, so that is a much more integrated service model than in the past.

DR FOSKEY: Page 28 says that a refocusing of the family support program will occur during this financial year in consultation with service providers and that there will be an increased focus on families with more complex needs. How is the program rolling out and what happens to the people without such complex needs but who nonetheless still require support?

Ms Mitchell: This goes back to the conversation about an early intervention program and what that looks like. There is a commitment to focus that effort in a way that ensures that we reach vulnerable families as a priority. A number of the family support services that we fund agree with that and we have already had preliminary discussions with them. There would not be an intention to withdraw services from existing people, families, who did not meet the criteria, but over time to look, examine, with the services, who they are targeting, what sorts of services they are providing and to ensure that they are the best evidence-based programs we can have and that over time we focus more and more on vulnerable families as part of an early intervention program. That does not mean that we would necessarily move away from a universal access approach either but it is a way of capturing and engaging vulnerable families and that is our core business.

DR FOSKEY: What organisations are receiving funding and delivering services under the program?

Ms Gallagher: There are a number of them, Dr Foskey. This has been the issue with the family support program since I have been minister. From memory, it is a just over \$2 million program and it goes, I think, to over 30 organisations. It is 21 organisations. I can give you a full list. It is no problem to provide the committee with that.

My concern around this program was that as it historically evolved—and I have say this has been generated by my concerns around this—it is not that the money has not been spent on very worthy people accessing community services, but it is not necessarily being focused on family support programs. That is what the program was established to do. So I have asked that as people move through those services a refocus occur to look at those families with significant needs.

For example, we have been paying through that program—and I will be corrected if I am wrong—some money for childcare places. There have not been any criteria attached to those childcare places for some time. Theoretically I could go and get one of those places—not that I would, but theoretically I would have been eligible to access a funded childcare place. In our discussions we are asking that that be targeted to those families in need. But it is voluntary. There is no detriment. We do not want to

take any money off anybody, but we would like the family support program to be a family support program and to support those families that would have difficulty accessing services elsewhere or being able to afford to pay for services elsewhere.

DR FOSKEY: Will the changes in the focus mean that there need to be changes to the funding agreements?

Ms Gallagher: I imagine that over time, yes, there would. But, again, I would prefer that this go through a voluntary service agreeing with the department. That is my preference. What I am saying is that I certainly do not believe that that money attached to that program is not being well used. I am just not convinced that in all circumstances it is being used for the purpose that it was originally intended for. This is over a number of years. There is no fault being laid, but as the office continues to have referrals of very, very complex families under significant stress we need to make sure that our community providers are supporting us in terms of how we support those people in the community. This is an obvious program where we would look for that cooperation and collaboration.

DR FOSKEY: Is there going to be any change to the numbers of clients that are serviced in the program? Is there a reduction?

Ms Gallagher: I think those individual service discussions need to occur. As I said, I would hope—I know it is the department’s intention—to do that voluntarily. It would not be a matter of the department fronting up and saying, “You are to work with the four hardest families in your suburb and we want you to provide more than you can provide for that money.” It will not be an unreasonable request.

These contracts are usually in place for three years, aren’t they? It is three years. If there is an agreement, then we can always wait for the duration of those contracts to expire, as opposed to having a disagreement with the service provider. That is not the intention. The intention is to put on the map that there are families out there that we need our community sector partners to help us with.

DR FOSKEY: And it will not lead in the end to a reduction in funding for the program?

Ms Gallagher: You cannot say never, never. But, say, at the end of three years, if there was not agreement reached around a refocusing of arrangements then we would retender. In fact, this program does go out through a contract negotiation process. You cannot say that at the end of the contracts there would not be a reduction, but certainly while those contracts are in place it is very much that we are requesting a voluntary approach. Organisations would not be asked anything unreasonable.

Ms Lambert: In fact, I met last week with the regional community services particularly around this matter, among other matters. I meet with them quarterly. We agreed that we would continue the discussions and work out ways to continue to provide the services that they were providing under this program and how to work towards a refocusing of it. So it was a meeting where we agreed to work ahead on this cooperatively.

Ms Kitchin: Can I clarify that? In volume 2 on page 237 there is a list of all the agencies that are funded through the family support program and the children's services program.

THE CHAIR: Minister, I assume that some of these organisations believe that they, in the long term, would not be able to attend to or work with those particular families that you are suggesting they work with and that if they want to put their energies in other places they could apply for other funds that are more appropriate—

Ms Gallagher: That is right.

THE CHAIR: for those particular things that they believe they need to do or that they believe the community wants them to do?

Ms Gallagher: Yes, exactly, and those are discussions that happen on a daily basis between a department and the NGO, as you know from your days in the sector. What we need to create is certainty for organisations around their funding. But we also need flexibility within that to be able to discuss emerging issues. When the Murray-Mackie report was handed down, it really did put the focus on vulnerable families from nought to two. The government has made enormous commitments around that, both in the office and their programs, but also in Health in starting off the impact program, as it is known, to work with vulnerable families.

The government needs to make sure that when we are focusing on something we have partners who are able to support us in that work and support those families. That is all that we are seeking. My experience of the NGO sector is that they are incredibly flexible as well, but they will not be bullied—not that we are bullies. They will not do something they do not want to do is a better way of saying it.

DR FOSKEY: Just in relation to the Murray-Mackie study, it says on page 5 that half of the 55 recommendations were expected to be implemented by 1 July 2007. Are there any reports or public documents that indicate how the government has progressed on both these and the Vardon recommendations?

Ms Gallagher: No, there has not been a public update of these recommendations from when we originally tabled them and the government's response. But we can certainly respond to questions that people have. I guess we have been pretty up-front about all of this work. We have tabled the reports. We have tabled the government's responses to them. There comes a time, I think, when we and the organisation itself have to move past Vardon and respond to, I guess, questions in a different way. That is not to say we are not focused on them, but for the organisation's sake—and this happens with a range of reports—when do you stop reporting on them? In terms of Murray-Mackie, which is a bit later, we can give you a good update on where that is up to.

DR FOSKEY: I am having a briefing tomorrow and I will go into more detail than that. One of the things that have been persistently recommended is the instatement or reinstatement of a child death review team. I know that there have been meetings about it, but I have not yet heard an announcement that such a team has been established, and I am interested in knowing why.

Ms Gallagher: Yes. I have to say that there is a child death review team in place. It is just in place in ACT Health, but it reviews every single child death that comes through the hospital, which all do at some point. The criticism of that, I think, in the past has been that it looks at a very clinical medical model of what occurred to the child. But what we have been able to do, and it has occurred in a couple of situations that I am aware of, is that we have been able to have DHCS staff involved in that process. So it is not just a medical look at that child. I do not want anyone to think that there is not a review of every single child death in the territory, because there is one. Then, of course, they are all subject to coronial review as well and they go through that process.

There was a recommendation in Vardon, if I recall correctly, that the commissioner oversee the child death review team. I think there are some issues around the legislation in that regard in the work being performed there and potential budget implications which we are working through. I think that in time we will move the child death review team from Health where it sits now, but is the commissioner the best location for it, how do we resource it adequately and how is it independent from other processes? Do you want to add to that?

Ms Whitten: The government agreed, following the Vardon report, to consider the establishment of a child death review team in the context of the possibility of having a children's commissioner, but the agreement was in terms of once the commissioner's role was established, and obviously the commissioner's role has been established. So we have been working with Justice and Community Safety and ACT Health, as the minister has identified, in terms of a phased development process. So that is where we are at at this point in time. Of course, the consideration in terms of establishing such a function within this jurisdiction is that the size of our jurisdiction is quite small. But also, establishing that kind of specific investigation role requires some resourcing as well.

DR FOSKEY: Are you saying the size of the jurisdiction is an impediment?

Ms Whitten: In respect of the size of the jurisdiction, the issue is how we report the information, given that we have got small numbers of children who do die and respecting the privacy of the families involved.

DR FOSKEY: I understand that, but there are advantages to the small jurisdiction as well in this regard, I would think, and why it might be a good idea to take it out of Health and broaden it.

Ms Lambert: Just in relation to the reports, Dr Foskey, if I could add to that, the Vardon and Murray reports are reported on to our own audit and review committee, which, of course, has an independent chair and deputy chair. There was last a report, I think, in June of last year. What the focus has been in the last year in regard to that report is making sure that we deal with the Aboriginal and Torres Strait Islander matters that were outstanding. They have all now been completed. We have a series of youth forums. We have had a gathering. We have done all those things. So that is, by and large, completed.

There are a couple of things, such as the child death review process, that are still ongoing. In relation to Murray-Mackie we have now implemented 50, I think, of the 55 recommendations, and Ms Mitchell may be able to give you a bit more detail on that.

Ms Mitchell: That is right. We have implemented 50 of the 55 recommendations. There is very little outstanding in that area and the things that are outstanding are really ongoing tasks. It is probably at a point where we can draw a line and say we will have completed most of those, all of those tasks in the near future.

DR FOSKEY: And the situation, therefore, has changed for the children?

Ms Mitchell: I think the system changes. I am new to the ACT in this role, but from coming in six months ago and looking at what system changes have been put in place in this jurisdiction, having come from DOCS, I think the system changes here are really significant and are making a significant difference to children at the end of the day.

Ms Lambert: The things that are still in progress are things like the recommendations around our workers, continuing to support them in terms of the trauma that they face often in this job when they go into very, very difficult situations, the stressful work that they do. Those are some of the things that are being described as still being in progress. They will never be completed. They have to be ongoing. The work we do with our staff in these areas is very, very important and they do actually experience vicarious trauma quite often from the situations they go into. I would never say that we will complete those recommendations. In fact, we actually need to have a continuing focus on it. That is why we describe them, if you like, as in progress rather than completed. You cannot actually complete that sort of recommendation, I think.

Ms Gallagher: I will just add that. As everyone would know, the Vardon inquiry came out of a crisis in the system that needed to be responded to. Murray-Mackie had a much different origin, and that was a self-commissioned report into a number of cases. It was not as a result of any finger-pointing or any public crisis that that work was commissioned. It was about the organisation trying to make sure that we are continually learning and responding and making sure we are doing the right thing by those children.

It arose specifically out of a number of deaths and near deaths of very young children. Because that work was commissioned—which it did not have to be, and many would have said, “Do not commission it”—we have been able to improve substantially, I think, our response to and understanding of those families. A direct response to that was for ACT Health to put in a budget to target nought to twos. It is not usually an area that Health traditionally has focused on because there are always other bigger things in Health, but out of this work there was an understanding that our most vulnerable families need a whole-of-government response. It is not just a child protection response. It is about making sure we are supporting them in the community, in some of these instances from very early in the pregnancy. I think that alone has made this an extremely beneficial experience. We will commission these reports as we need to to continue our learning journey.

THE CHAIR: I am conscious that Steve has his question waiting to be answered but before we go too far further on I have realised I had a question on page 24—I am sorry to take you back a bit, minister—on one of the programs mentioned under the family centres, the healthy start program. I am intrigued about it; it is the third dot point on page 24 where it says it is “a model of service delivery for parents who have learning difficulties”. Can you explain a little bit more about that to the committee?

Ms Pappas: The healthy start initiative is a program to help practitioners to learn different techniques of providing information to parents where there are learning difficulties. It is a 3½-year commonwealth funded initiative. It attempts to support practitioners to work differently with families. It is about how you have conversations and how you know that those people are understanding what is happening—doing lots of hands-on work with those families, setting some goals and then checking and rechecking that they have got it and can demonstrate that they have got it. The child and family centres, along with Marymead, run the ACT hub, and that hub pulls together practitioners who work in this sector to do some training and then go into families’ homes to provide that information and work with those families.

The training that has occurred in the ACT has been about parenting young children and that specifically targets parents where there are six-month-old to six-year-old children. It is about positive interactions, how to play with your child and how to make sure that you continue to be connected with your child. The healthy and safe initiative is really applicable to families with children of all ages. It is about how to make the home a safe environment for families and for children. The third one we are about to roll out is the healthy start for baby and me program. That focuses on pregnant women and their roles and responsibilities around their children, and following the birth of their children how they parent that child in a way that is okay.

THE CHAIR: Can we go back to your question, Steve. Do you want to refresh the minister on the question?

Ms Gallagher: It was around the Aboriginal and Torres Strait Islander unit and what is being delivered.

THE CHAIR: What a wonderful memory you have—all that stuff that we have talked about in between.

MR PRATT: In this reporting period what new initiatives may have been exercised in terms of the budgetary cycle versus previous years—what have you been able to successfully get budgeted for in terms of growth of operations?

Mr Harwood: I think Mr Pratt is referring to the government commitment in 2006-07 of \$556,000 over four years and that was to progress work around an integrated service delivery project for Aboriginal and Torres Strait Islander people. Those funds were used to employ a staff member at a senior level, and that officer has been able to drive work across an integrated model. Some of the things that the officer has been able to do have been to develop a governance structure across three government agencies—the Department of Disability, Housing and Community Services, the Department of Education and Training and ACT Health. We have a cross-agency steering committee and a cross-agency working group to develop a model of

integrated service delivery.

In the financial year 2006-07 we developed the model and it was really based on researching a whole range of good practice in the field in terms of integrated case management and also around our knowledge and understanding of engagement with Aboriginal and Torres Strait Islander people. We looked at good practice like empowering Aboriginal people and having the model flexible to tailor it to the particular circumstances of individual families. We also looked at the turnaround model, which is used in the youth area. So we were able to take key elements from all of the different work that has been happening around integrated models and put it into this model that we are developing at the moment.

Part of the model is developing an assessment tool for families that is appropriate for Aboriginal and Torres Strait Islander families, and the assessment tool is a bit broader than what is used in other areas, a bit more comprehensive. We try to work with the families around what are all the issues faced by the families, not just focus on risk behaviour like drug and alcohol use. It also looks at their housing circumstances, their income and things like that. So we developed the assessment tool. We also developed a model of case management where we could have a panel of service providers come together to look at the circumstances of the family and also to contribute to and develop the case management plan to address some of those issues. The three agencies—health, education and us—will be regular members of that service delivery panel and so each of the agencies will be able to look at what they can bring to the table in terms of supporting families.

We are also using family decision-making principles in the model, so as part of the panel of service providers we will have the family there and we are really putting the family at the centre and having them lead the analysis about what the issues are but also how the service providers might be able to engage with them and empower them to address the issues for themselves. It is very much strength based and tailored to the individual circumstances of the family. That was all developed in 2006-07 and now we are beginning to roll it out to a small cohort of families. I should say there are four families; there are two that are not in the care and protection system and we are trying to address their issues as an early intervention approach to prevent them from coming further into the system. Two of the families have children on care and protection orders.

MR PRATT: Are you talking there about a trialling of the model by selecting four families?

Mr Harwood: Yes.

Ms Mitchell: Piloting. Could I add that there are 24 children in those four families so it is an intensive piece of work.

MR PRATT: That makes sense. So the model itself was developed in 2006-07 and it is beginning to roll out now, so you will not have had much time to identify how well that is going. Can you quantify at all any improvements in the intervention services that you might be seeing now versus what was the case before 2006-07?

Mr Harwood: No. It would be very difficult to say anything substantive.

MR PRATT: It is still too early?

Mr Harwood: Only to say that we are getting some early signs that the families are feeling more comfortable with the range of services that might be involved with them and feeling better able in themselves to understand the issues that they are facing and then engage with the services.

MR PRATT: I promise this is not a political question; I know the minister would never give me a political answer. Do you have any views on what might need to be done to even make this model more adaptive to the broader community, particularly on the back of broader initiatives across this country right now—what might need to be looked at in this coming budget?

Ms Gallagher: You are talking about the Northern Territory intervention?

MR PRATT: No, no.

Ms Gallagher: Sorry. I just thought that “things more broadly across the country” could have been that.

MR PRATT: No, initiatives across all jurisdictions, other initiatives that other jurisdictions, not just the commonwealth versus the Northern Territory, might be taking. In terms of this model here what you might think is working; where would you want to be going with this model?

Mr Harwood: We are hoping this model might be used as a blueprint, if you like, for how our department might be engaging with Aboriginal and Torres Strait Islander families more broadly. I think that is probably the very first step that we will be looking at in the near future; I think I can say that.

Ms Mitchell: Could I add that the model of integrated services is also being applied in other areas of the office’s work as well, not just with Indigenous families, so I think there is already recognition that an integrated service system that covers the range of early intervention, universal acts, a whole range of different service responses, is an important way to go forward, and that project is being rolled out with the support of the child and family centres. They also have a number of families that they are working with. The difference with that model primarily is the heavy engagement from the outset with non-government organisations as well. I think there are a lot of opportunities to grow our early intervention and less tertiary pathways with using a model such as that.

Ms Lambert: The other thing that is different about this one is that the steering committee comprises the three chief executives of the three main departments involved in this, which means that we have a particular ownership and engagement with it and what we see working in one area that is relevant to our department is a principle that is applied, so there is a lot of sharing of knowledge. Once we have really worked more on this model and on the pilot phase, I think it will be something that we will be able to roll out a bit more easily because we are engaged right from the

very beginning. It does not necessarily involve extra resources in the long term; it is about how we apply the resources we have already got—

MR PRATT: Applying the principles.

Ms Lambert: Exactly, and how we apply those principles to the resources we have got. One of the things I know that is different for the families is that they are not having to engage with a whole lot of different services and tell their story every time they engage with a service, so there is a lot more coordination since families only have to tell their story once in this situation and then it can be worked on.

MR PRATT: Ms Mitchell, you referred to the model already being used in other areas of youth and families. Is it rolling out at about the same time so you still do not know yet quite how that is working out?

Ms Mitchell: It is virtually a parallel process and also involves the commonwealth and some other interested players; there are about six families involved in that one at this stage and we are just about to finalise the terms of an evaluation of that so we should be able to, along with the Indigenous model, probably in about a year's time, get some evaluation results. But it is based on best practice in other jurisdictions and around the world so it has already got an evidence base that says that this is the kind of model that works best for families.

MR PRATT: Right across the board, not just Indigenous but all families, can you give me a rough idea of what the assessed number of families at risk is? Do you have a ballpark figure at least—families that may have come to the department's notice?

Ms Mitchell: You mean in terms of reports? It depends on what you describe as a family at risk. Clearly there are a number of families on shared orders with me as the Territory Parent and there are families who obviously have not got their children any more; are you also talking about the families that Helen talked about before that just come into the child and family centre and want support? "Families at risk" is a very broad statement for me; it is a bit hard for me to define that.

MR PRATT: I appreciate that. I guess there are a number of gradations. Can I simply therefore refer to the family at risk model that Ms Mitchell was referring to. How many families do need assistance of this type?

Ms Mitchell: Generally we get reports around children and there may be several—

Ms Gallagher: And there could be multiple reports.

Ms Mitchell: All I can say is that there are 9,630 reports in the financial year that we are talking about and that probably represents a somewhat smaller number of families. We could probably get back to you on that.

MR PRATT: Could I ask you to do that, please.

Ms Gallagher: We could see what we can do—whether we can. It would be quite difficult because it might involve single parents with other kinship arrangements on

the side. It would be difficult; there could be custody arrangements—you name it. There could be a number of variables, but we will get back to the committee with some sort of answer.

MR PRATT: I won't ask you to give me a forensic rundown, but could you give the committee some of the categories and some idea of what the challenge is, basically?

Ms Gallagher: Yes. As Ms Lambert said, these are just the ones that come to the attention of parent protection. The child and family centres, the non-government agencies, are dealing with families all the time that might not make it through to the centralised intake service via a phone call, but they are still families that are in need of some sort of support. We will do the best we can, Mr Pratt, on that one.

MR PRATT: Thank you.

MR GENTLEMAN: Minister, we have only a little bit of time left for this department. I would like to go to a different area. You know about my interest in sustainability. Can you tell me what sustainable measures were taken into account in the construction of the Tuggeranong Child and Family Centre?

Ms Gallagher: And can we go on to Bimberi?

MR GENTLEMAN: I was going to ask whether you could go on to Bimberi after that.

Ms Gallagher: I think we have people busting to talk about that!

Mr Collett: You asked first about the Tuggeranong Child and Family Centre. The building complies with the current requirements in terms of a five-star energy rating, as well as taking advantage of the opportunity to have passive solar gain through the orientation. The building facilitated the arrangements of the child play areas on the northern side, which allowed for extensive areas of glass from the internal play areas onto the external, and sun to enter the building as a result of that.

The urban site did not provide the opportunity for some of the more innovative techniques, such as water harvesting and the like. The key to sustainability with the Tuggeranong Child and Family Centre was the work we did around the siting. The building is located on the main street, Anketell Street, directly opposite the Hyperdome, with good connections to the health services. Therefore, transport costs were taken into account, and access and movement were facilitated. As a result of that, the broader environmental benefits were gained for people accessing the service.

The supplementary question related to Bimberi. Being a larger, broad-acre site and having more flexibility in terms of the design of the building, we were able to incorporate many more aspects of sustainability into the building. The five-star energy rating and the embodied energy constraints around the materials that were used are pretty much standard for building construction these days. We were able to look at the stormwater management on the site. We have used existing overland flow paths and an existing pond in order to divert water and manage water at the broad level around the open areas. That has led us to do things like getting a water construction licence so

that we can manage proactively the wetlands that have been created. A combination of swales, rock beds and water quality control plantings have meant we have been able to provide a high level of control over and quality to the water that is leaving the site. We have also been able to harvest rainwater from the roofs of the buildings, and we have greywater recycling involved as well.

With respect to the landscaped areas around the residential units, they are located so that the playing areas and the outdoor spaces are to the north. The building has good orientation, with a northern aspect to the main living areas, the kitchens and the dining rooms. We have also been able to irrigate the grounds, and particularly those recreation areas associated with individual residences, with recycled greywater and harvested rainwater. We have been able to provide irrigation to the central town square that the minister referred to more recently, as well as providing the opportunity to top up the small pool, which the minister referred to, using rainwater retention.

We have done further work around minimising the need for the centre to access water, by working with Hindmarsh to provide an artificial surface to the full-size oval. Again, the minister referred to that. This not only minimises the need to irrigate that land and draw on the metropolitan water supply system but also ensures that that playing field is available when the children first move into the centre. So there is a mixture of both active and passive mechanisms that have been used. We want to ensure that, within a tight cost plan, we have been able to maximise the opportunity for environmental initiatives and aspects.

MR GENTLEMAN: On page 171 it is stated that you are preparing an energy conservation plan.

Mr Collett: Yes. As part of the commissioning plan, we will be ensuring that the temperatures at which the heating and cooling have been set, the opportunities for a fresh air cycle, the opportunity for natural ventilation, as well as the sequencing of the lights and the switching of the electrical equipment, ensures that we follow best practice. We have future-proofed the centre by reticulating data throughout the whole centre. That will enable us to take advantage of improvements in technology, not only in security but also in building management systems.

Ms Gallagher: Mr Gentleman, if the committee goes out and has a look, you will be very pleased to see the shape of the roofs, which is very conducive to solar technology in the future.

MR GENTLEMAN: Fantastic. Mr Collett has just touched on my next question, which is a more general one: will the department be able to support Earth Hour on 29 March? Obviously, in some areas you will not be able to remove lighting, but what about generally in the administration areas of the department?

Ms Gallagher: I would imagine the administration areas would be a lot easier to deal with. I do not think we would be in a position to do that in our group homes and at Quamby. Certainly, I would imagine the department could look at that.

Ms Lambert: Yes, certainly.

MR PRATT: Perhaps at Bimberi you could use starlight scopes on the perimeter fence!

MR GENTLEMAN: I don't think there is anyone there yet, Steve!

Ms Gallagher: Madam Chair, I have just been advised that I need to leave. My apologies.

THE CHAIR: That is fine, minister.

Ms Gallagher: If the committee needs me back, I am happy to come back at another time.

THE CHAIR: Thank you, minister.

MR PRATT: With respect to child safety and protection, your department deals with the protection of young children in a family setting. Do you have a role to play in terms of commenting on or monitoring some of the safety and violence aspects around youth?

Ms Lambert: We certainly provide services to young people. We fund youth centres and those sorts of things. Our community workers, as Ms Pappas said before, are very involved with young people.

MR PRATT: Given some of the publicity we have seen around what the press might say is a growing incidence of teenage violence, in and out of schools, are you picking up information through the department and the community centres about these sorts of things? Do you have a comment to make about that? Are you in touch with police and Education about these sorts of issues?

Ms Lambert: We deal regularly with the police, particularly because we have community youth justice as part of our portfolio. It is not just Quamby; it is the young people who are on orders. So we do deal with those. My officers may have other comments to add to this, but we are not getting any particular information at the moment about an increase in whatever the papers have been reporting, to the best of my knowledge. That is all I can say in relation to that. Our workers have their ears pretty close to the ground, and I have not had any feedback in relation to that. Ms Mitchell, I don't know whether you have, through your role?

Ms Mitchell: No. The numbers of kids on community youth justice orders are pretty stable, and have been.

Mr Wyles: Certainly, for the reporting period of this report, the numbers on orders were down, as were the numbers in custody.

THE CHAIR: That is very pleasing news.

Official Visitors

Hyndman, Ms Mary

Hargreaves, Ms Narelle

THE CHAIR: Thank you very much, Ms Hyndman and Ms Hargreaves, for appearing before us this afternoon. Have you read the privilege card that is in front of you?

Ms Hyndman: No, I have not.

Ms Hargreaves: No.

THE CHAIR: I will give you a few minutes to read it. For the record, I move:

That the contents of the privilege card be incorporated into the *Hansard* transcript.

That is accepted.

The statement read as follows—

Privilege statement

The committee has authorised the recording, broadcasting and rebroadcasting of these proceedings in accordance with the rules contained in the Resolution agreed by the Assembly on 7 March 2002 concerning the broadcasting of Assembly and committee proceedings. Before the committee commences taking evidence, let me place on record that all witnesses are protected by parliamentary privilege with respect to submissions made to the committee in evidence given before it.

Parliamentary privilege means special rights and immunities attach to parliament, its members and others, necessary to the discharge of functions of the Assembly without obstruction and without fear of prosecution.

While the committee prefers to hear all evidence in public, if the committee accedes to such a request, the committee will take evidence in camera and record that evidence. Should the committee take evidence in this manner, I remind the committee and those present that it is within the power of the committee at a later date to publish or present all or part of that evidence to the Assembly. I should add that any decision regarding publication of in camera evidence or confidential submissions will not be taken by the committee without prior reference to the person whose evidence the committee may consider publishing.

I also have a few housekeeping matters which I need everyone in the room to observe:

All mobile phones are to be switched off or put in silent mode;

Witnesses need to speak directly into the microphones for Hansard to be able to hear and transcribe them accurately

Only one person is to speak at a time

When witnesses come to the table they each need to state their name and the capacity in which they appear.

Do you understand the implications of the privilege card and what is contained in the

statement?

Ms Hyndman: Yes.

Ms Hargreaves: Yes.

THE CHAIR: Do you have any introductory remarks that you wish to make before we get started?

Ms Hyndman: No.

THE CHAIR: We will now move to questions.

MR GENTLEMAN: Welcome; thanks for coming along. I want to ask about one of the dot points in the report about your role. On page 182, at the last dot point, it states:

Raise any concern which affects the wellbeing of children and young people in those centres.

Could you give the committee a couple of examples of what sorts of concerns people have raised about children in those centres. I realise that the concerns could be quite varied.

Ms Hargreaves: I have been an Official Visitor since October last year. Mary has been doing it for much longer. I will give you a bit of background regarding what I have done so far. We both went to the centres and to Quamby together for quite a number of visits. Come January, Mary has been doing Quamby and I go to Marlow and Living Skills, and we will swap over in the middle of the year.

I will give a couple of examples that have come to me. I visit every fortnight. I started to go in the evenings because the young people are generally there at that time. One particular time I went to the living skills program and the young person was not very well at all. You will know that I can recommend that he see a doctor. He had very, very sore feet. Another example is that sometimes there are things like the bathroom door and bedroom door not locking properly. They might want to go to another program or access another program, and I am able to help them with that. I advocate on their behalf. I always email the manager. We have a communication book in the centres. I write down what the young people have told me during the visit, and I email the manager and they get back to me regarding how they can help.

Ms Hyndman: I can add to that. The complaints that young people raise are varied. They can be along the lines of day-to-day concerns, such as access to facilities or recreation; they may relate to food or they may relate to the conditions within the centre, all the way through to treatment by staff. From time to time they would raise concerns about outside agencies. Those sorts of matters would have to be referred on, because what we deal with occurs within the four walls of the centre.

MR GENTLEMAN: With those items that need to be referred on, they are referred back to the department?

Ms Hyndman: They can be, yes. It depends on the nature of the concern. If, for example, it is something to do with services that are provided by Youth Justice or care and protection, those cases are referred directly back to the office and the relevant person there. If it is another sort of matter, such as something to do with court cells or Corrective Services, they might be referred on to the Public Advocate or to the Children's Commissioner. Of course, we always have access to the minister at any time. The minister's office is always very responsive and supportive.

Ms Hargreaves: We have organised at least three to four meetings with the minister this year, with Marlow and the living skills program. Every couple of months, we have a meeting with the Richmond Fellowship and the Public Advocate, and we talk about general issues that are of interest to all of those people.

THE CHAIR: I note that on the same page of the report it says that a majority of complaints were about the amenities and the physical environment of the Quamby facilities. Obviously, with a new facility coming on board, whilst it may not help the young people who are currently in Quamby, it certainly would improve the situation for young people coming on after that.

Ms Hyndman: Absolutely.

THE CHAIR: I want to ask a question about Marlow Cottage. The report says that you have identified a difficulty with the facility with regard to children and young people who have high order and multiple needs. It goes on to say that the department and Richmond Fellowship have commenced the design of a therapeutic protection facility and that it is proposed that the facility be remodelled for that purpose. Are you aware of whether this is underway?

Ms Hyndman: It is not, as far as we are aware. We are waiting to see what will happen under the next budget.

THE CHAIR: Okay; so we hope it will be in the next budget.

Ms Hyndman: With any luck. We do understand indirectly that there is a step-up, step-down program at the moment, which I think partly fulfils that need. But we are hoping there will also be other types of programs, facilities or options available for those higher level need clients.

THE CHAIR: The step-up, step-down has been opened.

Ms Hargreaves: Yes, I think it has. With respect to those intermediary therapeutic programs for young people, I think there is certainly space for some more programs in that mix.

DR FOSKEY: In relation to complaints that you receive, I note on page 185 a comment that one of the complaints people make is that they are sometimes not given a complaint form on which to make complaints.

Ms Hyndman: Yes. That is an allegation that the young person makes.

DR FOSKEY: Do you have any idea whether that is the case?

Ms Hyndman: I am just trying to think of a specific instance. As far as I am aware, and this is what we are told, they must provide the complaint form. I have no direct knowledge that complaint forms are not provided, and I have inquired into it. But it is an area that we maintain vigilance over, because I think the complaints system is extremely important, it has to be transparent and it has to be equally and fairly applied to all young people, regardless of what the type of complaint is. I would say that we have no direct knowledge that they are not provided but it is an allegation that the young people raise from time to time and it is an area that we are extremely vigilant about.

DR FOSKEY: What happens with young people who are not able to write too well? Is there some assistance? They would have to go to someone they trust.

Ms Hyndman: If we are there, we can help with that, but very often we are not. My understanding is that, as part of a youth worker's professional responsibility, they sit with the young person and assist them with the complaint form if their reading and writing is not so good. That is irrespective of what that youth worker thinks about the complaint. Whether they agree with it or not, it is their professional responsibility to sit and assist with that, and I think that is what is done.

DR FOSKEY: In relation to the kinds of complaints, are you able to make any observation on complaints about staff and other human interactions in relation to, say, last year, compared to the year before? Are you seeing any trends? Has it been a good year—generally fairly happy with staff?

Ms Hyndman: I think there has been a diminution in complaints about staff in the last 24 months.

DR FOSKEY: That has to be good. One of the things you say, again on page 185, relates to complaints by young people about treatment in the court cells, and suggesting that an investigation into the protocols and procedures in the cells would be warranted. Have you had any response to that suggestion?

Ms Hyndman: I am aware that the Public Advocate has ongoing talks regarding the court cells. I believe that the Children's Commissioner is also investigating the conduct of Corrective Services staff in relation to young people. What has come out of those two things is still up in the air, but we do get those continuing complaints. We have no jurisdiction in that area, of course. It is beyond what we are empowered to take on. It is an area that we continue to watch and to advocate for, through the other agencies, predominantly the Public Advocate and the Children's Commissioner. Of course, the minister is aware of those things because we report to her monthly. We provide a written report to her.

DR FOSKEY: In relation to the Public Advocate, the Official Visitor suggests that the role would be better sitting underneath the Public Advocate.

Ms Hyndman: Not underneath but administered by.

DR FOSKEY: Co-location?

Ms Hyndman: Yes. I think there is a difference between being co-located and coming under someone. We would still be an independent agency, but instead of the administrative arrangements coming under the department, which is a department that we oversight, the administration would be taken on by the Public Advocate. I think it situates us better. There is not that potential conflict of interest that could occur in a situation where you have an oversight agency like the Official Visitor being administered by the agency oversighted.

DR FOSKEY: Has there been any progress with that?

Ms Hyndman: Not a lot.

DR FOSKEY: Where do you go to make that proposal?

Ms Hyndman: I understand that the Public Advocate is taking a very active role at the moment in seeing that that happens. That recommendation was made in the FEMAG report, which was a report done at the end of 2002 and completed in early 2003. There has not been any real progress on that in all of that time. But I understand that the Public Advocate is very active.

DR FOSKEY: Do you remember whether the government response to that report agreed—

Ms Hyndman: Yes. All of the recommendations were accepted without reservation except one, which was accepted with reservation. Essentially, the government has agreed to the co-location. It just has not been enacted.

DR FOSKEY: At page 186, in relation to post release, the Visitor refers to the need to coordinate, across agencies, post-release programs. I believe the lack, the inadequacy or maybe the hit-and-miss nature—sometimes good, sometimes not so good—of post-release plans has been an ongoing concern. I note that the Institute of Child Protection Studies is completing a research project examining transitioning from Quamby. Would you like to expand on that comment and indicate whether you think there is any progress in this area?

Ms Hyndman: I am not aware of the outcome of that research program.

Ms Hargreaves: We do believe that it needs attention and action because this is an area which I think can be improved.

MR GENTLEMAN: Perhaps the committee can ask that it be put on notice.

THE CHAIR: We will put that on notice. We will get the information later.

Ms Hyndman: I think it is urgent. It is something that the Official Visitor has been commenting on for four years or more in the annual report.

THE CHAIR: We will put it on notice and you can get that information for the

committee.

Ms Hyndman: Yes.

DR FOSKEY: I am not on the committee. I would be very interested in seeing that research. The committee has the power to ask for it. I guess I can ask for it, too. That completes my questions. Thank you very much for the opportunity to ask them.

THE CHAIR: That is fine. There are no more questions. I thank you very much for coming and for being here all that time.

MR GENTLEMAN: Keep up the good work.

THE CHAIR: Keep up the good work. We appreciate the opportunity to hear from you.

Ms Hargreaves: Could I say, in summing up, both Mary and I are very diligent when we talk to the young person to express to them what their rights are and what we can do for them so that they are very clear as to our role. We make it very clear to them that we do not work through any government department, we work to the minister and we report only to the minister. I think that is very helpful for them because they understand that there is not a lot of bureaucratic tape.

THE CHAIR: It is comforting to them.

Ms Hargreaves: Yes. We can directly do something for them. It might not be what they want but at least they know somebody is advocating for them. I think it is a very important role in the community.

THE CHAIR: Thank you for that.

The committee adjourned at 3.50 pm.