

## LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY

# STANDING COMMITTEE ON EDUCATION, TRAINING AND YOUTH AFFAIRS

(Reference: Annual and financial reports 2007-08)

#### **Members:**

MS A BRESNAN (The Chair)
MS J BURCH (The Deputy Chair)
MR J HANSON

TRANSCRIPT OF EVIDENCE

**CANBERRA** 

**TUESDAY, 3 MARCH 2009** 

Secretary to the committee: Dr S Lilburn (Ph: 6205 0199)

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).

## **APEARANCES**

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Amended 21January 2009

#### The committee met at 9.34 am.

Appearances:

Barr, Mr Andrew, Minister for Education and Training, Minister for Children and Young People, Minister for Planning and Minister for Tourism, Sport and Recreation

Department of Disability, Housing and Community Services

Hehir, Mr Martin, Chief Executive

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

Duggan, Mr Frank, Senior Director, Strategic Support, Office for Children, Youth and Family Support

Kitchin, Ms Jenny, Director, Services and Sector Development

Wyles, Mr Paul, Director, Youth Directorate

Harwood, Mr Neil, Director, Aboriginal and Torres Strait Islander Services

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

Collett, Mr David, Director, Asset Management

**THE CHAIR**: I would like to welcome everybody here this morning to this public hearing of the Standing Committee on Education, Training and Youth Affairs in its inquiry into annual reports for 2007-08. I would like to draw everybody's attention—you have probably all seen it before—to the privilege card, just so that you are aware of that. I am sure everyone is.

Before we go to questions from committee members, Mr Barr, would you like to make an opening statement?

**Mr Barr**: Very briefly, Madam Chair, to commend the annual report to the committee and thank the committee for the opportunity to appear. I, of course, was not the responsible minister for any point during this annual report period, so I will be relying on officials for a lot of the detail in relation to aspects of the annual report that were before my time as minister.

**MR HANSON**: Who was the previous minister?

Mr Barr: Minister Gallagher.

**THE CHAIR**: Thank you, Mr Barr. I want to open with a question. My first question relates to page 12, in relation to the realignment of the Office for Children, Youth and Family Support. Is it possible to provide an update on how the realignment has progressed and whether it has improved the delivery of services? Is there any sort of feedback available and has an evaluation been done of that?

**Mr Barr**: I will get Ms Mitchell to respond to that.

**Ms Mitchell**: Thank you for your question. Yes, the realignment has been going for about 18 months. It brought together a range of functions that represent a continuum of services from early intervention to statutory intervention, including child protection

and juvenile justice. So it has the full suite of services within it.

Within the child protection area, it also brought together functions in a much more streamlined way so that the journey through the child protection system was much smoother and had more of a continuity of workers associated with it. It also allowed us to establish a practice support unit which has proved very beneficial in improving policies and procedures for the office. It has also helped with the smooth implementation of the new legislation under which the office operates.

While there has not been a formal evaluation as yet, we are constantly reviewing the structure, staff views about the structure, stakeholders' views about the structure and our relationships with them and improvements to practices and policies. In the implementation of the new act which the office structure supports and facilitates, we are working on doing a project to ensure that we monitor compliance of the new legislation. That should provide some information to answer your question about how it has gone and how it has improved outcomes.

**THE CHAIR**: Has stakeholder feedback been positive about—

Ms Mitchell: Very positive. I think there is a much improved relationship with our external stakeholders—other government agencies like Health, Education and the police—and also our internal stakeholders. So with parts of the department like the housing area, we have a number of protocols and forums to resolve issues internally—with ACT Therapy as well. So it is actually proving to be a very good structure.

**MS BURCH**: Page 6 refers to the review of the Children and Young People Act which was concluded in 2007-08. The question is around the implementation of that review and the outcomes. Can you tell us a bit about the progress of that?

**Mr Barr**: Sure. The implementation of the new legislation has been overseen by a steering committee and is supported by some comprehensive project plans. It really is in three phases, all of which are now in place. The first, last year, came into effect on 9 September, in relation to the youth detention provisions. On 27 October last year, the care and protection provisions came into place. And only last week, all of the remaining provisions of the act commenced.

This has involved working on a range of revised procedures and policies, the restructure of the office, as we have just heard, a range of preparation around delegation instruments and notifiable instruments et cetera, and a significant communication and information strategy with stakeholders that has resulted in some quite positive feedback. The new act was, I understand, years in development and was one of the most significant pieces of legislation in the last term of the Assembly.

In terms of the size of the legislation, it was nearly a match for the Planning and Development Act in terms of the number of pages and the amount of time that the Assembly spent on that particular piece of legislation. Now, in the implementation phase, it is important that we do closely monitor that and that we do have an established process in order to implement it. Through those three phases, there has been successful implementation of the legislation.

**MR HANSON**: My question is about overseas recruitment, in the UK, of people working under the child and care and protection output—output class 4.2, on page 12, and also on page 69. Can you tell me how many we are actually targeting? Have we achieved that target? Following on from that, could you explain how long the program is going to need to go for and when will we actually be able to recruit enough from our own jurisdiction?

Mr Barr: Our most recent recruitment campaign in the United Kingdom, I am advised, has attracted 36 new case workers to the territory, and we now have our full complement of 105 care and protection workers. That has been a very positive outcome. We obviously have had local advertising and have sought to source workers from within Australia as well. That has not been as successful as the UK recruitment process. The other important aspect is around retention of staff as well. Following the successful recruitment process, we have also been able to retain staff and hence be able to reach the full complement of care and protection workers.

**MR HANSON**: Do you know about the percentages of that 105—how many are from the UK and how many are indigenous?

**Mr Barr**: I will have to ask Mr Hehir to answer that.

**Mr Hehir**: I will get Mr Duggan to talk about the overall percentages. You may be aware that this is our second recruitment exercise in the UK.

MR HANSON: Yes.

**Mr Hehir**: From memory, close to 50 per cent of the workers would be originally from the UK. I think we have still got approximately 20 from the first exercise and 32 currently here, with another four to arrive. Two of them will be arriving this Thursday. So there would be about 50 per cent, off the top of my head. It might be slightly less because while we have kept them within the organisation some of them have actually moved into senior roles in other parts of the office and other parts of the organisation. Frank might have the exact figures.

Mr Duggan: Yes. We undertook a recruitment campaign. We have been trying to recruit quite consistently for a number of years in the care and protection group. As late as 2007 we put out four local and national recruitment campaigns and were only successful in getting eight staff. Effectively, before we left for the UK we put out another recruitment campaign and we only attracted two staff. There is a dramatic shortage of professional staff in this area.

We have undertaken a recruitment campaign based on our previous campaign which was very successful. We recruited 32 people in 2004 and, as Mr Hehir said, we have been able to retain over 50 per cent of them. Retaining that level of cohort in the care and protection service is a unique number to have retained, given the turnover of care and protection staff other jurisdictions experience.

This most recent campaign commenced in April. We had 650 hits on our website, we took 150 applications, we short-listed down to 110 and we effectively interviewed around 90 staff. Also we made a range of permanent applications. We knew that

between people's accepting of the offer and getting here there are quite a lot of difficulties, and obviously now with the global situation financially. But we were able to secure 36 people; 31 have commenced with us. Those 31 have been fully trained.

I need to say that the process with the department of immigration locally was fantastic, under Peter Noble, the manager. We were able to get a decision made and immigration applications commenced and finalised within four weeks. Once we had the decision made and applications before them, which we worked with the folks from overseas on, it took us four weeks to issue a migration visa.

The 31 staff we have now have all been trained for two weeks through our induction processes and are on board working in the care and protection group at the moment. This time we built on the last scheme. We have a buddy scheme where each of the applicants has a buddy here, supported with local people, so they get to understand our local cultures, our local communities, our schooling, our education, our accents.

We also had what we called an e-store where we would put up furniture from the staff group here because people's furniture takes a bit of time to get over. We worked on receiving everyone at the airport. We were there at the airport, we got them temporary accommodation, we helped them get their Medicare, schooling, car hire et cetera all organised. We have now probably a cohort, including from the UK and from elsewhere overseas, of possibly fifty-fifty between local Australian folks and overseas migrants.

The other thing I would like to say is that most of the migrants that we have retained are all Australian citizens. As late as this most recent Australia Day a number of our folks took out Australian citizenship. So each of the folks who have stayed with us has now taken out Australian citizenship so they are well—

**MR HANSON**: Do you anticipate that this is going to be enduring? If we are recruiting very poorly locally but we are still getting lots of applicants from overseas, is this going to be the way we do business?

**Mr Hehir**: It is certainly something that we will have to look at. Victoria have a permanent agent stationed in London. They were recruiting at the same time we were so we had two Australian jurisdictions over in the UK trying to recruit their workers. We know that Queensland and New South Wales are struggling for sufficient numbers, so in a sense we are just like everybody else, struggling to get enough people to do the job and a very limited pool of recruits coming out. I think the Australian Catholic University, which is our local provider of social work here, will graduate 10 or 11?

**Mr Duggan**: Yes, 10 or 11. They had 10 the year before. We are all competing for those students.

**Mr Hehir**: So we will certainly continue to have to look outside the ACT for our recruits. We will work to keep as many of those trainees here as we can. We have processes around that as well, but certainly it is something we will have to consider. We did work for a number of years trying to get it done locally, but when we were I think about 25 per cent below capacity we decided we needed to pursue professionals.

**MR HANSON**: Is this a national problem? It just seems that—

Mr Hehir: Yes. It is a national—

Ms Mitchell: Absolutely. It is a worldwide problem

**Mr Duggan**: It is a worldwide problem, an international problem.

**THE CHAIR**: Sorry if this is an ignorant question, but has the UK been targeted because they have more case workers than—

Mr Duggan: No. They do have, obviously, a bigger population group to take from. But we also targeted the UK because of the similarities in their legislation and how they do their business, because we depend on that type of research, that philosophy, to understand how to better practise. So we targeted them. We knew the assimilation was going to be quite straightforward—their qualifications and their experience. Their mobility is not as high as our mobility, so this new process only picked up one person who had a masters education from university but had about five years previous experience unqualified. But the majority of these folks have come to us with anything between three and 10 years of experience and practice, so it is a very attractive market: you can bring people in, give them induction and they are able to enter the workforce and carry caseloads very quickly.

Mr Hehir: The other thing in this area is our model of recruitment. Frank certainly talked about how we went about it once we got back and certainly some of it there. But, notwithstanding that Victoria had a team over there, I think we ended up recruiting more people than Victoria did, and most of the people who had an offer from Victoria and us chose to come with us. We went over there. We had done a lot of the work beforehand, so we knew their qualities. The interview process did test them, but then we spent a lot of time selling Canberra, and we think that worked pretty well. When you think about the advantages that Canberra has compared to what people see in London, Glasgow and Manchester, it was really well taken in the sense that everyone was really excited and certainly very keen to come.

Mr Duggan: We utilised the live in Canberra material very heavily and we had been working with our colleagues from Chief Minister's on that. We utilised that, so we did a presentation on the live in Canberra campaign. The other thing we did that I think was significant was to invite all the families to the interview process. We would have the applicant plus the families and we interviewed and worked with the families during the day as well. So we did not just isolate out the candidates; we worked with the families and discussed schooling, health, lifestyle et cetera. I think that was a significant issue and we had a number of applicants who had come to the interview telling us they had already been accepted for Victoria but opted to come to Canberra.

**MR HANSON**: So you do not see the need for a permanent agent in the UK?

**Mr Hehir**: I am not sure that a permanent agent works. I think one of the reasons why those people who were interviewed by both the ACT and Victoria chose the ACT was the personal approach. The team we took over had three people with UK accents,

though two were Australian citizens, and one woman who did go with us who did not have an Australian accent is a UK citizen, so it was a bit of a funny mix.

But we were able to tell our stories and we were able to tell people what living in Canberra was really like. We think that personal approach worked. Also, some of the best sessions were when talking to the families afterwards—or beforehand, depending on the timing—when we got together, got them engaged. Some people brought their children along; most brought their partners along. It was a really personal experience and I think that is what they warmed to. I certainly think it helped sell the message about Canberra really well.

**MS BURCH**: Do you think that is because you made mention of quite a strong retention rate of these recruits, which is you can recruit but you have got to keep them? Is that family involvement? What sort of things are you doing to keep them?

**Mr Duggan**: The buddy system that we developed here, Ms Burch, was about having them engage with a member of our staff through email and telephone contact. I actually believe that that relationship building was so significant. In fact, at the induction program for the last 15 through the training on Friday or Thursday, we asked them what their reflection was so far. It was really significant the number that said, "It is everything you promised. You promised us good housing, good education, good lifestyle." A number of them are already saying, "This is it. We are really happy about the situation. The family have settled in."

We also worked with each of the partners around employment opportunities, so we did a lot of work getting their CVs and simply sending them on to the relevant agencies. A number of partners have found employment and that has really settled people. The other thing is that they are very happy with schooling. They are absolutely delighted with the schooling. Their question to us was, "Tell us the bad schools," and it was really good to say that there are none. We then told them the geography of our community and how it has developed. The feedback we have had about the education system through parents at the moment is very positive—exceptionally positive; they are really enjoying that experience.

Ms Mitchell: Could I just add one more point, and it goes back to your question about the office reforms. The realignment of the office—the new legislation, the significant reform program, which is a very contemporary reform program in terms of child protection in the ACT and the capacity to make a difference for those child protection workers and to work collaboratively with others across the service system—is a real positive for those people coming in. Many of those people see a lot of promotional opportunities. Many of our previous UK recruits have been promoted to higher positions as well, so I think all of those things make it a very attractive workplace as well.

**MRS DUNNE**: I am sorry; I came in a little late and I am not sure where we are up to. I wanted to ask about the realignment which Ms Mitchell just talked about.

**MS BURCH**: We have spoken about that.

MRS DUNNE: Is it an appropriate time?

**THE CHAIR**: We have asked that question, but if there is any particular information you had—

**MRS DUNNE**: Yes, I am sorry and, if this is already covered in the *Hansard*, just tell me and I will look at the *Hansard*. Can you give a general description of how the realignment was designed? What was it designed to achieve and has it achieved, or is it too soon to tell?

Ms Mitchell: I might ask Frank back to talk about the general design because it was designed before I got there. I could talk about it, but it is probably good to have the person who was right in the middle of it. I was reflecting on the fact that I think stakeholder relations have much improved and I am getting that feedback. It is much more a solid service continuum from early intervention to statutory intervention and that, along with the new legislation, allows us to make very different responses to different children, young people and families who have different needs. I think it allows us to, in particular, look at permanency issues and better outcomes for children, and I think we are achieving that. It is probably too early to definitively say what it is achieving for children and young people but that is something we want to do and we want to review.

**MRS DUNNE**: Another thing—I am not quite sure where you can answer this, but as you go along—is how much of the new legislation has commenced?

**Ms Mitchell**: All of the new legislation has commenced as of last Friday.

**Mr Hehir**: We dealt with that just prior to—

**Ms Mitchell**: We have a very significant implementation program, communication program, training and education program, both internally and externally, to ensure that it happens on the ground and that what it is intended to achieve is achieved. You might talk about the design of the—

**Mr Duggan**: I guess the design of the realignment for us was from a perspective of the child: what is the child's journey through our systems? For example, in the care and protection group previously there were four different entities. We re-evaluated those entities and reduced them to three, so a child was then engaged by the same worker and the functions then were carried out by the same worker and concentrated, because what we wanted to do was not have that change of case worker, that change in knowledge of the child. Parallel to that process of the realignment, we knew our legislation was coming on board, so we had to design our service responses to meet the legislation; therefore, functionality was improved by knowing exactly which part of the legislation was going to meet the realignment.

The legislation, as you know, was built around being able to intervene earlier in the concerns of children—so we structured our staffing profile and our functions to meet that—then to protect children in need of care and protection and then to improve supports and safeguarding children when they were in care. They were the three policy drivers for the legislation that allowed us to realign and then to build the functionality of the organisation to meet those three needs. So we believe it is solid.

We are seeing quite significant outcomes. Staff are happy in the process, they are happily engaged in it, and we are seeing outcomes for children improving.

MRS DUNNE: If I might seek your indulgence, Madam Chair: Mr Duggan, could you give me an example of, say, a youngish child who comes to your attention, who may be at risk—how that child might travel through the system and how you keep the continuity of the case worker?

Mr Duggan: The first thing we do is an initial assessment. The new legislation allows us to build two pathways. We can either take that as a concern or investigate it as a report of abuse. So your initial assessment will determine your intervention. If it is a concern, we now have an assessment support function where we can assess it as a concern—so the family is in need; they have not abused the child but things are going wrong, if I build a description. What we would do then is usually try to work with the family and divert them off, give them to a different non-statutory centre. Child and family centres would be a place; I am sure Ms Pappas can talk about what they would do there. We would divert them off into a child and family centre and support them and make sure the service system is built around them to support that child.

If, however, it was a more serious issue, the mother would go straight into our response and intervention team and we would allocate a worker. The response and intervention team is the second tier. So we have now said that it is a serious issue and it needs a serious response. The response and intervention team will do more forensic examination of the issues, check out the risk factors, check out the strength factors and work with the family possibly for up to three months plus, or effectively then we would seek to go to court.

That team would work it through the court process. It would depend on the length of time—that may take us between three to 12 months, depending on how the court processes it—and when that is finished we know that that child is going to be in our care for a long period and we would then hand it over to the long-term team who would then build a relationship. So sometimes we would only have two individual case areas working with the child rather than previously where we may have had four.

MRS DUNNE: Okay. Thank you.

**MS BURCH**: I have another question that relates to this. You made mention of Ms Pappas, and through the book early intervention is mentioned a number of times. I am just curious around the policy framework in which that is set and how that improves services from the department.

Ms Mitchell: If it is all right with you, I might ask Helen Pappas to respond. Helen heads up the early intervention and prevention unit that came to the office as part of the realignment. One of the main flagships of that is the child and family centres, but not the only part of that jigsaw puzzle. A lot of services are run out of there, a lot of partnerships with other government and non-government agencies occur through that vehicle, so we might ask Helen to talk about how that system of early intervention and prevention is being built. I might also mention that, as well as being a service provider and a service facilitator, we also fund a number of family support agencies and work with them to deliver early intervention services in the ACT as well.

Ms Pappas: The child and family centres really are the anchor of the early intervention prevention framework. It is a universal access service so it is supposed to service as many people as might wish to access it. And it is for the whole community. What sits behind that are quite a few targeted programs for the more vulnerable families, but the look and feel of the program—of the centres and of the business—is that it is for all. That is a very particular and deliberate thing, because you do not want to stigmatise people. People do not want to feel uncomfortable about coming into the centres; people want to feel like this is a welcome place for everybody.

So we have a range of universal programs. We do things like the current playgroup in the park and the paint and play program, which is a quite a successful program. There are now eight of those programs run across the ACT. It is estimated that between 50 and 70 children per paint and play program attend. That is somewhere in the vicinity of 450 kids under the age of five who attend a playgroup in the ACT through that program.

We seeded that program with the non-government sector, so we have quite a lot of partnerships right through government, community, charity and church groups. We run those groups in partnership in the park. It is a very good way for parents to feel okay about accessing the service. Those parents that have some anxiety about coming into the service, into the system, know that they can go to the playgroup and interact with staff or not. It is really at their leisure. When they are feeling okay, there are professional staff there that they can connect with and get information from.

That is our most universal. We also run the parents as teachers program, which is another universal program. That is a sustained three-year home visiting program, but also within that program we have quite a few vulnerable families. You have really young parents—single parents. You have parents with children with disabilities. You have parents with disabilities and parents with mental health problems. It is about how those parents understand their children's development and how they are able to parent their children successfully for better outcomes.

Then we are moving to a range of targeted programs like the learn, giggle and grow program, which we run in partnership with care and protection. They are families who are within the system, who have had children removed, who have experienced domestic violence or where there are drug and alcohol problems. That is a small group, and it is a very structured group. It is getting those parents to work together and work with the staff about focusing on their children and interacting better with their children, improving attachments and improving their connection to the service system.

We have the POPPY playgroup, which is a playgroup specifically for parents with a diagnosed mental illness. Again, we know that the research says that kids who have parents with mental illness do not often have the best outcomes, so it is about trying to get those parents to work with the sector to better parent those children. Also, we have an adult mental health worker who facilitates that group with us from Mental Health, so we can accommodate any issues that the parents might have during that playgroup.

**MS BURCH**: Is that a self-referred group? Can people access this on their own prompting?

Ms Pappas: Sure. They certainly can. It is not a group that we advertise widely, because there is a bit of a process to make sure that the people in the group are okay there. The group needs to consolidate and needs to be a safe place for those kids, so there is a process of referral. Parents can walk in and say, "I have heard about this group. Can I attend?" The staff work with that parent. Maybe that is not the best place for them to start. Maybe they need to start somewhere else and work up to that group. It is really about taking the family at the point that they are at and working with them through the various programs.

We like to think of early intervention and prevention as a bit of a building block, so you start where the family are and then you try to build the blocks around them. And we like the concept of a revolving door, so parents can come, get access to a service, go away, practise it, try it and experience it. If they need some more help, they can come back through and that is perfectly fine.

**Mr Hehir**: Helen talked about the importance of a universal service. It is certainly something that we are very clear that we believe is the most appropriate outcome here. It is an area, however, that has attracted a level of criticism. There are some people who think that we need to be more targeted and just work with families who are in need. But from our perspective, the opportunity for those families—particularly those in need and those more at risk—to interact and work with other families who are practising appropriate skills and are able to pass that on is a really supportive environment for them.

It is also important for us to get these families wanting to come in. One of the key issues that we face within the care and protection system is that we cannot be in everybody's house. We rely on people telling us where things are going wrong. Where families self-walk into a service and at that service we do have specialist care and protection staff there, we can identify issues quite quickly and start working with the family to make sure that we build their parenting capacity at home in a way that should, hopefully, avoid them coming into the statutory system.

So from our perspective, we like the fact that it is a universal access model; we think it is very important in terms of the service that we are delivering. But it is probably something for the committee to be aware of—that it is an issue where some people say, "You should be more targeted; you should not be providing middle-class welfare or middle-class support." That is certainly the argument that gets thrown at us. But from our perspective—if you ever get the chance to wander into a child and family centre, do so. They are great places; they are really welcoming. That is exactly what we want everybody in the community to feel—from those most disadvantaged, whether they be drug and alcohol users or relatively well off, middle-class families who are just having trouble saying no to their child effectively. You get a fair bit of that as well.

We think that it is important that we get that there. I have seen two young women receive awards—one from the Gungahlin one and one from the Tuggeranong one—who I would have thought were very high risk young women. I think they were 18 and 19 respectively, one with two children and the other with three children. They started having children very young. One of the children has a serious medical issue.

These young women are fantastic—to see how they present the work they are doing with other young mothers and the way that they are assisting their peers, particularly that quite high risk group. We know that young mothers who leave the education system are a serious risk and have a high probability of entering care and protection—or their children are—so to see that service where those young women feel welcome and appreciated is really good across the board.

It is certainly something that the committee should be aware of—that there is that debate going on—but as a department we are very, very comfortable with the model and we think that it is the best model.

**MR HANSON**: How many centres do you have?

**Mr Hehir**: We have two. We have one in Gungahlin and one in Tuggeranong.

**THE CHAIR**: My question is in relation to the integrated family support project which is jointly run with the commonwealth. Does that play a part of the overall framework in terms of the early intervention type approach?

**Ms Mitchell**: It certainly does. Helen might like to talk about that. It is run out of the centres.

**Ms Pappas**: The integrated family support project is a three-year program which aims to develop an integrated model of service delivery for families with emerging and complex needs. It targets specifically zero to eight-year-olds, because we know that the earlier you get in the better the outcomes for these kids. They are families known to the child protection system; either they have been reported to the system or they are in the system, with multiple complex needs and with multiple services involved.

Families were telling us, "I am telling my story three times to four different people and I am a bit fed up with it." We have a process where the services now get together with the family and the family contribute to the conversation and the decision making. The families choose who is going to be their main case coordinator, so they have that control and the ability to pick someone who they have already got a relationship with and who they trust and feel supported by. Families stay in as long as they need to. Every month or so, depending on the family's needs, the service team meet with the family. There are no unilateral decisions. If something needs to happen, everybody who is involved gets an email that says, "What do people think about this?" The family are part of that process.

We have brokerage money as part of that program. That allows families who have needs—there have been some families who have not had mattresses for their children, for example, or they have been sleeping on the floor. We have been able to support those families at the most basic level. We have managed to buy mattresses, lawn mowers and linen—all those things that families need to be able to function.

The Institute of Child Protection Studies is conducting an evaluation for the project, so we are expecting to have an evaluation at the end of 2010.

**MRS DUNNE:** Can I just follow up on that one?

THE CHAIR: Yes.

**MRS DUNNE:** It says in here that there are 11 families. Is it essentially a pilot? Do you still have those 11 families or has access increased?

Ms Pappas: At the moment, we have got 13 families. We would like to get somewhere between 15 and 20. The community sector are primarily the people who case manage these families. It is a significantly different way of working, because you are working in partnership, you have lots of conversations and you are including the family right at the beginning. The sector is saying, "Let's have a go at 15 to 20 families and then, if we have capacity, we will increase that as we need to."

We have one family that is ready for transitioning, we think. They have been hugely successful in meeting the goals that they set. They feel like they are wanting to fly on their own for a little bit. They will go off and do that. If they need to come back in, that is perfectly fine. And that was a particularly complex family, where child protection were involved and the kids were at risk of being removed. That was managed—to pull together—and the kids are still with their parent.

**THE CHAIR**: That is great. Ms Burch, have you got any questions?

MS BURCH: No.

**MR HANSON**: At page 36, on the Indigenous focus services, it refers to the Gungahlin Child and Family Centre. That talks about one person and the work that they have done there. What are you doing more broadly to address the needs of the Indigenous community?

Ms Mitchell: Helen, you might talk about this one; then we might ask Neil to talk about the work of access and the Indigenous unit.

Ms Pappas: The Gungahlin Child and Family Centre and now the Tuggeranong Child and Family Centre both have Indigenous—Aboriginal and Torres Strait Islander—workers, but this project has morphed into the ACT's first Indigenous parenting support service, so it has tentacles right across the ACT in terms of service delivery. We have a range of programs that we are able to work with the community to establish. We worked with the parents. We said to them, "What is it that you want for your children—where are you, where do you want to be and how are we going to get there?" They are the three questions we asked them. They told us that.

Then we commenced delivering services and trying to get services into the Koori preschool, for example. Therapy ACT delivered speech therapy at the preschool. They were saying that getting to drop-in clinics was difficult for them, so we looked at the service system and we said, "How can we do this differently?"

We have subsequently established a men's committee. The committee are now considering their work agenda for the next 12 months. The first issue that they are wanting to address is depression in men. We are working with them to tease out what that means and what sort of services they think they need. At Tuggeranong, we are

working with the community to establish a men's health-children's health program. That is about men's interactions with their children and how they can parent children—physically, thinking about cooking, nutrition and all those things that we sometimes associate with women. These men are saying, "This is stuff that we want to do with our children."

We are also working with the division of GPs to look at how we can increase access to mainstream medical services in the local community. That is going to be a process of connecting with those services and saying, "We are prepared to offer you some training about what it is to work with Aboriginal and Torres Strait Islander people in the ACT culturally. This is how the community want to work with you. How are we going to make it easy for them to access services?"

It is really about travelling the road with the families. We do not tell them what we think they need. All of these initiatives have been about what they want. Parents wanted first aid training, so we organised that. They wanted swimming lessons for their kids. They wanted their children to turn up at school looking like any other child who turns up to school, with their book, their shoes and their clothes. We work with them to achieve those sorts of things. It is really following that process. It does take a long time. It took us about 18 months to get that sense of trust and wanting to access the—

**MR HANSON**: How many Indigenous families do you reckon that you are dealing with?

**Ms Pappas**: At Gungahlin, there have been about 47 families that have come through the program, but prior to starting this initiative we probably had one or two. It has been a very successful way to engage with the community. At Tuggeranong, it is very new. It is early days, but we have 15 families who are accessing service there now. And it is not just service from the centres; it is service across the sector. We draw in services across the sector to work from the centres with the families.

MR HANSON: On the family centres, you have got one in Gungahlin and one in Tuggeranong. I imagine a lot of the people we are talking about now might not have motor vehicles. Moving around Canberra would be an issue for them. If you are living in public housing in the city or in Belconnen or somewhere like that, what do we do to address their needs? How do we find these people and make sure that they have got access to those family centres?

Ms Pappas: The workers at the child and family centre do a lot of outreach; so they actually go into people's homes, they go to schools, they go to people's workplaces if they like. It is really about meeting the families where they are at. Childcare centres are another avenue we use. We do not expect people to come to the centres. If people are living in areas other than Tuggeranong and Gungahlin, we link them in with their local services. There is no point in your living in Woden and thinking you might have to access something at Gungahlin. There are services within your local community. What we do is facilitate those connections and make sure that they are supported.

Mr Barr: Just on that point, it is also the government's intention that, through the establishment of our four new early childhood schools that will provide services from

birth to eight years of age, outreach will be possible on those sites. That includes Scullin, Lyons, Narrabundah and Isabella Plains, in addition to the O'Connor cooperative school. It already operates as an early childhood school but the focus of the birth-to-eight services on those new early childhood sites will be, as I say, an important outreach opportunity and will spread that network of provision across the city.

Finally, it would be worth noting that the annual report does make mention of expansion plans for a third child and family centre in West Belconnen. The early childhood school in Scullin can service those central and inner west Belconnen areas with outreach from the West Belconnen Child and Family Centre. The schools have, and were funded to have, multi-departmental representation; so it is not just the education department, it also involves DHCS and Health.

**MR HANSON**: There is space?

**Mr Barr**: Yes. I would certainly draw the committee's attention to an article in yesterday's *Canberra Times* where a visiting US expert was lauding our network and our early childhood schools as the best he has seen in the world. I think we are on the right track here. I know there have been some sceptics in relation to this particular government investment but I see it as a particular policy challenge and opportunity, with education and children and young people sitting under the same minister, to see an integration of the policy response and on-the-ground service delivery response across the two agencies.

**THE CHAIR**: When you said there will be departmental representation, will there be outreach workers with the school?

**Mr Barr**: The early childhood schools also, as part of their funding, have funded positions from other agencies and then there is the capacity for outreach services from within existing resources within this department.

**THE CHAIR**: If someone is identified, then you will be able to refer them on to the appropriate—

Mr Barr: Yes.

**Mr Hehir**: Yes. One of the reasons that West Belconnen was identified was that we actually had a look at the demographic data and it does show up as an area of disadvantage. It is quite a concentration in that West Belconnen area. In terms of value for money and making sure that we are, whilst still a universal service, making sure we target as many of the people that we want, it was the best location for that.

**MR HANSON**: Are we training our early childhood teachers to recognise the signs to refer people on to the appropriate other government agencies?

Mr Hehir: Yes.

**MRS DUNNE:** On the subject of the Belconnen Child and Family Centre, have you managed to identify a site yet? Where are we with the development of that project?

**Mr Hehir**: We have been talking to Chief Minister's Department. We are working on a particular site. It has not been passed to us yet. You will be aware that the appropriation for it was for a feasibility study; so until we get the go ahead for a full construct and operate, we will not make acquisition of any land. But we are certainly working with Chief Minister's Department on the actual site.

MRS DUNNE: Which is?

**Mr Hehir**: It is in Kippax.

**MRS DUNNE:** In the shopping area?

**Mr Hehir**: Backing onto Starke Street, quite near the Uniting Church.

**MR COE**: So it will be a purpose-built facility, obviously?

Mr Hehir: Yes. That will be our intention.

**Ms Mitchell**: It also will have a particular focus on the needs of the Indigenous community in that area—there is a pretty high demographic there—and it will have all the features of the existing child and family centres, that is, space for the maternal and child nurse and ACT Therapy and—

Ms Pappas: Relationships Australia. The Smith Family deliver services. Child Adolescent Mental Health deliver services. We have a child health medical office that functions from the Gungahlin centre. The partnerships grow and I guess people are more and more looking to working this way because they see that as a benefit. I am thinking as I go. The antenatal clinics also function from the centres; so we are actually able to connect with families even before they have their children, particularly those who are considered vulnerable or risk taking.

**MR HANSON**: When is the Belconnen one due to come along?

**MRS DUNNE**: It is not funded yet.

**Mr Barr**: It is not funded yet. A feasibility study was funded and that was before the budget process.

Ms Mitchell: There has been some consultation on the design work already with the communities.

**MRS DUNNE**: And what relationship are you building with UnitingCare in Kippax? They are already substantial players.

**Mr Barr**: They have been funded to provide services in the interim.

**MRS DUNNE**: They are currently the outlet for those services.

**Mr Barr**: Not all of them but some of them, but they did receive budget funding.

Mr Hehir: What we tend to find is that these partnerships are quite organic. We work very well with most non-government organisations and, when we are in place—and I suspect we are talking to them already, given they will be across the road; and Gordon is particularly interested in the dynamic in this particular area—what we will find is that, as our services grow and people become comfortable with what they are, the partnerships grow as well.

Helen has talked about the partnerships she has with other government agencies and with the non-government organisations. What she has not talked about is the fact that she has actually developed really strong commercial partnerships as well in terms of the businesses that are located around the child and family centres and actually provide an enormous amount of support to the child and family centres in their own way. It is actually a whole-of-community partnership that these centres foster. I hesitate to ask Helen to run through the list because it is quite a long list of partnerships that she does have. They are not necessarily huge in their own right but just the extent of them, the participation of the community in those centres, is critical

I think that certainly what you have seen in the Tuggeranong and Gungahlin child and family centres is that outreach, that all-encompassing of the community and working with everyone around them, to actually make sure they get the best possible outcome.

As Helen is nodding at me, she has been talking to the UnitingCare operation there. That is exactly what I expect and I suspect they will be working on exactly what partnerships they can get in place when and if the centre is funded.

MRS DUNNE: What is the relationship between the child and family centre and the services that are mooted for West Belconnen and the proposal in the third appropriation bill for a childcare centre in West Belconnen?

**Mr Hehir**: There are a number of possible locations for childcare in West Belconnen. I need to check which one it was but certainly Dunlop and Charnwood are two of the particular sites that we are looking at.

**Ms Mitchell**: As we are with Kippax as well.

**Mr Hehir**: As we are in Kippax; so one of the things that we are currently talking to the Australian government on is actually co-locating a childcare centre with the child and family centre. That is one of the models they talked about in the COAG process. We are currently negotiating with them on what that would mean, what their contribution might be to it. We would be very keen to have a childcare centre associated with the child and family centre. Again, it provides us more access to more children to work with and particularly families in that area.

**MRS DUNNE**: The \$435,000 or whatever it is in the third appropriation bill includes work in West Belconnen you actually have not identified? You actually have not finalised a site? You have got some potential sites?

**Mr Hehir**: I would need to check. David is here. He has probably got the detail of that rather than me.

**THE CHAIR**: I am mindful of the time. We need to break at 10.30 am. If we can get an answer to this question and then break for morning tea at 10.30 am.

Mr Collett: As Martin said, we have commenced planning work, working closely with Helen Pappas and her team, on the Belconnen child and family centre, the third of the child and family centres, in the location in Kippax which has been described. There has been a budget appropriation for planning studies and feasibility, and that work is progressing well. The plans for the child and family centre are well advanced and the detailed integration of the Indigenous services has been planned. They are about to be turned into preliminary sketch plans. As part of that process, in pursuing the interests that the commonwealth has, which the chief executive just described, we have asked the planning consultants to do some work on the design of an integrated childcare centre to get those benefits.

MRS DUNNE: My question was: for the \$435,000, some of which is allocated to west Belconnen, there is not actually a site determined? Mr Hehir was talking about possibly Charnwood, possibly Dunlop and possibly Kippax. At the same time, Mr Collett, you are saying there are plans afoot for a childcare centre associated with the child and family centre in Kippax?

**THE CHAIR**: Can I interrupt to point out that the public accounts committee will be inquiring into the distribution of funding in the appropriations, so that might be a more appropriate forum for that to be discussed.

**Mr Barr**: There may, in fact, be confusion between an ACT government election commitment in relation to an additional childcare centre and something that may be able to be funded by the commonwealth.

**Mr Collett**: Yes, that is correct. The design moneys that you referred to were for the childcare centres in north and south Canberra. As part of that, we are looking at locating the northern childcare centre in association with the child and family centre. There are ongoing negotiations with the commonwealth and we are testing the service delivery model. But, as I said, as an extension to the design work on the child and family centre, we are looking at whether the childcare centre can be co-located.

**THE CHAIR**: We will break for morning tea.

Meeting adjourned from 10.30 to 10.52 am.

**THE CHAIR**: Ms Burch, did you want to start?

MS BURCH: Thank you. I have a question relating to page 14, and it is mentioned elsewhere. There are probably a couple of parts to this question. I am looking at the father inclusive practice. Before the break we were talking about support for Indigenous fathers. The first question is: with the father inclusive practice, can you tell me how this supports fathers, in particular Indigenous fathers? The other part of the question is about the general suite of programs for Indigenous families.

**Mr Barr**: Ms Pappas is best placed to answer the detail of those questions.

Ms Pappas: Father inclusive practice, or including fathers in their role as carers, is really a new area for us. We focused quite heavily on it in 2008. Obviously, the majority of people entering the service were women and their children, so we do focus on trying to understand better what it is that dads need in order to feel more comfortable with accessing services. We did a survey of dads and they told us things like, "When we come to your waiting rooms, there's the Women's Weekly, and we don't particularly want to read the Women's Weekly," so we went out and got a suite of magazines and tried to make information a little bit more friendly for men. They were the simple things we did.

We then started thinking about how we deliver our programs so that dads can come. We have been trialling a Saturday morning "paint and play" on a monthly basis in the park. We are actually seeing quite a few dads coming to that, and they are enjoying their time with their children at that playgroup. We also trialled a "parents as teacher" group program for dads. It was a condensed version of what you would usually get over five weeks; we did it in two weeks.

We talk to dads about their child and we condense it into groups of ages—zero to eight months, nine to 12s, because babies develop differently, obviously, through those ages. We had dads with their babies there, the zero to eight-month-olds, and talked to them about what they expect of their zero to eight-month-olds and how they should be interacting with their children. We got some strategies out there. Dads do not particularly want to talk about their feelings; they want strategies and information. So we did change the program to suit those dads.

**MS BURCH**: And is this universal access as well?

**Ms Pappas**: It is universal access, yes. We held an event in September 2008 about celebrating dads. That was an attempt, again, to get dads into the centre and make them feel comfortable about accessing services. We had 80 dads come to that celebration, which was fantastic.

**MS BURCH**: That is a good turnout.

**Ms Pappas**: Yes, and their families. Their children pulled together some bags with information for their dads. They presented their dads with these bags and talked about making sure you get your health checks—parenting information. So we have tried to include the whole family in that and made dads a bit special.

We are also running evening triple P programs. That is a parenting program to help parents understand how to better manage their children. It is not behaviour management; it is about parents thinking about how they are parenting their children when their children are saying "no" or when they are not doing as they are told—some strategies. We are running that in the evenings and the dads are coming into that with their partners or on their own with their children. I mentioned before the men's health and child's health project. That is targeting Aboriginal and Torres Strait Islander men in their role as dads.

They are a few of the programs that we are trialling. As I said, we are at the beginning

of the process. We think there is a way to go, and we will keep working to refine our programs and really make them accessible to men. There are simple things like changing the way we do our flyers. Instead of saying "parents", maybe we should be saying "mums and dads" so that dads will feel included. It is simple things like that. We are drawing on the research of Richard Fletcher, who is a renowned researcher around these topics. He has a kit that we have drawn down from the net and we are using that as the basis on which to move forward.

**MS BURCH**: And the Indigenous programs?

**Mr Harwood**: Within my area, we have two main functions. We provide advice across the office on policy and practice issues, so we work very closely with care and protection and the community youth justice area to ensure that the policies and practices are appropriate for Indigenous people.

Our second function is that we deliver four Indigenous-specific services. We deliver family support services, and that is really for those families that have contact with the care and protection system. Mr Duggan was talking earlier about the three arms, if you like, of care and protection. We work closely with people in the response and intervention team and in the care team of the care and protection services, when they are dealing with Indigenous families, to help them in their engagement with the Indigenous families and work with the Indigenous families to help them understand what the care and protection system is, what their obligations are and what they need to do in order to get out of the statutory care and protection system. That is family support.

We also run an Indigenous foster care service, so we attract Indigenous families who wish to put up their hand to take Indigenous children who need to be placed in out-of-home care. We work with those families, we train them up, we get them registered as foster carers and then we support the placement of Indigenous children with those Indigenous families.

The third service we provide is that we run Narrabundah House, which is a supported accommodation facility for young Indigenous men. That serves as a mechanism to try and work with some of these young people. They are often in contact with the care and protection system or the community youth justice system.

**MS BURCH**: These are young men at risk?

**Mr Harwood**: They are young men at risk, yes. As I said, normally they do have a care and protection order on them or a community youth justice order on them. We can accommodate up to four young men in that facility, and we try and link those young men into appropriate support services.

The fourth service that we provide is an integrated service delivery model, which is similar to the integrated family support program in the child and family centre. That is an early intervention approach. We try to identify an Indigenous family that is in need, and we try and work with those families to wrap services around them. We are taking many of the similar principles and operational procedures that you find in the other program.

That is really what we provide in terms of our service, but the department as a whole provides funding to Indigenous-specific services around town. We provide funding to Gugan for a family support service and to Billabong Aboriginal Corporation for a family support service. Through housing, they provide funding to Winnunga and Gugan for home liaison services. So there is a whole range of government-funded Indigenous-specific services provided by the NGO sector.

**MRS DUNNE**: I have a question about the parent and infants relationship support group, PAIRS. I got the impression from reading the annual report that the program had not started. It was anticipated. Has it actually commenced now?

Ms Pappas: The program has commenced. We had our first group towards the end of last year. That was a partnership between the child and family centres, Marymead and ACT Health. It is quite a resource intensive program, in that they are relatively small groups of people that come through the program. It is primarily about focusing on the attachment between parents and their very, very young children, infants. It is very much about role modelling appropriate interactions to encourage the attachment. When the child looks at their mother, we say to the mother, "Look at your child." It is very intensive in that it is hands on, one to one.

The program runs where the parents and infants are together with all the professionals. Then they separate. Some professionals move with the parents and some professionals move with the children. At the end of the program, they reunite. It is managing things like separation, coming together again and how to make that process smooth and stress-free for the infant and for the parent. We are aiming to run that once a year; we would really like to run it twice a year, but it is very resource intensive.

MRS DUNNE: How many people in the groups?

**Ms Pappas**: The last group had six mothers.

**MRS DUNNE**: So it is aimed at mothers?

Ms Pappas: At parents.

**MRS DUNNE**: One of the things it says here is that the Tuggeranong childcare centre will deliver an evidence-based program. What do you mean by "evidence-based" in this context? Is it a program that is underpinned by research or is it a program that you are going to be doing report and analysis on?

**Ms Pappas**: It is a bit of both. It is a program that we have researched and transplanted from Victoria. There is some research already occurring in Victoria around this program. We have also engaged with the University of Canberra, who will build on that research in the ACT context.

MRS DUNNE: Thank you.

**THE CHAIR**: I have a question around the children's plan. I note that it was from 2007 to 2008. Are there plans to extend the time frame for the plan or to redevelop it?

What is that status now?

**Mr Barr**: Yes, there is. It is a matter of some discussion between the department and me in relation to how we will proceed. There is a possibility to look at integration with the youth plan as well. We will discuss some of those matters in more depth in the months ahead and progress the project, but it certainly is the government's intention to renew those plans.

**THE CHAIR**: Will the realignment within the department have an influence on the way the plan is developed as well?

Mr Barr: There is that capacity, yes.

**Ms Mitchell**: These plans are whole of government. In terms of the children's plan, there is an interdepartmental committee that oversees that. In that sense, we provide a secretariat service, along with our colleagues from Health. That will continue, regardless of structural issues within the office. They have already worked out a forward plan to 2014. The issue is how it works in conjunction with the redeveloped youth plan and where there are potentially joint initiatives that might occur across those two spaces. That has been going for some time and has a pretty solid governance arrangement across government.

THE CHAIR: Thank you. Ms Burch?

**MS BURCH**: I have a couple of questions around pages 62 and 63. One, on page 62, is around enduring parental responsibility. Can you explain how these orders make more secure a long-term relationship? What is the benefit of this for the carers and for the children?

**Ms Mitchell**: Enduring parental responsibility is a type of order that facilitates greater permanency in the arrangements for children unable to live with their parents over the longer term. It is somewhere between a foster care arrangement and an adoption. It transfers some legal rights to the carer and enables that carer to have a looser relationship with the department, which for many is a very good thing. And it normalises the parent-child relationship over the longer term where adoption is not considered appropriate—the parents are unwilling to go that path or the child does not want to go down that path.

It does confer greater legal rights in terms of the day-to-day decision making. Things like enrolling kids at school, making decisions about medical procedures and that sort of thing are conferred on the carer. And it gives much greater stability to the placement, and all the research shows that the more stability you can give the much better outcomes are for children, both in the short term and in the long term, in their capacity to participate in society, have solid relationships and be productive members of the community.

**MS BURCH**: And are they younger children or older children?

**Ms Mitchell**: They can be both. We focused initially on older children who have been in stable placements for some time. There have been a number of those since we

started to focus on that. There are 11 to date that we have been able to facilitate, but we have got many more in the assessment phase that we think we can facilitate. They do continue to attract the foster care allowance, so there is no disincentive in that regard.

We are now starting to look at younger children and the new act. One of the benefits of the new act is that it strengthens permanency pathways. The court case workers and our own case workers need to decide relatively early what the best path for the child to get the best outcome is. Will it be restoration and support backed to the hilt so that you can have a shorter term order and then restoration or will you go for a long-term out-of-home care plan which gives greater stability to the child. That new legislation will allow us to focus on younger children much more readily.

**MRS DUNNE**: Could I just follow up on that, please? What sort of mechanism do you use for conferring greater power on a foster parent?

**Ms Mitchell**: It is an order of the court, so there is an assessment done of the relationship—the network of relationships around the child, the child's capacity and the demeanour of that relationship: how stable it is. It will be an order of the court.

**MRS DUNNE**: The aim is to give more autonomy to the foster parent?

Ms Mitchell: Absolutely.

**Mr Hehir**: That is certainly one of the aims. The aim is also, from the child's perspective, about giving them more certainty and making sure—

MRS DUNNE: Yes.

**MR HEHIR**: We try and come at these things from the view of the child as well. It is not necessarily about the convenience of the foster carer. It is about the importance of having that feeling "This is my ongoing place; this is where I have stability; this is where I'm going to live on an ongoing basis." Many children in foster care do not have that sense of stability. The theory around both the changes to the act and also the enduring parental responsibility is to say to the child, "This is where you are going to be"—and develop the relationships that are there.

Ms Mitchell: I will add something too. People will be aware that, in terms of adoption—overseas adoption—there has over time been a reduction in children available from overseas for adoption. That is something that is happening around the world. We are using people's registered interests in overseas adoption to promote the idea of potentially being part of an enduring parental responsibility arrangement with local children in these situations. That is working very well for aspirational parents who might be interested in that.

**THE CHAIR**: Thank you. Mr Hanson?

**MR HANSON**: I have a question, from page 63 also, about the Bimberi Youth Justice Centre. The facility is now open and fully occupied, I believe. That is right?

Mr Barr: That is correct—not fully occupied, but it is occupied.

**MR HANSON**: But everyone that should be there is there?

**Mr Barr**: Yes. That is correct, yes.

**MR HANSON**: How many people are there?

Mr Hehir: It varies from day to day. Many of these young people come in very

briefly. I think last Friday it was up to about 18 or 20, and it is back down—

Ms Mitchell: And then this morning it was 11.

**MR HANSON**: What is the capacity of the centre?

Mr Hehir: Forty.

MR HANSON: Have you had any problems since opening it, in terms of the—

**MRS DUNNE**: He wants to know whether the alarms work.

**MR HANSON**: You might be aware that there have been some issues with the Alexander Maconochie Centre. You might have heard about it.

**Mr Barr**: That has been reported, yes.

**MR HANSON**: I am aware of something about it. I am just trying to get a sense of it. Have you got any elements of your security system that are not online or that were online and are not working essentially perfectly?

**Mr Barr**: I might pass that to Paul Wyles, but certainly there has been no advice to me that that is the case.

**Mr Wyles**: The answer to that is no. All our systems are working.

**MR HANSON**: Do you have any systems that are shared with the AMC in terms of technology and people? The subcontractor that built the security system at the AMC could have built one here almost at the same time. Were they completely separate contracts or were there elements from the AMC that were used in Bimberi?

**Mr Wyles**: These were completely separate projects.

**MR HANSON**: Completely separate projects, were they?

Mr Wyles: Completely separate procurement.

**MR HANSON**: There is no connection between the two and it is all working?

Mr Wyles: That is right.

**Mr Barr**: Separate requirements, separate levels of security and entirely different projects.

**MR COE**: I would like to ask a few questions, if I may, with the indulgence of the Chair.

**THE CHAIR**: Yes. We will see how we go, because of the plan, whether Ms Burch has got any other questions.

**MS BURCH**: I have got one more question.

**MR COE**: With regard to the levels of Indigenous youth that go to Bimberi, I am wondering how they respond to the environment in comparison to non-Indigenous youth and whether there has been any difference at Bimberi as opposed to at Quamby?

Mr Wyles: The ACT, like other jurisdictions, has significant over-representation when it comes to Indigenous people in custody. Of the 11 young people in custody today, five of them are identified as Indigenous. I think one of the saddest things in that is that, in the consultation on the development of Bimberi, the Indigenous community said very clearly to us that the young people like being in custody, that they often get a very good experience of education, they get well supported.

We were very mindful, as we went through the project, to think about how we could engage with the community and work with programs. It is really important that young people are supported prior, so that they do not have to come into custody, and post release, so that they can succeed in the community and do not have to come back.

We have got some Indigenous programs coming in. Gugan Gulwan come in and provide a service. We have an identified worker on the case management team who works with our staff in terms of consultation and with communities to try to link young people back into services. In some cases, by the time Indigenous young people come into custody they have burnt a lot of their bridges; so it is quite a challenge to re-engage them. We are working closely with education on how we re-engage to education systems. Again, that can be a bit of a challenge but, because we have good service provision in terms of education and training at Bimberi, it really is an opportunity for them to start something that they can continue in the community.

We are working closely with CIT about how we can support them into programs. We have had some good successes with Indigenous young people completing access10, which then allows them into some of those CIT programs.

**MR COE**: And is there a difference between response and behaviour compared to when Quamby was in operation?

**Mr Wyles**: I would say most of the young people who moved across have been very excited about moving to a new centre. It is certainly larger; the opportunities in terms of sport, recreation, education and training are much greater than they were on the site at Quamby. So there are those opportunities really that we had not had previously.

**MR HANSON**: Could I clarify a point there. You said that there are Indigenous youth that actually want to be in Bimberi or want to be in detention.

**Mr Wyles**: This is the feedback from some people in the Indigenous community.

**Mr Hehir**: I think it is worth while noting that many of the young people in Bimberi, and prior to that at Quamby, have come from fairly chaotic circumstances. They probably would not have been used to being fed on a regular basis; they probably were not used to being schooled on a regular basis. Most of them would not have been attending school. They certainly are not used to routine and discipline. They are probably not all that used to positive, respectful relationships. That is what they get at Bimberi.

**MRS DUNNE**: Are you saying this about the occupants of Bimberi generally or about the Indigenous occupants?

**Mr Hehir**: That applies quite broadly to many of the occupants; it is not just the Indigenous people.

**MR COE**: Given we do not have parole for youth offenders in the ACT, are there significant problems when people go from a structured environment like Bimberi back to their lives? When there are no parole requirements, when they are not forced to interact daily with the parole officer, this must be a huge problem.

Mr Wyles: What I would say is that one of the advantages of the new legislation is that young people can now be sentenced, receive a sentence, and receive post order support, which in a sense is not dissimilar to parole. And certainly that was one of our challenges previously. Young people would leave custody following a sentence and effectively that would finish their connection with our system and would often finish their connection with any level of support. We now have, certainly for young people who are sentenced, capacity to follow up if the court chooses to make an order post release.

Mr Hehir: Can I add quickly to that? The other thing we are doing in that area is that we have implemented an innovations project within Housing which actually looks at housing for young people exiting Bimberi where it is not appropriate for them to return home. If they are 16-plus they can actually have a tenancy with Housing ACT. And we have a program for those young people, where it is not appropriate that they go home, where we will place them in a stairwell model where they actually get quite a deal of support from a non-government organisation, typically I think Barnardos, in terms of trying to find a level of structure and maintain a level of structure for them as well. So we are quite conscious of the issue. As Mr Wyles said, the legislation change was actually something we were very keen to have because it was certainly a bit of a hole.

Mr Wyles: In following up, the other thing we have been working quite hard on is engagement of our community agencies. There are five agencies who are funded by the office under the youth support program, three of the regional community centres, Anglicare and Gugan Gulwan. We have said to those agencies, "We want you to come in and deliver programs in Bimberi and develop relationships with young

people so that on discharge you can follow up and assist them." That is proving quite successful.

To have a business like Anglicare involved too—they have a suite of services through their civic programs, the health centre and education centre—is particularly useful for those young people. Often their experience is that they are getting quite good, intensive support and structure in the custodial environment. But they need a level of intensive support on discharge.

**THE CHAIR**: Ms Burch, do you have a question in relation to that?

**MS BURCH**: I have a question on page 63, which is on the bottom of the page following the Bimberi info, on CHART, the changing habits and reaching targets program. It is fairly new, but can you tell me how that is working out in reducing youth reoffending?

Mr Wyles: CHART is a modulised program that we are fortunate to adapt from Victoria. It was developed by the Victorian Department of Health and Human Services and it is based on similar programs in the UK. It is cognitive behavioural; so it really assists young people in making the links between their thoughts, their behaviours or actions, and their feelings. It has a number of modules that really target their crimino-genetic risk and behaviours, things like theft and motor vehicle theft but also things as basic and as useful as problem solving or motivation.

The workers have been implementing this for about 18 months, both across the community and the justice system, and at Bimberi and at Quamby. Workers report that clients are very engaged with this, that it really helps focus their work with young people. It allows workers to be quite creative; there are lots of worksheets; there are certificates that they give; there are activities.

We had the developer of the program from Victoria, Felicity Dunne, train our staff on three occasions for about an 18-month period. We have also been keen to engage other colleagues in mental health and education and some of the community sectors so that they are aware of these sorts of strategies that young people are enlisting. What it really allows on the ground is that, as incidents occur at Bimberi, staff start to help young people reflect on the strategies that they learnt in the CHART programs so that there is that active learning and integration into their life.

**MS BURCH**: If they commence a program in Bimberi, then they are followed through?

**Mr Wyles**: That is right. One of the things we were keen to do was implement it across both sides. Yes, often they will start it in the community and end up in Bimberi or vice versa.

**MS BURCH**: Is it showing success?

**Mr Wyles**: Yes, we have had a lot of enthusiasm. We are currently thinking about how we might go about evaluating it and have had some initial discussion with the University of Canberra.

Ms Mitchell: One young man presented to our executive, which was a very brave thing for him to do. He had been through the program and he articulated how he reflected on whom he associated with and whom he should not have associated with and how this had motivated him to want to do training and occupy his time in different ways than he was occupying his time prior. That was a very positive individual case before us.

**THE CHAIR**: I was just going to ask a quick question. Do you know whether there has been an evaluation of the program in Victoria?

Mr Wyles: There has been, yes. We have not seen that but Victoria have in the department, yes.

**THE CHAIR**: Have you had any feedback—it has been obviously showing early success here—in terms of whether it has had an impact on, I guess, preventing young people—

**Mr Wyles**: Yes. Certainly what Mrs Dunne reports to us is that they are implementing it across regions in Victoria but in some of the early areas that they had looked at there had been a reduction of offending and certainly there were young people not coming back into the justice system.

**THE CHAIR**: Mrs Dunne, you have a question?

MRS DUNNE: I want to follow up and take that a little more broadly. Mr Hehir spoke about children exiting Bimberi and previously Quamby and not going back to their families but rather having some other support structure. How important is that? Does the research indicate that it is important to break old habits and perhaps to discourage young people from going back to their former groups, their former mates? What is in place to encourage that more generally?

Mr Wyles: Certainly, it is a complex picture depending on who you are talking about in the system. The causes of offending often are talked about in terms of peer relationships. In some cases it is families. There are other issues like poverty and homelessness that might contribute. CHART helps to address some of those things but we have to, through a case management process and through clear assessment, particularly when young people come into custody, be assessing their needs and making some determination through a planning process about what is required.

It is a particularly complex issue for families. Many families are quite embarrassed about their young people being in the system, and many Indigenous families particularly, so there are some challenges about how we as service providers engage those families. As I say, in some cases there are also some negative influences that you will not mitigate. But that is part of the assessment and planning process that we go through.

**MRS DUNNE**: The act has commenced, but are you actually now in a situation where there have been post-incarceration orders? They have got a name in the act; I cannot remember what it is—the substitute for parole within the youth justice system?

Mr Wyles: Yes, there are—

**MRS DUNNE:** Have we started to have orders—

**Mr Wyles**: What we had previously was remissions. I think there are six or so outstanding, because they were sentenced prior to last Friday—

MRS DUNNE: So it was only last Friday?

Ms Mitchell: Yes, so we are not yet—

**MRS DUNNE**: A bit previous, okay.

**Mr Wyles**: So they will run their course and the court will not be issuing remissions from last Friday.

**MRS DUNNE:** I have a quick question on something we have not touched on. There is a review of the Adoption Act?

Mr Barr: Yes.

**MRS DUNNE**: Where are we with the review of the Adoption Act?

**Ms Mitchell**: We are moving into the legislative phase with that.

**MRS DUNNE**: Was there a discussion paper?

Ms Mitchell: There was a discussion paper. There has been extensive consultation over a number of years on this. The new adoption bill reflects contemporary community views about adoption, including open adoption as the main philosophy, and a focus obviously on the best interests of the child. The intention is that it come to parliament in the next little while, in the next six months or so.

MRS DUNNE: Another related question is: there has been some increasing controversy about elements of overseas adoption and the experiences of some families in relation to children who were not willingly relinquished, or who appear not to have been willingly relinquished. What work is being done in the ACT to close off those possibilities as much as possible? I know there is interaction with the commonwealth there, but also to assist those families in the ACT who may be victims of this?

Ms Mitchell: I will ask Jenny Kitchin to answer the detail of that, but in general, the particular issues that you refer to happened in the late nineties. At that time states and territories variously had responsibility for administering inter-country adoption programs as well as for processing applications. This was related to the adoptions from India. We did not have responsibility for that program; I think New South Wales actually had responsibility for that program at the time.

When the states and territories are dealing with adoption authorities in other countries, they can be non-government or private organisations, and that was the case in this

case. Subsequently it was found that some of the adoptions facilitated through that agency in India were somewhat dubious. This has only come to light more recently.

Adoption programs are now managed by the commonwealth government. The Hague convention is the relevant piece of international law governing adoption arrangements and protocols. The commonwealth is working with those countries to ensure that they are properly accredited authorities overseas and that these risks do not emerge again. It can stop some inter-country adoption programs if it has got concerns, and it will do that. But it is a matter for the commonwealth now to make those decisions, in consultation with the states.

In terms of the ACT, there were a few families affected during that time. My understanding is that those families have been counselled and are satisfied with the way forward. Some of them, as you would have seen in the press, have connected with those families where the relinquishment happened. Jenny might want to say some more about that.

Ms Kitchin: I think Ms Mitchell has covered most of the aspects. We currently have a couple of families waiting for children from India, but they are no longer doing that through the agencies where there have been some concerns. So we are no longer dealing with them. As Ms Mitchell said, we deal very closely with the federal government on this because this has obviously been an issue for every single jurisdiction across Australia.

MRS DUNNE: Could I go back to one of the things Ms Mitchell said—that the adoptions that appeared to be problematic that happened in the late nineties were not facilitated through the ACT but through New South Wales. How did that work?

Ms Mitchell: It is a complicated issue. The states and territories are the central authorities for adoptions in Australia. This all goes back to a delegation by the federal government in the mid-seventies, when there was the airlift of kids from Vietnam. So they delegated that authority to the states and territories. Each of the states and territories had a number of inter-country programs that they managed, with either the government or whoever was the delegated authority in that country. It is a very problematic thing for a state and territory to have an international relationship under conventions with other countries.

Each state and territory had a number of inter-country programs that they ran at a sort of governmental level. It was about establishing the program and the parameters around the program. In terms of processing individual applications, states and territories always did that and still do that. So we have a relationship with the Indian authority, and other authorities, now that is about processing applications, meeting their requirements, sending files over and they send files back, and matching the children with the parents.

The Australian government has the role of establishing and managing the inter-country program itself, ensuring that the quality of the service is bona fide and dealing with Hague convention matters around that, which the Australian government are the signatory to. Does that make sense?

**MRS DUNNE**: Yes, it does. There was an item on an ABC program in the last week or so about a Canberra family. I do not want to dwell on that but it was reported at the time, and I think it has been reported previously, that state and territory agencies were warned about this particular Indian agency a long time before action was taken. Was that the case here? Were we warned about this agency?

Ms Kitchin: No.

Ms Mitchell: We did not have that information at that time.

MRS DUNNE: Okay. Thank you.

**THE CHAIR**: Thank you. We are probably out of time. I would like to thank everybody for coming here today and giving their time. This hearing is now adjourned.

The committee adjourned at 11.35 am.