



LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY

**STANDING COMMITTEE ON EDUCATION, TRAINING
AND YOUTH AFFAIRS**

(Reference: [Annual and financial reports 2013-2014](#))

Members:

MS M PORTER (Chair)
MR S DOSZPOT (Deputy Chair)
MS Y BERRY
MRS G JONES

TRANSCRIPT OF EVIDENCE

CANBERRA

THURSDAY, 13 NOVEMBER 2014

Secretary to the committee:
Mr A Snedden (Ph: 620 50199)

By authority of the Legislative Assembly for the Australian Capital Territory

Submissions, answers to questions on notice and other documents, including requests for clarification of the transcript of evidence, relevant to this inquiry that have been authorised for publication by the committee may be obtained from the Legislative Assembly website.

APPEARANCES

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Amended 20 May 2013

The committee met at 2.03 pm.

Appearances:

Gentleman, Mr Mick, Minister for Planning, Minister for Community Services, Minister for Workplace Safety and Industrial Relations, Minister for Children and Young People and Minister for Ageing

Community Services Directorate

Howson, Ms Natalie, Director-General

Hubbard, Mr Ian, Chief Financial Officer, Finance and Budget

Collis, Dr Mark, Senior Director, Office for Children, Youth and Family Support

Wyles, Mr Paul, Director, Early Intervention and Prevention Services, Office for Children, Youth and Family Support

Manikis, Mr Nic, Director, Community Participation Group

THE CHAIR: Good afternoon, minister. Welcome to this public hearing of the education, training and youth affairs committee, Ms Howson and all the officials. We are examining the annual report for 2013-14 and one calendar year report for 2013 in the course of this annual report's inquiry. We are due to report to the Assembly on the referral by no later than 16 May 2015.

The committee has resolved that all questions on notice from members are to be lodged with the committee office within four business days of receipt of the uncorrected proof transcript from this hearing, with day one being the first business day of the transcript being received. Answers to questions on notice will be lodged with the committee within 10 business days of receiving a question, with day one being the first business day after the transcript is received. I will talk to you a little bit more about that at the end of this hearing.

Today we are dealing with output 2.1, early intervention, and output 4.1, children, youth and family services. We have resolved to start the hearing with an acknowledgement of country, so we will just acknowledge that we are meeting on the land of the traditional custodians, the Ngunnawal people, and pay our respects to their elders—past, present and future. We will be doing this at the beginning of each of the hearings from now on. Minister, do you wish to make any opening statement before we go to questions?

Mr Gentleman: Thank you, Madam Chair, yes, if I could. Thanks for the opportunity to discuss those output classes today in the Community Services Directorate. These outputs relate specifically to early intervention and prevention services and youth services within the Office for Children, Youth and Family Support. Early intervention and prevention services provides a range of services focusing on, but not limited to, children from pre-birth to eight years of age. These services include Melaleuca Place and the child and family centres at Tuggeranong, Belconnen and Gungahlin. Early intervention and prevention services also includes the child and youth family services program. Youth services is directly responsible for the provision of supervision for court orders for young people in detention or in the community. The ACT youth justice system includes the Bimberi Youth Justice Centre and youth justice case management as well.

It has been a year of significant achievement for early intervention and prevention services. The trauma recovery centre that I mentioned earlier, Melaleuca Place, was opened in July—it was one of my first jobs as a new minister—after 12 months of consultation and service design. Melaleuca Place supports children from birth to 12 years of age who have experienced trauma and are clients of the statutory services.

The delivery of the child, youth and family services program has continued and during the reporting period a new outcomes reporting framework was developed in partnership with non-government organisations, providing better monitoring and measuring of improvements in outcomes for children, young people and their families.

The child and family centres continue to be essential hubs within their communities, providing group programs and intensive support services to children and families that promote lifelong growth, development, health and also wellbeing. Youth services this year continues to be guided by the blueprint for youth justice in ACT 2012-22. Two years in, the youth justice system is demonstrating great outcomes from the implementation of the blueprint.

These outcomes are the result of initiatives which have been delivered across the system. They include ongoing delivery of the after-hours bail support service, which assists young people who are on community-based orders to meet their conditions of bail, strengthening cultural planning initiatives for Aboriginal and Torres Strait Islander young people and their families, and establishing the youth justice support and intervention framework.

We have also commenced an integrated statutory service. The service project is examining how activities performed in the care and protection services and the youth justice areas can be combined to provide an integrated model of case management. Children and young people and families will experience a better integrated and seamless service delivery from the statutory services through that integrated model. This will provide greater consistency and continuity of service for young people needing both child protection and criminal youth justice responses.

I would like to take this opportunity to thank the staff of early intervention and prevention services and youth services for their ongoing commitment and dedication to children and young people. Madam Chair, my directorate officials and I stand ready for questions from the committee.

THE CHAIR: Before we start I will just let you know that visitors to the committee will be given leave by the committee to ask questions as we go along, just to make sure that committee members have adequate time to ask their questions. My first question is in relation to the child and family centres that you mentioned before. On page 32, volume 1, it talks about the West Belconnen Child and Family Centre. It also talks about the Indigenous early childhood development national partnership agreement. I was interested to see how that is going. Also, I would like you to talk to the blueprint that is being introduced at west Belconnen and how that family centre is working with the rest of the community in relation to the blueprint that is being introduced.

Mr Gentleman: Thanks very much, Madam Chair. I was able to visit West

Belconnen Child and Family Centre just the other day. It is a fantastic service. We went there for the purpose of looking at the interactions from non-government providers and the people that they have been caring for. We actually heard some wonderful stories about young people that have come from that background and the support that they have received. In turn, one of the young people is actually serving with the directorate, helping to explain to young people that their future can be brighter than perhaps they have perceived. The child and family centres provide a holistic universal and targeted community-based service for children, as I mentioned, from pre-birth to eight. They will continue to work with children up to the age of 12 years when required.

We had a fresh look at the child and family centres model. They are designed to better meet the needs of families through an increased focus on the delivery of services and programs which are evidence-based, collaborative, tailored and targeted to specific needs. I will pass on to directorate officials to give you some more information.

Ms Howson: We are very proud of what has been achieved at West Belconnen Child and Family Centre, in particular around our focus on supporting our Aboriginal and Torres Strait Islander community in Canberra. There has been a very focused effort in west Belconnen to engage communities and ensure that families and children feel very comfortable about accessing services through that child and family centre. Our staff have done a magnificent job in strengthening relationships with the community. They have also struck some very strong relationships with the local schools. They are very culturally proficient in the way in which they engage communities in west Belconnen.

As a result of that, we are finding our Aboriginal and Torres Strait Islander community in that area taking advantage of the range of programs that are administered. As the minister said, it is a multidisciplinary service through the child and family centres. It certainly is becoming, and has become, a hub of activity for our Indigenous community here in Canberra.

I must also say that the extension of that particular service goes to our two other child and family centres in Gungahlin and Tuggeranong. They are also working very hard with our Aboriginal community to ensure that the child and family centres are a comfortable place, a trusted place, for the community to engage with service delivery. I know that there has been an evaluation recently of the investment in the Indigenous advancement agreement. Mr Wyles can go to some of that detail, if you are interested.

Mr Wyles: West Belconnen was funded under the national partnership on Indigenous early childhood development by the Australian government, and there were 38 similar centres funded across the country. Urbis Consulting were engaged by the commonwealth to evaluate the development of those centres over the past four years. West Belconnen came out very positively in that evaluation. It was one of the first of those centres established nationally.

The model was quite different across the country. In some parts of the country, notably Queensland and Western Australia, they were Aboriginal-run services. In the ACT we built on the existing model from our two services at Gungahlin and Tuggeranong. In consultation with the community, there was very strong feedback

that Aboriginal and Torres Strait Islander people wanted the same high quality professional services that the rest of the population accessed.

It is a very integrated service. It is not exclusively for Aboriginal and Torres Strait Islander people, but there are specific programs that we offer for that cohort. We have worked extensively with our partners in Health to make sure that some of the particular issues around Indigenous health are addressed and there is good access to health services.

Mr Gentleman: I know too that the community is very interested in being involved at west Belconnen. When we visited last time the CEO of the centre showed us the yarning pit out the front and advised that you, Madam Chair, Ms Berry and many other MLAs attend that event on a regular basis. It is good to see that amount of community focus in that area, especially in relation to Aboriginal and Torres Strait Islander people. I might just go to the second part of your question—

THE CHAIR: Before you do, minister, there are two things I need to do. First, the cheat sheet did not tell me to remind you about the pink privilege statement, which I really should do before we go any further. I presume you are all familiar and comfortable with the privilege statement? Because you are all seasoned witnesses, you know all that and that we are being webstreamed.

Mr Gentleman: Yes, we are aware of the privilege implications; thank you.

THE CHAIR: Thank you very much, minister. I am sorry that I did not do that before. Minister, could I just ask Mr Wyles for clarification before you go to the second part of my question?

Mr Gentleman: Of course.

THE CHAIR: Mr Wyles, in relation to the different models across the country and the evaluation that has been done, the ACT is not in danger of losing any funding because we have this integrated model that is providing mainstream services as well as Indigenous services?

Ms Howson: Ms Porter, I might take that question. The specific agreement that is spoken about in the annual report is the Indigenous early childhood development national partnership agreement. That was always a three-year agreement and that agreement ceases at the end of this financial year. We have been essentially recalibrating the service arrangements within the child and family centre program to accommodate the fact that that agreement ceases. A large majority of that agreement funding went to the capital expenditure for west Belconnen, but there certainly was a component that we were investing in recurrent funding for some of the programs that we offer through west Belconnen. We will be able to continue those programs through the way in which we have recalibrated the child and family centre service arrangements.

THE CHAIR: So there is no danger of it stopping?

Ms Howson: The community, in fact, will see a vast improvement. It has been a

number of years now—I think the child and family centre program itself is nearly 10 years old—so it is timely for us to review that particular service model, which we have been doing over the last six months. As a consequence of that, we have been able to attract a number of other service providers into the child and family centre setting. Most recently, the minister launched our partnership with Medicare Locals to provide access to mental health services for children through our child and family centres. Through partnerships with Health and Education and the non-government sector I think what the community will see at the beginning of next year is an enhanced set of services available to them.

Mr Gentleman: Just anecdotally, on the back of the launch of the event with Medicare Local, it was a wonderful opportunity to see those linkages right in the community. At west Belconnen you would know how important it is to have those services in place, and it is the same across the territory. We actually did the launch in Tuggeranong, but it is rolling out across. It was a fantastic day to do the launch because we had a group of young families and children there at the time. It was very difficult for the media though. While WIN TV was trying to film, all these kids were giggling in the background and it was hard to get your message across. But it was a very enjoyable event and I think great news for Canberra.

Ms Howson: Madam Chair, if I may: I did say that that funding arrangement ceased at the end of this financial year. In fact, it ceased at the end of the 2013-14 financial year, so in June. We have been dealing with that issue.

THE CHAIR: Continuing ever since.

Ms Howson: Yes.

THE CHAIR: Minister, are you going to go to the blueprint?

Mr Gentleman: Yes, Madam Chair. The blueprint is talked about on page 54 of volume 1 of the report. It is quite an important 10-year plan. It focuses on reducing youth crime by addressing the underlying causes of youth crime.

THE CHAIR: The other blueprint. There are too many blueprints.

Mr Gentleman: Sorry.

THE CHAIR: The human services blueprint.

Mr Gentleman: It is a local services trial; my apologies.

THE CHAIR: I apologise, minister; I should have given its full title. Is this is the one where west Belconnen has been chosen as the pilot?

Mr Gentleman: That is correct; my apologies. I will ask the directorate officials to give those details.

THE CHAIR: We are very interested in the other one too, I am sure, but this one in particular is one that I wanted to know about.

Mr Gentleman: I will get that to you shortly.

Ms Howson: If you see any of us speaking over each other it will only be because of our enthusiasm to tell you as much as we can about the youth justice blueprint. In terms of west Belconnen's involvement in the human service blueprint—a focal point for that localised area trial—not only did we launch the blueprint from west Belconnen but also all of our staff in west Belconnen are involved in the design phase that we are currently in with the localised trial in west Belconnen. The child and family centre will be very responsive to the consultation process that we currently have underway within west Belconnen informing the service system about just exactly what their priorities are and the sorts of needs that they have and could see being met through the child and family centre.

THE CHAIR: Thank you very much; that is terrific.

MS BERRY: I understand that the human services blueprint is still in development, in consultation with the community and Community Services. Is it the intention that people who are in need of human services or people who identify people who might be in need of human services would be able to connect that person through a single pathway, instead of a whole bunch of different departments or agencies, to get the services they need and any additional services they might need through that?

Ms Howson: Yes, Ms Berry, that is correct. The intent of designing a service system that is better integrated means that we take the burden of individuals having to navigate through what can be a really complex suite of information points or access points—that we take that burden into the system rather than putting that onto individuals to find their way through.

The child and family centre is a microcosm of that, where a parent or an individual might present with one particular issue of concern but, through their engagement with the child and family centre, will be assessed for a range of needs that they may have and be supported to make the connection to the right service that they need at a particular time.

That particular model or those principles will be reflected in all parts of the system. It does not rely on individuals to come into a child and family centre; they might ring the human services gateway service and get the same type of support, direction and referral. That is what I mean about taking the burden of navigating a human services system away from individuals and back into the system itself.

MS BERRY: I have one more very quick one. At West Belconnen Child and Family Centre they used to have a person from Housing. Is that still the case or is that not happening anymore?

Ms Howson: Mr Wyles might be able to talk about this, but we currently have Housing outreaching through Tuggeranong Child and Family Centre and we are just again piloting that model and how effective it is having access to someone with access to the housing system based there. Would you like to talk—

THE CHAIR: Ms Howson, in the interests of time, because housing is really not something that—

MS BERRY: It was about services being provided at the centre more than anything.

THE CHAIR: That is fine. I just thought we could have a list of the services that are provided on notice, thank you. Mr Doszpot.

MR DOSZPOT: Just before I start, minister, my compliments to you on your choice of tie; it explains why we are so much in sync. I expect my question will probably enable you to talk about the blueprint for youth justice in the ACT, but I would particularly like to ask you, as a new minister, to also frame for us your expectations of, and your views on, the outreach model for youth service provision. We would like to know your own views on this as well as the departmental blueprint.

Mr Gentleman: Yes, sure. I will leave the youth justice blueprint to the next part of the hearing, if that is okay; that is appropriate for that output class. I might ask Dr Collis to talk to you more about—

MR DOSZPOT: Your views?

Mr Gentleman: I will give you my views. We will hear some of the details first from Dr Collis.

Dr Collis: Thank you for the question. Youth engagement and youth outreach services are a significant part of the early intervention process. Our system is, therefore, a significant part of the human services system that will be working closely in rolling out and developing the human services blueprint.

There has been significant investment in the children, youth and family services program for the delivery of youth engagement and youth outreach services across the ACT since 2012. Indeed, the budget previous to this reporting year allocated an extension of those youth engagement programs.

It is really important to understand, in the context of the human services system, where the youth engagement services fit. It is very useful to frame it in the youth justice blueprint, in a sense, because the children, youth and family support programs are really our community sector partners, both preventing young people from escalating into tertiary statutory services and, equally, working in partnership to help us bring young people out of the statutory services back into more sustainable community services. So the investment in this approach has continued—indeed, increased—over recent times.

The one human services gateway, which is part of the better services trial, has brought in the CYFSP gateway, the children, youth and family gateway, as one point of referral, one point of access to those services. We are moving to the next step, from moving the one point of access to children, youth and family access into access across the human services system.

The idea, I guess, as we move forward in the human services blueprint, is to

coordinate all of that effort and all of those supports through those service offers.

Mr Gentleman: My view, Mr Doszpot, from your question, is that the youth outreach program is working well. It is, I think, a good investment. Let me give you some examples of investments through that period: Gungan Gulwan, \$122,500; Multicultural Youth Services, \$122,500; Companion House, the same amount; the YWCA, \$106,250; north-side Anglicare, \$174,000; Belconnen Community Service, \$126,250. These are funds on top. And there is Woden Community Service, \$124,000. So it is total extra funding of \$898,000.

There are some really good results from the outreach and some different ways of thinking about wraparound services. One of the stories that came out of the program was about a participant who was a single mother with a 13-year-old daughter and a 7-year-old foster child who had been in the participant's care for six months. The foster child was displaying challenging behaviours, and the participant was feeling overwhelmed with the circumstances. A number of support options were discussed with the participant, determining that their immediate need was to be aided with domestic assistance. The gateway engagement officer was able to secure free domestic services for the participant on a weekly basis. The participant provided the following feedback: "I am very thankful for all of your efforts and contacts and I feel it is like Christmas. I just got the best present."

MRS JONES: A supplementary question there, if I may.

MS PORTER: Yes, Mrs Jones.

MRS JONES: Minister, compared to three years ago, what is the exact difference in funding to youth services broken down by those categories that you gave us? Could you perhaps get that back to us on notice if you do not have an answer.

Mr Gentleman: Yes.

MRS JONES: Also, there is a real concentration of youth services in Woden and Belconnen—and even, as you have outlined there, to an extent, some in the city. What programs currently service the youth of Gungahlin and Tuggeranong specifically? And how does this apply to addressing any disparity?

Mr Gentleman: There are other services across the city as well. Yesterday, for example, I spent some time down at Lanyon, at the Mura centre, which is run by the YWCA. They were a recipient of the funds I just talked about. They do a fantastic service for youth down there and also for the wider community.

MRS JONES: Who funds the Lanyon centre?

Mr Gentleman: We provide the funding for that. That was the amount that I called out earlier, \$106,250. That is to the Y. They do a lot of other work as well as youth work. But I will go to directorate officials to give some more details for you.

Dr Collis: Specifically into Gungahlin, there are funding services through YWCA, which has a service funding agreement for ACT-wide services. There is also

significant funding through Northside Community Service, which funds the inner north and Gungahlin youth engagement services as well.

MRS JONES: Perhaps on notice we could be supplied with a map of what the substitute services are when we do not have a specific dedicated service in those particular areas.

Ms Howson: We do have dedicated services in all parts of Canberra. They are provided, though, across Canberra by organisations that may be headquartered in a particular part of Canberra.

MRS JONES: Can that be mapped out for us on notice and given back to us?

Ms Howson: Certainly we can outline it along the lines that Dr Collis was just outlining. We can provide that information.

MRS JONES: Thank you.

THE CHAIR: Ms Berry, any questions?

MS BERRY: Minister, could you give us an update on the trauma recovery centre, following its opening in July. It is on page 32 of the report.

Mr Gentleman: It was one of my first jobs as minister to take on the job of opening the trauma recovery centre, Melaleuca Place, over in Dickson. As you are probably aware, we had \$3.05 million over four years provided in the 2013-14 budget. The opening took place on 10 July this year. The former minister, Ms Burch, came along as well. She did a lot of the preparatory work for that.

Following the launch, we had a symposium titled “A trauma informed approach: practice, partnership, recovery and hope”. That was attended by 176 people across the government and non-government sectors and provided an opportunity for practitioners to learn, network and share their knowledge with each other as well as hear from Australian experts in the field of trauma such as Professor Louise Newman and Professor Judy Atkinson.

On the day, at the opening, Professor Newman also gave us a talk, which was quite inspiring, on the physicality of trauma to young people. It was a first for me to learn how what you would see as emotional trauma in a child’s early life actually physically affects the development of the brain. It was quite an interesting day to attend and learn more.

The new service model of trauma-focused service commenced in late 2013. By June 2014 the service was fully operational, staffed by a small, multidisciplinary team of psychologists, social workers and part-time occupational therapists. Since beginning in July, it has accepted 19 referrals for children who are in contact with statutory services. Of the 19, there are eight children of Aboriginal and Torres Strait Islander origin. Those children’s ages range from 22 months to 12 years. The majority of them, 15 of them, are between eight and 12 years.

MRS BERRY: How many is the trauma centre able to cope with?

Mr Gentleman: I will go to officials for some more details.

Mr Wyles: Thank you for the question. In the development of the service model, the project team looked at similar services interstate, mostly in Queensland, New South Wales and Victoria. The advice we took was that these children have significant problems and do not recover quickly. The service model really reflects that, in that it is a model of medium- to long-term intensity. Typically these children will be worked with for 18 months to two years. We also need to have reasonably small caseloads in the scheme of things, so each full-time worker would have 10 to 12 children. Currently there are 19 referrals, and the referrals come solely from child protection services.

The model really reflects the therapists doing two things. One is the individual therapeutic work with the child or the carers. Particularly with young babies, the therapists are providing support to the carers about how to model behaviours and how to work with those babies. But also they have a coordinating role, in a sense, providing what we would term a village around the child—if the child is of school age, working with the teacher, working with the carers and working with other support people in that child's network to help them understand the impact of trauma and how to respond appropriately.

MS BERRY: When children are referred to the centre from care and protection, do care and protection make an assessment of a child that might be in a traumatic situation? When they come to the trauma centre, they have already been hurt. They need to be fixed.

Mr Wyles: They have been through the trauma.

MS BERRY: Not fixed, but supported. While they are going through the trauma, is that—

Mr Wyles: There are two broad categories of referrals that come from child protection. There are children who are in the out of home care system, so they have been removed because of abuse and/or neglect, so there is that trauma, and there are children who perhaps are not in permanent arrangements. There may be a restoration plan for the child being returned to the family, so the therapist can work with the child and that family as well.

THE CHAIR: Mrs Jones.

MRS JONES: I would like to go to page 342 in volume 02. Strategic objective 3 indicates that not as many families access the early intervention prevention services as originally thought. What are the reasons, and what is being done to encourage access?

Mr Gentleman: I will ask directorate officials to go to those details for you.

Dr Collis: We are looking at strategic objective 3, is that correct?

MRS JONES: Correct.

Dr Collis: We have a three per cent variance in those numbers of families accessing services.

MRS JONES: Yes, which represents over 100.

Dr Collis: Yes. That includes the carers who come in for a number of different programs and services. There will be some natural fluctuations. We set a target there and those are the numbers who had the uptake around those services. I could not determine precisely whether there were particular factors other than programs not being fully subscribed or, indeed, in relation to some of the programs we have had in terms of parents as teachers where we have had a recruitment process in place which has required time to get in place and get recruited and where we built up service over the course of this year.

MRS JONES: The makeup of those numbers shows the participation in, obviously, a number of courses. Are you then able to identify which ones will be subscribed as expected?

Mr Wyles: We could do that. Perhaps the other comment I would make is that this is a count of CSD core staff in child and family centres. Through our work recently, for every one of our staff we have two other staff, be they health staff or community staff, who are based or working with us in and around our centres. This is a piece of a larger number of contacts.

MRS JONES: Is the target an accurate reflection of what the target was meant to encompass or could it be not the whole number? Is that what you are saying?

Ms Howson: We always try to set a stretch target in our accountability indicators. Unfortunately I do not have last year's results in front of me. Again, as Dr Collis said, there is always annual fluctuation. What we would be wanting to keep an eye on is over time how it is tracking. We have changed our profiles and program structure, which will also have an impact on where we might be investing in more targeted and intensive support arrangements for families. Those contacts would be offset against large group initiatives. We would probably need to—

MRS JONES: Get some more detail.

Ms Howson: Mr Wyles indicates that he can provide a little more detail about what is sitting behind that. We will take that on notice.

MRS JONES: And what then is done to encourage that, if you are going to continue to set higher targets for the benefit of everybody to work a bit harder towards that? What efforts are being made to increase the access to the services?

Ms Howson: I think the primary objective goes back to this change that we have made just recently to our service model where we are encouraging a broader range of providers to operate out of child and family centres. And we are in the process of trying to get better data on the range of services that are accessed, not just our own

programs, by families that use child and family centres to tell the complete story. That is a work in progress.

MRS JONES: And how that should be best recorded across various directorates?

Ms Howson: Yes, that is right. I would hope that when we are here next year we can give you a much more comprehensive picture of the utilisation of the child and family centres by families of Canberra.

THE CHAIR: Mr Wall.

MR WALL: If I could just clarify, we are doing early intervention and we will come back after the break and do youth services, or are we going to do them concurrently?

THE CHAIR: Yes, we are going to stop.

MR WALL: I will defer to Ms Lawder on early intervention.

MS LAWDER: How do you measure the success of the parents as teachers program?

THE CHAIR: Do you have a page number?

MS LAWDER: Yes, it is referred to on page 32 of volume 1. How many families are accessing or using the program and how do you measure the success?

Mr Gentleman: I will pass to Mr Wyles for those details.

Mr Wyles: We had an evaluation of the parents as teachers program that preceded the increase in funding to that program, and early this year we took on three additional full-time equivalent staff, one in each centre, to increase access to that program. Parents as teachers is an evidence-based program that is run internationally and is for sustained home visiting pre-birth to up to three years of age.

It particularly targets more vulnerable women. Often those women may have a history of drug and alcohol abuse or mental health conditions or perhaps some other issues that make them isolated within the community. Our workers visit. There is a curriculum around parenting that they essentially deliver through those visits.

The review by the University of Canberra followed up on a number of those women after the cases had been closed. It indicated that those women felt more confident as parents and certainly were more able to access services. Following that, there was a budget initiative and those additional positions were funded.

Dr Collis: The other thing in terms of the question of how you evaluate the success of this program is that obviously there are qualitative measures about engagement of staff of families in the program and the length of time of engagement in the program. I think that in itself is really a great indicator of engagement success because these are usually targeted at mums for whom it is very difficult to access services. That is one way of measuring.

I think the work we have been doing around outcomes frameworks in the CFC and the broader service model system and, indeed, in the human services system more generally is going to determine more accurately the impact of programs in the early intervention space, specifically parents as teachers, and the impact of keeping children and families out of the child protection system into the future. I think those impacts are ones where we are just getting the technology now in place to be able to track over a period.

Ms Howson: The broader population measures that are unreported under the Australian early childhood development census—it used to be known as the index but now it is the census—also informs where we invest in these early intervention programs, in the sense that we will target either particular regions or particular issues that flow through from that. In the gap between the 2009 census and the 2012 census we did see an improvement in all the domains, with the exception of physical health and wellbeing for ACT children. And, while it is difficult to prove the very direct correlation, it is certainly the case that we engineered the programs through child and family centres as a result of the information that came out of that 2009 census and we did see that population improvement in 2012.

MS LAWDER: How many families are involved in the program?

Mr Wyles: In the parents as teachers program, with the increase of those three positions in the last budget, the annual figure is 160.

Mr Gentleman: Just to explain a little further, whilst the report explains on page 33 that the program delivers parents the knowledge and skills to handle complex parenting situations, some of it too is in some areas that we would see as normal life situations such as cooking, shopping and providing in advance for things that are going to happen, making appointments, those sorts of things, that perhaps these parents have not had the opportunity to plan for before. It is a very good program.

MS LAWDER: And how many were being supported before the expansion of \$1.3 million which was for three additional—

Mr Wyles: It was 120.

MS BERRY: I have a quick supplementary. Are the parents that are being supported through this program from across Canberra or are they in particular parts of Canberra? Are there higher numbers in different parts?

Mr Wyles: Certainly they are from across Canberra. It is the staff in our child and family centres who outreach and home-visit. In the figures I saw recently—I do not know the exact figures—there appeared to be more demand in south Canberra. Our staff home-visit out of the Tuggeranong child and family centre to south Canberra, Weston as well as Tuggeranong.

THE CHAIR: I want to ask through you, minister: Ms Howson, were you talking about the Australian early development index? Were you making reference to that before? I was not quite sure.

Ms Howson: That is correct.

THE CHAIR: Thank you very much. Sometimes your voice is a bit soft.

Ms Howson: It is. You have told me that before. I am sorry; I must speak up.

THE CHAIR: I note that the commonwealth report in 2013 and the report in May 2014 say that the ACT compares favourably with the rest of Australia. Minister, could we have some expansion on what it is that we are doing so brilliantly?

Mr Gentleman: Indeed. I will ask Ms Howson to deliver those details.

Ms Howson: It is a very good question. I would like to say that Canberra is the best city in the world to live in and it is the best city in the world to bring up children.

THE CHAIR: Some people say that.

Ms Howson: I believe that has been said a few times. If I could take a micro view and then a macro view, in terms of the micro, it is what I said earlier. We are actually using this sort of data. It is really important, population-based data sets that provide that evidence base for where we invest to get the best impact. With the Australian early development census/index, that information is workshopped across Canberra in the health sector, education sector, justice and safety sector and community services sector.

We also educate our non-government sector in the outcomes of that particular census. All that information is available to inform program delivery and how we focus and target our efforts. And then it is a combination of that very multi-disciplinary approach to supporting children in the zero to five age group and getting them ready for school.

It is what we are doing in relation to supporting families and parents to provide nurturing environments for children to grow up in. It is what we are doing in our early childhood setting to prepare our children, to optimise their capacities to be able to engage in school effectively, both socially and cognitively. It allows us, as I said, to target the most vulnerable and disadvantaged with more specific interventions.

Mr Gentleman: I can say too that it is recognised across the other states and territories. From the most recent ministerial council meeting that we went to, the other states and territories are looking at what we are doing. There is a little envy there, I think, in seeing the results that have been so successful.

Ms Howson: There is probably a whole lot more than just a little envy.

THE CHAIR: Mrs Jones has a supplementary.

MRS JONES: Yes. Regarding that area, which development domain did the ACT not improve in?

Mr Wyles: I can certainly table the 2012 report which gives a breakdown by ACT

regions and by the five domains that were measured. In the first year of schooling a teacher fills out a survey on each individual child—questions that relate to five domains. They are physical health and wellbeing, social competence, emotional maturity, language and cognitive skills, and communication skills and general knowledge. The ACT, between the 2009 report and this 2012 report, improved on four of the five indicators. The one we have not improved on is physical health and wellbeing, and the numbers moved slightly backwards.

MRS JONES: Why is that?

Mr Wyles: That is for a range of reasons. Certainly, it goes to the government's investment in the obesity initiative.

MRS JONES: But health and wellbeing surely covers more than obesity.

Mr Wyles: Yes, it does. That is, I suppose, one initiative to address that. What we have done in the ADR team, in terms of practical application of this data, is that we ran a forum in Weston Creek and involved our partners in Health, Education, the Heart Foundation and Medicare Local. We had members of the community, including schools, come and hear about the data and also think about what practically could be done to address physical health and wellbeing issues.

MRS JONES: What came out of it?

Mr Wyles: That included Health and Education talking about grants programs that the community can apply for. It included the community coming up with a range of ideas around walking to school and a number of small initiatives that they could apply for.

MRS JONES: Have we instigated any academic study as to why we are not improving in this category or are we just relying on anecdotal responses from the community about what they want us to do?

Mr Gentleman: Health have looked at health and wellbeing in children, but we will get some more information on that and come back to you, if you like.

MRS JONES: On notice? Thank you.

MS BERRY: In fact there is an academic at the University of Canberra who is doing a study on health and wellbeing across Australia.

Mr Gentleman: Certainly, as Mr Wyles said, one of the key recognitions from Health is that a lot of our children and young people are not as active as they could be. They are obese in a larger amount than in some of the other jurisdictions. That is why the government has targeted especially obesity and activity in children as a clear path to address this situation.

THE CHAIR: Mr Doszpot, a new question?

MR DOSZPOT: Thank you, Madam Chair. I will defer to my colleague Mr Wall.

THE CHAIR: Mr Wall said he wants to wait until after the break. Mrs Jones?

MRS JONES: On page 24 it shows “other expenses” equalling \$240,000. In previous years this “other expenses” item—

Mr Gentleman: Is it in volume 2?

MRS JONES: Yes, volume 2. In previous years this number seems to have been reported at around \$1,000. What is the reason for the great increase to \$240,000?

Mr Gentleman: I will ask Mr Hubbard to come to the table. He is our expert on figures.

Mr Hubbard: Thanks for the question, Mrs Jones. I do not have that detail with me but I would be happy to take it on notice.

MRS JONES: Yes, it seems like an enormous variation.

Mr Hubbard: Can I clarify which one it was?

MRS JONES: Page 24, volume 2, under “other expenses”.

Mr Gentleman: The reduction in “other expenses”; is that your question, Mrs Jones?

MRS JONES: Under the actual \$240,000.

Mr Hubbard: Yes, I will see if I can get that before the end of the session.

MRS JONES: Thank you; that would be great.

THE CHAIR: Ms Berry.

MS BERRY: Can I go back to volume 1, on page 33. Minister, could you provide us with a bit of an outline of some of the benefits following the implementation of the child, youth and family support program practice framework?

Mr Gentleman: Yes, indeed. As you are aware from the report, it provides community services organisations and their staff with an approach to and a range of prompts which promote reflection, innovation and continuous improvement in those services. It is a way of getting cohesion, I think, between those organisations and the directorate.

Ms Howson: The practice framework is another very good example of co-design work that we are doing with the non-government sector. The contracted providers in CYFSP have worked together on, as the minister has indicated, a framework of practice that ensures consistency in the way in which, as multiple providers, their staff are trained and supported to support children, young people and families in the community. Mr Wyles has been directly involved in that process, so he can go into a little more detail.

Mr Wyles: It really has helped to achieve some coherence or consistency across the 26 child, youth and family support providers in the community. It helps them to identify their key priorities and give a common set of practice principles. It has also helped us to focus on training, particularly in supervision. In Health you would call that clinical supervision but it has embedded some regular supervision staff who often are confronted with some quite challenging situations and need to work through those things. It allows people to recognise that this is a core principle and a core part of being part of the sector, in that you receive regular supervision and support within your agency.

MS BERRY: Is it a requirement that services that are a part of that will use that framework?

Mr Wyles: It is, yes. I have to say it has been really welcomed by the sector. We are seeing through a number of contacts we have with the sector that they are coming together more and that there is this coherence around the response that they provide to their clients.

Dr Collis: In addition to the coherence internally to the sector around their practice, it has provided a really fantastic opportunity to develop a shared language with government and statutory services. Indeed the practice framework that has been adopted in the community sector now is informing how we are developing policy and are able to develop shared language. The consequence of this has been, over the course of this year, that the child, youth and family support program has been able to move very closely into supporting and even co-working with our statutory services staff on occasions. This was a fundamental shared language that allowed us to move to that kind of level of partnership.

Mr Gentleman: Madam Chair, just before we continue, Mr Hubbard has the answer to the previous question.

Mr Hubbard: Mrs Jones, that is a technical accounting treatment for the hire of rooms at CFCs, child and family centres. What we are doing at CFCs is providing those rooms free of charge, but we still account for the cost of providing those rooms. This year for the first time we have gone out and made those rooms available and accounted for the cost of covering things like electricity.

MRS JONES: Those who are using them are indeed paying a hiring fee?

Mr Hubbard: No, they are not. They are provided free of charge and we recognise—

MRS JONES: So you are just accounting for it and saying that, were they to pay for it, it would be this much?

Mr Hubbard: That is right. We do that across all our facilities.

MRS JONES: In that it is “other expenses” it is not actually an expense except that it is a loss?

Mr Hubbard: Yes. It equates to the cost of hiring it, if you did so.

MRS JONES: That is always between service providers; you are hiring it to ACT government service providers?

Mr Hubbard: It is a range. I think it is a range that generally use it.

MRS JONES: And nobody pays?

Mr Wyles: No, nobody pays but there are a range of community providers. Services like the Smith Family have their staff in our three centres regularly.

Mr Hubbard: It is a technical recognition of use.

MRS JONES: And that has not happened in previous years?

Mr Hubbard: Not as much.

Ms Howson: We are certainly ramping it up, as we have talked about in providing that much more multidisciplinary service offered through the child and family centres. Part of the incentive of having people come into the centres to provide those services is that they get access to the facility.

MRS JONES: Then you can advertise that it is a multidisciplinary centre and so on.

Ms Howson: It is, yes. The objective is that we are able to offer the full range of support services that families are looking for through the child and family centres.

THE CHAIR: Just to clarify, Mr Hubbard, there is no asterisk next to that reference; there is no note?

Mr Hubbard: It is actually described on page 58.

THE CHAIR: There is a description there?

Mr Hubbard: Yes.

THE CHAIR: Thank you.

Mr Hubbard: It gives an idea across other facilities as well.

THE CHAIR: Thank you very much for that. We are going to have a short break.

Short suspension.

THE CHAIR: We will start again. We are on the next output class, class 4.1, and it is Mrs Jones's turn.

MRS JONES: I will defer my questions to the shadow minister, Mr Wall.

THE CHAIR: Mr Wall.

MR WALL: This is the first opportunity that the committee or members of the Assembly have had to discuss youth justice with you since you became minister. I was hoping you might open with your personal take on what changes or areas of improvement you are looking to instil in your term as minister.

Mr Gentleman: Certainly. As we have discussed earlier, early intervention is the reported key by experts. That is the process that we are moving into. That early intervention in a young person's life can mean that there is less opportunity for them to move into the justice system later. That is the view that we are taking. I think you will see in this report really good results for lower numbers of Aboriginal and Torres Strait Islander people in the justice system, and we are looking to focus further on reducing those numbers.

MR WALL: With regard to early intervention, what changes are you proposing to improve these diversionary programs?

Mr Gentleman: I will go to directorate staff to give you some more detail on it.

Ms Howson: The overall approach to early intervention, again, leads into the view of the whole system. But in terms of early intervention, some of the things that we were talking about earlier this afternoon—we are intervening early in the life of a child, particularly, again, zero to eight-year-old children, and ensuring that we are dealing with trauma that may have arisen from their various life circumstances—are an important part of that.

The blueprint for youth justice, I think, makes a number of recommendations around early intervention which we have picked up in the work that we have been doing in the out of home care strategy which we have been working through with the community over the last 12 months. More specifically, though—and Dr Collis can talk to this—working with young people in an early intervention context will also reap further results. Some excellent results have already been achieved but we think we can do better.

Dr Collis: I think the youth justice blueprint was very ambitious in putting in a 10-year plan. I chair the vocation group of the youth justice blueprint and we are delighted at the early gains that we have made. A lot of the early gains are around diversion, as you have mentioned, Mr Wall. The kinds of things are having a 24-hour, seven-day a week youth justice service. We call it the after-hours bail support service. That is a diversionary service which we have extended to not only a support for bail but a support to all young people who are on youth justice orders. That in itself is proving very successful at reducing short-term remands in Bimberi. We know—the research and our experience tells us—the more times children and young people cycle through a detention facility, the more likely they become hardened and institutionalised to the justice system and it becomes hard to work with them.

MR WALL: If we could go next to page 343 of volume 2, strategic objective 7 talks about recidivism rates for young people. The target for the last financial year was to have no more than 43.5 per cent of young people in custody returning, yet the figure

reported is 56 per cent. It is 12.5 per cent above the target. It means more than half of them are coming back into the system. What is being done to address this issue?

Mr Gentleman: Before we go to those details I want to follow up on your previous question with some of the stats that have occurred in this annual report. This was the first report on the progress of the blueprint. The number of offences committed by young people decreased by 17 per cent; the number of young people under supervision decreased by nine per cent; the number of days young people spent in detention reduced by 22 per cent and by 47 per cent for Aboriginal and Torres Strait Islander people. That was the figure I went to earlier.

MR WALL: It is all well and good that the instances of crime are decreasing but the fact is that half of those that are going through the system are returning.

Mr Gentleman: If you will allow me to finish, I will address exactly what you say.

THE CHAIR: Mr Wall, please do not interrupt the minister. Wait till he finishes and then certainly ask supplementaries.

Mr Gentleman: I want to highlight again that focus that we are having. What we are doing is that, as we are reducing instances of young people in the justice system, we are getting down to that nutty end where there are really difficult young people to deal with. But I will ask Dr Collis to finish up.

Dr Collis: The recidivism statistic is a complex statistic to understand. The main game in this is to reduce the number of people going into detention overall. That is the first point. You are quite right: 46 per cent of those people who are now going into detention in this particular year had committed an offence in the preceding 12 months. That is the counting rule. If we were to be successful at diversion and—

MR WALL: Sorry, just to clarify, it was 56 per cent or 46 per cent? Fifty-six is what is reported.

Dr Collis: Sorry, 56 per cent. I stand corrected.

MR WALL: And that is over a 12-month period or a—

Dr Collis: Over the 2013-14 period, as an actual result.

MR WALL: They return within the 12 months?

Dr Collis: Fifty-six per cent. That is the counting rule for recidivism. One would expect, if early intervention prevention is working, to move people out of the justice system. Indeed, if the justice system is in fact using detention as a last resort, what we are going to end up with are the young people who have high levels of risk of becoming lifelong offenders, the more difficult young people. This affects their trajectory. That is exactly what we have.

Today we have 13 young people in Bimberi. That is a very small number. We are not pretending that those young people are not complex young people. They are very

complex young people, because that is what the system has successfully done. We have managed to ensure that only those young people who absolutely must be in detention are in detention and that we are having a capability to work intensively with them.

The result of the recidivism data that you have there, first of all, is not surprising. Second of all, it is based on very small numbers. That is about sentenced individuals. This could be the result of, as small as a handful, three, four or five young people who are particularly difficult and are coming in and out of the system.

Recidivism is a difficult statistic, because it does not relate to remands; it relates to sentenced young people. Today, for instance, there are 13 young people. Only half of those are sentenced young people. The rest are remanded.

Mr Gentleman: It is worth while too, whilst we talk about statistics, to remember that in the ACT we have a population 384,000. You have just heard Dr Collis say there are 13 young people in detention but only half of those are those that are sentenced.

Dr Collis: I stand corrected there. I said “half”. In fact, as of today, with 13 young people in Bimberi, five are in fact sentenced young people.

MR WALL: There is a total population of 13, five of whom are sentenced. The balance—

Mr Collis: Five of those 13 are sentenced individuals.

MR WALL: Perhaps you would be able to take on notice and provide the committee with a breakdown, say for the reporting period for the last financial year, on a given day each month, of the number of young people in Bimberi and a breakdown of how many were sentenced and how many were on remand?

Ms Howson: You want that for 365 days?

MR WALL: No, just for a day per month, on the first of the month or the last day of each month, 12 specific dates.

MRS JONES: Or whatever your reporting date of the month is.

Mr Gentleman: Yes, we can do that. We will get that for you.

MR WALL: Whatever is an easy one for you.

Mr Gentleman: It goes up and down quite a bit, but we will do that for you, for sure.

MR WALL: Or perhaps a peak and a low for each month might be a reasonable figure. Just while we are on Bimberi, the budget papers had upgrades for security systems at Bimberi. I was just wondering what the upgrades entail and at what stage they are at at the moment.

Mr Gentleman: I think it is probably important that we do not go into detail about the

upgrades—we can give you a general overview—because we do not want to tell people what is occurring out there in a security sense.

MR WALL: In a broad sense, whether they are related to surveillance, fencing or additional guards I think would be benign enough

Mr Gentleman: Yes.

MR WALL: But what they were focused on?

MRS JONES: We do not want the whole plan.

MR WALL: And just where those upgrades are up to?

Mr Gentleman: Sure.

Dr Collis: The upgrades relate to both technology upgrade, in terms of technology surveillance, and some physical upgrades in relation to doors. You might appreciate that in a detention facility doors tend to be heavier than the average and tend to have a life expectancy on the hinges and their frames a little less than the average home. It is complicated. If they become out of alignment we start to get false alarms occurring. Part of that would be in terms of upgrading that physical infrastructure.

There is some infrastructure in there which would relate to the provision of electronic enhancements to do with a lighting control so that we do not lose capacity during a lightning strike and things like that. That is the general nature. It is physical infrastructure security.

MR WALL: And are you able to provide an update as to what the cost of those upgrades has been to date?

Ms Howson: We can take that on notice.

Mr Gentleman: Yes, we will take that on notice and bring that back to you.

THE CHAIR: I have a supplementary to Mr Wall's question about the rate of return to custody. Obviously one of the things that we need to look at is when people are exiting custody. There is mention on page 56 of a quality transition program for young people prior to exiting. Could you talk about that, minister?

Mr Gentleman: Yes, certainly. I will ask staff to give you some more detail. I had a personal visit to the centre a little while ago, and towards the end of the day we were able to visit with a young person that was exiting, that had been through this transitional program. It was an absolutely wonderful story. He told us that previously in his life he would never have seen any opportunity to go to work. He had been assisted through the transitional program and was leaving the next day to start work as a bricklayer's apprentice. I think there are some really good stories. I will ask the directorate staff to give you some more information on that.

Dr Collis: Thank you for the question. We are quite proud of the transition unit at

Bimberi. It is a unit which allows us to normalise sentenced young people's lives as they go through the detention system. We know that institutionalisation of behaviours is a major problem for when young people exit and leave detention. Consequently, we have invested in differentiated programs across the centre, including at the least intrusive end of living at Bendora transition unit—a place where young people come to live, they have more autonomy in their life, more control and more choice over their lives, and indeed they commence working and visiting in the community whilst there. We try very strongly to engage them in employment and learning opportunities outside Bimberi from that unit.

So far, over the course of opening the Bendora unit as a transition unit, 21 young people have exited through the transition unit at Bimberi. That plays a role in some transition capability outside Bimberi. Indeed, over the course of this reporting year, we revamped and changed the focus of the service model at Narrabundah House for Aboriginal and Torres Strait Islander young people on youth justice orders—maybe good behaviour orders—or who we were preventing from coming in.

We also know that those times just outside detention are frequently really risky times for young people if they do not have absolutely stabilised, supported situations that they can move into. We were specifically focusing at Narrabundah House on the Aboriginal and Torres Strait Islander young man cohort to assist with that transition program.

THE CHAIR: What is the breakdown usually of young men and young women, particularly in the Indigenous area, that might be living in Bimberi?

Dr Collis: In recent times we have had very low populations of young women in Bimberi. For instance, as of today, two of the young people are women. Neither of those are sentenced young women. We have had extended periods of time when there have been no young women at Bimberi. That is the reality of detention in the ACT over recent years.

THE CHAIR: So effort needs to be put in to work with the young men in particular. My substantive question is about the “dream, believe, achieve” program at Bimberi. Is that part of the pre-discharge or is that something that the young people can experience during the whole time that they are there?

Mr Gentleman: It is open to young people to take part in. I will ask directorate officials to give you more detail.

THE CHAIR: Thank you. It is on page 56.

Dr Collis: The “dream, believe” project is a partnership that we have had with the Canberra Raiders. The person who attended this—

Ms Howson: It is a particular sportsperson.

Dr Collis: Alan Tongue has been part of it.

Ms Howson: He is a great role model.

Dr Collis: He is a great role model. Alan Tongue approached Bimberi some time ago to trial a leadership program that he actually wished to trial in the corporate sector. So it was a real test in terms of this. The program incorporates a whole lot of experiential activities within Bimberi. It goes right across a Bimberi cohort. It includes all young people, not just young people in the Bendora transition unit.

Curiously, it also includes our staff, so it is a fantastic team-building exercise. I recall going to watch the program. There is a very strong “look after your mate” ethos built into this. There is a whole lot of extreme physical activity whereby you are measured by the slowest person in your group, and it is important that you move through there. Staff are mixed with young people. Indeed we have frequently had staff come back off leave to participate voluntarily in this program, because they find it so useful for relationship building.

It has received really great personal evaluations by all the young people involved, and I might say they have all been extremely attentive to it. This is not an ongoing program. Alan has sold this around Australia. We would love to continue that relationship, and I am sure he would too, but that will be by arrangement and having regard to his personal capabilities.

THE CHAIR: Mr Doszpot.

MR DOSZPOT: Minister, youth engagement services moved from youth services to the community participation group. That is in volume 1, page 54. Can you tell us why this move came about?

Mr Gentleman: I will ask Ms Howson to give you the details on that.

Ms Howson: We were looking at the attributes of the youth engagement program. They very much reflect similar attributes to a number of the other programs that exist in the community participation branch. The intention in bringing the youth engagement program into that branch was that we would be able to offer the full capability of that branch to support young people as we do to support older Canberrans and women.

With respect to the intention around that translation, the program is probably defined in a core section around events that encourage youth engagement, grants programs that support young people around the government’s priorities, and arrangements to ensure that young people have a voice in decisions that the government makes about programs that they deliver for them. Those three attributes are very similar across the community participation branch and, as a consequence of, if you like, co-locating that team, they can draw on the broader support of their peers and colleagues across the full branch.

MR DOSZPOT: Does the move actually mean any change in terms of staff numbers and roles?

Ms Howson: No, that has not changed.

MR DOSZPOT: So you have exactly the same number of staff?

Ms Howson: The same number of staff; that is my understanding.

Dr Collis: The same number of staff went to community participation. The change also reflects a focusing of the work around youth services on vulnerable youth and, over the course of the last few years, the movement of youth policy and youth engagement, which is about all of youth, and the fit was very much in with community participation and the broader agenda, rather than being brought in with the branch, which was focused very much on vulnerable youth. The team transferred across earlier this year. I will hand over to Nic to explain how that has functioned.

Mr Manikis: With the move there were two full-time positions that came across to the community participation group, which was the community youth engagement unit—where it was before. What we have here is—

MR DOSZPOT: Can I just get some clarification? I was asking whether there was any difference in the number of staff.

Ms Howson: That was the allocation of FTE to that program prior to the transfer, and that remains the allocation.

Mr Manikis: We have two positions in the broader community participation group. The point has already been made that these two positions are supported and assisted by the rest of the positions in the community participation group, depending on the activities throughout the year. There is a sharp focus on the youth constituency in the broad, and also on highlighting and assisting youth to find their place in our community, to find themselves, to participate in activities that enhance their capabilities and promote and assist the community themselves.

We fund projects under the youth grants programs. We do that out of the community participation group. With those projects, whilst there are some activities around assisting vulnerable groups, they are also about showcasing the talent and showcasing other activities that youth may come to us with across the board.

The most important point there is that when we have National Youth Week, the whole community participation group assists those two staff. When we have Refugee Week, the youth staff assist the multicultural office. With International Women's Day, the two staff assist the Office for Women. So it is very much an integrated model. There is the youth perspective as well, by virtue of having those two resources in the community participation group. Youth engagement occurs during Refugee Week, it happens on International Women's Day, it happens during the festival, and it happens at other times throughout the year as well.

MR DOSZPOT: Is there any cost involved in this taking place—any additional costs?

Mr Manikis: No, there is—

Mr Gentleman: In the grants program or in the—

MR DOSZPOT: In the move generally. Were there any savings, or any costs involved?

Mr Manikis: There are nominal costs of cardboard boxes and—

MR DOSZPOT: Okay, thanks; I get the picture.

Mr Gentleman: Mr Manikis mentioned the youth grants program. I might give you a little bit more detail on that, if you like. The grants program provides grants for people from 12 to 25 years, or organisations that they are involved with. It is up to \$1,500 in one-off funding per applicant, to a total of \$25,000. In that reporting year, 18 projects received funding underneath that Youth InterACT grants round.

MR DOSZPOT: Along the same lines, under “Case management across youth service”, on page 55, how has the cultural planning for young people on justice orders been strengthened?

Dr Collis: The first component of this was to bring single case management across detention and community-based supervision. We very quickly realised that we needed to input cultural knowledge into our case planning process, so we undertook, as part of the youth justice blueprint implementation, a significant degree of consultation with the community about how that cultural planning could occur within the case management of youth justice. We have embedded throughout the case management process in youth justice the understanding or the interpretation of the interventions or the support through a cultural perspective. So it is integrated throughout the youth justice case planning document. That was the advice that we received from the community; they did not want an extra document to deal with in this space.

What we have done is raise to a more heightened level the understanding of a young person’s cultural identity and re-engagement, maintenance or, indeed, discovery. This has happened not infrequently in justice: young people, whilst under supervision, have found cultural identities that they did not realise existed. We can connect those people and respect that cultural identity in the services we offer. We currently have a dedicated Aboriginal caseworker who is working with all our young people in the case management field and getting some really great outcomes in terms of being able to make those case plans very relevant to each of the young people.

MR DOSZPOT: I understand there are 198 young people supported. Can you give us a breakdown in terms of how many are on community-based orders and how many are in custody?

Dr Collis: Yes, I can. Those are your—

Ms Howson: While Dr Collis is finding his data, can I also emphasise that, with the youth transition support team, what we are experiencing is incredibly positive feedback from the young people that they are involved in working with. The focus on housing, life skills and having someone to ensure that there is quite a tailored response to their needs is paying enormous dividends. That again flows through to that question about early intervention and prevention in relation to youth detention.

MR DOSZPOT: Thank you.

Dr Collis: Mr Doszpot, the last published data—we need to realise that this data has to be cleansed through a number of sources—was for 2012-13. In that snapshot period, 85 per cent of all young people in the justice system were on community-based supervision orders, and 16 per cent were young people in detention.

MR DOSZPOT: Thank you very much.

MS BERRY: I have a quick supplementary on the Youth InterACT grants. Is that what they are called?

Mr Gentleman: Yes.

MS BERRY: Are they somewhere in this report?

Ms Howson: They are in volume 02. Ms Berry, is your question around the nature of the grants?

MS BERRY: Yes. I just wanted to know what they were, if that is identified in a report.

THE CHAIR: Perhaps we can take that on notice. Can you ask your substantive question, and we will get that answer for you.

Mr Gentleman: I have got that. Thank you for the question. The Youth InterACT Scholarships provide financial assistance for individual young people aged 12 to 25 years who wish to attend “an activity of a learning capacity, sporting, conferences, personal or career development”. Up to \$500 in one-off funding is available per applicant; a total of \$25,000 in funding is available in that reportable year. We have had a number of recipients.

MS BERRY: If you prefer, you can just point me to the page number.

Mr Gentleman: Page 335 in volume 02.

THE CHAIR: Your substantive question, Ms Berry?

MS BERRY: Minister, going to page 55, I wondered if you could give us an update on the status of the Narrabundah House Indigenous supported facility that was opened in August last year.

Mr Gentleman: Yes, indeed; thank you very much, Ms Berry. Narrabundah House is providing a really important service for those young people. It is, as you know, a residential facility, reopened after some redevelopment in August 2013. The new model was co-designed with the community; it responded to the significant consultations that were held and that were led by the youth justice blueprint task force.

The redevelopment was closely linked to the government’s commitment under the

blueprint for youth justice to improve services to assist young people—in particular, of course, Aboriginal and Torres Strait Islander young people—to successfully reintegrate into the community. It provides support to Aboriginal and Torres Strait Islander males aged from 15 to 18 years who are at high risk of entering the justice system or who may have left custody and are experiencing challenges with education and training and stable accommodation. It includes providing young people on bail with a temporary place to stay while they are looking at other housing options, so it keeps them separate from the Bimberi youth justice system. I will ask directorate staff to give you some more information.

Dr Collis: It was an outcome of the youth justice blueprint. The Aboriginal and Torres Strait Islander community said very clearly that they would like investment in diversion activity. When we went to design this, we put together a group of stakeholders and community members to look at what works and what we thought would be the best way of targeting the service out of Narrabundah House.

What was clear was that we and the community felt that there was a distinction between older adolescents and younger adolescents and we needed to focus on the 15- to 18-year-old young people. There is a maturity there. Their developmental imperatives were quite different. Their developmental imperatives were usually about autonomous relationships, about employment, stability and autonomy in living conditions. With the younger Aboriginal and Torres Strait Islander people, the imperatives were about engaging back home, engaging into school and those matters.

The other aspect of this was that when we looked at what was working across Australia in this space in terms of diversionary accommodation, crisis accommodation seemed not to be very effective. And the community was saying, “We do not want this to be a crisis managed service.” So our focus was on medium-term involvement with the young people. We set in our head a snapshot of three to six months, which seems to be the period in which similar diversionary accommodation programs have some success. The young people need to know we will stick with them in that first three to six months. We also tried to prevent the revolving door idea in terms of young people leaving, getting into trouble in that first little while and then re-entering Bimberi Youth Justice Centre—or going there in the first place.

Let me go to some of the other things. I mentioned before that we have very few sentenced young people in Bimberi. If we then look at what is about 25 to 30 per cent of young people who are Aboriginal, that is an even smaller cohort over the course of the year. We always knew that we would be picking up young people who were not actually, but who were getting very close to being, sentenced or remanded. We have had a breakdown probably of a small number of young people who have not been to Bimberi but have been diverted from being in Bimberi.

Since the new model has operated, and there is a governance arrangement around that which has on it representation from Aboriginal and Torres Strait Islander funded bodies in the community, there have been 13 young people in Narrabundah House. There are three beds. That is the other thing: it is a very personalised service. There is a fourth bed, which is an emergency bed; it is for the After Hours Bail Support Service. Because we have a 24-hour, seven day a week staffing arrangement, we are able to give emergency accommodation for a night whilst people sort out their

circumstances with police and family, going back into the community after that. So there is a small component of this around the overnight bed for the After Hours Bail Support Service.

Mr Gentleman: Ms Berry, it is probably important to note, too, that the program provides intensive case management for those young people, to support them with a focus on community participation and integration. It is expected that all of those people will be employed, undertaking training or attending school. We want them to be part of the community.

MRS JONES: How many referrals have been received to Narrabundah House over the reporting period?

Dr Collis: Since the opening of Narrabundah House there have been a total of 22 referrals.

MRS JONES: When was it opened exactly?

Dr Collis: August 2013.

MRS JONES: Where are the referrals coming from?

Dr Collis: Referrals typically come from, obviously, the case management staff and the young people who are transitioning from Bimberi that would be part of the transition plan that would be encompassed there. There have been instances of referrals from our care and protection staff, where, for example, there has been an Aboriginal young person who has become homeless, is at risk of harm and it has come to our attention through the police that they are skating on the edge of some degree of criminal behaviour or making associations which are unhelpful. We have, in fact, taken referrals through that process. Each referral goes through the committee which has Aboriginal representation on it, from an Aboriginal and Torres Strait Islander service provider, to provide us with advice about the cultural appropriateness of the services and the way we approach it.

It would also be worth noting, in terms of the staff at Bimberi, that we are growing significantly our Aboriginal and Torres Strait Islander staff into Bimberi. The manager of this service is an Aboriginal and Torres Strait Islander man with a lot of local experience in this space.

MRS JONES: What is the typical length of stay? Is it quite short term or a bit longer?

Dr Collis: The stay varies. As I said, the model was set up to expect three to six months. From anecdotal experience it appears that some young people are able to leave earlier than others. We have had young people who have stayed longer than that. We always expected that that would be the case. In terms of the after-hours support bed, I must say that is—

MRS JONES: Very short term.

Dr Collis: That is short term. That is until the next court date until we can stabilise

something.

MRS JONES: Finally, on the male-female representation—

Mr Gentleman: These are only males.

Dr Collis: This is a male facility.

MRS JONES: Am I able to go on to my substantive?

THE CHAIR: Yes.

MRS JONES: Thank you. With regard to page 54 of volume 1, the blueprint for youth justice, there are four initiatives mentioned there under the second paragraph that are yet to be commenced from the plan. What are they, what is the delay and when will they commence?

Mr Gentleman: Thanks very much, Mrs Jones, for the question. The blueprint, of course, is a very important direction document for justice in the ACT. We have a three-year action plan with 45 actions in that plan; 14 of those actions are completed and 28 are underway. There are some key initiatives in there too, of course, to establish the youth justice support and intervention framework and strengthen the cultural planning activities that you have just heard about with Aboriginal and Torres Strait Islander young people. I will just go to directorate officials for those particular statistics.

Dr Collis: Thank you for the question. The minister will be making public the second annual report on that very soon. I have access to a second annual report around the blueprint. I would need to take on notice what the fourth not started objective is. As of the second annual report there were three that had not commenced. These have not been delayed. It is a 10-year plan and the objective is to space these actions over a period of 10 years. They have not been delayed in terms of where they sit in relation to the first three years of the action plan.

The three that have not commenced include a whole-of-government strategy for five to 12-year-old young people with behavioural challenges. The original blueprint suggested that we needed to strengthen our system across government and across the community about the support around that middle childhood area. The second program was the establishment of therapeutic programs in the community. We have an objective to build our capacity in the community to develop therapeutic programs for adolescents. That is still a significant and on-the-agenda issue. The discussion paper on the out-of-home care strategy and our actions in that area already would be attesting to the fact that that is still firmly on the agenda for us.

The third objective was to strengthen our service offering for culturally and linguistically diverse young people in the youth justice system. We are hoping to work with the community around that. Currently we are getting data in terms of our youth justice cohort. We are very different from other cohorts, or jurisdictions, across Australia in terms of our representation of culturally and linguistically diverse. We have a very small group of young people from those backgrounds.

They are there, and we need to get our services better established around that. We have established partnerships through the children, youth and family support program, through Companion House, for example, and through a range of other supportive mechanisms there. But we want to move in that space to make our staff and our own capabilities better in that space.

MRS JONES: So that was the three. On the other one you will come back to us?

Dr Collis: I will come back to whatever—

Ms Howson: We can say it has been now achieved.

Dr Collis: It has been—

MRS JONES: Okay. It was just why it is not on there.

Ms Howson: I am just not sure which it is.

MRS JONES: It would be good to know what that is. Just briefly, in relation to the culturally and linguistically diverse group, in that early phase of planning for that outreach is there provision to include in our systems the early identification of people feeling dislocated because of the current wars that are going on in the Middle East?

Dr Collis: It is something we have been turning our mind to in terms of projecting future demographic changes.

MRS JONES: Current young people who are beginning to feel dislocated from the Australian mainstream or have never really entered the Australian mainstream?

Dr Collis: Yes. I might turn that to Nic, who has been doing some—

Mr Manikis: Thank you. We do a fair bit of work with the communities out there. The one Canberra symposium we had the other day was working out some ideas around how we continue our social cohesion and what have you. Within that there is a subtext around it being not just up to us but the community as well. We work with the community to identify areas where people are dislocated and are doing it tough out there.

MRS JONES: My question was just about that cohort that have been identified as potentially getting involved in something that might lead them to Bimberi.

Mr Manikis: Certainly.

MRS JONES: And how we are picking them up.

Ms Howson: This is a particular responsibility for the Minister for Multicultural Affairs, Minister Burch. However, I think it would be reasonable to say that the focus is on youth engagement. A lot of the discussion from the one Canberra symposium was around youth engagement. A reference group is being established as a result of

that symposium.

MRS JONES: Yes, I am aware of that. I am interested in drilling it down just for one second. If there are people that members of their own communities can identify, are we considering how we will support them if they are vulnerable to going down a track which might lead them to Bimberi? That is what I am asking for. In the specific area of youth justice, we know that in Melbourne and Sydney it is a problem. At the moment it seems to be not a problem in the ACT. But I wonder if there are some very specific discussions going on around this.

Mr Gentleman: I think it is our whole focus on early engagement with young people and families to identify it. It is a system-wide approach. It is not a particular one-size-fits-all approach.

Ms Howson: Given the fact that Companion House and the multicultural youth service are incorporated in the child, youth and family services program, it is certainly the intention that, if a family or an individual were to approach that service because they have concerns, then we have opportunity to refer to appropriate services to support those families.

MRS JONES: Just for our information, if people are approaching us and they have that kind of information, who should they go to?

Ms Howson: I would recommend that in the first instance they call the human service gateway, the children, youth and family services program, and then they will be offered the appropriate referrals from that point. Alternatively they could go directly to the multicultural youth services program at Companion House.

MRS JONES: Thank you.

THE CHAIR: Mr Wall, do you have a quick question before we finish at four?

MR WALL: I will try and keep it quick, Madam Chair. It will depend on the answer. Minister, in 2011-12 the then minister introduced re-engaging youth network boards in regions across the territory. Are they still operational?

Mr Gentleman: I do not recall from my brief.

Ms Howson: Yes.

Mr Gentleman: They are? Okay.

Dr Collis: Yes, the re-engaging youth network boards are still functioning. We have a membership on the steering committee around that.

MR WALL: Perhaps in the interests of time you could take on notice what involvement and support the directorate provides to each of those boards, and also the membership of the four boards; if you are able to provide those, just in the interests of time, to close up?

Dr Collis: This is not in our portfolio area. The Education and Training Directorate are responsible for this area. I can tell you what contribution this directorate makes to each of those boards, but as to the membership I would need to check with—

MR WALL: I will refer the question to the Education and Training Directorate.

THE CHAIR: Thank you.

Dr Collis: Might I correct something I said, or add to it?

THE CHAIR: Yes, Dr Collis.

Dr Collis: I said that I did not know what the achieved training was. What had not been achieved at the end of last year that has been achieved now—in addition to those three things I mentioned—includes the provision of staff training and professional development in trauma and its impact on children and young people, including intergenerational trauma. This is an objective that was in fact achieved with the implementation of the trauma recovery centre at Melaleuca Place and the professional development that happened around that.

THE CHAIR: Thank you very much.

MRS JONES: That was the fourth thing?

Dr Collis: That was the fourth thing.

THE CHAIR: Thank you very much, members. Answers to questions on notice can be lodged with the committee within 10 business days of receiving the question, with day one being the first business day after the transcript is received. Those taken on notice at today's hearing are to be provided, if you are able to do so, minister, within five business days of the hearing, with day one being the first business day after questions. Members are reminded to lodge any further questions they have within four business days of receiving the uncorrected proof transcript from the hearing. Minister, you will be provided with a copy of the transcript and you can get back to us if there is anything you believe has been incorrectly recorded and you need to correct the record. Thank you, minister; thank you, Ms Howson; and thank you, officials.

The committee adjourned at 4 pm.