**Uniting Kildonan**

***Family Violence Flexible Support Package in Hume Moreland catchment***

**Part B: Impacts & Outcomes**

(To be completed when package is finalised - generally within 3 months after Family Violence Flexible Support Package funds were allocated.)

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| Worker Details: |  | Agency Details: |  |
| Client Details *(on whose behalf the application has been made)*: |  | Application Approval Code: |  |
| Total Package Approved (*funds*): |  | Date Approved: |  |
| Date Package Completed *(funds expended)*: |  | Total Amount Expended: |  |

**Expenditure of Package Funds:**

1. With reference to your initial Application Form (Part A) and section 8 in particular, can you please complete the following table:

| Goals  *(As outlined in Section 6 of the Application Form. Goals are aligned with items detailed in client’s case management plan or support plan)* | Client’s Presenting Needs & Risks  *(Refer Part A, Section 4)* | Actual Assistance Purchased  *(What money was used for?*  *Refer Part A Section 8)* | How much money was allocated for each activity?  (*Refer Part A Section 8*) | How has this money positively contributed to your client and her children’s presenting circumstances?  *(Actual positive impacts)* |
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| Freedom from abuse and violence - *Provision of technological safety support, CCTV, mobile phone, personal/property alarm, security doors, sensor lights, fence, windows, change locks etc* |  |  |  |  |
| Suitable and stable housing - *Provision of safe, suitable and stable housing, repairs to property damage, travel costs to move to a safe location, relocation & moving costs, whitegoods, furniture, household items, utility bills, mortgage costs, rent payment, bond, payment for short-term or emergency accommodation etc* |  |  |  |  |
| Physical and mental health and wellbeing – adult or dependent children - *Good physical and mental health, medical or pharmaceutical costs not covered by Medicare or PBS, disability aids & equipment, material needs & aids, other health or wellbeing services* |  |  |  |  |
| Specialist Counselling - adult or dependent children - *Provision of specialist family violence counselling or AOD counselling* |  |  |  |  |
| Participation in learning and education – adult or dependent children - *Course fees – TAFE, Uni, vocational training; books, equipment & material aids; support for travel etc; Childcare costs; school/education costs (eg fees, excursions, etc); books, equipment, uniforms & material aids; support for travel etc* |  |  |  |  |
| Participation in workforce - *Clothing, uniform, tools & equipment; training costs; support for travel etc* |  |  |  |  |
| Financial security & independence - *Material needs; payment of debts; financial counselling; financial services; other professional services; Legal services; court costs; etc* |  |  |  |  |
| Support for social engagement, identification and connection with culture & identity – adult or dependent children - C*ar repairs, driving lessons, travel card, participation in social, sporting, or cultural activities; culturally specific professional services, or activities etc* |  |  |  |  |
| Other |  |  |  |  |

1. Have the funds been totally expended ( with reference to Part A, Section 9 in the Application Form)  Yes  No

* **If Yes**, are there additional positive impacts anticipated from the expenditure of the Family Violence Flexible Support Package funds?

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* **If No**, please specify the amount unspent and the reasons for this (with reference to Part A, Section 9 in the Application Form).

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1. Other Comments

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Once completed, please return to Kristen Dobbie/Valerie Ayres-Wearne on [hmfvfsp@kildonan.org.au](mailto:hmfvfsp@kildonan.org.au)

The information provided will be used in a de-identified format to complete Reporting and Acquittal Requirements to DHHS for the Family Violence Flexible Support Packages.