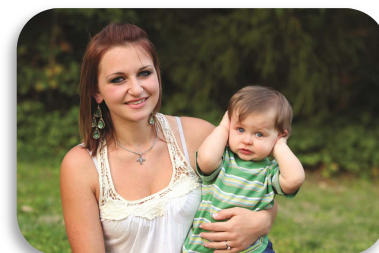


# Moving Towards Greater Collaboration:

A cross sector forum to improve  
the safety of women and children  
who have experienced family violence



Presented by:



**WOMEN'S HEALTH  
IN THE NORTH**



# Overview

## Setting the scene

Sarah Johnson, Regional Integration Coordinator

## Activity

Identifying barriers to cross sector collaboration

## Presentations

Learnings from pre-forum survey, regional partnerships and research (Sarah)

Core Principles for Collaboration: Information sharing in the context of family violence (Catherine Plunkett, Statewide RAMP Development Officer, DVVic)

[BREAK]

## Panel

Regional initiatives: Enablers and barriers to cross sector collaboration

## Activity

How you can improve cross sector collaboration



# What to expect

To **strengthen** connections across sectors and organisations.

To **explore** the barriers and opportunities to cross sector collaboration.

To better **understand** what information can be shared when family violence is present.

To **unpack** findings from research and regional examples of good cross sector collaborative practice when responding to family violence.



# About NIFVS

Northern Integrated Family Violence Services (NIFVS) is the partnership that leads the integration of family violence and related services in Melbourne's northern metropolitan region (NMR).

## Our mission

To maintain and continually develop the integrated family violence service system in the north, in order to improve the safety of women and children.

## NIFVS coordination team

The Regional Integration Coordinator (RIC) and three project workers and trainers resource, coordinate and support integration.

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# Regional Integration Committee

The partnership is led by the Regional Integration Committee.

This **cross sector governance structure** identifies and prioritises local and regional family violence issues within the state-wide policy framework.

Members of the committee represent service types or sectors, including representatives from: **family violence specialist services**, **Victoria Police**, **courts** and **relevant government agencies**, as well as **CALD**, **disability**, **family**, **housing and homelessness**, **Aboriginal**, **legal**, **mental health**, **alcohol and other drug**, **women's health** and **sexual assault** services.



# What is integration?

Family violence integration in the NMR involves:

- a **shared understanding** of family violence and a shared vision for change
- all parties **understanding** and striving to improve the system
- strong **structures and relationships** across the system
- **information-sharing and collaboration** across a broad range of organisations
- opportunities to discuss and **resolve issues**
- ensuring a **'continuum of care'** through smooth referral pathways and consistent service responses

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# Why are we here?

Family violence is a 'wicked problem'; a problem that is difficult to solve. It requires a collaborative and integrated response.

NIFVS Regional Plan 2013-2017

Action area - Improving cross sector partnerships

NIFVS Cross Sector Working Group – Aims to strengthen cross sector partnerships to improve the safety of women and children who have experienced family violence.

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# Small group activity

Introduce yourself and share one barrier to cross sector collaboration that you have experienced or observed in your work.

(15 minutes)





# Barriers to collaboration: pre-forum survey

Lack of resources/ high demand

Lack of shared understanding of family violence

Competing priorities/different ways of prioritising clients

Concerns about confidentiality/privacy

Lack of understanding of complex system



# Enablers to collaboration: pre-forum survey

Effective communication/consultation

Clear referral pathways

Case conferencing/multi-agency work

Opportunities for joint training/forums

Clear roles/responsibilities

Formal partnership arrangements

Good will



# A strong history

Family violence services in the NMR have a proud history of innovative cross sector and interagency work.

Examples include:

- Family Violence Networks (since 1990)
- Northern Area Mental Health Service Partnership Project (2005-2012)
- Think Child Partnership Agreement (2010)

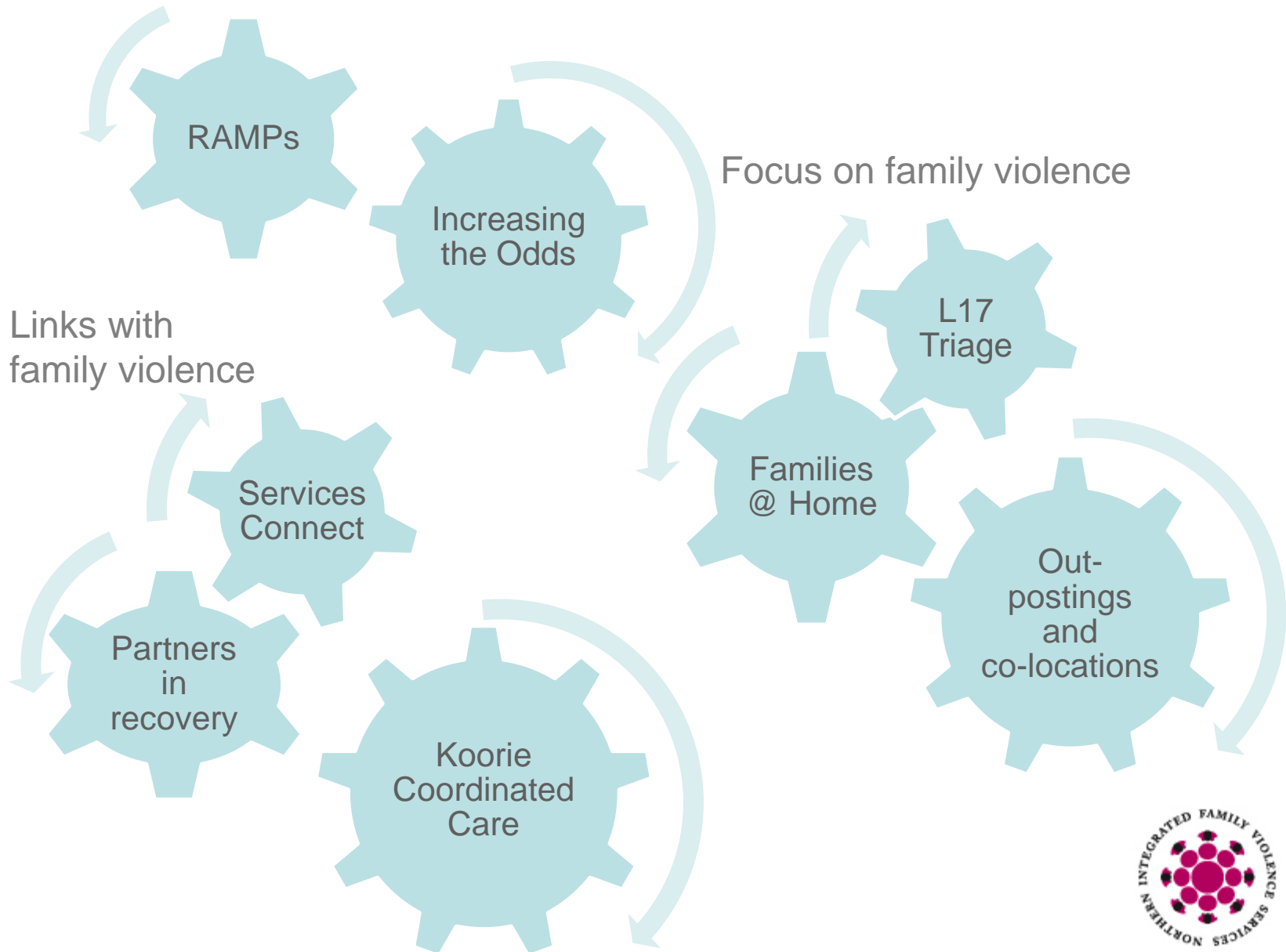
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# Current collaboration

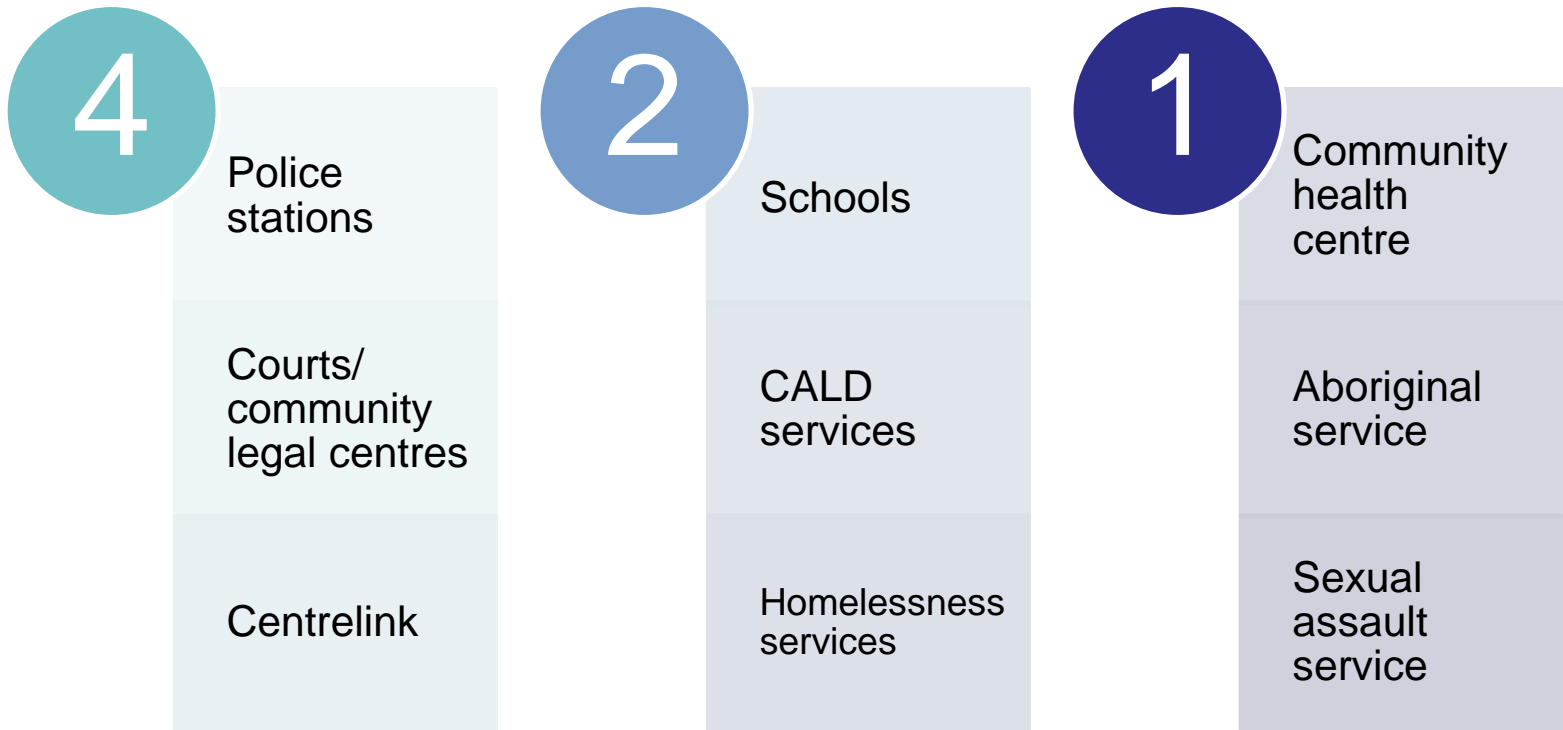
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# Current collaboration

Family violence services are out-posted or co-located with a number of other services, including:





# Core components of regional collaboration

Exploration of regional partnerships has unearthed the following 'enablers' to effective cross sector collaboration:

- Information sharing
- Clear referral pathways and intake
- Risk assessment (CRAF)
- Systems and protocols in place to provide continuity of care
- Access to secondary consultation
- Joint casework/ care teams



# The PATRICIA Project: PATHways and Research In Collaborative Inter-Agency working

A review conducted by the Parenting Research Centre and The University of Melbourne (UoM); funded by Australia's National Research Organisation for Women's Safety (ANROWS) as part of the PATRICIA Project, led by UoM with partners from five universities, three government departments and eight community sector organisations including Berry Street.

State of Knowledge Paper published by  
ANROWS November 2015





# The PATRICIA Project

Recent scoping review mapped evaluations of models of interagency working exploring:

*“What processes or practices do child protection services and specialist domestic violence services or family law engage in so that they can work better together to improve service responses for women and children living with and separating from family violence?”*

A number of ‘ways of working’ were identified that can assist us in our practice to strengthen cross sector work.

Macvean, M. et al. (2015) *The PATRICIA Project : PATHways and Research In Collaborative Inter-Agency working: State of knowledge paper*, Sydney, ANROWS.







# Ways of working with Child Protection

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Development of formal agreements for working together and sharing information

Use of operations manuals

Shared theoretical frameworks, goals and vision

Co-location

Shared data management and security systems

Formation of committees and meetings

Appointment of agency representatives and coordinators or liaisons

Allocation of specific Child Protection funding

Role clarification

Shared intake and referral procedures

Common risk assessments

Agreements to include Child Protections in various aspects of services

Training on interagency working

Cross-agency leadership

Humphreys C. (February 2016) The PATRICIA Project: PATHways and Research In Collaborative Inter-Agency working. Paper presented at ANROWS Conference, Melbourne.





# A framework to consider

Based on learnings from pre-forum survey responses, regional partnerships and The PATRICIA Project.

A) In your everyday practice, move towards:

- shared goals and vision\*
- understanding and awareness of others' theoretical frameworks including Common Risk Assessment Framework \*\*
- clearly defined roles and responsibilities \*\* (S)
- accessing and offering secondary consultation (S)
- accessing to opportunities for joint training/forums (S)
- understanding intake and referral pathways into sectors (S)
- the good will to collaborate (S)

\* Adopted from The PATRICIA Project

\*\* Modified from The PATRICIA Project

(S) Identified through pre-forum survey



# A framework to consider

## B) Mechanisms to formalise collaborative practice:

- Information sharing agreements \*
- Data management systems \*
- Common Risk Assessment Framework (CRAF)
- Governance structures \*\*
- Coordinator responsible for liaison \*\*
- Formal agreement (MOUs) \*\* (S)
- Co-location and joint casework/ care teams (S)

*\* Adopted from The PATRICIA Project*

*\*\* Modified from The PATRICIA Project*

*(S) Identified through pre-forum survey*



# Core Principles for Collaboration:

## Information sharing in the context of family violence

Catherine Plunkett

Statewide RAMP Development Officer

Domestic Violence Victoria (DVVic)

[catherineplunkett@dvvic.org.au](mailto:catherineplunkett@dvvic.org.au)

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# What is a RAMP?

- A formally convened meeting of key agencies and organisations that contribute to the safety of women and children experiencing high risk family violence.
- RAMPs are convened regularly to:
  - ✓ Comprehensively assess the safety of women and children at serious and imminent risk of harm from perpetrators of family violence
  - ✓ Develop coordinated action plans across participating agencies

# Who are RAMP panel members?

Core members of RAMPs are nominated representatives of the following organisations:

- \* Specialist women's and children's family violence services
- \* Victoria Police
- \* DHHS Child Protection
- \* DHHS Housing
- \* Men's Behaviour Change Programs
- \* Child First
- \* Clinical mental health services
- \* Drug and alcohol services
- \* Community Corrections

# The role of RAMP panel members

- \* The RAMP Co-ordinator receives a referral about a case that presents a serious and imminent risk to a woman and/or women and children.
- \* RAMP members are notified and asked to gather information about the case from their organisation that is relevant to assessing the future risk of family violence.
- \* Each RAMP panel member presents any information on behalf of their organisation and the RAMP panel considers all of this information to determine the type and level of risk posed by the perpetrator (i.e multi-agency risk assessment).
- \* The panel develops an action plan to mitigate the level of risk that has been identified.



# Assessing risk of further harm to children

- \* Exposure to family violence has long term psychological, emotional and behavioural consequences for children and young people.
- \* This harm compounds cumulatively with ongoing exposure to the violence and its effects.
- \* Each child in a case brought to RAMP is assessed separately in a multi-agency risk assessment and an action plan is developed for each child.





# Serious and imminent risk

- \* RAMPs work with cases where women, and/or women and children, are experiencing serious and imminent risk to their life, health, safety or welfare due to family violence.

(This is the third level of risk described in CRAF: 'Requires Immediate Action')

# RAMP action planning

For each case considered by RAMP, panel members will conduct a multi-agency risk assessment and then develop an action plan to alleviate the risk.

Action plans address four key questions:

- \* What actions are required to keep the woman safe?
- \* What actions are required to keep each child safe?
- \* What actions are required to prevent or limit the perpetrator threat?
- \* What actions are required to increase perpetrator accountability?

# Referrals to RAMP

- \* The two major referral pathways to RAMP are via Victoria Police and women's specialist family violence services.
- \* Services that work with individuals affected by family violence but for whom responses to family violence is not their core business can refer cases to their local specialist family violence service for a more comprehensive risk assessment and other assistance.
- \* Your local RAMP Co-ordinator can provide advice and assistance regarding referrals to RAMP and responding to cases of family violence where there is a high risk of serious harm.

# References

For information about family violence, RAMPs, and other services and resources:

[www.thelookout.org.au](http://www.thelookout.org.au)

Or contact the RAMP Development Officer, Catherine Plunkett <[ramp@dvvic.org.au](mailto:ramp@dvvic.org.au)>



# Families@Home

**Panellist:** Kayti Franklin, Kildonan UnitingCare  
[kfranklin@kildonan.org.au](mailto:kfranklin@kildonan.org.au)

[Families@Home](#) provides early intervention and a holistic response to families who are at risk of homelessness due to family violence. [Read more.](#)

## What does the initiative do?

Families@Home coordinates access to a range of services, including:

- Risk assessment and safety planning
- Family violence case management
- Help to obtain or maintain suitable and safe housing
- Financial counselling, assistance and support and
- Support for children.

## Which organisations are involved?

Kildonan UnitingCare, Salvation Army Crossroads and Launch Housing.

## Who do they serve?

Women, children and men in the Whittlesea local government area.





# L17 triage pilot

**Panellist:** Lyn Turner, Berry Street Northern Family and Domestic Violence Service [lturner@berrystreet.org.au](mailto:lturner@berrystreet.org.au)

The L17 triage pilot is an initiative which aims to strengthen the response to police reports of family violence that include children.

## What does the initiative do?

Berry Street, Child Protection, ChildFIRST and Victorian Aboriginal Child Care Association (VACCA) jointly “triage” police reports (L17s) of violence where children were noted as present.

This process enables:

- an enhanced assessment of risk, based on shared information between all agencies and
- the allocation of each case to the relevant agency.



# Partners In Recovery

**Panellist:** Kieran Halloran, Eastern Melbourne PHN  
[kieran.halloran@emphn.org.au](mailto:kieran.halloran@emphn.org.au)

Partners In Recovery (PIR) promotes better links between clinical and community mental health and other supports.

## What does the initiative do?

PIR provides a coordination service that assists people with severe and persistent mental illness and complex needs and their carers to navigate the mental health and community sectors.

## What organisations are involved?

Mind Australia, Neami National and Victorian Aboriginal Health Service are funded to employ PIR Support Facilitators in Northern Melbourne. Local Area Mental Health Services, Community Health Services, WISHIN and several other community organisations sit on the PIR consortium.

## Who do they serve?

To access Northern Melbourne PIR, people are required to live or access the majority of their services in Banyule, Darebin, Hume (not including Sunbury), Nillumbik or Whittlesea, be aged between 25 and 65 and have severe and persistent mental illness and complex service needs.





# Koorie Coordinated Care

**Panellist:** Joanne Atkinson, Victorian Aboriginal Health Service  
[joanne.atkinson@vahs.org.au](mailto:joanne.atkinson@vahs.org.au)

The Koorie Coordinated Care model aims to improve the health and wellbeing of vulnerable Aboriginal people and families.

## What does the initiative do?

The model involves:

- centralised intake and assessment
- strengthening referral pathways and processes, including through use of shared technology S2S, and follow up and case conferencing

## Which organisations are involved?

- Victorian Aboriginal Health Service (VAHS)
- Victorian Aboriginal Legal Service (VALS)
- Ngwala Willumbong
- Aborigines Advancement League (AAL)
- Aboriginal Community Elders Services (ACES)
- Victorian Aboriginal Community Services Association Ltd (VACSAL)
- Victorian Aboriginal Child Care Agency (VACCA)
- Department of Health and Human Services







# Increasing the Odds for Safety and Respect

**Panellist:** Monique Keel, WHIN [moniquek@whin.org.au](mailto:moniquek@whin.org.au)

Increasing the Odds for Safety and Respect is a prevention project focusing on the link between family violence and gambling.

## What does the initiative do?

The aim of the project is to increase the safety of women experiencing violence from male partners by increasing knowledge about the link between family violence and gambling. The project produces resources to support workers and strengthens the link between the problem gambling and family violence sectors.

## Which organisations are involved?

- Women's Health In the North
- Women's Health East
- Inner East Primary Care Partnership
- North East Primary Care Partnership
- Victorian Responsible Gambling Foundation.



# Panel

Kayti Franklin:

**Families@Home**

(family violence, homelessness prevention)

Lyn Turner:

**L17 triage pilot**

(family violence, responding to children)

Kieran Halloran:

**Partners In Recovery**

(mental health)

Joanne Atkinson:

**Koorie Coordinated Care**

(Aboriginal community)

Monique Keel:

**Increasing the Odds for Safety and Respect**

(problem gambling, family violence)

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# Activity (in pairs)

What might you (in your role and organisational context) do to improve cross sector collaboration to ensure the safety of women and children?

(15 minutes)

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# Next steps

Visit our website at [www.nifvs.org.au](http://www.nifvs.org.au) to:

- Access today's presentations and a forum summary
- Order Women's and Men's Family Violence Help Cards
- RSVP to Identifying Family Violence Training
- RSVP to Regional Family Violence Sector Induction
- Join a local family violence network

Northern Integrated Family Violence Services	
As a result of today's session, I will:	
<hr/>	
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For future referrals/secondary consultation/partnerships I will stay in contact with:	
<b>Name</b>	<b>Organisation</b>
<b>Email</b>	<b>Role</b>
<b>Phone</b>	

Complete your take away postcard!



# Contact Details

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Women's Health In the North acknowledges the support of the Victorian Government.

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