



Mission Australia

Monday, 22 November 2010

Shane Donnelly
The Secretary
Select Committee on Child Protection
Parliament of Tasmania
Parliament House
HOBART TAS 7000

Submission from Mission Australia as one of the Gateway Service and Integrated Family Support Service (IFSS) providers.

Mission Australia as one of the two providers of Gateway, Integrated Family Support Service (IFSS) and Local Area Coordinator (LAC) Services would like to provide the following information in response to (a) and (b) in the terms of reference;

- That the Child and Family Gateway commenced in August 2009 as a response to identified need for reform to the system that was previously in place regarding the safety and wellbeing of children and young people.
- That Mission Australia operates these services in the North West and South East Regions of Tasmania.
- That since August 2009 the CEO of Child protection Mark Byrne has made positive comment regarding the 20% reduction in the number of notifications since Gateway's inception.
- Since August 2009 Mission Australia's Gateway service has received in excess of 3000 calls, referred 38 individuals / families directly to Child Protection where a notification was received or required and has intervened as a voluntary service on 569 occasions.
- The average length of time that Gateway spends gathering information and assessing eligibility and suitability for IFSS is 10 days.
- The average length of an IFSS intervention is 127 days with the shortest being 8 days.

COMPASSION INTEGRITY RESPECT PERSEVERANCE CELEBRATION

Our Vision is to see a fairer Australia by enabling people in need to find pathways to a better life

- Due to the demand on services early in the delivery of the service a triage system was put into place in the South East to determine the relevance of a Gateway referral by Child Protection. This was also due to what we believed to be the inconsistency of accurate and up to date information, history and current status.
- Both services had co-located child protection workers on site full time and whilst this has made a significant difference to the practice of Gateway making child protection checks on each referral today, the implementation of this new model of practice for child protection in working collaboratively and collegially with a non government agency has taken some time to bed down. It is important to also acknowledge the hard work and commitment particularly of the previous incumbent in the North West role who has recently moved on. Her continuing service over the past 17 months as co-located worker enabled significant change to occur with shared practices whilst she was in the role. This position is a contract position which has the potential to mean constant change, something that could have a negative impact on the continuing development of the services.
- It is important to recognise that this new service is only 17 months old, that there have been significant challenges in informing the community about this service as several misconceptions have existed. Some of these are the lack of understanding that Gateway services are a point of notification for child safety concerns under legislation, but that these notifications are then directed to the co located child protection worker for assessment, that Gateway is an intake point for referrals and information provision and is not funded to provide case management.
- Gateway's role as intake is to gather relevant information and then contact the referred individual if they did not self refer (which is the majority of referrals), if they chose to voluntarily engage then the issues of concern are discussed. Some interventions at this stage are linking into existing services provided in the community such as play groups, support groups for parents, contact details for school social workers and guidance officers, contact details for bulk billing GP's and other 'universal referrals'
- From the moment a call is received at Gateway Services an initial screening tool is used followed by the common assessment framework (which was developed by DHHS). Where an Integrated Family Support Service referral is determined relevant the Gateway intake staff use a prioritisation tool to assess risk for the child and priority of referral to the IFSS service. This is essential as demand often outweighs capacity of services. This strategy has been adopted across all Tasmanian Gateway's for consistency of services and was developed by both providers as the Victorian Child First experience of demand outweighing capacity was researched at the commencement of this service.

- If a service cannot be offered immediately then 'active holding' is provided whereby one of a number of Gateway or IFSS workers will maintain regular and ongoing contact to prevent escalation of issues or likewise to ensure short term interventions can be put into place depending on risks.
- Mission Australia as one of two providers has been provided set funding for Gateway services which whilst this does not change capacity to respond to callers, it does not enable flexibility at peak times when increased staffing would assist such as prior to school terms ending and prior to school breaks.
- In the North West Gateway has been funded one less intake worker than the South East as the Reform Implementation Unit as it as known at the time determined there would be less referrals, this is not the case and demand is often much higher.

The above points are important to highlight as they showcase the significant change that has occurred over the past 17 months since Gateway commenced service delivery, and this new service should not be tarnished with what service Child Protection provides. One important point to reiterate is that Gateway is a voluntary service and if individuals, community members of agencies do not call, then Gateway does not know assistance is required.

Kind regards

A handwritten signature in black ink, appearing to read 'Lucy O'Flaherty', written in a cursive style.

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