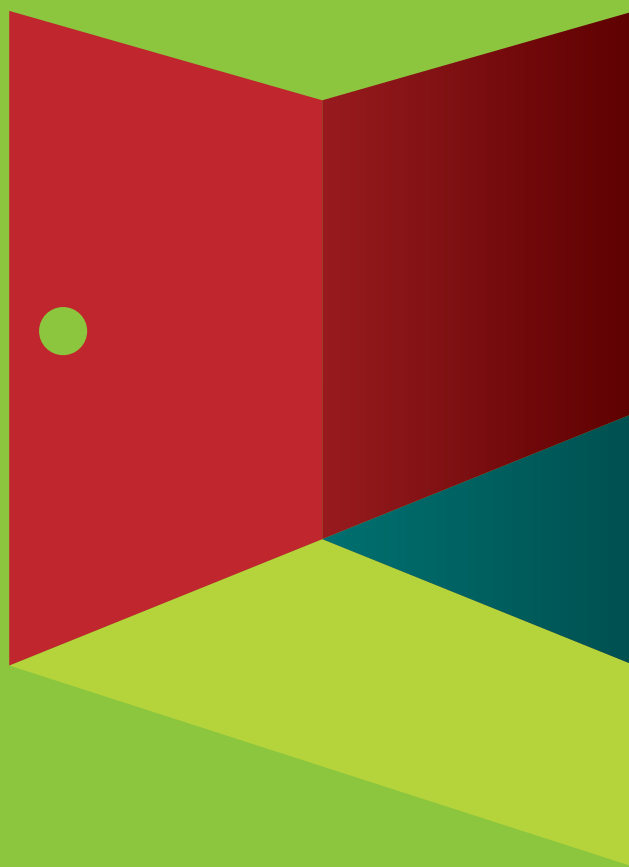


Opening Doors

Better access for homeless people to social housing
and support services in Victoria

Framework



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and support services in Victoria

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July 2008

This framework provides the rationale and directions for the Opening Doors model, in the context of homelessness research, experience from piloting the approach and the particular nature of the Victorian homelessness service sector.

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Minister's foreword

The Brumby Labor government believes in a fair and inclusive Victoria, where people can get the help they need, when they need it. People who are homeless or in housing crisis are among the most disadvantaged people in our society, so quick and simple access to the right housing and support services is critical to get them out of homelessness and back on their feet.

Everyone agrees that more affordable housing is required, and other Government initiatives are tackling this problem for the long term. In the meantime, we can continue to improve the services we have now.

Victoria's homelessness response is already one of the best in Australia, but people who have experienced homelessness and used our services have told us how we can do better. That is why we have invested \$6.75 million over the next four years in Opening Doors. Opening Doors is a place-based approach to better coordination among homelessness services at the local level, so that people in crisis can quickly and simply access homelessness services, and get a service that responds to their needs.

Opening Doors establishes visible access points in each local area backed up by a network of local services that share their support, housing and brokerage resources, and communicate with one another quickly and efficiently. It will maximise the resources of the homelessness service system by reducing duplication. Opening Doors will also strengthen links, and improve access between our homelessness and allied health and welfare services.

This initiative is the result of a partnership with consumers and homelessness services, demonstrating that collaboration between the sector and Government can lead to better services and better outcomes for homeless people.

I am proud of our achievement to date, and would like to thank all the agencies and consumers who have participated in the development of Opening Doors, and acknowledge the dedication, commitment, problem solving abilities and hard work of all those involved.



Richard Wynne MP
Minister for Housing

What is Opening Doors?

When the Housing and Community Building Division within the Department of Human Services consulted with consumers about the homelessness services we provide, they told us that accessing services can be complicated and time consuming. Funded agencies agreed that the service system could be difficult for consumers—and even workers—to navigate.

In response to these concerns, the Housing and Community Building Division developed an area-based service coordination framework called Opening Doors—a practice and systems approach to provide timely and effective access to homelessness and social housing services to people seeking assistance. The framework was developed over 2005–06 in consultation and partnership with the community sector and piloted and reviewed in 2006–07. We incorporated what we learned from this testing phase into this final Opening Doors *Framework* document.

Opening Doors is for use by Housing and Community Building Division-funded homelessness assistance services¹ and social housing services. When the framework is fully implemented in these services, allied services such as health, mental health and drug and alcohol services will be invited to link with local homelessness and social housing networks.

The Opening Doors framework is summarised in three documents:

- this *Framework* document
- the *Service coordination guide* for local area service networks
- a *Practice guide* for workers.

Principles underpinning Opening Doors

- A consumer-focused and strengths-based approach.
- Equity of access to the resources of the homelessness service system.
- Support for skilled workers with training, supervision and efficient tools.
- Collaboration and partnerships between agencies and the Department of Human Services.
- Reasonable care to address the risks faced by each homeless person.
- Maximising the use of available homelessness resources.

Key features of the Opening Doors model

- Homelessness services formed into local area service networks responsible for local application of the Opening Doors framework.
- Visible entry points staffed by initial assessment teams backed up by formally agreed protocols and procedures.
- Consistent, high quality practice that reduces multiple assessments and unsuccessful referrals, freeing up time to work with more people or with people for longer.
- Interim response—a strategy for service continuity to eliminate ‘run-around’.
- Tools to support service coordination and practice.

Each of these key features is discussed in detail in the following pages.

The need to improve our response

In consultations undertaken in 2000 and 2006 by Victoria’s Housing and Community Building Division with users of our homelessness services, people frequently commented on how confusing it can be to navigate the system and find the right service.² If they went to one service, they might only have part of their needs met, or find that they were in the wrong place altogether. Because there are multiple services in many areas, and because service coordination arrangements between agencies have generally been ad hoc and selective, many people found they needed to approach several services to get assistance. Other people seeking assistance were discouraged at the first attempt and did not persist, even if this meant their situation became worse.

A corresponding perception emerged among some service providers that people manipulated the system by ‘shopping around’ or ‘double dipping’. Most service providers felt that they could do a better job if they could offer a more complete response than was possible from the resources of their agency alone—and consumers agreed.

While individual services worked extremely hard for their own consumers, often no sense of shared responsibility existed for people seeking assistance. Homeless people, and individual workers advocating on their behalf, found it hard to get support from the homelessness system as a whole. Different agencies have developed their own practice styles and interagency relationships, and while many of these practices work well at the local level, a clear need exists to improve consistency and coordination at regional and statewide levels.

The evidence from consumers and workers also strongly indicated a need to better manage the problem of low supply of housing and homelessness resources.

Improving our response—good quality initial assessment for homeless people

Good practice initial assessment in homelessness and housing services is characterised by:

- respect and courtesy toward people in housing crisis;
- individualised assessments that respond to the urgency and intensity of need;
- flexibility to adapt to local area circumstances;
- highly skilled initial assessment workers;
- support to effectively perform the complex and the difficult work of initial assessment;
- access to specialised initial assessment for young people, women and their children experiencing family violence, accompanying children and Indigenous people;
- entry points that are visible, well known and easy to access;
- a system wherein all agencies cooperate well with each other to make local resources available.

The importance of first contact

Opening Doors supports the development of easily accessible entry points that coordinate the consumer's access to homelessness and social housing resources in the catchment.

Consumers' comments on the impact of the first moment of contact with a service include:

- No one likes getting a brick wall.
- Receptionists need 'customer service skills'.
- When you first hit a service you don't know what services are available.
- As long as you've got *somewhere*—got to one service—that should be enough—they should direct you to the support you need.

Experienced workers understand how homelessness can affect a person's behaviour and coping ability. People first approaching a service are often stressed and afraid. They may be tired, hungry and lacking in resources such as transport or access to a phone. Getting to another service may be simply beyond their capacity. The first point of call must provide access to all other local services, or to the broader service system via active referrals if the person must be directed elsewhere.

Opening Doors recognises that insufficient housing and support resources exist to respond to demand, and that this shortage means that people presenting to services often do not get the assistance they need. Streamlining access will not remove this shortfall; but it should maximise the resources we have, and deliver the best possible response within those resources.

Engagement as a practice approach

Current homelessness research underlines the importance of 'engagement' for initial assessment.³ Opening Doors uses engagement as the most effective initial assessment approach for the complex situations that cause or surround homelessness and housing crises.

Engagement involves offering a professional relationship based on respect and care to people who may have little reason to trust the service system. It is a necessary first step in working effectively with a homeless person.

For the consumer, engagement means feeling believed and respected, that their individual circumstances are understood, and that the worker is likely to be useful.

For the worker, engagement means knowing enough of the consumer’s circumstances and wishes to advise them confidently of their options and advocate on their behalf.

The engagement approach in Opening Doors is strengths-based: it builds on the strengths of each individual to realise their right to housing.⁴ Engagement should maximise the likelihood of any needs or risks being openly discussed, because people respond better when treated respectfully—engagement cannot be demanded or forced.⁵

Focusing on people’s problems, rather than their strengths, can lead people to think of themselves as victims. Recent research into the impact of long-term homelessness found that the experience of being homeless itself makes a person more vulnerable to future episodes of homelessness.⁶ People sustain such damage to their sense of self that they are more likely to lose their housing when life difficulties next occur. Researchers also conclude that re-engagement with the wider community is extremely important for people who have been homeless. The experience of homelessness commonly breaks that engagement and places a person more at risk of poor health and other negative social experiences.⁷

Engaging with people who display challenging behaviours

Agencies sometimes exclude or ‘ban’ people from services for a range of behaviours that agencies and workers find difficult, challenging, uncooperative or noncompliant. When consumers display these behaviours they are sometimes described as ‘refusing to engage’. ‘Engagement’ in this case is understood as a consumer’s willingness to comply with agency requirements in order to receive a service. A failure to ‘engage’ might result in the agency withdrawing services completely, or only offering services at a very minimal level.

Challenging behaviours are often either a result of homelessness, or an obstacle to securing safe housing. They arise from several factors, including emotional and physical stress, mental health issues, substance use and acquired brain injury. Challenging or noncompliant behaviours can make a person extremely difficult to help. Yet these are the very people at the highest risk of further harm if excluded from assistance. They remain trapped in homelessness, developing more complex support needs and further antisocial behaviours in order to survive.

Working with challenging or noncompliant behaviours is one of the most difficult aspects of homelessness assistance. It requires specialist skills, training, perseverance, excellent supervision, access to secondary consultation support and, as complex needs projects show, highly effective case coordination.⁸ Without underestimating the real difficulties posed by duty of care to other clients, staff and the community, it is essential that services and workers do not systematically exclude people with challenging behaviours. Please refer to ‘Attachment 10: Unacceptable and discriminatory exclusion practices’ in the Service coordination guide, for further information.

Assessment

Workers consistently describe the process of assessment as a ‘conversation’, where building trust is essential to providing quality outcomes. Clear communication, being honest about what resources are available and explaining why certain information is sought are all important for building this trust.

Assessment is a continuous process which occurs at different points in homelessness service delivery with increasing depth and detail, as illustrated in the following diagram.

Assessment points			
Initial assessment	Specialist initial assessment	Intake	Case management assessment
Entry point	Entry point or specialist service	Support and/or accommodation service	Support and/or accommodation service

Initial assessment

This occurs at the entry point. Only information needed for an effective referral should be collected. Good practice initial assessment covers:

- risks and any associated specialist support requirements
- immediate needs for shelter, food and security
- crisis housing and support
- transitional housing and support
- purchased emergency accommodation (motels, rooming houses, caravans, board)
- outreach support (where crisis or transitional housing is not required or cannot be provided)
- brokerage and emergency relief
- assistance required to access private rental
- assistance required to access long-term housing (applications for public housing or long-term community housing).

Specialist initial assessment

This is for particular groups, including young people, people experiencing family violence and Indigenous consumers. Specialist initial assessment can also occur at the entry point when required, either by the initial assessment worker or by a specialist worker called in for that purpose.

Intake

This usually occurs when the consumer first enters a support and/or accommodation service. Intake is a deeper assessment that gathers detailed information about a person's background and circumstances in order to determine an appropriate case plan.

Case management assessment

This occurs continuously throughout the time a worker case manages a client, and involves a very deep and detailed assessment that seeks to determine the circumstances of a person's homelessness to assist in developing strategies to get them out of homelessness. Such an assessment requires time and significant trust on the client's part.

Prioritisation

Prioritising homeless people for services is acknowledged as the most difficult and stressful aspect of homelessness service provision. Where demand outstrips supply, one person receiving a service means that others miss out. Making decisions about assisting one person over another is understood by workers and consumers to be both an ethical dilemma and a practical necessity.

Service providers want a fair, objective and consistent prioritisation approach, while consumers want a responsive system that recognises the urgency of their individual situation. Consumers feel that prioritisation should recognise and respond to the sheer desperation of their situation.

Opening Doors seeks to minimise the negative impact of competitive prioritisation practices for the consumer and the worker by:

- removing the consumer as far as possible from participation in the competitive process
- focusing on an individualised response to each person seeking assistance
- minimising the time a consumer must wait for an outcome.

Please refer to ‘Attachment 9: Guide for prioritisation’ in the *Service coordination guide*, for further information.

Key features of Opening Doors

This section explains the key features of Opening Doors in greater depth. More detailed information can be found in the *Practice guide* and the *Service coordination guide*.

Local area service networks

Led by Department of Human Services regions, local area service networks are responsible for implementing Opening Doors in each local catchment area.

The role of each local area service network is to:

- develop, implement and maintain Opening Doors in their particular geographic catchments
- build on consistency and quality of service delivery practice among member agencies
- coordinate referrals with allied services and services in other areas
- undertake data monitoring and consumer satisfaction review for the purposes of identifying gaps and trends in service provision
- make evidence-based recommendations to the Housing and Community Building Division about responses to service gaps (that is, changes in agency catchments/targets/allocation of funds/utilisation of funding).

Local area service networks operate within the context of each member agency's own governance processes and contractual arrangements with the Department of Human Services. Clarification about which matters can be decided by the local network, which by the member agencies and which are recommendations from the local network to member agencies and to the Department of Human Services, should be among the first items of business for each new local area service network.

Visible entry points

Opening Doors requires each local area service network to identify the services best placed to act as entry points for homeless people to the homelessness and social housing system in their catchment. Initial assessment teams located at the entry points undertake all the initial assessment, prioritisation and resource allocation for the local network. This change is intended to make access easier and clearer for consumers, allied services and networks, and is backed up by free-call telephone access. Streamlining initial assessment should also free up extra capacity in both entry points and support services to work with more people, or work with people longer.

The location of the entry point should be determined based on geographic and physical accessibility, established profile and worker capacity. In some rural catchments the number of entry points will remain the same, because fewer entry points in this geography make access more difficult. Coordination of entry points is important in all instances. So, for example, a rural network may decide to retain entry points in each town, but make agreements about how they operate together to share the resources of the whole catchment.

Visible entry points are also important in improving access for people from other areas, people leaving institutions or health settings, people engaged with multi-area and statewide services and people engaged with allied services.

Consistent, high quality practice

Opening Doors recognises initial assessment as a distinct activity that requires particular skills and support. The environment is often high pressure, because of the numbers of people who are in crisis, because few have an established relationship with the agency or worker and because resources fall short of demand. However, consistent, high quality initial assessment in a coordinated network can help eliminate multiple initial assessments and inappropriate or unsuccessful referrals.

Risk and safety planning in initial assessment

All people who experience homelessness experience harm, and are also at risk of further harm. Homeless people are at a much higher risk than the general population of experiencing violence, criminal involvement, exploitation, mental distress, humiliation, shame and deterioration of their physical and emotional health. Risk assessment is a critical aspect of initial assessment in homelessness services. It is vital to understand the risks faced, or caused, by a person to provide an appropriate response that is the best match with available resources.

Opening Doors initial assessment includes a consideration of each person's 'vulnerability'. A person's level of vulnerability depends on their individual capacity to cope with risks posed to their wellbeing. For example, a young person, or a person with mental health problems, may be highly vulnerable to exploitation by other residents in a congregate setting.

Opening Doors emphasises the importance of safety planning, which should be a collaborative exercise with each consumer. Opening Doors also recognises the constraints of available emergency housing options and the high-volume context of much initial assessment. Safety planning is a way of managing risks and reducing the likelihood of harm; it does not imply that risks can be eliminated.

When resources are limited, it may not be possible to provide the consumer with the best response. Workers and consumers must often compromise with the available options. When the only option does not fully meet the consumer's needs, or carries some risk for the consumer, it is essential that contact with the consumer continues, in order to ensure the best possible outcome under the circumstances. This continued contact is called an 'interim response' in Opening Doors.

Interim response—a strategy for service continuity

Interim response is a strategy to provide service continuity to people seeking assistance when there are no resources, or only inappropriate resources, available. The local area service network should share responsibility for consumers needing this type of assistance.

Interim response can be described as short-term work with consumers who need more than one contact, but who are unable to access immediate support or housing responses appropriate to their needs. Interim response helps manage agencies' duty of care to their consumers by assisting people to manage risks.

Variations will occur in duration, intensity and frequency of contact. Some people will be all right with a regular telephone call, some need their public housing application progressed, and others may have a serious crisis while waiting for housing and case-managed support.

Interim response work includes:

- staying in contact with people temporarily housed in purchased emergency accommodation (for example, caravan parks, motels and rooming houses)
- assistance with new or existing public housing applications
- assistance to store belongings
- acting as a contact point for messages and correspondence
- financial assistance through material aid or negotiating with Centrelink and debtors
- referral as required to services such as legal, health, counselling or family support
- listing people for case-managed support and transitional housing as they become available.

A significant amount of this type of work already occurs in the homelessness service system. Other names for it include ‘holding’ and ‘short-term intervention’, and during the pilot phase of this project it was referred to as ‘follow-up’.

Transparent, agreed prioritisation practice

A consistent and open approach to allocation of resources at the local level should assist equitable access to resources across populations in need. It increases transparency and accountability at the entry point and provides certainty that resources are distributed as fairly as possible. This certainty is essential when working to engage with consumers who feel that other people are getting things that they are denied.

Resource allocation and prioritisation decisions are made at three points:

- local area service network agreements that match local demand to the local resource base and service configuration
- initial assessment workers at entry points making assessments of best match
- interim response workers maintaining a dynamic assessment of the risks and needs faced by an individual while delivering on the immediate, short and long-term plan to address their needs.

Opening Doors resource allocation and prioritisation principles

Match the available resource to the person whose needs are best met by that particular resource.

Plan capacity to respond to people with high and complex needs, and those requiring early intervention.

Regularly review prioritisation policies using unmet demand as a key indicator to maximise services’ capacity to match available assistance to need.

Take steps to address service exclusion practices within the network.

Ensure that prioritisation policies are consistently understood and applied by all participating agencies and workers.

Make prioritisation policies transparent for consumers, other agencies and networks.

Resource matching

Opening Doors uses a process of matching resources, based on vacancies advertised on a shared resource register, with the particular needs of each consumer.

Opening Doors recognises that the finite amount of housing and support resources is the biggest obstacle for this process, and that people’s immediate options often do not meet their need.

Homelessness agencies within a local network should accept the first referral from the entry point. This practice is built on agreements made by the local area service network. If problems emerge with referrals, the agencies involved must quickly discuss and amend the referral practice as necessary.

Resource matching increases efficiency by removing:

- the waiting time for consumers and initial assessment workers to see if referrals for housing or support are accepted
- the need for agencies to keep answering queries about their resource availability
- the need for initial assessment workers to ring around to find resources that may not even be available.

Please refer to ‘Attachment 9: Guide for prioritisation’ in the *Service coordination guide*, for further information.

Tools to support service coordination and practice

Data collection

The Victorian Homelessness Data Collection is the instrument for client data collection for homelessness assistance programs in Victoria. The assessment and planning module of the data collection integrates the initial assessment and referral process of Opening Doors with data collection.

Administrative and statistical data collection occurs after the initial assessment and referral stages. The needs of the consumer, and service provision to meet these needs, are the first priorities. The requirements of the data collection, while important, are secondary to this process. Each item in the data collection is designed to *reflect* practice, rather than *drive* practice. Usually, the information required for the data collection is information the worker would collect in the usual course of service delivery to the consumer.

Initial assessment form

The Opening Doors initial assessment form is incorporated into the client management system software provided to homelessness services by the Housing and Community Building Division. Apart from a small number of standard fields, the initial assessment form is narrative in format and is integrated with software's case notes capability.

The Opening Doors initial assessment form is not a data collection tool. Entry point services collect client data via a separate section of the client management system after the initial assessment is complete.

The form provided supports initial assessment only; that is, what information is required for an effective referral. Case management services make their own deeper assessments once they accept a referral from an entry point agency. Initial assessment should avoid unnecessary questions that will subsequently be repeated by the case management service.

The initial assessment form recognises that each client is in a different situation and has different issues. Its narrative format supports the initial assessment conversation better than a 'tick and flick' style of form that attempts to cover every possible contingency. Such forms can be very long and imply that all questions must be asked, even if that was not the design intention.

The initial assessment form *enables*, but does not *direct*, the worker. Many assessment forms are designed to guide assessment practice. Opening Doors provides training and a *Practice guide* to support workers to communicate effectively with people who are likely to experience physical or mental distress, and who face a set of complex barriers to meeting their basic needs.

Referral form

Only the minimum necessary information should be exchanged at the point of referral. The Opening Doors referral form is integrated with the client management system, and:

- can be created anew, or by selecting an existing referral
- is automatically populated from the service contact section with the names of the people being referred, their ages and any available contact details
- automatically transfers the service contact notes to the summary section of the referral screen; notes can be edited to customise the referral summary
- can be printed for faxing
- includes a standard consent form that can be signed by the client in the case of written consent, or by the worker on the client's behalf if the consent is verbal
- is stored in the client management system for future reference or use.

Prioritisation lists

In order to coordinate services to all consumers in a catchment, local area service networks should develop their own prioritisation system. Prioritisation lists should be held and managed by the entry points, but may be a joint responsibility of several local agencies. The Housing and Community Building Division has developed a prioritisation approach in the client management system software that can be used by local area service networks.

Area-based prioritisation lists should:

- make a commitment of further assistance to consumers who could not receive adequate resources at their first contact
- avoid consumers having to go from agency to agency seeking resources that are not available
- avoid consumers being referred for the same resource by multiple agencies
- keep all consumers with a need for a particular resource in consideration when that resource becomes available
- assist service planning by developing a more accurate understanding of the quantity and nature of unmet demand.

Resource register

Opening Doors provides an electronic resource register that operates at the local level. It has one standard format with a password-protected area for each local area service network.

Agencies should place detailed notices of all vacancies on the resource register, including:

- crisis supported accommodation
- transitional housing
- support capacity and expertise
- long-term community housing
- financial assistance–HEF and other
- other resources in the area.

Detailed information about available resources assists initial assessment workers to make a decision about the most appropriate consumer for that vacancy. This reduces waiting time, frustration and stress for consumers from missing out on a resource when referrals are rejected.

Statewide free-call number

A statewide toll-free 1800 number automatically directs people seeking housing and homelessness assistance to their local access point during business hours, and to an after-hours response outside of business hours.

Attachment 1: Relationship to other practice responses

Homelessness Assistance Service Standards

Opening Doors is closely linked to and complies with the Housing and Community Building Division's Homelessness Assistance Service Standards.

Creating Connections and Youth Homelessness Service Coordination projects

The aims of Opening Doors are similar to the aims of the Youth Homelessness Service Coordination projects—both are working towards improving responses to homeless people by agencies working in partnership to make changes to existing systems and practices.

Several project stages are common to both initiatives, and the general approach of service coordination is the same. The development of a regional coordinated service model will incorporate both Opening Doors and Creating Connections.

Representatives from the Creating Connections partnership will be invited to participate in each local area service network.

After both partnerships have implemented their service models, it is important to continue to share information about the emerging issues for the local area and the impact that proposed changes may have on each project.

Integrated Approach to Family Violence

The aims of both Opening Doors and the Integrated Approach to Family Violence are comparable—both apply a consistent approach for assessing clients' initial needs, and work in partnership to improve the responses to people who experience homelessness and/or family violence.

Representatives from the family violence service system will be invited to participate in each local area service network. This provides an opportunity for enhanced communication between the local area service network and the regional family violence committee.

Opening Doors introduces common initial assessment, which includes a risk assessment to determine the presence of family violence and other risks. Opening Doors highlights the importance for pathways between the homelessness service system and the family violence service system.

Through agreements made by the local area service network, initial assessment workers and support workers have access to secondary consultations with family violence services within the local area. The *Family violence risk assessment framework* incorporates the provision of specialised family violence training to the homelessness service sector.

ChildFIRST

In their second phase of service coordination, local area service networks will build connections with the relevant ChildFIRST partnerships so that access to family and children's services are optimised. This should be particularly helpful for homelessness case management.

The Integrated Approach to Family Violence partnerships are involved more fully in ChildFIRST partnerships, and will be an important overlap for the homelessness networks with that system.

Primary care partnerships

Many homelessness and social housing agencies are members of local primary care partnerships. Primary care partnerships focus on service coordination between allied health and community service systems. Opening Doors local area service networks need to engage with their local primary care partnership to improve service coordination between the homelessness service system and allied service systems.

Initiatives such as the *Integrated Approach to Family Violence*, *ChildFIRST*, and *Opening Doors* focus on coordination *within* specific service systems.

The service coordination tool templates developed for primary care partnership agencies are for use by all health and community service workers to screen for issues that do not lie within their own area of expertise, and to make appropriate referrals outside their own service system. The Department of Human Services is currently developing appropriate screens for family violence and housing situation for inclusion in the service coordination tool templates.

The Opening Doors initial assessment and referral forms are for use *within* the homelessness service system.

Attachment 3: The development of Opening Doors

This framework is based substantially on the input of agencies providing homelessness services, and people who have been homeless or are at risk of homelessness.

Housing and Community Building Division project team

Dr Jane Bennett, Director Sector Development Strategy

Ms Clodagh Walsh, Project Manager

Ms Heather Holst, Senior Project Leader

Dr Hellene Gronda, Project Leader

Ms Paula Robinson, Project Leader

Housing and Community Building Division project contributors

Ms Bree Oliver

Ms Kerrily Jeffery

Ms Linda Williams

Mr Michael Veenvliet

Ms Clair Wheeler

Ms Anne Donovan

Ms Yvonne James

Opening Doors builds on the earlier work on common assessment and referral undertaken by Thomson Goodall Associates in the Statewide Assessment and Referral in Homelessness Services Project, as part of Victorian Homelessness Strategy and Department of Human Services regional assessment and referral projects. Many agencies offered their own initial assessment tools and approaches and took time to explain and discuss their experiences. Findings from all the Homelessness Service System Development Projects (HSSDPs) in the Eastern Metropolitan Region, Hume Region, the Outer South and Inner Melbourne were an important source of information and reflective analysis.

Cross-regional worker forums, meetings with agencies specialising in different target groups, consumers and academics have all informed Opening Doors.

Reference group

The reference group comprised representatives from the Housing and Community Building Division, Department of Human Services regions and homelessness agencies and peak bodies and provided expert advice to the project.

Mr Peter Lake, Homelessness Support Services, Office of Housing (Chair)

Ms Rita Lawrence, Salvation Army Social Housing Service, Western Metropolitan Region

Mr Michael Horn, Melbourne Citymission

Ms Janelle Cribb, The Salvation Army Kardinia Women's Services

Mr Brett Wake, Community Housing Federation of Victoria

Ms Rachael Skipper, Advocacy and Rights Centre, Loddon Mallee Region

Mr David Wright-Howie, Council to Homeless Persons

Ms Helen Riseborough, Hanover Welfare Services

Ms Karren Walker, St Vincent de Paul Transitional Housing Service

Ms Noelene Greene, Eastern Metropolitan Region Homelessness Networker

Ms Wendy Gilbert, Gippsland Region Homelessness Networker

Ms Jenny Samoiloff, Service Improvement, Public Housing Client Services

Ms Kim Marr, Department of Human Services Service Coordination

Ms Tracie Martin, Department of Human Services Southern Metropolitan Region

Ms Louise Doran, Department of Human Services Hume Region

Ms Heather McRae, Department of Human Services Grampians Region

A statewide and multi-area agency group contributed discussion in relation to the relationship between statewide and multi-area services and local entry points. Members of the group were:

Dr Jane Bennett, Director, Sector Development Strategy, Office of Housing (Chair)

Ms Alison McDonald, Domestic Violence Victoria

Ms Billi Clark, Flatout

Mr Richie Goonan, Hanover Welfare Services

Ms Ros Kerr, Hanover Welfare Services

Ms Audrey Rare, HomeGround and Yarra-CBD local area service network

Ms Julia Canty-Waldron, HomeGround

Ms Diana Orlando, Immigrant Women's Domestic Violence Service

Ms Jocelyn Bignold, Melbourne Citymission and Melton-Brimbank local area service network

Ms Nada Vindis, Melbourne Citymission

Ms Noelle Clifford, Salvation Army and Hume-Moreland local area service network

Ms Livia Carusi, Salvation Army Territorial Social Policy and Resource Unit

Ms Margaret Findson, Salvation Army Territorial Social Policy and Resource Unit

Mr Richard Elmer, Salvation Army St Kilda Crisis Centre

Ms Karren Walker, St Vincent de Paul Transitional Housing Service and Hume-Moreland local area service network

Ms Judy Line, Women's Housing

Ms Lindy Parker, Women's Housing

Mr David Wright-Howie, Council to Homeless Persons

Ms Deb Tsorbaris, Council to Homeless Persons

Ms Diane Godfrey, Housing Support Services, Office of Housing

Mr Peter Lake, Housing Support Services, Office of Housing

Ms Sandra Burman, Department of Human Services, Southern Metropolitan Region

Ms Sarah Langmore, Department of Human Services, North & West Metropolitan Region

Mr Max Fleming, Department of Human Services, Hume Region

Piloting the Statewide Homelessness Assessment and Referral Framework

The pilots that operated from late 2006 in five catchment areas provided invaluable information for the revision of Opening Doors, particularly of the Service coordination guide. Joint pilots meetings, held every six to eight weeks throughout the pilots, were a rich source of information. The pilot participants were as follows:

Barwon Local Area Service Network

(Chair Niall Hensey, Department of Human Services Barwon South Western Region)

Barwon Youth (formally Barwon Accommodation Youth Support Agency)

Bethany Community Support

Colac Area Health Service (Family Support Service)

Homeless Outreach Psychiatric Services

Kardinia Women's Services

Kardinia Men's Services

Salvation Army Social Housing Service

Time for Youth (formerly Barwon Youth Accommodation Services)

Zena Collective (also Domestic Violence Outreach Services)

Facilitator: Lisa Craggs

Brimbank–Melton Local Area Service Network

(Chairs Sarah Langmore and Mark Knauer, Department of Human Services North and West Metropolitan Region)

Good Shepherd Youth and Family Services

Melton Shire Housing

Melbourne Citymission–Footscray

Salvation Army Social Housing Service

Sunshine Youth Housing

Transitional Supported Accommodation for Youth Women's Health West

Facilitator: Paul Atkinson

Hume–Moreland Local Area Service Network

(Chairs Sarah Langmore and Mark Knauer, Department of Human Services North and West Metropolitan Region)

Berry Street Victoria

Bert Williams Aboriginal Youth Service

Hanover Inner North Services

HomeGround

Hope Street Youth and Family Services

Melbourne Citymission–Young Women's Crisis Service

Merri Outreach and Support Service

Salvation Army–Crossroads
St Vincent De Paul Transitional Housing Service
Women’s Information Support and Housing in the North
Facilitators: Jodi Mohr and Lynn Fitzpatrick

Wangaratta Local Area Service Network (Chair Max Fleming, Department of Human Services Hume Region)

Central Hume Support Services
Cooroonya Domestic Violence Service
North East Support and Action for Youth
Open Family
Rural Housing Network Ltd
Yarrawonga Supported Accommodation Assistance Program (Cobrawonga)
Facilitator: Pip Else

Yarra–Central Business District Local Area Service Network (Chair Sarah Langmore, Department of Human Services North and West Metropolitan Region)

Flagstaff Men’s Crisis Accommodation Good Shepherd Youth and Family Services
Hanover Inner North and Outreach
HomeGround
Melbourne Youth Support Services
Women’s Housing Limited
Facilitator: Audrey Rare

Review of the pilots

The Housing and Community Building Division commissioned a review of the pilots, to help improve both the model and how it is implemented across the state. The Australian Institute for Primary Care, La Trobe University, undertook the review from August to December 2007. They gathered information from all the pilot sites as well as the Department of Human Services regions and the Housing and Community Building Division. Their report is available on www.dhs.vic.gov.au/housing

The Housing and Community Building Division would also like to thank:

- all members of the community who provided input into the project, particularly those who have experienced homelessness and who gave generously of their time in the focus groups
- the homelessness service sector, in particular the regional homelessness networkers who provided invaluable assistance in organising sector meetings and supporting the pilots
- Department of Human Services regional representatives and other members of the Department of Human Services who provided valuable input
- the peer educators, Homelessness Advocacy Service, Council to Homeless Persons, who facilitated the meetings with service users.

Special thanks also to Mr Peter Lake, Ms Danielle de Kretser, Ms Christie Enright, Ms Sarah Langmore and Mr Tony Newman.

- ¹ The Supported Accommodation Assistance Program (SAAP), the Transitional Housing Management (THM) Program and the Housing Establishment Fund (HEF).
- ² Consumer focus groups were conducted across Victoria for the Victorian Homelessness Strategy in 2000, and separate consumer focus groups were conducted by the Peer Education Support Program of the Council to Homeless Persons for the development of the *Statewide Homelessness Assessment and Referral Framework* in 2006.
- ³ 'In terms of assessing client need, research for numerous homeless groups including Indigenous people, women, youth, the aged, those with mental illness and ex-prisoners highlights the importance of a close understanding of the particular and changing needs of the individual, whether through case management or other relationship of trust. Such an understanding enables insight into the issues that drive feelings of independence, belonging and control for that individual.

'This "close understanding" of individual need depends on a positive relationship between the case manager or support worker and the homeless person. A lack of trust, a fear of losing independence and feelings of pride can all mitigate against the acceptance of support by homeless people.' Heintjes, A. 2005, 'Responding to Homelessness', *AHURI Research and Policy Bulletin*, Issue 66, p. 3.
- ⁴ The Victorian Government's consumer charter for people accessing homelessness assistance and social housing services outlines 11 rights:
 - 1 The right to receive assistance in a crisis or to prevent a crisis
 - 2 The right to access crisis and transitional accommodation and long-term housing, based on fair policies
 - 3 The right to have assistance to find and manage appropriate long-term housing
 - 4 The right to feel safe
 - 5 The right to be free from discrimination
 - 6 The right to respect for your culture
 - 7 The right to respect, dignity and privacy
 - 8 The right to make choices and determine your future
 - 9 The right to participate in decision making
 - 10 The right to have assistance to access income support, employment, health services, educational opportunities and other support services
 - 11 The right to make a complaint and appeal, and receive a fair hearing and a meaningful response.
- ⁵ The engagement approach is positioned within the so-called 'third wave' of social work practice. As described by Wayne McCashen, in the context of strength-based practice, the third wave uses narrative, competency-based and solution-focused approaches in which the people are the experts, and solutions are within themselves and their networks. It contrasts with the first and second waves which used 'pathology focussed psycho-dynamic psychiatry' and 'diagnosed behaviour, personality and problems according to categories of illness that were based on history interpreted as absolute truths'. McCashen, W. 2005, *The Strengths Approach*, St Luke's Innovative Resources, Bendigo, pp. 2-3.

This diagnostic approach relies on a practitioner collating signs and symptoms to identify an underlying condition. It aims to collect information in order to prescribe the best treatment to alleviate the problem. The correct diagnosis, it is assumed, will be achieved if the worker has the right assessment tools, training and techniques. Diagnosis relies on full and open disclosure by the consumer. However, without the establishment of trust, detailed questioning at first meeting can appear overbearing and invasive to someone who is vulnerable and has no reason to trust the system. The diagnostic approach can also reinforce passivity or resistance in the consumer. When the outcome is successful, the person may feel that they played very little part in solving their own problems apart from getting the worker on their side by telling them the right story. Referrals may not succeed because the consumer does not feel ownership in the service response.

Other good material on engagement includes: Ballew, J.R. and Mink, G. 1996, *Case Management in Social Work: developing the professional skills needed for work with multi-problem clients*, Thomas, Springfield Illinois, pp. 37-47.
- ⁶ Robinson, C. 2003, *Understanding Iterative Homelessness: the case of people with mental disorders: a final report*, AHURI, Sydney
- ⁷ Yashin-Shaw, I., Howard, P. and Butcher, J., *Educating disaffected adult learners: re-engaging the homeless through tertiary level humanities studies*: www.creatingtheedgetraining.com
- ⁸ Department of Human Services 2003, *Responding to people with multiple and complex needs, Phase 1 Report*, Department of Human Services, Victoria

