Ovens Murray

Family Violence/Alcohol & Other Drug/Mental Health

Capacity Building Project

June 2020 Report

3whitehorses Consulting

Executive Summary.

Recommendations 98 & 99 of the Victorian Royal Commission to Family Violence support improved cross sector capacity and collaboration incorporating the family violence (FV), alcohol and other drug (AOD) and mental health (MH) sectors. These recommendations have resulted in a 2-stage cross sector capacity building project being rolled out across the 17 Department of Health and Human Services Areas across the State.

This report documents the achievements and challenges associated with the Ovens Murray area delivery of this work from the commencement of stage 1 in December 2017¹ to this Stage 2 update of June 2020.

The work in Ovens Murray is led by a high-level cross sector Steering Committee and supported by the committed participation of operational staff in the area. As this is a cross sector capacity building project, we are primarily focused on better systems and embedding sustainable changes to the benefit of those who experience family violence.

The Ovens Murray approach is unique as all activity was addressing the core outcomes detailed in the various Project Guidelines. In the absence of any formal state-wide accountability framework or reporting structure Ovens Murray enacted regular reporting upon project guidelines to the Steering Committee and ensured the Advisor workplan reflected the Project expectations. The Ovens Murray project has also previously provided reports to the FV Implementation Monitor and submissions into the Royal Commission into Mental Health about the high value of this project and its potential for lasting system improvements.

The project utilised five main activity streams to deliver against an international evidence-based capacity building framework². The framework sought responses at the practitioner, organisational and partnership levels and the activities implemented to address these were:

- 1. Steering Committee led strong governance, innovation, accountability and reporting
- 2. Cross Sector Workshops building the knowledge, trust and understanding of practitioners from each of the sector partners
- 3. Organisational readiness assessments providing an assessment of the partner organisations policies and procedures to support the practice changes required
- 4. Integrated Response Panel structured cross sector collaboration to deliver significantly improved outcomes for shared clients
- 5. Morning coffee weekly information sharing forum

An independent evaluator has been engaged by the Ovens Murray Steering Committee to review the work to date and suggest next steps – this will likely occur in the first quarter of 2020/21.

The Ovens Murray area remains committed to this project. Your questions or comments are welcomed.

Chair, Ovens Murray Steering Committee

¹ Documented fully in earlier reports of 30 June 2018 and 30 December 2019

² BMC Public Health, Belgium, 2015

Our Cross-sector Capacity Building Achievements

Delivery of stage 1 of the Capacity Building Project commenced in December 2017. The Project Outcomes were achieved for that stage by June 2018. The extension to stage 1 was used to continue capacity building work aligned to the guidelines. Stage 2 saw the continuation of stage one work, refined to meet the dual sector project governance expectations. All work has been actively overseen by the Steering Committee, aligned to an agreed workplan.

Strategically, all work has been achieved within the following five activities:

- 1. Ovens Murray Steering Committee (referred to as the Area Based Implementation Committee in the Guidelines)
 - a. Chaired by the CEO of the specialist family violence agencies
 - b. CEO/Director level membership is encouraged
 - c. Oversee the project workplan
 - d. Can inform system needs or changes
 - e. Has been essential in keeping the project working as one mechanism, as opposed to a siloed approach
 - f. Project funds are pooled.
- 2. Cross Sector Workshops provide:
 - a. Training in Identifying, referring and responding to family violence
 - b. Advice about sector reform including MARAM, Information Sharing and the Family Violence Capability Framework
 - c. Networking and relationship building
 - d. Themes and trends raised by practitioners to inform the projects strategic direction and operational needs.
- 3. Organisational Readiness Assessment test
 - a. As part of the project, an Organisational Readiness Assessment tool has been developed to test partner agency's governance structure against their ability and willingness to adopt the Victorian Family Violence Reform and support cross sector capacity building. The assessment tool has not been externally validated, but was built by 3whitehorses³ to use in this project based upon an analysis of:
 - i. ATODA Domestic and Family Violence Tools for Alcohol and Other Drug Setting
 - ii. Northern Territory Domestic and Family Violence Information Sharing Scheme – Organisational Readiness Checklist
 - iii. The MARAM Framework
 - iv. The MARAM Leading Alignment Checklist
 - v. Victorian Family Violence Capability Framework.
 - b. Partner agencies are encouraged to use the assessment and this report to guide their approach to family violence governance, case management and cross sector collaboration.
- 4. Integrated Response Panel.
 - a. Request for the IRP come from staff consultations. They told us they wanted a more structured approach to collaborative case management. The project has responded through a co-designed framework including a monthly Integrated Response Panel.

³ Consultants engaged with the support of the Steering Committee to deliver Stage 1 and 2 of the project within the project budget.

With the consent of the victim survivor a case can be presented in order to gain senior management input into complex cases that have not been improved by initial interventions. Subsequent to the IRP work we have examples of greatly improved outcomes for clients.

- 5. 30 Minute weekly coffee by zoom.
 - Operational staff sought a schedule of guest presentations at each other's agencies to evaluate awareness about program offering and referral pathways. This request coincided with COVID-19 workplace restrictions. In place of face to face attendance, a 30-minute zoom session is scheduled weekly with keynote speakers.

Risks and challenges associated with the project have remained constant through both stages of the project. As there are ongoing funds dedicated to this work there may be state-wide value in undertaking a formal evaluation of the project to date and using this to set in place a refined accountability framework. Ideally this work would ensure that the project is true to its purpose as identified by the Royal Commission into Family Violence and that sustainable system changes are being achieved

Locally, the Steering Committee are engaging an independent evaluator to test our approach to the Stage 1 and 2 guidelines and to assist us to set next steps.

At each step of the way the uncertainty about the future, specifically project being funded one year at a time, has impeded the development of a more comprehensive capacity building approach. Planning what is achievable for a single year is vastly different than planning for 3 - 5 years.

Project Achievement mapped to the Guidelines

It should be noted that stage 1 Guidelines encompassed all three project sectors and focused on cross sector capacity building. Achievements for stage one has been explicitly documented in earlier reports.

Stage 2 guidelines (and funding) has been structured centrally in two parts by different funders - one for AOD and one for MH. This separation is recorded in the tables below – although the Ovens Murray project has pooled resources and continues to use one Steering Committee to oversee and deliver the project.

Outcome	Activity undertaken
Provide practice leadership to the target client group across agencies in the catchment	Workshops Secondary consultations Integrated Response Panels Organisational Readiness Assessments Weekly coffee meetings
Identify emerging trends, needs and gaps in service delivery and practice issues, and use this knowledge to generate changes in systems and approaches, including initiating and contributing	Follow up Organisational Readiness Assessment Tool to each agency to suggest ways to target policy and procedural changes.

a) The AOD Specialist Family Violence Advisor to undertake the following activities⁴:

⁴ 20190109_AODSpecilaistFVAdvisors_ProgramGuidelines_PhaseTwo, page 3

to the development of relevant policies,	Extraction of strategic themes from
protocols and procedures.	Integrated Response Panel to the
	Steering Committee.
Identify, establish and further develop intra and	Integrated Response Panel
inter agency processes and practices that support	Cross Sector Workshops
high quality responses to individuals and families	
experiencing family violence and those using	
family violence.	
Facilitate client information sharing and support	Integrated Response Panel
joint work between AOD and family violence	Cross Sector Workshops
agencies to achieve better engagement with	
specialist family violence services.	
Provide secondary consultation regarding a	Consultations provided by CAV
specific client experiencing family violence to	
clarify relevant issues and to provide advice	
about the client's ongoing management.	
Assist the AOD workforce to identify family	Integrated Response Panel
violence related risk and strategies to mitigate	Cross Sector Workshops
those risks for individual clients.	· ·
Assist AOD workers to understand and navigate	Integrated Response Panel
the specialist family violence system	Cross Sector Workshops
	Secondary consults
Maintain an in-depth knowledge of the specialist	Attending state-wide Community of
family violence support services in the area, The	Practices
Orange Door Support and Safety Hubs, and the	Key member of the OM Family Violence
eligibility requirements for such services.	Operations group
Keep up to date information on waitlists and	Integrated Response Panel
alternatives for family violence support services	Steering committee
in the area.	
Participate in local governance networks and	Attending state-wide Community of
program communities of practice to facilitate	Practices
engagement and joint work between AOD and	Key member of the OM Family Violence
specialist family violence services and staff, and	Operations group
to promote knowledge sharing and professional	Character Di and
development	
development	

b) The objectives of the MH Specialist Family Violence Advisor Program are to⁵:

Outcome	Activity undertaken
Strengthen networks and collaboration between agencies and across the three sectors of mental health, AOD and family violence	Integrated Response Panel Cross Sector Workshops
Enhance referral pathways to provide a more coordinated and collaborative health and human service system response to family violence	Integrated Response Panel Morning coffee Cross sector workshops

⁵ MH Specialist Family Violence Advisor Stage Two Guidelines Final, page 7

Increase capacity within the mental health and AOD sectors through access to specialist family violence expertise and advice to identify, recognise and respond to family violence Facilitate earlier recognition of, and responses to, family violence situations for patients/clients of mental health and AOD services	Integrated Response Panel Cross Sector Workshops Cross Sector Workshops Integrated response Panel Initial work to build MARAM assessment and referrals to Integrated Response Panel into all mental health community- based clients intake processes
Enhance the quality and consistency of the service response to victims, survivors and perpetrators of family violence at whatever point they access the health and human services system	Integrated Response Panel Cross Sector Workshops Organisational Readiness Assessment

Other Project Achievements

Another notable achievement includes:

- a) the alignment of the Stage 2 MH and AOD positions into a single role in Ovens Murray:
 - supported by a single workplan drawn from the separate Stage 2 Project Guidelines
 - oversighted by a highly functioning Project Steering Committee chaired by the CEO of the Ovens Murray Specialist Family Violence service. Members are:
 - i. CEO, Centre Against Violence (Chair)
 - ii. Executive Director, Mental Health, Albury Wodonga Health
 - iii. Manager, AOD Services, Gateway Health
 - iv. Manager, Population Health and Community Well-being, DHHS, Ovens Murray area
 - v. CEO, AWAHS (Albury Wodonga Aboriginal Health Services)
 - vi. Family Violence, Principal Strategic Advisor, Ovens Murray area
 - vii. General Manager, AOD and MH, ACSO
- b) Stage 1 and 2 have been delivered by a consultancy 2 days per week within the existing budget envelope. The Steering Committee decided to use a consultancy model as recruitment to the skills set required proved difficult. The solution was to engage a consultant with project management, strategic and change management expertise and augment that with specialist sector advice from partner agencies as needed.

The Steering Committee have supported the state-wide coordination of project with the intent of sharing learning to inform sustainable systemic changes⁶.

Value add - achieved within project funding

The project has some value-add activities that were achieved through the same strong governance support. The significant additions were:

⁶ Noting that the state-wide steering committee intended to oversee this project has not formed, nor is there a reporting requirement attached to the project to date, rather Peaks have been funded to provide coordination.

- Training of staff at the Albury Wodonga Aboriginal Health Services (AWAHS) in identifying, reporting and referring to family violence and cross sector collaboration. This included GPs, allied health and administrative staff, as well as counsellors.
- Training of a group of staff from ACSO state-wide services in identifying, reporting and referring to family violence and cross sector collaboration.
- Engaging an external academic evaluator to provide advice on work to date and possible next steps.
- Presentation of project achievements at the 2018 Stop DV conference about the project, cross sector collaboration and using a consultancy model to deliver the project within the usual budget. An abstract is being prepared by the consultants delivering this project for the 2020 conference regarding intersectionality and cross sector integration what case management needs.
- Provided an Organisational Readiness review and report to three rural health services aligned to Albury Wodonga Health.
- Working with the Area Mental Health service to develop polices and practice for communitybased services that:
 - o Align to MARAM
 - o Support role clarification around family violence
 - Deliver family training to all the team
 - Support psychiatrists to formally incorporate alignment to the MARAM in clinical reviews

Learnings and Reflections

The project Steering Committee were asked to reflect on the learnings and challenges. They grouped them into two broad themes.

- 1. The Project
 - a. Lack of state-wide Steering committee and accountability models and reports appears to have allowed vast differences in project outcomes across the state. It is suggested that this be considered as part of a reform review ie. Did our state-wide approach maximise intended outcomes? What have we been able to change across the system and funding models that has made things better for those who experience family violence?
 - b. State-wide coordination of the project from peak bodies could be enhanced by the provision of project management skills and advice to support cross sector capacity building at a sustainable systems level.
 - c. Local support from DHHS has been excellent around supporting the project to achieve the outcomes described in the project guidelines and add value as suggested by the Steering Committee.
- 2. Cross sector capacity building and collaboration
 - a. Steering Committee membership must be a CEO/Director level to drive engagement and systemic change.
 - b. Organisational Readiness Assessment around corporate governance provides good advice about where organisations are at and what they need to consider changing. We are now considering the importance of organisations getting their case management frameworks (and possibly targets and funding models) right to support cross sector collaboration. It appears without internal governance to force change cross sector capacity building and collaboration is hard to embedded.

- c. Staff seek networking opportunities. These should be supported, but also used to identify systm issues for improvement. Advice from networking events is often lost or forgotten if not supported by a governance or systems change.
- d. The rollout of the Family Violence Reform in Victoria and supporting Information Sharing and MARAM training has not always been conducive to changes to practice, possibly due to sequencing, sometimes quality and lack of compliance models.

Our Stretch goals

The Ovens Murray project, and the shared ownership at a senior strategic and operational level has opened opportunities for stretch goals.

- We would hope to progress an MH/AOD/FV risk assessment and interventions sequencing tool, aligned to the MARAM and AOD and Mental Health best practice frameworks.
- We are also committed to finding resources to enable our three sectors to share a social work student across our sectors locally, aiming to build our cross-sector workforce capacity.
- We look forward to the evaluation we have commissioned for the first quarter of 2020/2121, both to reflect upon what we have done and to guide our next steps.

Conclusion.

We believe that this project provides a seriously good opportunity to build cross sector capacity and collaboration. By sticking to the project guidelines and adding value where the Ovens Murray area is committed to staying the path to achieve sustainable system change to improve the lives of those who experience family violence.

We seek every opportunity to learn from others across the state, be tested and assessed around our work and shared our model with others. We would also offer our model and learning to enhance the rollout of upcoming reform agendas.

While we wait for the independent evaluation of our project approach, we promote the notion that this project is highly successful due to its strategic, governance-oriented foundations and its reach to front line practitioners. We suggest it could be considered a model with applicability across the system adding value in a fast-paced reform environment. It is an approach that Ovens Murray can share within Victoria and support others with if they choose to adopt it.