RESPONSE TO REQUEST FOR COLLABORATIVE PROPOSAL
PART 1: INTRODUCTION

I Purpose and context

The purpose of this Collaborative Proposal is to respond to the Request for Collaborative Proposal (RCP V.2.0, issued 8 November 2012) from eligible organisations to deliver Front Door services (Type One) and Specialist Support Services (Type Two) under the framework of a new social housing and homelessness system in Tasmania.

The five organisations that have developed this proposal are:

- Anglicare Tasmania
- Centacare
- Colony 47
- Hobart City Mission
- Salvation Army (Tasmania)

The Request for a Collaborative Proposal followed a Tasmanian Support and Accommodation Assistance Review\(^1\) of the housing and homelessness support. This Review was undertaken by KPMG for the Department of Health and Human Services from May 2011 to June 2012.

\(^1\) KPMG 2012, Tasmanian Supported Accommodation and Assistance Review.
The Review occurred within the context of other changes to the social housing and homelessness services.

This Review was undertaken in the context of several other initiatives within the social housing and homelessness system including:

- Major national policy and program initiatives including the *National Affordable Housing Agreement (NAHA)* and *National Partnership Agreement on Homelessness*;
- The development of the *Tasmanian Homelessness Plan* and the *Tasmanian Homelessness Charter*;
- Implementation of the *Accommodation and Support Knowledge Base (Ask)*;
- An internal review of social housing assessment and prioritisation processes;
- Transfer of a proportion of public housing to the community housing sector;
- Expansion of affordable housing options;
- Development of a national quality framework for people experiencing or at risk of homelessness; and
- The *Service Coordination and Improvement Project (SCIP)* and related initiatives.

The Review was accepted by Government and proposals invited to deliver the new system.

The Tasmanian Government agreed to deliver a new system for social housing and homelessness services from July 2013 and invited five eligible organisations to provide a proposal to deliver front door (Type 1) and specialist support services (Type 2). The Department believed that the best approach for clients could be achieved by working collaboratively with organisations currently delivering Type 1 and Type 2 services.
| Non-competitive consistent regional approach | In terms of the procurement approach, it was proposed that this be conducted at a regional level, involving the development of a joint proposal by the service sector as a consortium for the delivery of Service Types One and Two in each region.

The objectives of this collaborative, non-competitive approach were to achieve locally determined, consistent service delivery arrangements and to promote collaboration and cooperation between non-government service providers in each region. This responds to concerns raised by stakeholders during the KPMG Review about the potential negative impact of competitive tendering processes. |
## Process of developing the Collaborative Proposal and evidence of working collaboratively in preparing this response

The process of developing the Proposal was genuinely collaborative. It entailed the following elements:

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<tr>
<th>Meetings and workshops for Chief Executive Officers and Executive Directors</th>
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<td>Chief Executive Officers and Executive Directors from all five organisations met together on eight occasions from September 2nd to December 14th totalling over 40 hours of face-to-face collaboration.</td>
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<td>In addition, they developed papers outlining positions on key issues such as governance that were then used as the basis for debate and discussion. There was also regular exchange of documentation and email communication and participation in workshops with line managers to debate key issues and develop the service model.</td>
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<th>Workshops for line managers</th>
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<td>Line managers from all five organisations met together on nine occasions totalling over 60 hours to workshop issues and determine the operational framework. They also undertook research and developed position papers and models that were shared with and amended by other members. They were actively engaged in an email network to report progress and share ideas and research.</td>
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<td>Line managers used their networks in other state and territories to learn first hand of the experiences other organisations in similar work.</td>
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<th>‘Snapshot’ survey of client views on how to access services</th>
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<td>Organisations conducted a ‘snapshot’ survey of over six hundred current clients to sample their views on where and how they would prefer to access services. While not a full survey, this provides evidence of genuine consultation with clients on development of the new model.</td>
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<td><strong>Employment of Independent Facilitator</strong></td>
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| **Consultation and collaboration with other stakeholders** | Organisations involved in delivery of Domestic and Family Violence services were first consulted on the best means of working with them in developing a model. As a result of this feedback, a face-to-face consultation was conducted at a state-wide meeting of Women’s Essential Services Providers (WESP).

Line Managers also attended the Tasmanian Youth Housing and Homelessness Group (TYHHG) to consult with Youth services on development of the model.

Telephone contact and a face-to-face meeting was organised with Wyndarrah Services and West Coast Services to discuss how these services would be integrated into the Housing Connect model and provide reassurance about the continued sustainability of these services. |
| **Endorsement from Boards of the Collaborative Organisations** | Each organisation fully involved their Board of Management in this collaborative process. A statement of support from the Chair of each Board of Management is provided below as evidence of the endorsement of Boards for this collaborative proposal. |
Anglicare

Anglicare is excited about the reforms that have led to the formation of Housing Connect. There are challenges as organisations work in new and different ways however getting people housed is a concern we all share. Together, via Housing Connect, we will provide quality support services to Tasmanians.

V. B. Armstrong OAM - Chair, Anglicare Tasmania Inc.

Centacare

The Board of Centacare Tasmania support the participation of Centacare Tasmania as part of the Housing Connect Collaborative Steering Group for the purposes of continuing to deliver Tasmania’s new social housing and homelessness service system.

Ron Ward, Chair, Centacare Tasmania

Colony 47

Colony 47 is a committed member of Housing Connect. Our organisation welcomes the opportunity to work with other members of Housing Connect to introduce reforms that will improve housing outcomes for Tasmanians through easier access and more targeted support and accommodation assistance.

Andrew Catchpole, President, Colony 47 Board.

Hobart City Mission

The Hobart City Mission is a proud partner to and supporter of Housing Connect and looks forward to meeting the challenge of working with other Housing Connect members in delivering Tasmania’s new social housing and homelessness service system successfully and in an effective, efficient and economic manner. The HCM Board strongly believes that the clients of Housing Connect will be the main beneficiaries of the new housing services delivery model.

Barry Neilsen, President, Hobart City Mission Inc.
The Salvation Army Tasmania Division has for many years been working with Tasmanians who experience homelessness and difficulties with accommodation. Our involvement in a new collaborative approach through Housing Connect as a project with other NGOs working in the sector represents the formalisation of the efforts we have been making together in the past.

The Salvation Army supports the Housing Connect project and is committed to a more formal partnership, active participation and support to the benefit of those for whom housing is a challenging issue.

Ritchie Watson, Divisional Commander, The Salvation Army Tasmania
### PART 2: OPERATIONAL FRAMEWORK

The operational framework is detailed below.

The Operational Framework for delivering the new *Housing Connect* service model is outlined below. Details are provided of:

- Conceptual model;
- Governance arrangements;
- Detailed service delivery plans;
- Workforce structure; and
- Performance measures.

### I Conceptual model - a description of the ‘big picture’ conceptual model

The conceptual model is based on the findings of the KPMG Review that are further articulated in the Request for Proposal.

The Review identified several strengths that will be retained and enhanced:

- Workforce skills and competencies;
- Consolidation of high volume, low intensity information advice and referral services within a central access point;
- Client empowerment and strengths based approaches; and
- A state-wide distribution of services while allowing for increased client choice of provider.
The Review identified limitations and constraints, including the need to improve:

- Linkages and integration with mainstream services;
- ‘Bottle necks’ due to lack of exit planning;
- Increased demand and unmet need; and
- Gaps in services.

The proposed service model takes account of the Review findings and the specified requirements of the Request for Proposal.
An overarching concept for the new service model is that it is streamlined: efficient, coordinated and reducing service duplication.

This will be greatly facilitated by the new software (*Ask*) and the common assessment framework.

It will also require management processes for coordination of services at the local level through the role of the Lead Agency and Regional Management Groups. The roles and responsibilities of Regional Management Groups to improve efficiency and coordination as well as reduce service duplication are detailed on p. 28.

Most importantly, it will require ways to effectively link homelessness services to other human services. These linkages are vital as a consequence of the focus on households and individuals with complex support needs.

At the regional level, these links will be achieved by the work of the Local Area Coordinator and Regional Reference Groups. This work is detailed in the section outlining regional homelessness prevention (pp. 64-66). Regional plans to reduce homelessness will be developed in conjunction with all related services.

At the state-wide level the integration challenge is to develop a coherent approach that links homelessness provision with the demand and supply of mainstream and specialist services. This will largely be achieved through the work of the State-wide Collaborative Steering Group that will maintain an overview of all *Housing Connect* services through regular reports from regional reference groups and regional management groups. This group will have responsibility for business planning and reporting and working at a strategic level to realise target outcomes. This group will oversee regional homelessness prevention plans that will involve all relevant services working to achieve a more streamlined and efficient service.
The key features of the *Front Door* Service System Model that form the conceptual model for the new service are:

- Provider-neutral services and locations;
- Simplified, visible, centralised access points for clients and referring services providing immediate, client-focused assistance to enquiries;
- Integration of the intake and assessment functions of *Housing Tasmania*’s operational services and all its funded accommodation and support services;
- Single points of assessment to avoid duplication with staff competent at assessments and able to use the Ask system;
- Streamlined early intervention brokerage and private rental access support;
- Consistent allocation for emergency accommodation and social housing;
- Provision for oversight of the housing and homelessness service system;
- Three service responses:
  - Generic;
  - Domestic and family violence specific; and
  - Youth (Young people aged 16-20 years);
- For domestic and family violence clients:
  - Options to access services other than physical presentation to the physical front door locations;
  - Staff with experience and/or specialist training in assisting women and children escaping domestic violence; and
  - Protocols in place with mainstream services including police, justice and family violence crisis services;
- For youth clients:
  - Staff with experience and/or specialist training in working with children and young people in crisis; and

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Protocols in place with child protection services, education services and other mainstream services.

Service coordination and regional homelessness prevention

A second important responsibility of the Front Door Service will be regional homelessness prevention through coordination of specialist and mainstream services.

Service coordination and integration is a fundamental principle for the new homeless service system. Strong partnerships and integration with mainstream services, at both delivery and policy levels, are essential to address the causes and consequences of homelessness. The increased complexity of the service system has led to concerns regarding access barriers, duplication and service capacity to provide appropriate service to clients with complex support needs.

Integration is also an attempt to simplify the service system, standardise eligibility and intake processes and make it easier for clients to enter the system.

It is important that the service model demonstrates the benefits of a collaborative approach and successful integration to social housing and homelessness initiatives. These may be summarised as follows:\(^2\):

- Improved client outcomes;
- Enhanced client access;
- Greater equity and consistency;
- Increased efficiency; and
- Enhanced accountability and control.

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\(^2\) Taken from *Enhancing the Effectiveness of Australian Social Housing Integration Initiatives*, AHURI 2009.
The key features of Service Integration that form the conceptual model for the new service are:

- Demonstrated commitment to working collaboratively and in an integrated way with other service providers;
- A partnered approach to homelessness in the local area through building and maintaining relationships between stakeholders;
- Collaboration with other providers in such things as policy development, hosting team meetings, joint case planning and facilitating *warm* referrals; and
- Development and maintenance of protocols with specialist and mainstream services.
The key features of the Specialist Support Services that form the conceptual model for the new service are:

- Differentiated intensity, duration and focus of support services based on assessed need:
  - Tenancy support - low intensity, short duration
  - Crisis support - high intensity, short duration
  - Ongoing support – variable intensity, longer duration
- Clearer delineation of responsibility for case management and case coordination with case management articulating a client’s goals and individually tailored interventions;
- Regular contact with clients and coordination of linkages with other services;
- Provision of ‘floating support’ that is not linked to a particular accommodation option;
- Formal and informal referral networks;
- Crisis support provided by way of five service specific responses:
  - Generic;
  - Domestic and Family Violence specific;
  - Youth Specific;
  - Child Response; and
  - Aboriginal and Torres Strait Islander response; and
- Links to and relationship with Service Type 3 (Short term Emergency Accommodation).
II Understanding of terminology and developing a common understanding of levels of intervention and support

Definitions

Housing Connect will utilise all definitions in the July 2012 KPMG service specification3. In addition to these definitions the Collaborative Partners have agreed on some further description of terms not noted within the specifications from KPMG.

A summary of agreed terminology is provided below:

- **Progressive assessment**

  Progressive assessment is an ongoing assessment process during the term of client service engagement within Housing Connect. There will be three clear phases of assessment which will include initial assessment, ongoing assessment and review assessment. Progressive assessment will;

  - Identify client basic and demographic information;
  - Identify client presenting need;
  - Identify biological, social and psychological risk factors that require addressing to respond to and prevent ongoing homelessness (client need);
  - Identify existing client resources and skills to address client need;
  - Identify options for intervention;
  - Identify method of intervention appropriate to client presentation; and
  - Risk identification and analysis as it relates to client, community, worker and program safety.

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3 Department of Health and Human Services, Tasmanian Assistance Review: Service Specifications
- **Progressive assessment (continued...)**

  Initial assessment will be conducted by *Front Door (Service Type 1)* workers, who will obtain as much information as possible at first contact. An initial risk assessment will also be conducted at this time. Immediate needs and required response will be identified and responded to as appropriate.

  Ongoing assessment will be conducted by support workers (*Service Type 2 Levels 1, 2 and 3*). Ongoing assessment will build on initial assessment through ongoing discussions with the client and where appropriate other related stakeholders including *Type 3 Services*. Ongoing assessment will ensure that any changes to client need are identified, client growth and development considered and that support provided is appropriate.

- **Case coordination**

  Case coordination refers to processes of communication, information sharing and collaboration with other staff serving the client within and between agencies. Case coordination activities may include arranging access, reducing barriers to obtaining services, establishing linkages and other activities as required within the case plan.

  Case coordination will generally be the responsibility of *Front Door* (Type 1) Services unless specifically delegated to a Type 2 service.
• **Case planning**

Case plans are written documents that provide clear direction for support provision for all clients and are informed by assessment. Case plans may also be known as support plans, forward plans or future plans. Case plans are developed in consultation with the client and include the following elements:

- Client case number;
- Individualised goal or needs;
- Desired or intended outcome;
- Resources and strengths available to the client to assist them achieve their goals;
- Strategies to achieve the desired outcome, to be noted as identifiable and specific tasks;
- Who will be responsible for carrying out the noted strategies and tasks;
- Timeframes for actions;
- Dates strategies are achieved; and
- Dates for case plan reviews; re-assessments and exit from the service.

Case planning may be undertaken by *Front Door* (Type 1) Services in initial stages but will then become the responsibility of the appropriate Type 2 Service.
| **Case management** | Case management is a collaborative process of assessment, planning, facilitation and advocacy for options and services to meet an individual’s holistic needs through communication and available resources to promote quality and cost-effective outcomes.

Case management in specialist homelessness services is flexible in application and timing in recognition of the many needs of individuals and the limited control that any agency or worker has over client outcomes.

Case management will be undertaken by Type 2 level 2 and 3 Services. |
| **Case conferencing** | A case conference is a formal, planned and structured event separate from regular client contact. The goal of case conferencing is to provide holistic, coordinated, and integrated services across providers, and to reduce duplication. Case conferences are usually interdisciplinary, include one or multiple internal and external providers and, if possible and appropriate, the client and family members or close supports.

Case conferencing will be the responsibility of Type 2 level 2 and 3 Services. |
| **Monitoring** | Monitoring refers to the process of observation or checks in place to ensure quality service delivery over time.

Case management progression will be monitored in consultation with the client during the life of the support relationship. This will ensure that achievement of client outcomes remains a focus and that the case plan goals and exit plans are maintaining momentum and remain relevant to the client’s needs.

The *Front Door* Service will have responsibility to monitor case progression through the *Ask*, but Support Services will also conduct internal monitoring where workers will discuss case progression within the supervision context. |
• **Review**

Review refers to points in time where case plans and case management process are regularly assessed with the client.

The *Outcomes Star* monitoring tool will provide a consistent and measurable format for identifying client motivation, client behavioural change, case progression and outcomes achieved by clients. Formal case reviews between workers and senior supervising staff will occur monthly.

• **Support**

Support refers to a range of service activities aimed at addressing client need (practical or emotional) and will be provided through face-to-face meetings (including assertive outreach) or telephone contact between client and worker. Support includes all activities noted within the case plan. For example:

- Skills required to access accommodation and maintain a tenancy;
- Advocacy and negotiation, such as with real estate agents;
- Life skills education such as keeping the property clean and lawns and gardens maintained;
- Budgeting and debt management;
- Referral to and preparation for specialist support organisations such as Gateways, mental health services or disability services;
- Information and education; and
- Transport.
III Governance Arrangements – Agreements and Collaborative Groups

This section describes the governance framework

This section of the Proposal describes the Governance Framework developed to support the implementation and ongoing management of Housing Connect.

Governance arrangements were developed by the Collaborative Group

The Housing Connect Collaborative CEOs Group developed the governance arrangements after extensive debate and discussion facilitated by position papers contributed by group members.

Reference was also made to Tasmanian Government Project Management Guidelines to ensure consistent definitions of group types, roles and purposes.

(a) Development of a Collaborative Agreement

A formal Collaborative Agreement was developed

A formal Collaborative Agreement was developed to define the relationship between the collaborative partners and outline the operating rules for the life of the contract.

The Agreement reflects the principles and purposes of the collaborative partnership as well as the goodwill and trust developed between members.

The document provides a legal reference point for the collaborative partnership and ensures adequate protections and assurances for member organisations.

Members believe that this Agreement will facilitate the governance and management of Housing Connect and ensure that the collaborative partnership is robust and sustainable in the long term.

4 Tasmanian Government Project Management Guidelines Version 7, 2011 Department of Premier and Cabinet
The Agreement was based on a set of principles agreed by the Collaborative Group as the foundation for governance of the new service model. The agreed principles are that governance should:

- Be client focused;
- Demonstrate consistency with the recommendations of the SAAR Final Report;
- Show innovation and seek continuous improvement to services;
- Have transparent processes;
- Allocate appropriate levels of resources for purposes;
- Share all appropriate information between partners;
- Comply with a communications strategy with stakeholders;
- Be based on a spirit of cooperation and acting in good faith between partners;
- Facilitate opportunities for collaboration and cooperation on matters within the scope of Housing Connect;
- Promote ethical decision making; and
- Ensure that each partner maintain their current funding allocation for the scope of Housing Connect services, plus or minus a margin of 10%.
The final agreement provides a legal basis for the operation of the collaborative group.

The Final Collaborative Agreement has been provided.

The Agreement covers:

- Obligations, agreements and responsibilities of partners;
- Meeting processes and decision making;
- Confidentiality;
- Intellectual property;
- Dispute resolution; and
- Termination.

The agreement has been signed by all five partner organisations.
The governance model includes three group structures:

- A state-wide Collaborative Steering Group;
- Three regional management groups; and
- Three regional reference group.

The relationship between the three groups is shown in Figure 1.

While this section details the formal groups that are involved in governance and management, informal networks between Chief Executive Officers and state-wide managers have already developed during the preparation of this proposal and will be maintained.
1) **State-wide Collaborative Steering Group**

| **Membership** | The Collaborative Steering Group will consist of the Chief Executive Officers or Executive Directors of each of the five collaborative partners (or nominated alternate). |
| **Committee structure** | The Collaborative Steering Group will have capacity to form Committees for particular purposes required for its effective operation. This will provide a mechanism for line managers and other staff to be involved in preparing papers or providing information for the Group’s consideration. |
| **Chair** | The Group will be chaired by an independent chair elected by members |
| **Executive support** | The Group will receive executive support from the two Lead Agencies. |
| **Meeting schedule** | The Group will meet as required but at least quarterly, with the expectation that more frequent meetings will be required in the first year of operation. |
| **Distinction from the day-to-day management of Housing Connect** | The Collaborative Steering Group will most closely resemble a Board of Governance removed from the day-to-day management responsibilities for Housing Connect that will remain the responsibility of Lead Agencies. |
Roles and responsibilities

The Steering Group will have the following roles and responsibilities:

- Responsibility for *Housing Connect*’s feasibility, business plan and realisation of target outcomes;
- Ensuring the scope of *Housing Connect* aligns with the requirements of the stakeholder groups including service organisations and clients;
- Providing guidance on business issues;
- Ensuring effort and expenditure are appropriate to stakeholder expectations;
- Addressing any issue or risk that has major implications for the project;
- Keeping the scope under control as emergent issues force changes to be considered;
- Reconciling differences in opinion and approach and resolve disputes arising from them;
- Reporting on project progress to those people responsible at Government level and provide a point of liaison and consultation with Government;
- Understanding the strategic implications and outcomes of initiatives being pursued;
- Appreciating the significance of *Housing Connect* for major stakeholders and represent their interests;
- Being an advocate for *Housing Connect* outcomes;
- Having a broad understanding of project management issues and the approach being adopted; and
- Being committed to and actively involved in pursuing the *Housing Connect* target outcomes
### 2) Regional Management Groups

**There will be three regional management groups**

While *Housing Connect* specifies only two regions (south and north) there will be three regional management groups to deal with local issues and facilitate management at local level:

- South;
- North; and
- North-West.

**Membership**

Membership will be area managers of the Lead Agencies and partner organisations, supported by state line managers where appropriate especially in the early stages of implementation.

**Chair**

The Lead Agency Manager in each region will chair the meetings.

**Executive support**

Executive support will be provided by the Lead Agencies.

**Meeting schedule**

Groups will meet according to need but are expected to meet on at least a fortnightly basis with weekly meetings possible in initial stages. Meetings may be face-to-face or via teleconference.

**Roles and responsibilities**

Regional management groups will have responsibility for:

- Operational matters at local level including the development, implementation and coordination of operational processes and procedures such as client screening, assessment, prioritisation, referral and allocation to support services;
- Monitoring activity levels and identifying when services are at capacity;
- Overseeing case allocation for Type 2 services to ensure equity and fairness between subcontracted services;
- Tracking and monitoring client progress;
- Responding to ‘blocked’ or ‘bounced’ clients; and
- Identifying and referring policy and systemic issues that require resolution by Collaborative Steering Group.
| **Management across regional boundaries** | Where there are management issues that concern both regions (such as clients moving between regions) the respective Area Managers will liaise and make sure that the relevant regional management committee addresses them. Opportunities for statewide management committee meetings involving all three management committees will be provided if required via teleconferencing. |
3) Regional Reference Groups

There will be three regional reference groups

While Housing Connect specifies only two regions (south and north) there will be three regional reference groups to reflect local issues and facilitate networking and liaison at the local level:

- South;
- North; and
- North-West.

Membership

Membership will comprise local departmental and service sector stakeholders and may also have client representation.

Possible membership will include:

- Social housing providers;
- Non government agencies that provide services to Housing Connect clients;
- State government departments including Education, Police and Emergency Services; Health and Human Services (Hospitals; Mental Health Services; Alcohol and Drug Services; Children’s Services; Domestic Violence Services; Disability Services; Housing Tasmania; Youth Justice Services); Justice;
- Centrelink; and
- Gateways and Family Support Services

Chair

Regional Reference Groups will be chaired Local Area Coordinators.

Executive support

Executive support will be provided by the Lead Agencies.

Meeting Schedule

Regional Reference Groups are expected to meet at least quarterly.
## Roles and responsibilities

Regional Reference Groups will have a key role in coordinating the delivery of homelessness prevention actions within the local service network. They will develop regional business plans that will detail local priorities for action. They will work closely with Local Area Coordinators who will both inform their work and be major agents for implementing the plans. The roles and responsibilities of Regional Reference Groups will include:

- Facilitating liaison between mainstream and specialist services and key stakeholders;
- Building a shared understanding of homelessness issues and relationships between key stakeholders;
- Providing information and seeking feedback on issues involving homelessness and social housing;
- Responding to draft policies and position papers on issues related to homelessness and social housing;
- Contributing to service mapping and identification of needs;
- Contributing to strategic planning and the development and implementation of protocols, policies and procedures for *Housing Connect*;
- Assisting with ongoing change management and service integration;
- Raising awareness of referral pathways to the *Front Door* services; and
- Assisting with distribution of resources and information.

## Opportunities for state-wide reference committee meetings

There may be occasions where a state-wide reference group meeting or forum will be beneficial and this will be organised by the Local Area Coordinators.

The arrangements for Reference Group input into policy and planning issues are flexible and will be further developed in consultation with members.
### IV Detailed Service Delivery Plans

#### (a) Regional Service Mix and distribution of services

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<td>2. Region 2: South East and South West</td>
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**Region 1: North and North West**

In Region 1 (North and North West) Anglicare will be the Lead Agency and specialist support services will be delivered by Centacare and Anglicare, with the addition of some Type 2 services delivered by Wyndarra Homelessness Support Service and West Coast Council according to their current models.

*Front Door Access points will be provided in Launceston, Devonport and Burnie.*

**Region 2: South East and South West**

In Region 2 (South East and South West) Colony 47 will be the Lead agency and specialist support services will be delivered by Colony 47, Centacare, Anglicare, Hobart City Mission and the Salvation Army.

*Front Door Access points will be provided on the western shore and on the eastern shore.*
In determining the mix of support services that will be provided by each agency, several factors were taken into consideration:

- The need for all levels of support to be accessible across the state;
- A requirement to maximise client service choice where possible;
- A preference for both level 2 and level 3 support to be available in the same support service organisation so that there will be consistency for any clients moving from level 2 to level 3;
- Capacity for specialisation to be provided within each organisation where possible – defined according to the experience and expertise of staff;
- Capacity for some possible brokerage of specialist support for particular clients such as those with specific cultural and language requirements; and
- The capacity of each subcontracted organisation to accept overall cases.
### (b) Location of services and co-location arrangements

<table>
<thead>
<tr>
<th>Consideration of issues related to location</th>
<th>As part of the preparation of the RCP, the Collaborative Group:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Identified a range of issues associated with site and location for <em>Front Door</em> services;</td>
</tr>
<tr>
<td></td>
<td>• Identified key specifications, requirements and priorities;</td>
</tr>
<tr>
<td></td>
<td>• Surveyed clients on their preferred model for location and site requirements;</td>
</tr>
<tr>
<td></td>
<td>• Canvassed a range of existing and potential <em>Front Door</em> office options including co-location; and</td>
</tr>
<tr>
<td></td>
<td>• Identified recommended site locations in each region.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Issues associated with <em>Front Door</em> site location</th>
<th>A number of issues were considered:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• The client group will range from children to elderly people;</td>
</tr>
<tr>
<td></td>
<td>• Clients may present with a variety of special needs and have co-morbidities;</td>
</tr>
<tr>
<td></td>
<td>• Clients will require access to any or all of the full range of <em>Front Door</em> services;</td>
</tr>
<tr>
<td></td>
<td>• Clients may be more likely to react to poorly planned or situated locations because of their personal and social circumstances;</td>
</tr>
<tr>
<td></td>
<td>• Confidentiality is likely to be a priority for clients; and</td>
</tr>
<tr>
<td></td>
<td>• Staff members need to feel safe and comfortable in their work environment.</td>
</tr>
</tbody>
</table>
The priorities for site selection

<table>
<thead>
<tr>
<th>The identified priorities in site selection were:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Accessibility for the most number of clients – bus routes, accessible parking and proximity to other services were all considered important;</td>
</tr>
<tr>
<td>• Central and highly visible site – given the ‘no wrong door’ philosophy it was considered important that each Front Door site has street presence and familiarity for clients;</td>
</tr>
<tr>
<td>• Affordability – there was a need to be pragmatic in site selection given the available funding and the limited tenure of the contract and possible increased rental costs;</td>
</tr>
<tr>
<td>• Capacity for potential portability of the Housing Connect contract to other organisations into the future; and</td>
</tr>
<tr>
<td>• Information technology compatibility - given the reliance on computer software and websites to deliver services the site needed to facilitate the use of this technology.</td>
</tr>
</tbody>
</table>
### Other issues associated with establishing a new Front Door

Other issues associated with the requirements of the new *Front Door* were:

- Costs associated with moving current staff and resources including infrastructure and fitting out new sites to meet requirements;
- Impact on clients of moving away from existing well known service locations given expressed client preference for accessing existing services;
- Timeframes associated with negotiating new leases and moving services before 1st July;
- The lack of suitable sites – especially in the North West; and
- The potential disadvantages of moving services out of existing co-located service locations to separate locations and the impact this would have on streamlined services to clients. For example, Anglicare’s Housing and Homelessness Services in Launceston are currently co-located with over 20 other programs including Mental Health Services, Alcohol & other Drug Services, Problem Gambling Services, Financial Counselling Services, a Centrelink Social Worker (part time), Children’s Services, Early Intervention Programs, Aged Care Services and Community Education Programs. The co-location with these services has obvious benefits for clients with staff having ready access to workers in these programs ensuring:

  - Specialist information can be sourced quickly;
  - Workers from other programs may be able to see Housing Connect clients straight away; and
  - Collaborative relationships are developed and maintained across program staff.
A further consideration was the requirement for the *Front Door* to be neutrally branded with no logos or names from partner organisations to be used and for the *Front Door* to be separate from existing organisations.

After consideration it was believed that this requirement could be met by:

- Completely new locations;
- Buildings that are separated from current sites; or
- Separate entrances and branding for existing buildings.
Key characteristics that may assist clients to feel comfortable and able to access services

In addition to these priorities and requirements, a number of design characteristics were considered to be fundamental to promoting an ideal *Front Door* environment based on the relevant literature:

- Limited public entry points;
- Access control to interview spaces;
- Comfortable, spacious waiting area with enough seating for peak demand times;
- Option of separate waiting room;
- Safe rooms/secure area for workers to retreat to during emergencies;
- Good ventilation;
- Clear signage;
- Private areas for separation of distressed or disturbed people;
- Wide reception counters that provide privacy for incoming calls and initial discussions (not heard from waiting area);
- A clear, fair and private queuing system;
- Well lit and ventilated public and private areas;
- Duress alarms (desk-based and personal);
- Entrances observable by front desk staff;
- Management of visitor movements;
- Good visibility;
- Ability to distinguish workers from clients;
- Secure storage for potentially dangerous items including access to kitchen areas;
- Good acoustics and soundproofing;
- Child safe area;
- Unobstructed exits with ease of access; and
- Accessible toilet facilities.

5 See references attached
### Client ‘Snapshot’ Survey

A snapshot survey of 626 clients across the state showed that the vast majority of clients (75%) wanted the current location of existing housing services to remain, with 10% wanting to access services at Housing Tasmania Offices and 10% preferring Centrelink.

These results showing where clients felt most comfortable accessing services for the North and the South of the state are illustrated in Figures below.

### Service delivery model

Results also showed an overwhelming percentage of clients (67%) wanted to access services through face-to-face delivery, with 25% opting for phone access and 10% web access.
Co-location with Centrelink was fully considered as per the RCP requirements. A response from the Centrelink southern manager indicated that collocation opportunities with external agencies ‘will be limited’ as the first priority will be collocation with other commonwealth agencies:

_In Service Zone Tasmania I believe it will be particularly difficult to extend our current shared tenancy arrangements beyond Hobart and Rosny._

Space and facility requirements for *Front Door* Services at Hobart and Rosny Centrelink offices were also found to be inadequate for the purposes of *Front Door* services. Centrelink offices in the North and North West have the same issues.

<table>
<thead>
<tr>
<th>Site options that are recommended</th>
<th>The following sites are recommended as <em>Front Door</em> sites. The sites will all ensure that <em>Housing Connect</em> is closely associated and in close proximity with other services frequently utilised by potential clients.</th>
</tr>
</thead>
<tbody>
<tr>
<td>South (West):</td>
<td><em>Mimosa</em>, Elizabeth Street, North Hobart*</td>
</tr>
<tr>
<td>South (East):</td>
<td>Sites currently being assessed.</td>
</tr>
<tr>
<td>Launceston:</td>
<td>118 Elizabeth Street, Launceston</td>
</tr>
<tr>
<td>Devonport:</td>
<td>31 King Street, Devonport</td>
</tr>
<tr>
<td>Burnie:</td>
<td>10 Strahan Street, Burnie</td>
</tr>
<tr>
<td>Capacity for outreach services</td>
<td>In addition to these main sites the <em>Front Door</em> model allows for outreach services to be provided in rural locations such as the Huon area and the East Coast. It is anticipated that <em>Front Door</em> staff will be equipped with portable technology that will allow them to travel to suitable locations to provide <em>Front Door</em> services. This is detailed in the detailed service delivery plan.</td>
</tr>
</tbody>
</table>
## (c) Integration with existing services

<table>
<thead>
<tr>
<th>Commitment to work with other agencies within the sector</th>
<th>The new <em>Housing Connect</em> model places a strong emphasis on working with other agencies that are involved in delivery of social housing and homelessness services.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Formal and informal networks will be further developed</td>
<td>Staff managers employed by partner organisations have extensive formal and informal networks within the sector and are well positioned to promote connections and support other organisations, especially those targeting specific priority subgroups of people who are homeless, such as women escaping domestic and family violence.</td>
</tr>
</tbody>
</table>
| Coordination of *Housing Connect* with Wyndarra and West Coast Council social housing and homelessness services | The *Housing Connect* Collaboration group has made contact with staff working in NW and West Coast Services. Both organisations provide Type 1, 2 & 3 services in these remote locations.  

It is envisaged that the West Coast Council (WCC) and Wyndarra will continue to provide these services within the new model with *Housing Connect* adding value in a variety of ways. Both services are currently well connected within their local communities and deliver good quality services to a range of people in need. Furthermore, the *Housing Connect* funding envelope does not allow the capacity to provide services in these remote locations. |
A number of ways have been identified for Housing Connect to maintain and enhance relationships with Wyndarra and West Coast Council Services.

The Housing Connect Collaboration group has identified several ways to support Wyndarra and West Coast Council Services and strengthen the relationship between North West Coast providers:

- Sharing training and professional development opportunities;
- Supporting consistent quality assurance measures and policy/procedure development;
- Utilising the capabilities of Ask to streamline assessment and referral processes and applications for private rental assistance from Wyndarra and WCC to other providers;
- Jointly participating in protocol and relationship development with other services;
- Providing coverage for these services when staff take leave;
- Streamlining processes to enable easy access to needed resources;
- Improved referral pathways and combined resource responses for clients with exceptional circumstances/high and complex needs;
- Encouraging participation in relevant meetings and forums such as Regional Homelessness Prevention forums; and
- Providing support, mentoring and debriefing for staff who are often isolated.

The Local Area Coordinator and Senior Worker for the Lead Agency in the North West have responsibility for further exploring opportunities for assistance and implementing these initiatives.
Commitment to working with Housing Tasmania

The *Housing Connect* partners already have good working relationships with *Housing Tasmania* both at a policy and operational level both regionally and at state level.

*Housing Connect* will further develop and strengthen these relationships through the three Regional Reference Groups with *Housing Tasmania* being a key partner.

This will ensure *Housing Tasmania* have direct input into the Regional Homelessness Plans and capacity to influence further developments.

The Regional Reference Groups will make some key recommendations and identify strategies to improve services and outcomes for people who are homeless or at risk. With improved access to data through *Ask* this will enable the sector (including *Housing Tasmania*) to collaboratively engage in evidence-based planning to address the issue of homelessness.
Commitment to working with Better Housing Futures

*Housing Connect* Collaborative Partners understand that the nearly formed *Better Housing Futures* cooperative (BHF) is an important part of the collaborative response to people who are homeless or at risk.

Under the new *Housing Connect* model BHF providers will retain capacity to undertake initial assessments through *Ask* and will load clients’ details onto *Ask* which will streamline assessment and referral processes. This will necessitate close working relationships between *Housing Connect* and *Better Housing Futures* on management of client issues.

Protocols will also be developed with BHF providers so that additional services for their clients can be accessed through a direct link with *Housing Connect*.

The Local Areas Coordinators will work with BHF accommodation providers to develop protocols and Memorandums of Understanding in order to develop good working relationships, linkages and improved access for people who are homeless or at risk of homelessness to community housing.

*Better Housing Future* (BHF) providers (starting with the newly appointed *Mission Housing* group in the South) will be invited to participate in the Regional Reference Groups. This will ensure that these providers have capacity to influence future planning and developments.
| Commitment to working with existing tenants | In addition, *Housing Connect* will work with *Housing Tasmania* and *Better Housing Futures* providers to ensure tenants already in properties have access to support to maintain their tenancies, mostly through level 1-support services. Early identification of risk factors will be a focus in developing protocols with all housing providers. Some of these protocols already exist between individual *Housing Connect* partners and *Housing Tasmania* so the work in this area will establish more formal processes and ensure consistency across the State. |
| Integration with Type 3 services | *Housing Connect* is committed also to working with DHHS to facilitate integration between Types 1 and 2 and Type 3 Accommodation Services as the Review of these services is completed. |
| Formal Mechanisms for working with all services will be developed | Working in an integrated way with all relevant services will be a continued priority for *Housing Connect*. Where there is overlap of service delivery between *Housing Connect* and other Organisations (such as Wyndarra, West Coast Council and Better Housing Futures) immediate formalisation of the relationship will be required. It is anticipated that formal protocols or *Memorandums of Understanding* (MOUs) will be developed with these agencies, using templates approved by DHHS. However, while protocols and MOUs provide a useful tool for formalising working relationships, they must be based on sound working relationships and shared understandings. *Housing Connect* will work towards developing MOUs with mainstream services in the second phase of regional homelessness prevention as detailed on pp. 64-65. |
(d) Front Door (Type 1) Services

**Front Door roles**

The *Front Door* will:

- Provide a clearly branded point of reference for housing and homelessness issues;
- Consolidate all information, advice, assessment and referral services in the housing and homelessness sector in the one service, preventing the need to access multiple services;
- Connect clients directly to skilled staff who can undertake a range of functions rather than speaking to multiple people or going to multiple services;
- Enable key information to be collected and shared with appropriate services (with the client’s consent);
- Provide a collaborative, integrated and consistent response across the State;
- Provide seamless referrals to support and other services via *Ask*;
- Enable clients to be monitored to ensure they get the services they need;
- Allow early identification of client need so that preventative action can be taken to prevent homelessness; and
- Consolidate activities relating to developing and maintaining relationships and linkages with other services.
<table>
<thead>
<tr>
<th>Access options</th>
<th>In addition to the five regional Front Door locations clients will have the option to access Housing Connect via:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• A 1800 after hours contact number for emergency accommodation, information, advice and referral;</td>
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<tr>
<td></td>
<td>• Outreach appoints for people with limited mobility or for those who may be leaving hospital, corrections or other forms of state and institutional care into homelessness; and</td>
</tr>
<tr>
<td></td>
<td>• Internet and remote regional access points for applications for bond and rent assistance.</td>
</tr>
</tbody>
</table>

| Regional access points | There are currently 28 regional access points located across the North and North West regions and 12 in the southern region that will continue to provide bond and rent application services for people with limited access to the Front Door offices. These remote services are currently located with neighbourhood and community houses and health centres, and will be expanded under the Housing Connect model to include further locations. |

| Operating hours | The service will operate from 9.00 am to 5.00 pm Monday to Friday with a telephone service operating after hours for people who need crisis accommodation. The Housing Connect After Hours Service (HCAHS) will operate from 5.00pm to 9.00am Monday to Friday and 24 hours on Saturdays, Sundays and public holidays. The service will be accessible state-wide via a free-call (1800) phone number. |
Utilisation of Ask

The utilisation of ASK will create a number of efficiencies and improvements to client services:

- Demographic information and accommodation history will be instantly available to the ‘Front Door’ staff or other appropriate services (as requested by the client).
- Information from day services will be accessible by HCAHS staff so there will be increased consistency across the state. (Staff currently have to use separate ICT systems to communicate, not only between the ‘day’ staff and ‘after hours’ staff but also across ‘day’ services, which is often a double-handling of information.)

There will be ability to ‘track’ clients to ensure they don’t get lost within the service system.

Links to accommodation

The provision of immediate and emergency accommodation will be delivered through linking clients with:

- Shelters;
- Negotiated family or other social supports;
- Brokered accommodation options;
- Police facilitated ‘safe at home’ option; and
- Community tenancy options.

Depending on a client’s needs, risk factors and eligibility the appropriate accommodation option will be sought and referred to by the Front Door worker, who will then refer to and coordinate any necessary services for ongoing support.

In addition, all Front Door workers will complete public housing applications with presenting clients seeking this option.
Support provision

On completion of the immediate needs assessment, an initial case plan will be developed. The *Front Door* worker will determine the appropriate level of support required and will present the client with available referral point options.

Once a referral option is identified, the *Front Door* worker will (depending on a client’s need and choice) either place a referral to the support service directly through the *Ask* system, or complete a ‘warm’ referral by phoning the support service directly and establishing the link for the client with the service directly.

Once engaged with the support service, the client will complete a more in-depth assessment with their support worker and will begin to build upon their initial case plan to further refine their goals and path towards achieving independence from the service system.

In situations where emergency accommodation ends before transitional or independent accommodation is established, the support service will be responsible for engaging accommodation services further and informing the *Front Door* of these changes through *Ask*. 
Coordination of accommodation and support

Following referral, the client will move through the Front Door to support with any established links to accommodation. The Front Door worker will track engagement with support and accommodation services via Ask, with alerts being generated where engagement is not occurring. When a Front Door worker is alerted to non-engagement, the worker will contact the client, support service and accommodation service to re-establish links.

There may also be times where a client’s presenting circumstances change while moving through the system from the Front Door to support, leading to a need to revise the level or type of support the client was initially referred to. When this occurs, support services will have the capacity to vary their level of support provided to the client to avoid the need for further referral or a change in workers.

In these instances, the support agency will report any support level changes to the Front Door via Ask.

All access to Housing Connect Services will be through the Front Door

The Front Door services will be sensitive to the needs of clients who require specialist and sensitive responses, especially clients escaping domestic and family violence and Youth clients.

However, the collaborative partners are mindful that providing alternative access pathways that bypass the Front Door will be counterproductive and unsustainable in the long term. It is important that all clients come through the Front Door to access services and that there is no duplication of Front Door services by emergency accommodation and support services.

The specialist response model is therefore predicated on using Front Door staff to provide outreach services rather than sub-contracting to other agencies such as shelters to perform these functions. This ensures that there will be no ‘back door’ referrals to services that by-pass the Front Door.
1) Information advice and referral service

| **Front Doors will provide information and advice on all housing related matters** | The *Front Door* will be a *one-stop-shop* for information, advice and referral for people who are homeless or any member of the community seeking general information about housing. *Front Door* staff will provide one-off or short-term assistance, information, advice and referral. The initial service will provide information pertaining to housing and homelessness where ongoing support is not required.

Clients will be able to self-refer or be referred by other services and they may access the *Front Door* in person, over the phone or by other services making referrals through *Ask*.

The advice and referral service will be client-focused and staff will be equipped with the skills to deal with a wide range of clients and situations. |
| **Developing and up-to-date knowledge of local services** | All staff will have up-to-date knowledge of the services and resources available. The Local Area Coordinator will further develop this knowledge base, building on work already undertaken in the development of the State Homelessness Plan. Staff will be highly skilled and possess a wide range of knowledge and be able to provide information, advice and ‘warm’ referrals.

The knowledge base will include all forms of housing and housing assistance as well as specialist and support services. |
**Concierge model**

Clients accessing support through the Front Door office locations will be greeted by a ‘concierge’ and triaged to the appropriate worker. All Front Door workers will be highly skilled and able to offer information, advice and referral to every client entering the service. At peak times the concierge will invite them to take a seat in the waiting room and give them an idea of the waiting time to see a worker. Client names will be entered into a ‘duty diary’ so that they are seen in order of arrival. There will also be provision to prioritise people within this system.

The smaller sites (Burnie) will operate with a shared reception but a similar process will be followed. Additional training and support will be provided to the Burnie Front Door receptionist to ensure capacity to perform similar functions to the concierge roles.

<table>
<thead>
<tr>
<th>1800 number</th>
</tr>
</thead>
<tbody>
<tr>
<td>A statewide 1800 number will be provided for accessing Housing Connect. Callers will be diverted to the relevant Front Door for their area during business hours. The same number will also provide a statewide after hour’s service after 5.00pm and during weekends and public holidays.</td>
</tr>
</tbody>
</table>
2) Intake, assessment, initial case planning and referral

<table>
<thead>
<tr>
<th>Front Door services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Following triage, a client who requires more than general information will work through an assessment with the Front Door worker to determine needs, risks and client goals. Through the common assessment framework, an initial case plan will be developed and referrals made to accommodation and support providers.</td>
</tr>
</tbody>
</table>

Each Front Door will provide comprehensive intake assessment and case planning and referral services such as:

- Intake and screening of all clients’ entry into Type 1 and 2 services;
- Comprehensive assessments using the Common Assessment Framework and the functionality of Ask to identify client needs and activities that will have an early intervention focus;
- Complete and lodge a social housing application;
- Complete and lodge an application for Private Rental Financial Assistance;
- Provide information on a range of housing options e.g. private, public, community, supported facilities;
- Provide information on a wide range of services and issues such as mental health, alcohol & other drug services;
- Make ‘warm’ referrals (call services direct and make appointments);
- Initial safety risk assessment; and
- Referral to appropriate accommodation and support providers (Service Type 2, Type 3, mainstream support services, specialist support services and brokered, public, community and private housing options).
### After hours 1800 homeless advice after hours

<table>
<thead>
<tr>
<th>The Housing Connect After Hours Service (HCAHS) will operate outside business hours</th>
<th>This service will be staffed with skilled workers that have excellent knowledge of the relevant services available across the state. Staff will be equipped with a mobile phone and laptop computer with full access to software and databases.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Services provided</strong></td>
<td>The after hours service will:</td>
</tr>
<tr>
<td></td>
<td>• Undertake an assessment with callers using the Common Assessment Framework Tool;</td>
</tr>
<tr>
<td></td>
<td>• Enter client details into Ask;</td>
</tr>
<tr>
<td></td>
<td>• Refer clients in need to appropriate shelters or brokered accommodation in hotels, motels or caravan parks;</td>
</tr>
<tr>
<td></td>
<td>• Make ‘warm’ referrals: all arrangements will be made by the HCAHS worker and confirmed with the caller, including any transport requirements to the accommodation and meals needed; and</td>
</tr>
<tr>
<td></td>
<td>• Provide information about and referrals to any relevant daytime services including mainstream and specialist Homelessness Services.</td>
</tr>
<tr>
<td><strong>Follow up of after hours referrals will be undertaken each day</strong></td>
<td>The HCACS will operate as an extension of the (day) Front Door services. Front Door staff in each of the regions will receive notifications each morning (via Ask) and will provide a follow up phone call to the clients to offer support. This will improve early intervention by ensuring that people who call after hours can be referred to a support service before the situation triggers a crisis.</td>
</tr>
<tr>
<td><strong>State-wide management will create efficiencies</strong></td>
<td>The HCACS will operate state-wide and be managed by one of the two Lead Agencies, which will create efficiencies by avoiding duplication of this service. The service will be overseen (state-wide) by one Manager to ensure ‘best practice’ principles are adopted and service delivery is consistent and efficient.</td>
</tr>
</tbody>
</table>
### 4) Financial Assistance for Private Rental

<table>
<thead>
<tr>
<th>Service model</th>
<th>The service model for providing financial assistance for private rental will be as follows:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Financial assistance for private rental will be available in all <em>Front Door</em> physical locations;</td>
</tr>
<tr>
<td></td>
<td>• Funding will be managed by and overseen by the Lead Agencies with consistent processes employed by both Lead Agencies; and</td>
</tr>
<tr>
<td></td>
<td>• To provide maximum flexibility potential clients will be able to:</td>
</tr>
<tr>
<td></td>
<td>• Make an appointment to see a worker;</td>
</tr>
<tr>
<td></td>
<td>• Attend <em>Front Door</em> services on a ‘drop-in’ basis; and</td>
</tr>
<tr>
<td></td>
<td>• Make a remote or ‘external’ application.</td>
</tr>
</tbody>
</table>

| A proportion of *Front Door* staff will provide private rental support | A proportion of *Front Door* staff will have a primary focus on the provision of bond and rent assistance. The current Private Rental Support Service data shows this function is initially likely to experience the highest demand for clients. However, for private rental support clients who are experiencing multiple needs and requiring immediate housing or homelessness support combined with bond and rent assistance there will be *Front Door* workers available to provide both levels of support. |

| Remote or external application facility | A remote application service will also operate to enable people to apply for assistance from other locations. Relationships will be developed with rural service providers where applications can either be lodged directly via *Ask*, through a web-based system or through faxing hard copies of applications. This capacity to make a remote application will also be available at *Front Doors* during ‘peak’ times when people are unable to wait to see a worker. |
Dedicated private rental workers will follow up with clients who make remote applications.

<table>
<thead>
<tr>
<th>Advantages of the new model for private rental assistance</th>
<th>The new Housing Connect model for Financial Assistance for private rental will meet the priorities of the new system and benefits of an integrated model in the following ways:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greater access to clients by making the service available in all Front Door locations as well as via remote access;</td>
<td>• Greater access to clients by making the service available in all Front Door locations as well as via remote access;</td>
</tr>
<tr>
<td>More flexible access to assessment staff to suit personal preference – either to make an appointment or use a drop-in service;</td>
<td>• More flexible access to assessment staff to suit personal preference – either to make an appointment or use a drop-in service;</td>
</tr>
<tr>
<td>More consistent assessment for applicants by development of consistent guidelines between the two Lead Agencies;</td>
<td>• More consistent assessment for applicants by development of consistent guidelines between the two Lead Agencies;</td>
</tr>
<tr>
<td>Increased focus on early identification of needs by providing a broader assessment of needs and referral to services for clients presenting for private rental support;</td>
<td>• Increased focus on early identification of needs by providing a broader assessment of needs and referral to services for clients presenting for private rental support;</td>
</tr>
<tr>
<td>and</td>
<td>and</td>
</tr>
<tr>
<td>Capacity to redirect funding to other preventative and support processes to clients involved in private rental over time.</td>
<td>• Capacity to redirect funding to other preventative and support processes to clients involved in private rental over time.</td>
</tr>
</tbody>
</table>
5) Early intervention brokerage

<table>
<thead>
<tr>
<th>Provision of brokerage funds</th>
<th>Early intervention brokerage funds will be available to facilitate case plan goals of people who are experiencing or are at immediate risk of homelessness. Brokerage will only be used to further case goals as planned by clients in conjunction with their support worker and documented in a written case management plan. Brokerage may be used to:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Maintain accommodation;</td>
</tr>
<tr>
<td></td>
<td>• Purchase short term emergency housing through the private rental market;</td>
</tr>
<tr>
<td></td>
<td>• Purchase material aids or resources such as whitegoods, household security or transport to services; and</td>
</tr>
<tr>
<td></td>
<td>• Purchase specialist short term services such as counselling or child care.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Priority for brokerage funds</th>
<th>Priority will be give to:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Clients who are experiencing primary homelessness and those with high needs;</td>
</tr>
<tr>
<td></td>
<td>• People who are escaping domestic and family violence and who may be at risk of homelessness; and</td>
</tr>
<tr>
<td></td>
<td>• Crisis accommodation rather than purchase of goods and services.</td>
</tr>
</tbody>
</table>

While this change in priority will be reflected in the practice of the new Housing Connect model further consultation and discussion with support agencies will occur so that staff can have further input into the new model of prioritisation.
The process for allocation of Early Intervention Brokerage funds will be as follows:

- All brokerage funds will be held by the two Front Door Lead Agencies;
- Support workers applying for brokerage funds on behalf of their clients will submit their application (including the case management plan) to the local Lead Agency; and
- The Lead Agency will have responsibility for allocation of funds and overseeing the expenditure of the annual brokerage allocation.

Initial allocation of funds between the two Lead Agencies for Early Intervention Brokerage will be based on current allocation patterns. Any shift of funding between regions or between other funding ‘blocks’ such as funds for private rental assistance will only occur following review of data after a six-month period.

Whilst there is some data on brokerage expenditure it is now outdated and not believed to reflect current expenditure patterns. A review of expenditure will be undertaken in conjunction with the Department before the end of 2013.

Housing Connect will take responsibility for working with the Department to formally review and implement new brokerage guidelines in conjunction with the sector, to reflect the priorities outlined above.

The exception to this allocation of brokerage funds will be the Wyndarra and West Coast Council agencies that are providing services to the far northwest. These services will continue to hold their own brokerage funds and have responsibility for their allocation as per current contracts.
The new model for early intervention brokerage will meet the priorities of the new system and benefits of an integrated model in the following ways:

- Improved prevention and earlier intervention by streamlining use of brokerage funds and ensuring a clear link to case management and planning;
- Service integration and efficiencies by having all brokerage funds held by the two Lead Agencies reducing administrative and reporting responsibilities;
- More targeted support by clearly prioritising the use of these funds;
- Greater consistency and equity by having all funding decisions made by the two Lead Agencies using a consistent state-wide set of guidelines; and
- Enhanced accountability and control by reducing the number of organisations making brokerage decisions to the two Lead Agencies who will also be responsible for overseeing the funding and reviewing the overall allocation of these funds.
### 6) Social housing assessments

| Social housing assessments will be conducted as part of the total package of assessments | The *Front Door* will be responsible for social housing assessments through the *Common Assessment Framework* and utilising the capacity of *Ask*. Clients will be prioritised for assistance including public housing; community housing; supported facilities and community tenancies. |

<table>
<thead>
<tr>
<th>Advantages of incorporating social housing assessments into the <em>Front Door</em></th>
<th>There are many benefits of incorporating this function into the <em>Front Doors</em> including:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Assessments will be completed as part of an integrated response to people’s housing needs;</td>
<td>• Assessments will be completed as part of an integrated response to people’s housing needs;</td>
</tr>
<tr>
<td>• Clients will only need to tell their story once instead of to multiple providers or homelessness services if they require additional assistance;</td>
<td>• Clients will only need to tell their story once instead of to multiple providers or homelessness services if they require additional assistance;</td>
</tr>
<tr>
<td>• Clients can complete one housing application that will suffice for a range of different housing types; and</td>
<td>• Clients can complete one housing application that will suffice for a range of different housing types; and</td>
</tr>
<tr>
<td>• Clients who present to the <em>Front Door</em> purely to apply for social housing may have a range of other unmet needs that can be addressed. This will assist with the early identification of any needs and possibly prevent issues from escalating.</td>
<td>• Clients who present to the <em>Front Door</em> purely to apply for social housing may have a range of other unmet needs that can be addressed. This will assist with the early identification of any needs and possibly prevent issues from escalating.</td>
</tr>
</tbody>
</table>
7) Regional Homelessness prevention

<table>
<thead>
<tr>
<th>Housing Connect will have responsibility for homelessness prevention activities</th>
</tr>
</thead>
</table>

*Housing Connect* will coordinate the delivery of homelessness prevention activities within the local service network and act as a central point for liaison between government, service providers, mainstream services and other key stakeholders.

The main vehicle for prevention activities will be regional homelessness prevention plans to be developed for the South, North and North West.

<table>
<thead>
<tr>
<th>Phase one – Facilitating change and planning action</th>
</tr>
</thead>
</table>

In the first phase *Housing Connect* will facilitate the change process to the local service sector and collaborate with service providers to develop a local model and business plan.

The major tasks will be:

- Assisting key stakeholders to develop a shared understanding of a partnered approach to homelessness in the local area;
- Building and maintaining relationships between key stakeholders within the sector;
- Initiating and organising a *Regional Reference Group* comprising key stakeholders to deliver information and develop the strategic plan; and
- Negotiating a client centred approach to decision making.

The major output will be a local model and business plan that will contribute towards a state-wide plan developed by the *Housing Connect Collaborative Steering Group*. 
In the second phase, *Housing Connect* will focus on maintaining a strong relationship with local service providers while developing a detailed work program to implement the business plan.

The major tasks will be:

- Strengthening the relationships of stakeholders involved in the *Regional Reference Groups* and developing cohesive and effective meeting procedures;
- Developing a work program based on the strategic plan;
- Brokering partnerships with key providers and negotiating memorandums of understanding and protocols to formalise the relationship;
- Raising awareness of referral pathways;
- Developing and delivering training for specialist and mainstream services in relation to homelessness and social housing;
- Developing and delivering information packages for a variety of audiences; and
- Contributing to development of policies and procedures.

The major outputs will be well-managed and effective *Regional Reference Groups* and a work program that achieves objectives.
<table>
<thead>
<tr>
<th>Appointment of Local Area Homelessness Prevention Coordinator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pivotal to regional homelessness prevention will be the appointment of staff member with dedicated responsibility for this activity in each region – South, North and North West. (While there are two ‘regions’ specified in the RCP, North and South, the appointment of two local officers to cover the North and North West is necessitated by the geography of Tasmania and the need to foster local relationships.) Officers will be appointed on a full time or part time basis depending on funding and the agreed scope of work. A draft position description for this role has been developed incorporating the tasks and duties discussed above so that the appointment of staff to these positions can be undertaken as quickly as possible.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Future resource development</th>
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</thead>
<tbody>
<tr>
<td>Local area coordinators will undertake the development of local resources that can be used for community education and information sharing. Liaison with DHHS will be undertaken to build on resources that have already been developed.</td>
</tr>
</tbody>
</table>
(e) Type 2 Specialist Support Services

1) Referral and tracking processes

<table>
<thead>
<tr>
<th>There will be three levels of support services available to Housing Connect clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type two services will provide specialist support for people who are experiencing or at risk of homelessness. There will be three levels of support:</td>
</tr>
<tr>
<td>▪ Level One support – Tenancy support</td>
</tr>
<tr>
<td>▪ Level Two support – Crisis support</td>
</tr>
<tr>
<td>▪ Level three support – Ongoing support</td>
</tr>
</tbody>
</table>

The level of support provided to clients will directly relate to the intensity, duration and focus of support required by the presenting client, as assessed by the Housing Connect Front Door staff.

<table>
<thead>
<tr>
<th>Referral process from Front Door to Support Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information gained through completion of the Common Assessment Tool will support the Front Door worker in determining the most appropriate level of support for a client’s particular circumstances. Front Door workers will develop an initial case plan with a client that will include responding to immediate needs and targeting support to a client’s presenting issues. Workers will then make a referral to one of the three levels of support.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Distinction between type 1 and type 2 services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detailed protocols will be developed to clearly distinguish between level 1, 2 and 3 services. These protocols will include:</td>
</tr>
<tr>
<td>- Protocol purpose statement;</td>
</tr>
<tr>
<td>- Functions and focus of involved services;</td>
</tr>
<tr>
<td>- Detailed process and time frame performance indicators for;</td>
</tr>
<tr>
<td>o Referrals;</td>
</tr>
<tr>
<td>o Acceptance of referrals; and</td>
</tr>
<tr>
<td>o Provision of feedback.</td>
</tr>
</tbody>
</table>
Utilisation of Ask

*Ask* plays an integral role in the referral process. As well as providing the means by which the *Front Door* worker will process referrals and share information with support services, *Ask* will also:

- Determine a support service’s referral quota;
- Determine a support service’s capacity to receive referrals across the different levels of support; and
- Provide the *Front Door* service with vital information regarding the referral’s status and any need for potential follow up.

Further liaison is occurring with *Ask* developers to ensure that the model requirements are able to be satisfied.

### Referrals will involve three stages:

The *Front Door* will be responsible for three stages of referrals to support services:

- Identifying need;
- Determining the appropriate support service; and
- Tracking status.

### Stage 1: Identifying need

Stage one will involve assessment and identification of client support needs and collection of all relevant information to be entered into *Ask*. Once this stage is complete, a support service will be identified that meets the needs of the client and has the capacity to bring the client onto caseload.
Stage 2: Determining service

As most support services (especially in the southern region) will operate across support levels 2 and 3, the next step will be to determine which of the services offers the required specialised response to a client’s presenting needs. In some cases this will narrow referral options to one or two services.

In cases where quotas\(^7\) are relatively equal and specialisations are available across multiple options (such as where a client’s needs require a generic support response) a client will be able to make a choice of services based on preferential options such as location, previous experience or personal values base.

\(^7\)See below for explanation of quota system
<table>
<thead>
<tr>
<th>Stage 3: Tracking status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Once a support service is selected, a referral will be made electronically through <em>Ask</em> and the <em>Front Door</em> worker will confirm arrangements with the client while supporting them through the referral pathway.</td>
</tr>
</tbody>
</table>

- Depending on level of crisis and urgency, a referral may be followed up by a phone call at the time of the referral and specific arrangements made with the support service for the support of the client.
- However, if a phone call is not made to the referred service for a supported handover, the referred service will be alerted to the referral via *Ask*.
- If the referral is not followed up within a specified time, the *Front Door* worker will be alerted via *Ask* and will make a follow up call to the referred service to determine the status of the referral.
- All support services will have an active holding process to manage referrals in times of high demand. The Lead Agency will build responsibility for active holding into the contracted roles of support services so that accountability is clear. However, in rare cases extenuating circumstances may require the *Front Door* worker to follow up with the client and make a referral to another service.
Service referral quotas

A service referral quota will be developed under the Housing Connect model to ensure the collaborating services are able to share the service system demand equitably. The quota will be based on a service’s proportion of total service system funding and the proportion of support they will provide across the different levels of support in relation to all collaborating services.

Ask will provide the capacity to:

- Determine a support service’s referral quota;
- Determine a support service’s capacity to receive referrals across different levels of support; and
- Provide vital information regarding the referral’s status and any need for potential follow up.

Regional management committees

Regional Management Committees will monitor the information provided in Ask and negotiate referrals to support services where ‘blockages’ occur or a client has particularly complex needs. This will allow for professional judgement to supplement the assessment and monitoring processes generated by Ask.
## 2) Service Delivery Model

### Service delivery model

The Type 2 Service Delivery Model will be flexible enough to offer:

- Outreach support where the worker goes to the client (including home visits, office based appointments or meetings at any other location agreed to by client and worker); and
- Phone support (including SMS provision).

### Service delivery tools

Support services will use a consistent set of assessment and delivery tools and processes to ensure consistency across the state. The major tools and processes identified are:

- the Common Assessment Framework;
- Risk assessment protocols;
- Case planning tools;
- Referral to other services;
- *Outcomes Star*; and
- Ongoing monitoring and review

### Common Assessment Framework

The *Common Assessment Framework* will be the primary tool for collection of client information, building on initial assessment undertaken by *Front Door* staff.
- **Risk Assessment Protocols**

  While *Front Door* services will conduct an initial risk assessment, a more detailed assessment of health and safety risks will be undertaken by support services. A safety and risk assessment protocol will be developed to inform how support will be provided to increase the likelihood of safety (for client, worker and community) and client appropriate responses. This will be particularly important for clients who have mental health issues or a history of violent behaviour.

- **Case management and case plans**

  Comprehensive case management plans will be developed in consultation with the client for level 2 and 3 support. The main objective of case management will be to provide for continuity of support. Case management will ensure that:

  - Services provided are comprehensive and coordinated;
  - Support provided is consistent over time;
  - The support relationship is given clear direction; and
  - Boundaries of support are defined.

  Case plans will include the following elements:

  - Individualised goals or needs;
  - Desired or intended outcomes;
  - Resources and strengths available to the client to assist them achieve their goals;
  - Strategies to achieve the desired outcome, to be noted as identifiable and specific tasks;
  - Assignment of responsibility for carrying out the noted strategies and tasks;
  - Timeframes for actions;
  - Dates for strategies to be achieved; and
  - Dates for case plan reviews, reassessments, and exiting the service.
Referral to other services

Level 2 and level 3 service providers will provide support to clients through casework, especially where practical assistance and referral are required. Where other service providers (mainstream services, specialist services and type 2 level 1 or type 3 services) are best placed to conduct casework as it relates to specific client needs, Support Services will provide a case coordination role.

Outcomes Star

Case plans and the case management process will be regularly reviewed with the client using the Outcomes Star framework. This tool provides a consistent and measurable format for identifying client motivation, client behavioural change, case progression and outcomes achieved by clients.

Research suggests that this tool assists support services to:

- Provide more focused and in depth support;
- Increase client engagement;
- Ensure support is systemic and consistent;
- Provide shared language;
- Measure client progress across ten outcome areas involving self help, social and personal skills;
- Minimise risk of over or under service involvement;
- Reduce support periods due to a more targeted approach; and
- Provide a clear evaluative tool to measure the effectiveness of programs on the support provided to clients.

Outcomes Star has been enthusiastically embraced by three of the Housing Connect partners and its consistent application within Housing Connect Support Services will be an active goal.
<table>
<thead>
<tr>
<th>Ongoing monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support Service providers (in consultation with the client) will monitor case management progression during the life of the support relationship. Monitoring will ensure that the case plan goals and exit plans are maintaining momentum and are relevant and contemporary to the client’s needs. Type 2 workers will discuss case progression within the supervision context and from time to time complex cases may be presented by workers in a practice session to ensure all potential support options are known.</td>
</tr>
</tbody>
</table>
3) Details on levels of Type 2 support

**Level 1 – Tenancy Support**

| Level 1 services | Level 1 tenancy support services\(^8\) will be provided to tenants who are experiencing difficulties in maintaining their tenancy. It will be available to clients on low incomes within private rental, community and public housing, but will focus on young people, older single people and single parent families. Level 1 services are expected to be high volume and low intensity and will focus on tenancy issues by providing information and assistance to clients to develop skills to address tenancy issues. Tenancy support will not involve management or maintenance of the physical site (the responsibility of the housing provider).

Support provided by level 1 services will occur through a tenancy case plan but will not utilise a case management model. |

\(^8\)‘Support’ is defined in the definitions section p. 18.
| **Support likely to be provided to Level 1 clients** | Support Services will provide support, information and advocacy with regard to the relationship between the tenant and the landlord consistent with the *Residential Tenancy Act 1997* and *Residential Tenancy Amendment (Boarding Premises) Act 2003* and contemporary good practice including:

- • support to tenants in developing life skills and other knowledge and information required to ensure sustainable tenancies;
- • appropriate referral information relating to tenant issues affecting a tenancy;
- • negotiations with landlords;
- • appropriate and accessible information to tenants regarding their rights and obligations;
- • developing and implementing dispute resolution mechanisms;
- • advice on budgeting and arrears management;
- • advice on abandonment procedures; and
- • advice on eviction procedures. |

| **Delineation from *Front Door* services** | While the *Front Door* will provide clients with basic tenancy information it is expected that any clients that will require over 30 minutes of interaction will be referred to tenancy support services. |

| **Tenancy support provision** | Tenancy support services will be provided by one partner organisation (Centacare) across the state. This will ensure consistency of approach and capacity to build strong practice wisdom in this area. |
Level 2 – Crisis Support

Level 2: Crisis Support

Level two support will be provided to clients who have been assessed as experiencing or being at imminent risk of homelessness. Support will be portable and provided to clients regardless of their accommodation status and will not be attached to a particular housing response.

Case management support will to be provided for a short duration (an average of six weeks) to support the client manage the crisis experienced.

Support likely to be provided to level 2 clients

Typically clients requiring this level of support will have relatively high skill levels and capacity to invest time and effort to resolving their housing crisis. They are also likely to have access to social and family support and to be working and already linked into a community. Provision of support will focus on responding to the immediate crisis and restoring stability in their lives.

Typical support activities for these clients will include:

- providing support in developing life skills and other knowledge and information required to ensure sustainable tenancies;
- providing appropriate and accessible information to clients regarding their rights and obligations;
- Developing case management plans, where their goals and individually tailored interventions are noted, including exit planning from services and handover to mainstream services;
- Maintain regular contact to enact case management plans;
- Provision of or referral to therapeutic and specialist interventions;
- Supporting engagement or re-engagement with mainstream services;
- Connecting individuals to the community;
• Supporting links to education and employment;

• Managing finances and budgets including access brokerage or emergency aid;

• Addressing any legal matters;

• Ensuring the provision of coordinated and appropriate supports including trauma recovery, achievement, maintenance and promotion of mental and physical health;

• Where safe to do so reconnecting with family;

• Accessing brokerage funding and income support;

• Accessing appropriate longer term and more sustainable accommodation; and

• Reviewing clients’ needs and housing situation.
Level 3 – Ongoing support

Level 3 clients

Level three services will provide ongoing support to clients who continue to remain at risk of homelessness and require longer-term intervention. Clients accessing this support will no longer be in crisis but may require longer-term support to prevent reoccurrence of homelessness or return to housing crisis. It is expected that clients who will be referred to level 3 services will:

- Present with limited social or family supports;
- Have minimal available resources;
- Present with multiple and complex needs;
- Have a history of failed tenancies; and
- Demonstrate minimal life skills required to maintain independent living.

Support will be portable and flexible

Support will be portable and not attached to a particular housing response and includes provision of support to individuals who are at times without accommodation options. Case management support will be provided for as long as required, but is expected to average 12 months for the majority of cases.

Support likely to be provided to level 3 clients

Level 3 support providers will provide holistic support through a case management framework including:

- Providing support to clients in developing life skills and other knowledge and information required to ensure sustainable tenancies;
- Providing appropriate referral information relating to client issues leading to homelessness;
- Providing appropriate and accessible information to clients regarding their rights and obligations;
- Developing a case management plan, where their goals and individually tailored interventions are noted, including exit planning from services and as required handover to
mainstream services;

- Support to access longer term and more stable accommodation and where required linking to type 2 level 1 tenancy support through a seamless referral process;

- Continual assessment of client support needs an coordination of appropriate supports to address these needs;

- Service coordination;

- Maintaining regular contact to enact case management plans;

- Provision of or referral to therapeutic and specialist interventions;

- Supporting the engagement or re-engagement with mainstream services;

- Connecting individuals to the community;

- Supporting links to education and employment;

- Managing finances and budgets including access to brokerage or emergency aid;

- Addressing any legal matters;

- Ensuring the provision of coordinated and appropriate supports including trauma recovery, achievement, maintenance and promotion of mental and physical health; and

- Ongoing review of clients’ housing situation to respond to housing-specific issues that may place the client at further risk of homelessness.

- Accessing appropriate longer term and more sustainable accommodation

- Reviewing clients needs and housing situation; and

- Accessing brokerage funding and income support
### Specialist Housing Connect responses for specific populations

<table>
<thead>
<tr>
<th>Specialist responses will be provided</th>
<th>Housing Connect will provide specific Front Door and support services responses for specific populations of clients as per the Request for Proposal specifications.</th>
</tr>
</thead>
</table>
| • Specialist Front Door Services   | *Front Door Services will have specific responses for:*  
  - Clients escaping domestic and family violence; and  
  - Youth clients.  
| • Specialist Support Service responses | *All crisis support and ongoing services will be delivered by way of five service specific responses:*  
  - Generic response;  
  - Domestic and family violence specific response;  
  - Youth specific response (young people aged 16-20 years);  
  - Child response; and  
  - Aboriginal and Torres Strait Islander response. |
| Details of the specific responses are provided below | Details of the specific responses for these client groups are provided below. |

### 1) Clients escaping domestic and family violence

| Specialist Front Door service | A specialist *Front Door* response for clients escaping domestic and family violence will be provided by:  
  - Employment of at least one practice consultant in each region who has specialist skills in this area. The practice consultant position will be responsible for informing service practice within that team and ensuring access to relevant resources (including relevant legislation), information and contemporary practice research;  
  - Ongoing training and skills development for all *Front Door* staff with initial training identified in conjunction |

with women’s services;

- Capacity to provide *Front Door* services on an outreach basis at some shelters or other nominated locations;
- Capacity for brief initial assessments with rapid ‘warm’ referral to Type 3 accommodation services; and
- Priority ‘warm’ referral to relevant Type 2 Support Services once immediate needs have been assessed, and crisis accommodation needs have been arranged. Clients escaping domestic and family violence will be given priority access to support services after assessment by *Front Door* services.
- Support to clients escaping domestic and family violence will be portable and able to be delivered at a location of the client’s choice as negotiated with the service provider: this will include emergency accommodation and Shelters.

**Women presenting to shelters or escorted by police**

Many women actively escaping domestic and family violence currently present directly to shelters or are escorted there by the police. As previously mentioned, a specialised *Front Door* support worker could be located with at least one shelter enabling streamlined access to *Front Door* services. As previously emphasised, this will be an outreach *Front Door* service and not an alternative pathway to access support.

This collaborative response provides a pathway for women in the most dire of circumstances to have immediate access to a safe, secure location where they can directly present or be immediately escorted to an environment separate to those seeking generic or other forms of housing support.

**Specialist support services**

All organisations within *Housing Connect* already have extensive experience providing direct services to women and children escaping domestic and family violence and are in close communication with networks involving specialist domestic violence services.
Two specialist support teams will provide a specialist response for clients escaping domestic or family violence (in the north and south).

These teams will have a primary focus on responding to women and children escaping domestic violence. Workers in these teams will receive additional training as recommended by specialist services working with women escaping domestic and family violence as well as being provided with the opportunity to share best practice and resources.

These teams will also be responsible for working with the Local Area Homelessness Prevention Coordinator to facilitate cross program protocols with mainstream services to ensure client safety and to facilitate an effective response.

Support will be based on individual need, but will focus on stabilising accommodation with a primary focus on:

- Safety;
- Health treatment;
- Trauma treatment/recovery;
- Legal support;
- Immediate financial assistance;
- Establishing/re-establishing family and social connections (which are often broken down as a result of domestic violence relationships); and
- Assessment and support for accompanying children.
2) Youth Clients

<table>
<thead>
<tr>
<th>Specialist Front Door response for Youth</th>
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<tbody>
<tr>
<td>Young people will have access via any of the identified pathways into the Front Door, as well as through outreach appointments to any Youth specific support or accommodation services.</td>
</tr>
</tbody>
</table>

- **Employment of a Youth Worker in each region**

  Front Door sites in the North and South will employ a specialist youth worker who will provide practice consultant services to the remaining regional sites, supporting all Front Door workers with skills development, training and consultation for youth specific cases. Youth workers will be responsible for receiving all youth specific referrals into the Front Door and following up all youth specific outreach assessment appointments.

  The specialist Front Door Youth Worker will:

  - Work with young clients when possible;
  - Provide specialist advice to other front door staff
  - Maintain currency with best practice principles and policy changes;
  - Establish and maintain close linkages with specialist Youth providers including the Gateway Services (in liaison with the Local Area Coordinators);
  - Identify and minimise service duplication and service gaps and provide feedback to the Regional Reference Group;
  - Attend specialist meetings and networks;
  - Ensure all staff attend training related to those cohorts (identified in conjunction with existing specialist services);
  - Ensure there is priority access from the Front Door to specialist services; and
  - Facilitate activities likely to be beneficial to young people such as:
    - Family reconciliation (where appropriate and safe to do so)
- Support to young people to remain or re-engage in school (or schooling alternative), including liaison with school staff; and

- Support in life skill development required for independent living.

- **Specific engagement strategies for Youth**

  Targeted youth communication and engagement strategies will be utilised to strengthen the referral pathway from the *Front Door* to accommodation and support services. It is recognised that there is a high potential for loss of engagement with young people between the point of initial referral and follow up by support services. Therefore there will be an emphasis on ensuring:

  - Priority ‘warm’ referrals to support services and accommodation;
  - Flexibility with appointment times and outreach locations;
  - Use of social media, SMS and other technologies for arranging meetings and ongoing communication; and
  - Provision of transport to referred accommodation and support services.

  - Close liaison with Youth Specific Services such as the *Reconnect* program.

- **Formal linkages with Youth Services**

  As mentioned, formal linkages will be established through the *Local Area Coordinators* with *Gateways*, Child Protection Services and Youth Justice Services to streamline referral processes for at-risk young people.

  The development of protocols or memorandums of understanding is an ultimate objective, but will depend upon first establishing good relationships and networks. As the implementation of the State Homeless Plan seems to indicate, the development of formal referral arrangements requires considerable effort over time and is not facilitated by coercion or
Accommodation

Front Door accommodation referral points will be:

- Youth specific shelters;
- Options identified through re-establishing connections with family or social networks;
- Brokered accommodation options; and
- Available social housing options.

Young people seeking to relocate from rural to metro areas to access education will be linked in with education specific accommodation programs available to support their needs.

Support

There will be a specialist youth support service available in each region to receive referrals across the three support service types. These services will receive a ‘warm’ referral from the Front Door worker during the initial contact meeting with the young person. During this referral, support services will schedule a meeting time and place for their first appointment with the young person directly. If necessary the Front Door will provide transport to the support service for follow up.

Youth support services will have a primary focus on supporting the young person to access stable accommodation and reach independence from the accommodation support service system. This may include support with re-establishing family connections and social networks, education, employment, access to the Transition to Independent Living Allowance, and overcoming other barriers to accessing accommodation. Youth support services may also broker in or refer to highly specialised services for support in practice fields identified as high risk for young people, such as sexual health, young parenting, mental health and problematic substance use services.

Specific engagement strategies for Youth

Targeted youth communication and engagement strategies will be utilised to strengthen the referral pathway from the Front Door to accommodation and support services. It is recognised that
there is a high potential for loss of engagement with young people between the point of initial referral and follow up by support services, therefore there will be an emphasis on ensuring:

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- Flexibility with appointment times and outreach locations;
- Use of social media, SMS and other technologies for arranging meetings and ongoing communication; and
- Provision of transport to referred accommodation and support services.
### 3) Clients who are children

<table>
<thead>
<tr>
<th>Child specific response</th>
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<tbody>
<tr>
<td>All children in households presenting to Type 2 (Level 2 and 3) services will have their individual needs assessed and specific case plans developed to meet their individualised needs. Case plans will include particular reference to school engagement, and specialist children’s services where required.</td>
</tr>
<tr>
<td>In addition, two children’s workers (one based in the north and one based in the south) will be available to provide support and advice to support staff in each region and facilitate close communication with children’s services.</td>
</tr>
<tr>
<td>In order to raise awareness of the importance of focusing on the needs of children, all Support staff involved in delivering level 2 and 3 Support Services will receive training using the <em>Safeguarding Children</em> professional development program.</td>
</tr>
<tr>
<td>Close linkages will be established between <em>Housing Connect</em> and existing services especially the <em>Gateways</em> and <em>Family Support Service</em> with the expectation that <em>Local Area Coordinators</em> will facilitate the required linkage between the two services.</td>
</tr>
</tbody>
</table>
4) Clients who are Aboriginal or Torres Strait Islander

Aboriginal and Torres Strait Islander specific response

All organisations within the Housing Connect have experience working with Aboriginal and Torres Strait Islander people and have addressed this standard within quality assurance processes.

Support will be provided to Aboriginal and Torres Strait Islander persons in a culturally appropriate manner including:

- Identifying any culturally specific support needs;
- Providing the opportunity to include options for linking in to the client’s community, within the case plan;
- Access to Aboriginal specific services; and
- Support for Aboriginal and Torres Strait Islander people to return to country when requested.

There will be three designated Aboriginal employment positions within the Housing Connect support services. Aboriginal clients will be offered referrals to the designated Aboriginal Worker in their region.

These roles will provide specialist support to Aboriginal people and act as a resource for other staff in relation to Aboriginal issues. The employees in these roles will have they already have well-established links with their local Aboriginal communities and be supported by and have involvement in an Aboriginal Advisory Group.
(g) **Client pathways through the *Housing Connect System***

The anticipated client pathways through the *Housing Connect* system have been documented in attachment 1a (generic client), attachment 1b (Client escaping domestic and family violence) and attachment 1c (Youth client).

These attachments provide a simplified diagrammatic illustration of the pathways through *Front Door* to Support Services. The various services provided and processes that will be in place have been illustrated in a linear fashion for the purposes of this diagrammatic representation.

However, it should be emphasised that client pathways are rarely as simple or linear as a diagram may suggest! As explained in considerable detail in the service delivery model, services will be provided flexibly and responsively and may be accessed at many different points.

| The Front Door service will be responsible for case coordination and monitoring progress | The *Front Door* service will have responsibility for monitoring client progress and ensuring that there is suitable case coordination during a client’s pathway through *Housing Connect*. The *Front Door* service will also have responsibility for making appropriate referrals to other services when a client presents who does not have a housing issue but is seeking assistance with other needs. |
Pathways for clients are likely to include setbacks and obstacles

Clients who homeless or at risk of homelessness may face a number of setbacks in their pathway towards achieving a long term housing solution. These setbacks may have implications for engagement, progress towards achieving goals, self-esteem and feelings of self-worth, and ultimately they may affect a person’s capacity for managing and achieving change.

While the Housing Connect service system provides structured pathways to long term housing options, these pathways are flexible and responsive to the changing circumstances in peoples’ lives.

Services will engage clients in constant conversations about their needs

Through progressive assessments, and in particular the use of the Outcome Star as a tool for measuring holistic change over time, support services will engage in constant conversations with clients about their progress, needs and goals. At times where setbacks or changes in circumstances impact upon people’s lives and alter the course of a case plan significantly, support services will re-evaluate the necessary supports in place for a client and develop new case plans.

This may involve brokering in new or specialised supports, varying a client’s support level from support type two to support type three, or elevating a client’s case to regional management meetings for a multi-service approach to support.
A client’s changing life circumstances will have an impact on their capacity to engage with the service system over time. *Housing Connect* has a re-engagement strategy to support clients at each step along the service pathway to re-connect with services if barriers to engagement should arise:

- Where a client opts not to accept a referral for support after having their immediate needs met through the *Front Door*, or where a client disengages from support for an extended period of time leading to their case being closed by the support service, the client will at any time be able to re-enter the service system through the *Front Door* for a new assessment of their support needs.

- Changes in clients’ life circumstances will be recorded on file, and a new case plan will be established taking into account these circumstances, and a new referral will be placed with a support service.

- Where there is disengagement and a case is closed by a support agency without the client reaching the outcomes defined in their case plan, the *Front Door* will be informed via Ask. Subsequent entry for the client through the *Front Door* will be managed with a higher level of coordination between the *Front Door* and support services to augment future engagement.

- Where a client has had multiple episodes of non-engagement and re-engagement, or where a client’s engagement with support is intermittent and progress towards achieving outcomes is not advancing, the client’s case will be elevated to a regional management meeting where further support options will be explored with the potential of multi-service response being implemented.
Many women leaving domestic and family violence situations often return to their former partners multiple times before making the final break to living independently.

Many women may cycle through Housing Connect with varying levels of engagement before completely committing to or realising the goals of a case plan. For some women there may also be a sense of guilt associated with accessing a service a number of times that may contribute to a reluctance to seek help on an ongoing basis.

*Front Door* and Support Services will be particularly sensitive to the needs of women and their children on their journey to independence:

- Multiple re-entry points into Housing Connect will be accessible to women who have previously left support.
- Women re-engaging with former support workers with established trust and familiarity will, demand permitting, have the option of beginning a new case plan directly with that worker rather than being referred back through the *Front Door* and being allocated a new worker.
- In these cases assessment (an update to *Ask*) with a *Front Door* worker will still occur via outreach if necessary, to meet immediate needs and ensure effective case coordination via the *Front Door*. 

(h) Addressing complaints

Standards

All Housing Connect collaborating service partners will maintain their current quality assured processes for receiving, managing and responding to complaints, incorporating:

- Acknowledgment of a client’s rights and responsibilities in accessing and receiving services,
- A clear and accessible process for clients to follow in making complaints, including:
  - Acknowledgement of the client’s right to a confidential, respectful and timely response,
  - Reference to privacy principles and how the process will ensure this,
  - A process for support with making the complaint if required,
  - A clearly defined response process,
- A well-defined set of service principles or service charter outlining the agency’s commitment to quality service.

These processes, and the reporting and monitoring framework described below, will be aligned with the principles, service charter and standards developed through the National Quality Framework and will comply with all reporting and quality standards set by the Department.
Front Door and support agencies will be required to maintain a complaints register in which all complaints are logged, detailing:

- An outline of the complaint,
- Documentation related to the complaint,
- Time taken to respond,
- Details of agency response.

The complaints register KPIs will include:

- Number of complaints per reporting period,
- Time taken to respond to the initial complaint,
- Time taken to resolve complaint.

KPIs will be reported by subcontracted agencies to their regional lead agency monthly. Leads will report to the Department on a schedule to be negotiated. Content of complaints will be audited quarterly by lead agencies for internal services and through meetings with subcontracting agencies, with a focus on continuous quality improvement and alignment of policies and processes for receiving and responding to complaints with the National Quality Framework.
V Workforce Structure

Overall workforce structure

The overall workforce structure for Housing Connect is provided as Attachment 2.

Each of the two regions (north/north-west and south) will be headed by a Housing Connect Manager who will be the senior contact point for and responsible for all Housing Connect staff.

Summary of staff positions

Front Door: 19.3 positions:

- 11 in south (Colony 47)
- 8.3 in the north (Anglicare)

Support Services: 37.3 positions:

- 3 Salvation Army
- 5 Colony 47
- 11.8 Anglicare
- 15 Centacare
- 2.5 Hobart city Mission

Team leaders/coordinators: 12 positions:

- 2 Colony 47
- 2 Anglicare
- 2 Centacare
- 1 Salvation Army

Senior private rental assistance staff:

- 1 Colony 47
- 1 Anglicare

Managers:

- 1 Colony 47
- 1 Anglicare
- 1 Hobart City Mission
| Staff qualifications, levels and salary | A summary of staff qualifications, levels and salary has been provided as a confidential document. |
VI Performance Measures

Compliance with Quality and Safety Framework and continuous improvement initiatives

*Housing Connect* will comply with the Quality and Safety Framework for Tasmania’s Agency Funded Community Sector 2009-12. *Housing Connect* will also aim to achieve continuous improvement through compliance with Service Specialist Standards where these are available and will participate in the development of refined data collections.

Provision of performance data

It is expected that *Housing Connect* will report on performance output measures as well as attainment of performance targets and outcome-based performance measures.

### Reporting of output measures

<table>
<thead>
<tr>
<th>Output measures</th>
<th>The following output measures will be collected and reported.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information, advice and referral</td>
<td>• Number of client contacts (unique clients)</td>
</tr>
<tr>
<td></td>
<td>• Client contacts (hours)</td>
</tr>
<tr>
<td></td>
<td>• Number of referring agency contacts</td>
</tr>
<tr>
<td>1800 number</td>
<td>• Client contacts (unique clients)</td>
</tr>
<tr>
<td></td>
<td>• Client contacts (hours)</td>
</tr>
<tr>
<td></td>
<td>• Referring agency contacts</td>
</tr>
<tr>
<td></td>
<td>• Referrals made</td>
</tr>
<tr>
<td></td>
<td>• Referrals accepted/declined</td>
</tr>
<tr>
<td>Private Rental access support</td>
<td>• Clients assisted</td>
</tr>
<tr>
<td></td>
<td>• Financial assistance (total)</td>
</tr>
<tr>
<td></td>
<td>• Financial assistance (average per client)</td>
</tr>
<tr>
<td>Early Intervention brokerage</td>
<td>• Clients assisted</td>
</tr>
<tr>
<td></td>
<td>• Financial assistance (total)</td>
</tr>
<tr>
<td></td>
<td>• Financial assistance (average per client)</td>
</tr>
</tbody>
</table>
| Intake, assessment, initial case planning and referral | • Client assessments undertaken (number)  
• Referrals (number) |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination of regional homelessness prevention actions</td>
<td>• Regional Homelessness Prevention Action Plan – reporting will be against actions of this plan according to specified timeframes.</td>
</tr>
</tbody>
</table>
| Level 1 support Services | • Clients assisted (number)  
• Referrals accepted/declined  
• Reasons for declined referrals |
| Level 2 Support Services | • Support periods (number and duration)  
• Referrals accepted/declined  
• Reasons for declined referrals |
| Level 3 Support Services | • Support periods (number and duration)  
• Referrals accepted/declined  
• Reasons for declined referrals |
Reporting of performance targets

<table>
<thead>
<tr>
<th>Performance targets that will be basis for reporting</th>
<th>The following performance targets will form the basis for reporting.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information, advice and referral</td>
<td>• Response to all inquiries within one business day</td>
</tr>
<tr>
<td></td>
<td>• Referrals for all people experiencing primary homelessness on same business day</td>
</tr>
<tr>
<td>1800 number</td>
<td>• Referrals for all people experiencing homelessness within 24 hours of contact</td>
</tr>
<tr>
<td>Intake, assessment, initial case planning and referral</td>
<td>• Number of referrals accepted within agreed timeframe</td>
</tr>
<tr>
<td>Coordination of prevention actions</td>
<td>• Number of actions in Regional Homelessness Prevention Action Plan achieved within specified timeframe</td>
</tr>
<tr>
<td>Level 2 Support Services</td>
<td>• Number of support periods closed within 6 weeks</td>
</tr>
<tr>
<td>Level 3 Support Services</td>
<td>• Number of support periods closed within 52 weeks</td>
</tr>
</tbody>
</table>
### Reporting of performance outcomes against priority areas

<table>
<thead>
<tr>
<th>Outcome targets and reporting for priority areas</th>
<th>The following outcome measures linked to the five priority areas could be collected and reported according to a performance management framework and timeframe negotiated with Government.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>• Improved access to long term housing</strong></td>
<td><strong>• Number of people accessing various housing options including social housing, private rental properties and home ownership</strong></td>
</tr>
<tr>
<td></td>
<td><strong>• Tenancies maintained for specified timeframes</strong></td>
</tr>
<tr>
<td></td>
<td><strong>• Client feedback – satisfaction with housing options</strong></td>
</tr>
<tr>
<td><strong>• Improved prevention and earlier intervention</strong></td>
<td><strong>• Number of clients referred to specified support services</strong></td>
</tr>
<tr>
<td></td>
<td><strong>• Number of clients presenting in a crisis situation as homeless</strong></td>
</tr>
<tr>
<td></td>
<td><strong>• Client feedback on participation in early intervention and prevention activities</strong></td>
</tr>
<tr>
<td></td>
<td><strong>• Referring agency feedback – homeless events avoided</strong></td>
</tr>
<tr>
<td></td>
<td><strong>• Agreed protocols developed with mainstream services</strong></td>
</tr>
<tr>
<td><strong>• Service integration to provide efficiencies and joint case management and monitoring of clients</strong></td>
<td><strong>• Number of clients dropping out of support services</strong></td>
</tr>
<tr>
<td></td>
<td><strong>• Regional Homelessness Action Plan developed – milestones reported according to specified timeframes</strong></td>
</tr>
<tr>
<td><strong>• More targeted support for the duration of needs</strong></td>
<td><strong>• Level 2 and 3 support period durations</strong></td>
</tr>
<tr>
<td></td>
<td><strong>• Level 2 and 3 support periods closed with case management plan in place</strong></td>
</tr>
<tr>
<td></td>
<td><strong>• Client goals achieved (Outcomes Star data)</strong></td>
</tr>
</tbody>
</table>
- Improved exit planning
- Number of clients re-entering *Housing Connect* with unresolved issues
- Number of clients transferred from level 2 to level 3 support services
- Number/percentage of support plans where goals and objectives are achieved

<table>
<thead>
<tr>
<th>Reporting of population measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reporting of broader population measures may be incorporated into an evaluation framework negotiated with Government, depending upon costs and capacity. The <em>Collaborative Partners</em> are mindful of the potentially prohibitive costs of valid and reliable population surveys (as for example in the Tasmanian <em>Kids Come First Project</em>).⁹</td>
</tr>
</tbody>
</table>

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⁹ The *Kids Come First project* is a ‘whole-of-government’ initiative to improve health and wellbeing outcomes for Tasmanian children and young people. The project has developed an outcomes-based framework with a database that allows analysis at a locality/suburb level for children from birth to age 17 for a number of indicators. This includes key indicators of health, wellbeing, safety, development and learning that reflect the influences of child, family, community and service systems.
PART 3: ADDRESSING ASSESSMENT CRITERIA

I Understanding the requirements and context of developing a new model

The Collaborative Partners developed the *Housing Connect* model in the context of recent policy directions for social housing and homelessness services. Reference points included:

- *National Affordable Housing Agreement (NAHA)*;
- *National Partnership Agreement on Homelessness*;
- *Tasmanian Homelessness Implementation Plan*; and
- *Tasmanian Homelessness Charter*.

Clearly the objectives and intended outcomes of these national and state policy documents encompass all social housing and homelessness programs and initiatives, including those that are beyond the scope of *Housing Connect*.

However, the Collaborative Partners believed that the *Housing Connect* model will reflect the policy directions and priorities contained in these documents.
Particular attention was paid to the overall goal of the National Affordable Housing Agreement (NAHA):

‘Australians have access to affordable, safe and sustainable housing that contributes to social and economic participation’

The six agreed outcomes informed the work of the Collaborative Partners:

1. People who are homeless or at risk of homelessness achieve sustainable housing and social inclusion;

2. People are able to rent housing that meets their needs;

3. People can purchase affordable housing;

4. People have access to housing through an efficient and responsive housing market;

5. Indigenous people have the same housing opportunities (in relation to homelessness services, housing rental, housing purchase and access to an efficient and responsive housing market) as other Australians; and

6. Indigenous people have improved housing amenity and reduced overcrowding, particularly in remote areas.

In particular, the Housing Connect model emphasises improved access to long term sustainable housing and social inclusion for people who are homeless.
National Partnership Agreement on Homelessness

The National Partnership Agreement on Homelessness (the NPAH) also included outcomes that focused thinking of the Housing Connect model:

1. Fewer people will become homeless and fewer of these will sleep rough;

2. Fewer people will become homeless more than once;

3. People at risk of or experiencing homelessness will maintain or improve connections with their families and communities, and maintain or improve their education, training or employment participation; and

4. People at risk of or experiencing homelessness will be supported by quality services, with improved access to sustainable housing.

All of these outcomes were considered relevant to the development of the Housing Connect model and closely reflect the priority areas.
In addition, the Collaborative Partners considered the key objectives of the *Tasmanian Homelessness Plan*:

1. Prevention and early intervention;
2. Improved connections with the community, education and employment;
3. Improved access to appropriate housing;
4. Effective service responses; and
5. Continuous improvement and quality

The resulting Homelessness Charter also articulated two key objectives that were incorporated into the Housing Connect model:

- Improve the circumstances of homeless people by raising community awareness and promoting a rights-based approach to homelessness service delivery; and
- Formalise service delivery principles between key organisations for preventing and responding to homelessness.

Not surprisingly, the objectives of the Tasmanian policy documents are closely reflected in the service requirements and priority areas for the development of Housing Connect.

| Housing Connect is based on the national and state policy context | The understandings that the Collaborative Partners have of the requirements and priorities for *Housing Connect* are based on and fully consistent with the overall national and state policy context. |
An articulation of the requirements

Given the policy context and the Request for Proposal specification, Housing Connect is committed to meeting the following requirements:

a. Build on strong partnerships and integration with specialist and mainstream services;
b. Utilise a Lead Agency model;
c. Focus on prevention and early intervention;
d. Streamline access and reduce duplication;
e. Be regionally delivered with locally determined arrangements but with consistency between regions; and
f. Make maximum use of the potential of available technologies.

Articulation of the five priority areas

In addition, the priorities of the new service system that will be incorporated are:

- Improved access to long term housing;
- Improved prevention and earlier intervention;
- Service integration to provide efficiencies and joint case management and monitoring of clients;
- More targeted support for the duration of need; and
- Improved exit planning.

This section covers understanding and achievement of requirements

This section of the Response will demonstrate an understanding of the requirements and describe how they will be achieved.
### (a) Understanding of the nature of partnerships and integration

#### Definition of Integrated Services

Integrated services are “characterised by a unified management system, pooled funds, common governance, whole systems approach to training, information and finance, single assessment and shared targets. Partners have a shared responsibility for achieving the service goals through joint commissioning, shared prioritisation, service planning and auditing. Joint commissioning can be one of the major levers for integration, service change and improving the delivery of …services”

#### Integration and collaboration are not ends in themselves

Despite the emphasis on integration in recent social policy, it is apparent that the intended outcomes of service integration vary widely and are often vague, confusing and lacking in clarity. While it is frequently assumed that integration and collaboration will achieve goals that cannot be achieved by participants acting autonomously and separately, the outcomes of collaboration and integrative approaches are not well documented and the challenges of integration are complex and multifaceted. What is clear from the research is that integration is not a positive end in itself unless it achieves improved outcomes for the clients for whom the services are designed.

#### Steps to service integration

Similarly, integration can also have multiple stages. Research literature usually indicates several stages of integration from ‘cooperation’, through ‘coordination’ to ‘collaboration’. Cooperation, coordination and collaboration are therefore located at different points on a continuum of integrative mechanisms, depending on the level of intensity of the linkages and the degree of formality or informality that governs the integration activities/relationships.

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10 Horworth, J & Morrison, T 2007
11 Phillips & Jones 2010
12 AHURI 2009, 1
13 Keast & Mandell 2011
<table>
<thead>
<tr>
<th>Not for profit organisations have historically been involved in a high level of competition</th>
<th>While many not for profit community organisations share common goals around fulfilling social need and combating disadvantage, they often find it difficult to cooperate in pursuit of these goals. Instead the sector exhibits a high degree of competition, particularly around funding. Many believe that competitive tendering has undermined the cohesion of the sector and fostered a climate of competition where each organisation works for itself rather than collaboration and support for community initiatives and activities.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requirements for collaboration are not always recognised</td>
<td>In addition, Government does not always sufficiently recognise the diversity in the sector and simply assumes that all not for profit organisations are able to work together, despite fundamental differences in missions, structures and processes.</td>
</tr>
<tr>
<td>The challenge of Integration is not unique to Australia or Tasmania</td>
<td>The challenge of human service integration is not unique to Australia\textsuperscript{14} The ‘Holy Grail’ of service integration is a central issue in many complex human service systems\textsuperscript{15}. However, in Australia the form and content of service integration is often shaped by the nature of relationships between the Commonwealth, state and community organisations and (increasingly) the private sector in human services delivery\textsuperscript{16}. The mechanisms of the Supported Accommodation and Assistance Program (SAAP) and more recently via the National Affordable Housing Agreement (NAHA) are recent examples.</td>
</tr>
</tbody>
</table>

\textsuperscript{14} Jones, Phillips & Milligan 2007  
\textsuperscript{15} Phillips, Jones & Head 2010  
\textsuperscript{16} Jones, Phillips & Milligan 2007
Development of integrative approaches is central to recent human services policy

The development of collaborative approaches and integration between organisations has become a central policy direction in delivery of many human services including social housing. Across the range of human services numerous integration initiatives have been developed and more are planned. Within the social housing and homeless services sector, virtually all states and territories have incorporated elements of integration and collaboration into their policy development. Many of these initiatives are well known to members of the Collaborative Group.

Factors that are shaping the need for increased integration of social housing and homelessness initiatives

The research literature identifies several factors that have shaped the integration of social housing and homelessness services in Australia including:

- The increasing diversification of social housing and the growing interest in policy and service delivery integration;

- The gradual expansion of the size and role of the community housing sector in social housing, and the changing nature of this sector, including ‘affordable’ housing providers;

- A heightened concern with links between social housing and other human services, including homelessness services, due to the increased targeting of services; and

- An increasing focus on the relationship between social housing, other housing assistance measures and affordable housing, due to the unmet demand for services.

At the local level, Tasmania has developed and implemented the groundbreaking *Gateways and Family Support Service* model of integrated services within the disability and child and family services sector. Similarly, Tasmanian Child and Family Centres have been developed as a whole of Government initiative to improve the integration of services to young children and their families. These projects have served to illustrate many of the advantages of such an approach and also identified some of the elements that are necessary to sustaining integration.

The collaborative group was very conscious of the need to draw on lessons learned from the Gateways model and was able to benefit from the involvement of *Hobart City Mission* in the Gateway’s process.

*Housing Connect* can benefit from the experience of developing *Gateways* including the maturing of the relationship between sector organisations. Some of the elements from the midterm review of Gateways\(^\text{18}\) and Family Support Services that *Housing Connect* will attempt to incorporate into its model are:

- Creating more opportunities for consistent feedback to referrers;
- Clear processes for addressing partner governance and performance issues;
- Ensuring clear and concise information about information sharing intent and service expectations;
- Strengthening practice development and practice guidelines across the sector;
- Clear reporting and monitoring processes; and
- Best practice from weekly allocation meetings that can be incorporated into *Housing Connect Regional Management Meetings*.

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\(^{18}\) [Gateway and Family Support Services Midterm Review, Disability and Community Services](#)
Collaboration and integration are not easily achieved and there are costs and trade-offs

What is equally clear from our Tasmanian experience is that successful collaboration and integration between both government and non-government organisations requires intensive work over a long period of time. Collaboration and integration of services is not easy and requires a ‘leap of faith’ as well as goodwill and significant costs and trade-offs. Additionally, this is being expected in a climate of fiscal restraint and increased demand for services and accountability.

Collaborative group was mindful of lessons to be drawn from the research

The Collaborative Group was also guided by lessons to be drawn from the research\textsuperscript{19} and has attempted to integrate this evidence into the structure of Housing Connect:

- Integration is most likely to be successful when the objectives being pursued are clearly expressed and understood, and where time has been taken to persuade all social housing providers involved in the integration process of the value of the integration initiative. Integration is not an end in itself and will involve significant effort, costs and trade-offs with social housing providers.

- Effective integration often requires the allocation of financial resources, the provision of sufficient time for implementation, and the development of expertise in collaborative and partnership processes and arrangements with social housing providers.

- Integration should be viewed as involving both formal structures and agreements and informal relationships and networks with providers of Better Housing Futures. Strategies that combine the formal and informal are

\textsuperscript{19} Phillips & Jones 2010
more likely to succeed with social housing providers, such as Memorandums of Understanding and regular network meetings.

- Integration faces barriers arising from programmatic, organisational and sectoral ‘silos’. Strong countervailing forces or incentives are required to break down these obstacles to integration with social housing providers.

- Careful choice of broad integration strategy is important. Integration can be based on the exercise of authority, the development of perceived common interests and shared goals amongst participants, or a combination of both of these. Choice within this repertoire of strategies will be deliberate and reflect the specific context and goals of Housing Connect.

- Integration involving different social housing organisations, sectors and programs often encounters cultural barriers. It is important to acknowledge and address these barriers.

- Broad frameworks for integration at the policy level must pay attention to the factors facilitating and impeding integration at the front-line or service delivery level.

- Leadership will play an important role in effective integration, and integration initiatives will address the leadership issue at all levels of implementation.

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| The objectives of collaboration and service integration | With this understanding of integration and collaborative services, members of the Collaborative Group were mindful of the need to be clear about what they were trying to achieve in developing and implementing the Housing Connect Collaborative Framework. |

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The benefits of working collaboratively and in a more integrated manner may be summarised as follows:

- Improved client outcomes;
- Enhanced client access;
- Greater equity and consistency;
- Increased efficiency; and
- Enhanced accountability and control.

This summary of intended outcomes formed the major yardstick that the collaborative group used to develop the Housing Connect model.

Every effort has been made to incorporate a deep understanding of integration into this proposal. Following discussion of the research evidence concerning integration, every effort has been made by the Collaborative Partners to incorporate lessons learned into the Housing Connect model and build on the successful models.

(b) Understanding the Lead Agency model

The particular model of collaboration and integration specified in the current proposal is a Lead Agency model. This model has been the subject of considerable debate and discussion amongst the Collaborative Group.

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20 Taken from Enhancing the Effectiveness of Australian Social Housing Integration Initiatives, AHURI 2009.
The research literature indicates that the response to Lead Agency models across Australia has been mixed.21

Non-government organisations identify several benefits such as:

- Pooling administrative and reporting arrangements;
- Sharing support services;
- Reducing time and costs associated with funding applications;
- Enhancing program planning;
- Addressing staff retention by allowing longer contracts;
- Joint staff training and professional development; and
- Encouraging innovation and transfer of ideas and knowledge.

Evidence presented by the Productivity Commission also suggests that a Lead Agency model can have negative consequences such as:

- Duplication of the regulatory and accountability infrastructure that already exists in government;
- Less transparent and less effective monitoring, regulation and contractual arrangements;
- Loss of diversity when the Lead Agency takes over services provided by small organisations;
- Poor consulting and collaborative arrangements between Lead Agencies and partner organisations;
- Lack of transparency in decision making; and
- Poor money management.

21 Not For Profit Sector Feedback: Government Funded Services, Productivity Commission Report, Appendix J, 15
However, evidence suggested in the Productivity Commission Report also suggests that successful Lead Agencies:

- Drive day-to-day program management;
- Provide clarity around roles, responsibilities and risk management;
- Have a degree of flexibility and adaptability to local conditions;
- Build capacity within the community overall and enable services to develop a local identity; and
- Have reporting lines and structures that do not cut across the governance arrangements of member organisations.

The Lead Agency model developed in the current proposal has adopted these requirements as far as possible.
### Understanding the evidence behind the priorities of the new system

<table>
<thead>
<tr>
<th>The priorities of the new service system</th>
<th>The evidence-based research to support each of these priority areas was evaluated by the Collaborative Group and the model developed in this proposal informed by this evidence.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Improved access to long term housing;</td>
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<td>• Improved prevention and earlier intervention;</td>
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<td>• Service integration to provide efficiencies and joint case management and monitoring of clients;</td>
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<td>• More targeted support, for the duration of need; and</td>
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<tr>
<td>• Improved exit planning.</td>
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#### Priority area 1: Improved access to long term housing

A strong objective of Housing Connect is that:

*The person’s cycle of homelessness is broken and they are accommodated with support from other identified government and non-government services to sustain their tenancy long-term, reach their potential and contribute to the community.*

The evidence based research suggests that that improving access to long term housing depends on:

- A focus on prevention and early intervention so that tenancies are maintained in the long term;
- Consolidation and integration of support services so that clients are in the best position to access the services they need over the long term;
- Coordinated access to an increasingly complex, diverse and limited social housing sector by ‘one stop’ shops that reduce duplication and improve efficiency;
- Strong connections between specialist homelessness and mainstream services, recognising that many of the services required by clients to maintain long term
housing options are generic (such as education, health and employment services); and

- Enhanced pathways for homeless people to secure housing.

**Priority area 2: Improved prevention and earlier intervention**

The terms ‘early intervention’ and ‘prevention’ imply that we can identify people who are at risk of becoming homeless and intervene effectively. However, there is a lack of clarity surrounding the terms ‘early intervention’ and ‘prevention’.22

The relationship between prevention and early intervention can best be summarised as:

- Prevention relates to *causal factors* because of its focus on structural factors and risk levels.
- Early intervention relates to *process* because of its focus on the homeless ‘career’ and its concern with ‘temporality’.

**Prevention**

The evidence based research suggests that successful prevention strategies include:

- Providing services aimed at targeted social groups of people more at risk of becoming homeless;
- Making sure services are accessible to different social groups in familiar environments;
- Outreach work in neighbourhoods and localities where more people are at risk of homelessness;
- Community education initiatives that target real estate agencies, property managers and financial advisors;
- Developing packages of information for all service clients; and
- Providing services that facilitate protective factors and build resilience such as education, employment

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22 Chamberlain & McKenzie 2003, p. 20
• Early intervention

The evidence-based research suggests that successful early intervention activities include:

• Preventing ‘at risk’ households from losing their current rental accommodation that often leads to a spiral of new social and financial problems;

• Prevention through interventions such as diversion and discharge planning in the justice, corrective services, health and child protection systems;

• Working closely with ‘first to know’ agencies so that an alert is received when a household is at risk of homelessness; and

• Providing services as soon as possible once a person is homeless so that a ‘homelessness career’ does not develop and become part of the self-identity.

Priority area 3: Service integration to improve efficiencies and joint case management and monitoring of clients

The potential benefits and required characteristics of an integrated approach have already been discussed above.

Evidence suggests that improved efficiencies through integration are most likely to be achieved when:

• There is a strong mandate and support from Government for agencies to work together;

• Additional funding is provided jointly to the organisations to achieve program goals;

• Policy and procedural documents strengthen and clarify the approach;

• Joint planning is undertaken that involves all service providers and involves commitment to outcomes;

• There are unified approaches to planning, monitoring and data collection;

• Specific ‘packages’ of support are developed to suit targeted populations of at risk clients such as those with mental health issues or those exiting the prison system;

• A common understanding is developed between policy
makers and service providers;

- Respectful relationships and communication is facilitated between service providers; and
- Formal change management strategies are employed to change systems in the long term.

### Priority area 4: More targeted support for the duration of need

The evidence based research suggests that approaches to social housing and homelessness are more likely to be successful if they are appropriately targeted at specific populations known to be at risk and when they are provided for the duration of need rather than being linked to particular housing options.23

Evidence further suggests that support and brokerage funding should be flexible enough to provide practical assistance that may be required to help maintain tenancies. Such things as assistance with forms, transport to appointments and helping tenants establish themselves in new accommodation may all be required.24

Continuing to provide follow up and monitor tenancies for varying periods of time is particularly important for clients with more complex needs.

### Improve exist planning

In terms of exit planning, evidence based research25 suggests that discharge of a client from a housing or homelessness service should be dependent on individual client needs and service planning. This is a core requirement of Housing Connect.

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23 Bauldersone & Button 2011, *Mapping and Reviewing Homelessness Programs*
II Addressing the system priorities (not specifically addressed in priority areas)

The Housing Connect model aims to address all requirements and priority areas. The Housing Connect model has been developed in order to comprehensively address the requirements and priority areas discussed above.

Facilitating the benefits of an integrated approach

In addition to the efficiency benefits of an integrated approach for case management and monitoring of clients (detailed below as one of the priority areas), a robust model of integration will be achieved by:

- The Partnership Agreement that outlines the agreed framework for operation and the agreed aims and objectives of integration;
- The State-wide Collaborative Steering Committee that provides an appropriate forum for ongoing collaboration and integration and resolution of differences;
- Regional Reference Groups that will provide the opportunity for all stakeholders to have input into policy and planning and to monitor progress of Housing Connect;
- Training and professional development for all staff to build shared understandings and collegiality;
- Shared ‘practice consultant’ positions in each region to provided specialised information and support to all staff working with particular client groups such as Youth and clients escaping domestic and family violence;
- Formal and informal collaboration between state-wide managers of housing services and chief executive officers to provide leadership and ongoing support to the model;
- Consistency in policies, processes and protocols facilitated by regional reference groups and the State wide Steering Group;
- Processes to facilitate access to specialist and mainstream services and build connections with these services; and
The use of shared language and terminology through *Regional Reference Groups* and the role of the *Local Area Coordinator*.

In addition, the *Collaborative Partners* are exploring opportunities for providing further benefits to their organisations through the structures and management processes for *Housing Connect*.

While staff will continue to be employed by their current employer organisations, a number of joint initiatives of the *Collaborative Partners* are planned. These include:

- Shared human resource processes such as recruitment and appointment of staff for support services and possibility of secondments across the organisations;
- Capacity for sharing peer supervision responsibilities;
- Sharing of best practice and processes between agencies that were previously kept confidential;
- Increased opportunity for each organisation to specialise or target services to avoid duplication within the total service system;
- Utilising the ‘purchasing power’ of a larger integrated partnership in purchase of resources, especially using combined brokerage funds to purchase goods and services; and
- Potential for joint partnerships with specialist staff such as psychologists and medical practitioners.

The requirements for a successful Lead Agency model will be addressed by:

- An explicit, formal partnership agreement that outlines the parameters for the relationship between the Lead Agency and other services;
- The *Collaborative Steering Group* that will provide the forum for transparent and collaborative governance;
• *Regional Management Groups* that will meet regularly and provide a forum for communication and resolving day to day management issues;
• Clearly understood reporting and monitoring processes and contractual arrangements; and
• Opportunities for the Lead Agencies to provide benefits to other agencies in relation to staff training, development of policies and planning.

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### Regional delivery but state-wide consistency

Consistency across the two regions will be achieved by:

• The governance structure including the regional management groups and reference groups feeding into a united *State-wide Collaborative Steering Committee*;
• Use of consistent policies and processes;
• Use of a centralised data base and technology;
• Shared assessment and case planning tools; and
• Formal and informal networking between management staff.

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### Maximum use of technologies

*Housing Connect* will benefit from the utilisation of powerful new technology and software including:

• *Ask*, which will provide the main platform for streamlining service provision;
• A *Common Assessment Framework*;
• A centralised telephone response refined through a contact centre; and
• Use of portable IT hardware to ensure that staff in outreach situations can perform all functions.
### III Addressing the five priority areas

<table>
<thead>
<tr>
<th>The priorities for the new service system</th>
<th>The required client outcomes that are priorities for the new service system are:</th>
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<tbody>
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<td></td>
<td>• Improved access to long term housing;</td>
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<td>• Service integration to provide efficiencies and joint case management and monitoring of clients;</td>
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<td>• More targeted support; and</td>
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<td>• Improved exit planning</td>
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#### Improved access to long term housing

Improved access to long term housing will be facilitated by:

- Ensuring that identification of appropriate housing needs is undertaken from the time of initial assessment;
- Providing a more targeted approach so that clients can access services when they need them, without waiting;
- Combining assessment for social housing with other *Front Door* services so that all options are considered together;
- Increasing capacity for support services to link clients to an appropriate housing response;
- Reducing duplication for housing application processes and making sure that all possible housing options are considered for each client;
- A single data base and referral process within the *Ask* system to streamline offers of housing;
- Support for clients through all tenancy application processes; and
- Reduced need for documentation for clients to apply for housing.
# Improved prevention and earlier intervention

Improved prevention and earlier intervention within the social housing and homelessness system will be provided by:

- Capacity to make an immediate response to a client’s needs at the level required;
- Comprehensive progressive assessment to identify needs as soon as possible;
- Streamlined liaison and collaboration between homelessness services and mainstream services so that clients who are at risk of homelessness are able to be referred as early as possible;
- Streamlined follow up of clients who utilise the 1800 number after hours to ensure their other needs are being attended to;
-Clearer delineation of function between services to reduce time consuming ‘crisis responses’ and allow more time for follow up and support of clients;
- ‘Big picture’ planning, monitoring and identification of service gaps so that services can be better focused on prevention and early intervention activities through *Regional Homelessness Action plans*; and
- Close liaison and networking between *Housing Connect* and *Gateway* and *Family Support Services* to ensure families and children are linked into the services they need.

## Service integration to provide efficiencies and joint management and monitoring of clients

Service integration to provide efficiencies and joint management and monitoring of clients will be facilitated by:

- Streamlined screening and progressive assessment (utilising *Ask*) building on information ascertained at various points in the client’s interaction with services in the same database and avoiding duplicated assessment and client files;
- Clear delineation of roles to avoid duplication and confusion of function;
• Avoiding undertaking unnecessary assessment by support services where a brief support or provision of information is all that is required by providing this service at the Front Door;

• Streamlining private rental support services at the Front Door to avoid duplication of services by several agencies involved with the same clients;

• Tracking clients by the Front Door to reduce the possibility of clients being overlooked or falling out of the system;

• Avoiding duplication of case management at different levels and by different services by having a clearly identified case management responsibility vested in one identified support service. (The potential for ‘scattered’ or multiple interpretations of client needs will be reduced);

• Processes for discussion, management and coordination of the service support response to clients through regional management committees;

• Designated specialist support for particular client groups that require a sensitive and targeted response; and

• Centralisation of all funding support (including private rental and brokerage funds) at the Lead Agency level which will ensure greater consistency and equity in funding decisions and allocation of support services.

More targeted support for the duration of need will be provided by:

• Clear delineation of roles and responsibilities of services at each level and matching these services to client’s assessed needs;

• Support services being matched more exactly to the assessed duration of needs of clients and clearly differentiated;
- Brokerage funding and private rental assistance funding will be more clearly targeted to those most in need by being managed and coordinated by the two Lead Agencies; and
- Targeted *Front Door* and Support Service responses for designated groups of clients including clients escaping domestic and family violence, youth clients, children and Aboriginal clients.

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<tr>
<th>Improved exit planning</th>
<th>Improved exit planning will be provided by:</th>
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<td>• Assessing all client needs from the first point of contact so that all needs can be efficiently addressed;</td>
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<td>• Addressing exit planning from the very first contact with the client and continuing to emphasise long term goals;</td>
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<td>• Avoiding over servicing by providing only the level and duration of support that a client requires according to clear, assessed parameters;</td>
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<td>• Immediate referral to Type 2 Services if needed regardless of the client’s current accommodation;</td>
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<td>• Discussion and monitoring of the duration of support provided to clients to ensure that clients do not ‘drift’ into longer support timeframes because of poor management or lack of action by support staff; and</td>
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<td>• Reducing the risk of competing exit options provided by different organisations by discussion at Regional Management Groups.</td>
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IV Transition Plan

The Collaborative Partners acknowledge the necessity for good transition planning and have workshopped elements that will be required. These include the need to:

- Communicate the roles and responsibilities of all staff accompanied by supporting documentation such as position descriptions;

- Undertake a thorough induction with all staff, clearly outlining the services goals, values and outcomes;

- Communicate clearly with all relevant stakeholders, including any changes to existing models of services;

- Understand, develop and communicate clear strategies and responses to address any concerns raised by clients, staff and key stakeholders;

- Liaise with relevant union bodies as early as possible and provide information in relation to recruitment of new staff;

- Move through any recruitment processes in a timely and orderly manner; and

- Ensure there is well-developed risk analysis plan with supporting contingency management plans.
The Collaborative Partners have evidenced ability to manage the change management challenges of the current project. The Collaborative Partners have a combined wealth of knowledge in managing a range of different change management processes. A sample of this experience is listed below:

- Experience in redesigning services to meet new service models as per state and national directions, for example:
  - Anglicare managed the redesign of the PASS program (placement & support service for adolescents), which was re-funded as TYS (targeted youth support);
  - Hobart City Mission has assisted in developing and providing Gateway services;
  - Centacare managed the transfer of funding and service delivery of Annie Kenney incorporating property management into their organisation (KEYS);
  - Colony 47 established and incorporated the KEYS property management program into its existing suite of property management service, collaborating with the STAY and REO programs for the provision of support; and
  - The Salvation Army redeveloped two pilot programs intended for ex-offenders into new programs.

- Experience in transitioning staff to new Awards or Industrial Agreements, for example:
  - Anglicare and Colony 47 are currently negotiating new Collective Agreements with staff;
  - Centacare has negotiated an Enterprise Bargaining Agreement with their staff; and
  - Hobart City Mission has transitioned employees’ CSA to a new salary award.

- Experience in developing new services such as Supported Accommodation Facilities and Common Ground, Moving On Program, and Small Steps.

- Experience in incorporating new models of practice into existing services, for example Anglicare, Centacare & Colony 47 are currently integrating the Outcomes Star model into some services.

- Absorbing significant growth into existing services, for example Centacare’s Housing Association, Anglicare’s Mental Health Services and Hobart City Mission’s Disability Services.
A preliminary Transition Plan has been developed, pending approval of the final *Housing Connect* Model. This plan provides an overview of:

- Communication with staff and stakeholders;
- Tasks related to governance;
- A human resource transition strategy;
- A training plan; and
- Change management strategies.

It is acknowledged that more detailed work will be required on transition planning in the first six months of 2013, following awarding of the contract. It is anticipated that more detailed joint transition planning with DHHS will be undertaken in the early part of 2013.

The Transition plan provides detail of how activities will occur and indicates indicative dates for their completion. All tasks also have an assigned responsibility.

Ask will provide essential data collection, communication structures and referral information necessary for performance monitoring and reporting, referral tracking and case management for the *Housing Connect* system and broader service network. Given that Ask's critical functionality is integral to service system's design, a process for centralised oversight, systems management, quality improvement, training and other critical communication points between DHHS and *Housing Connect* services is essential.

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26 This plan is provided as Attachment 3.
Lead Agency

managers will be
the main contact
point for liaison
on Ask

Lead Agency *Housing Connect* managers will be the primary contact points for the liaison with the department. Information from services will be fed up to the two *Housing Connect* managers either directly via interagency contact with service coordinators and senior workers as needed, or through the regional management meetings where regional operational issues are discussed. These managers will be responsible for:

- Consulting with *Housing Connect* services regarding *Ask* implementation, service needs and system improvements;
- Receiving and passing on feedback from Local Area Coordinators regarding *Ask* functionality issues identified by the broader service network;
- Feeding information back to the Department regarding system enhancement and future requirements;
- Providing information to *Housing Connect* services on behalf of the Department regarding system implementation, upgrades, training and data collection;
- Analysing data trends and identifying anomalies in data entry between services to ensure consistent data collection;
- Receiving direct interagency contact regarding system issues and referring these issues to the Department; and
- Ensuring reporting requirements are met.
Ongoing meetings at regional or state level can be accommodated

Conversely, *Housing Connect* managers will be available to receive information individually from the Department’s *Ask* contact at the regional level to discuss local issues relating to the rollout of *Ask* and resolution of service specific issues. They will also be available to meet collectively to discuss broader systems level changes, enhancements, quality assurance, and system access issues.

During implementation it is recommended that collective meetings are held monthly, with ongoing communication occurring as necessary.
## V Financial Information

<table>
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<tr>
<th>Forecasted financial statements for each financial year over a three year period</th>
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<td>A set of forecasted financial statements for each financial year over a three-year term has been provided as a confidential document. These statements identify how funds will be allocated including:</td>
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<th>Expected adjustments to expenditure over time to achieve target outcomes</th>
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<td><em>Housing Connect</em> Collaborative Partners are committed to the new service model and have specifically detailed how the new model will address the priority areas.</td>
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<td>Whilst the Collaborating partners have agreed on a financial allocation as provided this will not impede flexibility by the partners in responding to changes in priorities. If necessary adjustments will be made to meet client need.</td>
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<td>A more robust data collection (through <em>Ask</em>) will allow adjustments to the financial projections to be made over time.</td>
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<tr>
<td>It is unrealistic to provide expenditure over time specifically linked against the achievement of target outcomes until data collection is undertaken.</td>
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</table>
Particular mention needs to be made of the present allocation for private rental assistance that attracted criticism in the pre-lodgement presentation.

Approximately 40% of the overall *Housing Connect* budget is allocated to private rental assistance (PRA) helping thousands of low income Tasmanian’s to establish or maintain private rental accommodation.

In implementing the new *Housing Connect* system, there will be improved opportunities to support people renting in the private market in other ways. The *Ask* will provide comparable data across the state for a range of programs that will better inform how services are provided and changes will be made once data is available to support new directions.

However, it will be noted that private rental assistance is currently an essential service in the prevention of homelessness in Tasmania. The approximate 4,000 approved applications for this assistance in the past financial year equates to well over 10,000 people. In the 2011-12 financial year, 62% of northern and north-western clients assisted through PRA were homeless or at risk of homelessness. It would be reasonable to assume this figure provides an approximate percentage for Tasmania.

Of applicants who received financial assistance, only 24% were on the Public Housing waiting list, yet all would be eligible for public housing. Many of the people using this service simply cannot afford the substantial initial outlay to get into private rental, or they experience a short financial crisis and have no savings to fall back on.

In the absence of Private Rental Assistance potentially thousands of people could be added to the public housing waiting list.

It can therefore be argued that the preventative aspects of the program are huge. In addition, the eased pressure on the public housing waiting list and unknown but potentially large savings on homelessness and associated services make it a very valuable and cost effective program.
PART 4: CONCLUSION

Significant progress has been made and issues responded to

This Response to the Request for Collaborative Proposal shows that the collaborative partners have made significant progress towards developing the new system that addresses the Department’s specifications.

The proposal has been developed within required timeframes despite delays in receiving information and documentation from the Department. The Collaborative Partners have worked cooperatively with Departmental staff and shown willingness to communicate in an open and transparent way.

In addition, this Response has attempted to incorporate additional clarification and information in relation to issues raised in the Pre-lodgement Presentation.

The Collaborative Partners look forward to continuing to work with Departmental staff to deliver Housing Connect by July 2013 and are confident that they can achieve this timeline.
PART 5: REFERENCES


Keast, R. Waterhouse, J. Brown, K. & Murphy, G. (2008), Closing Gaps and Opening Doors: The function of an integrated homelessness service system. Place-Based Network Analysis


Victoria Department of Human Services, (2004). Industry Occupational Health and Safety Interim Standards for Preventing and Managing Occupational Violence in Victoria’s Mental Health Services,

World Health Organization, (2002).Framework Guidelines for addressing Workplace Violence in the Health Sector, International Labour Office,

Attachment 1 (a): Anticipated pathway for generic client
Attachment 1 (b): Anticipated pathway for client escaping domestic and family violence
Attachment 1 (c):
Anticipated pathway for youth clients
Attachment 2: Workforce structure
<table>
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<th></th>
<th>How</th>
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<th>Responsibility</th>
<th>Monitoring/Review</th>
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<td>Communication:</td>
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<td></td>
<td>Finalise communication strategy</td>
<td>In consultation with DHHS,</td>
<td>December 2012 &amp; review ongoing</td>
<td>HC CEOs Operations Managers (OMs) in conjunction with DHHS</td>
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<td>sector and Housing Connect</td>
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<td>State-wide Collaborative Steering Committee (SCSC)</td>
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<td>(HC) group</td>
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<td>Develop Communication Policy</td>
<td>December 2012 &amp; review ongoing</td>
<td>HC CEOs Operations Managers (OMs) in conjunction with DHHS</td>
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<td>Keep staff informed of impending changes</td>
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<td>SCSC in conjunction with Regional Management Groups (RMG)</td>
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<td>HC organisations will</td>
<td>Ongoing</td>
<td>HC CEOs &amp; OMs</td>
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<td>communicate regularly with</td>
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<td>Liaise with/seek feedback from SHS &amp; other key stakeholders</td>
<td>Via emails, regional forums,</td>
<td>Ongoing</td>
<td>HC OMs</td>
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<td>phone calls, individual</td>
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<td>meetings</td>
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<td>Clearly communicate new system with sector, mainstream services &amp;</td>
<td>Forums, meetings emails and</td>
<td>May-June 2013</td>
<td>HC OMs &amp; Senior Staff</td>
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<td>clients</td>
<td>newly developed literature</td>
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<td>Governance:</td>
<td>End November 2012 &amp; review ongoing</td>
<td>HC CEOs</td>
<td>SCSC</td>
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<td>Ensure there are robust structures &amp; processes in place</td>
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<td><em>Seek legal advice, develop collaborative governance structures</em></td>
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<td>Identify Governance Policy and Procedure linkages across working towards best practice organisations</td>
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<td>HC CEOs &amp; OMs</td>
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<td>Staffing:</td>
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<td>Industrial negotiations with existing staff</td>
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<td>SCSC</td>
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<td><em>Transitioning staff to new roles or negotiating redundancies (liaise with Unions as appropriate)</em></td>
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<td>Employ new staff</td>
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<td>HC OMs</td>
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<td><em>Develop recruitment protocols across all organisations</em></td>
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<td><em>Joint recruitment strategy e.g. advertising, interviews, induction</em></td>
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<td>HC OMs &amp; HR Departments</td>
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<td>HC OMs</td>
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<td>HC OMs</td>
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<tr>
<td>Training:</td>
<td>Arranged joint training for all relevant staff (including child safe, fire, OH&amp;S etc.)</td>
<td>May-June 2013</td>
<td>HC OMs &amp; DHHS</td>
<td>Lead Agency OMs</td>
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<td></td>
<td>Trainers identified (jointly) with current specialist services e.g. youth and women’s services</td>
<td>Early January 2013</td>
<td>HC OMs &amp; Senior Staff</td>
<td>OMs</td>
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<tr>
<td></td>
<td>Delivery of specialist training including outcomes star, DV, Youth and Aboriginal</td>
<td>May-June 2013</td>
<td>Specialist providers</td>
<td>OMs</td>
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<tr>
<td></td>
<td>Conduct skills audit across all organisations to develop training plan including in house training opportunities.</td>
<td>March-April 2013</td>
<td>HC OMs &amp; Senior Staff</td>
<td>OMs</td>
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<td></td>
<td>Negotiate shared training budget</td>
<td>March-April 2013</td>
<td>HC OMs &amp; Senior Staff</td>
<td>SCSC</td>
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</table>
### Operational:

<table>
<thead>
<tr>
<th>Task</th>
<th>Description</th>
<th>Timeframe</th>
<th>Responsible Parties</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Implement operational guidelines</td>
<td>Adapt current policies, procedures &amp; forms and develop new ones as required</td>
<td>January-May 2013 &amp; review ongoing</td>
<td>HC OMs, Senior Staff &amp; Program Staff</td>
<td>OMs &amp; RMG</td>
</tr>
<tr>
<td>Quality assurance standards</td>
<td>Review and streamline processes to ensure continual quality improvement mechanisms are in place including internal audit schedule</td>
<td>May-June 2013 &amp; ongoing</td>
<td>HC OMs, Senior Staff &amp; Program Staff</td>
<td>OMs &amp; RMG</td>
</tr>
<tr>
<td></td>
<td>Develop shared policy and procedures across all organisations identifying ‘best practice’ methods</td>
<td>May-June 2013 &amp; ongoing</td>
<td>HC OMs, Senior Staff &amp; Program Staff</td>
<td>OMs &amp; RMG</td>
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### Site Specific:

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<thead>
<tr>
<th>Task</th>
<th>Description</th>
<th>Timeframe</th>
<th>Responsible Parties</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Finalise ‘Front Door’ site locations</td>
<td>In consultation with DHHS</td>
<td>Late December 2012 - January 2013</td>
<td>HC CEOs &amp; DHHS</td>
<td>SCSC</td>
</tr>
<tr>
<td>Ensure (any new) sites meet service requirements including refitting, signage etc.</td>
<td>Evaluate against site specifications; liaise with DHHS &amp; agents of new sites (if applicable)</td>
<td>Late January-early February 2013</td>
<td>HC CEOs, OMs &amp; DHHS</td>
<td>SCSC in consultation with OMs</td>
</tr>
<tr>
<td>Ready site for occupation</td>
<td>Arrange move, set up ICT infrastructure, site branding, purchase new furniture etc.</td>
<td>February-March 2013</td>
<td>HC OMS &amp; relevant organisational staff</td>
<td>SCSC in consultation with OMs</td>
</tr>
<tr>
<td><strong>Project plan:</strong></td>
<td>Develop strategic plan &amp; operational framework to project plan</td>
<td>January-February 2013 &amp; ongoing</td>
<td>HC CEO’s, OMs and DHHS</td>
<td>SCSC in conjunction with OMs</td>
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<tr>
<td>Articulate purpose, objectives &amp; goals. Identify and prioritise key tasks and critical milestones</td>
<td>Further develop integrated risk framework across all organisations and areas of business (including risk register)</td>
<td>January 2013 &amp; ongoing</td>
<td>HC CEO’s, OMs and DHHS</td>
<td>SCSC in conjunction with OMs</td>
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<td>Risk Management</td>
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<thead>
<tr>
<th><strong>Change management:</strong></th>
<th>Individual organisational plan submitted detailing change management plan from ICOS to HC model</th>
<th>January 2013</th>
<th>OMs</th>
<th>SCSC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liaise with Housing Tasmania about communication plan for stakeholders and clients re transition from ICOS to HC</td>
<td>Dec 2012 – Feb 2013</td>
<td>HC CEO’s, OMs and DHHS</td>
<td>SCC</td>
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